

Dear visitor

In accordance with the LGBl. Nr. 35/2020 for Vienna as amended on 29.05.2020, we document your contact data so that we can contact you in the event of a COVID-19 infection.

First name:	
Surname:	
Address:	
Telephone number:	
Email:	
Name of the patient visited:	
Ward:	
Date of visit:	
Date and time of the negative PCR test to be presented.	



Visits are only allowed if you have **not had any signs of infection** in the last 14 days  
(e.g. fever, dry cough, shortness of breath, diarrhoea)



Please wear a **FFP2 mask** throughout the hospital and please keep at least **two metre distance** from other people.