



PRE-EVENT MEDICAL SCREENING

The intent of this checklist is to review with each youth and adult participant their current health status, both before departure and upon arrival at the event. Anyone entering camp or event, should be screened using this checklist

- YES NO Have you been in contact with anyone who has Covid-19 or is otherwise sick?
- YES NO Have you or anyone you have been in close contact with traveled on a cruise ship, internationally, or to an area with a know communicable disease outbreak in the last 14 days?

IF THE ANSWER IS “YES” TO EITHER OF THESE QUESTIONS, THE PARTICIPANT MUST STAY HOME

- YES NO Are you in a higher-risk category as defined by the CDC guidelines?

If the answer is “yes” to this question, we recommend that you stay home. Should you choose to participate, you must have approval from your healthcare provider and then proceed to the following questions.

Do you have any of the following symptoms?

- Shortness of breath
- New or worsening dry cough
- Fever of 100.4 or greater
- Flu-like symptoms
- Vomiting
- Diarrhea

IF YOU ANSWER “YES” TO ANY ONE OF THESE SYMPTOMS, YOU MUST STAY HOME UNTIL MEDICALLY CLEARED BY THEIR HEALTH CARE PROVIDER. IF YOU ANSWER “NO” TO ALL THESE SYMPTOMS, CONTINUE TO THE NEXT QUESTION

Do you have any of the following symptoms?

- Cough
- Unexplained extreme fatigue or muscle aches
- Rash
- Sore throat
- Open Sore

IF YOU ANSWER “YES” TO ANY OF TWO OF THESE SYMPTOMS, YOU MUST STAY HOME UNTIL MEDICALLY CLEARED BY THEIR HEALTH CARE PROVIDER.

PARTICIPANT NAME (please print) _____ UNIT _____

SIGNATURE (FOR YOUTH, GUADRIAN’S SIGNATURE) _____