Pre-Event Medical Screening Checklist

Use this checklist to assist in identifying potentially communicable diseases before event participation.

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 a camp or event — including visitors, vendors, etc. — should be screened using this checklist.

_Councils should customize with input from their council health supervisor and local health department._

- **Q Yes**  **Q No**  Have you been in contact with anyone who has COVID-19 or is otherwise sick in the last 14 days?
- **☐ Yes ☐ No**  Have you been in contact with anyone suspected of having COVID-19 or is being tested for COVID-19.

_If the answer is “yes” to either of these questions, the participant must stay home._

- **Q Yes**  **Q 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 symptom decision tree below.

_If the above answers are “no,” proceed to this symptom decision tree._

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

**NONE**

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

**YES to any TWO or more symptoms**

**THE PARTICIPANT MUST STAY HOME**

These symptoms are associated with communicable diseases and the participant MUST stay home until medically cleared by their health care provider.