

Pre-Event Medical Screening Checklist

This is a tool to assist leaders in identifying potentially communicable diseases in advance of event participation. The intent of this checklist is to review with each participant their current health status both before departure and upon arrival at the event.

Has the participant had any of the following symptoms in the last 24 hours?

- Fever (100.4 or greater)
- Shortness of breath
- Vomiting
- Diarrhea ("Have you had persistent diarrhea lasting more than a few days or in the last few days?")
- Flu like Symptoms

If the participant has fever, vomiting, diarrhea or flu like symptoms – **he or she should STAY HOME.**

Has the participant had any of the following symptoms in the last 24 hours?

- Unexplained extreme fatigue or muscle aches
- Rash (past 72 hours, do you have any sores or wounds with rash?)
- Cough (persistent or dry cough)
- Smell / Taste (any change in ability to smell or taste)
- Sore Throat
- Open Sore

If the participant has any two (or more) of these symptoms – **he or she should STAY HOME.** If the participant has one of these symptoms, discuss any limitations and consider having him or her stay home.

Participants who become ill should not return to the activity until they are cleared by a health-care provider.

NAME: _____

Unit # _____

Date: _____