

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 F or greater)
- ☐ Vomiting
- ☐ Diarrhea

If the participant has fever, vomiting, OR diarrhea—**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
- ☐ Cough
- ☐ 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 restrictions 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.

Participant Name:

Date:

Parent/Guardian
Phone:

Parent/Guardian
Signature:

