COVID-19 INFORMATION

APPENDIX C: SCREENING CHECKLIST

Event Name: SASC Points Event #			
Name:			
Date:			

If an individual answer yes to any of the questions, they must not be allowed to participate in the sport. Children and youth will need a parent to assist them to complete this screening tool.

1.	Does the person attending the activity, have any of the below symptoms:	YES	NO
	Fever		
	Cough		
	Shortness of Breath / Difficulty Breathing		
	Sore throat		
	Chills		
	Painful swallowing		
	Runny Nose / Nasal Congestion		
	Feeling unwell / Fatigued		
	Nausea / Vomiting / Diarrhea		
	Unexplained loss of appetite		
	Loss of sense of taste or smell		
	Muscle/ Joint aches		
	Headache		
	Conjunctivitis		
2.	Have you, or anyone in your household, travelled outside of Canada in the last 14 days?		
3.	Have you or your children attending the program had close unprotected* contact (face-to-face contact within 2 metres/6 feet) with someone who is ill with cough and/or fever?		
4.	Have you or anyone in your household been in close unprotected contact in the last 14 days with someone who is being investigated or confirmed to be a case of COVID-19?		

If you have answered "yes" to any of the above questions do not participate. Go home and use the AHS Online Assessment Tool to determine if testing is recommended