

Black Hills Gold Swimming Athlete Symptom Screening Checklist

Parents must complete a daily symptom screening check by answering these questions before sending their child to swim practice.

Has your child had close contact (within 6 feet for at least 15 minutes) with a confirmed case of Covid-19?	_____ YES	_____ NO
Does your child have new or worsening shortness of breath?	_____ YES	_____ NO
Does your child have a new or worsening cough?	_____ YES	_____ NO
Does your child have a fever of 100.4 or greater?	_____ YES	_____ NO
Does your child have chills?	_____ YES	_____ NO
Does your child have diarrhea?	_____ YES	_____ NO
Does your child have unexplained muscle pain?	_____ YES	_____ NO
Does your child have a headache (not related to a known health condition i.e. migraines)?	_____ YES	_____ NO
Does your child have a sore throat?	_____ YES	_____ NO
Does your child have a new loss of taste or smell?	_____ YES	_____ NO
Has your child been vomiting or is experiencing nausea?	_____ YES	_____ NO
STOP	If yes to ANY of the questions, DO NOT SEND YOUR CHILD TO SWIM PRACTICE. Please seek guidance from your medical provider. If your child is diagnosed with any communicable disease, please notify a coach or board member immediately so we may take necessary precautions to protect our other athletes.	
GO	If no to <u>ALL</u> questions, come to swim practice.	