



The following checklist **must** be completed by each athlete before **every in-person training opportunity and/or event**. If a participant answers ‘yes’ to any of the questions, kindly remind them to stay home and focus on their health. There are **two** separate checklists: one for children under 18 (and high school students over 18), and one for adults over 18. Please ensure you fill out the proper health screening form.

Screening Questions for Under 18

Name: _____ . Date: _____

1. Has the Child

(Choose any/all possible exposures)

Traveled outside Canada in the last 14 days? When entering or returning to Alberta from outside Canada, individuals are legally required to quarantine for 14 days unless enrolled in the Alberta COVID-19 International Border Pilot Project	YES	NO
Had close contact with a case of COVID-19 in the last 14 days? Face-to-face contact within 2 metres for 15 minutes or longer, or direct physical contact such as hugging. A case may either be lab-confirmed or a probable case outlined in the Alberta COVID-19 Notifiable Disease Guideline .	YES	NO
If the child answered “YES” to any of the above: <ul style="list-style-type: none"> • The child is required to quarantine for 14 days from the last day of exposure. <ul style="list-style-type: none"> ◦ If the child is participating in the Alberta COVID-19 International Border Pilot Project, they must comply with the program restrictions at all times. • If the child develops any symptoms, use the AHS Online Assessment Tool or call Health Link 811 to determine if testing is recommended. If the child answered “NO” to both of the above: <ul style="list-style-type: none"> • Proceed to question 2. 		

2. Does the child have any new onset (or worsening) of the following core symptoms:

Fever Temperature of 38 degrees Celsius or higher	YES	NO
Cough Continuous, more than usual, not related to other known causes or conditions such as asthma	YES	NO
Shortness of breath Continuous, out of breath, unable to breathe deeply, not related to other known causes or conditions such as asthma	YES	NO
Loss of sense of smell or taste	YES	NO



Not related to other known causes or conditions like allergies or neurological disorder		
<p>If the child answered “YES” to any symptom in question 2:</p> <ul style="list-style-type: none"> The child is to isolate for 10 days from the onset of symptoms. Use the AHS Online Assessment Tool or call Health Link 811 to arrange for testing and to receive additional information on isolation. <p>If the child answered “NO” to all of the symptoms in question 2:</p> <ul style="list-style-type: none"> Proceed to question 3. 		

3. Does the child have any new onset (or worsening) of the following symptoms:

	YES	NO
<p>Chills Without fever, not related to being outside in cold weather</p>		
<p>Sore throat/painful swallowing Not related to other known causes/conditions, such as seasonal allergies or reflux</p>		
<p>Runny nose/congestion Not related to other known causes/conditions, such as seasonal allergies or being outside in cold weather</p>		
<p>Feeling unwell/fatigued Lack of energy, poor feeding in infants, not related to other known causes or conditions, such as depression, insomnia, thyroid dysfunction or sudden injury</p>		
<p>Nausea, vomiting and/or diarrhea Not related to other known causes or conditions, such as anxiety, medication or irritable bowel syndrome</p>		
<p>Unexplained loss of appetite Not related to other known causes or conditions, such as anxiety or medication</p>		
<p>Muscle/joint aches Not related to other causes or conditions, such as arthritis or injury</p>		
<p>Headache Not related to other known causes or conditions, such as tension-type headaches or chronic migraines</p>		
<p>Conjunctivitis (commonly known as pink eye)</p>		
<p>If the child has answered “YES” to ONE symptom in question 3:</p> <ul style="list-style-type: none"> Keep your child home and monitor for 24 hours If their symptom is improving after 24 hours, they can return to school and activities when they feel well enough to go. Testing is not necessary. 		



- If the symptom **does not improve or worsens** after 24 hours (or additional symptoms emerge), use the [AHS Online Assessment Tool](#) or call Health Link 811 to check if testing is recommended.

If the child answered “YES” to TWO OR MORE symptoms in question 3:

- Keep your child home.
- Use the [AHS Online Assessment Tool](#) or call Health Link 811 to check if testing is recommended.
- Your child can return to school and activities once their symptoms go away as long as it has been at least 24 hours since their symptoms started.

If the child answered “NO” to all questions:

- Your child may attend school, child care and/or other activities.

Please note: If your child is experiencing any symptoms from the lists above, do not bring them to visit a continuing care or acute care facility for 10 days from when symptoms started/until symptoms resolve (whichever is longer), unless they receive a negative COVID-19 test result and feel better.



Checklist for adults 18 years and older

If an individual answers **YES** to any of the questions, they **must not** be allowed to attend or participate in the activity or program. *Individuals with fever, cough, shortness of breath, runny nose, or sore throat, are required to isolate for 10 days per [CMOH Order 05-2020](#) **OR** receive a negative COVID-19 test and feel better before returning to activities.

Use the [AHS Online Assessment Tool](#) to determine if testing is recommended and follow information on [isolation requirements](#).

Participant name: _____

Date: _____

1.	Does the person attending the activity have any of the following symptoms:	Circle One	
	• Fever	YES	NO
	• Cough – new or changed	YES	NO
	• Shortness of Breath/ Difficulty Breathing – new or changed	YES	NO
	• Runny Nose	YES	NO
	• Sore Throat	YES	NO
	• Chills	YES	NO
	• Painful swallowing	YES	NO
	• Nasal congestion – new or changed	YES	NO
	• Feeling unwell/ Fatigued	YES	NO
	• Nausea/ Vomiting/ Diarrhea	YES	NO
	• Unexplained loss of appetite	YES	NO
	• Loss of sense of taste or smell	YES	NO
	• Muscle/ Joint aches – unexplained and unrelated to physical activity	YES	NO
	• Headache	YES	NO
	• Conjunctivitis	YES	NO
2.	Has the attendee travelled outside of Canada in the last 14 days? (Individuals are legally required to quarantine for 14 days when entering or returning to Alberta from outside Canada unless exempted by the Alberta COVID-19 Border Testing Pilot Program)	YES	NO
3.	Has the attendee had close contact ¹ with a case ² of COVID-19 in the last 14 days?	YES	NO



¹ Face-to-face contact within 2 metres. A health care worker in an occupational setting wearing recommended personal protective equipment is not considered to be a close contact.

² A lab-confirmed case OR a probable case as defined in the [Alberta COVID-19 Notifiable Disease Guideline](#).

Again, if you answer yes to any of the above, please stay home and use the [AHS Online Assessment Tool](#) to determine if testing is recommended.

Activity organizers: Please keep documentation of completed forms for a minimum of two weeks in a secure location for contact tracing purposes.