

Sea Base COVID-19 Pre-Event Medical Screening Checklist

Vaccination: The Center for Disease Control (CDC) and Boy Scouts of America (BSA) **STRONGLY RECOMMENDS** that all participants fully vaccinate against COVID-19 prior to travel and onsite arrival.

Fully vaccinated means a person has received their primary series of COVID-19 vaccines.

Testing: Sea Base **REQUIRES** that all participants test for COVID-19 24 hours prior to traveling OR provide a physicians note stating that they are recently recovered from COVID-19 (within the last 90 days) and are no longer contagious. Proof of testing or physicians note will be required at check-in. Anyone arriving without proof of testing or physicians note will be denied entry. (Bahamas & USVI participants are subject to government and territory requirements).

Review with each youth and adult participant their current health status, both before departure and upon arrival at Sea Base. **Anyone visiting Sea Base - including participants, visitors, etc. - must be screened.**

- Yes No Have you or has anyone in your household been in [close contact](#)* in the past 14 days with anyone known or suspected to have COVID-19 or is otherwise sick?
- Yes No Have you or has anyone in your household been in [close contact](#)* with anyone who has been tested for COVID-19 and is waiting for results?
- Yes No Have you or has anyone in your household been sick in the past 14 days, or have you or they been tested for any illness and are waiting for results?
- Yes No Has anyone in your household been exposed to an individual known or suspected to have COVID-19 in the past 14 days?
- Yes No Have you or has anyone you have been in [close contact](#)* with traveled on a cruise ship or internationally or to an area with a known communicable disease outbreak in the past 14 days?

***According to the Centers for Disease Control and Prevention (CDC), "close contact" means:**

- You were within 6 feet of someone who has COVID-19 for a cumulative total of 15 minutes or more over a 24-hour period
- You had direct physical contact with an infected person (hugged or kissed them)
- You shared eating or drinking utensils
- An infected person sneezed, coughed, or otherwise got respiratory droplets on you

Unvaccinated: *If the answer is YES to any one of the five questions above the participant must stay home unless they have completed the CDC recommended quarantine for exposure or self-isolation for a positive test AND have been non-symptomatic for a minimum of 24 hours AND have tested negative for COVID-19 five days after the date of last exposure or positive test OR have a physicians note on letterhead stating that they have recovered and are no longer contagious.*

Fully Vaccinated: *If the answer is YES to any one of the five questions above the participant must stay home unless they have received a booster AND they are non-symptomatic OR their date of last exposure was longer than 5 days ago AND they have been asymptomatic for a minimum of 24 hours AND have tested negative for COVID-19 five days after last date of exposure or positive test OR have a physicians note on letterhead stating that they have recovered and are no longer contagious.*

Symptoms of COVID-19

If anyone in your household has any one of the following new or worsening signs or symptoms of possible COVID-19, the entire household must stay home unless they meet the criteria in the box above.

- Shortness of breath
- Cough
- Fever of 100.4° or greater
- Flu-like symptoms
- Repeated shaking with chills
- Fatigue
- Muscle or body aches
- Headache
- Sore throat
- Loss of taste or smell
- Diarrhea
- Nausea or vomiting

Potential Higher-Risk Individuals

Yes No Are you in a higher-risk category as defined by the [CDC guidelines](#), including older adults, people with medical conditions, and those with other individual circumstances?

**If the answer is “yes,” we strongly recommend that you stay home.
Should you choose to participate, you must have approval from your health care provider.**

Unit Leader Signature

Date

Sea Base Crew Number: _____ Unit Type & Number: _____

This checklist has been reviewed by the following list of participants:

First:	Last:	Middle:
Vaccinated (Circle One)	Yes	No
Boosted (Circle One)	Yes	No
Pre-Event Testing (Circle One)	Yes	No
Physicians Letter (Circle One)	Yes	No

First:	Last:	Middle:
Vaccinated (Circle One)	Yes	No
Boosted (Circle One)	Yes	No
Pre-Event Testing (Circle One)	Yes	No
Physicians Letter (Circle One)	Yes	No

First:	Last:	Middle:
Vaccinated (Circle One)	Yes	No
Boosted (Circle One)	Yes	No
Pre-Event Testing (Circle One)	Yes	No
Physicians Letter (Circle One)	Yes	No

First:	Last:	Middle:
Vaccinated (Circle One)	Yes	No
Boosted (Circle One)	Yes	No
Pre-Event Testing (Circle One)	Yes	No

Physicians Letter (Circle One)	Yes	No
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Vaccinated (Circle One)	Yes	No
Boosted (Circle One)	Yes	No
Pre-Event Testing (Circle One)	Yes	No
Physicians Letter (Circle One)	Yes	No

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Boosted (Circle One)	Yes	No
Pre-Event Testing (Circle One)	Yes	No
Physicians Letter (Circle One)	Yes	No

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Pre-Event Testing (Circle One)	Yes	No
Physicians Letter (Circle One)	Yes	No

First:	Last:	Middle:
Vaccinated (Circle One)	Yes	No
Boosted (Circle One)	Yes	No
Pre-Event Testing (Circle One)	Yes	No
Physicians Letter (Circle One)	Yes	No

Important Advisory

All participants and parents of participants are advised that Sea Base **DOES NOT** have onsite facilities for treatment, quarantine, or isolation. Due to lack of onsite for quarantine or isolation, Sea Base **STRONGLY RECOMMENDS** that all participants, regardless of vaccination status, test for COVID-19 24 hours prior to traveling to Sea Base.

All **Bahamas Sea Base** participants and parents of participants are advised that they must meet all current [United States](#) and [Bahamas Government](#) travel, quarantine, and isolation requirements and are further advised that these requirements are subject to change and that Sea Base has no authority over travel requirements.

For Office Use Only:

Reviewed by Sea Base Staff Name of Staff Member: _____

Sea Base Staff Member Signature

Date