

GSGLA Self-Screening Checklist

Complete the self-screening checklist prior to attending an in-person activity or meeting. You are not required to submit this document, only to conduct the self-assessment in advance of an in-person meeting or group activity planned for that day. Prior to leaving home, please review the questions below. If the answer to any of these questions is **YES**, please stay home and contact your meeting or group activity coordinator to cancel your in-person attendance. Plan to attend virtually if that option is available.

Screening Questions

1. Do you have a fever or above-normal temperature? (fever is greater than 100.4 degrees Fahrenheit)	YES	NO
2. Have you had a fever in the past 48 hours (>100.4 degrees Fahrenheit)?	YES	NO
3. Are you experiencing shortness of breath or having trouble breathing?	YES	NO
4. Do you have a dry cough?	YES	NO
5. Do you have a runny nose?	YES	NO
6. Do you have a sore throat?	YES	NO
7. Have you recently lost or had a reduction in your sense of smell or taste?	YES	NO
8. Do you have any other flu-like symptoms, such as gastrointestinal upset, diarrhea, vomiting, headache, muscle pain or fatigue?	YES	NO
9. Do you have chills or repeated shaking with chills?	YES	NO
10. Do any members of your household have a fever or any of the symptoms described above?	YES	NO
11. Have you or any member of your household been told to quarantine/isolate by a healthcare provider or the CA Health Dept or another governmental agency?	YES	NO
12. Have you been tested for COVID-19 and received a positive result? Prior to attending an in-person meeting/event, a second test result must be negative.	YES	NO
12. If you have been tested for COVID-19 and are awaiting the test results, have you had any of the symptoms described above in the past 10 days?	YES	NO
13. In the last 10 days, have you been in contact with someone who has tested positive or who has been diagnosed as having COVID-19?	YES	NO
14. In the last 10 days, have you traveled to any foreign country?*	YES	NO
If YES, where?		
15. In the last 10 days, have you traveled out of state?*	YES	NO
If YES, where?		

If any of these answers are YES, contact your troop leader or the event coordinator to cancel your in-person attendance and plan to attend virtually if that option is available. *If “yes” on #14 or #15, please check latest travel guidance to see if travel to a specific area guides you to refrain from participation in in-person activities.