**Wrestlers and/or their parents must complete this self-screening form daily before coming to practice or before reporting to any competitions.**

1. **Do you or your child have new or worsening onset of any of the following symptoms?**  Fever (greater than 100.4º), sore throat, new uncontrolled cough, that causes difficulty breathing (for wrestlers with chronic allergic/ asthmatic cough, a change in their cough from baseline); diarrhea, vomiting or abdominal pain; and new onset of severe headache, especially with a fever. Other symptoms listed by the CDC include chills, fatigue/muscle or body ache, new loss of taste or smell, and congestion or runny nose.

YES \_\_\_ NO \_\_\_

*You cannot come to practice and are required to stay home for at least 24 hours since your last fever (without taking medication to reduce fever) AND have improvement in other symptoms (cough, shortness of breath) AND at least ten days have passed since symptoms first appeared. Wrestlers/parents may be permitted to return sooner if they present a written clearance to return to work from their treating physician.*

1. **Within the past two weeks, have you had prolonged (15+ minutes) AND close contact (fewer than 6 feet) with someone who has tested positive for COVID-19 and is still under a required isolation by the Pasco County Department of Health?**

YES \_\_\_ NO \_\_\_

*Contact coach for further guidance prior to arriving to practice. If you are currently living with someone who has tested positive for COVID-19, you cannot come to practice. Per guidelines you should be quarantine as advised as by the Pasco County Department of Health. Regardless of a negative COVID-19 test result, wrestlers in this category must remain in quarantine for the full 14-day period required by the Department of Health.*

1. **Have you recently tested positive for COVID-19?**

YES \_\_\_ NO \_\_\_

*You cannot come to practice or compete at any wrestling events. You are required to stay home for at least 24 hours since your last fever (without taking medication to reduce fever) AND have improvement in other symptoms (cough, shortness of breath) AND at least ten days have passed since symptoms first appeared.* If you answer yes to any of these questions, you need to remain at home and cannot come to practice. You can access the CDC coronavirus self-checker at: <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/testing.html>

*Please note that Executive order 20-139 encourages* ***senior citizens*** *and anyone with a* ***significant underlying medical condition*** *(moderate to severe asthma, serious heart conditions, immunocompromised status, cancer, diabetes, severe obesity, renal failure and liver disease) to take measures to limit their exposure to COVID-19.*