

APPENDIX A
Daily Wellness
Check-List

- **If you have answered yes to any of the questions asked during the wellness check you will not be allowed to enter the facility at this time.**
- During your drop off you and your athlete will be asked if you completed the wellness check before arriving to the gym.
- **DAILY CHECKLIST FOR ALL ATHLETES AND ANYONE IN ATHLETE'S HOUSEHOLD:**
- 911 Emergency Symptoms – please call 911 or go immediately to the hospital !
 - Severe difficulty breathing (struggling for each breath, can only speak in single words) !
 - Severe chest pain (constant tightness or crushing sensation) ! Feeling confused or unsure of where you are !
 - Losing consciousness
- **KEEP HOME/SEND HOME SYMPTOMS:**
 - ☐ Fever (feeling hot to the touch, a temperature of 37.8 degrees Celsius or higher)
 - ☐ Chills
 - ☐ Cough that's new or worsening (continuous, more than usual)
 - ☐ Barking cough, making a whistling noise when breathing (croup)
 - ☐ Shortness of breath (out of breath, unable to breathe deeply)
 - ☐ Sore throat " Difficulty swallowing
 - ☐ Runny nose (not related to seasonal allergies or other known causes or conditions)
 - ☐ Stuffy or congested nose (not related to seasonal allergies or other known causes or conditions)
 - ☐ Lost sense of taste or smell
 - ☐ Pink eye (conjunctivitis)
 - ☐ Headache
 - ☐ Digestive issues (nausea/vomiting, diarrhea, stomach pain)
 - ☐ Muscle aches
 - ☐ Extreme tiredness that is unusual (fatigue, lack of energy)
 - ☐ Falling down often, weak