

Pre-training Covid-19 health screen

The primary purpose of this screen is to help you consider the risks involved in returning to training. The club will require a completed copy of it before you swim.

Question	Yes / No	More information
<p>Have you had confirmed Covid-19 infection or any symptoms (listed below) in keeping with Covid-19 in the last five months?</p> <ul style="list-style-type: none"> • Fever • New, persistent, dry cough • Shortness of breath • Loss of taste or smell • Diarrhoea or vomiting • Muscle aches not related to sport/training 	Yes / No	<p>If 'Yes', please provide details:</p> <p>Once you are 7 days post recovery and have no symptoms, a gradual return to exercise is permissible. However, if you have persistent symptoms, including breathlessness on exertion, then you should consult your doctor. A handout with more detailed guidance is available if wanted – just ask.</p>
<p>Have you had a known exposure to anyone with confirmed or suspected Covid-19 in the last two weeks? (e.g. close contact, household member)</p>	Yes / No	<p>If 'Yes', please provide details:</p> <p>Not allowed to train until 14 days after the exposure.</p>

<p>Do you have any underlying medical conditions? (Examples: chronic respiratory conditions including asthma; chronic heart, kidney, liver or neurological conditions; diabetes mellitus; a spleen or immune system condition; currently taking medicines that affect your immune system such as steroid tablets)</p>	<p>Yes / No</p>	<p>If 'Yes', please provide details:</p>	<p>If you have an underlying medical condition that makes you more susceptible to poor outcomes with COVID-19 (including age >65) then you should consider the increased risk and may want to discuss matters with your doctor.</p>
<p>Do you live with or will you knowingly come into close contact with someone who is currently 'shielding' or otherwise medically vulnerable if you return to the training environment?</p>	<p>Yes / No</p>	<p>If 'Yes', please provide details:</p>	<p>This is an individual call; you should discuss it with the person at risk who should consult their doctor if they are unsure. You should be aware that returning to training might expose you, and therefore them, to coronavirus</p>
<p>Do you fully understand the information presented in the Covid-19 Return To Training briefing and accept the risks associated with returning to the training environment in relation to the Covid-19 pandemic?</p>	<p>Yes / No</p>	<p>If no, please ask!</p>	

Able to train: Yes | No

Sought Medical advice: Yes | No

Medical advice received: Yes | No

Either attach a copy of the medical advice, or give a brief summary here. There is no need to disclose private medical details.

Signed:		Date:	
If under 18, a parent's signature is required:		Date:	
Signed by Covid-19 Officer:		Date:	