

REPORTABLE CONDITIONS

DATE: _____

NAME OF CAMP: _____

LOCATION: _____

WINTER ADDRESS: _____

- RESIDENT YOUTH TRAVEL AND TRIP DAY CAMP

The camp operator shall report directly to the Maine Center for Disease Control and Prevention within 72 hours any of the following reportable conditions:

Please check type of reportable/notifiable incident.

- 1. Injuries causing unconsciousness.
- 2. Injuries causing fracture of bone.
- 3. Injuries necessitating hospitalization, for 12 hours or more.
- 4. Injuries requiring suturing or head, neck, spinal cord injuries or injuries of equivalent severity; and an Explanation of how the injury occurred.
- 5. Carnivorous animal bite wounds.
- 6. (Food poisoning) Epidemic illnesses involving 3 or more persons including suspect food infection, or food intoxication.
- 7. Any illness causing muscle paralysis or weakness, unconsciousness, loss of hearing.
- 8. Any illness or injury resulting in the death or near death of any camper, employee or visitor to the camp.
- 9. The camp operator shall report to the Maine CDC any "Notifiable Conditions" listed in Rules for Control of Notifiable Conditions, 10-144 C.M.R. Ch 258 in the timeframe specified in the Notifiable Conditions list found in Appendix B of the Youth Camp Rules.

Did this reportable incident occur while involved in trip camping?

- Yes No If so, location:

Person(s) injured/illness(s) please check:

- Male Female Staff

SIGNATURE OF DIRECTOR OR PERSON IN CHARGE: _____

BRIEFLY DESCRIBE THE CONDITIONS UNDER WHICH THE INCIDENT OCCURRED: _____

SEND TO: Lisa Brown, Program Director
 Health Inspection Program
 286 Water Street, Key Bank Plaza 3rd Floor
 11 State House Station
 Augusta, Maine 04333-0011