Department of Health and Human Services
Maine Center for Disease Control and Prevention
286 Water Street
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Augusta, Maine 04333-0011
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REPORTABLE CONDITIONS

The camp operator shall report directly to the Maine Center for Disease Control and Prevention within 72 hours any of the following reportable conditions listed below. **Only camper and staff incidents or injuries that occurred during camp operating season need to be reported.**

DATE : _____ DATE OF INCIDENT:_____TIME:_____

NAME OF CAMP: _____

LOCATION: _____

WINTER ADDRESS: _____

◯ RESIDENT YOUTH ◯ TRAVEL AND TRIP ◯ DAY CAMP

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 2 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.

Did this reportable incident occur while involved in trip camping?

◯ Yes ◯ No If so, location: _____

Person(s) injured/ill please check all that apply:

☐ Male ☐ Female ☐ Staff ☐ Camper

Briefly describe the conditions under which the incident occurred. **Reminder, please do not include personally protected information, as this is a HIPPA violation. Examples of personally protected information: name, date of birth, social security # or any other identifying information.**

This report is being submitted by the camp director: _____
Print Name

Email to: rebecca.walsh@maine.gov
or Fax to: Becky Walsh, 207-287-3165