



Frequently Asked Questions Concerning the Annual Health and Medical Record

Q. The Annual Health and Medical Record just went into effect January 1, 2010. Why are there changes being made already?

A. This is a living record. Based on input from individual Scouters, local councils, health and safety and risk management committees, high-adventure bases, medical experts, and changes in health care, requirements updates must occur. The plan is to continually assess the record and update it annually as needed in order to protect the health and well-being of all participants.

Q. Can I use last year's Annual Health and Medical Record with a physical conducted in August 2010 for summer camp in June 2011?

A. Yes. 2011 will be a transition year. An Annual Health and Medical Record that contains a valid physical exam can be used to meet your council's resident camp standards in 2010. Please note that last year's record does not meet the requirements for the high-adventure bases, so you will need to execute the current version for your 2011 trek, if applicable. It is suggested that those individuals who do not have a physical exam requirement transition now to the updated format.

Q. Can I use the Annual Health and Medical Record for participation at the high-adventure bases?

A. Yes. There is only one health record for the BSA. However, it is imperative that you read Part D if you are attending one of our high-adventure bases. YOU are responsible to Be Prepared for your high-adventure trek and understand and follow all high-adventure base rules, procedures, and guidelines.

Q. Where can I find the Annual Health and Medical Record?

A. It is posted in a [downloadable PDF format](#) on Scouting Safely on Scouting.org.

Q. Can I keep a record of my Annual Health and Medical Record somewhere at my council's office or online?

A. Districts and councils are discouraged from keeping any medical records, whether digital or paper, unless required by local or state ordinances. However, the electronic version of the Annual Health and Medical Record is intended to be filled out and saved by individual Scouts and Scouters. The electronic Annual Health and Medical Record should not be transmitted via e-mail or stored by units, districts, or councils. Units are encouraged to keep paper copies of their participants' Annual Health and Medical Records in a confidential medical file for quick access in an emergency and to be prepared for all adventures.

Q. The old Class 1, 2, and 3 forms were based on age. What about the Annual Health and Medical Record?

A. There is no longer a difference in the exam interval (if required) based on age. The Annual Health and Medical Record is for everyone young or old.

Q. There are four parts to the Annual Health and Medical Record, which part do I need to fill out?

A. All participants should fill out Parts A and B for any event. This would include parents and siblings for events like a day or family camp. Part C (the physical examination) should be completed if you are participating in an event that exceeds 72 consecutive hours, such as high adventure bases (Philmont, Northern Tier, and Florida Sea Base), jamborees, summer camps, and Wood Badge training courses. Part C also is required for participation in a resident camp setting or when the nature of the activity is strenuous and demanding such as service projects and work weekends. It is important to note that the height-to-weight limits must be strictly adhered to when the event will take the unit more than 30 minutes away from an emergency vehicle-accessible roadway, or when the program requires it, such as backpacking trips, high-adventure activities, and conservation projects in remote areas. Please note that individual units, districts, or councils may have policies in place to exceed this standard based on their unique risks.

Q. How often will I need to renew/update my Annual Health and Medical Record?

A. The record will need to be updated at least annually, just as many schools or sporting leagues require an annual update. Many health changes can happen throughout a year, including changes in disease processes, medication, address, and insurance.

Q. What is meant by "Annual" and "valid for 12 calendar months"?

A. If you complete your record on March 9, 2010, it will be valid through March 31, 2011, but you must complete a new Annual Health and Medical Record by April 1, 2011. Please note that the next National Scout Jamboree in 2013 will have a specific window when the record must be submitted.

Q. What does it mean by "ADULTS AUTHORIZED TO TAKE YOUTH TO AND FROM EVENTS"?

A. For the majority of our participants, the parents or legal guardians will release and retrieve a youth at the start and end of a Scouting event. This information would be anticipated to change by adding to the parents or legal guardian someone who you authorize to pick up your child early from an event or if you are engaging someone to transport them to and from the Scouting program. It is not a list of specific drivers for a tour. Those are listed on the unit or contingent tour plan, not on an individual's Annual Health and Medical Record.

Parents and legal guardians are encouraged to review this information on a regular basis with Scout leaders to make sure they understand any out-of-the-ordinary requests or unusual circumstances such as who should not pick up a youth.

Q. I have several children in the program and a health care plan that does not provide inexpensive co-pays for physicals. What can be done to divert the increased cost of participation?

A. Many units, districts, and councils offer physical exams. Facilitating such an event could be a positive experience, as well as help reduce costs to individuals and families. County or state health clinics may offer physicals at a very low price in order to assist children maintain a healthy life and diagnose diseases early before they are serious.

Q. I heard a physical for an adult can be very expensive. Is that true?

A. As participants age, physicians (MDs, DOs), NPs, and PAs may require extra testing in order to approve and/or clear their participation in events. Participants who are on medications should be checked annually. Some insurance policies may completely pay for annual physicals as part of a wellness benefit. If in doubt you should verify with your carrier or employer.

Q. Do I really need to explain everything about myself or my child, such as learning disabilities or depression? I don't want myself or my child to be treated differently.

A. As hard as it may be to share these aspects about yourself or your child, this information is needed to structure safe activities and is imperative when giving emergency care. Please be thorough and honest. Our experience also indicates that a Scouting activity is not the place to experiment with or stop medications, especially those that address these issues. Scout leaders are encouraged to be discreet and maintain all medical information in confidence.

Q. Why do I need to put my child's or my own social security number on the record?

A. It is your choice as to whether you fill in this number; however, in many states, medical care cannot be rendered without it.

Q. What does "grade completed" mean?

A. If your son has completed the 6th grade and is currently enrolled in 7th grade, you would enter 6th grade here. You may always update your information more frequently than annually.

Q. What if I don't want to have my child immunized for tetanus or other immunizations due to philosophical, political or religious beliefs, do I have to sign a release?

A. Yes, the recommendations of the immunization task force were accepted by the Health and Safety Support Committee in October 2008 and are listed on Scouting.org under Scouting Safely. If you choose not have your child immunized, the [release form](#) can also be found there. Declining or inadequate immunizations will require verification by a certified and licensed physician (MD, DO), NPs, or PAs that a communicable disease is not present. Inadequately immunized participants will be identified so that they can be located in case of a necessity for isolation or quarantine as per local public health official directives.

[Immunizations](#) protect not only your child but other children as well.

Q. Can I decline medical treatment?

A. Yes, but a [release](#) must be signed. The release can be found under Scouting Safely on Scouting.org. This practice is highly discouraged because this choice can put the entire unit at risk, both mentally and physically. Declining medical treatment will require verification by a certified and licensed physician (MD or DO), NP, or PA that a communicable disease is not present.

Q. Can I use another medical exam, such as a school sports exam, and attach it to the Annual Health and Medical Record?

A. No. In an effort to maintain standards of preparedness and fitness for participation, and to make sure that the medical professional conducting the examination knows the various outdoor adventures that can occur in Scouting, the BSA requires completion of Part C. Part C also includes the height/weight chart for high adventure situations where emergency medical care is not readily available. If you do your part to help (by completing as much of the form as possible), your medical provider likely won't mind completing both.

Q. Why is there a talent release on the Annual Health and Medical Record? It doesn't really have anything to do with health.

A. In response to requests from several councils, to meet state requirements and eliminate paperwork, we have included the talent release, as well as those authorized to take and pick up youth, as part of the Annual Health and Medical Record. As this is an annual record, councils may establish additional requirements for specific events that will exceed the release language.

Q. Our camp is at least 30 minutes from the local hospital by ambulance or EMS. Does this mean that we automatically have to meet the height/weight requirements for all activities at the camp?

A. While response time for basic or advanced life support should be a consideration for a camp's emergency action plan, it is not the record's intent. If your travels by foot, bicycle, horseback, afloat, or whatever the mode of transportation take you more than 30 minutes off of an accessible roadway where in an emergency vehicle can reach you, you will be required to meet the height/weight requirements to make sure that a rescue can be made safely.

Q. When does the height/weight chart apply? We have differing opinions in our unit/district.

A. The height/weight chart will apply in the following known adventure activities:

When your travels take you more than 30 minutes off of an accessible roadway, fire lane, camp road, etc., where you float, walk, hike, bike, or otherwise go into the backcountry. Depending on the terrain and local conditions, this might be a few hundred yards or a few miles into the backcountry. Most BSA high-adventure camps that include a backcountry component (ask them about their

requirements before you go). Philmont Scout Ranch has this standard in place as an example.

When your lodge, unit, district, or council requires it as part of a program.

The height/weight chart generally would not apply in the following situations (unless specific instructions are issued as an exception):

The majority of BSA resident camps, most local council Cub Scout/Boy Scout resident camps have drive-up campsites and don't require packing in or out.

Cub Scout programs. (Backcountry and high-adventure are not age-appropriate for Cub Scouting.)

Wood Badge courses in a typical resident camp setting, though courses held at a national high-adventure base like Philmont Scout Ranch will enforce the limit.

The [2013 National Scout Jamboree](#). (However, please review the [Be Prepared](#) link on the Jamboree website to review all medical risk factors, including excessive body weight.)

Q. Is the height/weight chart mandatory for the 2013 National Scout Jamboree?

A. No. However, if you review the risk factors on <http://www.bsajamboree.org/> under the [Be Prepared](#) tab, you can see that we recommend a body mass index (BMI) of less than 30 (obese) for adult staff positions requiring moderate to high physical exertion. We recommend that youth fall within the 5th and 85th percentiles. As with past jamborees, this jamboree promises that everyone will be walking at least 5 miles per day. Youth with BMIs over the 95th percentile and adults with BMIs over 40 (morbidly obese) should reconsider participation. Watch the jamboree newsletters and Web site for more information.

Q. I believe my body fat percentage will prove that I am fit and able to participate in the events described in the Annual Health and Medical Record requiring the use of the height/weight chart. Can I obtain a body fat test from my physician and use those results?

A. Yes, body fat percentage may be used if your weight is 295 pounds or less. However, please call the camp to determine if any specific type of testing is required. (Acceptable body fat percentage for women is 20 percent or less. Acceptable body fat percentage for men is 15 percent or less. Verification by a physician is required.)

Q. Where did the BSA height/weight chart and alternative body fat percentage come from?

A. The Annual Health and Medical Record is based on several evidence-based sources, including the revised Dietary Guideline for Americans from the U.S. Department of Agriculture and the Department of Health and Human Services, and has been successfully deployed by our high-adventure bases. The maximum weight for each height in this chart correlates to a Body Mass Index (BMI) of 32 to 33, which is into the obese category. Please refer to these links that explain BMI and body fat percentage.

Children and Teens: <http://apps.nccd.cdc.gov/dnpabmi/>

According to the U.S. Centers for Disease Control and Prevention (CDC), BMI is a reliable indicator of body fatness for most children and teens. As with BMI, a healthy body fat percentage in kids depends on their age as well as several other factors. Your pediatrician or family physician should be able to determine what your healthy body fat percentage is, dependent upon your height and your age. (http://pediatrics.about.com/od/bmi/a/0806_bmi_crtcms.htm)

Childhood Obesity: http://pediatrics.about.com/od/obesity/a/408_obesity_hub.htm

Adult BMI calculations: http://www.cdc.gov/healthyweight/assessing/bmi/adult_bmi/english_bmi_calculator/bmi_calculator.html

American Council on Exercise and International Sports Sciences Association recommendations for Body Fat Percentage: <http://stanford.wellsphere.com/weight-loss-article/ideal-body-fat-percentage/9646>

Understanding Adult Obesity: <http://win.niddk.nih.gov/publications/PDFs/understandingobesityrev.pdf>

Q. My child is underweight according to the chart on the Annual Health and Medical Record. Can he still participate in high-adventure activities?

A. Yes, if he is cleared by his health-care provider as stated on the record. Based on our experience, excessive body weight is a much higher risk. See <http://www.bcm.edu/cnrc/bodycomp/bmiz2.html> for further information concerning underweight youth. If his high-adventure activity includes backpacking, make sure his pack weighs no more than 20 to 25 percent of his body weight as recommended by Philmont Scout Ranch and the Health Lodge Task Force.

Q. Why is there privacy (HIPPA) information on the Annual Health and Medical Record?

A. In response to requests from several councils, to meet state requirements, and assist in the understanding of privacy (HIPPA) laws, we have included the link and authorization for release of information to the adult leader in charge.

Q. What do I do if the medications listed on the form change between the physical and the Scouting event?

A. You should update the information and be sure that the prescribing physician verifies that the new medication does not alter the participant health status and ability to participate.

Q. What should I do if the participant's health status changes significantly between the time he/she has the physical exam and the activity occurs?

A. The health form is a snapshot of your health at the time of the physical. Don't put yourself and others at risk by failing to recognize and disclose changes in your health status. New medicals, surgery, illness, changes in disease process are all reasons to ask your

provider to reassess the participant's health status and fitness to participate.

Q. Why do these forms seek to exclude Scouts and Scouters from participating in Scouting activities?

A. Standards are put in place to protect the health and well being of all participants. The participant that is not healthy enough to participate in a given activity puts himself/herself and others at risk. No one wants a Scout or Scouter to be placed in a situation that is risky or could lead to permanent disability or death. In many cases the initial Scout physical is the first time a health condition is discovered so treatment can begin and long term negative outcomes prevented.