



Department of Health and Human Services  
Maine Center for Disease Control and Prevention  
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Health Inspection Program

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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 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/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: [lisa.silva@maine.gov](mailto:lisa.silva@maine.gov) and [rebecca.walsh@maine.gov](mailto:rebecca.walsh@maine.gov)

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