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Medical Risk Factors for Your Participation in Scouting

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Medical Risk Factors for Your Participation in Scouting

Scouting can be physically and mentally demanding. To help its members be better prepared, the Boy Scouts of America recommends that everyone who participates in a Scouting activity have an annual medical evaluation by a certified and licensed health-care provider: a physician (MD or DO), nurse practitioner, or physician assistant. Based on the vast experience of the medical community, the BSA has identified risk factors that could become issues during weekend camping, hikes, treks, tours, or other activities.

Become familiar with the following risk factors to ensure all Scouts and Scouters are prepared.

Excessive Body Weight (Obesity)

Excessive body weight increases risk for numerous health problems. To ensure the best experience, Scouts and Scouters should be of proportional height and weight. One such measure is the Body Mass Index (BMI), which can be calculated using a tool from the Centers for Disease Control here: <http://www.cdc.gov/nccdphp/dnpa/bmi/>. Calculators for both adults and youth are available. It is recommended that **youth** fall within the fifth and 85th percentiles. Those in the 85th to 95th percentiles are at risk and should work to achieve a higher level of fitness.

Cardiac or Cardiovascular Disease

These include

1. Angina (chest pain caused by blocked blood vessels or coming from the heart)
2. Myocardial infarction (heart attack)
3. Heart surgery or heart catheterization (including angioplasty to treat blocked blood vessels, balloon dilation, or stents)
4. Stroke or transient ischemic attacks (TIAs)
5. Claudication (leg pain with exercise, caused by hardening of the arteries)
6. Family history of heart disease or a family member who died unexpectedly before age 50
7. Smoking

Youth who have congenital heart disease or acquired heart disease such as rheumatic fever, Kawasaki's disease, or mitral valve prolapse should undergo a thorough exam.

Hypertension (High Blood Pressure)

Scouts and Scouters should have a normal blood pressure (less than 140/90). Persons with significant hypertension should be under treatment and their condition should be under control. If participating in a Scouting event that is physically demanding, it is recommended that hypertension be under control in the six months prior to the date of the event. The goal of the treatment should be to lower blood pressure to normal levels. Those already on antihypertensive therapy with normal blood pressures should continue treatment and should not choose the time they are at any Scouting event to experiment with or change medications.

Diabetes (Insulin-Dependent Diabetes Mellitus)

Any individual with insulin-dependent diabetes mellitus should be able to self-monitor blood glucose and know how to adjust insulin doses based on these factors or be accompanied by a guardian that is knowledgeable in these matters. The individual with diabetes and/or the guardian should also know how to give a self-injection/injection and recognize indications of high and low blood sugar. **If planning on participating in an overnight experience of any kind, bring enough medication, testing supplies, and equipment for the entire Scouting event.** This includes batteries (without provisions for recharging) to be both brought to and taken away from the event for pumps (remember Leave No Trace guidelines).

An insulin-dependent individual who has been newly diagnosed (within six months of the fitness examination) or who has undergone a change in delivery system (e.g., an insulin pump) in the same period and who desires to participate in a Scouting event that is physically demanding should reconsider participation. This also applies to an individual who has been hospitalized for diabetic ketoacidosis or who has had problems with hypoglycemia in the last year.

Seizures (Epilepsy)

Seizure disorder or epilepsy should be well-controlled by medications if an individual desires to participate in a physically demanding Scouting event. A minimum of six seizure-free months prior to the fitness examination is considered under control. Participants with a history of seizures need to limit high-adventure activities (e.g., climbing or rappelling).

Asthma

Acute or severe bronchial asthma under treatment anytime during the past 24 months should be well-controlled before participating in physically demanding Scouting events. Key indicators of well-controlled are:

1. The use of a rescue inhaler zero times to one time a day
2. No need for nighttime treatment with a short-acting bronchodilator

Well-controlled asthma may include the use of long-acting bronchodilators, inhaled steroids, or oral medications such as Singulair.

If the Scouting event is physically demanding, individuals with the following asthma conditions should reconsider participation:

1. Exercise asthma is not prevented by medication.
2. Participant has been hospitalized or has gone to the emergency room for asthma treatment in the six months before the fitness examination.
3. Participant has received treatment that required oral steroids (prednisone) in the six months before the fitness examination.

When participating in any overnight Scouting event, participants must bring an adequate and a backup supply of medications and spare rescue inhalers that are current. Participants must carry a rescue inhaler at all times during any Scouting event.

Sleep Apnea

Scouts and Scouters with sleeping disorders may experience health risks due to long days and short nights for many Scouting events. It is recommended for those with sleep apnea requiring a CPAP machine for any overnight Scouting experience that all equipment (e.g., CPAP machine) be provided by the Scout or Scouter and be self-contained. This may include batteries (without provisions for recharging) to be both brought to and taken away from the Scouting event (remember Leave No Trace guidelines).

Allergies or Anaphylaxis

Scouting events have several risks (e.g., nuts, pollens, wasps, hornets, and other stinging insects) that could trigger anaphylactic reactions in individuals prone to reaction. It is recommended that Scouts and Scouters who have had an anaphylactic reaction from any cause contact the appropriate medical personnel of the Scouting event to confirm participation

eligibility before arrival, especially if the event includes an overnight experience. Participants will be required to have appropriate treatment with them at all times.

For longer Scouting events such as summer camp, jamborees, and high-adventure programs, allergy shots required for maintenance doses may be acceptable for persons who have not had an anaphylactic reaction. Contact the appropriate medical personnel for the event for confirmation.

Ingrown Toenails, Recent Musculoskeletal Injuries, and Orthopedic Surgery

Many Scouting events put a great deal of strain on feet, ankles, and knees. If the Scouting event is physically demanding, ingrown toenails should be treated within a month prior to the event. Scouts and Scouters who have had orthopedic surgery, including arthroscopic surgery, or significant musculoskeletal injuries, including back problems, should have a release from the surgeon or treating physician to participate in Scouting events.

Psychiatric/Psychological and Emotional Difficulties

Psychiatric/psychological and emotional disorders do not necessarily exclude an individual from Scouting events. Parents and advisers should be aware that most Scouting events are not designed to assist in overcoming psychological or emotional problems and may exacerbate existing conditions. Experience demonstrates that these problems frequently are magnified, not lessened, when participants are subjected to the physical and mental challenges of many Scouting activities.

Any condition must be well-controlled without the services of a mental health practitioner. Under no circumstances should medication be stopped before or during a Scouting activity. If the Scouting event is an overnight experience, Scouts and Scouters are required to bring an appropriate supply of medication for the duration of the event, including travel to and from the event.

Other Risk Factors

Sickle-cell anemia, hemophilia, leukemia, severe blood dyscrasia, and HIV infection provide special challenges to Scouts and Scouters. To plan for, prepare for, and support those having these medical conditions, it is recommended that an individual evaluation of each situation be done by the appropriate medical personnel. There may be instances where proper medical support at the Scouting event is impossible. Under such circumstances, participation may be denied.

For information on any other health issues, contact your personal health-care provider.