**Statement of Purpose:** The intent of this document is to assist athletic departments with preparation and implementation strategies to enhance safe return to campus and athletic activity following the COVID-19 pandemic. Each institution should personalize the content of this plan to incorporate campus-specific policies and resources.

*Disclaimer: Recommendations are fluid and subject to change. Therefore, it is important to stay current with public healthcare guidelines as well as recommendations from governing bodies.*

**Pre-Return and Return to Campus Preparation and Communication Plan**

**A. Campus General Council/ Risk Management Liability Understanding**

1. Align department policies with campus policies and communication of public healthcare guidelines
2. Reporting, monitoring and resolution of symptoms of illness should align with institutional guidelines
   - Patient – Healthcare Provider contact
   - Emphasis on avoiding communal buildings
3. Infectious Disease Education for Student Athletes & Departmental Staff
   - Guidelines for infection prevention and transmission control
   - Proper communication methods for reporting symptoms
   - Individual Personal Conduct and Hygiene

**B. Creation of Athletics COVID-19 Action Team**

1. Primary Stakeholders/ Members:
   - Athletic Director or Designee
   - Healthcare Administrator
   - Sport Medicine
   - Strength and Conditioning
   - Team Physicians
   - Student Health
   - University Crisis Management/ Emergency Preparedness
   - Counselling
   - Facilities

2. Potential Advisory Groups:
   - Federal/ state/ local public health Officials
   - Custodial/ Sanitation
   - Compliance
   - Coaching/ Sport Operations
   - Equipment
   - Housing, Dining and Nutrition
   - Student Development
   - Academics
   - Human Resources
   - Campus Safety
   - Athletic Conference/ Governing Bodies

3. Resources to Consider:
   - [CDC: Infection Prevention and Control Assessment Tool for Outpatient Settings (2016)]
   - [BOC Facility Principles (2015)]
   - [CDC Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings (2019)]
   - [NCAA Core Principles of Resocialization of Sport]
   - [American College Health Association (ACHA) COVID-19 Resources]
     - **ACHA Guidelines:** Student Health Considerations & Guidelines for Re-opening Higher Education Institutions
- **EPA List N: Disinfectants for Use Against SARS-CoV-2 (2020)**
- **CDC: Guidance for the Selection and Use of Personal Protective Equipment in Healthcare Settings**
- **Interassociation Recommendations: Preventing Catastrophic Injury and Death (2019)**
- **CSCCa and NSCA Joint Consensus Guidelines for Transition Periods (2019)**
- Websites for Local, County or Regional Board of Health governing bodies responsible for administering and enforcing state public health laws and regulations

C. **Creation of Action Plan** with consideration of the following items and in alignment with institution guidelines/action plans:

1. Guidelines and acquisition of personal protective equipment for staff
   - Alignment with CDC and State/Local guidelines on appropriate protection
   - Evaluate PPE and equipment Needs/ Availability/ Optimization
   - Procurement of materials may dictate levels of service and operational capacity

2. Return to Campus Guidelines
   - Alignment with public health agencies, governmental and institutional guidelines regarding travel and post-travel recommendations
   - See recommendations from NATA: ICSM COVID19 Screening Committee

3. Quarantine/Isolation Unit Planning
   - Alignment with public health agencies and institutional guidelines
   - Considerations:
     - On and Off Campus Housing/ Dining
     - Documentation
     - Contact and Location Tracing (HIPPA/ FERPA)
     - Length of time away from individuals/ facility
     - Location
     - Monitoring, Follow-up and serial exams
     - Discontinuation considerations
     - Personal Travel Procedures
     - Team Travel Procedures

4. Infectious Disease Cluster Response Plan
   - Contact Local and Institutional Health Authorities
   - Consideration of general epidemiological strategies, and best practice recommendations
   - Re-Evaluation of prior Disinfectant/Purification/Equipment Plan

5. COVID-19 Prevention Disinfectant/Purification/Equipment Plan
   - Considerations:
     - Procurement of materials may dictate levels of service and operational capacity
     - Proper products and application methods:
       - Locker Rooms
       - Weight room
       - Communal Areas
       - Meeting Rooms
       - Healthcare Facilities
       - Academic Areas
       - High Touch Surfaces
       - Any shared health, fitness and sport equipment
       - Food Service – Communal Meals and Fueling Stations
     - Sanitary Hydration
     - Laundry

6. EMS/911 Emergency Differentiation Plan
   - Adaptation of Emergency Action Plans based on Campus and Local EMS/ Safety availability, facilities considerations, increased demands and increased risk of exposure at local emergency facilities.
- Alternate Hospitals and Healthcare Facilities
- Alternate Transportation plans (Triage, location, etc.)
- On-site availability of Physicians
  - Capacity Student Health Services

7. Social Distancing Considerations
   - Social Distancing Principles within:
     - Team Scheduling of Shared Facilities
     - Healthcare Facilities
     - Locker rooms
     - Weight rooms
     - Team Meeting rooms
     - Athletic Academic Areas
     - High Volume Communal Areas in Athletic Facilities
     - Athletic Dining Areas
   - Recommendations to conduct virtual team activities when possible.

8. Implementation of Infectious Disease Prevention Plan (Shared Responsibility)
   - Individual Personal Conduct
   - Signage
   - Hand Sanitation Stations
   - Annual prevention education and training
   - Operational Considerations

9. Pre-participation Considerations
   - Physicals Exams and Screenings
     - Contingency Plan based on provider accessibility and institutional guidelines regarding physicals exams
     - Evaluation of additional screenings based on health history, as recommended by team physician/ PCP.
       - New student-athlete, returning student-athlete, student-athlete with verified (+) test for COVID-19
       - Obtain recommendations from treating physician when possible

D. Safe Transition to Athletic Activity
   1. Adherence to governing body and consensus recommendations for transition and acclimation to activity following extended inactivity periods
   2. Event planning and management considerations:
      - Game management personnel
      - Visiting team concerns
      - Venues
      - Spectators
   3. Team operations and team travel considerations

E. Contingency Plan to Manage Recurrence
*Disclaimer: Recommendations are fluid and subject to change. Therefore, it is important to stay current with public healthcare guidelines as well as recommendations from governing bodies.*

**Preparation for Return to Campus**

- Acquisition of PPE
- Acquisition of Disinfectant Products
- Consideration Pre-Participation Physicals
- Infectious Disease Prevention Plan
- Quarantine/Isolation Unit Plan
- EMS/911 Emergency Differentiation Plan

**Staff Return**

- Infectious Disease Prevention Education
- Infectious Disease Cluster Response Plan
- Quarantine/Isolation Unit Plan
- Pre-Activity Screenings
- Preparations for Implementing Safe Training Approach

**Student – Athlete Return**

- Safe Transition to Athletic Activity
- Training Periodization
- Acclimation Transition
- Equipment Sanitation
- Spacing Considerations
- Team Ops and Travel Considerations
- Event Planning and Management

**Return to Training**

- Contingency Plan for Managing Recurrence

**Return to Competition**

- Contingency Plan for Managing Recurrence

---

**A. Campus General Council/ Risk Management Liability Understanding & Communication**
- Policy Alignment
- Reporting, monitoring and Resolution of symptoms
- Infectious Disease Education

**B. Creation of Athletics COVID-19 Action Team**

**C. Creation of Action Plan with consideration of the following items and in alignment with institution guidelines/ action plans:**
1. Guidelines and acquisition of personal protective equipment for staff
2. Return to Campus Guidelines
3. Quarantine/Isolation Unit Planning
4. Infectious Disease Cluster Response Plan
5. COVID-19 Prevention Disinfectant/Purification/Equipment Plan
6. EMS/911 Emergency Differentiation Plan
7. Social Distancing Considerations
8. Implementation Infectious Disease Prevention Plan (Shared Responsibility)
9. Pre-participation Considerations

**D. Safe Transition to Athletic Activity**
1. Contingency Plan to manage Recurrence
### Identify Campus Work Groups
- Institutional Admin
- Athletic Department Personnel
- Campus Health Center
- Mental Health Professionals
- Community Hospital
- Risk Management
- Environmental Health and Safety
- Residential Life
- University Police

### Pre-participation Physical Exams
- Additional Hx related to COVID-19
  - Personal
  - Family
  - Travel
  - International SA
  - Quarantine
- Timing of PPE
  - Non-institutional
  - Institutional

### Basics of COVID-19
- S/SX
- Avoid Sick Population
- Social Distancing Guidelines
- Proper Hygiene
- Policy and Procedures

### Educational Groups
- Student-athletes
- Coaches
- Staff

### Methods of Education
#### Timing
- Prior to return
- On-campus
- Continuous

### Supplies and Equipment
- Supply Chain
  - Local Health Department
  - Physicians
- Masks
  - Surgical, N95, Cotton
  - Proper face shield
- Eye protection
- Gloves
- Gowns
- Hand sanitizer
- Thermometer
- Pulse oximeter
- Peak Flow Meter

### Donning and Doffing
- Policy and Procedures

### Current screening protocols
- Appropriate for SA
- Recommend SA needs

### Screening: acute respiratory illness
- Temperature
- Medical HX
- Per institution requirements

### Develop algorithm
- Green Flag
- Yellow Flag
- Red Flag
  - Federal, state, local, institutional guidelines

### Begin screening process
- Prior to campus
- Frequency
  - SA population
  - High Risk population

### Location of screening
- Remote
- Athletic on-site

### Identify population

### Supply Chain
- Local Health Department
- Physicians

### Federal, State, Local, Institutional Guidelines
- Evolving
- Campus protocols
  - COVID-19 testing
  - Antigen testing
  - Contact tracing
  - Campus work group
  - Cost

### COVID-19 Positive Cases
- Medical Care
- Quarantine Procedures
- Institutional Guidelines
- RTP Decisions

### Travel Considerations
- Federal, state, local and institutional guidelines
- Athletic policy/procedures
  - Hot spots
  - Additional screening
  - Contact vs. non-contact sports
- Guidance on appropriate travel
Below are recommendations for athletic trainers to evaluate with appropriate personnel in preparation for student-athletes return to campus following the COVID-19 Pandemic. These recommendations are not all encompassing and are subject to change. Therefore, it is important to stay current with federal, state, local and institutional health care guidelines.

- Identification of Campus Work Group for screening and testing procedures (may include but not limited to)
  - Institutional Administration
  - Athletic Department Personnel
    - Athletic Director or assigned designee(s)
    - Team Physician(s)
    - Athletic Trainer(s)
  - Campus Health Center
  - Community Hospital
  - Mental Health Professionals
  - Risk Management
  - Environmental Health and Safety
  - Residential Life
    - On/Off Campus Housing
    - Dining Services
  - University Police

- COVID-19 Education
  - Signs and Symptoms
  - Avoid contact with sick population
  - Maintain social distancing guidelines as defined by your local health department
    - Virtual Meetings
  - Proper hygiene standards
  - Institutional screening procedures
  - Procedures for student-athletes and athletic department personnel who present with illness symptoms related to acute respiratory illness
  - Identify parties where education is appropriate but should include at a minimum:
    - Student-athletes
    - Coaches
    - Athletic Department Staff
  - Identify method(s) of education
  - Identify timing of education
    - Prior to returning to campus
    - On-Campus
    - Continued need through the academic year(s)

- Supplies/Equipment that may be needed for screening purposes
  - Important to recognize supply chains may be disrupted
    - Work with your physician(s) and local health departments to determine what may be appropriate alternatives
  - Masks-surgical, N95, cotton
If N95 not available, use of R/P95, N/R/P99 or N/R/P100 filtering masks may be appropriate.

Proper face shield may be worn on top of N95 masks to prevent bulk contamination.

- Eye protection
- Gloves
- Gowns
- Hand sanitizer
- Thermometer: non-contact infrared
- Pulse oximeter
- Peak flow meter
- Donning (putting on) and Doffing (taking off) procedures for personal protective equipment
  - Includes disposal of personal protective equipment

Screening Procedures

- Important to recognize your institution may have screening protocols in place for students, faculty and staff
  - These protocols may or may not be appropriate for your student-athletes and athletic department staff
  - Recommend the need to work with the identified Campus Work Group and follow federal, state, local and institutional public health recommendations when evaluating and developing screening procedures
- Identify screening procedures for acute respiratory illness (Example: Addendum A)
  - Temperature check
  - Brief medical history
  - Pulse oximetry is not currently recommended by the CDC but may be worth discussing with your team physician(s) for the student-athlete population
  - Develop algorithm to sort persons for further screening, evaluation, testing based upon initial screening procedure
    - Example may include green, yellow, red flag system: see Addendum B
      - Green flag-No Concern
      - Yellow flag-early onset symptoms
      - Red Flag
        - Symptomatic
        - Contact with a positive person
        - Travel concerns
        - Underlying medical conditions
  - Athletic departments should follow local public health and institution guidelines for medical evaluations related to acute respiratory illness
    - Athletic Training Rooms may not meet current standards
    - Evaluation of upper respiratory infections may need to be referred to medical offices
- Identify when to begin screening process
  - Prior to return to campus
  - Frequency of screening
    - Will student-athletes require more frequent screening
      - Contact sports vs. non-contact sports
    - Individuals with high risk factors
      - Age
- Heart disease
- Lung disease
- Diabetes
- High Blood Pressure
- Immunocompromised metabolic disorders
  - Includes those who are on medication but may be in remission
- Asthma
- Obesity
- Liver disease
- Sickle Cell Disease/Trait

- Identify location of screening
  - Remote
  - Athletic on-site screening should follow federal, state, local and institutional public health recommendations
    - Identify appropriate location
    - Identify what Personal Protective Equipment may be warranted
    - Identify what Personal Protective Equipment may be warranted for person(s) being screened
    - Identify proper social distancing guidelines needed during on-site screening
    - If athletic trainers are being asked to be screeners, a plan on how this may impact other areas of student-athlete clinical care should be shared with team physicians and athletic administration

- Identify persons being screened
  - Student-athletes
  - Athletic department coaches and staff
    - Interns
    - Volunteers
    - Student-workers
  - Campus services and outside contract personnel who may or may not be on campus on a daily basis
    - Landscaping personnel
    - Custodial services
    - Food service personnel
    - Consultants/independent contractors
    - Guests

- Documentation of screening procedures

- Pre-participation Physical Exam
  - Additional medical history questions related to COVID-19 are warranted
  - Important to recognize the institution may have questions developed for the student population that may be appropriate
    - Personal and family history of COVID-19 diagnosis
      - Tested vs. presumed
      - Date of diagnosis
      - Require hospitalization
      - Treated with oxygen or ventilator
• Experience any symptoms related to COVID-19
  - Date of onset
  - How long have you been symptom-free?
  - Have you experienced any symptoms in the past 14 days?
  - Have you had direct contact (within 6 feet) with any ill or positive COVID-19 person(s) in the last 2-14 days?
• Were you or a family member placed in quarantine?
  - If so, when and how long
• Have you traveled outside of your local community in the past 14 days?
  - If so, list locations
  - How long
• International travel/student-athletes
  - Where are you returning from?
• Does the institution recommend a local quarantine upon return to campus?
  - Screening procedures may be needed prior to student-athletes undergoing their pre-participation physical exam
  - Institutions that administer pre-participation exams by non-university physicians prior to returning to campus should have a screening protocol in place for arrival on campus
• COVID-19 Testing
  - Protocols for testing are being developed at the state and community level based upon CDC recommendations
  - Testing will continue to evolve as tests become more readily available
  - Important to recognize collegiate institutions may have protocols for COVID-19 and antigen testing for students, faculty and staff
    - Protocols for testing should include contact tracing
    - Recommend the need to work with the identified Campus Work Group and follow federal, state, local and institutional public health recommendations if testing procedures are different for the student-athlete and/or athletic department staff population
  - Institutions need to evaluate medical costs associated with testing
    - Financed through university for all students via Health Services
    - Financed through athletic department
    - Billed to student-athlete insurance
      - Plan if student-athlete does not have insurance
  - Medical providers should work with their Campus Work Group and follow federal, state, local and institutional public health recommendations related to COVID-19 testing procedures if athletic department medical personnel are collecting COVID-19 samples for testing which includes proper packing and shipping of tests
    - Identification of appropriate labs for testing samples
    - Understand the length of time for results which may differ across labs, communities and states due to various factors
• COVID-19 Positive Cases
  - Medical providers should work with their Campus Work Group and following federal, state, local and institutional public health recommendations in developing protocols for person(s) who test positive for COVID-19
    - Medical Care
    - Quarantine
      - Student-athletes who reside on campus may be able to follow institution guidelines
• Recommend working with Campus Work Group for student-athletes who reside off-campus
  o Return to play decisions should be made on an individual basis as symptoms will differ amongst patients
    ▪ Recognizing this virus affects the respiratory system and currently involves a 14 day quarantine a gradual return to sport needs to be developed by medical personnel\textsuperscript{9,10}
    ▪ Recommend discussing with your team physician(s) the use of pulse oximetry or peak flow meter readings as part of this process
    ▪ Questions have risen regarding the need for EKG testing following a positive COVID-19 test amongst the student-athlete population
    o Current data shows 8-12\% percentage of positive cases result in acute carditis\textsuperscript{11}
      ▪ Recommend discussing this with your team physicians and cardiologists

• Travel Considerations
  o Medical providers should work with their Campus Work Group and follow federal, state, local and institutional public health recommendations related to screening and testing following team, personal and work-related travel
  o Important to recognize your institution may have protocols in place for students, faculty and staff
  o Considerations may include but are not limited to:
    ▪ “community” hot spots
    ▪ Additional screening following home/away contests
      o Contact vs. non-contact sports
  o Guidance on whether travel is appropriate
  o Quarantine measures related to travel

References
INSTITUTION SPORTS MEDICINE
Student-Athlete COVID-19 Screening

Name: ______________________________  ______________________________  ______________________________  
Last                                      First                                      Middle

INSTITUTIONAL ID#: ___________________________ Date of Birth: ___________________________ Age: _____ Cell Phone: ___________________________

(MM/DD/YYYY)

Gender: ☐ Male  ☐ Female  Sport(s): ___________________________________________________

Please complete this form to assess your potential exposure / possession of COVID-19 and other illnesses.

Are you currently free from illness?  ☐ Yes  ☐ No

During your time away from INSTITUTION, did you experience, or are you currently experiencing any of the following:

<table>
<thead>
<tr>
<th>SYMPTOM</th>
<th>YES</th>
<th>NO</th>
<th>LENGTH OF SYMPTOM</th>
<th>EXPLANATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fever</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Body Chills</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Extreme Level of Fatigue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cough</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pain / Difficulty Breathing</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shortness of Breath</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sore Throat</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Body / Muscle Aches</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Loss of Taste</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Loss of Smell</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Changes to Vision / Eye Discharge</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-14 days prior to experiencing these symptoms, did you experience a suspected exposure to COVID-19?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you had any direct contact with anyone who lives in or has visited a place where COVID-19 is spreading and/or is an area reporting an increased number of COVID-19 cases (i.e. &quot;hot spots&quot;)?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you had any direct contact with someone that has a suspected or lab confirmed case of COVID-19?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>During your time away from INSTITUTION, did you self-quarantine due to suspected symptoms or exposure of COVID-19?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>During your time away from INSTITUTION, have you been living in, or have visited an area reporting an increased number of COVID-19 cases (i.e. &quot;hot spots&quot;)?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Have you previously been or are you currently diagnosed with COVID-19?

☐ YES ☐ NO  DATE OF DIAGNOSIS: _____/_____/_____

Do you have medical documentation to support your diagnosis and treatment of COVID-19?

☐ YES ☐ NO  PHYSICIAN NAME: ___________________________________________________

PHYSICIAN LOCATION: ___________________________________________________

Please list any countries/states/cities you have traveled to since March 15th, 2020 and the dates you were there:

1. ___________________________________ Dates: _________________
2. ___________________________________ Dates: _________________
3. ___________________________________ Dates: _________________
4. ___________________________________ Dates: _________________
5. ___________________________________ Dates: _________________

Student-Athlete Signature: ______________________________  Date: ________________________

Addendum A: Below is just an example, athletic trainers should work with their team physician(s) in developing a screening process that is appropriate for their institution.
Addendum B: Below is just an example, athletic trainers should work with their team physician(s) in developing a screening process that is appropriate for their institution.