

MVTHS SPORTS MEDICINE ATHLETICS COVID-19 POLICY AND PROCEDURES

Due to the rapid developments and changes in COVID-19 management, strains and mitigations; follow the most up to date guidance from the IDPH, the IHSA, the CDC, and other governing authorities.

Part 1: Per IHSA guidelines

Pre-Practice:

- Schools must maintain a daily record (IHSA sign in sheet) of what athletes are participating, when, symptoms they may present.
- Individuals should sanitize or wash their hands for a minimum of 20 seconds with warm water and soap, or use alcohol based hand sanitizer and rub until dry before touching any surfaces or participating in workouts
- Athletes should be screened at the start of practice for temperature >100.4F/38C or symptoms of COVID-19 (fevers, chills, cough, muscle aches, headache, sore throat, runny nose, nausea, vomiting, diarrhea, or loss of taste or smell).
- Any person with symptoms or a positive COVID-19 test, should not participate in practice, competition, or conditioning and should be referred to a physician(MD/DO) for evaluation and only return after clearance to do so from a physician(MD/DO).
- Signage about symptoms and transmission of COVID-19 should be posted around facilities.
- Follow all current guidelines per IDPH/IHSA for the sport.

Practice:

- Follow all current IDPH/IHSA rules on contact and physical touching. It is encouraged to keep all contact to a minimum.
- Gatherings of up to 50 individuals (including coaches and spectators), indoors or outdoors, are allowed. Thirty feet of space must be maintained between gatherings of 50 when outdoors. Indoor limits of 50 individuals is the maximum no matter the spacing.
- Masks are to be worn at all times when indoors. Outdoor activities do not need masks, but should maintain 6 feet of social distancing.
- When students are not actively participating in a drill, practice, or contest, care should be taken to maintain social distance between individuals.
- If locker rooms are a necessity, capacity should be limited to ensure members can maintain 6 ft of social distance.
- Appropriate clothing/shoes should be worn at all times in the weight room to minimize sweat from transmitting onto equipment/surfaces.
- Students must be encouraged to shower and wash their workout clothing immediately upon returning to home.

Facilities Cleaning:

- Adequate cleaning schedules, before and after each use by a group of athletes, should be created and implemented for all athletic facilities to mitigate any communicable diseases.
- Prior to an individual or groups of individuals entering a facility, hard surfaces within that facility should be wiped down and sanitized (chairs, furniture in meeting rooms, locker rooms, weight room equipment, bathrooms, athletic training room tables, etc.).

- Hand sanitizer should be plentiful and available to individuals as they transfer from place to place.
- Weight equipment should be wiped down thoroughly before and after an individual's use of equipment.

Physical Activity and Athletic Equipment:

- Local districts should work with their health departments and local school officials to make decisions about team travel to summer competitions.
 - Football players should maintain their summer acclimatization schedule, per IHSA By-Law 3.157.
- **Follow all current guidelines on contact/physical touching per IDPH/IHSA for the sport.**
 - Scrimmages may occur if Student Athletes sign and turn in a waiver to the Athletic Department. These scrimmages must follow the most up to date IDPH/IHSA rules for the sport.
- There should be no shared athletic towels, clothing, or shoes between students.
- Hand sanitizer or hand washing stations should be plentiful at summer contact events.
- Athletic equipment such as bats and batting helmets should be cleaned between each use. Other equipment, such as catcher's gear, hockey helmets/pads, wrestling ear guards, football helmets/other pads, lacrosse helmets/pads/gloves/eyewear should be worn by only one individual and not shared.
 - Shared equipment such as athletic balls, thud pads, sleds should be cleaned frequently during practice and competitions.
- In phase 4 spotters for weightlifting are allowed while masked. Maximum lifts should be done only with power cages for squats and bench presses. Spotters should stand at each end of the bar.

Hydration:

- All students shall bring their own water bottle. Water bottles must not be shared.
- Hydration stations (water cows, water trough, water fountains, etc.) will be avoided per IDPH rules as of 1/30/2021 unless an emergent situation requiring water is needed. Water will then be provided by the Athletic Trainer to the person in crisis wearing gloves and a mask.

Contests:

- **PER MVTHS Sports Medicine Staff: all teams traveling away for a contest should have symptoms screened and temperatures checked before stepping onto the bus, by a coach or an athletic trainer. This includes all coaches and participants going to the contest.**
- **Teams arriving to play at MVTHS should have their temperature taken when entering the facilities by a coach, administrator or an athletic trainer. The sign in sheet should not be filled out as this is the responsibility of the traveling school.**
 - **Only coaches and athletes of the visiting team will be screened by the athletic trainer**
- **Follow the most up to date guidelines on ability to play and practice with contact/physical touching per IDPH/IHSA for the sport.**
- The level of play allowed is dictated by current public health conditions. Below are the Type of Play Levels:

- Level 1 No-contact practices, and trainings only
 - Level 2 Intra-team scrimmages allowed, with parental consent for minors; no competitive play
 - Level 3 Intra-conference or Intra-EMS-region1 or intra-league play/meets only; state- or league-championship game/meet allowed for low-risk sports only
 - Level 4 Tournaments, out-of-conference/league play, out-of-state play allowed; championship games allowed
 - EMS Regions are the 11 regions IDPH uses for the Restore Illinois boundaries*
- The following Levels of Play are allowed according to sport risk and current mitigation tier:

Sport Risk	Phase 4	Tier 1	Tier 2	Tier 3
Lower	Level 4	Level 4	Level 3	Pause all indoor sporting activities
Medium	Level 4 (outdoor sports)	Level 3	Level 2	
	Level 3 (indoor sports)			
Higher	Level 3	Level 2	Level 1	

- Group sizes should be limited to 50 total participants, coaches, and referees or current IDPH/IHSA limits for the sport (i.e. excludes spectators). Any additional team members can sit on the sidelines 6 feet apart from one another.
- Students should maintain social distancing on the sidelines when not engaged in activities.
- Schools must have information posted at entrances and around facilities explaining the transmission as well as symptoms of COVID-19, encouraging all visitors to maintain social distance, and reminding people to stay home if they feel sick or have any of the symptoms of COVID-19: temperature >100.4F/38C, fevers, chills, cough, muscle aches, headache, sore throat, runny nose, nausea, vomiting, diarrhea, or loss of taste or smell. If schools choose to permit spectators, there should be a designated area for spectators with existing seating capped at 20% of capacity and allows 6 feet of distance between families/household units.
- Visual markers shall be displayed at queue points (Check-ins, along sidelines, concessions, bleachers, etc.) to help people maintain social distance.
- Concession stands may open in line with restaurant businesses physical workspace guidelines. There should be markers to encourage social distancing while in the queue.

- Encourage spectators to bring their own chairs from home for outdoor activities.
- No handshakes, high fives, fist bumps, hugs, etc. can occur pre or post-match.
- No spitting or blowing of the nose without the use of a tissue is allowed.

PPE:

- Coaches/volunteers must wear a mask while indoors (or cannot maintain 6 feet of social distancing)
- Officials must wear a mask except when ACTIVELY exercising as part of their officiating duties and use an electronic whistle. Mouth whistles and blow horns are not allowed for safety.
- Officials are encouraged to be masked whenever feasible to decrease risk of transmission.
- Participants should be encouraged to wear a mask if feasible for the sport.

COVID-19 ATHLETIC PROTOCOL Part 2: Per ISBE, IDPH and MVTHS

Illness Protocol:(Staff & Students)

- **Follow the most up to date Laws and Regulations and Guidance from the CDC , IDPH, IHSA and any governing body.**
- Should an individual become ill during any of the above periods, they should be immediately removed from the group, masked if not already, and isolated in their individual space.
- **The parent or guardian should be notified right away.**
- **Notify the school nurse, coach, athletic trainer, AND athletic director/school administration as soon as possible. Notifying one of the above may not guarantee others are informed. It is recommended to let at least a coach or athletic trainer know in addition to the school nurse/administration**
- Recommend referral to MD or testing for COVID-19 if more than 2 symptoms are present.
- Athletic director and/or athletic trainer will contact the family to confirm quarantine and applicable dates.
- If the test is positive, contact tracing should be initiated by the IDPH.
- This tracing will identify those individuals who would have been within six feet of the sick athlete for more than 15 minutes while the person was symptomatic or within the 48 hours prior to becoming symptomatic.

School/Athletics Exclusion Chart (source ISBE IDPH guidance document 6/23/2020)	Period
Student tests positive for COVID-19 <ul style="list-style-type: none"> ● IDPH will clarify whether this period of exclusion starts from the date of positive test or date of onset of symptoms (for now, we recommend from date of positive test) 	14 days
Student exhibits one (or more) symptoms of COVID-19 <ul style="list-style-type: none"> ● Fever, cough, shortness of breath or difficulty breathing, chills, fatigue, muscle and body aches, headache, sore throat, new loss of taste or smell, congestion or runny nose, nausea, vomiting or diarrhea ● Period of exclusion starts on the date of onset of symptoms 	14 days
Student had close contact with someone who tested positive for COVID-19 <ul style="list-style-type: none"> ● “Close contact” means that the student was within 6 feet of a COVID-19 positive person for more than 15 minutes ● Period of exclusion starts on the date of the most recent contact 	14 days
Student had close contact with someone who is exhibiting COVID-19 symptoms <ul style="list-style-type: none"> ● “Close contact” means that the student was within 6 feet of a symptomatic person for more than 15 minutes ● Period of exclusion starts on the date of the most recent contact 	14 days
Student has a temperature higher than 100.4 degrees Fahrenheit (38 degrees Celsius) <ul style="list-style-type: none"> ● At least 72 hours must elapse from resolution of the fever without fever reducing medication before the student can return to school 	72 hours
Student has a temperature higher than 100.4 degrees Fahrenheit (38 degrees Celsius) and exhibits one or more additional symptoms of COVID-19 <ul style="list-style-type: none"> ● Student must not return to school/athletics until 10 days have passed after symptoms first appeared 	10 days
Student has returned from a location with sustained widespread transmission, potentially including areas located within the United States (Travel Warning of Level 3 per CDC guidelines)	14 days

*the above chart is a reference and current timelines should be enforced by the most current recommendations.

Third-Person Contact

- If a student-athlete has contact with a COVID-19 positive person they should inform their coach or athletic trainer
- As shown in the table above:
 - The student-athlete must then quarantine themselves for 14 days from the most recent contact with the COVID-19 positive person
 - If the individual lives with the positive testing person and is unable to avoid contact with them, a 14 day quarantine must begin on the date the COVID-19 positive person is considered to be cleared.
- If the individual begins exhibiting symptoms after having contact with a positive testing person, they themselves must also get tested
 - While asymptomatic testing may be available, it will not confirm the infection potential of an individual
- Emerging evidence shows that some people that have recovered or currently have COVID-19 are experiencing myocarditis even if they were or are asymptomatic. With this evidence, it is especially important for athletes to follow the return to play(RTP) protocol and avoid strenuous activity before being cleared by a licensed physician(MD/DO).

Sport Shutdown

- If only a 3rd person contact, sports will continue while the individual follows guidance from IDPH.
- If a student athlete tests positive for COVID-19 he or she should go into quarantine and follow guidance from the IDPH.
 - The rest of the team will follow guidance from IDPH regarding quarantining or needing to cancel practice.
- In the event that multiple student athletes test positive for COVID-19 on different teams all of athletics will follow the guidelines form IDPH regarding quarantine and/or being tested.

Returning to Athletics

- The individual with a positive COVID-19 test may return to social interaction 72 hours after resolution of symptoms, including but not limited to: fever (without the use of fever reducing medications), cough, shortness of breath, AND at least 10 days past symptoms first appearing according to ISBE/IDPH guidelines.
- It is not required that the individual has a negative COVID-19 test to return to socializing as antibodies could result in a false-positive test result.
- All athletes, with a positive COVID-19 test, both symptomatic and asymptomatic, must be released by IDPH and provide a written release from a licensed health care provider (MD/DO, PA, NP) prior to beginning the COVID-19 return-to-play progression.
- For athletes with a positive COVID-19 test, the Athletic Trainer will reach out as soon as they are able to inform parents/guardians of the needed documents, and a synopsis of the RTP protocol.
- **Due to the possibility of lasting effects and deconditioning, positive athletes will not be returned to full sport upon the above medical clearance but rather begin a gradual progression supervised by the athletic trainer.**

COVID-19 Positive Athletes Return to Play (RTP)

Note: As with our concussion protocol, any exacerbation of symptoms during the activities of any stage will hold the athlete at that stage or revert them back to a prior stage until the stage can be completed safely and without exacerbation of symptoms. Continued complications could necessitate further follow up visits

After Resting 10 days from Onset & being symptom free for 7 days & off all treatments for Covid may begin RTP with IDPH release and clearance from a licensed healthcare provider (MD/DO, NP/APN, and PA)

1. Stage 1 (10 day min which is completed in the required quarantine period set by IDPH)

- a. Activity: walking, activities of daily living
- b. Objective: allow recovery, protect Cardio pulmonary system
- c. Monitor: Subjective symptoms, Resting HR, I-PRRS (injury-psychological readiness to return to sport)

2. Stage 2 (2 day min)

- a. Activity: Light activity
- b. Exercise allowed: Walking, light jogging, stationary cycle, no resistance training
- c. % Max HR: <70%
- d. Duration: <15 min
- e. Objective: increase HR
- f. Monitor: subjective symptoms, resting HR, I-PRRS, RPE

3. Stage 3A (1 day min)

- a. Activity: frequency increases
- b. Exercise allowed: simple movement activities. Running drills
- c. % Max HR: <80%
- d. Duration: <30 min
- e. Objective: increased load gradually, manage post viral fatigue symptoms
- f. Monitor: subjective symptoms, resting HR, I-PRRS, RPE

4. Stage 3B (1 day min)

- a. Activity: Duration of training increases
- b. Exercise allowed: progress to more complex training activities
- c. % Max HR: <80%
- d. Duration: <45 min
- e. Objective: exercise coordination, skills/tactics
- f. Monitor: subjective symptoms, resting HR, I-PRRS, RPE

5. Stage 4 (2 day min)

- a. Activity: increase intensity of training
- b. Exercise allowed: normal training activities
- c. % Max HR: <80%
- d. Duration: <60 min
- e. Objective: Restore confidence, assess functional skills
- f. Monitor: subjective symptoms, resting HR, I-PRRS, RPE

6. Stage 5 (DAY 17 AT THE EARLIEST)

- a. Activity: resume normal training progressions
- b. Exercise allowed: resume normal training progressions
- c. % Max HR: resume normal training progressions

- d. Duration: resume normal training progressions
- e. Objective: resume normal training progressions
- f. Monitor: subjective symptoms, resting HR, I-PPRS, RPE

7. Stage 6: Full return to competition

Less aerobically demanding sports (i.e. golf, bowling) may be able to progress more quickly than others

- a. It will be recommended that athletes with comorbidities should have a medical assessment prior to RTP
 - i. I.e. athletes with a history of cardiac conditions, respiratory conditions, or other conditions may want to check in with their specialists prior to RTP
- b. Athletes with complicated/prolonged COVID-19 illness may need further testing