



**University of Mary Hardin-Baylor**

# **Athletics**

## **Health and Safety Plan**

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# University of Mary Hardin-Baylor

## Athletics Health and Safety Plan

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## University of Mary Hardin-Baylor Athletics Health and Safety Plan

### Introduction

First and foremost, student-athletes are members of the UMHB community and must abide by all expectations set forth in the university's [Safe Return to Campus Plan](#).

UMHB's policies and plans to bring our student-athletes back to campus and to operate UMHB Athletics Programs are aligned with the latest guidance from government agencies, public health officials, NCAA, and the Centers for Disease Control and Prevention (CDC). Additionally, policies developed for university athletic activities are informed by references from the NCAA Sport Science Institute.

This pandemic presents a constantly-evolving and dynamic situation, and the university's policies and plans are continually monitored and updated. ***This information may be updated from time to time as new information becomes available from the CDC, state and local health officials or other relevant sources.***

### A Phased Approach

UMHB Athletics will follow a phased approach in implementing athletics programs. All athletic activity permitted in these phases will occur within the safety guidelines outlined throughout this document.

Phase 1 of the UMHB resocialization of athletics begins when the student-athletes report to campus on August 7<sup>th</sup> and 8<sup>th</sup>. During this time, athletes may be involved in voluntary activities.

Phase 2 of the UMHB resocialization of athletics begins on August 24<sup>th</sup> when athletes can begin voluntary strength and conditioning and practices. Competitions for golf and tennis will be initiated in September.

Phase 3 of the UMHB resocialization of athletics begins with the implementation of COVID testing, as described in Attachment E.

### General Safety Practices

All student-athletes receive general safety education regarding COVID-19.

Attachments A and B provide more details regarding risks associated with COVID-19.

UMHB and its Athletics division will not be able to eliminate the risk of COVID-19 exposure and infection; however, its plans and policies outline the ways in which students and staff can cooperate to help reduce the risk.

- All CDC and State of Texas guidelines regarding group gathering size and maximum room capacity, based on physical distancing, should be followed.
- Student-athletes should be trained in cohorts, and documentation of groupings should be kept for contact tracing.
- All athletic-related activities should be scheduled in a way to reduce interactions between multiple groups, and to limit the number of individuals entering and exiting in the same time period.
- All student-athletes, coaches, and staff should refrain from physical contact such as high-fives, back-slaps, and handshakes.
- All student-athletes will be required to sign the [UMHB CRU PLEDGE](#) prior to arrival on campus. The Pledge is available at the end of this plan.

### **Mitigating Risk With Pre-Participation Assessment**

COVID-19 Screening: All UMHB students must complete an initial screening form prior to arriving on campus.

Newcomer, student-athletes are required to have completed a medical history and physical before reporting to campus. Returning, student-athletes' medical histories were reviewed.

### **Mitigating Risk With Daily Self-Health Checks**

Every student-athlete and all athletics personnel should practice at least daily self-health evaluations before participating in any aspect of in-person athletics activities.

Individuals who identify any of the following symptoms or signs during the daily self-health evaluation must stay home and follow the university's reporting protocols published in the [Health and Safety Protocols section](#) of the university's [Safe Return to Campus Plan](#).

- Shortness of breath or difficulty breathing
- Cough or other respiratory symptoms
- Headache
- Chills
- Muscle aches
- Sore throat
- Congestion or runny nose
- New loss of taste or smell
- Nausea, vomiting or diarrhea
- Temperature of 100.0° Fahrenheit or above
- Close contact with an individual who is lab-confirmed COVID-19 positive

## Mitigating Risk With Daily Screening Requirements Specific to Athletic Facilities

- All athletic staff, student-athletes, or other individuals entering an athletic facility will be required to have their temperatures and symptoms monitored daily prior to entering the facilities.
- In the event that any student-athlete, at any time, reports COVID-19 symptoms, with or without an abnormal temperature, the VP for Student Life or his designee will be notified. Student-athletes should NOT come to any campus facility until receiving further instruction from the VP for Student Life or his designee.

## Mitigating Risk With Face Coverings and Physical Distancing

- **Face Coverings:** Student-athletes must follow the university's face coverings protocols published in the [Health and Safety Protocols section](#) of the university's [Safe Return to Campus Plan](#). Based on CDC guidance, all participants should wear face coverings (i.e. masks) at all times, especially when physical distancing measures are difficult to maintain. Face masks should not be worn while engaged in physical activity. They are required to be worn at all other times while inside the athletic facility, and outdoors when physical distancing guidelines are not practical.
- **Physical Distancing:** Student-athletes must follow the university's social distancing protocols published in the [Health and Safety Protocols section](#) of the university's [Safe Return to Campus Plan](#). Based on CDC guidance, all student-athletes and staff must practice physical distancing (at least six feet apart) at all times.

## Mitigating Risk With Personal Sanitation Measures

Student-athletes must follow the university's personal hygiene and etiquette protocols published in the [Health and Safety Protocols section](#) of the university's [Safe Return to Campus Plan](#). Based on CDC guidance, all student-athletes will be reminded to wash their hands as much as possible, especially prior to and after using equipment, receiving medical treatment, and before and after workouts. Alcohol-based hand sanitizer should be used frequently when hand washing is unavailable and will be readily available throughout all athletic facilities.

## Mitigating Risk With Cleaning and Disinfecting Protocols

Student-athletes must follow the university's cleaning protocols published in the [Cleaning Protocols section](#) of the university's [Safe Return to Campus Plan](#).

The university has implemented significant cleaning and disinfecting measures which will be coordinated for Athletics by Physical Plant and Athletics staff.

- Deep cleaning has recently occurred in all campus facilities.
- All athletic facilities and equipment will be cleaned and disinfected on a daily basis and at regular intervals throughout the day in high-use areas.
- An electrostatic disinfecting sprayer is used where appropriate in athletics facilities.
- Additional cleaning measures will be taken if the university is notified that an individual with symptoms related to COVID-19 was, or currently is, on campus.

## **Mitigating Risk with Athletic Training Room (ATR) Protocols**

- Athletes are instructed to complete a symptom self-check and temperature check will be required to enter an ATR.
- A temperature of 100.0 or above indicates a student-athlete will not be permitted to participate in athletic activity and will be referred according to the institutional policy.
- Student-athletes will be required to wear a mask and are asked to bring their own. Physical distancing protocols will be followed unless medical treatment dictates otherwise.
- The ATR facility will follow the appropriate capacity recommendations.
- Appointments will be scheduled to allow for appropriate cleaning in between appointments.
- Appointments should be made prior to lifting and practice times.
- Participants must pay attention to directional signage developed to promote physical distancing.
- All daily cleaning and sanitization will be completed in accordance with CDC guidelines.

## **Mitigating Risk with Athletic Facilities Protocols**

- Visitors may be allowed in certain venues during competitions, according to federal, state and local guidance, and university policy in effect at the time of each game. Specific details will be published prior to competitions.
- An athletics staff member will conduct the required daily screening and temperature check. After receiving authorization, student-athletes will be encouraged to wash or sanitize their hands at the designated location before proceeding.
- Participants must pay attention to directional signage developed to promote physical distancing.
- Team meetings and film sessions will typically be held in-person with proper social distancing, mandatory face masks, hand sanitizing upon entry, and respiratory etiquette. Virtual meetings may be held when appropriate and student-athletes should be prepared to participate in virtual meetings on time and with the required electronic equipment needed to participate. Student-athletes may not group together in other campus areas to attend virtual meetings (i.e. in campus housing rooms, off campus locations, etc.).

## **Weight Room Protocols**

- All athletes are encouraged to wash their hands immediately prior to entering the facility. Hand sanitizers will also be available throughout the facility to be used during training.
- Weight room access will be by group-assigned times slots or appointment only, and appropriate physical distancing and group gathering guidelines will be followed.
- Each piece of equipment will be cleaned following each use, and at least 15 minutes between training groups should be allowed for sanitization.
- Outdoor training space will be utilized whenever possible to include field space and the use of outdoor tents.
- All staff are required to wear face masks in the facility when working with student-athletes. If outdoors, masks are required if social distancing cannot be maintained.

### **Locker Rooms**

- Locker rooms may be used during voluntary, strength and conditioning sessions and practices.
- Physical distancing guidelines must be followed, and masks will be worn at all times.
- Some football players will utilize the auxiliary and visitor locker rooms located in Crusader Stadium.
- Student-athletes may use their assigned locker to store their cell phone, keys, or other personal items during workouts.
- No loitering in the locker room will be permitted.
- Locker rooms will be sanitized daily in accordance with CDC guidelines.

### **Laundry**

- All towels and apparel will be washed in accordance with CDC guidelines.
- Bins will be designated for dirty laundry in select locations, and laundry chutes at both equipment room locations may be used.
- Daily uniform laundry service will be provided for student-athletes

### **Food and Beverages**

- Student-athletes must follow the university's dining services protocols published in the [Dining Services section](#) of the university's [Safe Return to Campus Plan](#).
- Individual water bottles and cups will be provided.

## **Mitigating Risk with Outdoor Training**

Training should occur outdoors. When not feasible, indoor training with good ventilation is available. To de-densify practice sessions, student-athletes will practice in smaller groups when possible. Each coach will provide a specific practice schedule and health protocols.

## **Mitigating Risk with Protocols Regarding Student Housing**

Student-athletes must follow the university's housing protocols published in the [Student Housing](#) section of the university's [Safe Return to Campus Plan](#).

## **Mitigating Risk with Protocols Regarding Health**

### **Response to Symptoms and Diagnoses**

Individuals who identify any of the symptoms or signs during the daily self-health evaluation discussed in a previous section of this plan must stay home and follow the university's reporting protocols published in the [Health and Safety Protocols section](#) of the university's [Safe Return to Campus Plan](#).

### **Return to Participation**

Once a student-athlete is fully recovered and asymptomatic after successful isolation, the process to return to athletically-related activity will be determined based on the individual student-athlete's condition by the Athletic Training Department, in conjunction with the team's medical director. See Attachment C for more details.

## **Mental Health**

All mental health issues that may arise from a student-athlete will be handled through the student-athlete's own mental health counselor or the [UMHB Student Counseling Center](#). Telehealth visits with the UMHB Student Counseling Center are currently being offered and can be scheduled as needed. Any student-athlete that presents to an athletic trainer, sport coach, or strength and conditioning coach with a mental health issue will be promptly referred to the UMHB Student Counseling Center.

## **Mitigating Risk by Practicing Social Responsibility in Activities, Both On and Off Campus**

Guided by our mission, vision and values, and grounded in 175 years of history, UMHB is committed to social responsibility. We view social responsibility as our collective and individual obligation to behave and act in ways that are in the best interest of others in our communities and our society.

Now more than ever, it is important for all of us to focus on civility, courtesy, compassion, and dignity, and seek to understand one another by genuinely caring for each other. With our nation confronting the COVID-19 pandemic, we must rise to the occasion by being responsible for ourselves and each other during these unprecedented times.

- Don't go to large parties, events, or other social gatherings. Large gatherings are a significant cause of COVID-19 transmission.
- Please do not attend or host even small events, parties, or gatherings, unless everyone is strictly practicing social distancing and other safety protocols.
- Hold your friends and peers accountable to the Cru Pledge to help keep our campus safe. See Attachment D – The Cru Pledge.

## **Attachment A**

### **Covid-19 Risk Categories for Each Sport**

The categorization of sport risk is based on consensus from the NCAA COVID-19 Advisory Panel and the American Medical Society for Sports Medicine COVID-19 Working Group and on the probability and significance of respiratory droplet spread during vigorous exercise when physical distancing and masking are not applied or are not possible. Importantly, the sport classification refers to sport-specific training and competition, and not cross-training or other aspects of training.

The risk assessment has now been updated below to include all NCAA-sponsored sports, including Fall, Winter, and Spring sports and will be utilized by UMHB.

- **Low contact risk:** golf, tennis, cross country
- **Medium contact risk:** acrobatics and tumbling, baseball, softball, soccer
- **High contact risk:** basketball, football, volleyball

## Attachment B

### Risk of Transmission of COVID-19

As reported by the CDC, while surface contact may be a risk, the most impactful determinant of COVID-19 spread is human-to-human contact. COVID-19 spread is greatest when individuals are in a crowded environment with prolonged close contact. Further, the risk of COVID-19 transmission is greater in indoor areas with poor ventilation. Indoor areas with good ventilation are better, and outdoor areas are best. Thus, COVID-19 spread is most likely when individuals are in prolonged close contact in an indoor area with poor ventilation, which has implications for both sport training and sport competition planning.

The CDC defines high risk of COVID-19 transmission as any situation in which there has been greater than 15 cumulative minutes of close contact, defined as being less than 6 feet apart, with an infectious individual. Importantly, there is a risk of transmission from being present with infectious individuals who are symptomatic, pre-symptomatic or asymptomatic.

Asymptomatic spread of COVID-19 is of significant concern in the college sport environment because, like the broader student body, it is largely composed of younger adults (18-29 years of age). These individuals will often remain asymptomatic after being infected with SARS-CoV-2, but even though they have no symptoms, they are still capable of spreading this virus, which causes COVID-19. If they infect another younger adult, the risk of an adverse outcome is low, although the long-term consequences to cardiopulmonary health to themselves or other younger adults remain unknown. In contrast, contact with that same asymptomatic/minimally symptomatic individual presents a potentially lethal risk for high-risk category individuals who are far more likely to have an adverse outcome if infected with the coronavirus that causes COVID-19. Relatedly, pre-symptomatic spread is also a concern, as these individuals are infected with COVID-19 but have not yet developed symptoms or signs of this disease.

The CDC recently updated its guidance to emphasize that, among adults, the risk for severe illness from COVID-19 increases with age, with older adults at highest risk and 8 out of 10 COVID-19-related deaths reported in the United States to date occurring in adults age 65 and older. In addition, the CDC also has established that individuals of any age with the following underlying medical conditions are at increased risk:

- [Chronic kidney disease](#)
- [COPD \(chronic obstructive pulmonary disease\)](#)
- [Immunocompromised state \(weakened immune system\) from solid organ transplant](#)
- [Obesity \(body mass index of 30 or greater\)](#)
- [Serious heart conditions, such as heart failure, coronary artery disease, or cardiomyopathies](#)
- [Sickle cell disease](#)
- [Type 2 diabetes mellitus](#)

Finally, the CDC has advised that children who have complex medical situations, who have congenital heart disease or who have neurologic, genetic, metabolic conditions are at higher risk for severe illness from COVID-19 than other children.

While data is still fairly limited, the CDC has said people with the following conditions ***might*** also be at an increased risk for severe illness from COVID-19:

- [Asthma \(moderate to severe\)](#)
- [Cerebrovascular disease \(affects blood vessels and blood supply to the brain\)](#)
- [Cystic fibrosis](#)
- [Hypertension or high blood pressure](#)
- [Immunocompromised state \(weakened immune system\) from blood or bone marrow transplant, immune deficiencies, HIV, use of corticosteroids or use of other immune weakening medicines](#)
- [Neurologic conditions, such as dementia](#)
- [Liver disease](#)
- [Pregnancy](#)
- [Pulmonary fibrosis \(having damaged or scarred lung tissues\)](#)
- [Smoking](#)
- [Thalassemia \(a type of blood disorder\)](#)
- [Type 1 diabetes mellitus](#)

As published data confirms that the risk of death from COVID-19 increases with age and high-risk underlying medical conditions, students and student-athletes who are not in high-risk categories themselves may be unlikely to have complications from COVID-19, but they represent a significant threat to any high-risk category individuals with whom they may have unprotected contact. These risks must be considered as part of the risk/benefit ratio of resocialization of collegiate sport. Of note, sports such as football may have an overrepresentation of student-athletes (for example, football linemen) who meet the high-risk criteria as it relates to obesity.

Student-athletes should always check the [CDC website](#) for updated information on these risk factors.

## Attachment C

### Return to Participation Considerations After COVID-19 Isolation/Recovery

COVID-19 has undoubtedly increased the complexities and will continue to impact health and safety considerations related to returning to participation in athletics.

*This information is intended as a general guide and may be updated from time to time as new information becomes available from the CDC, state and local health officials or other relevant sources.*

#### Positive test, Asymptomatic

The CDC has published strategies for the resumption of normal activities for people who have tested positive for COVID-19 but **who have not had any symptoms**. Any decision to discontinue isolation of infected individuals should be made in the context of local circumstances.

##### *Symptom-based strategy*

*For individuals who test positive but never develop symptoms, isolation and other precautions can be discontinued 10 days after the date of their first positive test.*

#### Positive test, Symptomatic

The CDC has published strategies for the resumption of normal activities for people who have tested positive for COVID-19 and **who have symptoms**. Any decision to discontinue isolation of infected individuals should be made in the context of local circumstances.

##### *Symptom-based strategy*

*For most people with COVID-19 illness, isolation and precautions can generally be discontinued 10 days after symptom onset and resolution of fever for at least 24 hours, without the use of fever-reducing medications, and with improvement of other symptoms.*

A limited number of people with severe illness may warrant extending duration of isolation and precautions for up to 20 days after symptom onset; consultation with infection control experts should be considered.

For people who are severely immunocompromised, a test-based strategy could be considered in consultation with infectious diseases experts, but for all others, a test-based strategy is no longer recommended except if considering discontinuation of isolation other than as outlined above.

For certain populations, including those containing individuals with conditions that may weaken their immune system, a longer isolation timeframe for infected individuals may be desired to minimize the chance of prolonged shedding of the virus. Similarly, it should be noted that recommendations for discontinuing isolation in people known to be **infected** with COVID-19 may be different than CDC recommendations on when to discontinue quarantine for people known to have been **exposed** to COVID-19.

For example, the CDC still recommends 14 days of quarantine after high-risk exposure based on the time it takes to develop illness if infected. Thus, it is possible that a person known to be

infected, but who has been tested, could leave isolation earlier than a person who is quarantined, but who has not been tested, because the possibility of infection remains where testing has not occurred.

UMHB protocols regarding quarantine and isolation are published in the [Health and Safety Protocols section](#) of the university's [Safe Return to Campus Plan](#).

### **Cardiac and Exercise Activities During and After COVID-19**

The COVID-19 virus can potentially negatively impact any endothelial structure, including the heart and lungs, thereby posing a potential risk to individuals who return to exercise post-infection.

#### **Cardiac Recommendations**

1. Athletes with a confirmed past infection (antibody or prior diagnostic test), and mild illness or asymptomatic, (i.e., managed at home):
  - Evaluation by athletic training staff and results will be sent to team physician. Team physician will determine if athlete can begin the return to play protocol or require a consultation.
  - Further workup as indicated.
2. Athletes with a confirmed past infection with moderate to severe illness or ongoing cardiovascular symptoms:
  - Evaluation by athletic training staff and results will be sent to team physician.
  - Additional testing, which may include:
    - Cardiology consult, electrocardiogram; blood troponin 48 hours after exercise and echocardiogram.
    - Consider additional cardiac tests such as cardiac MRI, Holter, stress test, chest X-ray, spirometry, pulmonary function tests, d-dimer and chest CT.

#### **Exercise Recommendations**

1. Athletes with new infection and either no symptoms or mild illness.
  - No exercise for at least 10 days, or longer if symptoms persist.
  - Monitor for development of symptoms during isolation.
  - Cardiac recommendations as above.
2. Athletes with new infection and mild illness (common cold-like symptoms without fever):
  - No exercise for at least 10 days, or longer if symptoms persist.
  - Monitor for symptom development with exercise.
  - Cardiac recommendations as above.
3. Athletes with new infection and moderate illness (fever and flu-like illness):
  - No exercise for at least 14 days, or longer if symptoms persist.
  - Monitor for symptom development with exercise.
  - Cardiac recommendations as above.
4. Athletes with new infection and severe illness (hospitalized):
  - For more severe illness, hospitalization, or ongoing symptoms, a comprehensive medical evaluation and cardiology consult is recommended.

## Attachment D

### The Cru Health and Safety Pledge

As a member of the UMHB community, to responsibly help mitigate the potential spread of COVID-19, I promise to:

#### CARE FOR MYSELF AND OTHERS:

- Read and comply with the Safe Return to Campus plan, which includes training materials and health/safety protocols.
- Follow all UMHB health and safety protocols
- Conduct daily self-screening.
- Stay home and not enter campus facilities if I feel sick.
- Stay home and not enter campus facilities if I have been exposed to someone who has tested positive for COVID-19.
- Properly wear a face covering when in common areas of campus, including all classrooms.
- Wash or sanitize my hands often.
- Follow social distancing protocols (at least 6 feet of distance and limitations on numbers of individuals gathering in a common location) both on and off campus, not making assumptions about who may be more vulnerable to contracting this illness.
- Keep my clothing, belongings, personal spaces and shared common spaces clean, and not share personal items such as cell phones, eating utensils and water bottles with others, which could spread the COVID-19 virus.

#### RESPECT OUR CAMPUS AND SURROUNDING COMMUNITY:

- Follow all directions given by university officials and displayed on university signage.
- Be respectful and responsive when others remind me of these health and safety protocols.
- Pay attention to and observe national, state and local directives.
- Remember that not everyone is affected the same by COVID-19. By complying with COVID-19 health guidelines, I will help those who are most vulnerable to stay safe.

#### REPORT

- Stay home and immediately notify Dr. Brandon Skaggs at (214) 704-1168 or Michael Burns at (405) 308-7336 or [student.covid@umhb.edu](mailto:student.covid@umhb.edu) should I develop any of these symptoms: cough, shortness of breath or difficulty breathing, chills, repeated shakes with chills, muscle pain, headache, sore throat, loss of taste or smell, diarrhea, feeling feverish or a measured temperature of 100 F; or if I have known close contact with someone who is lab-confirmed positive to have COVID-19.
- I understand that contacting other faculty or staff does not fulfil my duty to immediately report to Dr. Skaggs or Mr. Burns.

I acknowledge that this Promise is a condition of my ability to participate in the 2020-21 academic year and utilize university facilities. My failure to comply may lead to immediate removal from classes, from campus and/or the inability to use certain facilities. Violations of this Promise will be referred, reviewed and adjudicated in accordance with the procedure outlined in the [UMHB's Code of Student Conduct](#).

# Attachment E

## Spring 2021

### COVID -19 Testing Protocols for Each Sport by Risk Category

These testing protocols will apply to student-athletes, coaches, athletic trainers, team medical staff and equipment staff, and volunteers as applicable, hereafter referred to as Testing Groups.

These testing protocols will apply to any competition where two or more ASC member institutions are involved. This includes competitions classified as conference and/or non-conference.

#### Section One Spring Baseline Testing

Baseline testing for individuals in all 3 categories will be conducted in early January by UMHB's qualified vendor, as students arrive on campus for Spring 2020 semester.

#### Section Two ASC Competition Testing

**Competition testing protocol for High Contact Risk sports:** (Basketball, Football, Volleyball)

COVID Testing will be conducted for 100% of the designated Testing Groups in this category by UMHB's qualified testing vendor, each week of ASC competition.

- The tests must be conducted within 72 hours of the **first** ASC competition in every week of competition with ASC opponents.
- Results must be received no later than 24 hours prior to that first ASC competition in each applicable week.
- For purposes of this testing protocol, a week (a period of 7 days) will be defined by the university for each team in accordance with any applicable rules or regulations. For example, a week may be defined as Wednesday – Tuesday for one team, and as Saturday – Friday for another team, depending on competition schedules.

**Competition testing protocol for Medium Contact Risk sports:** (Baseball, Softball, Soccer and Acrobatics and Tumbling:

COVID Testing will be conducted for the designated Testing Groups in this category by UMHB's qualified testing vendor, in a rotating method of 25% of the Testing Groups each week of ASC competition for that sport.

- The tests must be conducted within 72 hours of the **first** ASC competition in every week of competition with ASC opponents.
- Results must be received no later than 24 hours prior to that first ASC competition in each applicable week.
- A week for these purposes will be defined for each team in accordance with any applicable rules or regulations. For example, a week may be defined as Wednesday – Tuesday for one team, and as Saturday – Friday for another team, depending on schedules.

**Competition testing for Low risks sports** (Cross Country, Golf, Tennis) is required only for individuals who are symptomatic. The university's reporting and isolation protocols will be followed, and individuals in these Testing Groups who report symptoms will be notified of their testing schedule.

The university reserves the right to amend this testing protocol, and/or to add additional testing requirements as needed.