

## Considerations for Student-Athlete Required Physical Activity While in Isolation for COVID-19

In August, the expert panel with members of the American Medical Society for Sports Medicine and the American College of Cardiology updated the [cardiac considerations](#) for college student-athletes who have been infected with COVID-19. One change was a recommendation to consider exercise in isolation after three days in individuals with asymptomatic or mild illness, and to consider exercise in isolation after five days in individuals with moderate illness or initial cardiopulmonary symptoms and resolution of symptoms.

Following this update, the NCAA has received multiple questions regarding whether an institution may require participation in physical countable athletically related activity (e.g., required strength and conditioning workouts) for a student-athlete who is in isolation due to a positive test for COVID-19. As such, the following guidance was developed to remind institutions of the relevant legislative and policy considerations when requiring physical CARA:

The institution should carefully review, with applicable medical staff, all available guidance and information pertaining to participation in physical activity by individuals testing positive for COVID-19 and the related risks. This should be done for each case to assess the unique facts and circumstances of each isolated student-athlete. In addition, the institution should review with medical, risk management and other relevant institutional personnel the institutional obligation to protect the health of and provide a safe environment for each student-athlete. These legislative and policy obligations include, among others, those described in Division I Bylaw 17.1.6 and the *Interassociation Recommendations for Preventing Catastrophic Injury and Death in Collegiate Athletes*, which provide that:

- In Division I, per Bylaw 17.1.6, an institutional staff member with current certification in first aid, cardiopulmonary resuscitation (CPR) and automated external defibrillator (AED) must be present any time a student-athlete is participating in physical CARA;

And in all divisions:

- Institutional medical staff should be properly consulted on for any required CARA and must retain ultimate discretion as to the appropriateness of any physical activity;
- Workout plans should be prepared in advance, should be documented and should account for a wide variety of risks including, among others, head and neck injuries, cardiac arrest, exertional heat illness and heat stroke, exertional rhabdomyolysis, asthma, exertional collapse associated with sickle cell trait and diabetic emergency; and
- Each institution should establish a well-rehearsed and venue-specific emergency action plan to properly respond to any traumatic or non-traumatic catastrophic event.

In sum, before imposing such a requirement, the institution must confirm that such activity is medically appropriate for the student-athlete and proactively determine whether and how health and safety obligations can be adequately managed while the student-athlete is in isolation. Further,

the institution must determine how it will respond in the event that an unsafe workout environment is observed or in the event that an injury or medical emergency occurs.