



IN STADIUM OUTDOOR ATHLETICS

COMPETITION –

COVID-19 GUIDELINES

Drafted by World Athletics Health and Science Department

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A) PURPOSE

- These Guidelines are designed to address health and safety organizational aspects to consider for one-day stadium-based outdoor Athletics competition, under the threat of a COVID-19 pandemic situation, especially in phases 4, 5, 6 and post peak period, as described by the World Health Organisation (WHO). For a description of these WHO pandemic levels, please refer to the following weblink : https://www.who.int/influenza/resources/documents/pandemic_phase_descriptions_and_actions.pdf?ua=1). These Guidelines are based on available scientific and medical knowledge regarding SARS CoV-2; the virus responsible for COVID-19.
- These Guidelines represent guidance on the recommended minimum requirements that competition organisers should consider to ensure personal and public health for the following target groups:
 - Professional Athletes
 - Professional Athletes' staff: coaches, managers, physiotherapists, etc...
 - Event Technical Officials
 - Event Volunteers and Workforce (sponsors and partners, timing and accreditation systems, security, and stadium support services)
 - Event Medical and Anti-Doping Staffs
 - Media and Broadcasters
- These Guidelines do not apply to attending spectators, which should be dealt separately by the local authorities and/or the event venue operators according to current public health and security regulations and guidance. The WHO has produced helpful document and risk assessment tools for mass gatherings. Therefore, competition organizers are strongly advised to use these tools (<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/technical-guidance/points-of-entry-and-mass-gatherings>)
- The objective of these Guidelines is to assist to minimize the risk from COVID-19 as much as possible, bearing in mind that some risk, yet negligible, will always remain.
- These Guidelines are intended to guide and support competition organizers in the implementation of the health and safety measures at their events once the local government and/or public health authorities have authorized the staging of the competition. Local or national public health and safety legislation, regulations and restrictions that must be complied with take precedence over these Guidelines.
- The one-day stadium competition organisers should make sure they have a clear policy on personal liability. This policy should consider the legal aspects related to the organisation of a competition under an outbreak situation, and should be disclosed to athletes, athlete representatives, and staff.

- These Guidelines are a dynamic document forming part of a tool for guidance and will be updated as soon as more evidence and scientific-based knowledge on the COVID-19 pandemic becomes available.
- Competition organisers should monitor changes to local legislation, regulations and government and public health authorities' guidance and review risk assessments, policies, and procedures as appropriate to ensure that compliance with local health and safety laws is maintained.

B) PRE-EVENT GUIDELINES

To avoid and minimise interactions between individuals as far as possible, it is recommended to limit attendance at the event to those considered essential to the running of the venue, event, and competition.

As soon as the competition organisers are aware of an outbreak situation at stages described above, it is recommended to appoint a medical doctor or a public health specialist in a COVID-19 coordination role. This person will be responsible for the risk assessments and implementation of risk mitigation measures at the event. He or she will have a central coordination and communication role with the parties i.e. competition organisers, event venue operators/owners, local public health authorities and sport teams.

1. Invitation of athletes, athletes' staff, non-local technical officials, and non-local workforce

Athletes, athletes' staff, non-local technical officials, and non-local workforce should spend the least necessary amount of time in the city hosting the outdoor stadium competition. The optimal duration of stay is 72 hours. Some specific workforce groups like timing system, broadcasting staffs could, on an exceptional basis, be allowed to stay beyond the 72-hour period, for operational reasons only.

If D_0 is considered the day of the event, most athletes and their staff should arrive on site at D_{-1} and leave at D_1 .

Athletes and athletes' staff travelling from other regions of the world with a significant time difference, might be allowed to arrive in the competition city a day earlier (D_{-2}), to recover from jetlag and travelling.

The Individual Risk Assessment

This individual risk assessment should be performed for the following groups of accredited persons:

- Professional Athletes
- Professional Athletes' staff: coaches, managers, physiotherapists, etc...
- Event Technical Officials
- Event Volunteers and Workforce (sponsors and partners, timing and accreditation systems, security, and stadium support services)
- Event Medical and Anti-Doping Staffs
- Media and Broadcasters

The score (from 0 to 4) is calculated as below (Yes: 1 point, No: 0 point):

- Non-Local (it is up to the outdoor stadium competition chief medical officer to define the criteria used to define the Local/Non-Local groups);
- Accredited to access one of the following sensitive zones:
 - Field of Play (FoP) from 2 hours before the opening of the competition (FoP_{h-2}),
 - Warm-Up zone,
 - Mixed Zone,
 - Call Room,
 - Combined events athlete recovery room,

- Indoor Media Centre (if any)
- Medical stations,
- Anti-doping area.
- Age above 65 years old or diagnosed with one of the following conditions: pregnancy, obesity, diabetes, high blood pressure, history of stroke, chronic pulmonary or cardiac disease, chronic renal failure with dialysis, chronic liver disease with cirrhosis, decreased immune function;
- Potential contacts with the public pre-per and post event (as described in this document).

If the score is equal or superior to 2 points, the individual should undergo a Medical Clearance Protocol.

Medical Clearance Protocols

SARS CoV-2 genetic material can be identified by using a nasal swab and Polymerase Chain Reaction (PCR) test on the collected sample. Although 20-30% of samples collected on COVID-19 infected individuals can return negative result, this is still the only validated testing protocol that is recommended by the WHO. Results from blood serological tests will NOT be accepted as a part of the Medical Clearance Protocol.

There are three of Medical Clearance Protocols, and the decision on which protocol to be used for an individual is based on:

- the outbreak stage in the city where the competition is organised,
- whether or not the individual is an accredited athlete or not. The group of non-athlete includes athletes' staff like coaches, managers, physiotherapists, event technical officials, event volunteers and workforce (sponsors and partners, timing and accreditation systems, security, and stadium support services), event medical and anti-doping staffs, media and broadcasters.

The type of suggested Medical Clearance Protocol is summarised in the Table 1 below.

Table 1: Decision table for suggested Medical Clearance Protocols

		Accredited Groups	
		Athletes	Non-Athletes
Outbreak Stage	Stage 4	Light	Light
	Stage 5 or Post Peak	Medium	Light
		Strong	Medium
Stage 6	Strong	Medium	
			Strong

It is recommended to run this decision table each time there is a change in the outbreak stage.

The “Strong” Medical Clearance Protocol

This protocol is only for accredited persons with an individual risk assessment score of 2 points or above.

To comply with the Strong Medical Clearance Protocol, an individual must:

- have a consultation with a medical doctor performed at her/his living/training place between D₋₄ and D₋₂ to check for the absence of subclinical symptoms of a COVID-19 infection,
- perform two nasal swabs for PCR analysis at 24-hour interval at D₋₄ and D₋₃ respectively
***: both swabs must return negative results,**
- fill, sign together with her/his medical doctor the medical information and the permission (medical information release) forms (see Appendices A and B) and email it **with the two negative PCR results before traveling**, to the competition organizer at a dedicated and confidential medical e-mail address:

*: For individuals travelling from far away (intercontinental flights), the second nasal swab could exceptionally be performed at D₋₂ on the site of the one-day competition.

The Medium Medical Clearance Protocol

This protocol is only for accredited persons with an individual risk assessment score of 2 or more points.

To comply with the Medium Medical Clearance Protocol, an individual must:

- have a consultation with a medical doctor performed at her/his living/training place between D₋₄ and D₋₂ to check for the absence of subclinical symptoms of a COVID-19 infection,
- perform one nasal swab for PCR analysis at D₋₄ or D₋₃ *: **swab must return negative result,**
- fill, sign together with her/his medical doctor the medical information and the permission (medical information release) forms (see Appendices A and B) and email it **with the negative PCR result before traveling**, to the competition organizer at a dedicated and confidential medical e-mail address:

*: For staff travelling from far away (intercontinental flights), the nasal swab could exceptionally be performed at D₋₂ on the site of the one-day competition.

The Light Medical Clearance Protocol

This protocol is only for accredited persons with an individual risk assessment score of 2 or more points.

To comply with the Light Medical Clearance Protocol, an individual must:

- have a consultation with a medical doctor performed at her/his living/training place between D₋₄ and D₋₂ to check for the absence of subclinical symptoms of a COVID-19 infection,
- fill, sign together with her/his medical doctor the medical information and the permission (medical information release) forms (see Appendices A and B) and email it to the

competition organizer at a dedicated and confidential medical e-mail address:

.....

The LOC should prepare, in agreement with the local public health authorities, a plan to manage with potential positive PCR (performed onsite) test results and/or COVID-19 symptomatic individual. This include isolation and medical procedures.

The LOC with the help of the COVID-19 coordinator and the Chief Medical Officer should make sure that storage and retention of medical data, as described in these Medical Clearance Protocols, are in compliance with local data protection legislation and regulations.

Failure to comply with the Medical Clearance Protocol will prevent the individual to be accredited and/or take part in the competition.

2. Transportation of athletes and staff to the event hotels

The Local Organising Committee (LOC) will organise a welcome desk at the airport or railways station where athletes, staffs and other non-local workforces will arrive. At arrival at the welcome desk, each accredited individual will be given a health welcome bag that includes:

- non reusable masks (3 masks per day as a minimum)
- two small bottles of hydroalcoholic gel as hand sanitizer
- cleaning (disinfectant) wipes

- a leaflet explaining all safety and health plans and protocols to be followed by the accredited invited individual, complying with the local legislation, regulations, and local government and public health authorities' guidance.

Transport of accredited individuals from the airport or railway station directly to the competition hotels will be done by car, private shuttle or bus with all passengers and driver wearing a mask and seated at a minimum distance from each other in accordance with the social distancing rules and guidance issued by the local government and/or public health authorities (usually between 1.5 and 2 metres).

Once arrived at the hotel, the accredited individuals will have to strictly comply with the hotel rules of social distancing and all other COVID-19 prevention policies. The LOC should organise with the hotel management dedicated lanes and procedure to facilitate a fast track check-in. In public places where athletes and athletes' staff will have access, one-way flows should be implemented to avoid mixing of people, limit contact, and maintain social distancing.

3. Medical Encounter Registry and Data Protection

It is strongly recommended that the LOC and the one-day competition Chief Medical Officer organise and use a Medical Encounter Registry. All encounters occurring pre-, during and post-competition should be recorded on a preferably electronic Medical Encounter System. This registry should also include athlete, staff, officials, and workforce contact details to facilitate identification and further contact of potentially infected individuals. This registry should be compliant with local personal data protection legislation, regulations, and policies. As disclosure by athletes, staff, some event technical officials and workforce of their medical data may be requested, it is recommended that this point is, whenever possible, covered by the working contract linking these individuals with the competition organiser. Local legal advice should be sought to cover this important matter, and to ensure compliance with local data protection legislation, regulations, and legal requirements.

4. Pre-competition press conference and individual interviews

Pre-competition press conference

This press conference should be as short as possible, with the minimal required number of journalists and media staff, and whenever possible organised outdoor and social distancing should be maintained. Athletes should attend one by one at the press conference and a precise timeline should be organised and followed. Athletes invited at the press conference should use a dedicated path (different than the one used by the journalists) to enter and exit the press conference location. Athletes and journalists are invited to wash their hands before entering the area.

The head table where the athlete will seat should be at least at 2 metres of distance from journalists. Journalists should also respect social distancing between them and media chairs should be set accordingly. If the conference is held indoor, it is mandatory that journalists wear a mask. Masks for journalists are recommended if the conference is held outdoor.

A microphone should be placed in front of the athlete at the head table. As it is likely that athletes will not wear a mask during the interviews, this microphone should not be touched by athletes and disinfected by a dedicated personnel at the end of the press conference. Mobile microphones can't be place on the head table. LOC should provide the audio splitter for the cameras (to avoid having extra microphones on the head table) and an extra speaker that journalists can place their microphones in front. If there is a necessity for journalist to use a microphone to ask their question, they should then queue, while respecting appropriate social distancing from press conference guests

The LOC should organise disinfection of the head table, chairs and microphones before and after the press-conference.

C) EVENT GUIDELINES

1. Accredited groups entering flows

General principles:

- Entrance of spectators and entrance of accredited personnel in the stadium should be completely separated and the flows should not cross with each other.
- Accredited personnel and workforce will have access to the competition venue only by wearing a face mask, and with their personal hand sanitizer. Spare personal protective equipment should be available at restricted areas entry points.
- For the accredited (sensitive zones) personnel, the access to and the exit from the Call Room, the FoP, and the Mixed Zone should follow a one-way path (clockwise or counter-clockwise).
- Face mask should always be worn by everyone in the stadium, warm-up zone, Media centre, with exception of athletes **when exercising for the purpose of warm-up or competing in their event.**
- Accredited (sensitive zone) groups such as jury, technical officials and technical staff should spend the shortest time as possible on the FoP, corridors, Call Room. Therefore, each of them should be given a personal time schedule explaining when and how they should enter the stadium and reach their assigned working place. Once their duty is completed, they should leave the FoP and all other sensitive zones.
- All accredited personnel should be reminded to take with them a small bag containing masks and hand sanitiser gel, before leaving the hotel to go to warm-up and competition areas.

2. Training and warm up location procedures

To reduce the risk of viral transmission, training should be restricted only to competing athletes. The warm-up zone should be organized in a large open-air area at close walking distance of the competition stadium. This is important to avoid use of shuttles and buses to reach the warm-up and competition areas.

Access to the warm-up area should be strictly controlled. The public should not be able to access the warm-up zone or the close surroundings. Athletes should be invited to enter the warm-up area following a specific timetable, to ensure that social distancing measures can be maintained.

Only one accredited accompanying person (coach, manager, physio,) per athlete will be allowed to enter in the warm-up area. No media should be allowed in the warm-up area.

Before entering in the warm-up zone or their dedicated toilets, all accredited persons should wear a mask and wash their hands with soap and water or with hydroalcoholic gel.

Social distance rules as well as the use of mask is mandatory in the warm-up zone.

To facilitate this process the LOC should set-up the warm-up area so that the crowd is evenly distributed over the entire surface of the warm-up zone. Only athletes can temporarily remove their mask when exercising and warming up.

If the warm-up zone is too small or not in open-air, special attention should be paid to the accredited person flows and timetable in this area. Duplicating the warm-up area is a possible alternative.

If athletes use specific devices to warm-up (throwing events for instance), the LOC should provide each athlete with a “personal” one. If this is not achievable, then the athletes and their

staff should be given clear instructions on the necessary process to clean the devices after each use. The required cleaning products should be available. It is not recommended to have jumping mats in the warm-up area.

When leaving the warm-up area, athletes should directly enter the stadium through the dedicated one-way pathway, to reach the Call Room.

3. Call room flow and procedures

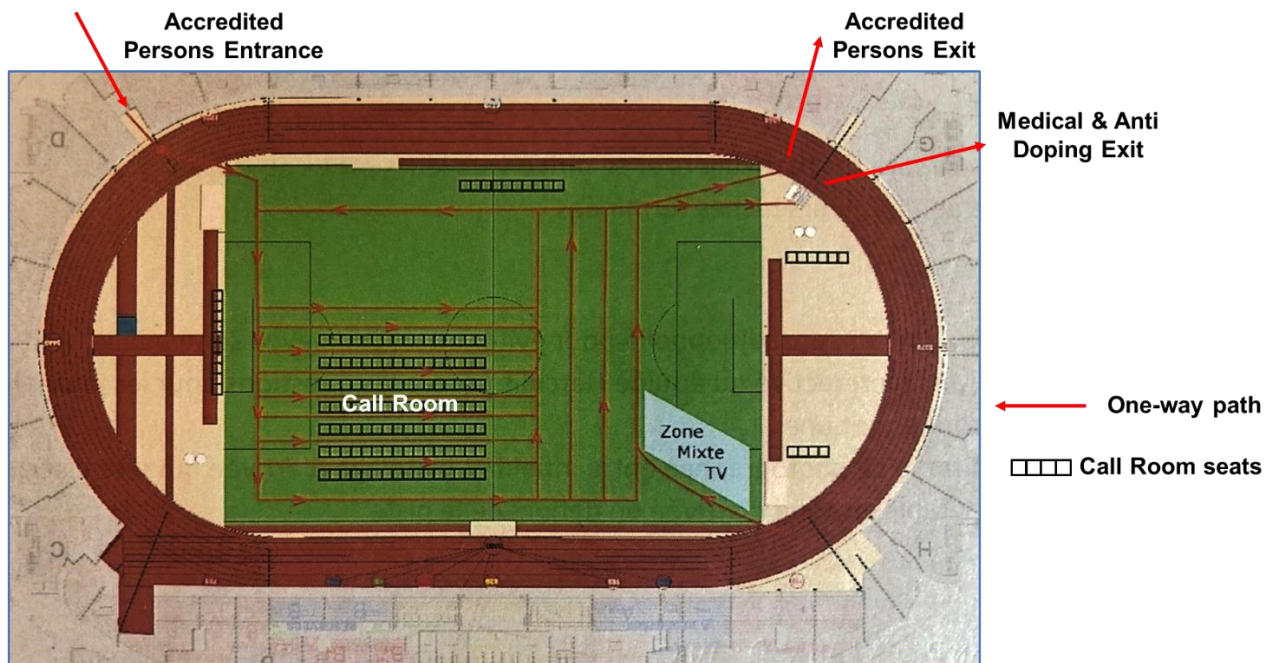
In its usual form of a rather small indoor room with multiple potential direct and indirect contacts, the Call Room is a location with a high risk of viral transmission. Young volunteers are usually operating to recollect baskets that contain athletes' belongings.

To minimise risks, the following recommendations should be implemented:

- All accredited personnel should always wear a mask in the Call Room.
- Do not use volunteers to recover and manage athletes' basket. Should volunteers be recruited as a part of the workforce, the LOC should clearly define and communicate their role, and keep their number at a minimum.
 - The Call Room should be arranged in an outdoor location.
 - A minimum distance of 2 metres between each athlete chair should be observed.
 - Ideally, each event should have its dedicated zone in the Call Room so that chairs are used by a sole person during the whole event. In case this is not possible, it is mandatory to disinfect chairs between each use.
- Using a part of the FOP to accommodate the Call Room is an option. For instance, the Throws areas can be used if no throwing events are organised. The Jumps areas can be used if no or few Jumps events are organised.
- Using a secured part of the warm-up area to accommodate the Call Room is another option.
 - Should the Call Room be organized outdoor, the LOC should consider the need of garden gazebo or tents to protect athletes in case of rain.
- The Call Room should operate with the minimum necessary number of accredited officials.
 - As the use of volunteers to collect baskets is strongly discouraged, athletes are responsible for collecting their bags and belonging right after the end of their race or event. This process should be fast.
 - The Call Room should be in a place which is consistent with the one-way path operated in the stadium.
 - Should the LOC opt for an indoor Call Room, this should be large enough to respect a social distancing of 2 meters minimum. Hand sanitizers and wipes should be available at the entrance of the Call Room.

An example of FoP flows and Call Room set-up is illustrated in the Figure 1 below.

Figure 1. Example of FoP flows and Call Room set-up in an outdoor stadium



4. Field of Play rules for athletes and staff (including referees, staff, and workforce)

It is important for the LOC to keep the number of officials, volunteers and staff working on the track and the fields to a minimum.

a. Middle-distance running events

The very high levels of ventilation achieved by the runners right after crossing the finish line is a situation at significant risk of aerosol and dissemination of the virus. Therefore, right after the crossing of the finish line, the athletes should stay away from the public (victory lap) and to some extent officials. This applies until they return to collect their belongings at their dedicated area in the call room. All technical officials in charge of these events and who could have come close to the athletes during this period (approximately 3 minutes post finish) should wear protective glasses or a plastic face shield in addition of their mask. It is strongly recommended for the anti-doping personnel to delay the notification process for a couple of minutes and to prefer notifying the targeted athletes a bit further down the one-way path.

For the specific case of 3000m steeple chase, virucidal dose of chlorine (or similar chemical) should be added to the water at the river jump.

b. Sprinting events

For long sprints (200m, 400m, 4x400 relays), same preventive measures as for middle distance running events (see above) should apply. In addition, the starting blocks should be cleaned

between each heat or use (by different athletes). Specific surface cleaning procedures should be discussed and agreed with the starting block manufacturers.

Athletes should be prevented to touch hurdles as much as possible. Should this occur, the hurdles should be cleaned by a technical official only. The technical officials in charge of these cleaning procedures (blocks, hurdles) should wear disposable gloves and discard them in a dedicated bin immediately after use.

c. Relays

See above (Sprinting events). In addition, the relay baton should be cleaned by the technical official after being used by the relay teams. Relay team members should be strongly prevented from gathering, hugging, and celebrating at the end of their races.

d. Jumping events

For vertical jump events, the athletes, before and in between attempts, should sit on dedicated and clearly marked chairs while maintaining a minimum distance of 2 meters between each other. Judges and officials should also restrict their moves in the area and should have their preferable place to stand clearly marked on the ground.

The jumping mat is a potential source of indirect contamination and it is recommended that the LOC implement some protection/cleaning procedures to prevent potential cross contamination between athletes. Here after are some examples of procedures which can be implemented:

- Systematic use of hand sanitiser by athlete before each jump could be recommended.
- Between each jump, one or two officials can quickly clean the mat with a floor mopper impregnated with a virucidal solution,
- A thin layer can be unrolled from a roll of recyclable plastic or tissue, cut to a standardised size and placed on the jumping mat by two volunteers (during the warm-up session) or by the official during the official competition. Layers will be left on top of each other, removed from time to time and stored in a dedicated container.

For horizontal jumps, the same rules on distancing and positioning than the vertical jumps should be enforced. The sandpit is a potential reservoir for virus. The scientific data on this topic are scarce and it is important to take a proactive, conservative approach. Therefore, it is recommended, before the start of the event to wet and mix the sand with a solution that contains biodegradable and non-skin aggressive virucide agent (many of them contains oxygen peroxide).

e. Throwing events

The throwing implements should be shared by athletes during warm-up and competition. Officials in charge of collecting, transporting, and recovering implements should clean their hands with a hydroalcoholic gel or use disposable gloves after each handling. The remote-controlled vehicles used to bring implements to the throwing zone should be cleaned with wipes on a regular basis by officials.

f. Combined events

All recommendations described in this document for track and field events should apply to a combined events competition. In addition, the room used by athletes to recover and change between events should be open-air (as much as possible) and large enough to allow distancing. Coaches should be encouraged to interact with their athletes through electronic devices

(smartphone, etc). Competition rules should be softened to make this possible. LOC physios should be preferred to athlete's physio to limit the contact between athletes and other staff members.

5. Media and Mixed Zone

Media Centre and Tribunes

As the Media centre will likely be a closed area, it is recommended that media staff keep their mask while working there. Everyone entering the Media centre should wash their hands before. LOC should make sure that proper disinfection of the area is done before the opening. LOC should secure an intermediate cleaning every 3 hours in the Media centre. A minimum distance of 2 metres between each table/chair (or one spare chair between two persons) or where social distancing is not possible, to use the plexiglass partition (approx 50 cm high) between each working place is recommended. Printing and distribution of printed materials should be kept at a minimum to limit risk of indirect contamination.

The Mixed Zone

The Mixed Zone is another place at risk of viral dissemination. Indeed, it is possible that athletes when entering in the Mixed Zone are still hyperventilating (especially long sprints, middle-long distance run specialists) because of their exertion. Projection of contaminated droplets and aerosols are likely to occur. Therefore, the Mixed Zone's design and access should be carefully considered. The number of media accredited to enter in the Mixed Zone should be kept at a minimum under these exceptional circumstances.

Whenever possible the Mixed Zone should be outdoor, weather conditions allowing it. The Mixed Zone should also be a part of the one-way pathway inside the stadium.

Several options can be considered when designing the Mixed Zone:

- a single post Mixed Zone on the FoP where the LOC Media Manager will take questions from remote journalists and proceed to the interview of athletes after completion of their event. One to three television cameras, each one operated by a single person could record the interview. The athlete will give her/his interview through a plexiglass screen (mask removed) which will be cleaned after each interview.

- a multiple posts Mixed Zone where interview boxes will be set up (see example in Figure 2). An athlete will be able to give interview to media through the plexiglass window. Each Mixed Zone box could host a cameraman and a journalist. Circulation of journalists and cameramen working in the Mixed Zone to other parts of the stadium should be strictly restricted. For written press media 2 journalists per box can be allowed but they will have the right to stop only one athlete for interview.

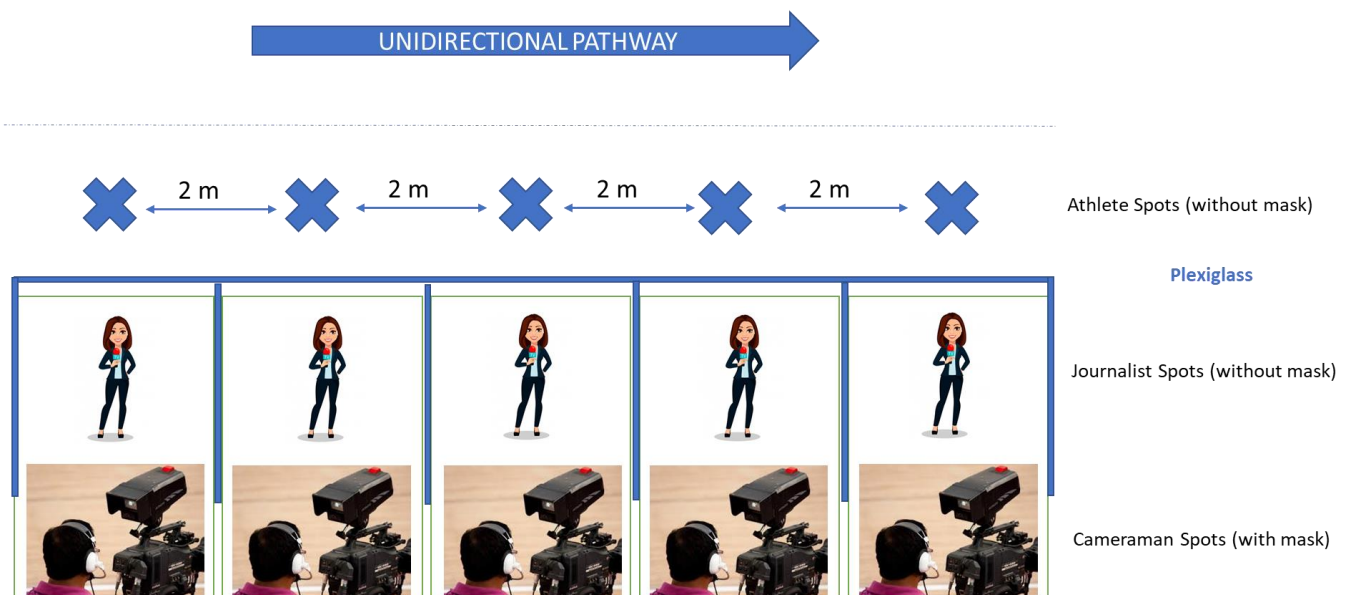
The recommended dimensions for these interview boxes are 2 metres width by 4 metres long. An extra length of 4 metres (unidirectional pathway: 2 metres and athlete spot: 2 metres) should be considered. Overall, each interview box would represent a 16 square metres area.

- should the Plexiglas windows option not considered, a safety dead zone corridor of 3 meters should be organised between athletes and journalists. Both populations are advised to wear mask during the interview. Use of poles and selfie sticks as well as stream live flash interviews on site are then recommended.

- in case an outdoor Mixed Zone should not be possible, the Mixed Zone should be organised in a well-ventilated and large enough room. The rule of 5 square metres per accredited

media person should be followed by the LOC to determine the total size of the indoor Mixed Zone. The set up should be as described in the above options. No other accredited person than athletes, journalists, cameramen, the LOC Media team and medical staff should be allowed in the Mixed Zone.

Figure 2. Example of multiple posts Mixed Zone



Photographers

The number of infield photographers should be kept at a very low level and never above 12. These photographers should wear a mask and be submitted to the Individual Risk Assessment and if appropriate to the Medical Clearance Protocol. Infield photographers should ideally stay within an area in each sector and being instructed on how and when to get in and out and how to move in the infield during the competition. Their moves in the infield should follow the same one-direction pathway as for other accredited persons.

The head-on photo platform should have limited number of dedicated spots for photographers; each spot should be 2 metres from each other. This photo platform should be located on the FoP not far from the one-way path used by athletes, as per World Athletics guidelines.

6. Post-event rooms procedures

There should not be post event room as the athletes will be responsible for collecting their belongings at the Call Room.

7. Broadcasting

Although primarily designed for the UK business, there are well written TV production guidance note dealing with the COVID-19 threat: <https://downloads.bbc.co.uk/mediacentre/tv-production-guidance-managing-the-risk-of-coronavirus-in-production-making-v1.pdf>

The Individual Risk Assessment should be performed to all Broadcasting crew and the Medical Clearance Protocol should be run on those at significant risk.

Broadcasting staff working on the FoP_{h-2} should stay at their workstation during a pre-defined, strict minimum of time. They should avoid unnecessary conversation, observe social distancing rules, and not cross the one-way path used by athletes. Broadcasting staff on stands should avoid contact with the public and spectators and observe social distancing rules. The layout inside broadcasting vans should be organised so that each desk is separated from another by 1.5 m. When this is not possible small partition can be considered. Ventilation inside the van should be organised ideally with open doors while the production process is on. Surfaces, screen, door handles should be cleaned on a regular basis, and a complete disinfection of the van should be done once the broadcasting mission is completed.

8. Award Ceremony

To avoid repeated entries of athletes and officials on the FoP during the competition, it is recommended to not organise a live award ceremony. Alternative solutions using digital solutions should be encouraged.

9. Anti-doping procedures

Anti-doping procedures under COVID-19 outbreak or pandemic situation are extensively described by the World Anti-Doping Agency (WADA) in the following document: [https://www.wada-](https://www.wada-ama.org/sites/default/files/resources/files/20200506_ado_guidance_resuming_testing_en.pdf)

[ama.org/sites/default/files/resources/files/20200506_ado_guidance_resuming_testing_en.pdf](https://www.wada-ama.org/sites/default/files/resources/files/20200506_ado_guidance_resuming_testing_en.pdf)
In addition to these specific guidelines, the number of tested athletes should be limited to the minimum requirements and make sure that the waiting and processing rooms are large enough to accommodate, athletes, accompanying persons, and anti-doping staff whilst maintaining social distancing. It is up to the leader of the competition anti-doping program to decide whether a softening of the WADA guidelines can be decided based on the negative PCR test results.

10. Medical procedures (including FoP_{h-2}, warm-up, and training venues)

All patients should be considered potentially infectious; therefore, personal protective equipment should be used at every time by athletes and medical/paramedical staff. Extra personal protective equipment (including but not limited to, for example masks, disposable gown, hydroalcoholic gels) should be available at medical and physiotherapy rooms. Hand washing protocol should be implemented when entering and leaving these rooms, and between each encounter for the healthcare providers.

No accompanying person should be allowed in the medical/paramedical rooms. Except for medical emergencies, all medical and paramedical services should be organised on an appointment basis, to respect social distancing. If necessary, a waiting room can be organised with a minimum distance of 2 metres between each seated person.

In addition of the usual devices and material found in one-day competition medical rooms, these areas should be equipped with:

- dedicated bins to collect potentially contaminated consumables,
- skin thermometer (medical room)
- pulse oximeter (medical room)

- material to perform a nasal swab for the purpose of SARS CoV-2 PCR-based diagnosis (medical room).

An entry and exit register to medical and paramedical rooms should be organised and kept under the responsibility of the one-day competition chief medical officer.

When these medical/paramedical rooms are used by staff and athletes more than 3 hours in a row, an intermediate cleaning procedure should be planned before keeping on using them.

Should the distance between the stadium and the athletes' hotel be too long, a minimal physiotherapy service be exceptionally organised at the athlete hotels. It should then comply with the same recommendations as above.

D) POST-EVENT GUIDELINES

1. **Winners/Medallists press conference**

This press conference should be organised only in occasion of a World Record or very significant result (otherwise to skip it) following the set-up described at Pre-competition press conference. The LOC Media manager could also consider holding a remote video call or conference to limit numbers of journalist, photographers or camera crew in attendance at the location of proposed press conference.

2. **Accredited groups exit and transfer**

The LOC should organise with the hotel management dedicated lanes and procedure to facilitate a fast track check-out. Transport of accredited individuals from the hotels directly to the airport or railway station will be done by car, shuttle, or bus with all passengers and driver wearing a mask and seated at 1.5 to 2 metres from each other.

Once arrived at the airport or the railway station, the accredited individuals will have to strictly comply with the airport or railway station rules of social distancing and all other COVID-19 prevention policies.

3. **Cleaning procedures**

Once the competition is finished a thorough disinfection procedure should be undertaken. Special attention should be paid to closed rooms which hosted athletes, staff and officials like call room, toilets, mixed zone, medical/paramedical rooms, anti-doping rooms, broadcasting and media rooms and studios. These cleaning procedures should be discussed between the venue operator/owner and the COVID-19 coordinator and agreed before the date of the competition.

APPENDIX A

TEMPLATE – MEDICAL EXAMINATION FORM - COVID-19

Date:	
Individual's name:	
Individual's date of birth	
Individual's address:	
Country representing:	

Private and confidential

To: [insert name of event organiser]

I confirm that I have conducted an examination on [insert individual's name] to assess whether or not they display or report any symptoms of COVID-19. The examination did not include the use a Polymerase Chain Reaction (PCR) test or any antibody virus test.

I confirm that this individual [does/does not]* display or report any symptoms of COVID-19.

[Note – this form will need to be checked for compliance with local legislation around release of medical information]

Signed: _____

Name of doctor:

Address of doctor:

Doctor's contact details (email address and phone number):

Date:

Signed: _____

Name of individual:

Date:

*DELETE AS APPROPRIATE

APPENDIX B

TEMPLATE – PERMISSION FORM – MEDICAL INFORMATION RELEASE – COVID-19

Date:	
Individual's name:	
Individual's date of birth	
Individual's address:	
Country representing:	

Private and confidential

To: [insert name]

I understand that [insert name of competition organiser] wishes to obtain:

1. the results of the Polymerase Chain Reaction (PCR) test on the sample collected from my nasal swab; and
2. the results of the medical examination carried out on me by the doctor working with [insert name of competition organiser] to determine whether or not I display or report signs of COVID-19.

This information is required to allow [insert name of competition organiser] to assess whether I may participate in the [insert competition name] without causing a risk to public health.

I understand that if I do not allow the above information to be provided to [insert competition organiser name], I will not be permitted to participate in [insert competition name] as they will not be able to assess whether or not I pose a risk to public health.

I confirm that I [do/do not]* permit you to send the above information to [insert name and contact details of the medical officer for competition organiser event].

** individual to delete as applicable*

Signed: _____

Name of individual:

Date:

Contact e-mail: healthandscience@worldathletics.org



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