



In case of disparities between this document and the French one, the latter will be considered right

Best practices in athletic therapy should always keep the therapist safe from harm and infection. One can thus refuse to work in conditions where their health and safety are at risk. It is the athletic therapist's responsibility to ensure their own security, and therefore, that of others.

Keep the communication going with your athletes, colleagues and employer about the ever-evolving pandemic situation and update your protocols as soon as changes are announced. When in doubt, always refer to the main Health Institution.

PROFESSIONAL ACTIVITIES ALLOWED ON FIELD

After looking into various protocols from various health and sanitation organizations, the *Corporation des thérapeutes du sport du Québec* came up with this conclusion pertaining allowed professional activities during event coverage in the time of COVID-19:

- **Emergency care**
- **Necessary tapings**

Any other services (i.e. pre-or post-game prep, assessments other than emergency care or basic first aid, etc.) must be performed before OR after the event, ensuring that a sanitized, clean environment is always available in case of an emergency.

Therapists should limit the use of their material (i.e. table) to an emergency and avoid treating anything else throughout the duration of the event. Therapists are also expected to fully sanitize their material whenever an athlete touches it.

GUIDELINES

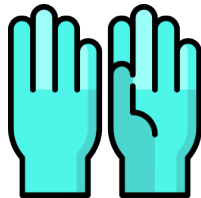
- Wash your hands regularly according to [public guidelines](#);
- Disinfect all highly touched surfaces (i.e., scissors, treatment table, *Sharks*) **BEFORE AND AFTER** any type of intervention. If one cannot ensure effective disinfection, refrain from using such tool;
- Suggest to your athletes to remove their tapings themselves once at home;
- Restrict the access to medical kit and any material; the therapist should be the only person allowed to manage their material;
- Bring necessary changes to your EAP according to most current instructions in relation with COVID-19. When needed, review the protocols with colleagues;
- The therapist should carry an additional mask on them for when they do an on-field intervention and it is deemed possible for the athlete to wear a mask;

- Refer any suspected cases to the appropriate authority;
- Activate the appropriate protocol if in contact with a positive COVID-19 case. You may consult the [INSPQ documents](#) on the topic;
- Make sure that your employer/organization follows the guidelines concerning COVID-19 athletes screening as prescribed by the INSPQ and their respective sports federation.

No athletic therapist should accept to work for an organization that does not have their protocols in place, are ignoring the health authority prescription or are ill-managing their sports federation guidelines. They are responsible for reporting all wrong doings to appropriate authorities.

ON-FIELD PROTECTIVE EQUIPEMENT

- The athletic therapist is required to wear at all times:
 - a procedure mask
 - surgical gloves (when deemed necessary to reduce the risk of transmitting bodily fluids)
 - a visor/protective goggles



- The protective gear should be changed if soiled;
- When possible, athletes should wear a procedure mask during intervention, no matter how long this one lasts;
- During an emergency care intervention, the athletic therapist should prioritize the use of a bag-valve mask when providing AR;
- No AR technique should be performed without a decent protective gear for the safety of the therapists;
- The athletic therapist should change clothes when their field work is over to decrease risk of cross-contamination;
 - In such case, the removed clothes should be put in a plastic bag for carrying and washed as soon as possible.

SOURCES

All information presented here comes from various sources : CDC, INESS, NATA and Société de Sauvetage