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COVID-19 Pandemic 2020

(April 30, 2020)

Initial document dated March 14, 2020 with 1st update added on April 2, 2020

*Updates added on April 15, 2020 are highlighted in **YELLOW**.*

*Updates added on April 30, 2020 are highlighted in **FLORESCENT GREEN**.*

Thank you very much to Dr. Ricardo Joseph and Dr. Eric Chen of the USJF Medical Committee for their time and expertise in helping to put together this information along with recommendations for our community. This will be helpful for everyone as we all work through the trying & difficult times ahead.

- This document provides recommendations from the USJF Medical Committee on the ongoing COVID-19 pandemic.
- We must all behave responsibly to protect own health, but also to protect everyone's health by not contracting, carrying, and transmitting the COVID-19 virus to others.
- These recommendations are based on the current and most up-to-date information and data available at the time of creation. This was accomplished by researching and reviewing guidelines published by various sports medicine organizations, the America College of Emergency Physicians, the Center for Disease Control (CDC).
- We remind you that the COVID-19 pandemic is a rather fluid and sometimes chaotic environment with occasionally conflicting medical information.
- Keep yourself informed with the latest information, developments, and situation by visiting the CDC's COVID-19 page at <https://www.cdc.gov/coronavirus/2019-ncov/>.
- Also visit your state's health department website, and keep up with your local news. Empowerment through knowledge and education is critical.
- It is vitally important for everyone to be mindful that each individual's health situation is unique and may require different strategies. Thus, we strongly recommend that people consult with their primary care physician/doctor/medical professional to ensure that they are taking the appropriate measures that are what is safest and most effective for their personal situation.
- These are general recommendations. It is NOT our intent to circumvent or replace the advice or directives from your primary care physician/doctor/medical professional.
- We encourage compliance with government recommendations, regulations, requirements, and laws.
- Our intent is to help keep all of our members safe while still retaining some flexibility for our high-level elite athletes.

Everyone Must Be Responsible & Diligent:

Everyone involved (including coaches, parents, and spectators) will have to closely monitor their health and truly strive to remain healthy. We all have to realize and accept the fact that if anyone in our group gets sick/infected, with the COVID-19 virus, we will have to assume that we are ALL INFECTED until proven otherwise.

Return To Training Phases 1-5:

The following is a very brief summary of the USOPC's April 28, 2020, Return to Training Considerations Post-COVID-19 document. It is appended to the end of this guidance document. Please be sure to read it in its entirety. Please be current and cognizant of the situation in your locale to ensure proper compliance with current rules and requirements.

Please keep in mind that the handling & treatments for the COVID-19 pandemic is a live, real-time experiment worldwide. It is impossible to impose a definitive timeline on the phased resumption of normal activity as the situation is very dynamic and fluid. Consequently, the return to activity phases depend on the situation and circumstance in your local jurisdiction. Your local public health authority's assessments will determine the mandates/edicts they issue. It is vitally important that you are current and have a good understanding of these mandates/edicts. Please follow them closely to be compliant with public health standards. This will help you to protect the health and safety of your students, yourselves, and your community.

Regarding COVID-19 Testing:

There are now many different COVID-19 testing protocols and kits available. There are huge variations in pricing with little detailed information available regarding the accuracy and validity of these tests. Also, not all tests are available everywhere. This being so, though testing is important, it is difficult to recommend a particular protocol/test for people to take. Therefore, **WE ARE NOT MAKING TESTING A REQUIREMENT.**

Mandatory Temperature Checks:

Temperature checks are **MANDATORY** for everyone prior to entering the dojo/club/training facility once we reach Phase 3 & 4. The maximum acceptable temperature for entry is 100.4°F/38° C. Someone with a temperature that is higher than this is considered to have a fever.

Phase 1: Public health authorities require shelter in place, public training facilities are closed
Dojos/clubs remain CLOSED. Individual home training & Virtual coaching ONLY.

Phase 2: Public health authorities lift shelter in place requirements, but continue to prohibit group activities and public training facilities remain closed
Dojos/clubs remain CLOSED. Individual home training & Virtual coaching ONLY.

Phase 3: Public health authorities allow small group activities (< 10 people), but public training facilities remain closed
Dojos/clubs remain CLOSED. Individual home training & Virtual coaching ONLY.

Phase 4: Public health authorities allow public training facilities to open, no limitations on group size.
Dojos/clubs may OPEN. Direct contact allowed to resume during this phase.

Phase 5: A vaccine or cure for COVID-19 is developed
Same as Phase 4. Continue infection prevention methods.

Stay At Home/Shelter In Place:

The federal government is recommending that the general public stay at home. Many state and municipal governments are recommending/mandating that the general public stay at home and shelter in place. We encourage you to support these recommendations and mandates. Avoid exposure to COVID-19 and stay home as much as possible. Be mindful of "social distancing" and put distance between yourself and other people, six (6) feet or more whenever possible to avoid contact with respirator droplets when an infected person talks, sneezes, or coughs. Try to avoid contact with people who are sick and people who have been exposed to COVID-19. Studies have suggested that COVID-19 may be spread by people when they appear to be asymptomatic.

Athletes Who Are 60+ Years Old or Have Underlying Health Conditions:

Anyone over the age of 60, people with underlying health conditions, or are immune system compromised should stay off the tatami and away from the dojo. These individuals are at a higher risk for serious potentially life-threatening illness from COVID-19.

Recreational Athletes:

There is no compelling reason that outweighs the potential dangers posed by COVID-19 for any recreational athlete to be on the tatami right now. We strongly advise that all "grassroots" clubs/dojos cease all activities IMMEDIATELY. Though the amount of time that the prohibition should remain in effect is debatable, **we suggest that six (6) weeks is a reasonable amount of time to start with.**

We are extending this prohibition through May 15, 2020 May 31, 2020.

Elite Athletes (Seniors & IJF Juniors):

Elite athletes may need to be handled differently depending upon their respective short-term competitive goals. All major national and international tournaments that were scheduled for this month or April have been postponed for at least 1-2 months. The IJF and PJC have suspended all activities through April 30, 2020. In the meantime elite players will likely still have to maintain some sort of limited or restrained work out schedule in order to remain competitive. For this small group we recommend that they strictly limit the number of partners involved in close contact with one another. Best practice would be one (1) training partner per person without intermingling. Minimize contact time and liberally substitute conditioning and timing drills for heavy newaza and randori. Using alternative training methods such as exercise machines/devices, resistance bands or tire inner tubes for uchikomi, and etc.

Personal Hygiene & New Habits:

Now is a great opportunity to develop some great personal hygiene habits. Of critical importance is hygiene both before and after any training session.

1. All judogi's should be completely clean and laundered before any training session.
2. Belts can easily be vectors for transmitting disease too. There is no need to wear your brand new IJF Approved Mizuno or Adidas black belt to practice at this time. Wear an old white one and throw in the washer with your judogi after every workout for the next month or so.
3. Athletes should shower, lather up, and scrub vigorously before and after training sessions that involve close personal contact with a training partner.
4. Obviously, there should be **NO SHARING** of towels, water bottles, liquids, food, snacks, supplements, and etc.
5. Weights, machines, and other training aids should be wiped down using an appropriate cleaning solution between users.
6. Use hand sanitizer every time one enters or exits the dojo.

Dojo Cleaning:

For dojos, best practice would be to:

1. **Disinfect mats before and after training with a diluted bleach solution.** Mixing these proportions of bleach and water can make the bleach cleaning solution:
5 tablespoons or 1/3rd cup of bleach per gallon of water
OR 4 teaspoons of bleach per quart of water
2. **Disinfect high touch areas such as doorknobs, handrails, benches and lockers.**
3. If possible, **place hand sanitizer at entrances and exits.**

The bleach solution is very effective and the most economical, but here is a link to a list of commercially available disinfectants that should have antiviral activity against COVID-19 and other pathogens:

https://www.epa.gov/sites/production/files/2020-03/documents/sars-cov-2-list_03-03-2020.pdf

The key for any of this to work is that you **must allow the solution to dry for at least 5 minutes for the full antiviral/antimicrobial effect.**

BLEACH CAUTIONS:

1. As the bleach solution does contain bleach, it may affect the color/finish of whatever comes into contact with the bleach solution. It may also bleach-out or cause colors to fade, burn materials. Adversely affected items may include and not be limited to things like: clothing, painted objects, furniture, furnishings, cloth materials, leather, colored items, cloth, materials, metals, plastics, rubber, carpets, rugs, wood, paper, and etc.
2. **Do NOT MIX the bleach or bleach water with any other chemicals or cleaning products. Mixing bleach with products containing acid or ammonia will result in the creation and release of HIGHLY TOXIC CHLORINE GAS and other dangerous by-products. Exposure to chlorine gas can cause serious permanent long-term injury and can be lethal.**
3. It would be prudent to use appropriate protective clothing & devices such as safety eyewear & gloves to protect your eyes and avoid any/prolonged contact with your skin.
4. Be sure that there is adequate ventilation when using bleach or the bleach solution.
5. Please be sure to take appropriate precautions to avoid any accidents, spills, and other foreseeable problems and dangers.

USJF Sanctioned Events:

We are cancelling all previously USJF approved sanctions for events scheduled to occur on or before May 15, 2020. We will not accept sanction applications for any event to be scheduled to occur on or before May 15, 2020. We encourage event planners, organizers, and sponsors to wait until the current pandemic has subsided and the government restrictions and recommendations are lifted.

This prohibition is extended to May 31, 2020. On May 31, we will assess the state of the pandemic on May 31 and consider when it may be possible for us to recommence sanctioning events.

USJF National Office Update:

In compliance with government recommendations and mandates, the USJF National Office will continue to operate with the staff generally working remotely from home as much as possible. We are observing social distancing by having only one (1) person in the office at any time. Much of our communication comes through the USPS mail. We will pick up and process our USPS mail as normal. As much as possible, work will be distributed and handled remotely. Though we will continue to answer the telephone, we strongly encourage you to communicate with us via email during these times. The National Office will continue operations in the current manner until “stay at home” mandates/restrictions are completely lifted.

Next Update On ~~April 17, 2020~~ ~~May 1, 2020~~ May 31, 2020:

At this time, we plan to issue an update on ~~April 17, 2020~~ ~~May 1, 2020~~ May 31, 2020. Should conditions change/worsen to an extent that further restrictions on elite athletes or any other actions are advisable, we will issue updated pertinent guidance at that time.

Additional comments from Dr. Joseph:

Again, this is a very unique and dynamic situation and these recommendations may need to be modified as new information and national guidelines become available. Please do not hesitate to contact either Dr. Chen or myself if you have any additional questions or concerns. Our contact information is listed below.

Best Regards,

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Return to Training Considerations Post-COVID-19 United States Olympic & Paralympic Committee

April 28, 2020 – v0.11

Jonathan Finnoff, DO, FACSM, FAMSSM
USOPC Chief Medical Officer

The information in this document is not intended or implied to be a substitute for professional medical advice, diagnosis, or treatment. All content, including text, graphics, images and information, are provided for general informational purposes only. The knowledge and circumstances around COVID-19 are changing constantly and, as such, the USOPC makes no representation and assumes no responsibility for the accuracy or completeness of this information. Further, you should seek advice from medical professionals and/or public health officials if you have specific questions about your return to training and competition.

Preamble: The USOPC is dedicated to protecting the health and safety of Team USA. The purpose of this document is to provide athletes, coaches and sports organizations (including National Governing Bodies [NGBs]) with information they can use to assist them with developing their return to training programs in the context of COVID-19. As a guideline meant to be used by sports as varied as archery and wrestling in locations as diverse as Minot and New York City by athletes and organizations with vastly different resources, this document cannot be prescriptive; rather, it should spark thoughtful deliberation among athletes, coaches and staff, who will use this information to create their own unique return to training plan that is specific to their situation. Many of the recommendations rely upon rules and regulations set forth by public health authorities, which will be different across the country. In addition to the logistical challenges of returning to training following COVID-19, there are also ethical and societal considerations that are beyond the scope of this document. These include, but are not limited to:

- When is the rate of community COVID-19 transmission, and therefore the risk of infection, low enough to allow group training or sharing of equipment?
- Do current COVID-19 or viral serology tests have sufficient accuracy, provide enough information, and have adequate scientific evidence to be used to limit the risk of COVID-19 infection among those participating in group training?
- Is it appropriate to use tests for athletics when there are shortages of tests for those who are sick?
- Can you mandate athlete testing in order to train with a group?
- Is it appropriate for athletes, coaches or staff to use personal protective equipment (PPE) meant for medical personnel when there is a worldwide shortage of PPE?



- Should or can you restrict athletes from participating in practice if they arrive from a location with active community transmission of COVID-19?

Finally, although the young and healthy tend to have less severe cases of COVID-19, every case of this disease is potentially life-altering or deadly, particularly in those with risk factors that may occur in our Olympic or Paralympic athletes such as asthma, hypertension, diabetes, liver disease, kidney disease, immune suppression, or neurologic disorders affecting respiration. Until COVID-19 is either eradicated, a vaccine is developed, or a cure is found, there is no way of completely eliminating the risk of fatal infection. This should always be in the forefront of your mind when designing your return to training program.

Return to Training Phases

1. **Phase 1:** Public health authorities require shelter in place, public training facilities are closed
 - a. Individual training sessions in your home using your own equipment
 - b. Coaching occurs virtually. No coaches or other athletes present during training.
 - c. Rigorous, frequent cleaning protocol of living space and athletic equipment with disinfectant* wearing appropriate personal protective equipment (PPE) (e.g., gloves, face mask, etc.) to prevent contact with contaminated surfaces and protect against toxicities associated with cleaning products
 - d. Only leave your home for essential work or errands and follow infection prevention measures when in public (Appendix 1)
2. **Phase 2:** Public health authorities lift shelter in place requirements, but continue to prohibit group activities and public training facilities remain closed
 - a. Individual training sessions in your home or outside (maintaining social distancing) using your own equipment
 - b. Coaching occurs virtually. No coaches or other athletes present during training.
 - c. Rigorous, frequent cleaning protocol of living space and athletic equipment with disinfectant* wearing appropriate personal protective equipment (PPE) (i.e., gloves, face mask, etc.) to prevent contact with contaminated surfaces and protect against toxicities associated with cleaning products
 - d. Follow infection prevention measures when in public (Appendix 1)
3. **Phase 3:** Public health authorities allow small group activities (< 10 people), but public training facilities remain closed
 - a. Criteria for participation in group training sessions (includes athletes, coaches and staff)
 - i. Required



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1. No signs or symptoms of COVID-19 (Appendix 2) in the past 14 days
 - a. If the person has had a case of documented COVID-19 infection, they need a note from their doctor indicating they are cleared to participate in training
 2. Live in training location for 14 days prior to beginning group training
 - a. This requirement reduces the risk of introducing COVID-19 into the training group by someone traveling from a different region
 3. No close sustained contact with anyone who is sick within 14 days of beginning group training
 - a. Since the signs and symptoms of COVID-19 can be fairly non-specific and not just respiratory symptoms, it is recommended that athletes should not be in close sustained contact with anyone who is sick for 14 days prior to beginning group training. This requirement reduces the risk of introducing COVID-19 into the training group by someone who may have COVID-19 but isn't experiencing any symptoms yet.
- ii. Additional or alternative criteria that could be used based upon advancements in scientific knowledge, test availability, and athlete/organizational resources**
1. Two negative COVID-19 tests separated by 24 hours
 - a. The tests must be performed and results available prior to beginning group training. Tests would need to be repeated if the individual:
 - i. Had close sustained contact with someone with documented COVID-19 infection
 - ii. Developed signs or symptoms of COVID-19 infection
 2. Coronavirus serology demonstrating prior infection (i.e., presence of IgG), but no current infection (i.e., lack of IgM)
 - a. The test must be performed and results must be available prior to beginning group training
- b. Minimize changes in small group participants
- i. If a group of individuals live together, consider assigning them to the same small group for training
- c. All participants must self-monitor for symptoms of COVID-19 twice daily (Appendix 3). If any signs of symptoms of infection are present, the



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participant should not attend the practice, should notify coaches and staff, and should contact their healthcare provider

- i. Athletes must record their signs and symptoms (including temperature) on a paper or electronic log that is monitored by coaches or staff
 - d. Upon arrival to train, coaches or staff should ask each athlete if they are experiencing any signs or symptoms of COVID-19 and take their temperature
 - i. If the athlete has any signs or symptoms of COVID-19, they should be sent home and instructed to contact their healthcare provider
 - e. Infection prevention measures should be followed during practice and when in public (Appendix 1)
 - i. Make sure appropriate infection prevention supplies are present in multiple targeted areas (e.g., hand sanitizer, facial tissues, facial coverings, etc.)
 - f. Small group training sessions should take place outside in an area where social distancing can be maintained
 - g. Participants should use their own equipment and avoid touching each other with their hands
 - i. If a ball is being used (e.g., basketball), make sure only one player is using a specific region of the court and/or basket at a time, and the court in that region needs to be cleaned before another player uses the ball in that space to prevent indirect transmission from ball 1 to ground and from ground to ball 2.
 - ii. Use own water bottle, towel, personal hygiene products (e.g., soap, deodorant, etc.)
 - h. No activities that would require direct (e.g., wrestling) or indirect (e.g., high jump pit, basketball) contact between athletes
 - i. Rigorous, frequent cleaning schedule/protocol of equipment with disinfectant before, during, and after training* wearing appropriate personal protective equipment (PPE) (e.g., gloves, face mask, etc.) to prevent contact with contaminated surfaces and protect against toxicities associated with cleaning products
 - j. Coaching can occur onsite, but coaches must maintain social distancing from all participants
- 4. **Phase 4:** Public health authorities allow public training facilities to open, no limitations on group size
 - a. Criteria for participation in group training sessions (includes athletes, coaches and staff)
 - i. Required
 - 1. No signs or symptoms of COVID-19 (Appendix 2) in the past 14 days



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- a. If the person has had a case of documented COVID-19 infection, they need a note from their doctor indicating they are cleared to participate in training
2. Live in training location for 14 days prior to beginning group training
 - b. This requirement reduces the risk of introducing COVID-19 into the training group by someone traveling from a different region
3. No close sustained contact with anyone who is sick within 14 days of beginning group training
 - c. Since the signs and symptoms of COVID-19 can be fairly non-specific and not just respiratory symptoms, it is recommended that athletes should not be in close sustained contact with anyone who is sick for 14 days prior to beginning group training. This requirement reduces the risk of introducing COVID-19 into the training group by someone who may have COVID-19 but isn't experiencing any symptoms yet.
- ii. Additional or alternative criteria that could be used based upon advancements in scientific knowledge, test availability, and athlete/organizational resources**
 1. Two negative COVID-19 tests separated by 24 hours
 - a. The tests must be performed and results must be available prior to beginning group training. The tests would need to be repeated if the individual:
 - i. Had close sustained contact with someone with documented COVID-19 infection
 - ii. Developed signs or symptoms of COVID-19 infection
 2. Coronavirus serology demonstrating prior infection (i.e., presence of IgG), but no current infection (i.e., lack of IgM)
 - a. The test must be performed and results must be available prior to beginning group training
- b. All participants must self-monitor for symptoms of COVID-19 twice daily (Appendix 3). If any signs of symptoms of infection are present, the participant should not attend the practice, should notify coaches and staff, and should contact their healthcare provider
 - i. Athletes must record the results of their self-monitoring on a paper or electronic log that can be monitored by coaches or staff



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- c. Upon arrival to train, coaches or staff should ask each athlete if they are experiencing any signs or symptoms of COVID-19 and take their temperature
 - i. If the athlete has any signs or symptoms of COVID-19, they should be sent home and instructed to contact their healthcare provider
 - d. Continue standard infection prevention measures (e.g., frequent handwashing, avoid touching your face, cover your mouth when coughing, etc.), but social distancing is no longer required
 - i. Make sure appropriate infection prevention supplies are present in multiple targeted areas (e.g., hand sanitizer, facial tissues, facial coverings, etc.)
 - e. Normal sized group training sessions outside and/or inside using training facilities
 - f. Participants may use each other's equipment, but equipment should be cleaned between use if possible
 - g. Continue to use own water bottle, towel, personal hygiene products (e.g., soap, deodorant, etc.)
 - h. Activities with direct (e.g., wrestling) or indirect (e.g., high jump pit, basketball) can resume
 - i. Rigorous, frequent cleaning schedule/protocol of equipment with disinfectant before, during, and after training should continue* including wearing appropriate personal protective equipment (PPE) (e.g., gloves, face mask, etc.) to prevent contact with contaminated surfaces and protect against toxicities associated with cleaning products
 - j. Coaching can occur onsite
5. **Phase 5:** A vaccine or cure for COVID-19 is developed
- a. Incorporate COVID-19 vaccination into the standard vaccinations of athletes, coaches and staff
 - b. Continue to educate athletes, coaches and staff on the signs and symptoms of infection. If they develop signs and symptoms of infection, they should not attend practice, should notify their coaches and/or staff, and contact their healthcare provider
 - c. Continue standard infection prevention measures (e.g., frequent handwashing, avoid touching your face, cover your mouth when coughing, etc.)
 - d. Continue rigorous, frequent cleaning schedule/protocol of equipment with disinfectant before, during, and after training*



This concludes the USOPC Return to Training Considerations post-COVID-19 document. If you have comments or suggestions to improve its content, please contact jonathan.finnoff@usopc.org.

*Cleaning of living spaces and training facilities should follow the [CDC recommendations for cleaning and disinfecting community facilities](#). Frequently touched areas (e.g., door handles, light switches) should be cleaned multiple times daily. Work-out equipment should be cleaned with anti-septic cleansers prior to use, between use by different athletes, and after use. At home, fresh food should be washed carefully before eating. Wash hands prior to cleaning and/or eating food. Dishes should be washed at high temperatures, preferably in a dishwasher.

**COVID-19 testing is currently restricted in many regions to individuals hospitalized with signs and symptoms of COVID-19 infection. As testing becomes more available and the demand for tests decreases, testing will likely be made available to community and/or asymptomatic individuals under the direction of a doctor. Viral serology tests are being developed, but most do not have FDA approval. Furthermore, it is currently unknown how much immunity people with prior COVID-19 infection have to future infection, making interpretation of the results challenging. Both COVID-19 testing and serologic testing have an associated expense, which may limit the ability to perform widespread testing of athletes.

Acknowledgement: I would like to thank the multitude of individuals who provided their feedback and insight when creating this document. It went through a significant evolution from its initial conception to final draft. Without the help of these individuals, this document would have been lacking indeed. I am sure I will continue to receive feedback, and as a living document, I will continue to update the document based upon this feedback and new information as it becomes available. I would like to thank people in advance for their thoughtful guidance on continuing to improve this document.



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APPENDIX 1



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INFECTION PREVENTION RECOMMENDATIONS



Stay more than 6 feet away from people who appear sick



Avoid touching your face

Frequently wash your hands for 20 seconds with soap and water or using alcohol-based hand sanitizer with a minimum of 60% alcohol if your hands aren't soiled



Cover your mouth and nose with tissue when coughing or sneezing, dispose of tissue in the trash, and wash your hands or use hand sanitizer after coughing or sneezing



Frequently clean commonly touched surfaces (ie: doorknobs, keyboards) with antiseptic cleanser



Wear a facemask when you are outside of your home or if you have symptoms of a respiratory illness such as a cough, runny nose, or shortness of breath



Stay home if you are sick and call your healthcare provider for further recommendations



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APPENDIX 2



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SIGNS AND SYMPTOMS OF COVID-19

Most Common Symptoms



Fever
(> 100.4)



Cough



Shortness
of breath

Less Common Symptoms



Sore throat
Congestion



Headache
Chills



Muscle and
Joint Pain



Nausea or
Vomiting



Loss of sense
of Smell



Diarrhea



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APPENDIX 3



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SELF-MONITORING INSTRUCTIONS

Twice daily, check for the following signs or symptoms of respiratory infection:



Fever
(> 100.4)



Cough



Shortness of
breath

Other symptoms to pay attention to include:

Sore throat

Congestion

Headache

Muscle and Joint Pain

Chills

Nausea or Vomiting

Diarrhea

Loss of Sense of Smell



If you develop any of these symptoms, please contact your healthcare provider to discuss how to proceed.