# **ASAP**

# 2025 Edition Azalea Little League

# **Safety Plan**



**Making It Safe** 



# Safety Officer (SO):

Joseph Kruse is on file with Little League Headquarters as the Safety Officer with Little League, ID# 346-08-06. The Safety Officer has an annual budget to do everything needed to keep our league running safely.

Safety Officer (SO):

Joseph Kruse

(419) 322-2033 (cell)

Email: JD@azalealittleleague.org

**League President:** 

**Shannon Foster** 

(757) 597-8939 (cell)

Email: Shannon@azalealittleleague.org

**Safety Plan Distribution:** 

The enclosed Azalea Little League's Safety
Manual will be distributed in paper copy and
email copy to all Board Members,
Managers/Coaches, Volunteers and District
Administrators.

### **Contact Information:**

Azalea Little League teams are to have a plan on who will call 911 in case of an emergency.

Example manager, coaches, or team mom etc.

They will also be required to fill out an accident report form which is available by paper copy provided at the field or by email.

# **Background Checks:**

Azalea Little League will use the Official Little League Volunteer Application Form to screen

all volunteers. To meet the requirement for background check screening for volunteers JDP will be used along with the United States Department of Justice National Sex Offender Registry, (<a href="www.nsopr.gov">www.nsopr.gov</a>) when further screening is required based on information obtained from JDP.

Screening includes but not limited to:

Board Members, volunteer umpires, concession volunteers, managers/coaches and all volunteers having access or interactions with little league players.



# Little League® Volunteer Application – 2025 Do not use forms from past years. Use extra paper to complete if additional space is required.



This volunteer application should only be used if a league is <u>manually</u> entering information into JDP. THIS FORM SHOULD NOT BE COMPLETED IF A LEAGUE IS UTILIZING THE JDP QUICKAPP.

 $\label{thm:continuous} \textbf{Visit} \ \underline{\textbf{LittleLeague.org/LocalBGcheck}} \ \textbf{for more information}.$ 

A COPY OF VALID GOVERNMENT ISSUED PHOTO IDENTIFICATION MUST BE  $\underline{\text{ATTACHED}}$  TO COMPLETE THIS APPLICATION.

Name			Date	
First	Middle Name or Initial	Last		
Address				
City	State	Zip _		
ocial Security # (mandator	ry)			
Cell Phone	Business Phone			
tome Phone:	E-mail Address:			
Date of Birth				
Occupation				
mployer				
Address				
Special professional training, skil	ls, hobbies:			
Community affiliations (Clubs, Service	Organizations, etc.):			
revious volunteer experience (includ	ing baseball/softball and year):			
1. Do you have children in the pr			□ Yes	□ No
If yes, list full name and w	rhat level?			
2. Special Certification (CPR, Me	edical, etc.)? If yes, list:		- □ Yes	□ No
<ol> <li>Do you have a valid driver's li Driver's License#:</li> </ol>	icense?	State	Yes	□ No
4. Have you ever been charged minor, or of a sexual nature?	with, convicted of, plead no contest, or	r guilty to any crime(s	) involving	or again
If yes, describe each in fu	ll:		- P Yes	⊓ No
	s to Question 4, the local league must co	ontact Little League Int	ernational.	)
(If volunteer answered yes		110	☐ Yes	□ No
5. Have you ever been convicted If yes, describe each in fu	d of or plead no contest or guilty to any II:			ш
5. Have you ever been convicted If yes, describe each in fu	,			

. Have you ever been refuse ineliaible list?	ed participation in any other y	routh programs and/or li	listed on any youth organization  Yes No
			Lies Liko
	yes to Question 7, the local le		League International.)
In which of the following w	would you like to participate?	(Check one or more.)	
☐ League Official		☐ Manager	☐ Concession Stand
_ •	_	_	☐ Other
	at least one of which has kno		
Name/Phone			
			EASE ATTACH A COPY OF THAT STATE' EBSITE: LittleLeague.org/BgStateLaws
history records. I understand that background. I hereby release ar officers, employees and volunte that, regardless of previous appo	at, if appointed, my position is conc and agree to hold harmless from lic eers thereof, or any other person c pointments, Little League is not oblic my term, I am subject to suspension	ditional upon the league rece ability the local Little League, or organization that may pro- gated to appoint me to a vol-	may not be me), child abuse and crimin eiving no inappropriate information on n b, Little League Baseball, Incorporated, it rovide such information. I also understar lunteer position. If appointed, I understar oval by the Board of Directors for violatic
Applicant Signature			Date
f Minor/Parent Signature			Date
Applicant Name (please pr	rint or type)		
NOTE: The local Little League a		porated will not discriminate	e against any person on the basis of ra
		GUE USE ONLY:	
Background check cor	mpleted by league officer		on
Review the Little Lear	gue Regulation 1(c)(9) for a	all background check re	aquirements
	I Check Completed (Includes abase and Little League Intern		
*Please be advised the searches can be perfor JDP in compliance with associated with the na	at if you use JDP and there is rmed you should notify volun the Fair Credit Reporting Act me, which may not necessari	a name match in the few inteers that they will recei containing information r ly be the league volunte	w states where only name match ive a letter or email directly from regarding all the criminal records ser.
Only attach to this appl	lication copies of background	check reports that revea	al convictions of this application.
	tion of Little League Abuse Av		
Manufatan Tani	aina Caussa is austilable at lit	ul-1 / A b A	

# **Fundamental Training:**

Azalea Little League requires that at least 1 manager/coach from each team attend Fundamentals of baseball and softball training. Every manager/coach will attend this training once every year.

Fundamental training will be conducted on 1/16/2025 with a make up day on 2/6/2025. Managers/coaches may attend meeting inperson. During these meetings practice schedules will be discussed at this time to allow all teams have adequate field time for practices.

These trainings will be held at the Azalea Little League complex by Richie Ruth (VP Softball), Sterling Mitchell (VP Baseball) and Adam Millwood (Coaching Coordinator). All stragglers will have case by case makeup days

In addition, all managers and coaches will be required to complete the following courses:

- -Abuse Awareness Training
- -Diamond Leader Training
- -Heads Up Concussion Training

# If You See It, Flee It; If You Hear It, Clear It



#### REMEMBER:

- Track approaching storms the best way possible: Internet radar websites, dedicated storm warning system at field, or other storm warnings
- Evacuate fields when storms are about 10 miles away: Have players and spectators go to enclosed building or to cars with windows rolled up
- Clear fields immediately after thunder has been heard or lightning seen!

#### PLEASE WAIT!

- Wait 30 minutes before returning to play after last sign of lightning activity in your area
- Cars shouldn't leave until the game is called, so all players can be accounted for

Guidelines from the National Oceanic and Almospheric Administration's (NOAA) National Weather Service

Copy and post at dugaris.

# **First Aid Training:**

First Aid training will be conducted on 1/16/2025 in-person with a make up day on 2/6/2025. This training will be given during the manager/coaches meeting.

Azalea Little League requires that at least one manager/coach from each team attend the First Aid Training once every 3 years. Board Members are also required to attend these trainings.

Managers will be required to complete an online concussion training and turn a certificate into the Safety Officer prior to the start of the season.

#### **HEAT-RELATED ILLNESSES**

#### WHAT TO LOOK FOR

#### WHAT TO DO

#### HEAT STROKE

- High body temperature (103°F or higher)
- · Hot, red, dry, or damp skin
- · Fast, strong pulse
- Headache
- Dizziness
- Nausea
- Confusion
- Losing consciousness (passing out)
- Call 911 right away-heat stroke is a medical emergency
- · Move the person to a cooler place
- Help lower the person's temperature with cool cloths or a cool bath
- Do not give the person anything to drink

#### HEAT EXHAUSTION

- · Heavy sweating
- · Cold, pale, and clammy skin
- Fast, weak pulse
- Nausea or vomiting
- Muscle cramps
- Tiredness or weakness
- Dizziness
- Headache
- Fainting (passing out)

- · Move to a cool place
- · Loosen your clothes
- Put cool, wet cloths on your body or take a cool bath
- · Sip water

#### Get medical help right away if:

- · You are throwing up
- · Your symptoms get worse
- · Your symptoms last longer than 1 hour

#### HEAT CRAMPS

- Heavy sweating during intense exercise
- Muscle pain or spasms

- Stop physical activity and move to a cool place
- · Drink water or a sports drink
- Wait for cramps to go away before you do any more physical activity

#### Get medical help right away if:

- . Cramps last longer than 1 hour
- · You're on a low-sodium diet
- · You have heart problems

#### **SUNBURN**

- · Painful, red, and warm skin
- · Blisters on the skin

- Stay out of the sun until your sunburn heals
- Put cool cloths on sunburned areas or take a cool bath
- Put moisturizing lotion on sunburned areas
- . Do not break blisters

#### HEAT RASH

- Red clusters of small blisters that look like pimples on the skin (usually on the neck, chest, groin, or in elbow creases)
- · Stay in a cool, dry place
- Keep the rash dry
- Use powder (like baby powder) to soothe the rash



# BASIC PRINCIPLES OF FIRST AID

# A, B, C, D - CALL 911

(O)) ALARMA DE EMERGENCIA

- Airway
- Open and listen for air exchange
- Breathing
- Look for obstruction gum or tobacco sometimes food
- Circulation
- Create a circulation
- Control bleeding
- Defibrillation if necessary
- Call 911



# Concussion signs observed include:

- Appears dazed
- Vacant facial expression
- Confused about assignment
- Forgets plays, positions or past immediate performance
- Is unsure of game, score, or opponent
- Moves clumsily or displays lack of coordination
- Answers questions slowly

- Slurred speech
- Shows behavior or personality changes
- Can't recall events prior to hit
- Can't recall events after hit
- Seizures or convulsions
- Any change in typical behavior or personality
- Loses consciousness

# include one or more of the following: Late symptoms of concussion may

- \*\* Unconsciousness
- \*\* Nausea or vomiting
- Balance problems or dizziness
- Blurred, double, or fuzzy vision
- Pressure in head
- Neck pain Sensitivity to light or noise
- Feeling sluggish or slowed down
- Feeling foggy or groggy
- Drowsiness
- Repeating the same question/comment

- Change in sleep patterns
- Amnesia
- "Don't feel right"
- Fatigue or low energy
- Sadness
- Nervousness or anxiety
- Irritability
- More emotional
- Confusion
- Concentration or memory problems (forgetting game plays)

# **Prompt Accident Reporting:**

All teams will use the provided incident tracking form and will provide completed accident report forms to the Safety Officer within 24-48 hours of incident. Please see copy of accident reporting form attached.

When to report- Report any incident that causes any player, manager, coach, umpire or volunteer to receive medical treatment and/or first aid to Azalea Safety Officer. This includes even passive treatments such as the evaluation and diagnosis of the extent of the injury or period of rest.

Safety Officer(SO):

Joseph (J.D.) Kruse

(419)322-2033 (cell)

Email: jd@azalalittleleague.org

<u>How to make the report</u>- An Accident Report Form must be completed with the following information:

- -The date, time, and location.
- -The name and phone number of the person reporting it.
- -The name and phone number of the person involved.
- -The Division League baseball/softball, team name, and managers phone number.
  - -How did the accident occur?
- -The preliminary estimation of the extent of the injury.
  - -The type of first aid given.
  - -Was 911 called.
- -Response time for emercency medical personal if 911 is called.
- -Position of the person/player when injured (batting, first base, etc).

-What caused the injury (sliding, fly ball, etc).

#### For Local League Use Only

#### Activities/Reporting

#### A Safety Awareness Program's Incident/Injury Tracking Report

League Name:		Leagu	ie ID:		ncident	Date:	
Field Name/Location	n:			1	ncident	Time:	
Injured Person's Name:							
				TO 85			
	8						
	tayer):						
O CONTRACTOR OF CO.	10.00				100	(5.4)	
Parents' Address (If Different):				City			
Incident occurred	while participating i	nc.					
A.) 🗆 Baseball	□ Softball	☐ Challenger	DITAD				
B.)   Challenger	TT-Ball	☐ Minor	☐ Major	(C) Held	emedia	te (50/70)	
□ Junior	☐ Senior	☐ big League					
C.) Tryout	☐ Practice	☐ Game	☐ Tourname	ent 🗆 Sp	ecial E	vent	
☐ Travel to	☐ Travel from	□ Other (Describ	e):				
Position/Role of po	erson(s) involved in	incident:					
D.) 🗆 Batter	□ Baserunner	☐ Pitcher	☐ Catcher	OF	st Base	☐ Second	
D Third	☐ Short Stop	□ Left Field	☐ Center F	ield DRig	tht Field	d Dugout	
☐ Umpire	☐ Coach/Manager	☐ Spectator	☐ Voluntee	0 00	her:	62 (21)(24)(21)(01)	
Type of injury	59	83			530		
Was professional r	red?   Yes   No I medical treatment result present a non-re-	equired? 🗆 Yes 🗆	No If yes, w	hat			
Type of incident an	nd focation:						
A.) On Primary Play	ing Field		B.) Adjacen	t to Playing P	ield	D.) Of Ball Field	
☐ Base Path:	☐ Running or ☐ St	iding	☐ Seat	ing Area		Travel:	
THIt by Ball:	☐ Pitched or ☐ □	rown or □ Batted	□ Park	ing Area		□ Car or □ Bike	
☐ Collision with	☐ Player or ☐ Si	ructure	C.) Conces	sion Area		☐ Walking	
☐ Grounds Defe	ect		☐ Volunteer Worker		3	C League Activity	
☐ Other:			☐ Cust	omen'Bystano	ler l	Cl Other	
Please give a short	t description of inci	dent:					
Could this acciden	t have been avoide	d? How:					
potential safety hosards, obtain as much informat cident insurance policy, j asap/AccidentClaimForm policy or claims that may sets/Forms_pubs/asap/S	Control of the Contro	a contribute positive id cident claims or injuried tent Notification Colminague International, For e fill out the General Lib	teac in order to it that could be form available at all other claims ability Claim form	mprove league o erre claims to am t http://www.litt to norveligible p n available here:	olety. Wi y eligible leleague erticipun http://w	hen an accident occur participant under the .org/Assets/forms_pu to under the Accident new littleleague.org/A	
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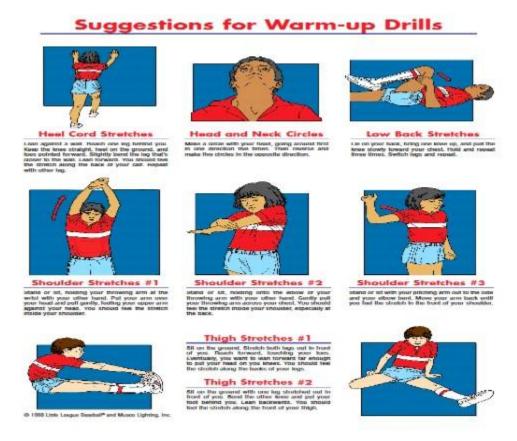
# Field Inspection:

Azalea Little League requires managers/coaches and umpires to walk the field to inspect for hazards prior to every practice and game. **PRE-**

#### **GAME CHECKLIST**

- Inspect infield for foreign objects, holes and dampness.
- Inspect outfield for foreign objects, holes and dampness.
- Inspect fencing for holes and any other damages that may cause injury.
- Inspect catchers gear for wear and proper fit.
   Dangling type throat protectors are required.
- Inspect helmets and bats for little league specifications and wear.
- Insure first aid kit is available on site for use if needed. Should be inventoried to ensure if it's needed it's there.

- -Check to ensure male catchers are wearing protective cup.
  - -Check uniforms for uniformity and proper fit.
  - -Check to make sure all jewelry has been removed.
- -Fill out lineup cards and submit them to the home plate umpire.
  - -Line the field to Little League specifications.
- -Perform stretching and calisthenics warm up exercises.



# **Facility Survey:**

Azalea Little League will be conducting a yearly Facility Survey on all fields and update our 2024 Facility Survey online.

# Field lighting survey:

The league will be conducting a field lighting survey on all fields where lighting is equipped.

AZLL will will work to certify all fields to Little league safety standards. Repairs and necessary upgrades will be made to ensure safe late day ball games and activities.

# **Concession Stand Safety Info:**

- -Menu shall be posted and approved by the League President and the Safety Officer.
- -Concession Safety Procedures shall be posted in the Concession Stand.

# **Concession Stand Tips**

#### Requirement 9

12 Steps to Safe and Sanitary Food Service Events: The following information is intended to help you run a healthful concession stand. Following these simple guidelines will help minimize the risk of foodborne illness. This information was provided by District Administrator George Glick, and is excepted from "Food Safety Hints" by the Fort Wayne-Allen County, Ind., Department of Health.

#### 1. 55epu.

Keep your mean simple, and keep potentially hammous foods (mean, eggs, dairy products, protein salads, cut fruits and vegatables, etc.) to a minimum. Avoid using precooked foods or lefterers. Use only foods from approved sources, avoiding foods that have been prepared at home. Complete control over your food, from source to service, it the key to safe, saminary food service.

#### 2. Cooking

Use a food thermometer to check on cooking and holding temperatures of potentially hazardous foods. All potentially hazardous foods should be kapt at 41° F or below (if coid) or 140° F or above (if hot). Ground beef and ground park products should be cooked to an internal temperature of 155° F, poultry parts should be cooked to 165° F. Most foodborns illnesses from temporary events can be traced back to lapses in temperature control.

#### 3. Rahosting

Rapidly rehest potentially hazardous foods to 165° F. Do not attempt to heat foods in crock pots, steam tables, over steme units or other holding devices.

THE RESERVE

Slow-cooking mechanisms may activate bacteria and never reach killing temperatures.

#### 4. Cooling and Cold Storage.

Foods that require refrigeration must be cooled to 41° F as quickly as possible and held at that temperature until ready to serve. To cool foods down quickly, use an ice water both (60% ice to 40% water), stirring the product frequently, or place the food in shallow pans no more than 4 inches in depth and refrigerate. Peas should not be stored one atop the other and lids should be off or size until the food is completely cooled. Check temperature periodically to see if the food is cooling properly. Allowing hazardous foods to reunrefrigerated for too long has been the number ONE cause of foodborne illness

#### 5. Head Washing.

Prequent and thorough hand washing sumains the first line of defense in preventing foodborne disease. The use of disposable gloves can provide an additional barrier to contemination, but they are no substitute for hand washing!

#### 6 Health and Hygiene

Only healthy workers should prepare and serve food. Anyone who shows symptoms of disease (cramps, nauses, fewer, vomiting, diarches, jamadice, etc.) or who has open sores or infected cuts on the hands should not be allowed in the food concession area. Workers should were clean outer gamments and should not smales in the concession area. The use of his restraints is recommended to prevent hair ending up in food products.

#### 7. Food Handling.

Avoid hand contact with raw, readyto-eat floods and flood contact surfaces. Use an acceptable dispensing utensil to serve food. Touching food with bere hands can transfer perms to food.

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#### 3. Dishwashme

Use disposable utensils for food service. Keep your hands away from food contact surfaces, and never reuse disposable dishware. Wash in a four-step process:

- 1. Washing in hot sospy water,
- 2. Rinsing in clean water,
- 3. Chemical or hest sanitizing, and
- 4. Air drying.

#### 9. Ice.

Ice used to cool cans-bottles should not be used in cup beverages and should be stored separately. Use a scoop to dispense ice; never use the hands. Ice can become contaminated with bacteria and viruses and cause foodborns illness.

#### 10. Wiping Cloths.

Rinse and store your wiping cloths in a bucket of santiture (enumple: I gallon of water and 1/2 temporn of chlorine blasch). Change the solution every two hours. Well santitured work surfaces prevent cross-contamination and discourage files.

#### 11. Insect Control and Waste.

Keep foods covered to protect them from insects. Store pesticides away from foods. Place garbage and paper wastes in a refuse container with a tight-fitting lid. Dispose of wastewater in an approved method (do not dump it outside). All water used should be potable water from an approved source.

#### 12. Food Storage and Cleanliness.

Keep foods stored off the floor at least six inches. After your event is finished, clean the concession area and discard trescable food.

#### 13: Set a Minimum Worker Age.

Leagues should set a minimum age for workers or to be in the stand; in many states this is 16 or 18, due to potential hazards with various equipment.

> Safety plans must be postmarked no later than May 1st.

#### Volunteers Must Wash Hands











#### WHEN

#### Wash your hands before you prepare food or as often as needed.

#### Wash after you:

- use the toilet
   touch uncooked meat, poultry, fish or eggs or other potentially hazardous foods
- Interrupt working with food (such as answering the phone, opening a door or drawer)
- eat, smoke or chew gum
- ▶ touch solled plates, utensils or equipment
- ▶ take out trash
- ▶ touch your nose, mouth, or any part of your body
- sneeze or cough.

#### Do not touch ready-to-eat foods with your bare hands.

Use gloves, tongs, deli tissue or other serving utensils. Remove all Jewe ry, nail polish or false nails unless you wear gloves.

#### Wear gloves.

when you have a cut or sore on your hand. when you can't remove your jewelry

#### If you wear gloves:

wash your hands before you put on new gloves.

#### Change them:

- as often as you wash your hands.
- when they are torn or solled

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## **Inspection of Equipment:**

The League SO and Equipment Manager will inspect all equipment in the pre-season.

- Managers/coaches will inspect equipment prior to each game and practice.
- Umpires will be required to inspect equipment prior to each game.

Any equipment not meeting Little League Safety standards will not be used and will replaced promptly by the equipment manager.

#### **First Aid Kits:**

New first aid kits have been purchased and placed in each press box at each field. Coaches and managers will be encouraged to monitor usage of kits and update the safety officer if more supplies are needed. There is also an AED in the main building by the concession stand which is available for use if needed. The AED has a new battery as well as pads for adults, children and infants.

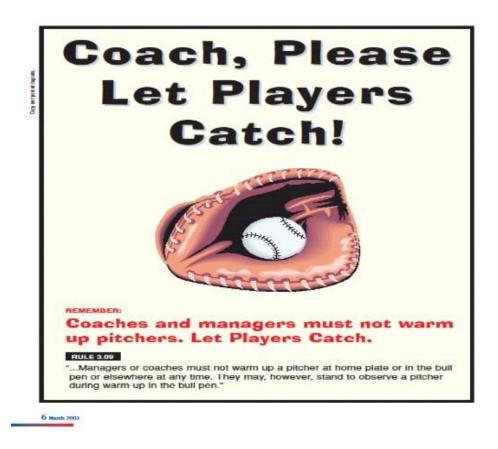
#### Narcan:

Narcan will be stored on site in the concession stand First aid kit. Narcan is a "OTC" medication and does not require special certification to administer it. Instructions will be clearly posted near the aid kit.

#### **Rule Enforcement:**

Azalea Little League will ensure that all teams enforce ALL Little League Rules. Including Proper Equipment for catchers.

- Skull caps are not permitted. Catcher helmets must provide full head protection and meet Little League Safety standards.
- On deck position is not permitted for majors and below.
- Dangling throat guard shall be used on all catchers masks.
- Managers/coaches will not warm up pitchers.
- Breakaway bases will be used on all fields.
- Double-First base rule must be used if applicable.



# **Safety Plan Registration Form:**

Azalea Little League will use the current year qualified safety plan registration form with ASAP plan.

## **Roster Information:**

Azalea Little League will ensure that all team roster information for players, managers and coaches are submitted via the Little League Data Center at <a href="https://www.LittleLeague.org">www.LittleLeague.org</a> by April 1st.

# Idea to help promote or improve your safety plan:

We will be including this safety plan with every coaches packet distributed this year. The packets will be reviewed by managers/coaches during all coaches meetings to ensure everyone understands the safety plan.

## **Covid-19 Recommendations:**

#### **Fields**

- Face masks will be required, when mandated by state and local authorities. The league will have disposable masks to offer those that need it.

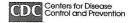
- Hand sanitizer and disinfectant will be available in all dugouts to be used as needed.

#### **Complex**

- -Restrooms will be cleaned and disinfected on a regular basis and at the beginning and end of each day.
- -Lines for concession will follow social distance guidelines.
- Spectators will follow social distance guidelines while watching games.

#### **Positive Test Results**

Refer to the CDC guidelines for appropriate actions. Guidelines attached.





**CDC Newsroom** 

CDC Newsroom Home

# CDC streamlines COVID-19 guidance to help the public better protect themselves and understand their risk

#### **Press Release**

Embargoed Until: Thursday, August 11, 2022, 3:00 PM ET Contact: Media Relations (404) 639-3286

Today, CDC is streamlining its COVID-19 guidance to help people better understand their risk, how to protect themselves and others, what actions to take if exposed to COVID-19, and what actions to take if they are sick or test positive for the virus. COVID-19 continues to circulate globally, however, with so many tools available to us for reducing COVID-19 severity, there is significantly less risk of severe illness, hospitalization and death compared to earlier in the pandemic.

"We're in a stronger place today as a nation, with more tools—like vaccination, boosters, and treatments—to protect ourselves, and our communities, from severe illness from COVID-19," said Greta Massetti, PhD, MPH, MMWR author. "We also have a better understanding of how to protect people from being exposed to the virus, like wearing high-quality masks, testing, and improved ventilation. This guidance acknowledges that the pandemic is not over, but also helps us move to a point where COVID-19 no longer severely disrupts our daily lives."

In support of this update CDC is:

- Continuing to promote the importance of being up to date with vaccination to protect people against serious illness,
  hospitalization, and death. Protection provided by the current vaccine against symptomatic infection and transmission
  is less than that against severe disease and diminishes over time, especially against the currently circulating variants.
   For this reason, it is important to stay up to date, especially as new vaccines become available.
- Updating its guidance for people who are not up to date on COVID-19 vaccines on what to do if exposed to someone
  with COVID-19. This is consistent with the existing guidance for people who are up to date on COVID-19 vaccines.
- Recommending that instead of quarantining if you were exposed to COVID-19, you wear a high-quality mask for 10 days and get tested on day 5.
- Reiterating that regardless of vaccination status, you should isolate from others when you have COVID-19.
  - You should also isolate if you are sick and suspect that you have COVID-19 but do not yet have test results.
    - If your results are positive, follow CDC's full isolation recommendations.
    - If your results are negative, you can end your isolation.
- Recommending that if you test positive for COVID-19, you stay home for at least 5 days and isolate from others in your home. You are likely most infectious during these first 5 days. Wear a high-quality mask when you must be around others at home and in public.
  - If after 5 days you are fever-free for 24 hours without the use of medication, and your symptoms are improving, or you never had symptoms, you may end isolation after day 5.
  - Regardless of when you end isolation, avoid being around people who are more likely to get very sick from COVID-19 until at least day 11.
  - You should wear a high-quality mask through day 10.
- ullet Recommending that if you had moderate illness  $oxed{\square}$  (if you experienced shortness of breath or had difficulty

need to isolate through day 10.

- Recommending that if you had severe illness or have a weakened immune system, consult your doctor before
  ending isolation. Ending isolation without a viral test may not be an option for you. If you are unsure if your symptoms
  are moderate or severe or if you have a weakened immune system, talk to a healthcare provider for further guidance.
- Clarifying that after you have ended isolation, if your COVID-19 symptoms worsen, restart your isolation at day 0. Talk
  to a healthcare provider if you have questions about your symptoms or when to end isolation.
- Recommending screening testing of asymptomatic people without known exposures will no longer be recommended in most community settings.
- Emphasizing that physical distance is just one component of how to protect yourself and others. It is important to
  consider the risk in a particular setting, including local COVID-19 Community Levels and the important role of
  ventilation, when assessing the need to maintain physical distance.

Actions to take will continue to be informed by the COVID-19 Community Levels, launched in February. CDC will continue to focus efforts on preventing severe illness and post-COVID conditions, while ensuring everyone have the information and tools, they need to lower their risk.

This updated guidance is intended to apply to community settings. In the coming weeks CDC will work to align standalone guidance documents, such as those for healthcare settings, congregate settings at higher risk of transmission, and travel, with today's update.

#### ### U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES [4]

CDC works 24/7 protecting America's health, safety and security. Whether disease start at home or abroad, are curable or preventable, chronic or acute, or from human activity or deliberate attack, CDC responds to America's most pressing health threats. CDC is headquartered in Atlanta and has experts located throughout the United States and the world.

Last Reviewed: August 11, 2022

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