NFL-NFLPA COVID-19 PROTOCOLS
FOR 2020 SEASON
October 16, 2020
Table of Contents

Education Protocol ................................................................................................................. 1
Club Facility Protocol ........................................................................................................... 5
Team Travel Protocol ......................................................................................................... 16
Treatment Response Protocol ............................................................................................ 24
Game Day Protocol ............................................................................................................. 45
Screening and Testing Protocol ............................................................................................ 58
Media Protocol .................................................................................................................... 73
Enforcement of Protocols .................................................................................................... 75
COVID-19 Screening Form .................................................................................................. 76
Education Protocol

I. Introduction. The NFL and the NFL Players Association, through their respective infectious disease experts, have developed material that Club medical staffs must use to educate Tier 1 and Tier 2 Individuals (as defined in the Club Facility Protocol) about COVID-19, including details of the Club’s Infectious Disease Emergency Response (“IDER”) Plan and best practices for reducing the risk of infections, testing and treatment. All Tier 1 and Tier 2 Individuals will be required to complete this COVID-19 education before full rosters of NFL players are permitted to return to work.

a. Such education covered the following topics:

i. Symptoms of COVID-19: Fever >100.4, cough, shortness of breath, loss of sense of smell or taste, etc.

   1. What to do if you have symptoms of COVID-19

   2. Considerations for high-risk individuals:
      - African American, Hispanic or Pacific Islander
      - BMI ≥ 28
      - Sleep apnea
      - Hypertension
      - Altered immunity
      - Diabetes mellitus
      - Cardiac disease

ii. Infection Prevention:

   1. Following guidelines delineated by the CDC and local/state health departments.

   2. All Tier 1 and Tier 2 Individuals must practice good personal health habits and engage in preventative actions to help prevent the spread of COVID-19, which include:

      a. Stay home when sick, except to get medical care (and if leaving the home is necessary, wear a facemask or face covering around other people)

      b. Cover coughs and sneezes with a tissue, then throw the tissue in the trash, then wash hands with soap and water > 20 seconds.
c. Proper and required use of PPE at the Club facility (i.e., use of masks, gloves, etc.) as required by the Club Facility Protocol.

d. Wash hands often with soap and water for at least 20 second—if soap and water are not available, use an alcohol-based hand sanitizer.

e. Clean hands before eating.

f. Avoid touching eyes, nose, and mouth.

g. Consume individual food and beverages and do not share with others (e.g., cups, water bottles).

iii. Team travel and transportation

iv. Isolation & Risk Mitigation protocols

1. In advance of reporting of full Club rosters in July: Strongly encourage Tier 1 and Tier 2 Individuals and Players to practice virtual isolation wherever possible to minimize risk of infection.

2. The NFL and NFLPA will continue to collaborate to develop protocols in advance of reporting of full Club rosters in July.

v. COVID-19 Testing and Screening Protocols

vi. Physical distancing requirements (6ft at all times) and limitations within the Club facility

vii. What to do if a Tier 1 or Tier Individual has contact with an individual who tests positive for COVID-19

viii. COVID-19 symptoms and requirements for reporting COVID-19 symptoms

ix. Guidance for safely working out (individually or in groups) away from the Club facility

x. Cleaning and sanitizing recommendations for personal residences and vehicles

xi. Food safety

xii. Media and fan interactions

xiii. Resources (including testing and behavioral health) for family/household members
b. Such education was jointly-developed by the NFL and NFLPA in video and/or standard PowerPoint presentation format and provided to all players and football staff via electronic means (i.e., email link, text message, “pushed” to players’ tablets, etc.). Each Club held at least one (1) live virtual education session during which players and members of the football staff may have the opportunity to ask any questions of the Club medical staff and/or Infection Control Officer. Representatives from the NFLPA shall have the right to attend and participate in these sessions.

c. Written educational materials will also be provided to all players and football staffs electronically.

d. The Club’s Head Primary Care Sports Medicine Physician, in conjunction with the Club’s Infection Control Officer, shall be responsible for providing such education to all players and football staff members. He or she may be assisted by other members of the Club’s medical staff and/or athletic training staff if he or she deems it appropriate.

e. Each Club’s Infection Control Officer certified to the NFL Management Council, in a form provided by the NFL and NFLPA, that such electronic education was provided to all players and football staff, and that all players and members of the football staff have acknowledged completion of the education no later than one week prior to the start of Training Camp. The NFL Management Council provided copies of the certifications to the NFLPA.

II. The NFL and NFLPA also developed standard COVID-related educational information/resource materials to be provided to players’ and club staff’s families. Each Club also held a virtual information/education session/webinar for family members of players and Club football staffs, during which such family members will have an opportunity to ask questions. Representatives from the NFLPA shall have the right to attend and participate in these sessions.

III. Each Club will be responsible for providing additional in-person, if feasible given restrictions of physical distancing, or virtual education to all players and Club football staffs outlining the Club’s Facility Protocol, at both the Club facility and Club stadium, Team Travel Protocol and the Club’s IDER Plan.

a. Each Club shall post extensive signage within the Restricted Areas (as defined in the Club Facility Protocol) of the facility, including but not limited to medical exam areas and athletic training, weight, locker, and meal rooms, on health policies, consisting of the following documents to provide additional education to players and football staffs on COVID-19 best practices:

   i. CDC guidance on COVID-19 prevention
ii. CDC guidance to stop the spread of germs

iii. CDC guidance on COVID-19 symptoms

iv. Local/State COVID-19 advisories

b. Subsequent educational sessions and materials will be provided on an ongoing basis, as frequently as is practicable and appropriate, including in the event there are cases of positive COVID-19 tests among players and/or football staff.

c. Clubs must ensure that any players and/or new members of the football staff who join the Club after the opening of facilities, or during the season, are provided with the educational materials required by this Protocol.

IV. The NFL and NFLPA, through their respective infectious disease experts, will provide regular updates and/or education materials to be shared with players and Club employees via virtual meetings, emails, posters and other communications as appropriate. This may include highlights and relevant reminders regarding the NFL-NFLPA COVID-19 Protocols.
Club Facility Protocol

I. Introduction. Prior to NFL players returning to NFL Club facilities for Training Camp, NFL Clubs were each required to develop an Infectious Disease Emergency Response ("IDER") Plan that sets forth the Club’s plan for containing an outbreak of disease (in this case, the COVID-19 pandemic). Each Club’s IDER Plan was subject to review and approval by the NFL, NFLPA and Infection Control for Sports ("ICS") (formerly known as the Duke Infection Control Outreach Network or "DICON") as outlined in the parties’ side letter agreement. The parties will continue to update this Protocol as circumstances warrant and as the science evolves.

II. Facility Access
   a. Access to Restricted Areas (as defined below) in Club facilities during the 2020 Season will be limited to a defined group of essential personnel. Based on their roles and job responsibilities, essential football personnel will be assigned a “Tier” that will determine to which areas of Club facilities individuals will have access, as well as when and for what purpose. Each individual must display a Club issued credential displaying his or her “Tier.”
   
   b. Restricted Areas shall include the following areas: practice and stadium playing fields and sidelines; locker rooms; athletic training rooms and medical exam areas; player meal and meeting rooms; player lounge areas and weight rooms.
   
   c. Tier 1 will consist of players and essential football personnel whose job function requires direct access to players for more than 10 minutes at a time on a regular basis. Tier 2 will consist of other essential personnel who may need to be in close proximity to players and other Tier 1 Individuals and who may need to access Restricted Areas periodically. Only individuals assigned to Tiers 1 and 2 will be permitted access to Restricted Areas, and there will be limits on the number of individuals from each Club who may be assigned Tier 1 and Tier 2 access at any given time. Restricted Areas must be secured at all times and credentials must be checked prior to allowing access to such areas. Tier 2M will consist of designated pool media and broadcast partner personnel. Tier 3 will consist of individuals who perform essential facility, stadium or event services but do not require close contact with Tier 1 Individuals. Club and other personnel who work exclusively in areas of Club facilities that are or will be completely cordoned off from the rest of the facility (e.g., Club office employees) do not need to be credentialed in one of the three access Tiers, provided these individuals do not access any areas of the Club facility or stadium outside of their cordoned-off area on days in which Tier 1 Individuals are in the facility. Such personnel may not access any Restricted Area when Tier 1 Individuals are present in the facility and they are prohibited from having close contact with any Tier 1 Individuals (this is designed to permit nighttime cleaning staff to enter and disinfect Restricted Areas after Tier 1 individuals have vacated the facility). Tier 3-Outdoor Access ("OA") will consist of individuals who may need to attend or
observe outdoor practice sessions but do not require close contact with Tier 1 Individuals. Individuals with a Tier 3-OA credential will not be permitted inside Restricted Areas of the Club facility at any time.

d. At least seven (7) days prior to the first mandatory reporting date for players for Training Camp, each Club was required to submit to the NFL (attention: Meghan Carroll) a list of individuals whom the Club wished to designate to have Tier 1, Tier 2, Tier 3, Tier 2M and Tier 3-OA access for the 2020 Training Camp and Preseason. Each list must include the individual’s first name, last name, title, role (if unclear with title), employer (if not the Club), and requested access Tier. Clubs will be required to pare each list down to the applicable maximum per Tier for each day and personnel who report on those days must have received a negative virus test during the last time the test was given to all Club personnel. The NFL will review the lists and either approve or require revisions. Any proposed changes to a Club’s list for the regular season must be submitted to, and approved by, the NFL (attention: Meghan Carroll).

e. **Tier 1.** The following categories are examples of essential and on-field personnel that are eligible for Tier 1 access, if designated by their Club and approved by the NFL (collectively “Tier 1 Individuals”) (Maximum Daily Number 60, in addition to players on roster.)

- Players
- Coaches
- Athletic Trainers
- Team Physicians
- Strength and Conditioning Coaches
- Equipment Managers

Tier 1 Individuals are permitted to access Restricted Areas on an as-needed and regular basis.

f. **Tier 2.** Non-playing personnel who are required to be in close contact with Tier 1 Individuals periodically or who may access Restricted Areas when Tier 1 Individuals are present, but who can reasonably maintain physical distance from Tier 1 Individuals and are able to use PPE while performing their jobs, are eligible for Tier 2 access (collectively “Tier 2 Individuals”). (Maximum Daily Number 40.) Examples of categories of individuals who may be designated as Tier 2 Individuals include:

- Club Facility Staff (including cafeteria and food service staff who will have contact with Tier 1 or Tier 2 Individuals)
- Additional Coaches/Strength and Conditioning Coaches
- Additional Athletic Trainers/Team Physicians/Medical Staff
- Additional Equipment Managers
- Ownership Representatives
- General Managers
• Field Manager
• Football Operations/Football Administration Employees
• Club Communications/PR Staff
• In-house Media and Broadcast Personnel
• Video Personnel
• Security Personnel Assigned to Restricted Areas
• Certain NFL and NFLPA Staff, as needed (does not count against club maximum of Tier 2 Individuals)

Tier 2 Individuals may be permitted access to Restricted Areas and Non-Restricted Areas of Club facilities on an as-needed, but intermittent, basis. Clubs must limit access to Restricted Areas for Tier 2 Individuals to the extent possible. Tier 2 Individuals must wear PPE at all times when at Club facilities, should minimize any necessary time spent in Restricted Areas, and must avoid close contact with Tier 1 Individuals whenever possible. Tier 2 Individuals must also avoid interactions with Tier 3 Individuals. Clubs may modify their lists of Tier 2 Individuals to account for those Tier 2 Individuals who are not present at the Club facility on a daily basis. All such modifications must be submitted to the NFL (Attn. Meghan Carroll) in advance. The total number of employees credentialed in Tiers 1 and 2 and present at the Club’s facility on a given day may not exceed 100. However, if a Club does not designate 60 individuals as Tier 1 Individuals on a given day, the Club may reallocate the remaining Tier 1 credentials to Tier 2 Individuals, but in no event may the number of Tier 1 Individuals present in the facility on a given day exceed 60. For example, if a Club designates 50 employees as Tier 1 Individuals, the Club may designate 50 employees as Tier 2 Individuals. Tier 2M, Tier 3 and Tier 3-OA credentials may not be reallocated.

g. Tier 2M. Pool media broadcast partner teams who will only be permitted in the facility media room, practice fields and stadium playing fields and sidelines. They will not be permitted access to other Restricted Areas in the Club facility (including locker rooms and medical areas) or to otherwise be in close proximity to Tier 1 Individuals. (Maximum Daily Number: 10). Personnel who are eligible for designation as a Tier 2M Individual:
   i. Certain designated “pool” media representatives (6)
   ii. Broadcast partner personnel

h. Tier 3. Individuals who perform essential facility, stadium or event services but do not require close contact with Tier 1 Individuals are eligible for Tier 3 access (collectively, “Tier 3 Individuals”). Tier 3 Individuals must avoid close contact with Tier 1 Individuals and Tier 2 Individuals, must wear PPE at all times when in the Club facility and are only permitted to access Restricted Areas when Tier 1 and Tier 2 Individuals are not present (Maximum Daily Number 45). Examples
of categories of essential personnel who are eligible for designation as a Tier 3 Individual include:

- Certain Operational Personnel (e.g., cleaning service providers)
- Food preparation/kitchen personnel (who will prepare meals but have no contact with Tier 1 or Tier 2 Individuals)
- Additional In-house Media and Broadcast Personnel (e.g., camera operators, audio technicians)
- Field maintenance providers
- Transportation Providers
- Additional Stadium or Security Personnel not assigned to Restricted Areas

i. **Tier 3-Outdoor Access**: Individuals who may attend or observe the Club’s outdoor practice, but do not require close contact with Tier 1 or Tier 2 Individuals are eligible for Tier 3-Outdoor Access (“Tier 3-OA”) (collectively, “Tier 3-OA Individuals”). Tier 3-OA Individuals are not permitted inside the Restricted Areas of the Club facility at any time (which includes the Club’s indoor practice facility). Tier 3-OA Individuals must remain at least 10 feet away from the practice field, must wear PPE and maintain physical distance from Tier 1 Individuals, Tier 2 Individuals, Tier 2M Individuals and Tier 3 Individuals at all times. (Maximum Daily Number: 30). Categories of personnel who are eligible for designation as a Tier 3-OA Individual include:

- Additional media and broadcast personnel
- Additional security personnel
- Additional medical personnel (e.g., EMTs)
- Club Scouts

j. **Fans and Visitors.** Fans and visitors will not be permitted to access Restricted Areas of Club facilities at any time.

k. **Entrance/Facility Design:** Clubs shall isolate Tier 1 and Tier 2 Individuals from other Club staff by implementing the following measures:

i. Clubs must designate or create a separate entrance to the facility for the sole use of Tier 1 and Tier 2 Individuals. If a separate entrance is not available, Clubs must schedule a dedicated time when a single entrance may be used only by Tier 1 and Tier 2 Individuals, and Clubs must clean and disinfect this area before and after use.

ii. Where possible, the flow of foot traffic into and out of the Club facility must be automated or no-touch to remove or reduce the use of touchpoints (e.g., door handles, doorknobs, and push bars). Clubs must also designate those portions of the facility that players access “Restricted Areas—Tier 1 and Tier 2 Access Only”.

iii. Access to the Restricted Areas of the Club facility must be limited to players and essential football personnel assigned Tier 1 and Tier 2 access. Clubs must clearly mark Restricted Areas with signage.
iv. Screening: All players, Club employees and contractors who have access to the Restricted Areas must undergo daily screening and testing prior to entering the facility pursuant to the Screening and Testing Protocol. The daily screen for all “football essential” employees must include the questions included on the COVID-19 Screening Form attached to the Screening and Testing Protocol.

III. Physical Distancing

a. Clubs must establish physical distancing protocols to allow players and/or staff to maintain six (6) feet of distance from one another when inside the facility.

b. Clubs are required to promote physical distancing by rearranging or removing furniture and/or using distance markers to assure spacing (e.g., workstations, meeting rooms), modifying the use of common areas, displaying signs that discourage hand shaking or other contact, and using cones or tape to establish one-way traffic in hallways and common corridors where possible.

c. Clubs must reconfigure locker rooms to permit six (6) feet of space between each player (by using every other locker or adding additional lockers) where possible. If not possible, Clubs must consider other measures to reduce risk such as adding plexiglass dividers between lockers or adding temporary lockers in outside tented areas or take other measures to protect transmission. Each player must have individual space designated to store his belongings, without comingling, if locker space is unavailable. Clubs must implement schedules that minimize the time players spend in the locker room and also using the locker room in “shifts” to allow for physical distancing. Clubs should also assign lockers so that position groups are not concentrated in one area.

d. Showers may be used but players should be kept at least six (6) feet apart when in use. Clubs may consider shutting off some shower heads to ensure physical distancing is maintained. The use of showers is encouraged after strenuous physical activity and is essential before entering any other water-based therapy treatment area. Showers shall be disinfected after each use with hospital grade EPA List N disinfectants.

e. Cold tubs may be used as long as physical distancing requirements are met. Hydrotherapy pools may also be used as long as participants remain physically distant. Disinfection of these areas must be conducted in accordance with the latest ICS manual.

f. Saunas and steam rooms pose additional risk and may not be used.

g. Strength and conditioning workouts must be limited to groups small enough to allow scheduled groups of players to practice physical distancing at all times. Any request
for a weight room capacity of more than 15 players at a time must be submitted to the NFL Management Council as a supplement to the Club’s IDER Plan and will be subject to approval by ICS, the NFL and the NFLPA. The athletic training staff must require individual, staggered player appointments instead of setting a single time for large groups to arrive. Clubs must stagger other player appointments, meetings and workouts at the facility in order to permit physical distancing.

h. Meetings must be conducted virtually to the extent possible. If in-person meetings are necessary, Clubs must make efforts to hold in-person meetings outdoors with participants sitting apart from one another and wearing masks. In-person meetings that do not permit physical distancing are prohibited. Meetings with more than fifteen (15) individuals must be conducted virtually, unless physical distancing practices can be adhered to. Communal use of materials, devices, or supplies during meetings is prohibited. Any administrative, playbook, and advanced work should be conducted on a personal electronic device.

IV. Facility Cleaning and Disinfecting

a. To ensure proper cleaning and disinfecting of Club facilities:

i. Common areas: Clubs must retain cleaning staff sufficient to clean, disinfect and sanitize all common areas that players access (at practice facilities and stadiums) both before they arrive to the Club facility and after they depart the facility each day. Clubs must retain staff sufficient to meet these requirements, including by retaining a daytime and nighttime cleaning staff, if necessary.

1. All “high touch” surfaces in common areas in the Club facility must be cleaned at least three (3) times a day with hospital-grade EPA List N disinfectants.¹ Products that have a contact time of less than or equal to 3 minutes are required. “High Touch” surfaces include tables, desks, countertops, door and cabinet handles, light switches, phones, keyboards, handrails, toilets, sink handles, touch screens, elevator buttons and entry security keypads. Clubs may provide disinfectant wipes to Tier 1 and Tier 2 Individuals to clean their individual personal items (e.g., phones, keys).

2. All other surfaces must be cleaned at least once daily with hospital-grade EPA List N disinfectants.

3. Clubs must have at least a two-week supply of hospital-grade EPA List N disinfectants prior to players returning to the facility, which should be restocked as supplies are used.

¹ EPA List N disinfectants can be found at https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2#filter_col1.
ii. Ventilation: Clubs must ensure they have proper air flow and filtering throughout the facility. Clubs should measure ventilation in enclosed spaces (e.g., meeting rooms and weight rooms) by calculating air changes per hour, where possible. If CO2 levels in a room equals or exceeds 1,000 parts per million, then the room must undergo a comprehensive cleaning/disinfection.

iii. Weight Room

1. Clubs must locate or relocate equipment to better ventilated or outdoor areas of the facility; encourage conditioning activities to occur outside; provide personalized equipment where possible; open roll-up doors, windows and roofs to promote air circulation; and measure ventilation as outlined above.

2. All equipment must be disinfected each day before the first workout and after each participant’s workout using hospital-grade EPA List N disinfectants.

3. To the extent possible, Clubs should provide certain training equipment on an individual basis. Absorbent items (ropes, bands, foam rollers, etc.) must be provided on an individual basis. To the extent that equipment must be shared amongst players, Clubs must provide individual disinfecting wipes near such equipment so that players may clean the equipment before and after each use.

4. Hand sanitization stations and wipes must be placed in close proximity to the equipment for players to use during workouts. Players shall use hand sanitizer after using each piece of equipment.

5. Clubs must remove equipment that cannot be sanitized or disinfected after each use (e.g., chalk bucket) unless it is provided solely for individual use for the full season.

6. For activities that require extensive contact between a player and a surface (e.g., activities that require a player to lie down or sit on the floor), players should place a towel or mat on the surface. Clubs must clean and disinfect the surface after each use and may provide individual sanitizing wipes to satisfy this obligation.

7. Strength and Conditioning Coaches must wear masks while supervising workouts. Clubs must also provide masks for players for use during workouts (although use must be strongly encouraged, it is not mandatory).
8. At the conclusion of all workouts, Clubs must thoroughly clean all training equipment, preferably with an electrostatic disinfection process or use of vaporized hydrogen peroxide.

iv. Training and Treatment Rooms

1. Clubs must cover treatment or rehab tables with a clean towel (which should then be left in a dirty clothes basket for laundering) or a single-use covering, which must be discarded after usage. Treatment and rehab tables must be disinfected after each use.

2. For their protection, players and training staff are prohibited from using creams, gels, lotions, or balms from a shared container. Clubs must remove any shared containers from the facility to avoid such improper use.

v. Player Meeting Rooms

1. Player meeting rooms must be cleaned before and after each use with hospital-grade EPA List N disinfectants.

vi. Suspected or Confirmed Cases of COVID-19. In the event anyone in the Club facility is identified as experiencing symptoms of COVID-19, the Club must take steps outlined in the Treatment Response Protocol to minimize potential transmission, including immediately cleaning and disinfecting all surfaces (including equipment), door handles, gym equipment, bathrooms and shower facilities to which the symptomatic individual had access in the previous 24 hours.

V. Equipment Cleaning and Disinfecting

a. Player Equipment: Helmets, shoulder pads and other daily use specific hard surface equipment must be cleaned after each practice or game using EPA list N disinfectants or other ICS-approved disinfection methods. Mouthpieces must be sanitized post practice or game with either appropriate UV light treatment or acceptable solution such as “Defense Solution.” Player gloves and uniforms must be washed daily. Clubs must use disinfectant detergent in all laundry cycles. If gloves cannot be laundered (e.g., leather), players must be provided with sufficient pairs so that they may rotate pairs every day.

b. Personal Items: Every individual entering the Club facility must clean and disinfect his or her cellphone, keys, and any other frequently-touched objects being carried. Clubs may provide sanitizing wipes so that individuals may clean their own personal items. Individuals must not share any personal items (including clothing).
c. Computers: Clubs shall provide individual computers, laptops, or tablets for Tier 1 through 3 Individuals (with covers that can be easily cleaned/disinfected).

d. Field Equipment: Field equipment must be cleaned with EPA list N disinfectants at the end of each practice. Field turf must also be disinfected pursuant to ICS and manufacturer’s recommendations.

e. Towels: Clubs must provide players with individual or single-use towels during practice, training and games. Towels must not be shared. Following each use, towels must be laundered with disinfectants. Clubs are responsible for obtaining a sufficient supply of towels.

f. Hydration: For their protection, players are not permitted to share water or sports drink bottles. Common water/hydration sources that do not permit physical distancing are prohibited. Use of individual single use water/sports drink bottles or disposable bottles or cups is required.

VI. Food Service

a. Clubs must establish a process for safely distributing meals, dietary supplements, or medicines (such as Advil and Tylenol) to Tier 1 and Tier 2 Individuals.

b. Meal room access must be limited only to Tier 1 and Tier 2 Individuals who have undergone required screening and testing. Clubs must ensure sufficient physical distancing between tables and ensure that Tier 1 and Tier 2 staff do not sit within 10 feet of each other while consuming food and drink (while masks are down). Clubs should limit the time spent in the cafeteria for these groups. Clubs must further limit access (discouraging group dining) or staggering mealtimes to permit physical distancing.

c. Whenever possible, Clubs should have one kitchen or catering staff responsible for all meal preparation and distribution at the facility and avoid rotating outside vendors.

d. Whenever possible, Clubs should serve pre-made meals provided in individually packaged containers or bags, in takeout form. Clubs must use disposable utensils and plates and single-use condiments.

e. Buffet-style, communal and self-serve food spreads are prohibited (even for coffee bars and/or shake and fueling stations). Attendants, wearing appropriate PPE and observing physical distancing, must be available to serve food, coffee or beverages at those stations. Individual-serving coffee machines are permissible, so long as disinfecting wipes are available and they are wiped down after each individual use.
f. Meal room staff must be trained in proper hygiene and use of proper PPE. Meal room staff must be subject to daily screening (e.g., symptom questionnaires).

g. The meal room must be disinfected after each meal with EPA list N disinfectants.

h. Clubs must review and adhere to the FDA’s best practices for food handling and preparation (available at www.fda.gov/media/136811/download).

VII. Personal Protective Equipment (PPE) and Hygiene

a. All players and staff must wear masks (surgical masks are preferred; gaiters and masks with valves or vents are prohibited) at all times when inside the Club facility and on the practice field (unless a mask cannot be worn by players due to interference with performance of athletic activities). Masks must be worn during walk-throughs. Face shields are not a permissible substitute for face masks at the Club facility. Surgical masks must be replaced daily or more frequently if visibly soiled. If cloth masks are used, they must be laundered daily (with disinfectants), and/or staff and athletes must be provided with a sufficient supply of cloth masks so that they may rotate masks every three days. If cloth masks are used, there must be a mechanism in place to ensure that masks are not mixed and shared. Clubs are responsible for obtaining an adequate supply of surgical and cloth masks.

b. Clubs must maintain video of facility surveillance cameras for a period of at least 30 days. NFL Security will coordinate regular collection and review of footage to ensure compliance with these Protocols, specifically use of masks and PPE. Clubs are reminded that failure to enforce strict compliance with the mask/PPE requirements will subject the Club to discipline under the Protocol by the league. Players are reminded that if they are identified as failing to comply with the mask/PPE requirements, they will be subject to discipline under the Protocols.

c. Each Club shall identify at least three (3) Tier 1 staff members to serve as “Protocol Compliance Officers” who shall be responsible for ensuring Protocol compliance at all times within the Club facility and during travel (e.g., everyone wearing masks, practicing physical distancing, wearing Kinexon tracking devices, not lingering in cafeteria and/or locker room, etc.).

d. If a mask cannot be worn due to interference with performance of athletic activities, the mask must be placed in a labeled paper bag and the athlete must observe physical distancing practices (where possible given the particular type of activity) for the duration of the activity. Hand hygiene must be encouraged every time the mask is touched, removed, or replaced.

e. Gloves are required for staff in frequent contact with others and are mandatory for those who work with food or who refill supplies.
f. Clubs must make hand sanitizer and other hygiene materials (e.g., soap, tissues) available in all areas of the Club facility. This means that every meeting room, training room or other common area in the Club facility must have a hand sanitizing station available for use. Where possible, Clubs are encouraged to use no-touch dispensers.

g. The Club must maintain a supply of the following PPE for use by the medical staff to treat players who become symptomatic:

   i. N95 Masks
   ii. Goggles
   iii. Full Face Shields
   iv. Gowns (FDA-approved gowns that meet AAMI standards)
   v. Gloves (FDA-approved medical grade gloves)

h. Clubs must have at least a two-week supply of all PPE and hygiene materials on hand at all times. Clubs must confirm they have obtained this supply of PPE before players return to the Club facility for Training Camp. If a Club experiences difficulty obtaining any type of required PPE or is concerned that obtaining the required PPE will result in a shortage to their local first responders, the Club should notify the NFL immediately.

i. The NFL and NFLPA, through their respective experts, will continue to evaluate PPE needs and requirements and update the Clubs on an ongoing basis. Engineers are currently working on possible PPE solutions (e.g., visors integrated with respiratory technology) for on-field usage during athletic activity and in games. Player needs and concerns are being addressed through this process and additional information will follow.

VIII. Group Activity Outside of the Club Facility

a. Groups of more than three (3) Tier 1, Tier 2, and Tier 3 Individuals, including players, are prohibited from gathering outside of the Club facility or team travel. Tier 1 staff and players are prohibited from engaging in meetings, practices and/or training activities outside of Club facilities unless approved by the NFL and NFLPA. If a Club is “shut down” due to an outbreak, Tiered staff and players are not permitted to gather in any number for any reason. Clubs and players are reminded that violations of this provision will result in discipline.
NFL-NFLPA Team Travel Protocol for 2020 Season

I. Introduction
   a. This Protocol will govern Team Travel during the 2020 NFL Season. Clubs are required to comply with its requirements, including when using hotels and/or travel partners in the Club’s home city.
   b. The parties will continue to update this Protocol as circumstances warrant and as the science evolves.

II. Game Travel
   a. Clubs must establish operational processes for all team travel that promote cleanliness and reduce interactions between members of the Traveling Party (as defined below) as much as possible. Clubs must endeavor to travel in a controlled environment at all times and maintain physical distancing. In addition to the protocols set forth below, Clubs must follow, and ensure their travel partners follow, applicable guidelines and regulations delineated by the CDC\(^2\) and local/state health departments. Only Tier 1 and Tier 2 Individuals are permitted to travel with their Club (collectively, for purposes of this Protocol, the “Traveling Party”), and Clubs must limit the number of non-player members in the Traveling Party to no more than 70 people. Clubs are strongly encouraged to further reduce the number of non-player members in the Traveling Party if possible. Each Club may also travel two (2) or three (3) members of its BioReference testing team with the Traveling Party, and these individuals will not count toward the Traveling Party limit of 70 people.

b. Members of the Traveling Party who do not travel on the team charter (i.e., medical or advance football operations personnel) must receive a negative virus test result in the visiting team city prior to joining the rest of the Traveling Party and/or accessing Restricted Areas on Game Day.

c. Clubs must ensure that members of the Traveling Party minimize time in crowded settings, and are supplied with and utilize masks, gloves, hand sanitizer, and disinfectant wipes.

d. In addition to the COVID-19 testing outlined in the NFL-NFLPA Screening and Testing Protocol, each member of the Traveling Party is subject to daily temperature screens and symptom checks as set forth in that Protocol, while traveling and mandatory hand cleaning when entering the team hotel, Club facilities, planes, buses, and other shared facilities.

e. Unless there is no other travel option available for transportation to perform essential working functions while traveling, individuals in the Traveling Party shall not take

separate public (e.g., buses, subways) or private (e.g., taxis, Uber, Lyft) transportation on the road to, or while in, other cities. Clubs must make all necessary arrangements to facilitate safe, clean and hygienic travel for the Traveling Party to and from all cities and games.

f. Visiting teams will continue with the standard protocol of arriving in the game city the day prior to the game to ensure players, coaches, and Travel Party are isolated within the same lodging facility to administer any applicable screening and testing and allow for requisite gameday preparation (including hydration and rest).

III. Personal Protective Equipment (PPE)

a. All members of the Traveling Party must wear masks when traveling.
   
i. Clubs must provide masks to players and staff and must have an adequate supply of surgical or cloth masks to cover this requirement by two weeks prior to their first team travel. Use of N-95 and KN-95 masks are encouraged.

b. Clubs must provide individual hand sanitizer, disinfectant wipes and other cleaning products to members of the Traveling Party so that they can clean their luggage and rooms upon arrival, including any high-touch surfaces (e.g., luggage handles, key cards, remote controls, phones).

IV. Disinfection

a. Clubs must require that all travel partners (hotels, airlines, buses) perform and confirm frequent disinfection of all facilities, rooms, surfaces, etc. Clubs must provide third parties with the NFL-NFLPA mandated standards. Charter companies, hotels and transportation companies must represent in their contracts that they have read, understood and agree that they will, to the greatest extent possible and permissible given relevant governing regulations and/or third party union restrictions, meet or exceed NFL-NFLPA mandated standards as a condition of the contract.
   
i. Hotels
      
1. All “high touch” surfaces in areas accessible to multiple members of the Traveling Party must be cleaned at least three times a day with hospital-grade EPA List N disinfectants. “High Touch” surfaces include tables, desks, countertops, door and drawer handles, cabinet handles, light switches, phones, television remote controls, handrails, toilets, sink handles, touch screens, and elevator buttons.
2. All other surfaces in areas accessible to multiple members of the Traveling Party must be cleaned at least once daily with hospital grade EPA List N disinfectants.

3. Other areas of focus include guest rooms, meeting space (foyer, bathrooms, tables, chairs, AV equipment, etc.), elevators and elevator landings, arrival and departure routes, the lobby, and the fitness center.

4. Hotel staff must refrain from cleaning the interior of hotel rooms assigned to members of the Traveling Party for the duration of the Traveling Party’s stay, unless the stay is longer than one night, in which case cleaning may occur when members of the Traveling Party are not present. Hotels must ensure that all staff who interact with the Traveling Party wear appropriate PPE during such interactions. Hotels must ensure appropriate cleaning of individual rooms, prior to the arrival of the Traveling Party.

5. Hotels must ensure that they have the proper air flow and filtration throughout the hotel.

ii. Airlines

1. Immediately prior to team arrival, all “high touch” surfaces must be cleaned with hospital-grade EPA List N disinfectants. “High Touch” surfaces include seats, arm rests, seat belts, tray tables, catering areas, touch screens or controllers, light/service call switches and buttons, windows, and bathrooms (toilets and sinks). Passengers must be provided with sanitizing wipes to wipe down “High Touch” surfaces while in flight.

iii. Buses

1. Immediately prior to boarding, all surfaces must be cleaned with hospital-grade EPA List N disinfectants. These areas include seats, windows, arm rests, seat belts, seat trays, cup holders, light switches/buttons, TV monitors, luggage bins and railings, stair railings, doors, bathrooms (toilets and sinks), and luggage bins below the bus. This process must be repeated while the bus waits to bring the team back to the airport.

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3 https://www.cdc.gov/niosh/docs/2012-151/pdfs/2012-151.pdf
iv. **Equipment and Luggage**

1. Whenever possible, the Traveling Party shall be responsible for their own luggage to avoid additional individuals handling the luggage. If not possible, then luggage should be sent directly to hotel rooms to avoid as many touchpoints as possible. Hotels must ensure appropriate sanitation procedures with regard to who touches luggage that is delivered to members of the Traveling Party. To the extent team equipment or luggage must be placed in storage on-site at the hotel, it must be stored in a clean, secure location, and be disinfected prior to returning to the team. Members of the Traveling Party shall not rely on bell staff for picking up luggage when leaving the hotel.

V. **Third Party Staff (e.g., Hotels, Airlines, Buses)**

   a. Clubs must require that all travel partners (hotels, airlines, buses) follow the below protocols with their staffs:

      i. Standard screening and temperature checks of all staff that will have any direct contact with members of the Traveling Party (e.g., in-flight crews, bus drivers, etc.). This screening protocol that will be used should include COVID-19 testing to the extent permissible by the relevant staff’s labor and other contracts and must be provided to the Club Infection Control Officer for review and approval in advance of its use. For clarity, the results of screening and testing of travel partner staffs will not be shared with the Club, but the Club is responsible for reviewing third-party screening protocols.

      ii. To the extent it is within the travel partner’s control, mandatory use of masks and gloves by staff having any direct contact (e.g., in-flight crews, gate area staff, bus drivers, luggage handlers) with members of the Traveling Party.

      iii. Notification if any third-party staff member tests positive or is symptomatic for COVID-19 within 48 hours prior to Club arrival (e.g., arrival at hotel, arrival at airport, use of buses). No third-party staff member who has tested positive for COVID-19 or was symptomatic within the previous 14 days shall be permitted to participate in any NFL Club travel. The Club shall immediately notify the NFL (Attn: Meghan Carroll) of any such COVID-19 positive travel partner staff.
iv. Whenever possible, Clubs should work with airline partners using fixed crews, with limited commercial flight exposure and frequent testing for team flights.

VI. Food Service

a. Hotel

i. The meal room must be private and dedicated to members of the Traveling Party only. It must be large enough to enable proper physical distancing. Automatic hand sanitizer stations must be set up at the entrance of the meal room, as well as stationed throughout the meal room.

ii. Plates, utensils, cups, etc. must be disposable and condiments must be single serve packaging.

iii. Kitchen and serving staff must wear masks, gloves, hair and beard covers, aprons, etc.

iv. All meals must be provided to players and coaches/staff when traveling with the team. Self-serve buffet style dining is prohibited; food service with an attendant maintaining appropriate distancing and using appropriate PPE shall be permitted when necessary. Hydration must be provided in individual bottles or single-use cups. The Traveling Party is not permitted to leave the hotel to eat or otherwise use any restaurants (in hotel or otherwise) open to the public. Clubs should consider providing “welcome amenities” and/or utilizing private on-site vendors at hotels to provide food and drink in rooms upon arrival in order to minimize trips to public markets. Members of the Traveling Party may order hotel room service or other food directly to the room and may use third-party food delivery services with contactless delivery (e.g., Uber Eats, Grubhub, DoorDash, Postmates).

b. Air Travel

i. Flight attendants must wear masks and gloves at all times and shall be the sole distributors of food items, which must be individually wrapped and prepared.

ii. If permissible, prior to player and staff arrival, flight attendants must place food items (snacks, prepackaged items, etc.), hand sanitizer, masks, gloves, etc. in each seat.

1. Clubs must assign seats for players and staff.
iii. In-flight catering must be as limited as possible to avoid touchpoints between flight attendants and members of the Traveling Party. Members of the Traveling Party should bring necessary food and beverages on board with them to reduce contact with in-flight staff. Single-use utensils, napkins, plates, condiments, and hand wipes must be provided for and disposed of after each meal.

c. Postgame Meal

i. Use of masks/gloves by personnel responsible for packaging meals is mandatory.

ii. Clubs must provide premade meals provided in individually packaged containers or bags in takeout form to be distributed to the Traveling Party upon exiting the Stadium.

VII. Physical Distancing

a. Clubs must establish physical distancing protocols that allow members of the Traveling Party to maintain six (6) feet of distance from one another whenever possible.

b. Hotel

i. Hotels must make private entrances/exits available to members of the Traveling Party whenever possible. Hotels must also provide a private check-in area for members of the Traveling Party.

ii. Coaches and players must have their own hotel rooms. Members of the Traveling Party may not make separate public or private housing arrangements while traveling. Room visits are permitted only by members of the Traveling Party. Members of the Traveling Party are prohibited from congregating, visiting or mingling with individuals outside of the Traveling Party once they have arrived in the game city.

iii. Meeting and meal rooms must be large enough to enable proper physical distancing.

iv. Where possible, hotels must reserve a sufficient number of rooms for members of the Traveling Party on lower floors such that stairs, and not elevators, can be used for leaving and returning to rooms. Rooming blocks must ensure that the Traveling Party is isolated in the hotel.

v. The Traveling Party may not utilize the fitness center, pool, sauna or other shared hotel facilities during their stay at a hotel, unless such areas have
been appropriately disinfected, are closed to other hotel patrons and only open to the Club Traveling Party. In such cases sanitizing wipes and hand sanitizer must be available, and physical distancing must be maintained at all times.

vi. Touch-free Departure. No member of the Traveling Party should visit the front desk upon departure. Check-out procedures, including key returns and the payment of incidentals must be handled remotely (e.g., provide credit card number to pay incidentals, leave key in room or drop box).

vii. Hotels must provide a clear path for members of the Traveling Party to get from the hotel to awaiting team transportation (and vice versa), including ensuring that fans do not gather at entrances or exits used by the Traveling Party.

c. Air Travel

i. Planes must be configured to provide as much free space between passengers as possible, but at a minimum, where coach accommodations are used, so that members of the Traveling Party have at least one empty seat between them in each row. Clubs are strongly encouraged to charter two planes for team travel to ensure that members of the Traveling Party can adhere to physical distancing. If a Club does not charter two planes, it should consider further reducing the number of non-player members of its Traveling Party to allow for physical distancing.

ii. Whenever possible, Clubs should depart from or arrive into smaller private airports. If traveling through a public airport is unavoidable, Clubs should avoid using main terminal gates that could have the potential to expose members of the Traveling Party to the public boarding ramp.

iii. When Clubs are required to screen for TSA compliance using charter rules, Clubs should make every effort to screen at the Club facility or stadium, where possible, or planeside. Such screening must be conducted in a manner that meets disinfection and physical distancing requirements.

iv. Passengers should hold their own documents and scan their own boarding pass or mobile device whenever possible.

v. Clubs should consider allowing players and Traveling Party staff to travel to the airport for departure from home city in their own vehicles, including arranging for secure parking (no valet) and a path from the vehicle to the aircraft.
d. Bus Travel

i. Clubs must provide at least five (5) buses for transfers from the airport to the hotel, the hotel to the stadium, and the stadium to the airport, to ensure that members of the Traveling Party can adhere to physical distancing protocols. To that end, Clubs must limit bus occupancy to no more than 50% of capacity. Clubs must assign seats, ensuring that members of the same position group are not seated near each other. All bus transfers must be configured to provide as many seats, rows and free space between passengers as possible. Only members of the Traveling Party are permitted to travel on team buses, and the buses must be treated as restricted areas.

ii. Bus drivers must have undergone appropriate screening and testing to ensure they are not experiencing symptoms of COVID-19, wear PPE at all times, and otherwise ensure that the bus is cleaned and sanitized before and after every trip, including, but not limited to, between any individual trips between the hotel and the stadium on the same day. To the extent drivers park on-site and stay during the game, drivers must follow strict physical distancing guidelines, adhere to the NFL-NFLPA approved cleaning and hygiene protocols, remain in private areas without interacting with other people, and clean and sanitize the bus prior to accepting the Traveling Party for a return to the hotel or a trip to the airport.

VIII. Team Personnel Developing COVID-19 While On the Road

a. Hotel. Traveling teams must hold at least three (3) hotel rooms in the game city until after they have boarded transportation for their home city and confirmed that no member of their Traveling Party has tested positive for or developed symptoms of COVID-19.

b. Transportation Home. The NFL has retained Star Solutions, a private air-charter service, to stand ready to transport Club and league personnel home should they develop symptoms of or test positive for COVID-19 while on the road. The cost of transporting Club personnel will be borne by the Club. Should a Club require air transport services, the Club ICO should contact Eric Kerzner at the NFL Management Council.
NFL-NFLPA Treatment Response Protocol For The 2020 Season

I. Introduction.

a. This Treatment Response Protocol shall govern a Club’s response when a Tier 1, Tier 2, Tier 2M or Tier 3 Individual or other Club employee experiences symptoms of or tests positive for COVID-19 pursuant to the Screening and Testing Protocol during the 2020 NFL Season.

b. The parties will continue to update this Protocol as circumstances warrant and as the science evolves.

II. Infection Control Officer and Infectious Disease Specialist. Each Club shall identify an Infectious Disease Specialist (“IDS”) to serve as a point of contact in the event of an Infectious Disease Emergency (“IDE”), which shall be defined as circumstances caused by biological agents, including bacteria, viruses or toxins with the potential for significant illness or death. IDEs include naturally occurring outbreaks (e.g., measles, mumps, meningococcal disease), emerging and/or novel infectious diseases (e.g., COVID-19), and bioterrorism. Each Club must also appoint an Infection Control Officer to oversee the implementation of the NFL-NFLPA COVID-19 Protocols and to serve as the primary point of contact for any Club employee who experiences symptoms of COVID-19 or tests positive for COVID-19. The Infectious Disease Specialist Contact and Infection Control Officer must be identified prior to the return of players to NFL club facilities for Training Camp.

III. Infectious Disease Emergency Response (“IDER”) Plan. Prior to NFL players returning to NFL Club facilities to start Training Camp, NFL Clubs were each be required to develop an Infectious Disease Emergency Response (“IDER”) Plan that sets forth the Club’s plan for containing an outbreak of disease (in this case, the COVID-19 pandemic). The NFL and NFL Players Association (NFLPA) provided a model baseline IDER Plan for Club use. Each Club’s IDER Plan was subject to review and approval by the NFL, NFLPA and Infection Control for Sports (“ICS”) (formerly known as the Duke Infection Control Outreach Network or “DICON”) as outlined in the parties’ side letter agreement.

IV. Reporting Requirements.

a. Any player, Club employee or contractor (or any person sharing a home with the aforementioned individuals) who develops symptoms or tests positive by rt-PCR or antigen testing (or such other testing agreed to by the parties pursuant to the NFL-NFLPA Screening and Testing Protocol), shall: (i) immediately notify the Club’s Head Team Physician and/or Head Athletic Trainer of such, (ii) self-isolate, and (iii) be medically evaluated by either the Club’s physician(s) or the

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4 Notification to the Club regarding persons who cohabitate with player, Club employee or contractor that develop systems or test positive is the responsibility of the Club affiliated individual.
individual’s private physician, who shall consult with the Club physician and the Club’s IDS (where applicable) to determine next steps, including COVID-19 testing pursuant to this Protocol.

b. All players, Club employees and contractors must promptly notify the Club’s Head Team Physician and/or Head Athletic Trainer if he or she suspects coming into contact with someone that has COVID-19. The following are common symptoms of COVID-19:
   1. Loss or diminution of smell or taste
   2. Cough
   3. Shortness of breath
   4. Chest Pain
   5. Feeling feverish, chills
   6. Muscle pain (not exercise related)
   7. Nausea, vomiting, diarrhea
   8. Sinus or cold-like symptoms (headache, congestion, runny nose, sore throat)
   9. Fever (temperature ≥ 100.4 degrees)

c. The Club Infection Control Officer must notify the NFL Chief Medical Officer of confirmed or suspected (i.e., based on symptoms) cases of COVID-19 as soon as possible and will include the following information:
   1. Date of the positive test
   2. Category of the known positive:
      a. Owner/Employee:
         i. Player
         ii. Staff (Tier 1, 2 or 3)
         iii. Non-Essential Personnel
      b. Vendor
      c. Visitor
         i. Business-side
         ii. Restricted Area Access (if so, why?)
   3. Method of Detection
      a. Home or Facility Screen
      b. Test Result (and where)
      c. Other
   4. Name and contact of local/state health department with whom the club is coordinating contact tracing
   5. Facility Access
      a. Last time at facility
      b. Length of time at facility
      c. Categories of persons in contact with at the facility
      d. Nature and approximate duration of contact
   6. Current quarantine location/Expected return date
As soon as possible following receipt of such information, the NFL Chief Medical Officer will notify the NFL Players Association’s Medical Director about an individual testing positive at the club and convey all of the above information in a deidentified manner. The NFL Chief Medical Officer will also notify Infection Control for Sports (“ICS”) (formerly known as the Duke Infection Control Outreach Network (“DICON”)) of the above information (in a deidentified manner), who will be available to offer assistance and support to the club medical staff as needed (e.g., transmission mitigation, disinfection, etc.). Should the NFL Players Association learn of a COVID-19 positive test for a player or other club employee, the NFLPA will provide the above (deidentified) information to the NFL Chief Medical Officer as soon as possible after receiving the information.

V. Protocol for a Club Employees, Contractors or Players Who Experience Symptoms of COVID-19

a. Any player or Club employee/contractor who works at a Club facility in which NFL players enter either (i) reports and /or exhibits symptoms of COVID-19 or (ii) has a confirmed temperature reading at or above 100.4 degrees Fahrenheit during either his/her Home Screen or Facility Screen may not enter the Club facility, but instead must immediately self-isolate away from the facility and other Club employees and must contact the Club’s Infection Control Officer, Head Athletic Trainer or Head Team Primary Care Sports Medicine Physician for testing and further consultation and direction.

b. If a player or Club employee/contractor develops symptoms of COVID-19 for the first time while inside the Club facility, that individual must be placed in a mask and immediately isolated in a separate room with a closed door and transported and quarantined at home as soon as possible. Particular care should be taken to limit/eliminate any contact with Restricted Areas in the Club facility.

c. Any Tier 1, Tier 2, Tier 2M or Tier 3 Individual (including players) who develops symptoms of COVID-19 will be tested pursuant to the Screening and Testing Protocol as soon as medically feasible.

d. The following additional testing for NFL Players who are High Risk (as defined below) or have COVID-19 symptoms are required:
   i. Home pulse oximeter, if confirmed COVID-19 positive.
   ii. If fever or flu-like symptoms are present and COVID-19 is not confirmed initially, testing for other viral syndromes such as influenza and RSV should be considered (i.e., respiratory multiplex viral PCR).
   iii. If initial PCR testing is negative, repeat testing for COVID-19 must be considered pursuant to the Screening and Testing Protocol.
iv. Confirmation of another virus does not rule out co-infection with COVID-19, and re-testing for COVID-19 should be considered if symptoms persist beyond one week.

v. Labs and ECG are not recommended in patients being managed as an outpatient during the acute phase of a COVID-19 illness as conducting these tests place others at risk when the patient should be in isolation; however, players will require some cardiovascular evaluation before a return to exercise.

e. Clubs must also take the following steps to minimize potential transmission to others in the event that a Club employee, contractor or player is identified as experiencing symptoms of (but has not tested positive for) COVID-19:

i. Identify all other Club employees, contractors and players, who have had “Close Contact” with the symptomatic (but not COVID positive) individual and closely monitor them for any changes in their health or signs of potential COVID-19 symptoms.

a. Any Tier 1, Tier 2, Tier 2M or Tier 3 Individual who has had Close Contact (but is not a “High Risk” Close Contact) with a symptomatic individual and remains asymptomatic shall immediately be isolated away from others, and receive a PCR virus test (or such other test required by the parties) as soon as practicable. Such individual must continue to isolate him or herself until the results of the test are obtained and are negative. Thereafter, if this individual remains asymptomatic, he or she will be permitted to continue to attend the Club facility and participate in activities, subject to the following:

i. Daily testing post-exposure on Days 1-8 and thereafter in accordance with the regular testing schedule set forth in the Screening and Testing Protocol;

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5 The CDC defines “Close Contact” as living in the same household, being within six (6) feet of someone for at least fifteen (15) consecutive minutes, or being in direct contact with secretions from a sick person with COVID-19 (e.g., being coughed on). Close Contact does not include brief interactions, such as walking past someone. For purposes of clarity, this shall include individuals who have had Close Contact with an infected individual while playing a game or during game associated travel. Certain Close Contacts will be determined to be “High Risk” Close Contacts as defined below in these Protocols.
ii. Daily health questionnaires for COVID-19 symptoms, which shall include the questions in the attached COVID-19 Screening Form; and

iii. Increased temperature checks (minimum of 3 times daily).

iv. A record of all testing and screening results shall be maintained by the Club medical staff. For players, testing records shall be entered into each player’s EMR.

b. In the event a Tier 1, Tier 2, Tier 2M or Tier 3 Individual is identified as a Close Contact (but not a “High Risk” Close Contact) to a symptomatic individual on the day before a game or on Game Day, and that individual remains asymptomatic, that individual shall immediately receive a Point of Care (POC) virus test as soon as practicable. Such individual must isolate him or herself until the results of the test are obtained and are negative. Thereafter, if this individual remains asymptomatic, he or she will be permitted to travel and/or participate on the day before a game and/or Game Day, subject to the following:

i. Daily testing post-exposure on Days 1-8 and thereafter in accordance with the regular testing schedule set forth in the Screening and Testing Protocol;

ii. Daily health questionnaires for COVID-19 symptoms, which shall include the questions in the attached COVID-19 Screening Form; and

iii. Increased temperature checks (minimum of 3 times daily).

iv. A record of all testing and screening results shall be maintained by the Club medical staff. For players, testing records shall be entered into each player’s EMR.

v. If the results of the POC test given to a Close Contact on the day before a game or on Game Day are positive, that Close Contact should receive a second POC test:
1. If the second POC test is also positive, the individual will be ineligible to participate and will be treated as an individual who has tested positive for COVID-19 pursuant to the Treatment Response Protocol.

vi. If the second POC test is negative, then the individual shall be given a third POC test, and the results of the third POC test will determine that individual’s ability to participate (i.e., if positive, no participation; if negative, the individual may participate).

2. Immediately clean and disinfect (with hospital-grade EPA List N disinfectants) all surfaces (including equipment), door handles, gym equipment, bathrooms and shower facilities to which the symptomatic individual had access in the previous 24 hours.

3. Reinforce the importance of enhanced hygiene by all individuals, including players and members of the football staff, throughout the club.

ii. The symptomatic individual may not return to any Club facility or interact with any other Club employee or consultant (other than the medical staff) unless and until each of the following has occurred:

1. The individual has had two (2) negative PCR virus tests, at least 24 hours apart; and

2. For Tier 1 and Tier 2 Individuals: the Club’s Head Team Primary Care Sports Medicine Physician approves the individual to return to the Club’s facilities and the NFL Chief Medical Officer is notified.

VI. Care and Monitoring for Tier 1, Tier 2, Tier 2M or Tier 3 Individuals Who Test Positive for COVID-19

a. Club medical staff shall direct the care of any player who tests positive for COVID-19. Players shall remain entitled to also consult with their personal physicians in all related matters, including care and treatment. While in isolation following a positive test for COVID-19 (as specified below), a Tier 1 or Tier 2 Individual must be in daily communication with Club medical staff, including regular follow-up testing (pursuant to the NFL-NFLPA Screening and Testing Protocol) and monitoring of symptoms. Clubs should identify a health care facility to which it will refer players who test positive for COVID-19 for
treatment if the circumstances warrant, including but not limited to hospitalization.

b. Initial Management after a positive test for COVID-19 (regardless of symptoms):

i. The infected individual must immediately isolate from all people (other than medical professionals, as necessary) and continue his or her isolation and restrict all activities outside the home (other than receiving medical care) until he or she receives clearance from his or her physician and (for Tier 1 and Tier 2 Individuals, including players) the Club’s Head Team Primary Care Sports Medicine Physician.

ii. If the individual is at the Club facility when he or she tests positive for COVID-19, the infected individual must be placed in a mask and immediately isolated in a separate room with a closed door in the Club facility, and transported and quarantined at home as soon as feasible.

iii. The infected individual must be provided with a thermometer and pulse oximeter and infected individuals must be instructed to conduct daily self-symptom and temperature checks.

1. Tier 1 and Tier 2 Individuals who test positive for COVID-19 must communicate their daily symptom and temperature checks to the Club’s Head Athletic Trainer and/or Head Team Primary Care Sports Medicine Physician on a daily basis.

2. Clubs should consider monitoring infected players’ HRV, respiratory rate and slow-wave sleep using wearable sensor technology (subject to the approvals set forth below).

Clubs must provide family/household members of the infected individual instructions about precautions, home cleaning, duration of isolation, and recommendations for daily monitoring of household contacts, as well as testing pursuant to the Screening and Testing Protocol.

c. Clubs must also take the following steps to minimize potential transmission to others in the event that a Club employee, contractor or player tests positive for COVID-19:

i. “High Risk” Close Contacts: In the event that a Club employee, contractor or player tests positive for COVID-19, the Club ICO, working closely with IQVIA the NFL Chief Medical Officer and the NFL Management Council, in coordination with the NFLPA shall identify all other Club employees, contractors and players who have had Close Contact with the positive individual and closely monitor them for any
changes in their health or signs of potential COVID-19 symptoms. Such individuals shall be identified as a “High Risk” Close Contact if they have had exposure to the confirmed positive individual that the NFL Chief Medical Officer, in consultation with those as set forth above, concludes represents a higher than normal risk of exposure due to the duration, proximity or other circumstances of the interaction with the confirmed positive. Such “High Risk” Close Contacts must be isolated immediately and will not be permitted to return to the Club facility or interaction with other Tiered Individuals until a minimum of five (5) days have passed since the last exposure to the infected individual (date of last exposure to the infected individual plus five (5) days) and must be monitored for symptoms while continuing daily PCR testing.

a. Tier 1, Tier 2, Tier 2M and Tier 3 Individuals who have had Close Contact (but not a “High Risk” Close Contact) with the positive individual in the preceding 48 hours and who remain asymptomatic shall receive a PCR virus test (or such other test required by the NFL and NFLPA) as soon as practicable. Within 24 hours of receiving the results of the PCR virus test, if such test is negative, the individual will receive a second PCR test. Such individual must isolate him or herself until the results of the first test is obtained and is negative. Thereafter, if this individual remains asymptomatic, he or she will be permitted to continue to attend the Club facility and participate in activities, subject to the following:

i. Daily testing post-exposure on Days 1-8 (and thereafter in accordance with the regular testing schedule set forth in the Screening and Testing Protocol);

ii. Daily health questionnaires for COVID-19 symptoms; and

iii. Increased temperature checks (minimum of 3 times daily).

iv. The individual should consider monitoring HRV, respiratory rate and slow-wave sleep using wearable sensor technology (subject to the approvals set forth below).
b. In the event a Tier 1, Tier 2, Tier 2M or Tier 3 Individual is identified as a Close Contact (but not a “High Risk” Close Contact) to a positive individual on the day before a game or on Game Day, and that individual remains asymptomatic, that individual shall immediately receive a Point of Care (POC) virus test as soon as practicable. Such individual must isolate him or herself until the results of the test are obtained and are negative. Thereafter, if this individual remains asymptomatic, he or she will be permitted to travel and/or participate on the day before a game and/or Game Day, subject to the following:

i. Daily testing post-exposure on Days 1-8 and thereafter in accordance with the regular testing schedule set forth in the Screening and Testing Protocol;

ii. Daily health questionnaires for COVID-19 symptoms, which shall include the questions in the attached COVID-19 Screening Form; and

iii. Increased temperature checks (minimum of 3 times daily).

iv. A record of all testing and screening results shall be maintained by the Club medical staff. For players, testing records shall be entered into each player’s EMR.

v. If the results of the POC test given to a Close Contact on the day before a game or on Game Day are positive, that Close Contact should receive a second POC test:

1. If the second POC test is also positive, the individual will be ineligible to participate and will be treated as an individual who has tested positive for COVID-19 pursuant to the Treatment Response Protocol.

2. If the second POC test is negative, then the individual shall be given a third POC test, and the results of the third POC test will determine that individual’s ability to
participate (i.e., if positive, no participation; if negative, the individual may participate).

2. Tier 1, Tier 2, Tier 2M, and Tier 3 Individual who have had Low Risk\textsuperscript{6} or Medium Risk\textsuperscript{7} Exposures to the individual who tested positive must be monitored for symptoms of COVID-19 consistent with this protocol and will otherwise be tested at the normal cadence set forth in the Screening and Testing Protocol.

ii. Immediately clean and disinfect (with hospital-grade EPA List N disinfectants) all surfaces (including equipment), door handles, gym equipment, bathrooms and shower facilities to which the infected or symptomatic individual had access in the previous 24 hours.

iii. Reinforce the importance of enhanced hygiene by all individuals, including players and members of the football staff, throughout the Club.

d. Any individual (including players) who tests positive for COVID-19 will NOT be allowed to travel, access any Club facility or have direct contact with any other Tier 1, Tier 2, or Tier 3 Individual(s) or other Club employees, contractors or players other than the medical staff unless and until each of the following occurs:

i. For Club employees/contractors who test positive but remain asymptomatic:

1. 10 days have passed since the specimen that tested positive was collected (e.g., for a specimen collected on September 5 that tested positive, player will be eligible to return to practice on September 15 at the earliest); OR

2. The individual receives two consecutive negative PCR virus tests, at least 24 hours apart; and

3. The Club’s Head Team Primary Care Sports Medicine Physician, after consultation with Infection Control for Sports (formerly DICON) (“ICS”) and notification of the NFL Chief Medical

\textsuperscript{6} For purposes of these protocols, a Low Risk Exposure is defined as an individual who was present at the club facility with the infected individual but had no interaction with the infected individual and had no shared locations with the infected individual in the previous 48 hours.

\textsuperscript{7} For purposes of these protocols, a Medium Risk Exposure is defined as an individual who: maintained a distance of 6 feet or greater from the infected individual; had only brief interaction (less than 10 minutes) with the infected individual within 6 feet and both persons were wearing masks; had no physical contact with the infected individual or shared objects during practice, while other locations in the facility were shared with social distancing and cleaning standards as set forth in these protocols.
Officer, determines that the individual may return to the Club facility and interaction with other Tier 1 or Tier 2 Individuals, Club employees/contractors.

ii. For Club employees/contractors who test positive and experience symptoms of COVID-19:

1. At least 10 days have passed since the date symptoms of COVID-19 were first reported to Club medical staff; and

2. At least 24 hours have passed since the individual last had a fever without the use of fever-reducing medications; and

3. Other symptoms (e.g., cough, shortness of breath) have improved; and

4. The Club’s Head Team Primary Care Sports Medicine Physician, after consultation with ICS and notification of the NFL Chief Medical Officer, determines that the individual may return to the Club facility and interact with other Tier 1 or Tier 2 Individuals, Club employees or players; and

5. Any local regulations or requirements are satisfied.

6. For symptomatic infections that are categorized as mild, prior to team training and game play, player must complete a minimum 3-day progressive exercise protocol under team medical staff supervision with appropriate clinical monitoring before returning to full participation. For moderate to severe infections (hospitalized), it is recommended that prior to team training and game play, the player complete a progressive exercise protocol for a minimum of 7 days or equal to twice the duration of the hospitalization.

e. Additional Cardiac Screening for Players Who Have Tested Positive For The COVID-19 Virus and Have Recovered and Players Who Test Positive for COVID-19 Antibodies

i. Any player who (i) tests positive for COVID-19 (by PCR or antibody test), (ii) is presumed COVID-19 positive, or (iii) has any cardiopulmonary symptoms (e.g., shortness of breath, chest pain, tachycardia), is required to undergo the following testing prior to returning to participation:
1. High-sensitivity troponin testing (or troponin I or T if high-sensitivity troponin);

2. Standard 12-lead electrocardiogram (ECG); and

3. Two-dimensional resting echocardiogram to assess left ventricular function.

This screening may occur during the player’s 10-day isolation period, subject to the Club physician’s discretion. In each case, the Club’s Team Physician will review the results of the player’s troponin and cardiac screening with the Club cardiologist. If there are any abnormalities or if additional testing is necessary, such testing should be facilitated by the Club medical staff pursuant to the Screening and Testing Protocol.
f. Mitigation and Treatment Rubric for Exposures to Symptomatic Individual

Close Contact Exposure to Symptomatic Individual

- PCR Virus Test As Soon As Possible (and isolate until results available)

If virus test is **negative** and Close Contact remains **asymptomatic**: Close Contact may return to Club Facility subject to the following:

- Increased symptom monitoring;
- Daily PCR Virus Testing: Days 1-8
- Regular testing schedule thereafter

If virus test is **positive**

- And individual has **no symptoms**:
  - No return unless and until:
  - Player passes cardiac screen (which may be conducted during 10-day isolation period subject to Club physician’s discretion); AND
  1. 10 days have passed since the specimen that tested positive was collected (e.g., for a specimen collected on September 5 that tested positive, player will be eligible to return to practice on September 15 at the earliest); OR
  2. 2 consecutive negative PCR virus tests separated by 24 hours; and
  3. Return approved by the Club physician, after consultation with ICS and notification of NFL Chief Medical Officer.

- And individual is **symptomatic**:
  - No return unless and until:
  1. At least 10 days have passed since the date symptoms of COVID-19 were first reported to Club medical staff; and
  2. At least 24 hours have passed since last fever without the use of fever-reducing medications; and
  3. Other symptoms (e.g., cough, shortness of breath) have improved; and
  4. Return approved by the Club physician, after consultation with ICS and notification of NFL Chief Medical Officer; and
  5. Local regulations and requirements are satisfied.

Low or Medium Risk Exposure to Symptomatic Individual

Monitor for symptoms and testing at normal testing cadence as defined in the Screening and Testing Protocol.
g. Mitigation and Treatment Rubric for Exposures to COVID-19 Positive Individual

**Close Contact Exposure to COVID-19 Positive Individual**

- PCR Virus Test As Soon As Possible (and isolate until results available)

**If virus test is negative and Close Contact remains asymptomatic:**

- Close Contact may return to Club Facility subject to the following:
  - Second PCR test conducted 24 hours after first PCR test;
  - Increased symptom monitoring;
  - Daily PCR Virus Testing: Days 1-8

- Regular testing schedule thereafter

**If virus test is positive**

- **And individual has no symptoms:**
  - No return unless and until:
    - Player passes cardiac screen (which may be conducted during 10-day isolation period subject to Club physician’s discretion); AND
    1. 10 days have passed since the specimen that tested positive was collected (e.g., for a specimen collected on September 5 that tested positive, player will be eligible to return to practice on September 15 at the earliest); OR
    2. 2 consecutive negative PCR virus tests separated by 24 hours; and
    3. Return approved by the Club physician, after consultation with ICS and notification of NFL Chief Medical Officer.

- **And individual is symptomatic:**
  - No return unless and until:
    1. At least 10 days have passed since the date symptoms of COVID-19 were first reported to Club medical staff; and
    2. At least 24 hours have passed since last fever without the use of fever-reducing medications; and
    3. Other symptoms (e.g., cough, shortness of breath) have improved; and
    4. Return approved by the Club physician, after consultation with ICS and notification of NFL Chief Medical Officer; and
    5. Local regulations and requirements are satisfied.

**Low or Medium Risk Exposure to COVID-19 Positive Individual**

- Monitor for symptoms and testing at normal testing cadence as defined in the Screening and Testing Protocol.
h. Mitigation and Treatment Rubric for “High Risk” Close Contact to COVID-19 Positive Individual

“High Risk” Close Contact Exposure to COVID-19 Positive Individual

PCR Virus Test As Soon As Possible and Isolate Immediately

If virus test is **negative** and “High Risk” Close Contact remains **asymptomatic**:
- Close Contact may return to Club Facility subject to the following:
  - Five (5) days have passed since last exposure to infected individual (date of last exposure plus 5 days);
  - Negative daily PCR tests from each day;
  - Approval by ICS and the NFL Chief Medical Officer

And individual has **no symptoms**:
- No return unless and until:
  - Player passes cardiac screen (which may be conducted during 10-day isolation period subject to Club physician’s discretion); AND
  1. 10 days have passed since the specimen that tested positive was collected (e.g., for a specimen collected on September 5 that tested positive, player will be eligible to return to practice on September 15 at the earliest); OR
  2. 2 consecutive negative PCR virus tests separated by 24 hours; and
  3. Return approved by the Club physician, after consultation with ICS and notification of NFL Chief Medical Officer.

If virus test is **positive**

And individual is **symptomatic**:
- No return unless and until:
  1. At least 10 days have passed since the date symptoms of COVID-19 were first reported to Club medical staff; and
  2. At least 24 hours have passed since last fever without the use of fever-reducing medications; and
  3. Other symptoms (e.g., cough, shortness of breath) have improved; and
  4. Return approved by the Club physician, after consultation with ICS and notification of NFL Chief Medical Officer; and
  5. Local regulations and requirements are satisfied.
i. Treatment Rubric for Individuals Experiencing Symptoms of COVID-19

Individual Experiences Symptoms of COVID-19

Remove from Club facility as soon as possible

No return unless and until:
Two (2) consecutive negative PCR tests, separated by 24 hours
j. Treatment Rubric for COVID-19 Positive Individual who is Asymptomatic

Individual Tests Positive for COVID-19 and is Asymptomatic

Isolate as soon as possible

No return unless and until:

Player passes cardiac screen (which may be conducted during 10-day isolation period subject to the Club physician’s discretion); AND

1. 10 days have passed since the specimen that tested positive was collected (e.g., for a specimen collected on September 5 that tested positive, player will be eligible to return to practice on September 15 at the earliest); OR

2. 2 consecutive negative PCR virus tests separated by 24 hours; AND

3. Return approved by the Club physician, after consultation with ICS and notification of NFL Chief Medical Officer
k. Treatment Rubric for COVID-19 Positive Individual who is Symptomatic

### Individual Tests Positive for COVID-19 and is Symptomatic

- Isolate as soon as possible

### No return unless and until:

1. At least 10 days have passed since the date symptoms of COVID-19 were first reported to Club medical staff; and

2. At least 24 hours have passed since last fever without the use of fever-reducing medications; and

3. Other symptoms (e.g., cough, shortness of breath) have improved; and

4. Return approved by the Club physician, after consultation with ICS and notification of NFL Chief Medical Officer; and

5. Local regulations and requirements are satisfied.
VII. Contact Tracing and Additional Measures to Reduce the Risk of Transmission

a. Contact tracing shall be conducted by IQVIA (a third-party firm with expertise in contact tracing that has been jointly appointed and retained by the Parties), in conjunction with the Club’s Infection Control Officer immediately upon a positive test result of a Club employee or contractor. IQVIA and the Club’s Infection Control Officer and will work cooperatively with local health authorities to identify other people who have been in contact with the person who tests positive. Clubs should proceed with contact tracing even if the response of local health authorities is delayed. If there are no such applicable local regulations, the Club ICO shall develop a process for contact tracing.

b. Contact tracing is key to slowing the spread of COVID-19 and helps protect players, Club staff and the community. NFL players are strongly encouraged to be honest and forthcoming during any contact tracing interview(s). Information disclosed during contact tracing cannot be used for punishment. Specifically, NFL players participating in contact tracing efforts pursuant to the NFL-NFLPA COVID-19 Protocols, will not be subject to any form of discipline by the NFL or any NFL Club. Information shared during contract tracing interviews shall be used for identifying potential contact exposures only. No personal data is recorded and data protection guidelines shall be observed. If the NFL or an NFL Club disciplines a player for any violation of the NFL-NFLPA COVID-19 Protocols, the NFL and/or NFL Club must demonstrate that it obtained evidence of such violation outside of contact tracing interviews.

c. In the event of a confirmed positive test for COVID-19 for any Club employee, contractor or individual accessing the Club facility, in coordination with local health officials, each Club must:

i. Conduct a contact tracing investigation to identify all other Club employees, contractors and/or players, including at other Clubs, who had Close Contact with the infected individual;

1. Contact tracing to determine Close Contact exposures in-game will be conducted using Kinexon tracking devices.

2. Tier 1, Tier 2, Tier 2M and Tier 3 Individuals will also be required to wear Kinexon Proximity Recording tracking devices at all times while engaged in team activities (including in the Club facility, during practices, and during team travel). Such devices will only be used to determine Close Contact exposures during team activities. The data and information collected from the Proximity Recording tracking devices shall not be shared with or used by the Club or any third party for any purpose other than evaluating Close
Contact exposures and evaluating efficacy and compliance with the NFL-NFLPA COVID-19 Protocols.

ii. Notify those individuals of their potential exposure and probable need for quarantine or isolation pending the results of testing;

iii. Arrange for those individuals to be tested; and

iv. Notify the proper health authorities as required by the applicable local regulation/law.

v. Each Club’s contact tracing procedures shall include the following mandatory steps:

1. The Club ICO must review the Kinexon device proximity data for the infected/symptomatic individual to identify any other individuals who are Close Contacts to that person;

2. The Club ICO must also interview the infected/symptomatic individual to determine whether there are additional Close Contacts that may be identified;

3. For any occurrence when a Club has receives a positive test result or an individual reports symptoms of COVID-19, the Club is required to engage IQVIA to participate in the entirety of the contact tracing process. Specifically, the Club ICO will be required to contact IQVIA and review: (i) the relevant Kinexon data for that individual and any Close Contacts identified as a result; (ii) whether additional individuals should be identified as Close Contacts; (iii) the information gathered as a result of the Club’s contact tracing interviews with the positive or symptomatic individual and any Close Contacts; and (iv) the steps taken as a result of the data and interviews. IQVIA may require the Club ICO to conduct further investigation and/or interviews upon its review. The Club is not required to have a member of IQVIA’s staff participate in each interview but is encouraged to do so. Also, in certain circumstances the NFL Management Council and NFL Chief Medical Officer may participate in the contact tracing process to identify Close Contacts or additional risk of transmission.

4. If the Contact Tracing process results in the NFL Chief Medical Officer determining that certain individuals are “High Risk” Close Contacts, such “High Risk” Close Contacts must be isolated immediately and will not be permitted to return to the Club facility
or interaction with other Tiered Individuals until a minimum of five (5) days have passed since the last exposure to the infected individual (date of last exposure to the infected individual plus five (5) days) and must be monitored for symptoms while continuing daily PCR testing.

d. Such Close Contacts (other than Tier 1 and 2 Individuals) should be referred to a local healthcare facility for COVID-19 virus testing.

e. Each Club’s ICO will be required to participate in a telephonic or virtual check-in meeting with IQVIA once per week (regardless of whether the Club had positive tests during that week) to review the Club’s Kinexon data for the previous week and to identify potential risk mitigation techniques or strategies the Club may employ going forward.
NFL-NFLPA Game Day Protocol Involving Players for the 2020 Season

I. Introduction.
   a. A key component of the NFL and NFLPA’s COVID-19 Protocols is limiting exposure risk to NFL players, coaches, club medical staffs, and other club and league staff.
   b. This Game Day Protocol, in conjunction with other COVID-19 protocols shall govern the conduct of all NFL games during the 2020 Season.
   c. The parties will continue to update this Protocol as circumstances warrant and as the science evolves.
   d. Prior to each NFL Club’s first game, each Club will be required to supplement its Infectious Disease Emergency Response (“IDER”) Plan to set forth the Club’s plan for mitigating risk of COVID-19 transmission for Game Day pursuant to this Protocol. Each Club’s IDER Plan will be subject to review and approval by the NFL, NFLPA and Infection Control for Sports ("ICS") (formerly known as the Duke Infection Control Outreach Network or “DICON”) as outlined in the parties’ side letter agreement.

II. Game Day Personnel.
   a. For purposes of this Game Day Protocol, the following individuals shall be designated as “Game Day Personnel.” Maximum numbers are set forth in Section III below.
      1. Players
      2. Club-Designated Personnel with Game Day Working Functions
      3. On-Field Stadium Operations and Security
      4. League Employees Deemed by NFL Football Operations to Have an Essential Game Day Working Function
      5. League Game Day Assistants
      6. Club Game Day Assistants
      7. Game Officials
      8. Unaffiliated Neurotrauma Consultants (UNCs)
      9. Airway Management Physicians (AMPs)
      10. Visiting Team Medical Liaisons (VTMLs)
      11. Certified Athletic Trainer Spotters (ATC Spotters)
      12. X-Ray Technician
      13. EMT/ALS Medical Personnel
      14. Broadcast Network
      15. NFL Films
      16. Club Ownership
      17. Official League Visitors (Commissioner Approval Required)
   b. At least seven (7) days prior to each Club’s first game, each Club must submit to the NFL (attention: Meghan Carroll) a list of individuals whom the Club wishes to designate Game Day Personnel. Each list must include the individual’s first
name, last name, title, role (if unclear with title), employer (if not the Club), and requested access (Bench Area or Field as defined below). The NFL will review the lists and either approve or require revisions. Any proposed changes to a Club’s list during the season must be submitted to, and approved by, the NFL (attention: Meghan Carroll) at least three (3) days prior to any relevant game.

c. The NFL Football Operations Department must approve all league employees with “Game Day Access” and certify that they have an essential game function. All special league “Game Day” credentials must be approved by the Commissioner.

III. Game Day Access for Game Day Personnel.

- **Bench Area Access.** The “Bench Area” shall be defined as an area on the sidelines of the field surrounding the Home or Visiting Team Bench, which shall be delineated with a yellow dotted line between the respective 30-yard lines (Club personnel with Bench Area Access must stay within the 32-yard lines, which will be delineated with a white line), as depicted on the attached Exhibit A. Only those individuals with Bench Area Access shall be permitted to be within the designated Bench Area at any time during a game or when Tier 1 Individuals are in the Bench Area. All individuals with Bench Area Access, except for Active Players, shall be required to wear masks at all times. Coaches must wear face masks or double-layered gaiter in the Bench Area. A face shield may be worn in addition to, but not in lieu of, masks or double-layered gaiters, unless the coach is a “Play Caller,” in which case (s)he may wear a face shield alone, although (s)he is strongly encouraged to wear either a mask or a double-layered gaiter in addition to the face shield. Players who are not substituting into the game are strongly encouraged to wear masks on the sidelines, except for at games played in stadiums with state or local regulations that make the wearing of masks mandatory.8 In such cases, players on the sidelines must wear masks. Disposable masks will be provided by the Home Club in each Bench Area for such use.

i. Only the following individuals shall have Bench Area Access, and such individuals with Bench Area Access shall be limited to the following numbers of individuals:

1. Players – Maximum 53
2. Club-Designated Personnel with Game Day Working Functions – Maximum 65 (All coaches, including those in the Coaches’ Booth, must count against this maximum; all of these individuals must be tested in accordance with the requirements for Tier 1 and Tier 2 Individuals)
3. Ownership – Maximum 3
4. Game Officials – Maximum 7
5. Chain Crew – Maximum 5
6. Ball Crew – Maximum 5
7. Coach-to-Coach Technician – Maximum 1

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8 As of the date of this Protocol, masks will be mandatory for all individuals (including players) on the sidelines in at Buffalo and San Francisco.
8. Unaffiliated Neurotrauma Consultants (UNCs)*
9. Airway Management Physician (AMP)*
10. Visiting Team Medical Liaison (VTML).*
11. Instant Replay Field Communicator (Teal Hat) – Maximum 1

* These individuals may require limited Bench Area Access to assist the relevant Team if necessary. Otherwise, they will be permitted on the field but must stand outside the Bench Area.

ii. Screening and Testing for Individuals with Bench Area Access.

1. Unless otherwise stated in this Protocol, all players and Club-designated individuals with Bench Area Access will undergo screening and testing in accordance with the Screening and Testing Protocol.

2. All other individuals with Bench Area Access, including Club Physicians and Club Ownership must receive approved PCR virus testing three (3) days prior to Game Day. UNC’s, AMPs, VTMLs, Club Physicians and Club Ownership may undergo such virus testing via an at-home saliva-based test provided by the Sports Medicine Research and Testing Laboratory (“SMRTL”) and must provide documentation of a negative viral test to the NFL Chief Medical Officer before they are permitted to report to the Stadium on Game Day. Game Officials, Club physicians and Club Ownership must also undergo approved POC testing upon arrival in game city (and no more than 24 hours prior to Game Day) before they are permitted to report to the Stadium on Game Day. Testing cadence for these individuals and a maximum of five (5) club advance travel personnel will be set forth in a separate document.

3. No individual subject to this Game Day Protocol who receives a positive virus test prior to Game Day will be permitted access to the Stadium.

4. All individuals with Bench Area Access shall also undergo Symptom and Temperature Screens on Game Day as follows:
   a. “Pre-Game Home Screen.” Each individual with Bench Area Access must perform a self-screen before leaving his or her residence or hotel for the Stadium on Game Day. As part of the Pre-Game Home Screen, each individual shall measure his or her own temperature before engaging in any activities that might compromise the accuracy of measurements, such as eating, drinking, exercising, or ingesting fever-reducing medications. Each individual with Bench Area Access will also complete a symptom and exposure questionnaire containing the questions in the attached COVID-19 Game Day Screening Form as part of...
the Pre-Game Screen. Any individual who records a temperature at or above 100.4 degrees Fahrenheit, or otherwise responds in a way that requires additional screening must immediately contact the appropriate ICO and, if applicable, the Head Team Physician as required by his/her Club’s IDER Plan and must not report to the Stadium.

b. “Pre-Game Symptom and Temperature Screen.” Each individual with Bench Area Access will have his or her temperature taken by contactless thermometer and other symptoms checked and recorded prior to entering the Stadium on Game Day. The Pre-Game Symptom and Temperature Screen will include the questions listed on the attached COVID-19 Game Day Screening Form. Any individual who records a temperature at or above 100.4 degrees Fahrenheit, or otherwise responds in a way that suggests they may have been exposed to COVID-19 shall not be permitted to enter the Stadium on Game Day.

c. Contact Tracing. All individuals with Bench Access (including Players) are required to wear Kinexon Tracing Devices following entry to the stadium until departure.

b. Field Access. Individuals with Field Access (but not Bench Area Access) shall be permitted to be on the field during a game, but may not enter the Bench Area, absent emergency circumstances. Individuals with Field Access (but not Bench Area Access) must remain outside of the yellow dotted line, which shall be between the respective 30-yard lines and 10 feet away from the Bench Area whenever possible, but in no instance less than 6 feet, as depicted on the attached Exhibit A. Individuals with Field Access (but not Bench Area Access) shall be identified and distinguished from others by wearing a field access armband as assigned by NFL Football Operations. Such individuals with Field Access shall wear appropriate masks or other face coverings and other proper PPE at all times (e.g., surgical masks, not bandanas). Face shields are not approved face coverings however face shields may be worn in addition to face masks or neck gaiters. Effective four (4) hours prior to kickoff and through the time the last player leaves the field at the end of the game, only those individuals with approved Field Access shall be permitted to be on the field.

i. Only the individuals listed below shall have Field Access. The number of individuals with Field Access shall be determined by the NFL and shall not exceed the following maximum numbers:

1. Stadium Operations and Security – Maximum 32
2. Field Crews – Maximum 7
3. League Game Day Assistants – Maximum 16
4. Other Club Game Day Assistants – Maximum 14
5. Club Media (who are designated Tier 1 or Tier 2 by the Club) – Maximum 2
6. Broadcast Network – Maximum 46*
7. NFL Films – Maximum 6
8. NFL Football Operations Support Staff – Maximum 6
9. Individuals who must perform necessary playing field remediation (including removal of tarp) or to address an emergency situation.
10. Official League Visitors (Commissioner Approval Required)

With the exception of the Broadcast Network allotment, if the NFL does not allocate the maximum number of individuals in any of the above categories, the NFL may reallocate the remainder to another category.

*The parties intend for the Broadcast Network allotment to be below 46 for games other than primetime games.

ii. Screening for Individuals with Field Access. All individuals with Field Access (but not Bench Area Access) shall undergo: (i) testing as required by those with Bench Access, and provided by the NFL or NFL Partners; OR (ii) in the case of Broadcast Networks and related entities, approved testing provided by the Broadcast Network or related entity, taken within 48 hours of Game Day; OR (iii) in the case of municipal, state or federal employees or other employees who are members of labor unions, testing as required by their labor agreements OR (iv) in the case of medical personnel, testing as required by the medical institution with which they are affiliated. Any Official League Visitor(s) approved by the Commissioner must undergo the same testing required of Club Ownership as described above. All Individuals with Field Access must complete a Pre-Game Home Screen and a Pre-Game Symptom and Temperature Screen prior to entering the Stadium on Game Day, as described in Section III(a)(ii) above. Any individual with Field Access who receives a positive virus test, records a temperature at or above 100.4 degrees Fahrenheit, or otherwise responds in a way that suggests he or she may have contracted COVID-19 must not report to the Stadium on Game Day.

iii. Location of Individuals with Field Access. As part of their IDER Plans, Clubs will be required to submit a diagram identifying the proposed locations for all Field Access Individuals at their home stadium.

c. Screening and Testing for Other Game Day Personnel Without Bench or Field Access.
   i. X-Ray Technicians must undergo a PCR test within 48 hours of Game Day prior to entering the Stadium and must be screened in accordance with the requirements for individuals who have Field Access.

d. No Field Access At Any Time.
   i. Certified Athletic Trainer Spotters (ATC Spotters)
   ii. Sideline Reporters, including the Televising Network, National Radio, and Club Flagship Radio (regardless of Tier)
iii. Pregame Television Reporters

iv. On-field entertainment (e.g., cheerleaders, mascots, flag runners, etc.)

v. No other individuals may be permitted to have Field Access, including but not limited to fans, guests, non-essential Club or league staff, or non-working Club or league staff.

e. On-field fan seating is prohibited.

IV. Protocols Governing the Stadium Environment.

a. General Rules.

i. Clubs must ensure they have proper air flow and filtration throughout the stadium, by measuring ventilation and calculating air changes. For domed stadiums, prior to each Clubs first game, Clubs must provide to the NFL (attn: Molly Delaney) a TAB Report (i.e., a test, adjust and balance of the HVAC system including air flow/static pressure of the stadium facility, details on the amount of outside air being introduced into the stadium, the calculated number of air changes per hour, the amount of return air being exhausted to atmosphere and returned to the mechanical room, and the level of MERV filtration in place).

ii. All individuals with Bench Area Access must maintain physical distancing (of at least 6 feet from other individuals) as much as possible. All individuals with Bench Area Access are prohibited from interacting with fans at all times (e.g., no autographs or photos). Interactions with the media shall be governed by the Media Protocol. Home and Away Teams are prohibited from post-game interactions within 6 feet of one another All individuals with Bench Area Access (including players and club staff) are prohibited from sharing any personal items, including cups, food, towels, and clothing.

b. Arrivals to the Stadium.

i. The Home Team (players and coaches) will be required to stay at the team hotel the night prior to each game. All hotels must comply with the requirements set forth in the Team Travel Protocol and must provide parking for all players and essential staff segregated from the public.

ii. The Home Team (players and coaches) may arrive at the Stadium in their individual vehicles provided they arrive at a designated time that is separate from non-working staff.

iii. The Visiting Team must travel to the Stadium on Game Day via bus. All buses must comply with the requirements set forth in the Team Travel Protocol. If both the Home and Visiting Team arrive on buses, their arrivals must be staggered so that each team arrives at the Stadium separately.

iv. Where possible, the Stadium arrival area and the path to the applicable (Home or Visiting Team, or Game Officials) Locker Room must be shut down by team and Stadium security to anyone other than the applicable group (Home or Visiting Team or Game Officials) arriving at the Stadium.
If it is not practical to shut down the pathway to the applicable Locker Room, the path to the applicable Locker Room must be partitioned so that no other individuals will be within 12 feet of Home or Visiting Team Personnel or Game Officials while they are walking to the Locker Room (e.g., by plexiglass, bike racks, or pipe-and-drape).

v. Staff who are not in the Club’s Traveling Party or do not have Field Access or Bench Access, media or fans will not be permitted inside the Stadium arrival area. Tier 1 or Tier 2 Club media, NFL Films personnel with Field Access and Network personnel with Field Access will only be permitted to record arrivals to the Stadium from a distance greater than twelve (12) feet, while wearing appropriate PPE. It is recommended that robotic/fixed cameras are utilized where possible.

c. Stadium Food Services.

i. Only individually pre-packaged food will be permitted for players, Club personnel, Game Officials and Game Day Personnel on Game Day.

d. Locker Room Protocols.

i. Access to the Players’ Locker Room while players are present is restricted to 40 individuals in the following categories, all of whom must have Bench Area Access (i.e., have satisfied the testing and screening requirements):9

1. Coaching Staff
2. Athletic Training Staff
3. Equipment Staff
4. General Manager (Maximum – 1)
5. Team Security (Maximum – 1)
6. Club Public Relations/Communications (Maximum – 1)

In the event a Player needs medical attention in the Locker Room, a medical professional (e.g., Club Physician, X-Ray technician, UNC, VTML, EMT, etc.) may access the Players’ Locker Room without being included in the maximum of 40 individuals with Locker Room access. A maximum of one (1) Club COVID Protocol Coordinator may also access to the Locker Room for the purpose of managing Kinexon devices or disinfection required by this Protocol without being included in the maximum of 40 individuals with Locker Room access.

In addition, if Club Ownership elects to enter the Players’ Locker Room while players are present, they are limited to 3 individuals, all of whom must have been tested and screened as set forth in Section III(a)(ii)(2) above.

ii. Prior to Home and Visiting Team arrivals to the Stadium and pregame sanitization procedures, individuals responsible for player tracking, player

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9 If there is available auxiliary space for utilization on game day, any such available space must be allocated in an equitable manner between the home and visiting Club. Their use must be outlined and approved in the Club’s IDER Plan.
microphones, and security measures will be permitted to enter the Locker Rooms in order to perform necessary pregame functions (individuals that directly interact with players to facilitate these devices must have either field or bench access and have undergone all testing required). Arrivals must be coordinated with Home and Visiting Teams and Game Officials.

iii. Home and Visiting Team and Game Official Locker Rooms must be cleaned and sanitized pursuant to the requirements in the Facilities Protocol. Such cleaning must occur at least three times on Game Day: once immediately prior to Home and Visiting Teams and Game Officials arriving at the Stadium; once immediately prior to Halftime; and once after Halftime but prior to the end of the game. The Visiting Team may elect to sanitize its own locker room rather than relying on the Home Team. If the Visiting Team intends to rely on the Home Team for sanitization, it must notify the Home Team no later than four (4) days prior to Game Day.

iv. The Home Team is responsible for ensuring that the Home and Visiting Teams and Game Official Locker Rooms are reconfigured to permit six (6) feet of space between each individual (by using every other locker or adding additional lockers) where possible. If not possible, Clubs must implement other measures to reduce risk such as adding plexiglass dividers between lockers or adding temporary lockers or other measures to preserve physical distancing and to prevent potential transmission. Each player must have individual space designated to store his belongings, without comingling, if locker space is unavailable.

v. All individuals must maintain physical distancing in Locker Rooms.

vi. Clubs must make hand sanitizer and other hygiene materials (e.g., soap, tissues) available in all areas of the Locker Rooms. Where possible, clubs are encouraged to use no-touch dispensers.

vii. For their protection, players and training staff are prohibited from using creams, gels, lotions, or balms from a shared container. Clubs must remove any shared containers from the Locker Rooms to avoid such improper use.

viii. Clubs must ensure they have sufficient air flow and filtering in Home and Visiting Team Locker Rooms, by measuring ventilation and calculating air changes. Prior to each Club’s first game, Clubs must provide to the NFL (attn: Molly Delaney) a TAB Report (i.e., a test, adjust and balance of the HVAC system including air flow/static pressure of the stadium facility, details on the amount of outside air being introduced into the stadium, the calculated number of air changes per hour, the amount of return air being exhausted to atmosphere and returned to the mechanical room, and the level of MERV filtration in place).

ix. Clubhouse attendants may not access the Locker Room when players and Bench Area Access personnel are present.

e. Training Room/Medical Rooms
i. Clubs must ensure they have sufficient air flow and filtering in Home and Visiting Training/Medical Rooms, by measuring ventilation and calculating air changes. Prior to each Clubs first game, Clubs must provide to the NFL (attn: Molly Delaney) a TAB Report (i.e., a test, adjust and balance of the HVAC system including air flow/static pressure of the stadium facility, details on the amount of outside air being introduced into the stadium, the calculated number of air changes per hour, the amount of return air being exhausted to atmosphere and returned to the mechanical room, and the level of MERV filtration in place).

ii. After every use, clean and disinfect surfaces in the training room (e.g., medical tables, stools, chairs, medical equipment, trash cans, recycle bins) using hospital grade EPA List N disinfectants.

iii. Clubs must cover treatment or rehab tables with a clean towel (which should then be left in a dirty clothes basket for laundering) or single-use covering, which should be discarded after usage. Treatment and rehab tables must be disinfected after each use using hospital grade EPA List N disinfectants.

iv. All floors are to be swept and mopped with a hospital grade EPA List N disinfectant detergent solution.

v. All carpets shall be vacuumed, extracted if needed and spot cleaned in accordance with the manufacturer’s specifications.

vi. All trash and medical receptacles shall be emptied, wiped out with a disinfectant solution, trash removed, and the can liner replaced.

vii. Showers may be used but players must be kept at least six (6) feet apart when in use. Clubs may consider shutting off some shower heads to ensure physical distancing is maintained. Showers shall be disinfected after each use using hospital grade EPA List N disinfectants.

f. Movements On and Off the Field.

i. Any time individual players or the Home or Visiting Team or Game Officials enter or exit the field, they must do so via a designated “Team/Officials Only” tunnel, where possible. If not possible, the access tunnel to the field must be cleared of all non-team/Game Official personnel for the period of time during which Home and Away Teams (team or individual players) or Game Officials will be traveling through the tunnel to the field. Alternatively, in Stadiums in which Teams/Game Officials must travel through tunnels to which non-team personnel or Game Officials will have access, partitions (e.g., floor to ceiling plexiglass) must be installed to create a barrier between team personnel/Game Officials and any such non-team/Game Official personnel. This shall apply before pregame warmups, after pregame warmups, at halftime, at the end of the game, and when an injured player is being removed from the field and to the Locker Room. Notwithstanding the above, Club media, NFL Films personnel and Network personnel with Field Access are permitted in the tunnel to record
players provided they remain twelve (12) feet away from Bench Area Access personnel at all times and wear appropriate PPE. It is recommended that robotic/fixed cameras are utilized where possible.

1. Stadium/Team security will be responsible for clearing the tunnels during scheduled times from team arrivals to kickoff.
2. For Stadiums with a limited number of tunnels, the Home Team must use partitions (e.g., plexiglass or pipe-and-drape) to ensure physical distancing may be maintained.

ii. All pregame meetings are prohibited from taking place on the field or in Stadium tunnels. Any meetings must comply with physical distancing requirements.

iii. Any essential pregame on-field personnel, who have been approved by the league and have appropriate credentials, must conduct their job, to the extent possible, no later than four (4) hours prior to kickoff.

iv. NFL Films and the broadcasting network may each utilize two (2) cameras on the playing field during warm-ups provided that they maintain at least four (4) yards of distance from players and are wearing proper PPE. Each participating team may also use one (1) of their two (2) Club media with Field Access to cover pregame warm-ups on the playing field provided that they are included in the Game Day Personnel list, have Field Access, and maintain at least four (4) yards of distance from players and are wearing proper PPE. No other personnel will be permitted on the playing field during pregame warm-ups.

v. Consistent with current league policy, Network wireless cameras (wireless handheld or Steadicam only) will be allowed to access the playing field when both the Game Clock and Play Clock are stopped, provided that they maintain at least four (4) yards of distance from players and are wearing proper PPE. Following a touchdown, the wireless camera operator may enter and remain on the field until the kicking/offensive team approaches the line of scrimmage or the Play Clock reaches 25 seconds, whichever occurs first. If the Network is utilizing Line to Gain cameras they will be limited to a maximum of 2, and will operate consistent with the chain crew on either sideline.

g. Team Introductions
   i. Setups for Team Introductions are permissible, provided the production elements are set when players are not on the field and broken down following Team Introductions. Personnel that cue Team Introductions must be included on a Club’s Game Day Personnel list.
   ii. During Team Introductions, all individuals with Field Access must maintain physical distancing.

h. Coin Toss Procedures
   i. Each team is permitted to send only one (1) representative out for the coin toss. Face coverings will be required for all coin toss participants.
ii. Club media, NFL Films personnel and Network personnel with Field Access are permitted to cover the coin toss provided they remain four (4) yards away at all times and wear appropriate PPE.

i. In-Game Sanitization Requirements
   i. All communal equipment must be disinfected regularly throughout the game using hospital grade EPA List N disinfectants.
   ii. Game footballs will be cleaned prior to the game by each team in accordance with EPA List N disinfectants. Game footballs should be wiped with a microfiber cloth periodically during the game as needed.
   iii. Club equipment and athletic training staffs will be provided with wipes and other cleaning solutions by the Home Team to periodically clean/disinfect benches, chairs, Gatorade carts, communication carts, Surface tablets, hard surfaces, helmets/visors, mouthguards, and any other sideline equipment.
   iv. Acceptable mouthguard cleaning solution will be available on the sideline, provided by the Home Team.
   v. Gatorade stations will be set up to ensure that no cups or bottles will be shared by anyone in the Bench Area. Players are not to share water bottles or cups; either individual labeled bottles or disposable vessels to be used for hydration.
   vi. Players are not to share towels; once used a towel should be placed in laundry pile. A sufficient number of towels will be provided by the Home Team for use in game.
   vii. Medical tents will be set up for on-field medical evaluations. Clubs may elect to conduct all medical evaluations, including Concussion Protocols, inside their respective Locker Rooms. Hard surfaces in the tents must be cleaned/disinfected following each use with hospital grade EPA List N disinfectants. The ends and all ventilation portals of the tents shall remain open at all times and everyone (including player being evaluated) must wear PPE while inside the medical tent (unless medically contraindicated).
   viii. Home team is to ensure that there are biohazard bags available in both bench areas for disposal of masks following use.

j. Coaches Traveling To and From the Coaches’ Booth
   i. Where possible, the path to and from the Coaches’ Booth should be cleared of other individuals. If not possible, Coaches must wear masks when traveling to and from the Coaches’ Booth and proper physical distancing must be maintained. The elevator to and from the Coaches’ Booth must be shut down to non-team personnel during coaches’ movements. An elevator operator will be required, and such elevator operator must wear a mask and other proper PPE at all times. Coaches are required to wear masks and maintain physical distancing while in the Coaches’ Booth.

k. Players Who Are Not Dressed on Game Day
i. No more than 53 players are permitted in the Players or Coaches Locker Rooms, Bench Area or on the field. Injured players and Practice Squad players should remain in another designated Stadium location for each Club separated from other non-team personnel and/or untested individuals during pregame and throughout the game so as to avoid interactions with any non-team personnel and/or untested individuals. Such designated area must be large enough to permit physical distancing at all times and must be disinfected prior to players or designated Club individuals entering the designated location. All Tiered individuals in such designated area(s) must wear masks at all times. For avoidance of doubt, Practice Squad Players are prohibited from entering the Players’ Locker Room and accessing the field on Game Day; therefore, Practice Squad Players may not be included in a Club’s 65 Bench Area Access personnel group. Home and visiting teams must be provided equal designated areas. All individuals in these locations must wear PPE at all times. Clubs must identify these designated areas in a supplement to their IDER Plans and submit it to the Management Council (Attn: Meghan Carroll) for approval no later than September 4, 2020.

l. Postgame Field Access
   i. Club media, NFL Films personnel and Network personnel with Field Access are permitted on the field provided they remain four (4) yards away from players and Bench Area Access personnel at all times and wear appropriate PPE

m. Team Departures from the Stadium.
   i. Media will be prohibited from accessing the Locker Room.
   ii. Post-game meals must be provided in accordance with the Team Travel Protocol.
   iii. Departures from each Locker Room (Home, Visiting Team, Game Officials, etc.) must be staggered, unless separate pathways to exits and Stadium departure areas may be used. Individuals departing each Locker Room must have a private path to the bus or parking lot. If it is not practical to have a private path to the bus or parking lot, the path from the Locker Room, must be partitioned so that no other individuals will be within twelve (12) feet of any Individuals with Bench Area Access while they are walking from the Locker Room to the relevant exit (e.g., by plexiglass, bike racks, or piped-and-draped). The Visiting Team must depart the Stadium via bus.
   iv. All buses must comply with the requirements set forth in the Team Travel Protocol. Bus departures must be staggered so that each team’s buses may load and depart the Stadium at the same time.
   v. The path from the applicable (Home or Visiting Team or Game Officials) Locker Room to the Stadium departure area must be shut down by team and Stadium security to anyone other than the Traveling Party or Game Day Personnel. If it is not practical to shut down the pathway from the
applicable Locker Room, the path from the applicable Locker Room to the
departure area must be partitioned so that no other individuals will be
within twelve (12) feet of any Individuals with Bench Area Access while
they are walking from the Locker Room to the relevant exit (e.g., by
plexiglass, bike racks, or piped-and-draped).

vi. No fans, family members or other guests will be permitted inside the
Stadium departures area. Club media, NFL Films and Network personnel
with Field Access will only be permitted to record departures from the
Stadium from a distance of twelve (12) feet while wearing appropriate
PPE. It is recommended that robotic/fixed cameras are utilized where
possible.

vii. When Clubs are required to screen for TSA compliance using charter
rules, clubs should make every effort to screen in the safest way possible
(i.e., where possible, clubs should avoid screening at the airport, unless it
is the safest option). Such screening must be conducted in a manner that
meets disinfection and physical distancing requirements.
NFL-NFLPA Screening and Testing Protocol For 2020 Season

I. Introduction.

a. A critical component of the NFL’s return to work plan is regular testing of all Tier 1 and 2 Individuals for the COVID-19 virus and close monitoring of the health of all such individuals. In order to provide current and accurate information regarding the health status of all Tier 1 and 2 Individuals and to prevent the spread of COVID-19, the NFL-NFLPA Screening and Testing Protocol includes testing and monitoring of both symptomatic and asymptomatic individuals. These measures are designed to minimize the risk of introduction of COVID-19 into Club facilities, and to protect Tier 1 and Tier 2 Individuals and their families, including High-Risk Individuals. These measures must be coupled with efforts of these individuals to minimize their individual community risk.

b. As an over-riding principle, testing of asymptomatic players and Club personnel must be done in the context of excess testing capacity, so as to not deprive health care workers, vulnerable populations and symptomatic individuals from necessary diagnostic tests. Testing by its nature is for the early detection of infection and is not a replacement for the hygiene, distancing, and cleaning and disinfecting methods outlined in other jointly developed protocols that may mitigate the risk of infection in the first instance. The NFL and NFLPA will continue to monitor developments in COVID-19 testing and are committed to using the least invasive, most reliable and fastest methods available, without adversely impacting public health needs.

c. The nature of the novel virus and the evolving science regarding testing methods, sensitivity and specificity require an iterative approach, with updates to the Testing and Screening Protocols as the science dictates.

II. Specimen Collection Procedures.

a. Testing Facilities and Laboratories. The NFL has arranged for BioReference Laboratories (“BioReference”), one of the testing laboratories recommended by the NFL-NFLPA joint medical task force on screening and testing (the “Labs”), to handle sample collection and the analysis of samples collected from Tier 1 and Tier 2 Individuals. BioReference shall also procure all of the Virus and Antibody tests required by this Protocol. Should BioReference be unable to procure the tests required by this Protocol, the NFL shall make alternative arrangements to procure such tests.

i. BioReference has agreed to provide each Club with Point of Care (“POC”) reagents and machines. NFL-NFLPA-approved POC tests (currently, the BioReference POC test) may only be used as expressly provided in this Protocol.
ii. The Parties have also agreed to use SMRTL to test and analyze certain Tiered and Field Access personnel, using a saliva-based PCR test. SMRTL has been providing laboratory testing and analysis to the parties for over fifteen (15) years.

b. **All testing** required by this Protocol must be mutually approved by the NFL and NFLPA and FDA approved with expedited result reporting (within 24 hours) and high sensitivity (false pos) (<5%) and specificity (false neg) (<5%). The parties agree to transition to the use of saliva-based virus testing when it is commercially available and when such testing meets or exceeds the standards for virus testing set forth in this Protocol.

c. Should the Labs be unable to facilitate specimen collection, the NFL shall arrange for approved third-party specimen collectors to collect the specimen required by this Protocol to all Tier 1 and Tier 2 Individuals.

   i. All collectors will be (i) tested for the COVID-19 virus using rt-PCR test no less than once per week and (ii) required to self-administer a symptom screen (as defined below) prior to performing sample collections. Collectors who are symptomatic, test positive for COVID-19 or had potential exposure to COVID-19 will not be permitted access to Club facilities or to any Club employees, including players.

d. All specimen collectors will wear appropriate PPE in accordance with CDC guidance, including masks (e.g., surgical, N95 or KN95), face shields/approved goggles, gowns and gloves while collecting specimens. Gloves must be changed between each collection. Masks, gowns and face shields/goggles may be worn throughout the day unless becoming visibly soiled. When collecting from symptomatic individuals, all PPE must be removed after collection and discarded or appropriately cleaned before reusing. All specimen collectors shall be certified as trained by BioReference in the safe and proper technique for collecting COVID-19 specimens for testing. Specimen collectors shall also complete training and education, as directed by the NFL, for interactions with Tier 1 and Tier 2 Individuals.

e. Each Club must identify and maintain a designated testing area at its facility and its stadium where samples will be collected (“Dedicated Testing Areas”). Appropriate PPE must be worn and proper hygiene must be practiced at all times in the Designated Testing Areas. The location of the Dedicated Testing Area at the Club facility must be identified in the Club’s Infectious Disease Emergency Response (“IDER”) Plan. The Dedicated Testing Areas must be thoroughly cleaned and disinfected after each use.
III. Screening During The 2020 Season

a. Daily Home Screen. Every Tier 1, Tier 2 and Tier 3 Individual reporting to the Club facility must perform a daily self-screen each morning before leaving his or her residence for the Club facility. As part of the Daily Home Screen, each individual shall measure his or her own temperature twice in succession at the same time each morning (before engaging in any activities that might compromise the accuracy of the measurements, such as eating, drinking, exercising, or ingesting fever-reducing medications) to ensure consistency and precision in temperature readings. Tier 1, Tier 2 and Tier 3 Individuals will also complete a symptom and exposure questionnaire containing the questions in the attached COVID-19 Screening Form as part of the Home Screen. Any individual who records a temperature at or above 100.4 degrees Fahrenheit, or otherwise responds in a way that requires additional screening, must immediately report the results to the Club’s Head Team Primary Care Sports Medicine Physician, Head Athletic Trainer or the Club’s Infection Control Officer, and the recipient shall follow the Treatment Response Protocol. Any individual recording a temperature at or above 100.4 degrees Fahrenheit or who otherwise responds in a way that requires additional screening must not report to the Club facility. Clubs are encouraged to facilitate this Home Screen process by use of a mobile application (e.g., Teamworks, COVID-PASS). If Clubs arrange for a mobile application to facilitate screening at the Club facility, they may make use of this application for the Home Screen mandatory for all Tier 1, Tier 2 and Tier 3 Individuals. Use of any such mobile applications must comply with the NFL Data Privacy Policy and notice must be given to the Management Council (and such information will be shared with the NFLPA). Any lower-tier agreements entered into with such mobile applications must address confidentiality and individual privacy rights of those individuals participating in the home screen process.

b. Daily Symptom Screens and Temperature Checks. This applies to all individuals entering the Club facility, not just “Tiered” employees. The Daily Symptom Screens will include the questions listed on the attached COVID-19 Screening Form.

c. Game Day Screen. All players (Active/Inactive and Practice Squad) players and staff with Field and/or Bench Access shall: (i) have their temperatures taken by contactless thermometer (ii) be screened for loss of smell or taste and (iii) have other symptoms checked prior to entering the Stadium on Game Day.

d. Voluntary Physiological Screening. Clubs are encouraged to give Tier 1 and Tier 2 Individuals the option of participating in a voluntary health monitoring program using non-intrusive wearable sensor technology that measures respiratory functions, heart rate, heart rate variability and slow wave sleep, which must be
approved pursuant to Article 51, Section 14 of the March 15, 2020 Collective Bargaining Agreement.

e. Players will be offered testing for COVID-19 antibodies (using an ELISA protocol approved by the parties), via blood sample. While antibody testing is strongly encouraged, a Club cannot mandate antibody testing pursuant to EEOC Guidelines.

f. Any individual who reports symptoms shall be treated in accordance with the Treatment Response Protocol.

IV. Testing During the 2020 Season

a. Testing Cadence.

i. Tier 1 and Tier 2 Individuals: Tier 1 and Tier 2 individuals will receive PCR virus testing every day. Tiered individuals are not permitted to enter the facility on any given day until the results of the prior day’s specimen collection have been received by the Club. If an intervening “Act of God” results in the prior day’s specimen results being delayed, the Tiered staff and players from that Club will only be permitted to enter the facility with prior approval by the NFL Chief Medical Officer. The PCR test will be set to a cycle threshold as determined by the Parties, following review of testing data and consultation with their respective experts.

1. Testing on the Day Before Game Day. For Clubs that have a kickoff scheduled for 1 p.m. (New York time), they must schedule testing of all Tier 1 and Tier 2 personnel so that all specimens will be collected by 8:30 a.m. (New York time) on the day before game day, unless otherwise approved by the NFL. For Clubs with a kickoff scheduled for 4 p.m. or later (New York time), they must schedule testing of all Tier 1 and Tier 2 personnel so that all specimens will be collected by 10:00 a.m. (New York time) on the day before game day, unless otherwise approved by the NFL.

2. Testing on Off-Days. Testing on player off-days will be required, shall be conducted during times designated by the Club, but may only occur between the hours of 8 a.m. and 5 p.m.


a. All Tier 1 Individuals, both players and staff (other than medical providers) who are entering the Club facility for the first time must undergo the following Entry Testing:
Day 1: PCR Test (may not enter)
Day 2: PCR Test (may not enter)
Day 3: PCR Test (may not enter)
Day 4: PCR Test (may not enter)
Day 5: PCR Test (may not enter)
Day 6: PCR Test and POC Test; may enter if Days 1-5 PCR Tests and Day 6 POC Test are negative.

b. Any Tier 1 Individual, including players, (other than medical providers) who has broken the regular testing cadence (i.e., missed a day of testing) must repeat the Entry testing above prior to re-entering a Club facility.

c. All Tier 2, 2M and 3 Individuals who are entering the Club facility for the first time must undergo the following Entry Testing:

Day 1: PCR Test (may not enter)
Day 2: PCR Test (may not enter)
Day 3: PCR and POC Test (may enter, if Days 1 and 2 PCR tests and Day 3 POC test are negative)

Tier 2 Individuals who are members of labor unions and are not permitted by their labor agreements to undergo the Entry Testing required in this subparagraph must, at a minimum, undergo a PCR test the day prior to entry and a POC test the morning of entry, and both results must be negative before that individual may enter the Club facility.

Any Tier 2 Individual (other than medical providers and members of labor unions) who has broken the regular testing cadence (i.e., missed a day of testing) must repeat the Entry testing above prior to re-entering a Club facility.

4. Club Medical Providers. Club Medical Providers must undergo the following Pre-Entry Testing if they have not already undergone Pre-Entry Testing this season:

Day 1: PCR Test (may not enter)
Day 2: PCR and POC Test (may enter if Day 1 PCR and Day 2 POC are negative).

Thereafter, Club Medical Providers who are not in the regular testing cadence and who are not at the Club facility on a daily basis must undergo the following testing prior to entering the Club
facility on a given day: POC Test taken the day he or she will be entering the Club facility. If a Club Medical Provider intends to enter the Club facility on consecutive days, a PCR Test must also be taken.

5. **Club Bye Week Testing.** In furtherance of the Parties’ intent to maintain the virtual bubble throughout each Club’s bye week and thereby mitigate the risk of virus transmission during this period, players and coaches will be required to continue daily testing throughout their Club’s bye week. For purposes of this Protocol the “bye week” will include the period beginning the day after the Club’s game entering into the bye week, through the Club’s required bye week off days. Players and coaches who are exempt from testing pursuant to this Protocol during their bye week will be required to report to the Club facility for a daily screening and temperature check. If a player or coach misses a daily test during his or her Club’s bye week without having been excused by his or her Club, the NFL Management Council and the NFL Players Association, (s)he will be subject to discipline pursuant to the Parties’ side letter agreement, dated August 3. Players and coaches will be excused from daily bye week testing in limited circumstances. Any such individual must also undergo “re-entry testing” as set forth above prior to re-entering the Club facility. Any missed activity as a result of this quarantine will also be subject to discipline as set forth in the Parties’ side letter dated August 3. The NFL Management Council and NFL Players Association will evaluate and determine the appropriate re-entry testing for any individual who was excused by the Club, Management Council and NFLPA from a test during the bye week.

6. **Testing Delay.** Given the sensitivity of the PCR test as established by its use in the NFL population to date, should an Act of God or failure of a third party (e.g., disruption in sample transportation or a laboratory failure) cause the results of the previous day’s specimen collection to be delayed or unavailable, the Parties will apply the results of the PCR test of the specimen collection taken two days before to determine whether a Tier 1 or Tier 2 individual may enter the facility or participate in activities, including travel and games.

   a. If the results of a Player’s PCR test given on the day before a game meet the threshold defined by the Parties, after consultation with BRL and their respective experts, the individual will be given a POC test on game day. If the
results of the POC test can be obtained two (2) or more hours prior to kickoff, the results of the POC test will control the individual’s ability to participate on game day. Any POC test result obtained less than two (2) hours before kickoff will not affect an individual’s ability to participate in the day’s game.

ii. Previously documented positive virus test results.

1. Any Tier 1, Tier 2, Tier 2M or Tier 3 Individual who can provide documented evidence of a positive test result from an approved rt-PCR test from any date after June 1, 2020 (“Original Positive Test”) will be exempted from the normal virus testing cadence required in this section for a period of ninety (90) days from the date of the Original Positive Test. This individual must continue to check in each day for a symptom screen. The aforementioned documented evidence shall be provided to the Club’s ICO and reviewed and approved in conjunction with ICS and the NFL’s Chief Medical Officer. After the expiration of that 90-day period, the individual shall receive required virus testing one (1) time per week, until such time as that individual receives a negative test result. Once that individual has received a negative test result, he or she will be returned to the regular testing cadence required for an individual in his or her Tier. Any positive test result received after that individual has received two consecutive negative test results shall be treated as a new positive test, and the individual shall be subject to the requirements of the Treatment Response Protocol. The positive test result of this individual (prior to testing negative) shall not be included in the club’s rolling average of positive tests for frequency calculations.

2. Any player (including Free Agents, Tryout, and players acquired from other clubs) who is exempted from testing due to a previously documented positive virus test as described in Subsection (1) above will not be subject to the Entry or Re-Entry testing that would otherwise be required for that player pursuant to this Protocol during the period of his exemption from testing. Such an exemption must be approved by the NFL Chief Medical Officer in advance of the player’s entry into a Club facility. Such a player will be, however, subject to daily symptom and temperature screening.

iii. Positive Antibody Test Results. For the avoidance of doubt, any individual who tests positive for antibodies pursuant to a voluntary
antibody test offered pursuant to this Protocol shall remain subject to the required testing cadence for his or her Tier, regardless of such positive antibody test result.

iv. All testing pursuant to this Protocol will occur in the Dedicated Testing Area(s). Unless a Tier 1 or Tier 2 Individual reports symptoms of COVID-19, he or she will be granted access to the Club facility pending test results from daily Virus Tests. Any Tier 1 or Tier 2 Individual who tests positive for COVID-19 will be immediately isolated and treated pursuant to the Treatment Protocol.

1. Members of the Club medical staff and other medical professionals who have Tier 1 or Tier 2 access may elect to undergo: (a) PCR virus testing at their employer medical institutions/providers instead of undergoing such testing at the Club facility provided that: (i) individual received the PCR virus test at the same testing cadence as he or she would have if he or she were being tested at the Club facility; and (ii) the individual provides documentation of a negative PCR virus test taken at the required cadence to the Club Infection Control Officer prior to entering the Club facility on a given day; OR (b) POC virus testing on any day the relevant medical professional is entering the Club, provided that the results of that POC test are negative prior to entry.

v. Tier 3 Individuals. Tier 3 Individuals will receive PCR virus testing one time per week.

vi. Tryouts and “Street” Free Agents. Any “Street” Free Agent player who signs an NFL Player Contract or an NFL Practice Player Contract must return five (5) negative PCR tests, each taken at least 24 hours apart, and one (1) negative POC test, taken 24 hours after the fifth test, before the player may enter the Club facility to either try out with or join the Club for in-person team activities (on Day 6). Such a player may not have any in-person contact with any Tier 1 or Tier 2 Individuals during this 5-day on-boarding period, except that such players may be permitted to undergo a physical examination at the Club physician’s office during this period.

1. In the event a Tryout or Free Agent player arrives in the Club city after the Club’s normal PCR testing window has closed, the date of arrival may still count as Day 1 of his testing and quarantine period prior to entering the Club facility. For example:
vii. **Tryouts.** Clubs are limited to bringing in a maximum of five (5) players for tryouts per week unless the Club places more than three (3) players on Reserve in a seven (7) day period, in which case the Club may bring two (2) times the number of players in for tryouts as it placed on Reserve during the previous seven (7) day period.

viii. **Players Acquired from Other Clubs.** If a Club acquires a player directly from another Club (e.g., waivers, trade, or signed off of another Club’s Practice Squad), the player must return five (5) negative PCR tests, each taken at least 24 hours apart, and one (1) negative POC test on the day of entry, each taken after the player arrives in the new Club city and 24 hours apart, before the player may take a physical at the Club facility or enter the Club facility and participate with his Club. Such players may be permitted to undergo a physical examination at the Club physician’s office during this period. Any player who is terminated and re-signed by the same Club and does not miss a test and does not leave the terminating Club’s city will not be required to undergo any additional testing before rejoining the Club.

1. In the event a player acquired from another Club arrives in the new Club city after the Club’s normal PCR testing window has closed, the date of arrival may still count as Day 1 of his testing and quarantine period prior to entering the Club facility. For example:

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<thead>
<tr>
<th>Day 1 Monday</th>
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<th>Day 3 Wednesday</th>
<th>Day 4 Thursday</th>
<th>Day 5 Friday</th>
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ix. **Club Owner Testing Requirements.**

1. **Club Facility.** A Club Owner, or member of the Ownership Group, that is not current in testing and desires to enter the restricted area of the Club Facility must receive two (2) negative virus tests, separated by 24 hours, prior to entry, one of which must be a PCR test and one of which may be a POC test.

2. **Stadium (Game Day).** A Club Owner, or member of the Ownership Group, who is not current in testing and desires to access either the Field or Locker Room must receive two (2) negative virus tests prior to entry, one of which must be a PCR test and one of which may be a POC test.

x. **NFL and NFLPA Official Visits.** Any member of the NFL or NFLPA staff that is required to visit an NFL Club facility in furtherance of a defined CBA obligation (e.g., Substances of Abuse and/or Performance-Enhancing Substances Policy specimen collection, official visits authorized by the Collective Bargaining Agreement) must undergo testing at the BioReference facility designated for Club use. Such visitor must receive two (2) negative virus tests, taken on two consecutive days, before he or she may enter the Club facility. One of these tests may be a POC test. He or she shall provide notice of his/her intent to visit the Club facility at least 48 hours in advance of the first required test for the visit so
that they may be added to the testing schedule at the Club facility. Such visitor shall not be permitted entry to the facility until two (2) negative test results have been communicated to the NFL, NFLPA and Club ICO. If either of the Visitor’s tests is positive for COVID-19, he/she shall not be permitted access to the facility. If the Visitor’s tests are negative for COVID-19, he/she will be permitted entry to the facility following the screening process outlined above (e.g., questionnaire and temperature). After receiving two (2) consecutive negative tests, NFL, NFLPA staff and/or Drug and Steroid Policy Specimen collectors shall be tested at the normal testing cadence for Tier 2 Individuals (but shall not count against a Club’s Daily Maximum Tier 2 Individuals). For purposes of clarity, a member of the NFL or NFLPA staff who is conducting consecutive Club visits, must first receive two (2) negative PCR tests (as outlined above), thereafter he/she must produce both: (i) a negative Point of Care test (as defined in Addendum A below) and (ii) a negative test result from a PCR test taken within 24-48 hours prior to entering into a Club facility. Failure to undergo testing and/or screening or adverse results from any step in the process shall serve as grounds to prohibit such visit.

xi. NFL/NFLPA COVID-19 Protocol Inspections. To the extent any individual seeking access to a Club facility on behalf of the NFL and/or NFLPA for purposes of an inspection to ensure compliance with the NFL-NFLPA COVID-19 Protocols is classified by the Parties as a Tier 3 Individual, he or she must receive one (1) negative test result from an approved rt-PCR virus test conducted 24-48 hours before the date of the requested inspection, and must provide such test result to the Club before he or she will be permitted entry to the Club facility. If such individual wishes to utilize the services of a BioReference testing location, he/she must provide at least 48-hours notice of the date he or she wishes to conduct such inspection or be tested at a Club’s on-site BioReference testing location. To the extent an inspection will occur when Tier 1 Individuals are scheduled to be in the Facility and such inspection includes Restricted Areas, the NFL and NFLPA will agree upon the appropriate pre-entry testing regimen. Any individual conducting such an inspection will be subject to the screening process outlined in this Protocol before being granted entry to the Club facility and must wear appropriate PPE (i.e., a cloth or surgical mask) at all times during such inspection. Failure to undergo testing and/or screening or adverse results from any step in the process shall serve as grounds to prohibit such visit.

b. Follow-Up Antibody Testing. After the initial antibody test, all players will be offered antibody testing via blood draw once every four weeks.
c. Clubs are prohibited from testing players for COVID outside the scope of this Protocol. In other words, Clubs may not arrange for COVID testing of players by any means other than the laboratory designated in this Protocol.

V. Protocols for High-Risk Individuals. COVID-19 can cause symptoms ranging from mild to severe. According to the CDC, some individuals may be more likely to suffer severe illness as a result of COVID-19 than others due to the presence of certain characteristics or medical conditions.\(^\text{10}\) It is the responsibility of each Head Team Physician to identify any player that may be a High Risk Individual, and he or she must review each player’s individual medical history in light of the current CDC guidance regarding individuals with increased risk of severe illness from COVID-19. Clubs should educate their High Risk players and players in close contact or residing with High Risk Individuals on steps they can take to help further protect themselves, such as: staying home to the extent possible, and limiting time at Club facilities to only “essential” time; avoiding close contact with others, especially crowds, communal spaces, and anyone who is sick; closely monitoring and managing physical and mental health at all times, and notifying the Team Physician of any change in health status; speaking to a Team Physician about whether all vaccinations are up to date, including the flu vaccine; continuing to take medications as recommended by the High Risk Individual’s treating physician, and maintaining at least a two-week supply of any necessary prescription and non-prescription medications at all times; and reviewing the CDC’s Guidance for extra precautions for reducing risk for High Risk Individuals, as set forth in the NFL-NFLPA Education Protocol.\(^\text{11}\) Each Club is responsible for identifying and implementing additional measures to reduce High Risk Individuals’ risk of exposure to COVID-19 while in the club facilities.

VI. Voluntary Testing of Household Members. Clubs shall offer one (1) free diagnostic virus test (at the same time players receive their Pre-Entry Testing) for: individuals who reside in the same household as a Tier 1 and Tier 2 Individual, provided that: (i) each such individual reviews the NFL-NFLPA educational video and materials required for Tier 1 and Tier 2 Individuals in the Education Protocol; and (ii) the Club is provided with the results of any such virus test (notification may be limited to positive or negative results and remain deidentified). The virus testing contemplated in this subsection shall be provided by local laboratories and arranged by the individual Clubs. If a player subsequently tests positive for COVID-19, family members who cohabitate with a player will be entitled to receive additional free voluntary virus testing.

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10 Further information on the factors that increase the risk that an individual suffers a severe illness as a result of COVID-19 is available online at: [https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/index.html](https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/index.html)

VII. **Test Results and Reported Symptoms.** Any symptoms of COVID-19 reported to the Club and the results of each virus and antibody test must be entered into each player’s EMR. BioReference will facilitate transfer of test result data directly to the EMR. IQVIA, an independent entity which regularly analyzes NFL injury data, will conduct an analysis of all test results conducted pursuant to this Protocol at the direction of the Parties. Test Results will also be shared with public health authorities to the extent required.
Addendum A: Analysis of Positive Test Results

X. Analysis of Positive Test Results. Results of tests administered under this Protocol are binding, regardless of whether an individual is experiencing symptoms of COVID-19. In addition, the parties require the following steps to further develop this Protocol:

1. A PCR test that reports positive following the first run will automatically be re-run by BRL; and

2. The individual will be tested again by POC test.

3. The results of the re-run and the POC shall not be used to determine the status of the tested individual; the results of the PCR first run shall control.

4. The Parties will collect the data from the various results in order to refine the testing threshold for the Protocol.
Addendum B: Presumptive Positive and Invalid Test Results

XI. **Presumptive Positive or Inconclusive Tests.** For purposes of this Protocol, any “Presumptive Positive” or “Inconclusive” BioReference test result shall be treated as though the result was “positive,” and therefore subject to the other requirements and procedures of a positive test result under this Protocol.

XII. **“Invalid” Test Results.** In the event that a test administered pursuant to this Protocol returns a result of “Invalid” or “QNS” or “Technical Error,” then the following shall occur:

1. The individual shall be given a POC test when he or she next arrives at the Club facility for testing;
2. If the POC test result is negative, the individual shall immediately be given another daily rt-PCR test, and shall be permitted to enter the Club facility;
3. If the POC test result is positive, the individual shall immediately be given another daily rt-PCR test and must isolate away from the Club facility until the results of that PCR test are received.
   
   i. If the PCR test is positive, the result shall be treated as a positive test result under these Protocols, and the individual shall be subject to all of the terms of this Protocol and the Treatment Response Protocol for a positive test.
   
   ii. If the PCR test is negative, the individual should immediately receive a repeat POC test. If the POC test is negative, the test shall be considered a negative test and the individual shall be permitted to return to the Club facility, and shall not be subject to the required cardiac screening or graduated return to participation required in the Treatment Response Protocol, and such individual shall re-enter the normal testing cadence for his or her Tier. If the POC test is positive, the result shall be treated as a positive test result under these Protocols, and the individual shall be subject to all of the terms of this Protocol and the Treatment Response Protocol for a positive test.
NFL-NFLPA Media Protocol for the 2020 Season

I. **Introduction**

a. This Protocol shall govern media access during the 2020 Regular Season.

b. The parties will continue to update this Protocol as circumstances warrant and the science related to COVID-19 continues to evolve.

II. **Media Access to Club Facility**

a. Media access to Club facilities will be limited for the 2020 Regular Season and subject to all NFL-NFLPA medical and facility protocols related to COVID-19. All media personnel with access to the club facility, which includes club local media, in-house media or network television broadcast partners, must adhere to all NFL-NFLPA medical and facility protocols as a condition of access.

   i. Non-ownership-controlled media personnel will be assigned Tier 2M or Tier 3-Outdoor Access (“Tier 3-OA”) credentials.

      1. Media personnel with Tier 2M credentials must undergo screening and testing under the applicable protocols prior to entering the Club facility.

      ii. Media personnel with Tier 3-OA credentials may not enter the Club facility at any time and may not conduct in-person interviews with any Tier 1 Individuals (such interviews must occur virtually).

      iii. All media personnel must wear a mask at all times when at the Club facility, stadium, including on the field.

b. Media with Tier 2M access will only be permitted in the media room, on practice fields, stadium playing fields and sidelines and subject to such limitations set forth in the NFL-NFLPA Game Day Protocol. They will not be permitted access in other Restricted Areas (including locker rooms and medical areas) or to otherwise be in close proximity to Tier 1 Individuals.

III. **Weekly Regular-Season Media Access**

a. Beginning no later than the week prior to the opening of the regular season through the playoffs, each club will provide media access during the normal practice week (based on a Sunday game) on Monday, Wednesday, Thursday and Friday to all accredited media for player interviews. Players will be reminded that the media obligations set forth in their NFL Player Contract remain applicable.
b. All player interviews will be conducted virtually until further notice. Interviews of other Tier 1 and Tier 2 Individuals may be conducted virtually or in-person. In-person interviews must observe physical distancing at all times, incorporate the use of appropriate PPE and follow all other protocol requirements.

c. Player interview times will be set at the club’s discretion but should occur when players are available and free of other club commitments. It is the club’s responsibility to deliver access to players during this time period and each player’s responsibility to cooperate.

IV. Post-Game Media Access

a. After a reasonable waiting period, defined as 10-12 minutes maximum after the completion of the game and the players have entered the locker room, post-game interviews will begin.

b. Due to the current COVID-19 pandemic, there will be no post-game open locker room period as in years past.

   i. All player interviews will be conducted virtually until further notice.

   ii. Interviews of all other Tier 1 or Tier 2 individuals may be either virtual or in-person, observing physical-distancing.

   iii. Postgame interview rooms for the home and visiting teams may be arranged to accommodate multiple speakers simultaneously but must occur with physical distancing (at least 10 feet of separation). Each postgame interview room must be cleaned with hospital-grade EPA List N disinfectants before and after each use. Each specific seat and camera position must be arranged in accordance with applicable physical distancing and disinfection protocols. Media members will be assigned access to postgame interview rooms (separate from players) with specific seat or camera position assignments. Space must be reserved for one NFL Films camera in each interview room.
Enforcement of Protocols

I. Enforcement

a. The NFL and NFLPA will strictly enforce compliance with the terms of these Protocols.

b. Inspections. The NFL Management Council and NFLPA may ensure each Club’s compliance with these regulations by conducting unannounced inspections. Such inspections will be conducted jointly. Clubs are required to fully cooperate with the individuals conducting these inspections. Prior to re-opening Club facilities to players for Training Camp, Clubs may be required to submit to such an inspection conducted by representatives of the NFL and NFLPA.

i. Video: Clubs are required to maintain copies of the video surveillance of their facilities and practice areas for a period of at least 30 days. They will be required to regularly produce copies of such video as requested by the NFL Management Council and the NFL Players Association to monitor Protocol Compliance.

c. Reporting. Club personnel are required to promptly report to the Club’s Infection Control Officer and to the NFL (attention: Meghan Carroll) any information regarding a potential violation of this protocol. Players should notify the NFLPA of any potential violation. NFL and NFLPA will jointly investigate any and all such reports. Clubs are strictly prohibited from retaliating, in any way, against any person for reporting a violation of these protocols (regardless of whether the report is proven to be accurate).

d. Weekly Certification. Each week during the 2020 Season, the Infection Control Officer, the Head Team Physician and the General Manager/ Senior Football Executive of each Club must jointly certify, in a form provided by the NFL (and approved by the NFLPA) and submitted to the NFL, that the Club acted in full compliance with the provisions of (i) its approved IDER Plan and (ii) these Protocols.

e. Should a Club employee or other member of the Club’s staff knowingly and materially fail to follow these protocols, they will be subject to discipline.
COVID-19 Screening Form

All individuals covered by these Protocols are required to complete the following COVID-19 symptom and exposure questionnaire in accordance with these Protocols. If your answer to questions 1, 2 or 3 is “Yes,” please contact a member of the club’s medical or athletic training staff to discuss whether you may report to the club facility.

1. In the past 48 hours, have you experienced any of the symptoms of COVID-19:

<table>
<thead>
<tr>
<th>Symptom</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cough</td>
<td></td>
<td></td>
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<tr>
<td>Shortness of Breath</td>
<td></td>
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<tr>
<td>Sore Throat</td>
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<tr>
<td>Headache</td>
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<tr>
<td>Chills</td>
<td></td>
<td></td>
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<tr>
<td>Loss of Taste or Smell</td>
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<tr>
<td>Muscle Pain/Achiness</td>
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<tr>
<td>Nasal Congestion</td>
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<tr>
<td>Runny Nose</td>
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<tr>
<td>Vomiting</td>
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<tr>
<td>Diarrhea</td>
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<tr>
<td>Fatigue</td>
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</tbody>
</table>

If you answered “Yes” to any of the above, please provide details below:

_________________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
2. Have you had a fever at or above 100.4 degrees Fahrenheit or taken any fever-reducing medications (e.g., Tylenol or Advil) in the last 48 hours?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
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If you answered “Yes”, please provide details including temperature readings, if possible, below:

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

3. Do you have any reason to believe that you, or anyone with whom you’ve had close contact may have been exposed to COVID-19 in the past 14 days?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
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</table>

If you answered “Yes”, please provide details and identify the individuals, if possible, below, including approximate duration of contact (e.g., 10 mins, 30 mins, 1 hour, 10 hours, 24 hours):

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________.
4. Please list below any countries outside of the United States in which you have spent time in the past 30 days. If you have not left the United States within the past 30 days, please write “None.”

___________________________________________________________________________

___________________________________________________________________________

__________________________________________________________________________.

NAME ___________________    DATE:_______________