DATA SOLUTIONS

1. Each institution will designate a Chief Infection Officer (CInO) who will oversee the collection and reporting of data for the Big Ten Conference.

2. Team test positivity rate and population positivity rate thresholds will be used to determine recommendations for continuing practice and competition.

3. All data will be considered on a seven-day rolling average.

4. Team positivity rate (number of positive tests divided by total number of tests administered):
   - Green 0-2%
   - Orange 2-5%
   - Red >5%

5. Population positivity rate (number of positive individuals divided by total population at risk):
   - Green 0-3.5%
   - Orange 3.5-7.5%
   - Red >7.5%

DATA DECISIONS

1. The Big Ten Conference will use data provided by each Chief Infection Officer (CInO) to make decisions about the continuation of practice and competition, as determined by team positivity rate and population positivity rate,

2. Decisions to alter or halt practice and competition will be based on the following scenarios:

   A. Green/Green and Green/Orange – team continues with normal practice and competition

   B. Orange/Orange and Orange/Red – team must proceed with caution and enhance COVID-19 prevention (alter practice and meeting schedule, consider viability of continuing with scheduled competition)

   C. Red/Red – team must stop regular practice and competition for a minimum of 7 days and reassess metrics until improved
TESTING SOLUTIONS

1. The Big Ten will require student-athletes, coaches, trainers and other individuals that are on the field for all practices and games to undergo daily antigen testing.

2. Test results must be completed and recorded prior to each practice or game.

3. Student-athletes who test positive for the coronavirus through point of contact (POC) daily testing would require a polymerase chain reaction (PCR) test to confirm the result of the POC test.


CARDIAC SOLUTIONS

1. All COVID-19 positive student-athletes will have to undergo comprehensive cardiac testing to include labs and biomarkers, ECG, Echocardiogram and Cardiac MRI.

2. Following the cardiac evaluation, student-athletes must receive clearance from a cardiologist designated by the university for the primary purpose of cardiac clearance for COVID-19 positive athletes.

3. The earliest an athlete can return to game competition is 21 days following a COVID-19 positive diagnosis.

4. In addition to the medical protocols approved, the 14 Big Ten institutions will establish a cardiac registry in an effort to examine the effects on COVID-19 positive student-athletes.

5. The registry and associated data will attempt to answer many of the unknowns regarding the cardiac manifestations in COVID-19 positive elite athletes.
RECOMMENDATIONS FOR FOOTBALL RETURN TO COMPETITION

All institutions have agreed to the following on their campuses:

1. Appointment of a Chief Infection Officer

2. A required set of data submissions to the Big Ten on a daily basis with a 7-day rolling average

3. Adopt and abide by the recommended set of data decision parameters

4. Follow a required testing regimen as managed by the Big Ten Conference (to begin by September 30, 2020)

5. Fully cooperate with Big Ten Conference efforts to standardize contact tracing (competition and practice) across the Conference’s 11 states

6. Adhere to a required Cardiac protocol for all COVID-19 positive student-athletes as of date of adoption

7. Adhere to a recommended travel and game management protocol

8. Target return to competition for October 23-24

ADDITIONAL AREAS TO CONSIDER

TRAVEL POLICIES
The Conference has developed a set of minimum standards for travel to away-from-home competition, including considerations around air travel, bus transportation and hotel stays.

GAME OPERATIONS
The Conference has developed a set of recommendations around game day/stadium operations to minimize the risk of transmission between student-athletes, coaches, staff and other essential game day personnel.