FSMTB MISSION STATEMENT

The mission of the Federation is to support its Member Boards in their work to ensure that the practice of massage therapy is provided to the public in a safe and effective manner.
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Introduction

Clean facilities, proper practitioner hygiene, procedures to ensure client safety, and disease prevention protocols have long been a cornerstone of professional massage and bodywork practice. The outbreak and rapid spread of coronavirus 19 (COVID-19) highlights the need for renewed attention and increased vigilance in these areas as states lift stay-at-home orders (also called stay-in-place orders) and massage and bodywork practitioners return to practice.

The Federation of State Massage Therapy Boards (FSMTB) is pleased to present the Guidelines for Practice with COVID-19 Considerations. This document contains recommendations and guidelines for massage and bodywork practitioners to mitigate the spread of COVID-19.

The intent of this document is to provide a resource to FSMTB Member Boards and Agencies, massage and bodywork professionals, and massage school staff in order to support public protection. Readers are encouraged to refer to and use the FSMTB Guidelines for Practice with COVID-19 Considerations within the confines of the regulatory structures of their respective states.

FSMTB recognizes that some customization and flexibility are necessary to allow these concepts to be of assistance in each jurisdiction and practice setting. Each massage practice will have its own time frame for returning to work based on the state’s stay-at-home orders, supply of personal protective equipment (PPE), funding for massage programs, availability of COVID-19 tests, COVID-19 testing rates, and stable or falling COVID-related hospitalization rates for two weeks or more. These recommendations and guidelines do not replace any directives or guidance provided by federal or state agencies, regulatory boards, or other authorities having jurisdiction. Where conflicts occur, the stricter requirement will apply.
The Centers for Disease Control and Prevention (CDC) offers extensive guidelines for healthcare professionals related to preventing disease and the spread of COVID-19.1 At the core of CDC recommendations for healthcare professionals is the concept of Standard Precautions.

**The CDC defines Standard Precautions as:**

“The minimum infection prevention practices that apply to all patient care, regardless of suspected or confirmed infection status of the patient, in any setting where health care is delivered.”

No matter the overall health picture of a client, massage professionals must apply minimum infection prevention practices with strict attention to protect the client and themselves from the spread of infection.2

The FSMTB Guidelines for Practice with COVID-19 Considerations references Standard Precautions and Transmission-Based Precautions, CDC protocols and adapts them to the specific practice environment of massage and bodywork. Whenever possible, this document reflects specific CDC recommendations to provide guidance on facility cleanliness and disinfection, use of PPEs, facility policies and procedures, and requirements for massage practitioner hygiene.

See the Resources section for a complete list of the governmental guidelines that inform this document. In some cases, when appropriate, specific documents or research studies are referenced and listed in the References section.

Please note that COVID-19 is a rapidly evolving situation. The FSMTB affirms the importance of regulated massage and bodywork professionals who are adequately informed to practice safely and competently. This document will be modified as necessary when further relevant information becomes available. We invite both your use of these Guidelines for Practice with COVID-19 Considerations and your ongoing interest in future versions of this essential resource.
GUIDELINES FOR
Facility Cleanliness, Disinfection, and Disease Prevention

Infection control guidance from the CDC reminds healthcare providers that COVID-19 is spread primarily through person-to-person contact. Infectious respiratory droplets, produced when someone with COVID-19 coughs, sneezes, or speaks, can land on the eyes, mouth, or nose of an uninfected person, or be inhaled by an uninfected person standing close by. Smaller droplets may hang in the air for a period of time, while heavier droplets fall to surfaces. An uninfected person might touch a contaminated surface and then touch their face, mouth, or nose giving the virus entry to the body. Protocols that reduce the dispersal of respiratory droplets and the regular disinfection of surfaces in a massage workplace help reduce the spread of COVID-19.3,4

Here, guidance is provided on cleaning and disinfecting products, cleaning and disinfection of different areas of a massage facility, methods that reduce the entry of COVID-19 to a facility, and the management of potentially contaminated linens.
Cleaning and Disinfecting Products

» Commercial or household-grade products may be used for routine cleaning such as washing surfaces with soap and water to remove visible soil, dusting, and cleaning glass surfaces with a glass cleaner.

» Homemade cleaning products (e.g., vinegar and essential oils) are not approved cleaning agents or disinfectants.

» Disinfectants registered by the Environmental Protection Agency (EPA) must be used to disinfect surfaces that may become contaminated through touch or respiratory droplets during a workday.

» Disinfect surfaces by applying an EPA-registered disinfectant to the surface, following label directions. If surfaces are dirty, they must first be cleaned to remove dirt or impurities, followed by disinfection.

» Fabrics such as curtains or upholstery are disinfected with fabric-specific EPA-registered disinfectants.

» Find an EPA-registered disinfectant specific for use against SARS-CoV-2 (the virus that causes COVID-19) at www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2.

» Follow the label directions for the use of all cleaning and disinfecting products and follow recommended contact times (amount of time a surface should be visibly wet with the product).

» Some cleaning and disinfection products require ventilating the space by opening doors and windows and by running fans to reduce the airborne presence of cleaning chemicals.

» Some cleaning and disinfection products require wearing cleaning gloves, eye protection, and a face mask.
Massage professionals and massage business owners are encouraged to consider the areas of their businesses that need to be regularly disinfected, how surfaces are touched or potentially contaminated, how different types of surfaces can be disinfected (e.g., disinfecting fabrics such as curtains or upholstery as opposed to hard surfaces such as countertops), the disinfection products needed to respond effectively to COVID-19, and ways to reduce the likelihood that COVID-19 could enter their facilities.

Guidelines for Specific Facility Areas

THE RECEPTION AREA

- **Declutter and remove items** from the reception area that might become contaminated and require repeated disinfecting (e.g., magazines, pamphlets, knickknacks, candy bowls, the tea station, etc.).

- **Organize the reception area to promote physical distancing** by removing chairs, spacing chairs 6 feet (2 meters) apart, placing tape in the shape of an X on areas where people should not sit or stand, or by blocking off the reception area and escorting clients directly to session rooms (see Policies and Procedures).

- **Place signs** (available from the CDC) at eye level to educate clients about respiratory hygiene and cough etiquette, hand hygiene, symptoms of COVID-19, and physical distancing.

- **Disinfect high-touch surfaces** (surfaces that are handled frequently throughout the day by numerous people) between clients with an EPA-registered disinfectant. High-touch surfaces include door handles, counters, tabletops, pens or pencils used to complete paperwork, clipboards, desks, light switches, water fountains, and payment touch screens.

- **Ventilate** the reception area often by opening doors and windows to circulate fresh air and by using HEPA air filtration systems when they are available.

- **Clean floors** at the end of the day by mopping hard floors with an EPA-registered floor cleaner. Vacuum carpeted floors using a vacuum cleaner with a HEPA air filter if one is available. Wear a face mask and vacuum when there are no people in the space (vacuums can disperse respiratory particles into the air).

- **Make alcohol-based hand sanitizer** (60-95% alcohol) easily accessible to clients entering the facility and encourage clients to sanitize their hands upon arrival.

- **Make tissues and no-touch trash cans available** for the practice of respiratory hygiene and cough etiquette.

- **Encourage clients to wear their own face mask to the facility.** Provide surgical or other disposable face masks to those without a face covering upon arrival.
As of May 18, 2020, the CDC does not offer guidance on the prevention of COVID-19 transmission in retail areas of hospitals or healthcare facilities. CDC recommendations applied to a retail area suggest these guidelines:

» The retail area should be clean, free of dust, and organized to promote the maintenance of physical distance.

» Make alcohol-based hand sanitizer easily accessible to clients entering the retail area. Clients are encouraged to sanitize their hands upon arrival.

» Retail items handled by clients are disinfected between clients.

» Communal product samples (testers) should be removed from shelves.

» High-touch surfaces such as display tables, door handles, and payment touch screens are disinfected between clients.

The retail area should be clean, free of dust, and organized to promote the maintenance of physical distance.

Guidelines for Specific Facility Areas (cont’d)

THE RETAIL AREA

As of May 18, 2020, the CDC does not offer guidance on the prevention of COVID-19 transmission in retail areas of hospitals or healthcare facilities. CDC recommendations applied to a retail area suggest these guidelines:

« The retail area should be clean, free of dust, and organized to promote the maintenance of physical distance.

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« Retail items handled by clients are disinfected between clients.

« Communal product samples (testers) should be removed from shelves.

« High-touch surfaces such as display tables, door handles, and payment touch screens are disinfected between clients.

THE RESTROOM

» Disinfect high-touch restroom surfaces between clients with an EPA-registered disinfectant. High-touch surfaces include door handles, stall doors, the toilet seat, restroom counters, light switches, the toilet handle, faucet fixtures, the toilet paper dispenser, and the paper towel dispenser.

» Place signs at eye level in the restroom to educate clients about proper hand washing.

» Place signs indicating that toilet lids (if present) should be closed before flushing.

» Deep clean the restroom at the end of the workday by cleaning the toilet bowl, toilet seat, the toilet lid, the walls around the toilet, and all surfaces with appropriate cleaning products and an EPA-registered disinfectant.

» Mop restroom floors with an EPA-registered floor cleaner. Pay special attention to the floor around the toilet which may be a reservoir for microorganisms and body fluids.

» Ventilate restrooms overnight by opening doors and windows or running a HEPA air filtration unit in the area.
HALLWAYS

» Disinfect high-touch surfaces between clients with an EPA-registered disinfectant. High touch surfaces include handrails, door handles, keypads, light switches, and stairway banisters.

THE SESSION ROOM

» Declutter and remove items from the session room that might become dusty, or contaminated and require repeated cleaning and disinfecting (e.g., magazines, pamphlets, knickknacks, bookshelves, books, decorative tables, extra chairs, etc.).

» Make alcohol-based hand sanitizer easily accessible to clients entering the session room.

» Both the client and the practitioner must wear a face mask during the session. The client must also wear a face mask from the time they enter to the time they leave the facility.

» Disinfect high-touch surfaces between clients with an EPA-registered disinfectant. High touch surfaces include door handles, counters, tabletops, light switches, massage lubricant bottles, or any surface the practitioner or client might touch before, during, and after sessions.

» Handle soiled linens properly as discussed in the section titled Linen Management.

» Cover the massage table or the warmer and padding on the massage table with a heavy-duty plastic sheet or table protector. Disinfect the plastic sheet over the massage table with an EPA-registered disinfectant between clients. If a plastic sheet is not used, clean the massage table with soap and water between clients and wipe it with a massage table specific disinfectant.

» Prepare the massage table with clean linens as discussed in the section titled Linen Management.

» Ventilate the session room between clients by opening doors and windows to circulate fresh air and by using HEPA air filtration systems when they are available.

» Clean floors at the end of the day by mopping hard floors with an EPA-registered floor cleaner. Vacuum carpeted floors using a vacuum cleaner with a HEPA air filter if one is available. Wear a face mask and vacuum when there are no people in the space.

» Ventilate the session room at the end of the day by opening doors and windows to circulate fresh air and by using HEPA air filtration systems when they are available.
GUIDELINES FOR PRACTICE WITH COVID-19 CONSIDERATIONS

SPECIALIZED SPA EQUIPMENT

» Clean all specialized spa equipment according to the manufacturer’s instructions, after each use.

» Ultraviolet radiation (UV) is an accepted disinfection method for spa equipment when appropriate, based on the manufacturer’s recommendations.

» Flush hydrotherapy tub jets, foot basin jets, and whirlpool jets with a manufacturer-approved disinfectant between clients.

THE BREAK ROOM

» Declutter and remove items from the break room that might become contaminated and require repeated disinfecting.

» Organize the break area to promote physical distancing by removing chairs, spacing chairs 6 feet apart, and placing tape in the shape of an X on areas where people should not sit or stand.

» Staff should wash their hands with soap and water or apply an alcohol-based hand sanitizer directly before entering or upon entering the break area.

» Hang signs at eye level to remind staff about respiratory hygiene and cough etiquette, hand hygiene, and physical distancing.

» Stagger break times to reduce the number of people in the break room at one time.

» Clean and disinfect showers, sauna, steam cabinets, wet tables, hydrotherapy tubs, bathtubs, foot soaking basins, and other equipment with an EPA-registered disinfectant, after use with each client. Dry the showers, hydrotherapy tubs, bathtubs, wet tables, and foot soaking basins completely with clean towels, after proper disinfectant surface contact times are observed.

» Clean and disinfect high touch wet room surfaces between clients with an EPA-registered disinfectant. High touch surfaces include door handles, handrails, counters, faucet fixtures, light switches, seating, and the floor around tubs, wet tables, and showers.

» Wear face masks in the break room when not consuming food or beverages.

» Hang signs to remind staff to clean and disinfect any surfaces they touch in the break room with an EPA-registered disinfectant directly before exiting the area. Surfaces include door handles, counters, tabletops, light switches, cabinet doors, the coffee or tea maker, the refrigerator door handle, chair backs, vending machine, or other surfaces.

» Clean floors at the end of the day by mopping hard floors with an EPA-registered floor cleaner. Vacuum carpeted floors using a vacuum cleaner with a HEPA air filter if one is available. Wear a face mask and vacuum when there are no people in the space.

» Ventilate the break room often by opening doors and windows to circulate fresh air and by using HEPA air filtration systems when they are available.
THE LAUNDRY ROOM

» **Maintain a physical distance of 6 feet** while using the laundry room and limit the number of people who are in the laundry room at one time.

» **Follow guidelines for the proper management of linens as discussed in the section titled, *Linen Management.***

» **Disinfect surfaces** in the laundry room at the end of the day with an EPA-registered disinfectant. Surfaces include linen storage containers, countertops, cabinet handles, detergent bottles, door handles, light switches, and the controls on the washer and dryer.

» **Clean floors** at the end of the day by mopping hard floors with an EPA-registered floor cleaner. Vacuum carpeted floors using a vacuum cleaner with a HEPA air filter if one is available. Wear a face mask and vacuum when there are no people in the space.

» **Ventilate the laundry room** by opening doors and windows to circulate fresh air and by using HEPA air filtration systems when they are available.
» **Organize the space to promote physical distancing** by removing chairs, spacing chairs 6 feet apart, and placing tape in the shape of an X on areas where people should not sit or stand while waiting for their sessions.

» **Make alcohol-based hand sanitizer** (60-95% alcohol) easily accessible to clients entering the area and encourage clients to sanitize their hands upon arrival.

» **Encourage clients to wear their own face mask to the massage**. Require corporate accounts to provide surgical one-time-use or other disposable face masks to those without face masks. Both massage practitioners and clients wear face masks for the duration of sessions.

» **Disinfect high-touch surfaces between clients** with an EPA-registered disinfectant. High touch surfaces include door handles, counters, light switches, massage lubricant bottles, pens and clipboards used for health intake processes, or any surface the client or practitioner might touch during a session.

» **Disinfect the entire massage chair** including all surfaces of the face rest with an EPA-registered disinfectant between clients, following product label directions for proper application and dry time.

» **Provide a clean face-rest cover for each client**.

» **At onsite locations, soiled linens are stored in a leak-proof bag such as a heavy trash bag until they can be laundered as discussed in the section titled, *Linen Management***. Ensure this bag is carefully sealed before linens are transported in a vehicle.

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**ONSITE AND OUTCALL LOCATIONS**

Onsite locations refer to places such as airport chair massage businesses and corporate settings, or anywhere massage is performed in a massage chair or on a portable massage table at locations where clients are not enclosed in a session room and remain clothed throughout the massage. Outcall locations refer to mobile massage provided in a client’s home or hotel room.

While COVID-19 is present in a community, mobile massage/outcall massage is unsafe and therefore prohibited. Massage practitioners are unable to control the cleanliness or disinfection practices at client homes, exposing the massage practitioner to increased risk of infection.

At onsite settings, massage practitioners are still subject to the same cleanliness and disinfection protocols as other massage business locations, to the proper management of linens, to pertinent client policies and procedures, and to practitioner hygiene requirements discussed in other sections of this document.

» **For corporate accounts, the practitioner should communicate with management ahead of time to inquire if any employees have been diagnosed with COVID-19 or other communicable diseases within 14 days of the massage practitioner's intended visit**. If infection is present, the practitioner should not perform massage at the location until it is verified that no employees have been diagnosed or experienced symptoms of COVID-19 in the past 14 days.

» **Arrange with management ahead of time the use of a private space that allows for physical distancing**. Ideally the space would contain few surfaces that require disinfecting between clients.
Linen Management

Linens include massage sheets, face-rest covers, pillow cases, bolster covers, hand towels, bath sheets or towels, bath or shower mats, hair wraps, bathrobes, blankets, and any other cloth material used to cover surfaces or cover the client during a massage session.

Soiled linens are defined as any cloth material used during a massage session that makes contact with the client’s skin or hair. Any linen that touches a client’s skin or hair must be properly laundered before use with another client.

» Wear a face mask while handling soiled linens when COVID-19 is present in the community.

» If blood or body fluid is present on the linens, wear gloves when handling the linens and store the linens in a leak proof bag separately from other soiled linens.

» At the conclusion of a massage session, identify, gather, and remove all soiled linens from the session room. Do not leave soiled linens in the session room.

» Do not shake soiled linens as this may disperse contaminated respiratory droplets into the air.

Typically, linens are stored in a ventilated container in the laundry area. While COVID-19 is present in a community, store linens in a closed container.

» Wash soiled linens with detergent in hot water and dry it completely using heat. Wash linens promptly (by the end of the workday).

» Linens soiled with blood or body fluid are washed separately with hot water, detergent, and fabric-safe bleach and then dried with heat.

» After handling soiled linens, massage practitioners should immediately wash or disinfect their hands as described in the section titled Hand Hygiene.

» Before handling clean linens, massage practitioners should disinfect their hands with an alcohol-based hand sanitizer as described in the section titled Hand Hygiene.

» Clean linens are stored in the session room (not in the laundry area where they might come into contact with soiled linens) in a closed container until use.
GUIDELINES FOR

Policies and Procedures

These updates and changes to standard massage policies and procedures aim to decrease health risks while COVID-19 is present in communities. Symptoms of COVID-19, waiting for the results of a COVID-19 test, and a positive COVID-19 test contraindicates massage. The FSMTB assumes that massage is only practiced when it is authorized by state and local regulations. The FSMTB recommends these policy changes and procedural guidelines.
Changes to Client Informed Consent

Massage practitioners must assume that clients are unaware that the risk of infection from COVID-19 increases through close contact with other people, like the level of contact required to provide massage. Therefore, practitioners must inform clients of this risk and obtain their signature indicating that they understand the risk and wish to receive massage therapy.

**Sample language:**

“*I understand that close contact with people increases the risk of infection from COVID-19. By signing this form, I acknowledge that I am aware of the risks involved and give consent to receive massage from this practitioner.*”

Practitioners must also alert clients of procedures related to possible exposure to COVID-19.

**Sample language:**

“*I understand that my name and contact information might be shared with the state health department in the event that a client or practitioner at this facility tests positive for COVID-19. My contact details will only be shared in the event they are relevant based on suspected exposure date, and only for appropriate follow-up by the health department.*”

Changes to Session Scheduling

» If multiple massage practitioners work at one facility, **stagger session schedules** to prevent crowding in reception areas. Promote physical distancing of 6 feet of space between all people at the facility.

» **Allow ample time between clients** to properly use disinfectant products, including required contact times.

» **Clients receiving massage require pre-session health intake processes and communication.** Therefore, walk-in appointments are not advised. Change your current policies to “by appointment only.”
Changes to Health Screening Procedures

» If possible, conduct health intakes and updates to client health forms before the client’s session through email and a phone call.

» Include a COVID-19 specific health intake addendum (see Appendix A for an example) as part of emailed client health forms. Use this form to determine if it is safe for the client to visit the massage facility.

» Alternatively, screen clients by asking COVID-19 specific questions including:

  › Have you been asked to self-isolate or quarantine by a doctor or a local public health official in the last 14 days?

  › Have you experienced any cold or flu-like symptoms in the last 14 days (fever, cough, shortness of breath or other respiratory problem)?

  › Have you had close contact with or cared for someone diagnosed with COVID-19, or someone exhibiting cold or flu-like symptoms within the last 14 days?

  › Have you been tested for COVID-19? What type of test did you have? When were you tested? What was the result?

» If you have any reason to suspect that the client is not completely healthy, postpone their session.
Changes to Client Arrival Procedures

» Ask clients to wait in their cars or outside until you text them or call them to come in.

» Greet clients at the door, avoiding practices such as handshaking or hugging. Use a no-touch thermal temperature scan to confirm the client’s temperature is no higher than 100.4°F [38°C]. If a client has a temperature above 100.4°F, or if they have developed cold or flu-like symptoms or other symptoms suggesting illness since the pre-session phone call, reschedule their massage session and suggest that they call their primary care provider for consultation.

» If the client arrives wearing medical gloves, request that they remove these gloves before entry, as gloves may be contaminated with respiratory droplets from the client touching their nose or face.

» Confirm that the client has an acceptable face mask. If the client does not have an acceptable face mask, provide the client with a disposable face mask.

» Ask the client to sanitize their hands with an alcohol-based hand sanitizer and demonstrate how to put on and take off the face mask correctly (use your own mask as an example). The client should sanitize their hands before putting on their mask.

» Escort the client to the session room.

Clients at High Risk

Unless otherwise directed by the client’s primary healthcare provider, clients at higher risk of severe illness from COVID-19 should forgo massage while the virus is present in their communities.

» People 65 years or older
» Chronic lung disease
» Moderate to severe asthma
» Heart conditions
» Compromised or suppressed immunity
» Severe obesity (body mass index of 40 or higher)
» Diabetes
» Chronic kidney disease
» Liver disease
While COVID-19 is present in the community, these changes to session procedures are advised:

» **Friends and family of the client are not allowed to wait** in the reception area while the client receives massage, unless they are that client’s legal guardian.

» **Both the practitioner and client must wear a face mask during the session.** The client must also wear a face mask from the time they enter to the time they leave the facility.

» The CDC suggests that COVID-19 infected respiratory droplets can be dispersed when people talk. For this reason, **talking is limited to communication about pressure, warmth, and comfort** while in the enclosed space of the session room.

» **Intra-oral or nasal massage is prohibited** at this time because it increases the risk of COVID-19 exposure.

» Because a face mask is worn for the duration of the massage, **safe face massage is not possible and therefore prohibited at this time.**

» **If possible, process the client’s payment and rebooking the next session in the session room after the client has had the opportunity to dress.** The disinfection load on the facility is reduced when there is less opportunity for clients or practitioners to contaminate surfaces when performing these session procedures.

» **If applicable, utilize electronic methods for charting and client surveys/feedback.**

» **Practitioners should disinfect their hands directly after handling client payment materials such as credit cards, cash and receipts as these surfaces may be contaminated.**

» **Request that the client sanitize their hands** with an alcohol-based hand sanitizer directly before they leave the session room and before they pass through common areas of the facility.
Client Follow Up Procedures

» Ask clients to share if they have developed any cold or flu-like symptoms or tested positive for COVID-19.

» Massage practitioners are not authorized to share the health data of their clients without the client’s written consent. However, should a client develop symptoms of COVID-19 within two weeks of a session, practitioners should contact their local health department for consultation and guidance.

Client Communication

» Update the business website to reflect business policy and procedural changes related to COVID-19.

» Communicate policy and procedure changes to clients during the booking phone call. Email clients an outline of procedures they can expect as part of the health intake phone call and when they arrive at the business for their session. (See Appendix C for a Sample Client Notice.)
GUIDELINES FOR

Practitioner Hygiene

Hygiene is defined as the practice or principles of keeping oneself or the environment clean in order to maintain health and prevent disease. Proper practitioner hygiene reduces the spread of infectious pathogens to others and increases the likelihood that the practitioner remains healthy.
Cleanliness on Workdays

» Practitioners must shower and wash their hair on workdays. Facial hair is neatly trimmed. Long hair is pulled back and secured so that it will not touch a client during a massage.

» Practitioners must practice appropriate oral healthcare before sessions, between sessions, and after consuming food or beverages.

» Practitioners keep their fingernails short, filed to a smooth edge, and natural (no nail polish, long nails, or artificial nails).

» Practitioners remove rings, bracelets, watches, and fitness trackers from their hands, wrists, and forearms during the massage workday.

Hand Hygiene

Follow the CDC protocol for proper hand washing directly before every massage session, directly after every massage session, directly after using the restroom, directly after handling soiled linens, and directly before and after eating while at work. Increased hand washing helps protect against infectious diseases.

» Wet the hands with water of any temperature.

» Add liquid soap to wet hands and use friction for 20-seconds to work the soap into a lather and lift contaminants off the skin’s surface.

» Use friction on every surface of your hands. Rub your hands palm to palm, lather the backs of your hands, scrub between your fingers and thumbs, rub the backs of your fingers on the opposing palms, and clean your thumbs and fingertips.

» Because massage practitioners provide massage with the forearms and elbows, wash these areas with soap and water, too. Lather the entire forearm over the elbow for an additional 20 seconds of friction.

» Rinse the hands, elbows, forearms and wrists with water.

» Dry the arms and hands with disposable paper towels and use the same paper towels to turn off the water and open any doors on the way to the session room.
Use of Alcohol-Based Hand Sanitizers

» Alcohol-based hand sanitizers (hand sanitizer) used in a massage practice should contain between 60-95% alcohol.

» Apply enough hand sanitizer to cover your hands, forearms, and elbows.

» Rub the hands together and rub the hands over the forearms and elbows using friction until the product is completely dry.

» Note that hand washing with liquid soap and water is preferable to the use of hand sanitizer, but hand sanitizer may be used when soap and water are not available.

» Be aware that hand sanitizer is less effective when applied to greasy hands (e.g., when hands are covered by massage lubricant).

» Use hand sanitizer directly before you touch a client to begin a massage and directly after you complete a massage before you leave the session room.

» If liquid soap and water is not readily available, use hand sanitizer directly after handling soiled massage linens.

» Use hand sanitizer directly before you handle clean massage linens to prepare the massage table.

» Use hand sanitizer directly before you put on a face mask and directly after you remove a face mask.

» Use hand sanitizer directly before you put on medical gloves and directly after you remove medical gloves.

» Use hand sanitizer directly after you absentmindedly or inadvertently touch your face, mouth, nose, facial hair, or hair during a massage session and before you resume massage.

» Use hand sanitizer directly after you sneeze into an elbow.

» Use hand sanitizer directly after handling anything that is potentially contaminated.
Respiratory Hygiene and Cough Etiquette

Respiratory hygiene and cough etiquette aim to prevent or reduce the distribution of respiratory droplets into the environment. Respiratory hygiene and cough etiquette are practiced consistently by massage practitioners and encouraged in clients.

» Cover the mouth and nose when coughing or sneezing with a tissue. If a tissue is not available, cough or sneeze into an elbow.

» Dispose of soiled tissues immediately after use in a no-touch trash can.

» Wash your hands after contact with respiratory secretions. If soap and water is not available, decontaminate your hands with an alcohol-based hand sanitizer.

» To encourage respiratory hygiene and cough etiquette, provide tissues, no-touch trash cans, and alcohol-based hand sanitizer throughout the massage facility. Post signs to educate clients and remind staff to practice respiratory hygiene and cough etiquette while at the massage facility.
Use of Appropriate Personal Protective Equipment

FACE MASKS

» Disposable surgical face masks are thin, paper-like material that fit loosely around the mouth and nose. They are disposable and replaced with a fresh mask at the end of each massage session. Surgical masks block large-particle respiratory droplets from being expelled or inhaled.

» N95 respirators, simply called “respirators” offer more protection. They protect against large and small particle droplets dispersed from the respiratory system. They do not fit properly when worn over facial hair because they must adhere to smooth skin.

» Respirators are worn for a massage workday and decontaminated by storing them in a breathable paper bag for 24 hours before they are reused. COVID-19 persists for 17 hours on respirator material. The CDC notes that respirators can be recycled in this way until they show signs of wear or fail to adhere to smooth skin.

» Directly before putting on a mask, wash hands with liquid soap and water or sanitize them with an alcohol-based hand sanitizer.

» Cover the nose and mouth with the mask and tighten the straps to ensure that there are no gaps around the edges of the mask. With respirator masks, place both clean hands completely over the mask and inhale strongly. The mask should pull into your face.

» Avoid touching the outside surface of the face mask and the inside surface of the face mask while wearing the mask as these surfaces are contaminated.

» If you touch your mask while providing massage, pause and sanitize your hands with alcohol-based hand sanitizer before you resume.

» Remove the mask from behind to avoid touching the surface of the mask, wash hands with liquid soap and water or sanitize them with an alcohol-based hand sanitizer.
PROTECTIVE CLOTHING

» While COVID-19 is present in the community, **cover your clothing with protective aprons, short-sleeved lab coats, or disposable medical gowns**. Change these protective garments between clients.

» Alternatively, **purchase multiple pairs of scrubs** and change them between clients.

» **The CDC recommends changing out of work clothes and work shoes into street clothes and washing work garments at the healthcare facility** to avoid the transport of potentially contaminated items to the healthcare professional’s home.

» If circumstances do not permit laundering on site, **work clothes should be removed and contained for laundering**, prior to entering the home environment.

» **Safety goggles or glasses (note: eyeglasses are not acceptable protection)** must be washed between each client or replaced.

GLOVES

» **Practitioners use nitrile or vinyl, unpowdered gloves anytime the potential exists to come into contact with blood or body fluids** including when a client has broken skin in an area where massage is provided or when the practitioner has broken skin on the hands or forearms.

» **Considerations for COVID-19 do not require special glove use**. Gloves might be worn when handling potentially contaminated laundry, but are not necessary so long as the practitioner practices correct hand hygiene. Heavy duty nitrile cleaning gloves can also be worn, sanitized and reused, reducing environmental waste.
Self-Monitoring for Signs and Symptoms of COVID-19

» The practitioner should **self-monitor** for the signs and symptoms of COVID-19 every day.

» **Take your temperature before the workday** and then **again in the afternoon** (when viruses tend to spike temperature).

» **COVID-19 causes a wide range of symptoms.** Treat any new symptom as suspicious. The most common symptoms are mild cold or flu-like symptoms, especially a cough, sore throat, and shortness of breath.

» **Should a practitioner develop a temperature or symptoms of illness, they should cancel their massage appointments** and self-isolate for 14 day or seek to obtain COVID-19 testing so they can be cleared of infection and return to work.

Exposure or Expected Exposure to COVID-19

» **In the event that a practitioner suspects that they have been exposed to COVID-19** they should self-isolate until they can obtain testing and be cleared of infection.

» **If a client calls to report that they have tested positive for COVID-19 within 2 weeks of the massage session,** the practitioner should self-isolate until they can obtain testing and be cleared of infection.

COVID-19 Testing

» **If you believe you need a COVID-19 test,** contact your primary care provider for consultation and guidance.

» **COVID-19 testing may also be available at a local urgent care facility.** Call to make an appointment or receive consultation and guidance.

» Because of the widespread unavailability of tests and their need by healthcare professionals at higher risk of infection, **the FSMTB is not recommending the mandatory and regular testing of massage professionals.**
GUIDANCE FOR

Massage Schools

The outbreak of COVID-19 disrupted colleges, universities, and vocational programs across the country. Now, as states begin to lift stay-at-home orders, schools are preparing their campuses for the return of students in communities where COVID-19 is still present.

The guidance offered here is meant to supplement procedures already in place from the U.S. Department of Education and each state’s Department of Education. Schools must adhere to the policies outlined by these governmental institutions. Therefore, direction offered by the FSMTB is massage and bodywork specific and school administrators are asked to apply information from previous sections to the practice of massage in the classroom and student clinic.

If a student, faculty, or staff member becomes sick with symptoms of COVID-19, or tests positive for COVID-19, ask that person to self-isolate and contact the state health department for consultation and guidance.

Here we’ll address school cleanliness, disinfection, and disease prevention, classroom policies and procedures, and COVID-19 training.
School Cleanliness, Disinfection, and Disease Prevention

In general, and for all areas of your school:

» Declutter and remove any unnecessary items from school areas to reduce the daily disinfection burden of wiping surfaces (e.g., magazines, books, bookshelves, knickknacks, candy bowls, tea stations, damaged equipment waiting to be fixed, learning tools that are rarely used, etc.).

» Organize school areas to promote physical distancing by removing chairs, spacing chairs 6 feet apart, placing tape in the shape of an X on areas where people should not sit or stand, or by blocking off areas where people may be tempted to congregate. If possible, install a safety plexiglass shield on reception counters as a physical barrier between people when conducting transactions.

» Make alcohol-based hand sanitizer easily accessible throughout the facility and encourage students, faculty, and staff to wash and sanitize their hands regularly.

» Make tissues and no-touch trash cans available for the practice of respiratory hygiene and cough etiquette.

» Encourage students, faculty and staff to wear their own face masks to the facility. Provide surgical or other disposable face masks to those without a face covering upon arrival.

» Place signs at eye level to educate students, faculty, and staff about respiratory hygiene and cough etiquette, hand hygiene, symptoms of COVID-19, and physical distancing.

» Ventilate areas of the school to the degree possible by opening doors and windows to circulate fresh air and by using HEPA air filtration systems when they are available.

» Clean floors at the end of the day by mopping hard floors with an EPA-registered floor cleaner. Vacuum carpeted floors using a vacuum cleaner with a HEPA air filter if one is available. Wear a face mask and vacuum when there are no people in the space (vacuums can disperse respiratory particles into the air).

Review the section of this document titled Facility Cleanliness, Disinfection, and Disease Prevention. These guidelines apply to the school reception area, retail area, restroom, hallways and stairways, session rooms, specialized spa equipment, the break room, and the laundry area of the student clinic.
Review the section of this document titled, *Cleaning and Disinfecting Products* and purchase cleaning products and EPA-registered disinfectants to meet the cleaning needs for your school. Make disinfection products readily available to promote regular high-touch surface decontamination.

Determine the number of people that can safely gather in the school at one time (e.g., 25% of posted maximum capacity by order of the State Fire Marshal, 1 person per 110 square feet of usable space, or issued state requirement). Adjust classroom meeting days and times to accommodate this number, if needed.

In lecture rooms where students sit at desks or tables, promote physical distancing by removing chairs, spacing chairs 6 feet apart, placing tape in the shape of an X on areas where people should not sit or stand, or by blocking off areas where people may be tempted to congregate. Students must wear masks during lectures.

Delineate lecture or teaching space for instructors that reminds students to maintain their physical distance. Unmasked instructors must maintain 6 feet physical distancing from students. Identify areas where teachers can talk with students privately while maintaining physical distance.

In classrooms where students exchange massage and bodywork, place tape on flooring to indicate where massage tables are located. Plan 10 feet of space between places where students stand while giving massage and the next massage area to allow movement around the table and avoid encroachment upon nearby peers.

Students should place their personal items on their own desk/table or designated area (e.g., locker). Be sure locker assignments support physical distancing. Institute a regular schedule for emptying and disinfecting lockers.
Classroom Policies and Procedures

- Both the student acting as a client and the student acting as a practitioner must wear a face mask for the duration of the massage exchanges.

- To reduce risk, students acting as massage practitioners should wear a mask while giving massage to classmates and clients in the student clinic. If N95 masks are used, supply 2 masks to each student. Masks are removed at the end of a class or student clinic shift and placed in a breathable paper bag for 24 hours. COVID-19 lasts on respirator mask surfaces for 17 hours. This practice ensures that students have a sanitary mask to wear to each massage exchange class or student clinic shift.

- Encourage and reinforce proper hand hygiene, proper respiratory hygiene and cough etiquette, ongoing physical distancing, and attention to disinfection of high-touch surfaces and surfaces potentially contaminated during massage exchanges.

- The CDC suggests that COVID-19 infected respiratory droplets can be dispersed when people talk. For this reason, ventilate student clinic session rooms and student classrooms to the degree possible or run HEPA air filtration units.

- Review the section titled Linen Management and ensure students bring a leak-proof trash bag to school for the transport of soiled linens from massage exchange classes. Remind students that they should not shake soiled linens, but should wash linens promptly in hot water with detergent and dry them with heat. Students must bring freshly laundered linens to classes.

- During massage exchange classes, remind students to bring an extra set of clothing to wear after classes. Students should change their clothing and place contaminated clothing in a leak-proof trash bag for transport home. Remind students to only remove this clothing from the trash bag when they are ready to wash it and to wash their hands demonstrating proper hand hygiene after handling potentially contaminated linens.

- Discuss lenience on attendance policies, student sick leave, and online makeup work with the state Department of Education and accreditation agencies. Develop make up work that students can finish to maintain their grades should they become sick with any illness and need to self-isolate or await COVID-19 testing.

These updates and changes to standard massage policies and procedures aim to decrease health risks while COVID-19 is present in communities. The FSMTB recommends these policy changes and procedural guidelines.
STUDENTS AT HIGH RISK

While information is still limited, the CDC indicates that these underlying conditions place people at higher risk for severe illness from COVID-19:

- People 65 years or older
- Chronic lung disease
- Moderate to severe asthma
- Heart conditions
- Compromised or suppressed immunity
- Severe obesity (body mass index of 40 or higher)
- Diabetes
- Chronic kidney disease
- Liver disease

Unless otherwise directed by the student’s primary healthcare provider, students at higher risk of severe illness from COVID-19 should take a leave of absence while the virus is present in their communities. If they choose not to take a leave of absence, schools should obtain student’s written informed consent that they understand they are at high risk and wish to continue with their classes anyway.

SELF-MONITORING FOR SIGNS AND SYMPTOMS OF COVID-19

- Students, staff, and faculty should self-monitor for the signs and symptoms of COVID-19 every day.

- Take your temperature before the workday and then again in the afternoon (when viruses tend to spike temperature).

- COVID-19 causes a wide range of symptoms. Treat any new symptom as suspicious. The most common symptoms are mild cold or flu-like symptoms, especially a cough, sore throat, and shortness of breath.

- Should a school community member develop a temperature or symptoms of illness, they should stay home from school and self-isolate for 14 days or seek to obtain COVID testing so that they can be cleared of infection and return to school. For a sample Action Plan for a Positive COVID-19 Test, please see Appendix B.
CHANGES TO STUDENT, FACULTY, AND STAFF ARRIVAL PROCEDURES

» Assign one or two staff members to greet the school community at the primary entrance to the building.

» Students, staff, and faculty line up at the front door, maintaining 6 feet of distance between them.

» Assigned staff members use no-touch thermal temperature scans to confirm entering people have a temperature that is no higher than 100.4°F. Ask each arriving person if they have developed cold or flu-like symptoms or other symptoms suggesting illness. If anyone has a fever or has developed symptoms, they are sent home.

» Confirm that each arriving person is wearing an acceptable face mask or provide them with a disposable face mask.

» Ask each arriving person to sanitize their hands upon arrival.

COVID-19 Training

Students, faculty, and staff need to know the school’s plan for ensuring their safety. Designate a school administrator, manager, supervisor, or other person to be responsible for monitoring the health of the faculty, instructors, and students and to enforce the COVID-19 safety plan. Use these guidelines as a training foundation.

Alert the school community to policy and procedural changes related to COVID-19 and cover:

» COVID-19, what is it, what is known about transmission, symptoms, and risk factors related to massage and bodywork.

» Methods for preventing the spread of COVID-19 in classrooms and in the student clinic.

» How to practice proper hand hygiene, respiratory hygiene and cough etiquette, physical distancing, and disinfection of high-touch surfaces.

» How to use PPE. How to put it on. How to take it off. When to use it.

» School protocols and procedures related to COVID-19.

» Student clinic protocols and procedures related to COVID-19.

» Self-monitoring practices and what to do if you develop symptoms.
References & Resources
References


Resources


Resources


“Schools During the COVID-19 Pandemic.” Centers for Disease Control and Prevention, Centers for Disease Control and Prevention, Apr. 2020, www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/Schools-Decision-Tree.pdf?fbclid=IwAR0JkGYIUYWxexskign5bNqL4fggEeq6uFQObHQL3-HkiVFVNPqqRZsJYQQM.


SAMPLES

Appendices

Appendix A: Intake Form Addendum
Appendix B: Action Plan for Positive COVID-19 Test
Appendix C: Sample Client Notice
APPENDIX A:
Intake Form Addendum

To best protect your health and the health of others, please fill out this form before each massage and bodywork session. Thank you!

NAME: ____________________________ DATE: ____________________________

Have you been tested for COVID-19? If yes, what type of test did you have?

When was your test?

What were the results?

Have you been in places with a high infection rate within the last two weeks (e.g., state-designated “hotspots”? If yes, please explain.

Please check if you are experiencing any of the following as a NEW PATTERN since the beginning of the pandemic:

__ Fever __ Nasal, sinus congestion __ Sudden onset of muscle soreness (not related to a specific activity)
__ Chills __ Loss of sense of taste or smell __ Rash or skin lesions (especially on the feet)
__ Cough __ Fatigue __
__ Sore throat __ Shortness of breath __
__ Diarrhea, digestive upset __

Do you have any new discomfort with exertion or exercise?

I declare that the information provided above is true and accurate to the best of my knowledge.

(print name) ____________________________ (signature) ____________________________ (date) ____________________________
APPENDIX B:

Action Plan for Positive COVID-19 Test

IF SOMEONE ASSOCIATED WITH A MASSAGE THERAPY FACILITY TESTS POSITIVE FOR A CURRENT COVID-19 INFECTION:

If a massage practitioner, client, staff member, teacher, or any other personnel associated with an outpatient massage therapy facility (including private practice, school, clinic, spa, franchise, and others) tests positive for a current infection with SARS CoV-2 (COVID-19), then we recommend the following actions:

(Note: the terms “self-quarantine” and “close contact” are defined below.)

If the currently infected person is a client, patient, customer, or guest:

- The massage therapy facility complies with contact tracing efforts, working with the Department of Health and other entities as needed.

- The massage practitioner(s) who worked with the client gets tested for the virus (if possible), and must go into self-quarantine for 14 days following close contact with that client.

- All other clients of that massage practitioner who have had close contact with them in the meantime must be notified that they may have been exposed. (Public health statements recommend that they also go into self-quarantine for 14 days after their exposure, but that is not within the purview of the massage therapy facility.)
If the currently infected person is a massage practitioner or student working in a public clinic:

- The massage therapy facility complies with contact tracing efforts, working with the Department of Health and other entities as needed.
- All of the massage practitioner’s clients from the two weeks leading up to the positive test must be informed that they have been exposed. (Public health statements recommend that they then go into self-quarantine for 14 days after their exposure.)
- The room(s) and all the tools that the massage practitioner used must be thoroughly disinfected and left unused for a minimum of three days, if possible.
- The massage practitioner must go into self-quarantine until they test negative and all symptoms have resolved.
- Any other personnel at the facility who had close contact with the massage practitioner must go into self-quarantine for 14 days after their exposure. This might be shortened if accurate testing determines that they are not infected.
- The massage therapy facility complies with contact tracing efforts, working with the Department of Health and other entities as needed.
- All of the students and staff with whom the infected person had close contact within the previous two weeks must be informed that they have been exposed. They must go into self-quarantine for two weeks after their last exposure. This might be shortened if accurate testing determines that they are not infected.
- The student must go into self-quarantine until they test negative and all symptoms have resolved.
- The infected person’s storage area must be emptied, disinfected, and left unused for a minimum of three days.

If the currently infected person is a massage therapy student:

- The school complies with contact tracing efforts, working with the Department of Health and other entities as needed.
- The student must go into self-quarantine until they test negative and all symptoms have resolved.

If the currently infected person is a staff member (front desk, teacher, school administrator, etc.)

- The facility complies with contact tracing efforts, working with the Department of Health and other entities as needed.
- The infected person must go into self-quarantine until they test negative and all symptoms have resolved.
- All people who work at the facility who had close contact with the infected person within the previous two weeks must be notified that they have been exposed, and they must self-quarantine for 14 days after their last exposure. This might be shortened if accurate testing determines that they are not infected.
DEFINITIONS

Self-Quarantine:

“You should monitor your health for fever, cough and shortness of breath during the 14 days after the last day you were in close contact with the person who had COVID-19. You should not go to work or school, and you should avoid public places for 14 days.”


NOTE: in addition to these guidelines, we recommend that if a person has been informed that they have been exposed to the virus, they should get tested if possible.

Close Contact:

CDC: March 19, 2020
Being within 6 feet of a person who has the virus for 30 minutes or more
(Note: some hospitals reduce the “safe” exposure time to 10 minutes or more.)

https://www.cdc.gov/mmwr/volumes/69/wr/mm6911e1.htm

CDC: April 15, 2020
Close contact for healthcare exposures is defined as follows: a) being within approximately 6 feet (2 meters) of a person with COVID-19 for a prolonged period of time (such as caring for or visiting the patient; or sitting within 6 feet of the patient in a healthcare waiting area or room); or b) having unprotected direct contact with infectious secretions or excretions of the patient (e.g., being coughed on, touching used tissues with a bare hand).


CDC: May 5, 2020
a) Being within approximately 6 feet (2 meters) of a COVID-19 case; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case or b) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on)

APPENDIX C:
Sample Client Notice

Dear CLIENT,

I hope this finds you and your family in good health. While many things have changed, one thing has remained the same: my commitment to your safety and health.

By its very nature, massage and bodywork requires skin-to-skin contact and you should be familiar with the fact that infection control has always been a top priority for my practice. As we navigate life with additional requirements and modify existing measures due to the coronavirus, please help me to support all of my clients by cooperating with some new requirements.

My practice follows Practice Guidelines recommended by the Federation of State Massage Therapy Boards (FSMTB), along with infection control recommendations made by the U.S. Centers for Disease Control and Prevention (CDC) and the Occupational Safety and Health Administration (OSHA).

You may see some changes when it is time for your next appointment. I made these changes to help protect my clients and myself. For example:

• I will communicate with you beforehand to obtain updates to your health information and ask you specifically about your potential exposure to COVID-19.
• When you arrive at the office, I’ll ask that you wait in your vehicle until I text you or call you to come in. This ensures that we don’t have too many people in the reception area at one time.
• I will greet you at the door and use a no touch thermal temperature screening to confirm that you don’t have a fever.
• I’ll ask you if you have developed any symptoms of illness since we spoke on the phone. If you feel ill on the day of your session, there is no penalty for canceling your appointment. Massage is not advised if you have any symptoms of illness.
• Please bring a face mask to use while you are in the building, and during your massage.
• I will ask you to sign an informed consent form that states, “I understand that close contact with people increases the risk of infection from COVID-19. By signing this form, I acknowledge that I am aware of the risks involved and give consent to receive massage from this practitioner.”
• There is a hand-hygiene station that I will ask you to use when you enter the office. You will also find hand sanitizer in the reception area and other places in the office for you to use as needed.

I look forward to seeing you again and am happy to answer any questions you may have about the steps I take to keep you, and every client, safe in my practice. To make an appointment, please call my office at xxx-xxx-xxxx. My practice is tentatively scheduled to open on day, month, date.

Thank you for being my client. I value your trust and loyalty and look forward to welcoming you back to a safe, therapeutic touch environment.

Your Massage Therapist
Acknowledgments

The Federation of State Massage Therapy Boards extends acknowledgment and sincere appreciation to the members of the Practice Guidelines Task Force. The members of the Task Force worked diligently to research and prepare the Practice Guidelines and to share best practices for massage and bodywork practitioners during the global COVID-19 pandemic. The FSMTB is profoundly grateful for their subject matter expertise and their service.
The FSMTB appreciates those who supported the project by reviewing and providing comments during the preparation of the Practice Guidelines. Input from national organizational reviewers provided the Task Force with numerous perspectives before finalizing the document.

**EXTERNAL REVIEWERS**

- ABMP – Associated Bodywork and Massage Professionals
- AMTA – American Massage Therapy Association
- COMTA – Commission on Massage Therapy Accreditation
- NCBTMB – National Certification Board for Therapeutic Massage and Bodywork

The Board of Directors represents 46 state licensing boards and agencies that regulate the practice of massage and bodywork in the United States and Territories. Thank you to the Board of Directors and the Member Boards for their leadership during the global COVID-19 pandemic and for swiftly addressing the need for Guidelines for Practice with COVID-19 Considerations.

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