



Re: Amendment to the Regulations under COVID-19 Pandemic

April 4, 2022

Dear Marine Lab,

The Dive Control Board (DCB) updated the regulations for scientific diving during the COVID-19 pandemic. The following new regulations are effective immediately and until further notice.

First, please keep up to date regarding the UOG's COVID-19 information.

<https://www.uog.edu/covid-19>

The following guidelines are referring to divers who are **completely asymptomatic** after their illness. Additionally, the divers **must have returned to their baseline levels of exercise and tolerance**. Please note that each diver is responsible for being honest about their recovery. We also suggest that faculty advisors meet with any of their students who have been sick to further assess and monitor their readiness to dive.

1. Divers **without** history of COVID-19-suspected illness or divers who tested **asymptomatic positive** or divers who had a **very mild**\*<sup>1</sup> COVID-19-suspected illness

\*<sup>1</sup> Isolated upper respiratory or systematic symptoms (rhinorrhea, congestion, pharyngitis, loss of taste or smell), fevers fatigue, or myalgias but **WITHOUT** lower respiratory or cardiac symptoms

are advised to take:

- Initial/recurrent medical exam per AAUS guidelines

2. Divers who had a **mild**\*<sup>2</sup> COVID-19-suspected illness

\*<sup>2</sup> - Symptomatic COVID-19 including any of the following: Any lower respiratory or cardiac symptoms, including chest pain, palpitations, significant cough, shortness of breath with exertion or at rest

- Outpatient treatment only without evidence of hypoxemia
- Did not require supplemental oxygen
- Imaging was normal or not required

are required to take:

- Initial/recurrent medical exam per AAUS guidelines
- Spirometry
- Chest radiograph (if abnormal, obtain Chest CT)
- If unknown (or unsatisfactory) exercise, perform exercise test with oxygen saturation

3. Divers who had a **moderate**\*<sup>3</sup> COVID-19-suspected illness

\*<sup>3</sup> - Required supplemental oxygen or was hypoxic

- Had abnormal chest imaging (chest radiograph or CT scan)

- Admitted to the hospital but did NOT require assisted ventilation (BIPAP, CPAP, or ventilator) or ICU level of care

- If admitted, had documentation of a normal cardiac work up including normal ECG and cardiac biomarkers e.g. troponin or CK-MB and BNP

are required to take:

- Initial/recurrent exam per AAUS guidelines
- Spirometry
- Chest radiograph (PA & Lateral) (if abnormal, obtain Chest CT)
- ECG
- Echocardiogram (if no work up was done inpatient. Can forgo if had negative work up)
- If unknown (or unsatisfactory) exercise tolerance, perform exercise tolerance test with oxygen saturation
- Investigation and management of any other complications or symptoms per provider and AAUS guidelines

4. Divers who had a **severe**\*<sup>4</sup> COVID-19-suspected illness

\*<sup>4</sup> - Required mechanical or assisted (CPAP, BIPAP) ventilation, or ICU admission

- Cardiac involvement defined as abnormal ECG, abnormal echocardiogram, or elevated cardiac biomarkers; e.g. troponin or CK-MB and BNP (or absence of documented work up)

- Thromboembolic complications (such as PE, DVT, or another coagulopathy)

are required to take:

- Initial/recurrent exam per ADCI/AAUS/NOAA/RSTC guidelines
- Spirometry
- Chest radiograph (PA & Lateral) (if abnormal, obtain Chest CT)
- ECG
- Repeat Cardiac troponin or CK-MB and BNP to ensure normalization
- Echocardiogram
- Exercise Echocardiogram with oxygen saturation
- Investigation and management of any other complications or symptoms per provider and AAUS guidelines

Please let us know if you have any questions or concerns.

With Best Regards,



Atsushi Fujimura  
Dive Control Board Chair



John Peralta  
Dive Safety Officer



Laurie Raymundo  
Marine Laboratory Director