



COVID-19 PREVENTION GUIDELINES FOR SCUBA DIVING OPERATIONS:

These COVID-19 Prevention Guidelines for SCUBA Operations are intended to supplement the [University of Washington COVID-19 Prevention Plan for the Workplace](#). The University Plan includes a template or site-specific COVID-19 Prevention Plan that is required for the workplace. These guidelines for scuba diving should be followed and included as a part of that plan.

The following guidelines were developed to help ensure the health and safety of personnel conducting scuba diving by reducing the potential for COVID-19 transmission. All employees and students engaged in scuba diving are expected to adhere to the most current and up-to date University of Washington (UW), local, state, and CDC guidelines prior to commencing field operations.

ESSENTIAL OPERATIONS APPROVAL:

Prior to engaging in scuba diving, all diving operations must be approved by their unit head or designee in accordance with the current UW Office of Research's Guidelines for [Mitigating Impacts to Research Activities Due to Covid-19](#) and [Guidance for Returning to In-Person Research](#).

PROCEDURES FOR SICK PERSONNEL, SYMPTOM MONITORING, REPORTING AND RESPONSE:

The following requirements are subject to change, and the most up-to date information can be found on the [UW Human Resources website](#). Scuba divers and surface tenders must stay home if they are sick or have any symptoms of illness, even mild symptoms. If they become sick while on-site, they must notify their supervisor and go home. The University has created a document with steps for those who are feeling ill, "[What do I do if I feel sick?](#)" The [University of Washington has Guidance for Symptom Monitoring for COVID-19](#). The University requires daily COVID-19 symptom attestations completed for work on-site at a University location. University units and personnel are required to report to a University [Employee Health Center](#) (EHC) if they have suspected or confirmed cases of COVID-19 or if they have close contact with individuals who have COVID-19.

MEDICAL SCREENING AND CLEARANCE:

Prior to conducting their next dive operation, all divers must fill out the Employee Health Center Diver COVID-19 Questionnaire and return it to the EHC. Please request a copy of this form from the UW DSO. After filling out the form and receiving EHC medical approval,



divers must inform the EHC if they develop COVID-19 symptoms and must not dive.

When indicated by the EHC Diver Covid-19 Questionnaire or if a diver presents COVID-19 symptoms, divers will consult with the EHC prior to scheduling a new dive physical. Dive physicals must comply with the most current hyperbaric medical recommendations for diver clearance and return to diving post-COVID-19 as specified by the EHC and the University of Washington Diving Medical Officer.

COMMUNICATION AND TRAINING:

Units are required to communicate to personnel about COVID-19 prevention on campus and to train on the contents of the University Plan and site-specific COVID-19 Prevention Plan.

All University units are required to communicate to personnel about ways to prevent the spread of COVID-19, including reviewing their unit and worksite-specific procedures for COVID-19 prevention. The [UW Stay Healthy, Huskies](#) webpage has posters and graphics in various formats for you to post and communicate in your work area.

All personnel must be trained on COVID-19 prevention practices prior to engaging in diving activities, training must be documented. This includes physical and social distancing practices of at least 6 feet, practicing good hygiene like washing hands frequently, not touching others, and staying home if you are sick or symptomatic, cleaning and disinfecting surfaces, face coverings, and personal protective equipment (PPE) requirements. The University's general [COVID-19 Safety Training](#) is required for all University personnel, however University units/departments may provide their own training that covers the elements of the University's COVID-19 Safety Training (e.g., medical centers). In addition to general COVID-19 safety training, units/departments are required to provide documented training on the contents of their unit or site-specific [COVID-19 Prevention Plan](#).

PHYSICAL DISTANCING:

Dive teams must be kept to a minimum of personnel required to accomplish the work being done. Individual participants must transit to and from dive sites in separate vehicles; no carpooling unless carpooling is included in an approved Health and Safety Plan by the diver's department. If transiting to the dive site via boat, then the vessel needs to be large enough to allow for a minimum of 6 feet of physical distance between all individuals. For windy and moist environments, such as on a boat, a beach, or dockside, downwind positions may require greater distancing. Where physical conditions or weather will not allow for this separation, individuals will be required to wear a face covering and a face shield or more protective Personal Protective Equipment (PPE). More boating information can be found in the [Guidelines for Preventing COVID-19 during Small Boat Operations](#).



PERSONAL PROTECTIVE EQUIPMENT:

A face covering is required to reduce the risk of COVID-19 spread and exposure indoors when more than one person is present. Outdoors, a face covering is required if a 6 foot distance cannot be maintained. If work tasks require working within a 6 foot physical distance, individuals are required to wear a face mask or more protective PPE, based on the work. EH&S has [Guidance on face covering use for preventing the spread of COVID-19](#). Special attention should be paid to the use of cloth face coverings, which become ineffective when wet. The environmental conditions aboard a small boat or at a dive site often lead to water splashing on divers. As such, the use of face shields may be required in addition to the cloth face covering. EH&S's [Guidelines for Personal Protective Equipment](#) and [COVID Risk Level PPE Selection guidelines](#) should be followed when choosing the appropriate level of protection.

HYGIENE

Personnel should have access to soap and running water to wash their hands after touching any surface or tool suspected of contamination, before and after eating or using the restroom, and before touching their face. Hand washing often with soap and water for at least 20 seconds reduces the risk of spreading COVID-19. If there is access to an appropriate sink at the dive site or on the vessel, this should be done on a regular basis. For locations that do not have a sink, secondary hand washing to sanitizing stations should be set up with hand sanitizer with at least 60% alcohol content. Hand sanitizer needs to be stored in a temperature-controlled environment or cooler, out of direct sunlight and heat. In addition, personnel should avoid touching their eyes, nose or mouth with unwashed hands. Divers and tenders must avoid contact with people who are sick, cover their mouths and nose with elbow or a tissue when coughing or sneezing, and immediately dispose of the used tissue.

DECONTAMINATION AND SANITIZING:

Emergency equipment and handheld scientific equipment and other commonly touched surfaces should be sanitized with an approved sanitizing agent. All high-touch surfaces in vehicles, in vessels, and on shared equipment, such as door handles, vessel logs, keys, float plan cabinets, hose bibs, and nozzles, are required to be decontaminated before and after each use. Flammable or alcohol based disinfectants should be avoided as temperature regulation may not be possible during operations.

Every person is responsible for disinfecting their own work gear with an approved sanitizing agent. This includes Personal Flotation Devices and any safety gear handled. The Environmental Health and Safety Department has developed protocols on [Enhanced Cleaning and Disinfection](#). Hard, non-porous surfaces can be disinfected using an [EPA-registered disinfectant](#)



Scuba Equipment: [DAN Procedure for Disinfecting Scuba Equipment](#).

FIELD PROCEDURES:

Pre- and post-dive briefings should be concise, with individuals wearing masks and maintaining at least a physical distance of 6 feet between each other. Buddy-checks will be completed while maintaining a minimum of 6 feet of physical distance.

When possible, only the diver should handle their own personal scuba equipment, including tanks and weights. No communal or shared gear should be used. Divers will prepare, transport, assemble and doff/don equipment individually in order to minimize touching of these surfaces and to maintain 6 feet of physical distance.

All divers must have an alternate second stage "octopus" as their secondary air source to share, even if they have an "Air2" style second stage. Equipment configured with an "Air2" will be modified to include a secondary "octopus" air source. Contact UW DSO at divesafe@uw.edu to discuss procuring an "octopus" if a diver does not have one.

When possible, entries and exits will be done with masks in place and regulators in mouths. Regulator and mask must stay on the diver until social distancing guidelines can be adhered to. For operations where exiting the water does not allow for the diver to keep their equipment in place, a mechanism will be devised to allow the diver to secure their equipment in the water, exit the water, and retrieve their equipment themselves. If someone needs assistance, then the diver's cylinder should be turned off and purged to avoid a free-flowing regulator. If the social distancing guidelines cannot be maintained during surface swims, masks and regulators must remain in place.

EMERGENCY PROCEDURES:

In an emergency situation it is imperative that divers act with the utmost speed in order to prevent drowning, decompression sickness, or lung overexpansion injuries. A diver should prioritize care of the victim in order to prevent a diver fatality.

Out of air situations and air sharing should be done using an alternate air source "octopus"-style regulator unless doing so would result in injury or loss of life. It is vital to ensure the out of air diver has access to air and delivering air should be the priority.

Unconscious divers should be extracted to the surface as normal. Once on the surface, the rescuer's mask and regulator should be used for as long as is practical.

First aid and CPR should be done with standard PPE protocols with gloves and CPR barriers. Prioritizing CPR, Oxygen Administration, First aid, and AED use, where appropriate, is the immediate priority. Oxygen kits should be equipped with one way valve filters on bag valve masks, manually triggered ventilators, and oronasal resuscitation masks. Unless O2 kits are equipped with filters on barrier devices, surgical masks should be



worn. If no filter equipped barrier device or oxygen kit is available, CPR should be compression only.

Emergency supplies (First aid kit, O2 Kit, and AED) should only be opened in an emergency. If they are opened and used they need to be disinfected with an approved [EPA-registered disinfectant](#). If any kits have been used, notify the DSO.