

A Massage Therapists Guide  
for Re-Entry and Re-Opening  
in the Time of CV-!9

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Presently after more than 8 weeks in which nearly all massage practitioners and practices were shuttered, like so many businesses throughout our state (Oregon), and our country we are approaching a time of re-entering the workforce and for many of us, re-opening our private practices specializing in Massage and Bodywork of many categories, modalities and specialties.

The premise for the closures originally was to diminish the transmission of the disease CV-19 by limiting exposure to one another through the concept and practice of social distancing. The purpose was to “flatten the curve” in the hopes that fewer people would be exposed to, or acquire, the illness and then need medical attention. As we have seen in many reports worldwide the rapid rise of serious cases occurred in several areas and its impact at every level of society specifically the medical facilities personnel and first responders. We grappled with inadequate supplies of medical equipment and personal protective equipment (PPE), hospital beds, inadequate number of ICU facilities, and an increased burden financially and economically for nearly everyone.

In so many areas the enactment of Executive Orders by Governors throughout the US has proven beneficial. Many of us have learned far more about the differences between a cold, the “regular” flu, and this SAR-CoronaVirus illness, Covid-19. To be certain, there are still a number of new cases in our cities and towns occurring at a rate that signals we have, indeed, lessened the exposure and the burden, but not yet at a rate that could be sustained if we lessen the current restrictions. However, for many of us in professions like massage therapy, physical therapy, salon and hair care, tattoo artists, we are very concerned about the return to work, not just for our selves, but for our ability to keep our clients safe and to achieve this level of safety, with each client, with each session, repeatedly, everyday that we practice.

We are concerned that our services where we literally touch people for a living for a long period of time, in usually beautiful but smaller, warmed rooms and quarters, with normal HVAC systems (mostly) we will not be able to meet these standards.

In the past 3 1/2 weeks I have come across or received a whole host of materials including from our national associations, checklists (AMTA), guides (ABMP) and suggestions about what we need to do or what maybe we can do to keep ourselves, our clients and patients, colleagues, staff and by extension, our family and friends with whom we live, SAFE.

I had a meaningful conversation with a practitioner about 10 days ago. During this chat I threw out the idea that maybe the massage therapy profession needed to create a national commission made up of well-respected practitioners, community leaders and maybe a couple people with government or public health experience, charged with the responsibility to guide us through with clear directives, guidance, and support this pandemic process as well as other circumstances and situations within the profession itself. The idea was received well but this practitioner is quite busy with his leadership position to manage this new idea. So he suggested that I put my ideas on paper.

When I attempted to do just that, I realized it was just another intellectual exercise and the result would be another checklist. Inside of this realization was the “aha” that I needed to get to my massage studio, review these checklists already developed and published, to challenge them as such to see if I was prepared to open once the Governor rescinded her earlier order or issued a new Executive Order permitting LMT’s to re-enter the work force and to re-open our shuttered practices.

So I set out to answer several questions and to see if I could meet additional criteria I felt necessary to open my practice safely (most of my clients have serious medical concerns that warrant serious precautions regularly).

### The Questions:

What are the standards of protection and sanitary safety protocols I will need to have in place and practice with every client, every session, every day to keep the potential for transmission of this CV-19 pathogen or any other from occurring?

Will we need to implement social distancing guidelines and best practices for our workspaces? What are those protocols?

Where do we find the guidelines and directives that apply to our practices?

What do we actually need to do regarding sanitation practices and when will we need to do it? Are the disinfectant products or solutions and hand sanitizer products available?

If required, or if it is a Best Practice recommendation, can I purchase and receive the necessary Personal Protective Equipment? Can we do so without overburdening and compromising the First Responders, front line emergency care workers and its supportive medical communities and hospitals? Will we be able to maintain a steady supply of these items without compromise?

Is use of a thermometer, pulse oximeter, or asking detailed “medical-based” questions out of my scope of practice? Does this apply to us? How do we as practitioners incorporate this into our practices? Will I be able to purchase this equipment?

And, finally, what are the costs to do so?

The following Guide is the result of an exercise to answer these questions. Saturday, April 18, 2020 as I sat down to make a list of ideas I guessed would just take a few hours, maybe. Now, ten days later, writing version 4 (as we know all things CV-19 related are mutable) it is ready for primetime.

There are three areas of focus. First, the sources of information and practical protocols for opening and staying open. Second, the actual exercise of putting these checklists and guides to the test, And, third, an examination of the equipment and supplies (some recommended, others I have added). I have done my best to find the answers. And like any good action based project, oftentimes, more questions come to light. Conversely, some get answered more easily. In addition, based upon my many years of clinical, hospital based experience, both as a practitioner and as an instructor, I give my two cents and even a strong recommendation or two.

For many LMT's, we need to feel our way through a process, so to speak. There is something that happens to me when I walk through the door, when I enter my treatment room. A feeling rises within, I am in my zone, an active, yet nearly meditative state. This is when I do my best work.

Sunday, April 19, 2020

So I unpacked my backpack, pulling out my computer and my phone (did I mention that it was cold and dark and a little sad when I first arrived) ?Turned on some brainwave music, exhaled, thinking, "So how do I do what I do? What do I do to keep everyone and my space clean?" As I am thinking through these answers and looking around my room, I realize I am ahead of myself. As a practitioner in oncology units of a large university hospital, I have protocols in mind for how I will engage in my private practice. I have made the professional decision for my practice and clients, I will glove and mask for each session and I will ask the client to mask as well. Great answer right? This is what I meant by getting ahead of myself. I had also thought about how I keep the premises clean, neat, and tidy. Again, making a few leaps.

I realized I needed to do some research. What standards do we need to meet? By whose authority? What level of exposure are we truly at risk for? And, if we are at a specified risk level, what level then are we posing to our clients?

And again, I realized I was ahead of myself. I remembered something just then, something I had read to a colleague when we were speaking on the phone just two nights before. We were researching the local, state and federal guidelines for practitioners like ourselves returning to work. What guidelines existed? The source and the site? OSHA, the Occupational Safety and Health Administration, whose sole existence is to keep the employment and work safety and health standards of this country at a high level. And they have enforcement authority. I remembered that I read a paragraph about Professional Person-to-Person Services. But I was still ahead of my self by one step. See I realized that everything for me was going to be moot, unless we could get the level and quantity of supplies necessary to actually practice and keep these standards in tact. Could we get masks and gloves? Could we get medical grade masks and gloves? If so, at what cost? Supply? As you may have guessed I was able to answer that question. Once that was answered, It was not a moot point or an exercise in futility. The reality hit me right then, someday, maybe soon, the governor was going to rescind or lift the restrictive order. So the exercise began in earnest.

The following are the standards, layered, that we as practitioners should enact and strive to meet for every client, for every session, every day that we work.

First, as licensed or certified practitioners, each state that has a licensing board or certifying agency there are safety and sanitation practices we are required to implement and practice regularly. This is our minimum standard, our foundation. Know these standards. For those states where neither agency or board exists, the guidelines for standards of practice can be found at most Public Health Departments.

Second, the Center for Disease Control (CDC), OSHA, the World Health Organization and our state boards, and public health departments have guidelines maintaining **social distancing protocols**. These protocols are expected to be in place for months to come in an attempt to lessen the possible spike of new diagnosis of CV-19. This is our second layer of recommended practices and protocols.

Third, within the guidelines from [OSHA's Guidance on Preparing Workplaces for COVID-19](#) (resources) there are clear recommendations and guidelines that all workplaces are mandated to enact for the safety and well being of everyone. For professional practitioners providing person to person services who are unable to maintain the social distancing guidelines and standards that are expected in all workplaces, Personal Protective Equipment will be to required keep the safety and health standards of protection that is mandated. This is our third layer of recommendations and guidelines. Please read these guidelines (see resources link).

Fourth, in addition we have several sources of professional recommendations from Medical personnel on the front lines and from one of our national associations, ABMP, with recommendations for re-opening. (See links)

An important aspect to determine, which I mentioned earlier, would be our ability to acquire and maintain a reasonable supply of these materials. Before I travelled too far down the rabbit hole, I decided to go shopping. The first stop? Massage Warehouse. I made this choice for several reasons. This is a supply company created to meet the needs of professional practitioners who provide person-to-person services. A very serious criteria for many workplaces re-opening outside of our more personal nature, is the supply chain. If the supply chain is ramping up to a greater productive level, as we are seeing this throughout the world economy, albeit slowly, first there needs to be requirements, second fulfillment capabilities and finally distribution and delivery. As we know the requirements for personal protective equipment are at a very high level. Yet if we are to re-open the work force, not just here, but around the world, we need to extend the orders, the requirements. If a business like Massage Warehouse has the requirement and a clear fulfillment channel that does not sidestep or interfere with the supply chain for the hospital and frontline workers, then those supplies are available to non-essential practitioners, like massage therapists. Please note: this is not a personal or even professional LMT opinion. This is SUPPLY-CHAIN Economics.

If this were not the case, we would not be able to place the order with the Massage Warehouse or other similar company.

Second, could I find other cleaning supplies? Ah, but first, what did I have in my treatment room? In our workplace (6 LMTS sharing 3 rooms)?

Here is the fun part and I highly recommend you do so. Get to your workplace and your treatment room and take yourself through the following exercise to determine your level of cleanliness and sanitation.

Cleanliness & Sanitation

[Challenge your cleaning process and procedures:](#)

You will need to think long and hard as to how you do what you do now moving forward. Is how you clean and take care of your treatment room and the common areas in alignment with the Safety and Sanitary protocols outlined by your State's Health Authority? Is it safe for yourself and your clients? Are you unsure? Take yourself through the actions you have normally done. Can you do them and keep the safety and sanitary procedures clean and intact? Or is it a bit of a challenge?

Here is the exercise:

Imagine that you have a client session booked. It is your first session of the day after a long absence. Take a good look around. Is it clean enough to give a session right away? Do you have clean sheets on the table? Do you need to dress the table with a full setup? Now take yourself through your protocol as you have always done. Keep in mind all the levels of safety and sanitation that we have in play now.

So the following is what occurred when I took myself through the actions.

Assume that the treatment room is clean and meets all standards. The table set up completed with clean hands. Assume that I am masked and gloved during the session with no surprises and client, masked, has been kept safe and I feel good the protections stayed secure. She loved the session, even became comfortable with the mask while prone. The session ends. I notice I do not have a sink in the room to clean

my hands post session. Alcohol-based hand sanitizers are in short supply and limited, so we are pooling our resources. The sanitizer is kept next to the sink, outside of my treatment room. I think to myself, oh no, how do I exit and keep the door handle safe for the client? This is what I discovered. I end the session and remove myself from the room using a paper towel or tissue (which are within easy reach) to use on the door knob as our sink is in another room. I de-glove in the other room and dispose of the gloves in the main receptacle which is under the sink (paper towel to open the door). Then I wash my hands (mandatory even if you glove, see protocol). I then realize my client will need to pay me for the session. I use Square and the client is using her HSA card. No Chip. I will need to swipe. We finish the transaction haphazardly, and we say our goodbyes and talk of booking the next session. Then the cleanup begins: Did the client use any of the towels or washcloths left for her to do so? Did she use the bathroom again? Oh, I just saw her pick up a magazine. Magazine? Where did that come from? I thought we got rid of all the common (old ) reading material? She glances through it, then places on the chair. So it begins and expands.

So donning another pair of gloves (disposable cleaning gloves) I will need to remove the used, dirty linens, placing them in an appropriate receptacle. To redress the table, I felt like I needed to don yet another pair of gloves. Wipe down the common touched areas of the room, equipment and subsequent areas of business that the client may have used. Once I have finished cleaning all the equipment and common areas, will need to remove the gloves again. Dress the table with fresh sheets in gloved hands. So when I evaluate what I had to do to keep the cleanliness/sanitation and protocols intact, it gave me a list of actions I need to re-evaluate, items I may need to purchase to increase the safety factor more easily as well as to eliminate any extra, unnecessary steps. Whew!

During pre-CV-!9 times, it was understood that we could safely remove sheets without gloves and most certainly redress the table with just freshly washed hands.

Massage Therapy sessions during and recently post CV-!9 will require the same deep attention to detail that some of our somatic protocols require. So, if this newly evolving protocol is right, the minimum sets of gloves for each client will be three (3). Here I will make a recommendation for different types of gloves. A possible safe approach might be to use cleaning gloves (Playtex) that are washable and reusable for post session cleanup followed by a lesser expensive disposable glove for re-dressing the table. My next recommendation will be for a change of clothing or a protective

layer, like an apron, after you have removed all the dirty linens but before you re-dress the table.

Utilizing Playtex Gloves or an equivalent, more green product would incrementally lessen the number of disposable gloves used as well defraying costs and minimize the burden on the environment.

The point here is to see how many new steps we need to add to our cleaning and sanitation protocols. Use your imagination, or better yet, give yourselves a few moments to remember the worst session/massage situation you experienced. What happened? What if that situation occurred today? What do you need to do, how do you need to do it, to keep the client, yourself, and your colleagues safe and the people who come after?

### The current state of our facilities and our furnishings.

While this time is daunting for so many, it offers those of us who are not able to work an opportunity to re-evaluate, re-assess, and implement or change aspects within our practices we found difficult to do while actively doing our work, running our practices and living our lives.

What does your room or rooms look like? Can it use a fresh coat of paint? Is that chair really as clean as it could be...does it need to be re-upholstered or replaced? Do the carpets need to be cleaned? Are the baseboards and light fixtures dusty? Do the windows and blinds need a cleaning? Oh, the candy dish? Take a good look. Then get it done. Clients will be looking and evaluating. Is there clutter that can be minimized? When was the last time you used one of those massage texts for reference? Change it up and do it now!

### The Details

Clean Rooms and Surfaces

Protective Table Covers and Linens

Personal Protective Equipment (PPE)

Lotions and Oils

## Professional and Self-Care Practices Additional Equipment

Here is where we begin to put it all together. A reminder of our levels of care:

States which require licensure and/or certification for Massage Therapy and Therapists have regulations that support and require sanitation and cleanliness standards. KNOW your state's requirements and guidelines. In addition, there are national organizations such as the Centers for Disease Control (CDC), Occupational Safety & Health Administration (OSHA) who have legally enforceable mandates that are recognized by the States, and as such there are 29 States offices of Occupational Safety & Health Administration (OHS Oregon, for example). It is these guidelines that I have chosen to consider as the highest standards that I would need to meet in order to ensure the greatest level of safety should the recognized Epidemiologists and Infectious Disease experts believe that the CV-19 virus is still about in the communities within the United States, including Oregon, the state in which I practice. (See links below) While we are considered at Medium Risk, the sensitivity, insidiousness, and contagion factor of CV-19, the act of massage, its length of session, deems the use of additional Personal Protective Equipment PPE necessary and important to stem the possible spread.

The list of items below are what are the minimum requirements to meet the multiple level of standards that are now necessary to meet the mandate of safety and health as set forth by OSHA. I have endeavored to verify the availability of all of these items and it is so indicated along with prices.

If you do not have appropriate Cleaning Supplies and PPE, protective wear and/or clothing changes as mentioned below, (and a continuous supply moving forward) then you are not prepared to re-open your practice in a way to keep yourself safe, first, so that you are able to keep your clients (and by relation, every person in their living and working environments) safe.

The Basics: every common surface that you, a client, coworker, staff member touches must be wiped down repeatedly after each client. There is a Chart indicating the types of acceptable products in the Resources list.

Remember good old-fashioned SOAP is the best product for cleansing your personal self (hands & forearms) after each client session. (Dr. Bronner's liquid soap is my go to product of choice.)

### Additional Cleaning Supplies:

Disinfecting Products: Wipes, Sprays, Liquids (*availability varies*)

Paper Products: Paper Towels, Toilet Paper, Tissues (*supplies available*)

Personal Products: Soaps - Liquid recommended (*available*)

Hand Sanitizer (*availability difficult*)

recipes available online for making your own,  
will need access to Isopropyl Alcohol (70%) (*Available*)

Towels/washcloths Hands-free (touchless) soap/sanitizer containers:  
There are many available online. Cost: begins at \$30 - 80 per dispenser

### Massage Supplies:

#### Protective table covers

Vinyl, Water/soil proof linens are available. I have chosen Allersoft Waterproof Mattress Protector (\$29.99) and have ordered several so I can replace it after each client and keep the comfort and relaxation factors high for my customers. Factors to include: noise and comfort level; viability of the product. Will a vinyl cover hold up to the repetitive use of cleaners necessary to keep the surface sanitary?

#### Recommendations for Face Cradles

One of the guides suggests using disposable face cradle covers, then using a folded pillowcase over the face cradle, making a sling so that when the client is done the pillowcase will catch any potential moisture or saliva that is expelled by the client.

It is an idea, but one I do not recommend. I actually experimented with the suggestion.

### Session number 1: Disposable Face Cushion Cover/Pillow Case

First, the pillow case - I actually tried this. I pulled out my table Saturday, April 25. Dressed the table accordingly. Put on music I enjoy playing at my studio during a client session. Placed a disposable cover and then the pillow case. I set my timer for 20 minutes. I put myself on the table in the prone position as the client would. For me it was not at all comfortable. The awareness level caused me to begin shallow breathing then in an attempt to calm my breathing it then became labored. I managed to last 14 minutes. It was too much. There was quite a bit of moisture that had build up on the pillow case too. If it was too much for me, I feel as though it will be too much for the clients. So at clean up time I am the practitioner. As the practitioner, I gloved to remove the pillow case and the face cradle cover, using wipes (at home I have some disinfecting wipes left over from a Costco run back in January) I clean the face cradle cushion and the bar on the cradle itself as well.

### Session number 2: Flannel Face Cushion cover Client Masked

This session I will use a flannel face cushion cover. The music is on, I set the timer for 20 minutes. I place a face mask on, i place myself on the table, prone. At first it was a bit uncomfortable, a bit of shallow breathing like the initial experiment, but I was able to steady my breathing as I opened my eyes and I could see the floor entirely without obstruction. I closed my eyes exhaled again and I was in a very nice state for the remainder of the time.

PPE for us will include medical grade masks and gloves. Masks are running at a premium price for a box of 50 (\$46-50). We may need to require clients to wear masks as well to truly cut down the potential exposure levels. Currently, these products are on back order with a 10 day to 2 week delivery timeframe and limits on quantity at Massage Warehouse.

Nitrile gloves that fit well and a bit snugly are the grade needed for giving massage safely. I have years of experience giving massage while gloved in clinical, hospital and inpatient hospice settings. And I have hundreds of testimonials from patients over the years complimenting the massage from me as well as those of several colleagues. I can appreciate the importance of the skin to skin contact, and I agree. Except in this circumstance. CV-19 has no discriminatory boundaries. It is sensitive, insidious and

very contagious. It is a VIRAL PLAGUE with unknown long-term consequences for those who have recovered. USE GLOVES!

Gloves for changing linens and for cleaning will be necessary as well, though they will not need to be of medical grade and they are available through Massage Warehouse.

Homemade masks, are believed to be ineffective in our prolonged touch heavy environments. These homemade masks are great for going to the grocery store and getting gas and wearing around others at a distance of 3-6 feet, for keeping basic social distancing guidelines.

Thoroughly cleaning our lotion and oil containers after every use is mandatory. I also realized that the practice of placing cream on the fore-arm, or lotion/oil in a dish are practices that we will need to discontinue during this time period until otherwise determined that we are no longer at risk for the spread of this illness. Pump driven bottles and jars are highly recommended and easily available at many online stores. My go-to vendors are Bulk Apothecary, Massage Warehouse, and AMAZON.

Holsters: My current practice is to launder my holsters frequently. I have 2 so I alternate them and wash at the end of the day.

Additional equipment includes:

Number of articles and checklists have made recommendations for additional products that we might find beneficial for sanitation and lessening the possible transmission of a pathogen like the this virus.

So i have taken the same approach to complete some very deep research about these products and the science behind their use.

Air Purifiers with HEPA Filtration

Most of the vacuum cleaners on the market today have HEPA filtration. The science and the technology behind it is that it cleans better, in a deeper way without leaving any dust and residue behind. I am sure there are a few of us around still who remember a cloud of dust emanating form the vacuum of old. Well, the HEPA filtration

process eliminates that and more. Studies of this technology and its use in vacuums and Air Purifiers is remarkable. A decent air purifier can remove all sorts of dust, dander from pets, and minuscule particulate that we often cannot see. In addition, HEPA air purifiers can remove up to 98% of airborne particles associated with colds and flu. There is some question as to whether they are effective at removing the particles or droplets from the virus that causes COVID-19. However, this is a novel coronavirus therefore no science is yet complete. When I looked at the products I shopped the way I always have. I looked at sites that research “best” products. I have a small room so that is the category I looked at deeply. (Levoit Air Purifier \$89.98) and necessary replacement HEPA Filters. This is an ideal purchase for the average massage room. I made the purchase Sunday, April 19, receiving it Friday, April 24. I used this product for 24 hours in the master bedroom of our home, where our dog shares our space (she has her own large enclosed bed). The change in the room has been significant. Completely eliminated Ginger’s dander in her crate. Poof! There are others with very good ratings available as well.

**FAR UVC Sterilizer Lamps** and wands may be a useful tool for ultra sanitation especially of hard to clean surfaces like soft-covered furniture and clothing. This item took me a great deal of time to be able to wrap my head around the research and published studies. I was on the fence for 7 days. I had conversations with several colleagues I greatly respect and took a very deep dive into the literature. I had a surprise opportunity to speak with a fellow who has done quite a bit of the research for these lights. The reason I took this under consideration is because of the special population I serve in my practice: clients who are medically challenged with serious diagnosis and are often immunocompromised. (This is also the reason I will likely reopen later than most practitioners as well.) It was the many conversations as well as the independent studies that convinced me this is a device that would serve my treatment room very well regardless of the communicable conditions. PLEASE NOTE: This is a NOT A RECOMMENDATION NOR A DIRECTIVE for any practitioner to purchase. This was not an easy decision to make. (YiLaie UVC Sanitizer - 2 wattages \$99.00 or \$119.00 is the lamp I chose to purchase)

<https://www.post-gazette.com/news/health/2020/04/09/Ultraviolet-technology-far-UVC-light-disinfectant-COVID-19-coronavirus/stories/202004080113>

**Protective Clothing or Changes** of clothing and shoes between clients and at the end of the day to keep from tracking into your car, place of residence or second place of employment may be required. When to change clothing: This is an important segment

that warrants additional discussion and ideas. Has any of our clothing touched the client? If so, it will need to be changed, especially if there is a client arriving in a short period of time. When at your space reviewing the way you do what you do, think to yourself. When is the best time to change the shirt or the protective clothing? I thought I had it figured out, but I am still challenged by 2 things: When I exit my room I am in communal spaces, so I need to remove the protective layer? Where? In the room before I leave? After the client leaves, I will need to undress the table handling dirty linens...a conundrum...still thinking it through. If you have no protective layer, but have decided to change shirts, when and where will you do this? And, finally, being ranked medium risk (OSHA risks ranking as to level and likelihood of exposure), do we need to do this step?

**Receptacles:** Dirty linens, gloves, masks, paper towels and wipes all need to be disposed of appropriately. Do you have hands free, securely covered receptacles for your linens and for your medical grade PPE and the associated wipes and single use clean agents like paper towels? Are they easily accessible hands-free? Do they meet these standards? Here is my self-test: both my laundry receptacle and my small garbage containers are beautiful, attractive, genuine woven baskets. The laundry is not hands free. The small garbage can could be, but it is not enclosed securely. So I will more than likely need to upgrade. I now will repurpose my slightly used linen receptacle for my home laundry room! And I will more than likely upgrade the small garbage receptacle as well.

Some of above will be a one-time expense, but some of the practices will add additional time and money to our practices. Be ready, be prepared, be SAFE.

### [PPE - Personal Protective Equipment Don/Doff](#)

There is a procedure for properly using PPE.

<https://www.cdc.gov/hai/pdfs/ppe/ppe-sequence.pdf>

### The Protocol breaks down, oh NO!!!

There will be so many situations that arise with running a business primarily devoted to humans. For example, you have greeted your client who just arrived in the waiting room, not sitting down. She is masked, you are masked. You welcome her into the

treatment room and proceed through the previous intake she completed online and you ask a few questions which are answered clearly and succinctly. No superfluous touching yet! You feel confident to proceed with the session. You exit the room closing the door completely behind you. A moment later, the client exits, half dressed, barefooted, moving quickly towards the restroom. Nearly every protocol has been compromised. What to do? You do your very best. First, you exhale. Then you wash and sanitize your hands, wait until she reenters the room. Pause, giving her another minute to get on the table and cover up. You take a sanitary wipe and you wipe all common surfaces - bathroom included - and the external door handle to your treatment room. Now you are clean as are the door handles - clean to clean. You enter the room. You have your gloves already laid out on your counter. You have your holster with lotion/cream/oil in place already, having previously cleaned and sanitized it for this session. You check that you have all the materials and product you will need for this session one more time. You glove. Don your protective clothing

[https://www.webstaurantstore.com/3323/restaurant-aprons.html?filter=type:disposable-aprons&gclid=CjwKCAjw4pT1BRBUEiwAm5QuR0kaC3AdESP9oF\\_BYyhFQ2gmkxu8JWfHP83VpwloSg7iOd7HCRjLzxoCUIEQAvD\\_BwE](https://www.webstaurantstore.com/3323/restaurant-aprons.html?filter=type:disposable-aprons&gclid=CjwKCAjw4pT1BRBUEiwAm5QuR0kaC3AdESP9oF_BYyhFQ2gmkxu8JWfHP83VpwloSg7iOd7HCRjLzxoCUIEQAvD_BwE)

You begin your session. Everything proceeds accordingly. Whew! Session done, no (more) surprises.

There will be other situations. Each time, you will EXHALE, PAUSE, PROCEED to put the protocols in play again. This is the very best that we can do. Ours is a sometimes messy business. We already know how to make it less messy, but now it will be SANITIZED...or mostly so.

### Accepting Payment:

So what forms of payment do you receive. How involved does the client have to be? Can this be minimized? Eliminated? Will you accept cash? Will you limit it to online, electronic payment only? Will you send out billing statements?

The answers to these questions will depend upon several factors:

Can you keep the hands free to a minimum? Can you keep the receptacle for accepting credit cards and Gift cards clean, sanitized? Do you use your smart phone to complete the transaction. How clean is it? Only you can answer these questions. Again, ask yourself, how can I lessen contact and minimize steps?

### Recommendations:

Best practice suggests eliminating as many “Touch” steps as possible. If you use an electronic payment service such as PayPal, Square or your Business Banking Service check with your representative to see if you can process without client signatures, such as a signature on file procedure.

See if you can add a **PAY NOW** button to your website or a direct pay through PayPal or Venmo. Do you have regular clients you can invoice and they can pay direct deposit into your account or use electronic banking?

### Scheduling Clients and Ourselves - Re-entry and Beyond

Many of us were very used to back to back sessions with little down time between clients. For the safety and cleanliness practices to be effective we will need a bit more time.

### Intake Forms, Informed Consent, Practice Policies

Do you have a full Intake Form that requires informed consent? Is it paper? Electronic? How do we minimize touch contact? This does seem quite ironic since these clients are seeing us for the purpose of touch therapy!

Now is the time to see if you are gaining the knowledge necessary to keep your client safe and yourself safe. How do we get the client to come clean about their recent health and concerns when in the past they were less than forthcoming? If you are unable to gather this information prior to the session, you may need to get this from the client at the time of session. Checking in with each client with the appropriate Q & A will be vital to meeting safety measures.

Each practitioner should have a [Practice Policies](#) detailing expectations. If you do not have one, create one. This practice policies has kept my business flowing smoothly for years. I have only charged one client for last minute cancellation, and only because she repeatedly postponed our sessions with less than an hours notice. I hold a strong policy on showing up to appointments presenting with apparent symptoms of cold/flu. There was a time where I believed a young woman (allergies the 2nd week of December during prolonged rain). I knew I compromised my policy when I did not send her home. This was my responsibility especially as I serve many clients who are immunocompromised. Three days later I was ill and my practice shuttered for a week. So I have each client at the time of first session sign duplicates. Is this going to work under the new CV-!9 distancing and low touch guidelines? This is another practice I will need to re-address during this time before I re-open How can I make this an Electronic Version and receive notification that they have read and signed? The paper copy process allowed for confirmation that the policies had been read and understood and we each had a copy for our records. This simple practice helped to prevent many hard and potentially difficult conversations over the years. And it gives everyone a full understanding of what is important for a wonderful session to take place.

Also, how to incorporate the CV-!9 protocols and questions? These questions and a brief recent history will need to be completed prior to the client arriving at the session so that you can have the details to prepare for the session accurately and appropriately. Right? Certainly.

So what happens when the client arrives showing signs of cold/flu or looks feverish, seems quite sluggish, maybe fatigued and says, "I just really need this massage, it's been months. I know I will feel and be my old self when the session ends." There are many suggestions put forth, but the most pertinent questions recommended (all the Guides, Checklists and governmental concerns) and ask repeatedly are:

Have you been around anyone who has been tested for CV-19, or has been diagnosed with a respiratory illness in the past 2 weeks?

Have you been to visit a friend or family member at a rehabilitation center, senior living center, or hospital?

How long have you been feeling like this? When was the last time you took your temperature? Have you kept a log? What other symptoms have you experienced? Appetite? Any special cravings? A negative response may indicate that they have lost their sense of smell and taste.

Has anyone you live with been exposed to anyone with CV-!9? Has everyone maintained the recommended social distancing guidelines?

What to do when you suspect that the answers have been less than forthcoming? Do you refuse to see this client?

Recommendation:

“It is so good to hear from you/see you! But I am concerned that you are showing symptoms that may be illness related. I recommend a Virtual Evaluation from your Primary Care Physician. Have her/him send me a note of clearance, once I receive that note we can have a session and we both will be secure in the knowledge and the session will benefit you and your body so much more!”

This approach or one of a similar nature will offer the opportunity for the client to take the high road and to keep their dignity intact and for the safety protocols to be secured.

### The Thermometer?

There have been many articles and recommendations put forth regarding the use of thermometers that it would be impossible to site all of them adequately. Equally important for Massage Therapists who are licensed by a regulatory board or certifying body in their state, which would classify the use of a thermometer as a “medical tool/device” and its resulting assessment as a “diagnosis.”

Amongst the many Guides, Checklists, websites and embedded articles I was able to discern a few things: firstly, when a recommendation such as this is made by governing agencies and boards for “regular”workers to perform in order to maintain public safety, this guideline supersedes any previous designated restriction. Secondly, what is the availability of touch-free thermometers? Thirdly, are they reliable and effective? Lastly is it a good tool for assisting us with making a viable assessment for the client?

So what have I discovered?

First, if you make the decision to employ this measurement, you will more than likely not be challenged by your Licensing or Certifying Board.

Second, there appears to be a fairly good supply of the Infrared No Touch Thermometers. They range in price from \$19.99 - 100.00 (<https://www.amazon.com/Best-Sellers-Industrial-Scientific-Infrared-Thermometers/zgbs/industrial/9931459011>)

Third, there is a meta-analysis that demonstrates these thermometers are effective 95-98% of the time, however, the accuracy of the read depends upon understanding

people have a normal body temperature range. <https://health.clevelandclinic.org/body-temperature-what-is-and-isnt-normal/>

Lastly, I have chosen to wait make a final decision about this item and utilizing this procedure. I will make my decision closer to the time of re-opening my practice. This will be a practice or procedure you may want to discuss with your colleagues and fellow practitioners that you work with at your space or facility.

As many who know me and my practice well, know I am not an advocate for Massage Therapists need to get permission from a Medical Doctor to perform massage. My practice has taught me many things over the years, mostly that many doctors expect us to be the experts at what we do. However, this CV-19 respiratory illness, its sensitivity, its insidiousness and lack of discriminatory boundaries, causes a reason to pause and refer out. Requesting a clearance from the doctor is not the same as requesting permission. The sole purpose of incorporating these new protocols into our practices is to keep the clients/patients and the practitioners SAFE. The earlier we begin to compromise on these protocols and practices the less safety is in place and the more likely someone will be harmed.

### Scheduling Clients, Taking a Few Breaths

And equally important is how we now schedule the client sessions and the extended time between sessions to fulfill the new protocols.

To maintain the social distancing guidelines, it may be necessary to stagger appointment times between practitioners who share smaller more common spaces outside of their treatment rooms. Do you have the space to keep a 6 foot distance? Not certain? Get out your tape measure. Don't just look, measure and be sure. Meet with your colleagues, work out days and times that are beneficial and fruitful, safe and secure for everyone.

When we do think of scheduling clients many of us rarely think of scheduling time for ourselves. In order to keep our practices on the road "to return to normal and thrive" we will need to imbed self-care into our day. This time also gives us an opportunity to EXHALE! To approach the expanded cleaning and sanitary protocols as a form of self-care may give us the space to more easily allow adequate time to change linens, clean and re-drape the table, clean all common surfaces and product containers we used. This gives us time to take a few breaths, complete a few all-over body stretches, make a few client notes and even set a time to have a small meal. This imbedding of breathing deeply as we work, as we stretch and as we reflect and make notes of the session helps ensure a greater ease into our next session. When we incorporate small

actions and practices like this throughout our day, we are better able to stay in health and to manifest a more successful re-entry.

This is also great time to explore the many scheduling apps available, if you do not use one presently. With a scheduler you can actually set small incremental appointments with yourself throughout the day in order to keep yourself on track until these new practices become automatic and a natural part of your day. Still use a Date Book or Appointment Book? I use both a scheduler and a date book.

### Waiting Rooms - Guidelines

This has become a serious discussion point. As many have witnessed via news reports, in states where Professional person-to-person services have re-opened, there are often very unwelcoming signs and very serious access limitations. Let's learn together from this experience. There are ways to communicate and limit access while being kind, yet firm. Keep your outer door locked. Meet your client at the door. Ask clients not to touch the handles. No longer allowing people to arrive more than 2-3 minutes early for their session. Social distancing applies here, too.

Clients will be required to wear masks while in the wait areas. Masks may also be necessary for the client during the session as well. This will depend upon the number of sessions booked with the amount of time between each session in order to adequately sanitize and clean the shared areas.

If there is a delay, be prepared to ask clients to wait in their vehicle if possible. Be mindful of extending sessions. Keep them timely.

Remove all old magazines and reading materials. Keep chairs six feet apart. Most importantly, be kind, do your best to be relaxed.

We are often a significant source for stress reduction and energetic body balance for so many clients. We all know how to do this well. I believe very strongly we will be able to incorporate these new standards and protocols with care and kindness. This is our opportunity to demonstrate and rebuild trust. It will be integral to moving forward and keeping our practice open once re-entry is established.

### Liability Insurance

There have been many questions about coverage under our Liability Insurance while working during this pandemic. Calls to carriers and insurance companies have resulted in conflicting commentary, even in writing. I contacted the Professional Liability Underwriting Society (PLUS) and advised that under the present conditions (pandemic) if the professional is working under an order or directive by a governmental body there should be no exceptions to the written agreement (policy). For example, presently the governor of Oregon is issuing orders lifting restrictions for some hospitals and Medical practitioners, even Dentists. As such an order exists that permits Chiropractors to re-open their clinics and to have their Massage Therapists on a lessened and staggered schedule with additional recommendations and guidelines for social distancing protocols in place. If you were to re-open prior to the previous order closing our practices is rescinded or another order superseding is issued, only then could your liability coverage be questioned.

In Closing, although I have engaged in this exercise and experiment and I learned a great deal and spent even more money, I must let you know that I have not yet received any of the supplies, except the HEPA Air Purifier.

My motivation was to be as prepared as I could be for myself, my clients, colleagues and family members. Yet I was motivated by something even more important to me and for someone else. I have a colleague, (also a former student), who has been asked to return to work at a clinic that is not of an urgent care nature. Two weeks ago when this occurred, there was no indication we would be given the go-ahead to re-open our services for the public in the near term. I felt it was my responsibility and that I had a strong obligation to support a fellow practitioner who I cared about professionally and as a friend. Regardless of my professional opinion on the matter, I saw this as an important exercise to determine 3 things:

1. Would the protocols in play be enough to minimize sufficiently the contagion risks to clients, practitioners and colleagues to safely deliver massage in our treatment rooms client to client, session to session, every day that we will be working?
2. If so, could we get the supplies we needed and sustain a supply at a reasonable cost?
3. Would our impact on the supply chain for these materials increase the burden on emergent and urgent medical services needed for addressing those diagnosed with this illness, as well as, again, compromising the medical care for other serious illness and conditions where delaying their care would cause additional pain and suffering?

It is more important for us to be prepared sufficiently and with an adequate supply rather than to rush to re-open our doors. There is a current push for us to open sooner than it is safe; when the state of Oregon is still seeing 56 new diagnosis a day and deaths are still occurring. We are a group of practitioners who understand so much more than our governmental leaders, licensing board directors, and in some cases, fellow practitioners, that the work we do is one which people will be at risk. I am gravely concerned that, although the supply chain is increasing in materials and supplies in the near term, if we are all allowed to re-enter the workforce and re-open our practices the supply chain will be challenged yet again as well. Disinfecting products and ingredients are not expected to be at normal supply chain levels until late July or August. What will happen to the core ingredients for making our own hand sanitizer?

People are anxious and concerned; many are fearful. The fewer protocols that are in place, the less likely we will be to return to work, to engage in necessary and essential activities safely, without increasing risk.

During a discussion I had with a fellow colleague, I shared that I truly believe I can fill my practice with a dozen clients next week in a matter of an hour or so. Like many of you, my clients are loyal. They are loyal for a reason: they TRUST me. If I called them today and shared with them a list of everything I have put in place to keep them safe, they would show up for the appointments, with, maybe a question or two. But, ultimately, they trust ME. Right now that trust is an enormous responsibility with huge implications for just one failure. If testing and contact tracing were in effect today, and just one of my clients contracted CV-19 and it came back to our facility on a day that I was present and working, I would be devastated. I would also guess that my practice would be shut down again. And those of my colleagues who work in the same facility.

We must be advocates of specifically defined guidelines for professional person-to-person service practice and the safety protocols to match. We are not dentists and we are not MD's specializing in orthopedics, oncology, neurology, mental health crises management nor severe pain disorders.

Although I have taken the charts, checklists and guides to task as an exercise in fulfillment probability, please do not mistake this for an endorsement to re-open general massage practices sooner than the current level of CV-19 case diagnosis demonstrates.

Let's examine, assess, make changes, implement the protocols for safety for the clients, the patients, the practitioners and our families and friends.

Let's remember to

Do No Harm ~ Keep the Sacred Space SAFE ~ Develop Trust Honorably

And do this in a systematic, deliberate manner that allows for the curve to continue its descent, without risking more lives in the process.

~In service to all

*geri*

~May all beings everywhere be happy and free

RESOURCES:

How We ReOpen (Bipartisan & Professional Collaboration)

<https://ethics.harvard.edu/covid-roadmap>

[https://www.youtube.com/results?search\\_query=%23HowWeReopen](https://www.youtube.com/results?search_query=%23HowWeReopen)

[www.drbronnens.com](http://www.drbronnens.com)

PPE Use and Removal

<https://www.cdc.gov/hai/pdfs/ppe/ppe-sequence.pdf>

<https://www.webstaurantstore.com/3323/restaurant-aprons.html?>

[filter=type:disposable-](https://www.webstaurantstore.com/3323/restaurant-aprons.html?filter=type:disposable-)

[aprons&gclid=CjwKCAjw4pT1BRBUEiwAm5QuR0kaC3AdESP9oF\\_BYyhFQ2gmkxu8JWfHP83VpwIoSg7iOd7HCRjLzxoCUIEQAvD\\_BwE](https://www.webstaurantstore.com/3323/restaurant-aprons.html?filter=type:disposable-aprons&gclid=CjwKCAjw4pT1BRBUEiwAm5QuR0kaC3AdESP9oF_BYyhFQ2gmkxu8JWfHP83VpwIoSg7iOd7HCRjLzxoCUIEQAvD_BwE)

Ramona Turner MT

<https://medium.com/@3dhealingarts/no-longer-business-as-usual-22c97c6d4c2f>

FAR UVC Lights

[https://www.topuvlight.com/topuvlight.php?sub1=topuv&gclid=Cj0KCOjws\\_r0BRCwARIsAMxfDRiOrsxpRwCnBazWTKavh9UkBeuOWJDZGcQKQLe1UlyQwV9GIIYHiO0aAgrMEALw\\_wcB](https://www.topuvlight.com/topuvlight.php?sub1=topuv&gclid=Cj0KCOjws_r0BRCwARIsAMxfDRiOrsxpRwCnBazWTKavh9UkBeuOWJDZGcQKQLe1UlyQwV9GIIYHiO0aAgrMEALw_wcB)

### Air Purifiers

<https://thewirecutter.com/reviews/best-air-purifier/>

### Thermometers

<https://www.amazon.com/Best-Sellers-Industrial-Scientific-Infrared-Thermometers/zgbs/industrial/9931459011>

<https://health.clevelandclinic.org/body-temperature-what-is-and-isnt-normal/>

### AMTA

<https://www.amtamassage.org/about/news/covid-19-resources-for-massage-therapists/>

### ABMP

<https://www.abmp.com/covid-updates>

### CDC

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cleaning-disinfection.html>

<https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility-H.pdf>

### OSHA

<https://osha.oregon.gov/Pages/re/covid-19.aspx#scope>

<https://www.osha.gov/Publications/OSHA3990.pdf?fbclid=IwAR0EtkTzTMwbTBCL1NsotNYj-10Yw4Z3SoJfAJXnYJVsv-AJtDHWvxUEw>

### EPA

[https://www.epa.gov/sites/production/files/2020-03/documents/sars-cov-2-list\\_03-03-2020.pdf](https://www.epa.gov/sites/production/files/2020-03/documents/sars-cov-2-list_03-03-2020.pdf)

### Liability Insurance

AMTA

[https://www.amtamassage.org/benefits/index.html?  
gclid=CjwKCAjw1v\\_OBRAkEiwALFkj5uGN7cC7jb9TEkKdiETJxpJGGOOctBB0uThn3aoBz0hjsSrrl-s22hoC3SYQAvD\\_BwE#benefit-36](https://www.amtamassage.org/benefits/index.html?gclid=CjwKCAjw1v_OBRAkEiwALFkj5uGN7cC7jb9TEkKdiETJxpJGGOOctBB0uThn3aoBz0hjsSrrl-s22hoC3SYQAvD_BwE#benefit-36)

ABMP

<https://www.abmp.com/massage-liability-insurance>

NACAMS

<https://nacams.org/massage-therapists/>

**GENTLE GUIDANCE**

[https://www.facebook.com/photo.php?  
fbid=10222911072462312&set=a.1771383201365&type=3&theater](https://www.facebook.com/photo.php?fbid=10222911072462312&set=a.1771383201365&type=3&theater)

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### **Massage Policies**

Massage therapy is a safe, excellent and ideal method to relax, restore and rejuvenate your sense of well being. Please be advised Licensed Massage therapists do not and cannot diagnosis illness, disease, or any other medical, physical or emotional disorder. In addition, spinal manipulations are not a part of my scope of practice, hence are prohibited. .

Please Note: Currently, I do not accept Insurance nor do I bill Insurance Companies for the purposes of Standard Massage Therapy. ( ) *initial*

To better ensure a successful massage therapy session please do:

**COME PREPARED:** Fees are due and payable upon completion of the session:  
Personal Checks and Major Credit Cards accepted. *Oh, Cash, too, if you like.*

**BE PRESENT:** No cell or smartphones (or facsimiles thereof).

*This is your time to de-stress and be restored to a better side of yourself.*

**ILLNESS** (Flu, cold, undiagnosed skin condition)

Do the following: Call (me): 503.781.9635 to CANCEL *Please stay home*

**LATE:** Come to the session anyway – a shortened session is always better than not having a massage therapy session at all. If time allows, a full session could still be negotiated.

**CONFLICT: need to CANCEL?** **24 HOUR Cancellation Notice Please**  
*This allows me the opportunity to extend this now available timeslot to another client.*

**GRACE** is always extended in the event of sudden illness (cold, flu, and the like) or emergent situations.

**6606 SW Capital Highway ~ Portland, Oregon ~ 97239**