

COVID-19 Return to Play Protocol

COVID-19 Myocarditis Risk:

- COVID-19 is a novel virus that affects the respiratory system and may also affect the heart in some individuals.
- Adults and individuals with a more severe COVID-19 illness seem to be more likely to have heart involvement such as inflammation of the heart muscle; this is termed myocarditis.
- Inflammation of the heart, such as in myocarditis, may lead to poor heart function and even sudden cardiac arrest with physical activity.
- Myocarditis is one of the leading causes of sudden cardiac arrest in athletes competing in the United States.
- The heart inflammation may remain undetected even months after the COVID-19 illness.
- Anyone who has had COVID-19 is encouraged to talk with their primary care provider before resuming competitive athletics.
- Those patients who had a more severe illness from COVID-19 may benefit from an in-person visit with their primary care provider and possibly a pediatric cardiologist to identify any signs of heart inflammation before resuming competitive athletics.
- For anyone resuming athletics who has previously had COVID-19 in the last 3 months, a gradual return to play is advised to identify any concerning signs or symptoms.

If an athlete, 12 years of age or older has tested positive for COVID-19 in the last 90 days, he/she must be cleared for progression back to activity by an approved health care provider (MD/DO/PA-C/ARNP/CHA/Ps).

Athlete's Name: _____ **DOB:** _____

Date of Positive COVID-19 Test or when Presumed Positive: _____

Date of Evaluation: _____ (THIS RETURN TO PLAY IS BASED ON TODAY'S EVALUATION)

Criteria to start Return to Play/resume activities progression (Please check below as applies)

- Athlete has had at least 10 days without symptoms since symptom onset or positive test if remained asymptomatic
- Athlete was not hospitalized due to COVID-19 infection
- Cardiac screen negative for signs of myocarditis/myocardial ischemia (all answers must be no)
 - Chest pain/tightness with daily activities YES NO
 - Unexplained Syncope/near syncope/fainting YES NO
 - Unexplained/excessive difficulty breathing/fatigue w/ daily activities YES NO
 - New heart palpitations YES NO
 - New Heart murmur on exam YES NO

NOTE: If any cardiac screening question is positive, athlete was hospitalized or diagnosed with multisystem inflammatory syndrome in children (MIS-C), or had fever ≥ 100.4 for > 48 hours, he/she should get ECG at minimum and consider pediatric cardiology referral based on return to play after COVID-19 infection in pediatric patients algorithm referenced at <https://asaa.org/resources/sports-medicine>.

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- Athlete **HAS** satisfied the above criteria and **IS** cleared to start the return to play (RTP) clearance on date _____.
 - Athlete **HAS NOT** satisfied the above criteria and **IS NOT** cleared to return to activity.
 - Athlete will return on _____ for further evaluation.
 - Athlete has been referred to pediatric cardiology.

Evaluator's Name: _____ **Title:** _____ **Phone:** _____

Evaluator's Signature: _____ **Date:** _____

Athlete COVID-19 Return to Play (RTP) Clearance

Return to Play (RTP) Procedures After COVID-19 Infection Athletes must complete the progression below without development of: chest pain, chest tightness, palpitations, lightheadedness, pre-syncope or syncope, difficulty breathing, excessive fatigue with exercise. If these symptoms develop, patient should be referred back to the evaluating provider who signed the form. If mild fatigue develops, they should repeat the previous day and if remain asymptomatic, they can continue to go through the stages.

Athlete's Name: _____

DOB: _____

Stage	Day	Activity	Date	Supervisor's initials
Stage 1	Day 1 and 2	(2 Days Minimum) Light Activity (Walking, Jogging, Stationary Bike) for 15 minutes or less. NO resistance training.		
Stage 2	Day 3	(1 Day Minimum) Add simple movement activities (EG. running drills) for 30 minutes or less.		
Stage 3	Day 4	(1 Day Minimum) Progress to more complex training for 45 minutes or less. May add light resistance training.		
Stage 4	Day 5 and 6	(2 Days Minimum) Normal Training Activity for 60 minutes or less.		
Stage 5	Day 7	Return to fully activity/participation (I.E.-Contests/Competitions)		

RTP Procedure adapted from Elliott N, et al. Infographic. British Journal of Sports Medicine, 2020

Athlete cleared on _____ for Full Activity/Participation by School Personnel/Provider (Based on RTP Stages)
Date

RTP Evaluator's Name: _____ **Phone:** _____

RTP Evaluator's Signature _____ **Date:** _____