

South Windsor Public Schools
Return to Play Protocols after COVID-19 Infection
Fall 2022 Season

The CIAC recommends that student-athletes who have tested positive for COVID-19 follow return-to-play guidelines established by medical professionals. Currently, the CIAC recognizes the joint guidance issued by the American Medical Society for Sports Medicine (AMSSM) and the National Federation of High Schools (NFHS) and the guidance issued by the American Academy of Pediatrics (AAP) as medically reviewed and established guidelines.

In consideration of recent studies, the AMSSM and NFHS expert task force updated cardiac assessment and return-to-play guidelines for high school student-athletes with prior SARS-CoV-2 infection. Compared to AAP guidance, which is broad guidance encompassing all pediatric age groups, the AMSSM and NFHS expert task force explicitly focused on the student-athlete demographic who engage in interscholastic competition. Therefore, the AMSSM and NFHS task force guidance directly applies and appertains to the CIAC's student-athlete population.

Cardiopulmonary symptoms on return to exercise: All athletes with SARS-CoV-2 infections should be closely monitored for new cardiopulmonary symptoms as they return to exercise. In general, athletes should feel well as they return to any level of training and exercise. Athletes with cardiopulmonary symptoms when they return to exercise (e.g., exertional chest pain, excessive dyspnea, syncope, palpitations, or unexplained exercise intolerance) should undergo additional cardiac testing (e.g., ECG, TTE, troponin) if not already performed and be evaluated by a cardiologist with consideration for a cardiac MRI or other investigations as indicated.

Return-to-sport exercise progression: The return-to-sport progression and timeline should be individualized and is based on numerous factors including baseline fitness, severity and duration of COVID-19 symptoms, and tolerance to progressive levels of exertion. Most athletes will require a graded exercise progression. Athletes with systemic symptoms or illnesses of longer duration will require a more gradual exercise progression over at least a few days. Absent special indications, a prolonged return-to-sport timeline is not supported by evidence and further restriction from sports participation can contribute to detraining, increased injury risk, and mental health concerns.

The AMSSM and NFHS recommends a tiered approach for return to play depending on the COVID-19 symptoms experienced by the student athlete.

Instructions for completing form(s):

Parents/Guardians of student athletes who have tested positive for COVID-19 must complete the following form(s) and provide it to the school's athletic trainer once the student athlete has completed their quarantine period.

These protocols are subject to change based on updated guidelines and/or recommendations from Public Health Department

**South Windsor Public Schools
Return to Play Protocols after COVID-19 Infection
Fall 2022 Season**

Students Name: _____ **Grade:** _____

Parent/Guardian's Name _____

Parents/guardian must identify the level of student athlete's symptoms (please choose one):

_____ **Asymptomatic and mild symptoms (*no doctor examination required*):** Athletes with asymptomatic infections or only mild symptoms (e.g., common cold-like symptoms generally without fever, gastrointestinal symptoms, or loss of taste/smell) do not require formal medical evaluation or cardiac testing. However, athletes with any specific concerns should check-in with a clinician (e.g., physician, nurse practitioner, physician assistant, or athletic trainer) to determine if further clinical evaluation is needed. Athletes must be 5 days from symptom onset or positive test before beginning an exercise progression (while complying with public health guidelines for isolation/guidelines).

_____ **Moderate and cardiopulmonary symptoms (*medial examination required*):** Athletes with moderate symptoms (e.g., fever > 100.4°F, chills, flu-like syndrome for 2:2 days) or initial cardiopulmonary symptoms (e.g., chest pain, dyspnea, palpitations) must be evaluated by a medical professional. Cardiac testing (e.g., ECG, TTE, troponin) is recommended for athletes with cardiopulmonary symptoms during the acute phase of infection. Athletes with remote infections and moderate symptoms > 3 months ago who never received a work-up but have returned to full activity without symptoms do not need a medical evaluation or additional cardiac testing. Cardiology consultation and cardiac MRI should be considered for abnormal results and as clinically indicated. Athletes must be 5 days from symptom onset and that moderate symptoms are fully resolved before starting an exercise progression.

_____ **Severe symptoms (*medical examination required*):** Athletes with severe disease requiring hospitalization, including those diagnosed with multisystem inflammatory syndrome in children (MIS-C), must undergo formal evaluation with a medical professional prior to starting an exercise progression.

Parent/Guardian Attestation

I attest that the information above is an accurate representation of my child's COVID-19 symptoms.

Parent/Guardian Signature: _____ **Date:** _____

Student athletes with moderate or severe symptoms must be examined by a physician to complete the Health Care Provider Authorization Form on the following page

South Windsor Public Schools
Return to Play Protocols after COVID-19 Infection
Fall 2022 Season

Health Care Provider Authorization Form

(to be completed if student athlete had moderate or severe COVID-19 symptoms)

Based upon the assessment completed on ___/___/___, _____,
(student's first & last name)

___/___/___ is medically cleared to return to physical activity as determined below:
(date of birth)

Physician must check one (1) box below, otherwise, the student athlete will be required to complete all stages of the AAP Gradual Return-to-Play (RTP) Plan:

Athlete is cleared to enter AAP RTP protocol, starting at (check one):

- Stage 1 (days 1 & 2) 15 minutes or less: Light activity (walking, jogging, stationary bike), intensity no greater than 70% of maximum heart rate. NO resistance training.
- Stage 2 – (day 3) 30 minutes or less: Add simple movement activities (e.g. running drills) - intensity no greater than 80% of maximum heart rate.
- Stage 3 (day 4) 45 minutes or less: Progress to more complex training - intensity no greater than 80% maximum heart rate. May add light resistance training.
- Stage 4 (day 5) 60 minutes: Normal training activity - intensity no greater than 80% maximum heart rate.
- Stage 4 (day 6) 60 minutes: Normal training activity - intensity no greater than 80% maximum heart rate.

Health Care Provider Name (printed)

Signature

Date

Parent/Legal Guardian Attestation

I attest that _____ has been evaluated by an
(student's first & last name)

authorized medical provider and give my consent for his/her participation in a phased approach to in their return to the sports program at _____ .

(parent/guardian name, printed)

(parent/guardian signature)

(date)