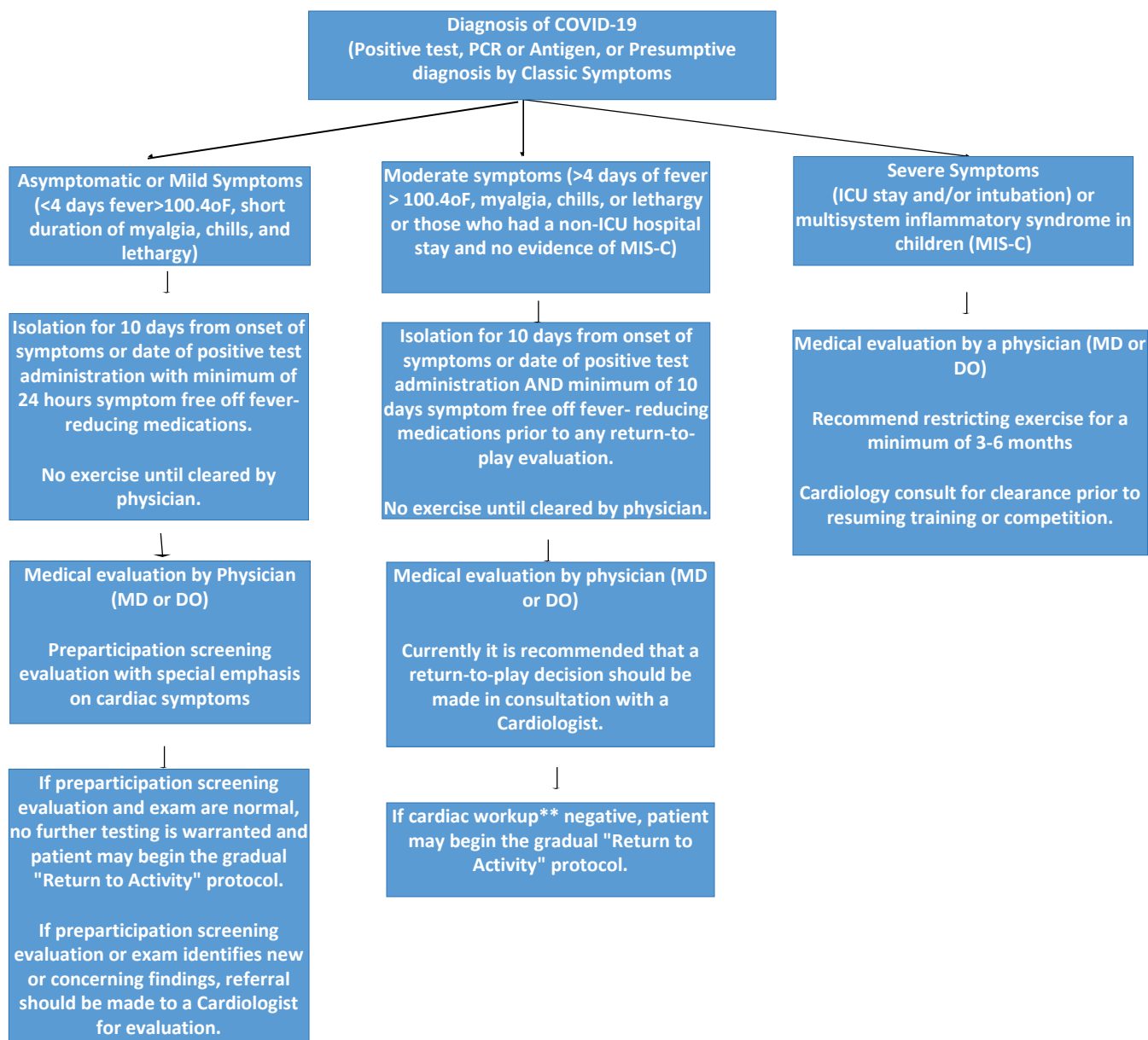


KMA Committee on Sports Medicine COVID-19 Medical Evaluation and Return-to-Activity Guidance for Middle and High School Student-Athletes



- 1) Drezner J.A., et al. (2020). Cardiopulmonary Considerations for High School Student-Athletes During the COVID-19 Pandemic: NFHS-AMSSM Guidance Statement." *Sports Health Available Free Online at <https://journals.sagepub.com/doi/full/10.1177/1941738120941490>. (Updated August 2020)*
- 2) Cardiac Considerations for Student-Athletes during the COVID-19 Pandemic Available Free Online at https://www.amssm.org/Content/pdf_files/COVID19/NCAA-COVID-19-Algorithm-12-AUG-2020.pdf

* based on the COVID-19 Interim Guidance:Return to Sports from the American Academy of Pediatrics, 12/4/2020

** Cardiac workup may include: ECG, hs-Troponin, Echocardiogram, Holter monitor, exercise stress testing or cardiac MRI

**KMA Committee on Sports Medicine:
Return to Activity (RTA) Protocol After COVID-19 Infection**

Any return to play should be preceded by a gradual and progressive return to physical exertion. Athletes should complete the progression below without the development of cardiopulmonary symptoms (chest pain, chest tightness, palpitations, shortness of breath, excessive fatigue, lightheadedness, pre-syncope, or syncope).

Monitor the student-athlete closely for the development of any symptoms during this active progression. If any symptoms develop, the athlete should stop exertion immediately and be referred back to the evaluating physician for consideration of additional evaluation, including cardiology consultation, before resuming activity.

- **Stage 1: (2-Days Minimum)** Light Activity (Walking, Jogging, Stationary Bike) for 15 minutes or less at intensity no greater than 70% of maximum heart rate. NO resistance training.
- **Stage 2: (1-day minimum)** Add simple movement activities (EG. running drills) for 30 minutes or less at intensity no greater than 80% of maximum heart rate.
- **Stage 3: (1-day minimum)** Progress to more complex training for 45 minutes or less at intensity no greater than 80% maximum heart rate. May add light resistance training.
- **Stage 4: (2-days minimum)** Normal Training Activity for 60 minutes or less at intensity no greater than 80% maximum heart rate.
- **Stage 5: Return to full activity**

**RTA Protocol adapted from Elliott N, et al. Infographic. British Journal of Sports Medicine, 2020.*

Disclaimer: This document is provided for physicians who may evaluate and treat student-athletes diagnosed with COVID-19 infection. The information contained herein is based on the compilation and summary of expert recommendations of national and international sports medicine organizations.

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KHSAA COVID-19 Return to Play Form

(as recommended by KMA Committee on Medical Aspects of Sports for use by MD or DO)

If an athlete has tested positive or was presumed positive for COVID-19 based on symptoms, he/she should rest from physical activity for at least ten days from the time of onset of symptoms or date of administration of a positive test. He/she must then be cleared for progression back to activity by an approved health care provider (MD/DO). Any return to activity should follow the recommended Return to Play (RTP) Progression described below.

Athlete's Name: _____ DOB: _____ Date of Positive COVID-19 Test: _____

THIS RETURN TO PLAY IS TO BE BASED ON TODAY'S EVALUATION

Date of Evaluation: _____

Criteria to return to be completed by MD or DO. (Please check below as applies)

- 10 days have passed since the onset of symptoms (or positive test)
- All symptoms (cough, shortness of breath, fever (≥100.4F), etc.) have resolved for at least 24 hours for mild cases or 10 days for moderate cases without use of fever reducing medication AND
- The athlete was not hospitalized due to the COVID-19 infection.
- PLUS Cardiac screen negative for myocarditis/myocardial ischemia (All answers below must be NO)

Chest pain/tightness with exercise	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Unexplained Syncope/near syncope	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Unexplained/excessive dyspnea/fatigue w/exertion	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
New palpitations	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Heart murmur on exam	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>

NOTE: If any cardiac screening question is positive OR if athlete had greater than mild symptoms (>4 days of fever ≥100.4oF, myalgia, chills, or lethargy OR those who had a hospital admission OR evidence of MIS-C) during the illness, current recommendations are that a return-to-play decision be made in consultation with a cardiologist. See algorithm for more information.

- The athlete HAS satisfied the above criteria and IS cleared to start the return to activity procedures (RTP).
- The athlete HAS NOT satisfied the above criteria and IS NOT cleared to return to activity

Medical Office Information (Please Print/Stamp):

Evaluator's Name: _____

Evaluator's Address: _____

Office Phone: _____

Evaluator's Signature: _____

Step-wise Return to Play Protocol After COVID-19 Infection (REQUIRED)

Athletes must complete the progression below without developing chest pain, chest tightness, palpitations, lightheadedness, pre-syncope, or syncope. If these symptoms develop, the patient should be referred back to the evaluating provider who signed the form. This progression cannot begin before authorization.

- **Stage 1: (2 Days Minimum)** Light Activity (Walking, Jogging, Stationary Bike) for 15 minutes or less at intensity no greater than 70% of maximum heart rate. NO resistance training.
- **Stage 2: (1 Day Minimum)** Add simple movement activities (EG. running drills) for 30 minutes or less at intensity no greater than 80% of maximum heart rate.
- **Stage 3: (1 Day Minimum)** Progress to more complex training for 45 minutes or less at intensity no greater than 80% maximum heart rate. May add light resistance training.
- **Stage 4: (2 Days Minimum)** Normal Training Activity for 60 minutes or less at intensity no greater than 80% maximum heart rate.
- **Stage 5: Return to full activity**

Cleared for Full Participation by School Personnel (Minimum 7 days spent on RTP): _____

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

APPROVED BY KMA COMMITTEE ON MEDICAL ASPECTS OF SPORTS, 8/19/20, REVISED 10/20, 12/20, 1/21, 2/21, 3/21

KHSAA Sample Timeline Reviewed and Updated with any Amendments from recommendations of CDC, KDPH or the KMA Committee on Medical Aspects of Sports

ISOLATION PARAMETERS AND EXAMPLE (STUDENT-ATHLETE WITH A POSITIVE TEST) PER CENTER FOR DISEASE CONTROL (CDC) AND KENTUCKY DEPARTMENT FOR PUBLIC HEALTH (KDPH)

SYMPTOMS (UPDATED PER CDC, 2/22/21)

- People with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to the virus. People with these symptoms may have COVID-19: Fever or chills, Cough, Shortness of breath or difficulty breathing, Fatigue, Muscle or body aches, Headache, New loss of taste or smell, Sore throat, Congestion or runny nose, Nausea or vomiting, Diarrhea. This list does not include all possible symptoms. CDC will continue to update this list as we learn more about COVID-19.
- When to seek emergency medical attention: Look for emergency warning signs for COVID-19. If someone is showing any of these signs, seek emergency medical care immediately: Trouble breathing, Persistent pain or pressure in the chest, New confusion, Inability to wake or stay awake, Pale, gray, or blue-colored skin, lips, or nail beds, depending on skin tone. Call 911 or call ahead to your local emergency facility: Notify the operator that you are seeking care for someone who has or may have COVID-19.

*This list is not all possible symptoms. Please call your medical provider for any other symptoms that are severe or concerning to you.

TESTING PROTOCOL

- Anyone taking a test for COVID-19 should quarantine from the time of the test until results are known.

DAY 1

- For a student-athlete testing positive for COVID-19, Day 1 is the first day of showing symptoms if such student-athlete shows symptoms as listed above.
- For a student-athlete, whether or not showing any of the above symptoms but testing positive for the COVID-19, the day of testing is 'testing day', the next day is Day1.

ISOLATION PERIOD PER CDC AND KDPH (This period may not be shortened by any amount of testing (PCR or other), even if such test produces a negative result)

- The CDC standard isolation period is ten (10) days which may not be shortened by any amount of testing (PCR or other), even if such test produces a negative result.
- Day 1 of the ten (10) days is the first day of showing symptoms if such student-athlete shows symptoms as listed above, or the day following "testing day" for an asymptomatic student receiving positive test results..
- Per CDC, for most persons with COVID-19 illness, isolation and precautions can generally be discontinued ten (10) days after symptom onset and resolution of fever for at least 48 hours (without the use of fever-reducing medications) and with improvement of other symptoms.
- Per CDC, a limited number of persons with severe illness may produce replication-competent virus beyond ten (10) days that may warrant extending duration of isolation and precautions for up to 20 days after symptom onset; consider a consultation with infection control experts.

Step-wise Return to Play Protocol After COVID-19 Infection (REQUIRED AFTER ISOLATION PERIOD)

Athletes must complete the progression below without developing chest pain, chest tightness, palpitations, lightheadedness, pre-syncope, or syncope. If these symptoms develop, the patient should be referred back to the evaluating provider who signed the form. This progression cannot begin before authorization.

- **Stage 1: (2 Days Minimum)** Light Activity (Walking, Jogging, Stationary Bike) for 15 minutes or less at intensity no greater than 70% of maximum heart rate. NO resistance training.
- **Stage 2: (1 Day Minimum)** Add simple movement activities (EG. running drills) for 30 minutes or less at intensity no greater than 80% of maximum heart rate.
- **Stage 3: (1 Day Minimum)** Progress to more complex training for 45 minutes or less at intensity no greater than 80% maximum heart rate. May add light resistance training.
- **Stage 4: (2 Days Minimum)** Normal Training Activity for 60 minutes or less at intensity no greater than 80% maximum heart rate.
- **Stage 5: Return to full activity**

OPTIONAL INTERIM PERIOD(S)

- Based on symptoms and review by practitioners, additional days may be required as an extension of the isolation period or another period of time while further evaluation is completed prior to the Step-wise return to play.
- This interim period should be extended in the event that there has not been resolution of fever for at least 48 hours (without the use of fever-reducing medications) and there has not been improvement of other symptoms
- Practitioners may choose to use this period for additional analysis or diagnostic testing or supplemental rest for the student-athlete; however, the Return to Play protocol may not begin during this period.

References:

- <https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html>
- <https://www.cdc.gov/coronavirus/2019-ncov/hcp/duration-isolation.html>
- <https://bjsm.bmj.com/content/54/19/1174>
- <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>

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

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