Nantucket Public Schools  Whalers Athletic Training

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If a Student-Athlete has tested positive for Covid-19 he/she must be cleared for progression back to activity by an approved healthcare provider (MD, DO, NP, PA-C). The gradual return to play protocol can be started once the Student-Athlete has; had 5 days since the onset of symptoms or has been asymptomatic through 5 days of quarantine and is off all treatments.

Athlete Name:_____ DOB:_____ Date of Test:_____

THIS RETURN TO PLAY IS BASED ON TODAY'S EVALUATION

Today's Date:_____

Date of Symptom Onset:_____ if N/A, Quarantine Start Date:_____

Please check one;

- ❑ **Mild disease:** No cardiac symptoms*, no fever, and ≤5 days of any other symptoms (e.g., loss of smell).
- ❑ **Moderate disease:** Any cardiac symptom* or fever, chills, lethargy, or greater than 5 days of any symptom.
- ❑ **Severe disease:** Any abnormal cardiac test, hospitalization or multisystem inflammatory syndrome in children (MIS-C).

***Cardiac Symptoms Include:**

- Chest pain/tightness
- Shortness of breath
- Palpitations
- Dizziness
- Unexplained syncope/near syncope
- New heart murmur
- Unexplained/excessive dyspnea/fatigue
- Significant decrease in exercise tolerance

Recommendations:

- **If mild disease**, evaluation by PCP for any cardiac sign or symptom and if present consider ECG and/or Pediatric Cardiology consult.
- **If moderate disease**, an ECG is indicated (at minimum); consider further workup including echocardiogram and/or Pediatric Cardiology consult.
- **If severe disease**, the student should NOT return to play for 3-6 months and should be cleared by a Cardiologist.

These recommendations are based on pediatric cardiology consensus opinion and, in the absence of substantial evidence, should not replace clinical judgement.

Criteria to return (Please check below as applies)

- ❑ 5 days have passed since onset of symptoms OR has been asymptomatic throughout 5 days of quarantine
- ❑ Symptoms have resolved (No fever (≥100.4F) for 24 hours without fever reducing medication, improvement of symptoms (cough, shortness of breath, etc.)
- ❑ Athlete was not hospitalized due to COVID-19 infection.
- ❑ Cardiac screen negative for myocarditis/myocardial ischemia (All answers below must be no)

Chest Pain/Tightness with Exercise	YES ❑ NO ❑
Unexplained Syncope/Near Syncope/Dizziness	YES ❑ NO ❑
Unexplained/Excessive Dyspnea/Fatigue w/Exertion	YES ❑ NO ❑
New Palpitations	YES ❑ NO ❑
Heart Murmur on exam	YES ❑ NO ❑

NOTE: If any cardiac screening question is positive or if athlete was hospitalized, experiencing symptoms for more than 10 days, or have a pre-existing cardiac condition. Cardiology consultation could be necessary.

❑ Athlete **HAS** satisfied the above criteria and **IS** cleared to begin the Return to Sport progression.

❑ Athlete **HAS NOT** satisfied the above criteria and **IS NOT** cleared for activity

MEDICAL OFFICE INFORMATION (Please Print)

Evaluators Name:_____ **Phone:**_____

Evaluators Signature:_____ **Date:**_____

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. If these symptoms develop, patient should be referred back to the evaluating provider who signed the form. Monitor subjective symptoms, resting heart rate, RPE (rated perceived exertion), I-PRRS (psychological readiness to return to sport after injury/condition).

- **Stage 1 (during quarantine):** Activity at no intensity (walking, activities of daily living). Allow recovery time to protect the cardio-respiratory system.
  Notes:_____

- **Stage 2 (minimum 1 days):** Light Activity (Walking, Jogging, Stationary Bike) for 15-20 minutes or less at no greater than 70% of maximum heart rate. *NO resistance training*
  Notes:_____

- **Stage 3A (minimum 1 day):** Add simple movement activities (EG. running drills) for 30 minutes or less at intensity no greater than 80% of maximum heart rate
  Notes:_____

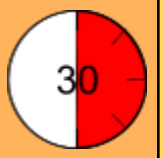
- **Stage 3B (minimum 1 day):** Progress to more complex training (skills/coordination/sport tactics) for 45 minutes or less at intensity no greater than 80% maximum heart rate. May add light resistance training.
  Notes:_____

- **Stage 4 (minimum 1 days):** Normal Training Activity for 60 minutes or less at intensity no greater than 80% maximum heart rate.
  Notes:_____

- **Stage 5 (earliest return- day 10 from initial onset):** Return to full activity
  Notes:_____

Cleared for Full Participation by Nantucket Public School's Athletic Trainer (Minimum 5 days spent on RTP):_____ Date:_____

Return to Play (RTP) Procedures After COVID-19 Infection Visual

	Stage 1 5 days min. (Quarantine)	Stage 2 1 days min	Stage 3A 1 day min	Stage 3B 1 day min	Stage 4 1 days min	Stage 5 Earliest- day 10	Stage 6
Activity description	Minimum-rest period	Light activity	Frequency of training increases	Duration of training increases	Intensity of training increases	Resume normal training progressions	RETURN TO COMPETITION In Sport Specific Timeline
Exercise allowed	Walking, Activities of daily living	Walking, light jogging, stationary cycling *No resistance training*	Simple movement activities (running drills)	Progression to more complex training activities	Normal training activities	Resume normal training progressions	
% Max heart rate	No increase in heart rate					Resume normal training progressions	
Duration	10 days (Quarantine)	 < 15 mins	 < 30 mins	 < 45 mins	 < 60 mins	Resume normal training progressions	
Objective	Allow recovery time. Protect cardio-respiratory system	Increase heart rate	Increase load gradually. Manage post viral fatigue symptoms	Exercise, coordination and skills/tactics	Restore confidence and assess functional skills	Resume normal training progressions	
Monitor	Subjective symptoms. Resting heart rate. I-PRRS	Subjective symptoms. Resting heart rate. I-PRRS	Subjective symptoms. Resting heart rate. I-PRRS	Subjective symptoms. Resting heart rate. I-PRRS	Subjective symptoms. Resting heart rate. I-PRRS	Subjective symptoms. Resting heart rate. I-PRRS	

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

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