

## COVID-19 Return to Activity Recommendations:

### Information for Athletes and Families

While the long-term health effects of COVID-19 are still unknown, there is emerging evidence that there is minimal risk to an athlete after COVID infection with 0.6% diagnosis of myocarditis or pericarditis after COVID infection.

There is also agreement for getting clearance by a medical provider for individuals with cardiorespiratory symptoms (chest pain, shortness of breath, palpitations) or severe symptoms that may include testing of the heart and lungs prior to starting a return to activity progression.

The following are recommendations for return to activity:

- **COVID-19 POSITIVE TEST, MILD or NO SYMPTOMS:**
  - **Mild symptoms are defined as:** Common cold like symptoms with no fever
    1. Clear isolation period as recommended by CDC and local guidelines.
    2. Recommended rest/no exercise for 3-5 days from positive test or symptom onset and have symptom improvement before returning to exercise.
    3. Gradual return to activity or sport while monitoring for any cardiorespiratory symptoms or new intolerance of exercise.

#### COVID-19 POSITIVE TEST WITH MODERATE SYMPTOMS:

- **Moderate symptoms include** fever  $>100.3^{\circ}\text{F}$ , chills, flu like syndrome for  $\geq 2$  days or initial cardiorespiratory symptoms (chest pain, shortness of breath, palpitations)

While experiencing symptoms:

1. Clear isolation period as recommended by CDC and local guidelines.
2. Follow up with physician if there are cardiorespiratory symptoms. This may include cardiac testing at the discretion of the provider.

After symptoms have resolved:

1. Receive clearance from medical provider if cardiorespiratory symptoms are present
- It is important for athletes to monitor fatigue levels and listen to their bodies when resuming activity. Though they may progress through the stages of their return to activity program without symptoms, they may still be deconditioned and need more time to get back to their prior level of performance.
  - Athletes and patients with cardiopulmonary symptoms when they return to exercise (exertional chest pain, excessive SOB, syncope, palpitations, or unexplained exercise intolerance) should be restricted from further exercise and evaluated by a physician and should consider undergoing cardiac triad testing (EKG, Troponin and ECHO) if not already performed.

- Cardiology consult or referral should be considered with any abnormal test results or concerning cardiovascular symptoms.

### **COVID-19 Return to Activity Guidelines**

It is important for all athletes to complete a gradual return to activity to ensure there are no ongoing symptoms, heart, or lung issues with activity.

- Asymptomatic athletes and patients should be a minimum of 3 days from their diagnosis (positive test) to allow monitoring for symptom development before a return to exercise.
- Athletes with mild symptoms should be a minimum of 3 days from symptom onset and have symptom improvement (except for loss of taste or smell) before a return to exercise.
- A slow progression back to normal activity is recommended, and each return is individualized.

- *Note: Progression is individualized and will be determined on a case-by-case basis. Factors that may affect the rate of progression include underlying health conditions, age of the athlete, and sport/activity in which the athlete participates.*