



Managing Return to Sports Evaluations in the Age of COVID-19

Recommendations from the pediatric specialists of Nemours Children's Health System in Florida
Nemours Children's Hospital | 6535 Nemours Parkway | Orlando, FL

As a result of the finding that COVID-19 can leave student athletes at an increased risk of myocarditis and other serious complications, Return to Sports evaluations have changed and are more important than ever before.



Athletes with no history of COVID-19 symptoms, no history of a positive COVID-19 test, no history of COVID-19 contacts, and no other medical conditions may be cleared to participate in sports, however daily temperature checks and symptom screenings are strongly recommended.



Athletes who have had significant exposure to COVID-19 positive contacts, a positive COVID-19 test (with or without symptoms) or who have underlying medical conditions that place them at a higher risk for COVID-19 complications should be evaluated according to the provided guidelines. **All patients require 2 weeks of athletic restriction following a positive COVID-19 test. Return to play should be granted only if the answer is "No" to all screening questions on accompanying sheet. If the answer is "Yes" to any question, patient should be restricted until asymptomatic for 14 days and if "Yes" to cardiopulmonary questions (items 9-12), patient should be referred for a pediatric cardiology consult with troponin, electrocardiogram and echocardiogram.**

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Nemours Children's Health System

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	Low Risk	Mild to Moderate Risk	High Risk
Patients	<p>Positive COVID-19 test and asymptomatic</p> <p>Positive COVID-19 test and no cardiopulmonary symptoms noted, including no:</p> <ul style="list-style-type: none"> • chest pain • shortness of breath • palpitations/tachycardia • dizziness/syncope <p>Either no COVID-19 testing or a negative COVID-19 test, but presumed COVID-19 infection due to family or close personal contact exposure or mild COVID-19-like symptoms <3 days</p>	<p>Positive COVID-19 test with positive cardiopulmonary symptoms, monitored at home</p> <p>Positive COVID-19 test and admitted for any non-cardiopulmonary symptoms</p>	<p>Positive COVID-19 test and admitted with cardiopulmonary symptoms and/or end-organ dysfunction especially:</p> <ul style="list-style-type: none"> • lung disease • myocarditis • pericarditis • coronary artery ectasia/aneurysm • thromboembolic disease <p>Positive COVID-19 test and high-risk underlying medical conditions, including: significant obesity, asthma, sickle cell trait, chronic kidney, liver disease, cardiac disease or immunocompromised</p>
Athletic Restrictions	No physical activity or competitive sports until asymptomatic for at least 14 days after a positive COVID-19 test	No physical activity or competitive sports until asymptomatic for at least 14 days after a positive COVID-19 test	No physical activity or competitive sports until asymptomatic with resolution of end-organ dysfunction and cleared by medical professionals (minimum of 14 days and up to 3 to 6 months if myocarditis)
Follow-up Required Prior to Returning to Play	<p>Evaluation by primary care provider 14 days after COVID-19 testing and ensure normal exam and no cardiopulmonary symptoms:</p> <ul style="list-style-type: none"> • chest pain • shortness of breath • palpitations/tachycardia • dizziness/syncope <p>If positive for cardiopulmonary symptoms, recommend evaluation by pediatric cardiologist – see mild to moderate risk category</p>	<p>Recommend evaluation by pediatric cardiologist 14 days after COVID-19 testing and consider the following testing:</p> <ol style="list-style-type: none"> 1. Assess for cardiopulmonary symptoms: <ul style="list-style-type: none"> • chest pain • shortness of breath • palpitations/tachycardia • dizziness/syncope 2. Non-invasive testing <ul style="list-style-type: none"> • troponin • electrocardiogram (EKG) • echocardiogram (ECHO) 	<p>Close outpatient management by primary care and necessary sub-specialists to ensure resolution of end-organ dysfunction:</p> <ol style="list-style-type: none"> 1. Assess for cardiopulmonary symptoms: <ul style="list-style-type: none"> • chest pain • shortness of breath • palpitations/tachycardia • dizziness/syncope 2. Non-invasive testing <ul style="list-style-type: none"> • troponin • electrocardiogram (EKG) • echocardiogram (ECHO) <p>If there is evidence of ongoing cardiopulmonary symptoms, additional testing may be required: stress test, chest X-ray, pulmonary function tests, cardiac MRI, CT scan or labs (troponin/D-dimer)</p>
Return to Play	If negative for cardiopulmonary symptoms for the past 14 days and has a normal physical exam, patient may return to physical activity and competitive sports with a slow resumption of activity	If negative for cardiopulmonary symptoms for the past 14 days with normal exam and negative non-invasive testing patient may return to physical activity and competitive sports with a slow resumption of activity	Return to physical activity and competitive sports when patient is asymptomatic for 14 days, with resolution of end-organ dysfunction and cleared by medical sub-specialists