



COVID- 19 Return to Sport 2020-2021

COVID-19 Parent Letter & Medical Clearance

To the parent/guardian of _____: Date: _____.

Your child has reported to the school Athletic Trainer or School Nurse that he/she has been diagnosed or has had symptoms of COVID-19. Delaware Interscholastic Athletic Association (DIAA) requires that your child:

- be cleared to exit quarantine based on current Centers for Disease Control (CDC) and Delaware Division of Public Health (DPH) guidelines **AND**;
- be evaluated and cleared by a Qualified Healthcare Professionals [QHP - Licensed Physician (MD/DO), Licensed Physician Assistant (PA), Licensed Nurse Practitioner (NP)] **AND**;
- complete a gradual return to exercise progression before the student-athlete is allowed to resume full participation in athletics.

COVID-19 Management

While the vast majority of young persons afflicted with the coronavirus have mild symptoms or remain asymptomatic, the infection can cause direct injury or inflammation to the heart and lungs, especially in patients ill enough to require hospitalization. Cardiopulmonary concerns from COVID-19 arise from data in severely ill adult patients, with approximately 1 in 5 hospitalized patients suffering from cardiac or thromboembolic (clotting) complications. However, evidence on the prevalence and risks of these complications in adolescents and in individuals who have had a milder form of the illness remains limited (NFHS-AMSSM Guidance Statement).

Based on the recommendations of the National Federation of State High School Associations (NFHS), the American Medical Society for Sports Medicine (AMSSM) and multiple other medical organizations, any athlete with a confirmed or suspected diagnosis of COVID-19 must be evaluated by their medical provider for a detailed history of persisting symptoms or changes in their health status that may necessitate further testing or evaluation to exclude heart and lung disorders that carry a risk of arrhythmia, respiratory compromise, sudden cardiac arrest, or sudden death. It is the student's and parent's responsibility to obtain this clearance.

In addition, the athlete must complete a 5-day gradual resumption of exercise activity program before returning to competitive athletics. The exercise progression cannot start until the athlete has been cleared to exit quarantine based on current CDC and Delaware DPH guidelines, medically cleared by a QHP, and no sooner than 10 days after onset of symptoms. The DIAA COVID-19 Return to Play Protocol (RTPP) consists of phases that are designed to gradually increase exercise activity and monitor for any recurrence of cardiac or pulmonary symptoms that could necessitate further workup by the student's QHP. The exercise progression is similar to that which is utilized for returning to sport after concussion. The exercise progression can be monitored by the school's Athletic Trainer or Nurse or by the student's QHP. The COVID-19 RTPP is outlined below.

DIAA COVID-19 RTPP

DIAA and DSMAC have developed a COVID-19 Return-to-Play Protocol (RTPP) that considers recommendations of the NFHS, AMSSM, CDC, Delaware DPH, and other medical organizations. Please feel free to contact the school's Nurse or Athletic Trainer if you have any questions.

If activity at any step results in a return of symptoms, then activity should be immediately halted. If any symptoms occur while going through the RTPP, the athlete must return to the previous stage and progress again after a minimum of 24-hour period of rest without symptoms. Multiple incidences of return of symptoms will result in referral back to the treating physician.

Phase Description

PHASE 1 – Day 1

- Athlete has been medically cleared by a QHP
- 10 minute light stationary bike or jogging at <60% max-predicted heart rate(MPHR)
- Athlete completes above criteria without excessive fatigue, breathlessness, or chest discomfort

PHASE 2 – Day 2

- Athlete remains symptom free
- 20 minutes of aerobic exercise (walking, light jogging, stationary cycle, no resistance training) at <65% of MPHHR
- Athlete completes above criteria without excessive fatigue, breathlessness, or chest discomfort

PHASE 3 – Day 3

- Athlete remains symptom free
- 30-45 minutes of moderate activity (e.g., combination of aerobic exercise with low weight resistance training) at <70% of MPHHR
- Athlete completes above criteria without excessive fatigue, breathlessness, or chest discomfort

PHASE 4 – Day 4

- Athlete remains symptom free
- 45-60 minutes of sport-specific activity (including warm up and resistance training) at <80% of MPHHR
- Athlete completes above criteria without fatigue, breathlessness, or chest discomfort

PHASE 5 – Day 5

- Athlete remains symptom free
- 60 minute practice
- Athlete completes above criteria without excessive fatigue, breathlessness, or chest discomfort

PHASE 6 – Day 6

- Athlete remains symptom free
- Return to competition with no restrictions
- Athlete completes above criteria without excessive fatigue, breathlessness, or chest discomfort

This form must be signed by one of the following examining Qualified Healthcare Professionals (QHP) before the student-athlete is allowed to resume participation in interscholastic athletics: Licensed Physician (MD/DO), Licensed Physician Assistant (PA), Licensed Nurse Practitioner (NP). This form must be signed by the student-athlete's parent/legal custodian giving their consent before their child resumes participation in interscholastic athletics.

Name of Student-Athlete: _____ DOB _____

Date COVID-19 symptoms began: _____ Date cleared to exit quarantine: _____

Please check one of the following regarding the COVID-19 Return-to-Play Protocol:

Based on my evaluation of this patient:

- Student athlete has been cleared to exit quarantine and is 10 or more days from initial symptoms of COVID-19. The student-athlete is now reporting to be free of cardiac symptoms of COVID-19 and has had negative results on all appropriate cardiopulmonary diagnostic studies.
 - The student athlete may begin the COVID-19 Return-to-Play Protocol. Once the RTPP has been satisfactorily completed, this athlete may return to athletics with no restrictions.
 - The student athlete has completed the COVID-19 Return-to-Play Protocol under my guidance and at least 15 days have passed since the initial diagnosis of COVID-19. Athlete may return to athletics with no restrictions.
- Athlete is pending further evaluation and may not begin COVID-19 Return to Play Protocol. Athlete will be re-evaluated in my office on _____.

Other recommendations of treating QHP:

Name of QHP (Licensed Physician, Licensed Physician Assistant, Licensed Nurse Practitioner):

David Marc Epstein MD / Maxime Roccario PNP

Address: Delaware Modern Pediatrics, 300 Biddle Ave Ste 206, Newark DE 19702 Phone: (302) 392-2077

QHP Signature: _____ Date: _____

Once a QHP has completed this form, return it to the athletic trainer and/or school nurse.

Parent/Legal Custodian Consent for Their Child to Resume Full Participation in Athletics

I am aware that the DIAA **REQUIRES** the consent of a child's parent or legal custodian prior to them resuming full participation in athletics after having been diagnosed and treated for a COVID-19 infection. I acknowledge that the Qualified Healthcare Professional above has evaluated my student following COVID-19 infection and has given their consent for my child to resume participation in athletics as indicated above. By signing below, I hereby give my consent for my child to resume participation in athletics as indicated above by the QHP.

Signature of Parent/Legal Custodian: _____ Date: _____

Please Print Name and Relationship to Student-Athlete: _____