

## Return to Participation after COVID-19 Infection for School-Aged Children

Pediatric patient with history of COVID-19 infection ( $\geq 10$  days after positive COVID-19 test or symptom onset AND 24 hrs. symptom free off of fever-reducing medications)

Appointment with medical practitioner for assessment

Asymptomatic or mild symptoms  
(no fever, < 4 days of fever of  $\geq 100.4$  or <1 week of sx's)

If no cardiac symptoms, then return to activities as tolerated

If cardiac symptoms, refer to cardiology

Moderate COVID symptoms  
(fever  $\geq 4$  days of  $\geq 100.4$ , sx's  $\geq 1$  week and bedrest, no hospitalization)

ECG prior to participation

Normal ECG, no cardiac symptoms

Not in competitive sports  
Return to activities as tolerated

Competitive team sports participation  
Begin gradual return to play protocol

Abnormal ECG or cardiac symptoms

Evaluation by Pediatric Cardiologist

Severe COVID symptoms  
(hospitalized, abnormal cardiac testing, multisystem inflammatory syndrome in children (MIS-C))

To be followed by Cardiology  
Exercise restriction for 3-6 months.  
Cleared to return to play by cardiologist only.

### Cardiac Symptoms:

- Chest pain consistent with a cardiac etiology
- Shortness of breath out of proportion to URI symptoms
- New onset palpitations
- Syncope not clearly consistent with a vasovagal cause

### Reference:

"COVID-19 Interim Guidance: Return to Sports". *American Academy of Pediatrics*. 2 Aug 2021. [COVID-19 Interim Guidance: Return to Sports \(aap.org\)](https://www.aap.org/interim-guidance/return-to-sports)