COVID-19 Student-Athlete Return to Participation Guidelines  
(Includes Spirit & Marching Band)  
As of January 25, 2022

In congruent with the mission of the KSHSAA and education-based athletics and activity participation, we ask all participants to provide accurate health information in order to maintain a healthy, safe environment for all to participate.

1. Students who test positive for COVID-19:
   A. Student should follow county health department/local school district quarantine/isolation guidelines.

   Asymptomatic students or students with mild symptoms:
   - Mild symptoms are defined as common cold-like symptoms, GI symptoms or loss of taste/smell; generally without fever or fever < 2 days.
   - Once symptoms improve the student may resume normal activities of daily living while in isolation and walk for light exercise provided symptoms continue to improve.
   - No formal medical evaluation or specific cardiac testing is required unless there is a specific clinical concern. If student/family has concerns, they should check in with their healthcare provider to determine if further clinical evaluation is needed.
   - Student may begin an individualized progressive exercise program* when at least 3-5 days removed from symptom onset or a positive test in the case of someone who remains asymptomatic.
   - Student should be evaluated by their healthcare provider if any symptoms emerge or worsen during the progressive exercise program.

   Students with moderate symptoms or cardiopulmonary symptoms:
   - Moderate symptoms are defined as fever > 100.4, chills, severe cough, or flu-like syndrome for 2 or more days
   - Cardiopulmonary symptoms are defined as chest pain, dyspnea, or palpitations
   - The student should be evaluated in-person by their healthcare provider and obtain written clearance prior to returning to participation in a school sports, spirit, or marching band program. Additional cardiac testing may be considered.
   - Student should be at least 5-7 days from symptom onset and moderate symptoms should be resolved before beginning an individualized progressive exercise program*.

   Students with severe symptoms:
   - Students with severe disease requiring hospitalization, including those diagnosed with multisystem inflammatory syndrome in children (MIS-C), should undergo formal evaluation with a cardiovascular specialist prior to starting an exercise program.

   Students who experience cardiopulmonary symptoms (exertional chest pain, excessive dyspnea, syncope, palpitations, or unexplained exercise intolerance) with a return to exercise:
   - The student should be re-evaluated by a MD or DO as additional cardiac testing should be considered, including cardiologist referral.
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*Return to sport/activity exercise progression:
For the purpose of initiating a return to play progression, Day 1 is considered the day symptoms first appeared or in the case of asymptomatic students, the day the test was administered.

The student’s healthcare provider, school medical personnel, coaches and administrators are all responsible to ensure every student is both physically and emotionally prepared for a safe return to competition. Every situation and student are unique. Factors such as baseline fitness, infection severity, duration of COVID-19 symptoms and tolerance to progressive levels of exercise must all be considered. Most students will require at least a few days of a progressive exercise program (see following example). It is also recommended students participate in some full team practices before returning to formal competition for coaches to assess the student’s overall physical conditioning status and the student’s readiness for competition.

Progressive exercise program example:
- Stage 1 (2 days minimum): Light activity (walking, jogging, stationary bike) for 15 minutes or less at an intensity no greater than 70% maximum heart rate. No resistance training.
- Stage 2 (1 day minimum): Add simple movement activities (e.g., running drills) for 30 minutes or less at an intensity no greater than 80% of maximum heart rate.
- Stage 3 (1 day minimum): Progress to more complex training for 45 minutes or less at intensity no greater than 80% maximum heart rate. May add light resistance training.
- Stage 4 (2 days minimum): Normal training activity for 60 minutes or less at an intensity no greater than 80% maximum heart rate.
- Stage 5: Return to full activity.

For less physically intense activities such as Bowling and Golf, healthcare providers may choose to modify the length and intensity of this protocol.

2. Students who are asymptomatic and determined to be a close contact of a positive COVID-19 case:
   A. KSHSAA recommends quarantine with duration based on current county health department/school district guidelines. A student’s vaccination status could determine whether or not they are required to quarantine after a close contact exposure.
   B. While in home quarantine, students should be aware of any emerging symptoms and contact their healthcare provider.
   C. During the first 2-3 days of home quarantine, students should refrain from intense physical activity. If the student remains symptom free and has no other underlying medical conditions, they may begin to resume physical activity on their own while in home quarantine to maintain a healthy level of physical conditioning. It is also recommended students participate in some full team practices before returning to formal competition for coaches to assess the student’s overall physical conditioning status and the student’s readiness for competition.

Additional Information:
All preseason practice requirements must be fulfilled. If a sport is interrupted prior to the first competition or an athlete is forced to isolate or quarantine, the preseason practice schedule should resume at the point of interruption when the sport or athlete is permitted to return to activity.
Cardiopulmonary Considerations for High School Student-Athletes during the COVID-19 Pandemic

Confirmed New Infection
- Isolate and contact tracing per public health guidelines

Asymptomatic or Mild illness
- (common cold-like symptoms, GI symptoms or loss of taste/smell; generally without fever or fever <2 days)
- No medical evaluation required
- No specific cardiac testing; additional evaluation and cardiac testing based on clinical concern
- No exercise for 3 days from symptom onset or positive test; timeline of exercise progression should be individualized
- Return to Play
  - Athlete should feel well with all levels of training and exercise
  - Monitor for new cardiopulmonary symptoms (e.g., chest pain) with exercise

Moderate illness or Initial Cardiopulmonary Symptoms
- (fever >100.4°F, chills, flu-like syndrome for ≥2 days, or chest pain, dyspnea, palpitations)
- Medical evaluation
  - Consider ECG, Echo, and Troponin for initial cardiopulmonary symptoms before a return to exercise progression
- No exercise for 5 days from symptom onset; moderate symptoms should be resolved before starting a gradual exercise progression
- Normal testing
  - Return to Play

*Cardiopulmonary Symptoms with Return to Exercise
- (exertional chest pain, excessive dyspnea, unexplained exercise intolerance, palpitations, syncope)
- Medical evaluation and consider ECG, Echo, and Troponin
- No exercise until evaluation is complete

Severe illness or Hospitalization
- A comprehensive medical evaluation and cardiology consultation is recommended
- Consider ECG, Echo, and Troponin
- No exercise until evaluation is complete

Cardiopulmonary consultation and consider Cardiac MRI before a return to exercise progression
- ECG should be compared to previous when available
- Troponin testing (hs-cTnI or cTnI) should be performed after 48 hours without exercise
- Confirmed myocarditis, pulmonary embolism, or other cardiopulmonary disorder should be managed per medical guidelines
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References

