**Return to Play After COVID-19 Infection in Pediatric Patients**

**Interim Recommendations as of January, 2021**

**Start**

**COVID-19 Infection HX & Cleared CDC Rec Isolation After Infection DX**

**Note 1**

All patients with a known or suspected history of a COVID-19 infection require clearance with a primary care provider.

**HX & Physical (see Note 1)**

Hx: Chest Pain, SOB, Fatigue, Syncope, New Palpitations
PE: Abnormal Cardiac Exam

**HX & PE Negative**

- **Asymptomatic or Mild Symptoms**
  - < 4 days of fever >100.4, myalgia, chills or lethargy

  **Clear for Participation With Gradual Return to Full Physical Activity (see Notes 2 & 3)**

  **After 10 Days Asymptomatic (without fever meds)**
  - Clear for Participation With Gradual Return to Full Physical Activity (see Notes 2 & 3)

  **If No Significant Concerns**

- **Moderate Symptoms**
  - ≥ 4 days of fever > 100.4, myalgias, chills or lethargy
  - Non-ICU Hospitalization & No evidence of MIS-C

  **Age < 12 y/o OR**
  - Low Intensity Participation (i.e. PE)

  **Age ≥ 12 y/o AND**
  - Competitive Sports or High Intensity Physical Activity

  **Cardio Referral Prior to Participation**

  **If Myocarditis Concerns**

- **Severe Symptoms**
  - ICU Hospitalization due to COVID-19
  - Hx of MIS-C
  - Abnormal Cardiac Testing/Labs

  **Remain Under Cardiology Care for Evaluation, Treatment & Return to Play Guidance**

  **Possible Workup:** ECG, Echo, 24 Hour Holter Monitor, Troponin, Exercise Stress Test, +/- Cardiac MRI

  **Exercise:** Typically restricted for a minimum of 3-6 Months

**References**


The guideline is meant to support clinical assessment and medical decision making. It is not intended or meant to replace the provider’s professional judgment or establish a professional standard of care. The guideline should be modified based on the provider’s professional judgment in considering individual patient’s needs.

The COVID-19 interim guidance provided here has been updated based on current evidence and information available at the time of publishing. Guidance will be regularly reviewed with regards to the evolving nature of the pandemic and emerging evidence. All interim guidance will be presumed to expire June 30, 2021 unless otherwise specified (as noted by the AAP).

Source: San Diego Rady Children’s Health Network in partnership with CPCMG, RCSSD & AAP-CA Chapter 3

**Note 3: Gradual Activity Progression**


**Stage 1:** Day 1&2 (2 Days Minimum)-15 minutes or less: Light activity (walking, jogging, stationary bike) – intensity no greater than 70% of maximum heart rate. NO resistance training.

**Stage 2:** Day 3 (1 Day Minimum)-30 minutes or less: Add simple movement activities (i.e. running drills) – intensity no greater than 80% of maximum heart rate.

**Stage 3:** Day 4 (1 Day Minimum)-45 minutes or less: Progress to more complex training – intensity no greater than 80% maximum heart rate. May add light resistance training.

**Stage 4:** Day 5&6 (2 Days Minimum)-60 minutes: Normal training activity – intensity no greater than 80% maximum heart rate.

**Stage 5:** Day 7-Return to full activity/participation (i.e. contests/competitions).