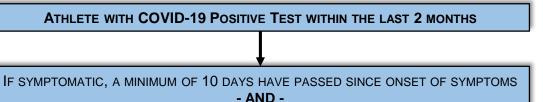


## MSHSAA RETURN TO PLAY POST COVID-19 INFECTION





SYMPTOMS HAVE RESOLVED - NO FEVER (≥100.4) FOR 24 HOURS WITHOUT FEVER REDUCING MEDICATION IMPROVEMENT IN RESPIRATORY SYMPTOMS (COUGH, SHORTNESS OF BREATH)

- OR -

IF ASYMPTOMATIC, A MINIMUM OF 10 DAYS HAVE PASSED SINCE POSITIVE TEST

MEDICAL EVALUATION BY PRIMARY CARE CLINICIAN+

SCREENING QUESTIONS TO ASSESS FOR CONCERNING SYMPTOMS OF MYOCARDITIS

OR MYOCARDIA ISCHEMIA<sup>++</sup>

\*\*\* RETURN TO PLAY \*\*\*

GRADUAL REINTRODUCTION OF PHYSICAL ACTIVITY WITH THE UNDERSTANDING THE ATHLETE IS LIKELY DECONDITIONED AFTER 10 DAYS OFF WHILE MONITORING FOR ANY SIGNS OF RESPIRATORY OR CARDIAC SYMPTOMS THAT MAY DEVELOP WITH EXERCISE

UPON COMPLETION OF MSHSAA RTP FORM → RESUME PARTICIPATION











\*MEDICAL PROVIDERS SHOULD TAKE INTO CONSIDERATION THE INTENSITY LEVEL OF SPORT PARTICIPATION AND EXERCISE TO HELP GUIDE THEIR DECISION TO PURSUE ADDITIONAL EVALUATION.

++ADAPTED FROM THE AMERICAN HEART ASSOCIATION PRE-SCREENING FOR COMPETITIVE ATHLETE RECOMMENDATIONS

CHEST PAIN/TIGHTNESS WITH EXERCISE

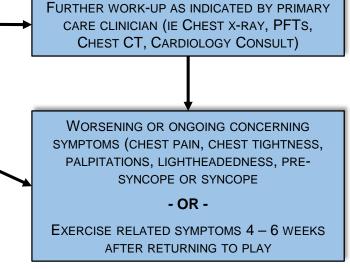
OSITIVE SCREE

OR

**PREVIOUSLY** 

HOSPITALIZED

- SYNCOPE/NEAR SYNCOPE THAT IS UNEXPLAINED
- UNEXPLAINED OR EXERCISE DYSPNEA/FATIGUE WITH EXERTION
- NEW PALPITATIONS
- HEART MURMUR ON EXAM



Revised: 03/25/2021