**CANDOR CENTRAL SCHOOL**

**P.O. Box 145**

**Candor, New York 13743-0145**

**Candor Central School District COVID-19 Return to Play Clearance Form**

**If an athlete has tested positive for COVID-19, he/she must be cleared for progression back to activity by an approved medical provider (MD/DO/ARNP/PAC).**

**Athlete’s Name:­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DOB: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_\_ Date of Positive COVID-19 Test: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_**

**Date of Evaluation: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_**

**Criteria to return (Please check boxes below applying to the patient):**

**[ ]** 10 days have passed since the date of COVID-19 diagnosis

 [ ]  Athlete has had no fever (> 100.4°F) in the past 24 hours

 [ ] Athlete presents negative cardiac screen for myocarditis/myocardial ischemia

 (All answers below must be no):

 [ ]  Chest pain or tightness with exercise [ ] Yes [ ] No

 [ ] Unexplained syncope/near syncope [ ] Yes [ ] No

 [ ] Unexplained/excessive dyspnea or fatigue w/ exertion [ ] Yes [ ] No

 [ ] New Palpitations

 [ ] Heart murmur on exam

NOTE: If the answer is “yes” to any cardiac screening questions, the athlete tested positive, or they were hospitalized, a further workup should be considered. This workup includes EKG, High-Sensitivity Troponin, Echocardiogram, or consult with a cardiologist. If lung exam is abnormal or athlete has persistent pulmonary symptoms, a further workup should be done including chest X-ray, Spirometry, Chest CT or Pulmonary Function Test.

**[ ] Athlete HAS satisfied above criteria and is cleared to start the return to play progression**

**[ ] Athlete HAS NOT satisfied the above criteria and IS NOT cleared to return to play**

**Medical Office Staff:**

Provider’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Provider Type: MD / DO / PAC / ARNP

Office Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Office Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Provider’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

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**Graduated Return to Play Protocol**

**• Stage 1: Day 1 and Day 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

(e.g. 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 and Day 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 (e.g. contests or competitions).**

If the athlete complains of any symptoms during the protocol, the protocol should be stopped, and the athlete should be referred back to their primary care physician.

Date Cleared for Full Return to Play (based on RTP above): \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

School Personnel Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­School Personnel Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­

RTP Protocol adapted from Elliott N, et al. Infographic. British Journal of Sports Medicine, 2020.

Candor Central School District COVID-19 clearance form has been adapted from Guthrie Sport Medicine