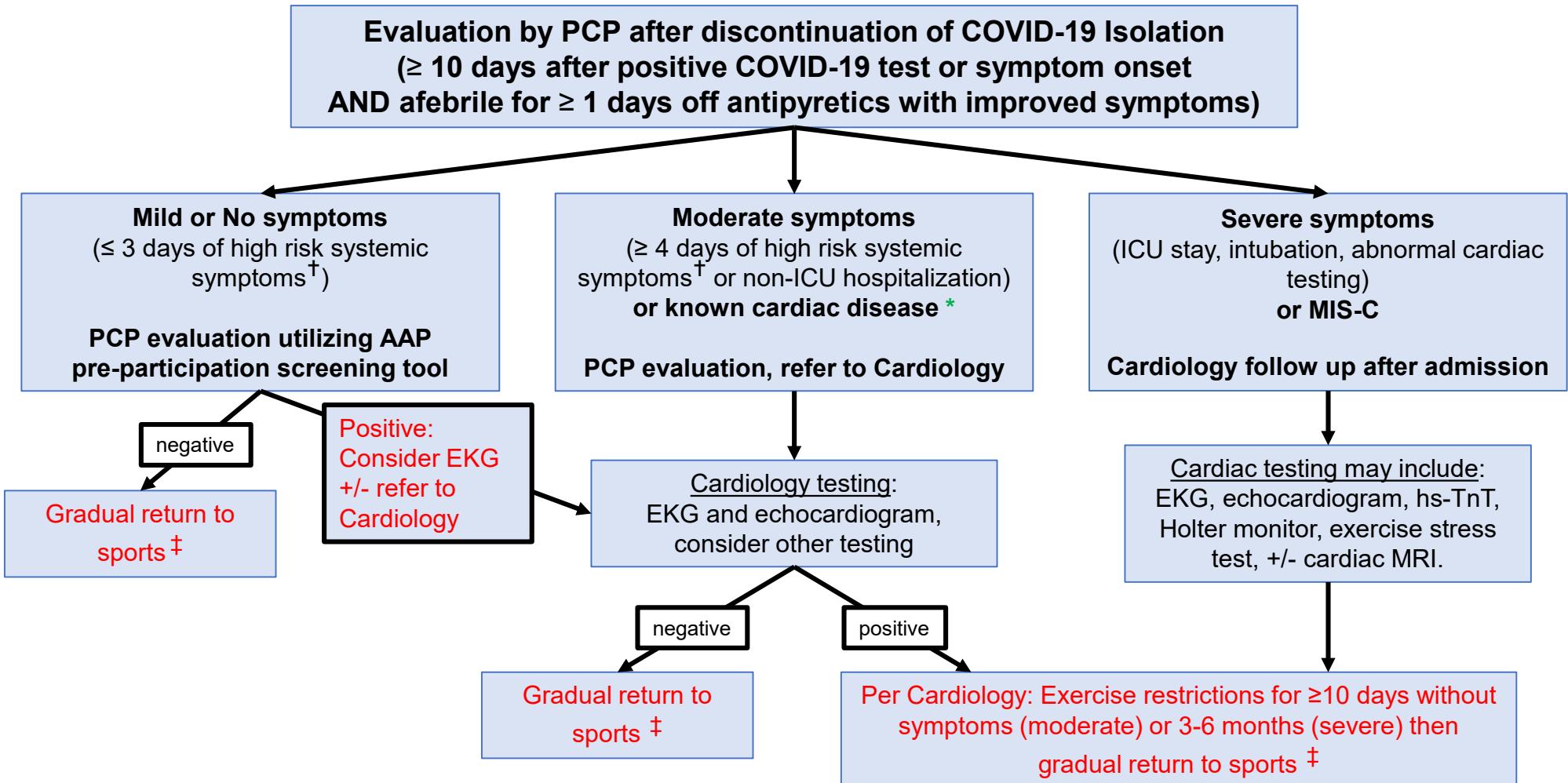


Return to Exercise after COVID-19 Infection in Pediatric Patients (K-12)*

This document contains interim suggested guidance based on current information available to inform assessment and risk stratification for release to participation in physical education, sports and moderate to vigorous play for pediatric patients. These are considered best practice per the American Academy of Pediatrics.

Note, patients with close contact exposure to COVID-19 are restricted from participation for ≥ 10 days (same duration as quarantine).



* Published by UR GCH COVID Pediatric RTP Workgroup on 1/13/2021 using the AAP Updated Guidance on Returning to Sports Activities: <https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/covid-19-interim-guidance-return-to-sports/>

[†] High risk systemic symptoms are: fever >100.4 , myalgia, chills, or profound lethargy.

^{*} Note that most heart defects may not be considered significant enough to qualify for this category. Please refer to the attached FAQ.

[‡] Gradual return to sports can begin immediately (Mild or No symptoms) or ≥ 10 days after the end of symptoms and should be over at least 7 days with no return of symptoms. An AAP-suggested protocol is on the attached page.