# MEMORANDUM

Date: October 15, 2020

To: Child and Adolescent Health Care Providers

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Re: Return to Sports After COVID-19 Infection in Pediatric Patients

As more children in the community return to sports, primary care providers will be asked to clear children and adolescents who have been infected with COVID-19 for participation in these activities. In preparation for this, the Pediatric Infectious Disease division at SUNY Upstate Medical University/ Golisano Children’s Hospital and Pediatric Cardiology Associates, in collaboration, have put together some guidance to streamline this process for you.

The following guidance and algorithm (on the second page) come from the Journal of American College of Cardiology1. When evaluating a COVID-19 infected patient for clearance to return to sports, three factors should be considered: (1) the timing of the COVID-19 infection, (2) the severity of the COVID-19 infection, and (3) the intensity and competition levels of the activity being considered. As such, the algorithm follows three paths – children with asymptomatic or mild infection, those with moderate infection (stratified by age, as this may correspond with intensity level of sports being played), and those with severe infection.

We anticipate that children with severe infection will already be connected with the cardiology group. Of the remaining groups, an EKG is recommended prior to clearing children older than 12 years of age whose COVID infection was associated with moderate symptoms. These EKGs can be obtained either in the pediatric cardiology office or at a local facility where pediatric EKGs are routinely obtained and sent to Pediatric Cardiology Associates office for review.  The EKG should be performed after the patient has been asymptomatic for 14 days.  If you order that EKG at a local facility, please ask that a requesting statement “COVID sports clearance” be included when the EKG is transmitted to Pediatric Cardiology Associates.  If there are questions about the interpretation, please call Pediatric Cardiology Associates (315-214-7700) to discuss it further with the on-call physician.  If the EKG is obtained at Pediatric Cardiology Associates, a pediatric cardiologist will plan to review it before the child leaves to determine if there are abnormalities requiring additional testing.

We hope that this information has offered some clarity and guidance for evaluation of children and adolescents with past COVID-19 infection as they prepare to return to sports. Please call our offices if you have any further questions.



1Dean PN, Jackson LB, Paridon SM. Returning to play after coronavirus infection: Pediatric cardiologists’ perspective. *Journal of American College of Cardiology.* 2020. https://www.acc.org/latest-in-cardiology/articles/2020/07/13/13/37/returning-to-play-after-coronavirus-infection