COVID-19 Policies and Procedures



WellSpan Sports Medicine has compiled a game plan to help schools and clubs manage the spread of COVID-19 in athletic practices and events that aligns with recommendations from the Centers for Disease Control (CDC), PA Intersholastic Athletic Association (PIAA) and National Federation of State High School Associations NFHS. The intent of this document is to also provide guidance, as per the Pennsylvania guidelines, for a safe return to sport for athletes who test positive for COVID-19.

Recommendations to Minimize Spread of COVID-19

Our approach to COVID-19 has been to prevent as many infections as possible through behavior change, including masking, social distancing, vaccinations and contact tracing. We recommend that schools, clubs and coaches take the following precautions:

- Allow Athletic Trainers and other medical professionals to address all athletes, staff and families about the symptoms of COVID-19, when to stay home and be evaluated by a medical professional.
- · Practice proper spacing of at least 6 feet.
- Educate players about covering coughs and sneezes with a tissue or their elbow.
- Discourage spitting.
- Educate athletes on proper hand washing and sanitizing techniques.
- Encourage players to focus on building individual skills in order to maintain safe distancing.
- Remind players about social distancing and identify markers such as signage, cones, or tape on floor
- Consider using pod units of fewer players, so that a COVID positive athlete does not jeopardize full team status.
- Work with your Licensed Athletic Trainer to further reduce risk of spread amongst team members.

Student Athletes with Positive Test to COVID-19

Student-athletes who test positive for COVID-19 with or without symptoms:

 Isolate <u>for at least 5 days</u>, day 0 being the first day of symptoms or day of positive test if asymptomatic

- Do not exercise during the isolation period
- Wait at least 24 hours with no fever or use fever-reducing medication prior to initiating Return to Play, if symptoms have not improved after 5 days of isolation (Loss of taste and smell may persist for weeks or months after recovery and need not delay the end of isolation)
- Continue to wear a well-fitting mask around others at home and in public for 5 additional days after the end of the isolation period

After symptom resolution and prior to sports participation:

- Student-athletes should be evaluated by a medical provider to assess for residual symptoms and the need for additional testing.
- A written medical clearance prior to sports participation is required.
- Cardiorespiratory symptoms require further evaluation and EKG recommendation should be considered.*
- * Myocarditis post-COVID infection has been seen on a regular and notable level.

Athlete Exposures to Close Contacts:

Vaccinated Athletes

If an athlete has had close contact with someone with COVID-19 and they are **up to date** on COVID-19 vaccines or has had a **confirmed case** of COVID-19 within the last 90 days (meaning they tested positive using a viral test) and subsequently recovered and remain without COVID-19 symptoms, there is **no need to quarantine**. However, the guidance below should be followed:

 Wear a well-fitting mask around others for 10 days from the date of the last close contact with someone with COVID-19 (the date of the last close contact is day 0).

- Get tested at least 5 days after the last close contact with someone with COVID-19.
 - o If the test is positive or the athlete develops COVID-19 symptoms, they should isolate from other people and follow recommendations in the previous section addressing positive tests.

Unvaccinated Athletes

If an athlete comes into close contact with someone with COVID-19 and is **not up to date** on COVID-19 vaccines, they **should quarantine** as follows:

- Stay home and away from other people for at least 5 days (day 0 through day 5) after their last contact with a person who has COVID-19
- Wear a well-fitting mask around others at home. The date of exposure is considered day 0.
- Watch for fever (100.4°F or greater), cough, shortness of breath, or other COVID-19 symptoms for 10 days.

• If symptoms develop:

o Isolate from other people and follow recommendations in the previous section addressing positive tests.

• If no symptoms develop:

- Get tested at least 5 days after the close contact with someone with COVID-19
- Wear a well-fitting mask at home or in public for 10 days after the last close contact.

• If test is negative:

 You may leave your home, but continue to wear a well-fitting mask when around others at home and in public until 10 days after the last close contact with someone with COVID-19.

• If test is positive:

 Follow recommendations in the previous section addressing positive tests.

What counts as close contact?

- Within 6 feet of someone who has COVID-19 for a total of 15 minutes or more.
- Provided care at home to someone who is sick with COVID-19.
- Direct physical contact with the person (hugged or kissed them).
- · Shared eating or drinking utensils.
- Close proximity to someone who sneezed, coughed, or contact with respiratory droplets.

Our best recommendations for Athletic Trainers and team physicians is for them to emphasize to the coaching staff the importance of maintaining small groups (pods). The advantage of using pods is if a member of the pod tests positive for COVID-19, then the pod is out 2 weeks. If not using pods, the team risks restriction of the entire team's practice and games for an extended time.

Evaluation for Return to Play

Evaluation for return to play should be performed by a Sports Medicine trained physician or another qualified medical provider. If an athlete needs further evaluation, WellSpan has an agreement with Penn State Hershey Pediatric Cardiology to interpret EKG and Echo exams that are performed by WellSpan staff on children up to age 18.

Penn State Hershey Pediatric Cardiology at Apple Hill Medical Center Suite 160, 25 Monument Rd. York, PA 17403

Dr. Thomas Chin

Email: tchin@pennstatehealth.psu.edu

Phone: 717-812-3883

https://www.wellspan.org/provider-search/profile/ Thomas-Chin-MD-Pediatric-Cardiology-/2060

All athletes presenting for a PIAA pre-participation physical should have a supplemental questionnaire completed addressing medical issues specific to Covid-19. Any positive response from the survey should trigger an evaluation by a medical provider prior to sports participation.

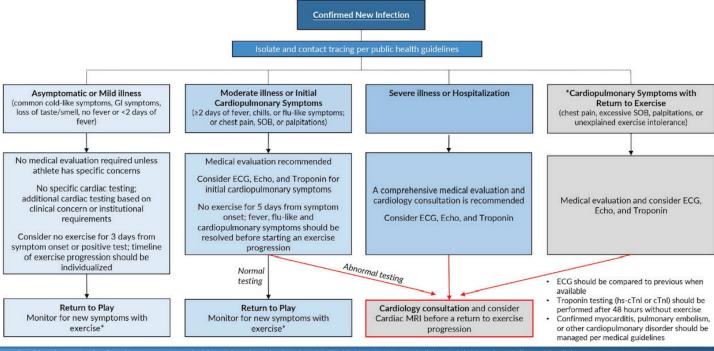
Guidance for Masks

- If you are not fully vaccinated and aged 2 or older, you should wear a mask in indoor public places.
- In general, you do not need to wear a mask in outdoor settings.
 - In areas with high numbers of COVID-19 cases, consider wearing a mask in crowded outdoor and indoor settings and for activities with close contact with others.
- People who have a condition, or are taking medications that weaken their immune system, may not be fully protected even if they are fully vaccinated. They should continue to take all precautions recommended for unvaccinated people, including wearing a well-fitted or N-95 or KN-95 mask, as advised by their healthcare provider.
- If fully vaccinated, to maximize protection from all COVID-19 variants and prevent possible spread to others, wear a mask if you are in an area of substantial or high transmission.

https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/about-face-coverings.html

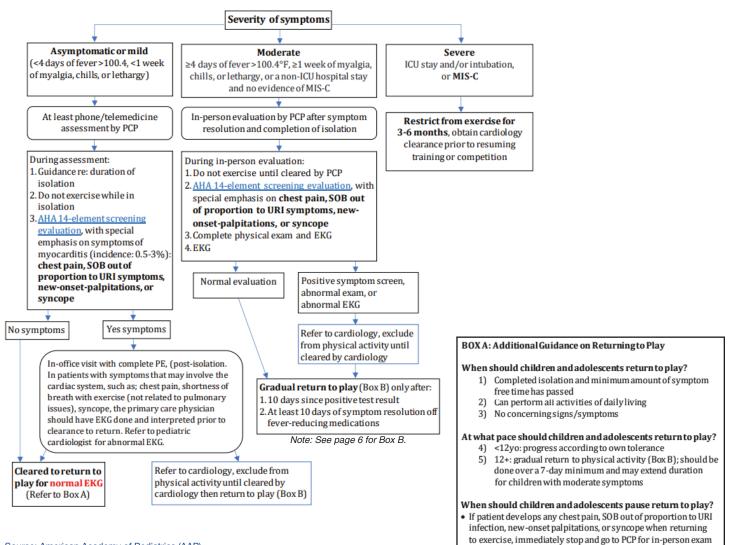
Cardiac Considerations for College Student-Athletes during the COVID-19 Pandemic

Recommendations for cardiac testing are based on expert consensus and informed by current evidence



Considerations were developed by an expert panel with members from the American Medical Society for Sports Medicine and the American College of Cardiology

Sources: AMSSM and ACC



Calculating Quarantine

The date of your exposure is considered day 0. Day 1 is the first full day after your last contact with a person who has had COVID-19. Stay home and away from other people for at least 5 days. <u>Learn why CDC updated guidance for the general public</u>.

IF YOU
Were exposed
to COVID-19
and are NOT
up-to-date on
COVID-19
vaccinations

Quarantine for at least 5 days

Stay home Stay home and quarantine for at least 5 full days.

Wear a well-fitted mask if you must be around others in your home.

Get tested

Even if you don't develop symptoms, get tested at least 5 days after you last had close contact with someone with COVID-19.

After quarantine

Watch for symptoms

Watch for symptoms until 10 days after you last had close contact with someone with COVID-19.

If you develop symptoms Isolate immediately and get tested. Continue to stay home until you know the results. Wear a wellfitted mask around others.

Take precautions until day 10

Wear a mask

Wear a well-fitted mask for 10 full days any time you are around others inside your home or in public. Do not go to places where you are unable to wear a mask.

Avoid travel

Avoid being around people who are at high risk

IF YOU
Were exposed
to COVID-19
and are <u>up-to-date</u> on COVID19 vaccinations

No quarantine

You do not need to stay home **unless** you develop symptoms.

Get tested

Even if you don't develop symptoms, get tested at least 5 days after you last had close contact with someone with COVID-19.

Watch for symptoms

Watch for symptoms until 10 days after you last had close contact with someone with COVID-19.

If you develop symptoms

Isolate immediately and get tested. Continue to stay home until you know the results. Wear a well-fitted mask around others.

Take precautions until day 10

Wear a mask

Wear a well-fitted mask for 10 full days any time you are around others inside your home or in public. Do not go to places where you are unable to wear a mask.

Avoid travel

Avoid being around people who are at high risk

IF YOU
were exposed
to COVID-19
and
had confirmed
COVID-19
within the past
90 days (you
tested positive
using a viral
test)

No quarantine

You do not need to stay home **unless** you develop symptoms.

Watch for symptoms

Watch for symptoms until 10 days after you last had close contact with someone with COVID-19.

If you develop symptoms

Isolate immediately and get tested. Continue to stay home until you know the results. Wear a well-fitted mask around others.

Take precautions until day 10

Wear a mask

Wear a well-fitted mask for 10 full days any time you are around others inside your home or in public. Do not go to places where you are unable to wear a mask.

Avoid travel

Avoid being around people who are at high risk

Calculating Isolation

Day 0 is your first day of symptoms or a positive viral test. Day 1 is the first full day after your symptoms developed or your test specimen was collected. If you have COVID-19 or have symptoms, isolate for at least 5 days.

IF YOU
Tested positive
for COVID-19 or
have
symptoms,
regardless of
vaccination
status

Stay home for at least 5 days

Stay home for 5 days and <u>isolate</u> from others in your home.

Wear a well-fitted mask if you must be around others in your home.

Ending isolation if you had symptoms

End isolation after 5 full days if you are fever-free for 24 hours (without the use of fever-reducing medication) and your symptoms are improving.

Ending isolation if you did NOT have symptoms

End isolation after at least 5 full days after your positive test.

If you were severely ill with COVID-19

You should isolate for at least 10 days. <u>Consult</u> <u>your doctor before</u> <u>ending isolation</u>. Take precautions until day 10

Wear a mask

Wear a well-fitted mask for 10 full days any time you are around others inside your home or in public. Do not go to places where you are unable to wear a mask.

Avoid travel

Avoid being around people who are at high risk

Source: CDC











Post-COVID19 Reconditioning 7-Day Return to Play Progression

(Box B)



After receiving medical clearance, athletes must complete a 7-day return-to-play progression that gradually increases activity level until they are back to full capacity. Symptom severity level will have an effect on the progression being a minimum of 7 days. Those with more severe symptoms that result in significant deconditioning, can expect the progression to take longer before they are returned to full capacity. All guidance comes from the AAP.

Stage 1 - Isolation for 5 days after the first onset of symptoms in accordance with CDC recommendations

Stage 2 - No exercise during 5 day isolation period from the onset of symptoms or following a (+) test. Light exercise may be resumed after all symptoms have resolved including no fever for 24 hours without fever reducing medications. EKG's may be performed during this time.

Stage 3 - Medical Clearance by a primary care physician, sports medicine physician or other qualified medical provider.

Stage 4 - Minimum 7 days Return-To-Play Progression

Step 1 Light Exercise (2 days)

- 2 days minimum of light activity such as jogging, stationary cycling but NO WEIGHT TRAINING
- 70% Max Heart Rate for no more than 15 minutes

Step 2 Light-Moderate Exercise (1 day)

- 1 day minimum of increasing the frequency of training such as simple movement activities like running drills etc. LIGHT WEIGHT TRAINING ALLOWED
- 80% Max Heart Rate for no more than 30 minutes

Step 3 Moderate Exercise (1 Day)

 1 day minimum of increasing the duration of training such as progressing to more complex training activities.
 MODERATE WEIGHT TRAINING ALLOWED 80% Max Heart Rate for no more than 45 minutes.

Step 4 Moderate-Intense Exercise (2 Days)

- 2 days minimum of increasing the intensity of training such as normal training activities. PROGRESS TO FULL WEIGHT TRAINING
- 80% Max Heart Rate for no more than 60 minutes

Step 5 Return to Intense Training and Full Return to Sport

Full return to team training including FULL WEIGHT TRAINING

Full return to sport, depending upon age and significance of illness, may take up to a month or more including all of the isolation steps, clearance, and completion of return to play progression. Our goal is for all of our athletes to return safely in the completion of their recovery. **As always, health and safety are our top priority.***

*Additional resources can be found by referencing the British Journal of Sports Medicine and The Journal of the American Medical Association.

COVID-19 Athlete Pre-Screening Questionnaire

We appreciate your cooperation and patience in helping to keep our students and staff safe and healthy.

This completed form must be turned in to Department of Athletics with your Physical paperwork

1. IN THE LAST TWO WEEKS

Parent/Guardian Signature_____

Have you experienced:	YES	NO		YES	NO
Fever (100.4°+)?			4. a. During the infection did you suffer		
Coughing?			from chest pain, pressure, tightness		
Sore throat?			or heaviness, or experience difficulty breathing or unusual		
Headache?			shortness of breath?		
Muscle aches?			(explain):		
Shortness of breath or difficulty breathing?					
Persistent muscle aches?					
Dizziness?			4. b. Since the infection, have you had		
New confusion or unable to wake?			new chest pain or pressure with		
Chills or repeated shaking chills?			exercise, new shortness of breath with exercise or decreased exercise		
Loss of taste or smell?			tolerance?		
Bluish lips or face?			(explain):		
Purple skin lesions on feet?					
Chest pain, pressure, or lightness?					
Fatigue or difficulty with exercise?			5. Did you receive treatment for		
Nausea, vomiting, or diarrhea?			COVID-19 infection and if so, what was the treatment course?		
2. Have you had a household contact or cared for a person infected with current or past Corona virus? (if Yes, who?)			(treatment): 6. Did you receive follow-up care with your primary care physician after having COVID-19? (date and physician name):		
3. Do you have moderate to severe asthma, a heart condition, diabetes, preexisting kidney disease, or compromised immune system? (explain):			7. Were you hospitalized after being diagnosed with COVID-19? (dates and institution):		
4. Have you been diagnosed or tested positive for COVID-19 infection? (date):			8. Did you see a cardiologist or have a cardiac clearance with ECG, 2D Echo and high sensitive Troponin I Test? (date and physician name):		
Student Signature:			Date:		

_____ Date:____

Athlete Return to Participation Form

To be completed by PCP, Team Physician, or other qualified medical provider. (Complete all parts)

Name:	DOB:						
Date of diagnosis:	Symptoms:	NONE	MILD	MODERATE	SEVERE		
Onset of symptoms (date):	Date of symp	Date of symptom resolution:					
Did the athlete self-isolate for 5 days?			YES	NO			
Has the athlete been afebrile for the last 3 days wit	thout antipyretics?		YES	NO			
Have symptoms been improving?			YES	NO			
Was an EKG performed?			YES	NO			
If yes: Was the EKG normal?				NO			
Were cardiac labs performed (high sensitivity-Troponin, BNP, CRP)?			YES	NO			
Results:							
Was cardiac imaging (Echo, Cardiac MRI) performe	ed?		YES	NO			
Results:							
Was the athlete referred to Cardiology?			YES	NO			
Is the athlete CLEARED to start a GRADUATED ret	urn to sports:		YES	NO			
Please list any RES	STRICTIONS for return to	sport:					
Name of clearing medical provider:		[Date:				
Medical Provider Signature:	License Number:						