

## *Lancaster Central School District*

---

*Lancaster Central School District  
177 Central Avenue  
Lancaster, New York 14086-1199  
Fax (716) 686-3396*

*Andrew P. Kufel, Ph.D.  
Assistant Superintendent for Curriculum &  
Instruction  
(716) 686-3207  
[akufel@lancasterschools.org](mailto:akufel@lancasterschools.org)*

February 8, 2021

Hello LCSD Families,

The safety of our students, your children, remains our top priority. As the situation continues to evolve and as the scientific community continues to learn more about the COVID-19 pandemic, we too, will evolve to the benefit of our students and families.

On December 17, 2020, the American Academy of Pediatrics (AAP) stated, “Individuals who test positive for COVID-19 should not exercise until they are cleared by a physician.” This information is important for all children who have had COVID-19, but especially those children who exhibit moderate to severe symptoms.

Recently, several cardiologists and physicians from Western and Central New York created a *Return to Play/Participate* form based on the guidance and recommendations from the AAP. We have slightly modified the form to meet the needs of the families of Lancaster. Please visit LCSD COVID-19 & Reopening webpage: <https://www.lancasterschools.org/Domain/1866>) or view the attached document for the entire form.

Since the beginning of the school year, all students who have had COVID-19 must present a written note from a healthcare provider stating they are cleared to return to school.

In consultation with our medical director and based on the updated guidance from the AAP, we strongly encourage all parents to utilize the *Return to Play/Participate* form prior to returning to physical activity (i.e., physical education or athletics). This is in addition to the already required note from a healthcare provider stating a child who has had COVID-19 is cleared to return to school.

As always, if you have any questions regarding the health and well-being of your child, please contact your family physician.

Sincerely,



Andrew P. Kufel, Ph.D.

Assistant Superintendent for Curriculum,  
Instruction, and PPS  
Lancaster Central School District



# Assessment/Release for Return to Play/Physical Activity

Student/Patient: \_\_\_\_\_

School: \_\_\_\_\_

DOB: \_\_\_\_\_

Sport: \_\_\_\_\_

Primary Care Physician: \_\_\_\_\_

PE Class/Teacher: \_\_\_\_\_

Date of onset of COVID-19 symptoms: \_\_\_\_\_

Date of COVID-19 positive test: \_\_\_\_\_

Date of resolution of COVID-19 symptoms: \_\_\_\_\_

- |  |    |     |
|--|----|-----|
| 1. Systemic symptoms for 4 days or more (e.g., fever, myalgia, chills, profound lethargy)? | No | Yes |
| 2. Hospitalization due to COVID symptoms?  | No | Yes |
| 3. H/o cardiac abnormalities followed by cardiology?                                       | No | Yes |

### Recent symptoms:

- |  |    |     |
|--|----|-----|
| 4. Chest pain at rest or with exertion? (not musculoskeletal or costochondritis):  | No | Yes |
| 5. Shortness of breath with minimal activity? (unrelated to respiratory symptoms): | No | Yes |
| 6. Excessive fatigue with exertion?  | No | Yes |
| 7. Abnormal heartbeat or palpitations?   | No | Yes |
| 8. Syncope or near-syncope?  | No | Yes |

Normal cardiovascular exam? No Yes

Cardiology referral indicated? No Yes

Cleared to return to sport/physical education **without** gradual return to play protocol. No Yes

Cleared to sports/physical education with gradual return to play protocol? No Yes

If not today, then effective date: \_\_\_\_\_

Physician Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Date \_\_\_\_\_

A graduated return-to-play protocol can begin once an athlete has been cleared by a physician (cardiologist for moderate to severe symptoms) and is asymptomatic when performing normal activities of daily living. The progression should be performed over the course of at least 7 days. Consideration for extending the progression should be given to athletes who experienced moderate COVID-19 symptoms. Gradual return to play can begin  $\geq 10$  days after the positive test or  $\geq 10$  after the end of symptoms (whichever is later).

### Gradual return to play progression<sup>1</sup>

**\*\*Patient should be symptom free in the stage they are in before progressing to the next stage.\*\***

Stage 1: 2 days minimum,  $\leq 15$  minutes, light activity (walking, jogging, stationary bike), no resistance training.

Stage 2: 1 day minimum,  $\leq 30$  minutes, add simple movement activities (e.g. running drills).

Stage 3: 1 day minimum,  $\leq 45$  minutes, progress to more complex training, may add light resistance training.

Stage 4: 2 days minimum, 60 minutes, normal training activity.

<sup>1</sup> (adapted from Elliott N, et al, infographic, British Journal of Sports Medicine, 2020.)