

Mount Pleasant Central School District



COVID-19 Return to Play Parent Guide (Revised 8/2024)

"Educating Each Student Today for Endless Possibilities Tomorrow"

Parents/Guardians:

It is recommended that you notify your school nurse if your child tests positive for COVID-19.

All patients who test positive for a SARS-CoV-2 infection should have at least one follow-up conversation or visit with their primary care medical home. The American Academy of Pediatrics recommends that this encounter occur either prior to resuming sports/physical activity or within 2 to 4 weeks of a positive SARS-CoV-2 test, whichever is sooner.

The Mount Pleasant Central School District will follow these recommendations and individuals who test positive for COVID-19 may not participate in interscholastic athletics until they are cleared by a Healthcare Provider. **Any student who tests positive for COVID-19 is required to provide documentation from their Healthcare Provider clearing them for activity and/or the “MPCSD COVID-19 Return to Play - Health Care Provider Clearance Form”.**

Any return to play guidelines will come from the physician who is assessing and clearing the athlete. If accommodations and/or return to activity protocol is advised, the Athletic Trainer will work with the school nurse to inform and provide the physical education teacher and coach with specific activity modifications until this process has been completed.

The MPCSD Medical Director will review each Covid-19 case, including the physician's assessment and any suggested return to play guidelines. Please return all supporting documents as quickly as possible to expedite the process.

For more information regarding AAP Return to Play Recommendations, please visit:
<https://www.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/covid-19-interim-guidance-return-to-sports/>

Mount Pleasant Central School District COVID-19 Return to Play - Healthcare Provider Clearance Form

This form must be completed by the Health Care Provider and is required for all student-athletes who have tested positive for COVID-19 or tested positive for COVID-19 antibodies. These individuals understand and have followed the recommendations stated by the Department of Health (DOH) and CDC guidelines to return to school.

Student's Name: _____ DOB: _____

Date of positive COVID-19 Test: _____ Date of HCP evaluation: _____

To be completed by Healthcare Provider

Medical Doctor must answer the following questions (Circle One):

- | | | |
|---|-----|----|
| 1. Does this student NEED an Cardiologist assessment | YES | NO |
| 2. Does this student NEED additional accommodations | YES | NO |
| 3. Does this student NEED to complete a Return to Play/Activity Plan ** | YES | NO |

** If YES to #3: The Return to Play process must be stated and specified by the physician below:
(Ex. Day 1 - Cardiovascular activity only, Day 2 - Practice without Restrictions, Day 3 - Full Competition)

The student is cleared to return to play.

MEDICAL DOCTOR OFFICE INFORMATION (Please print/stamp)

Evaluator's Name: _____

Evaluator's Signature: _____

Please submit this form to the School Nurse.

Once this clearance form has been reviewed and approved by the school nurse as designated by the Mt. Pleasant Medical Director, the athlete may return to athletics and follow the recommendations of his/her physician advises accordingly. The MPCSD Medical Director will be contacted by the Athletic Trainer or school nurse if signs or symptoms of residual effects of COVID-19 arise or any additional concerns need to be addressed.