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

*Recommendations for cardiac testing are based on expert consensus with limited evidence

**Confirmed Past Infection in last 6 months**
(+ Antibody or Prior PCR Test)

1. **Asymptomatic, mild, or moderate illness**
   - (athlete has regained their fitness and is back to exercise without symptoms)
   - Medical evaluation or routine PPE
   - Symptom screen
   - Consider additional cardiac testing based on clinical concern or institutional requirements
   - *Cardiology consultation, ECG, Troponin, Echo
     - Consider Cardiac MRI, Holter, Stress Test or CPET, Chest X-ray, Spirometry, PFTs, D-Dimer, and Chest CT

2. **Severe illness (hospitalized) OR Ongoing cardiovascular symptoms**
   - (>14 days from onset of illness: chest pain, SOB, exercise intolerance, palpitations)
   - Medical evaluation
   - Symptom screen
   - Additional testing*
   - *Cardiology consultation, ECG, Troponin, Echo
     - Consider Cardiac MRI, Holter, Stress Test or CPET, Chest X-ray, Spirometry, PFTs, D-Dimer, and Chest CT

**Confirmed New Infection**
(+ PCR or Antigen Test)

1. **Asymptomatic**
   - No exercise for 10 days
   - Monitor for development of symptoms during isolation
   - Medical evaluation before a return to exercise progression
   - Additional cardiac testing based on clinical concern or institutional requirements
   - Monitor for new symptoms with exercise

2. **Mild illness**
   - (common cold-like symptoms without fever, mild GI symptoms, or loss of taste/smell)
   - No exercise for at least 10 days and while symptomatic
   - Medical evaluation before a return to exercise progression
   - Additional cardiac testing based on clinical concern or institutional requirements
   - Monitor for new symptoms with exercise

3. **Moderate illness**
   - (fever, flu-like or systemic symptoms)
   - No exercise for at least 14 days and while symptomatic; consider 7-10 day period of no exercise after symptom resolution
   - Medical evaluation and consider ECG, Echo, and Troponin before a return to exercise progression
   - Cardiology consultation and consider Cardiac MRI if initial evaluation or testing is abnormal
   - Monitor for new symptoms with exercise

4. **Severe illness (hospitalized)**
   - For more severe illness, hospitalization, or ongoing cardiovascular symptoms, a comprehensive medical evaluation and cardiology consultation is recommended*
   - Medical evaluation and consider ECG, Echo, and Troponin before a return to exercise progression
   - Consider Cardiac MRI if initial evaluation or testing is abnormal

**Isolate and contact tracing per public health guidelines**

Asymptomatic, Mild illness, Severe illness

Antibody testing alone should not determine cardiac work-up

For more severe illness, hospitalization, or ongoing cardiovascular symptoms, a comprehensive medical evaluation and cardiology consultation is recommended*

- Medical evaluation and consider ECG, Echo, and Troponin before a return to exercise progression
- Consider Cardiac MRI if initial evaluation or testing is abnormal

- ECG should be compared to previous when available
- Troponin testing (hs-cTnI or cTnI) should be performed after 48 hours without exercise
- Confirmed myocarditis, pulmonary embolism, or other cardiopulmonary disorder should be managed per medical guidelines

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