

**New Canaan**  
***SPORTS MEDICINE***



**New Canaan High School COVID-19 Return to Play Form**

If an athlete has tested positive for COVID-19 disease they must be medically cleared to return to sports. This athlete must be cleared to return to sports activity by a physician or other healthcare provider. Phone or telehealth visits are accepted. Individuals who have had COVID-19 are at risk of developing severe cardiac or systemic complications that can affect participation in sport.

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

Positive test date: \_\_\_\_\_

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**Check Recommendation:**

- Athlete is cleared to return to all athletic activities, including competition and AAP 7 day return-to-play protocol **has been incorporated:**
- Athlete is **cleared to enter** AAP 7 day return-to- play protocol:

**Medical Office Information (Please Print/Stamp):**

***Recommended: Primary Care Physician or MD/DO/APRN***

Physicians Name: \_\_\_\_\_ Office Phone: \_\_\_\_\_

Physicians Address:

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Physicians Signature:

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