Supporting students with Long-COVID

Long-COVID, also known as post-acute sequelae of SARS-CoV-2 (PASC); post-acute COVID-19; chronic COVID, or the umbrella term post-COVID conditions; is defined as a wide range of symptoms and clinical findings four or more weeks after initial COVID-19 infection. Signs and symptoms are unexplained by an alternative diagnosis. Long-COVID occurs in both hospitalized and non-hospitalized patients; meaning that even if the student experienced a mild or asymptomatic COVID-19 infection, the symptoms of long-COVID could be significant. Signs and symptoms may be new, returning, or ongoing, and may include but are not limited to:

- Fatigue
- Headache
- Cognitive difficulties including “brain fog,” lack of concentration, attention problems, difficulty processing information, and short-term memory issues
- Respiratory symptoms like chest tightness and shortness of breath
- Heart palpitations
- Joint or muscle pain
- Dizziness
- Orthostatic intolerance
- Gastrointestinal issues like diarrhea or stomach pain
- Mood/psychological symptoms
- Insomnia/sleep difficulties

Management strategies of long-COVID are similar to other chronic conditions with overlapping symptoms. This includes fatigue and post-exertional malaise of Myalgic Encephalomyelitis/Chronic Fatigue Syndrome (ME/CFS), lightheadedness and racing heart of Orthostatic Intolerance (OI) or Postural Orthostatic Tachycardia Syndrome (POTS), and the headaches and lingering cognitive symptoms of concussions or other brain injuries. It is important for the school nurse to be involved for the development of an Individualized Healthcare Plan (IHP), as necessary, to support the student’s health and safety.

A student experiencing long-COVID or other conditions as a result of the acute infection are eligible for protections and supports under federal disability laws, including the American with Disabilities Act (ADA), the Rehabilitation Act of 1973 (Section 504), and the Individuals with Disabilities Education Act (IDEA). The disability may be new for the student or symptoms from a pre-existing disability could have worsened. The student may require new or different related services, specialized instruction, or reasonable modifications based on their current symptoms. The determinations for eligibility for IDEA or Section 504 will be made by the school team, including the school nurse, on an individual basis.

Helpful resources

Kennedy Krieger Institute Post-COVID-19 Rehabilitation Clinic


“Patients who have recovered from the COVID-19 virus are more likely to have long-term physical, cognitive and emotional effects that linger after recovery. Children who have recovered are no exception.”
**Educational planning**

School plans should focus on conserving the student’s energy and prioritizing demands within school. It is also important to recognize a student should have balance in all aspects of their life, including social and extra-curricular activities. Using a variety of school-based and educational considerations could support student success when returning to the classroom. A list of helpful suggestions may include, but are not limited to:

| Evaluation/Assessment       | • Team meeting 504/IEP  
|                            | • School based PT/OT/SLP  
|                            | • Psychological evaluation  
|                            | • Educational evaluation  
|                            | • School nursing assessment  |
| Scheduling                  | • Staggered return to school  
|                            | • Blended learning (i.e., in-person, virtual, hybrid)  
|                            | • Flexibility in scheduling  
|                            | • Adjusted school days (i.e., shortened, alternative)  
|                            | • Adjusted time in arrival/dismissal/transitions between class times  
|                            | • Breaks, as needed  |
| Environment/Physical        | • Avoid busy or crowded transitions, entry/exit  
|                            | • Preferential classroom location to reduce demands transitioning to different settings  
|                            | • Use of quiet space  
|                            | • Reduced volume activities, noise-cancelling headphones  
|                            | • Adapted PE or reduced demands during physical activity  
|                            | • Elevator privileges  |
| Academic                    | • Prioritizing academic demands  
|                            | • Identifying essential or shortening assignments  
|                            | • Strategies for cognitive difficulties  
|                            | • Increased test taking time  
|                            | • Use of written instruction  
|                            | • Use of checklist, agenda book  
|                            | • Reduced or limited amount of homework  
|                            | • Extra set of books  
|                            | • Use of assistive technology  
|                            | • Copies of teacher notes prior to instruction  |
| Communication               | • Positive reinforcement  
|                            | • Active listening, validation  
|                            | • Distraction techniques  
|                            | • Identification of an academic point person to coordinate and manage missed schoolwork  
|                            | • Preferred staff member for daily check-ins (i.e., resource teacher, guidance counselor)  |
| Staff training              | • Continuing education with student’s multidisciplinary team, healthcare providers, school health, administration, school staff  
|                            | • Emergency care plan (ECP) and/or emergency evacuation plan (EEP) staff training, as necessary  |