



AAP updates interim COVID guidance on masking, treatment, sports

March 24, 2022

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Article type: [News](#)

Topics: [COVID-19](#), [Infectious Diseases](#), [Public Health](#), [Vaccine/Immunization](#)

Editor's note: *The guidance documents have been updated since this story was published. Please visit the [guidance document on masking](#), the [guidance document on treatment](#) and the [guidance document on sports](#). For the latest news on COVID-19, visit <http://bit.ly/AAPNewsCOVID19>.*

In light of declining COVID cases and the availability of new treatments, the AAP has updated its interim guidance on masking, outpatient COVID management and sports.

Face masks and other infection control measures

The Centers for Disease Control and Prevention recently [loosened its mask recommendations](#) for most people outside areas with high COVID community levels. The [AAP's updated guidance](#) lays out situations in which face masks should continue to be worn. Those include individuals ages 2 years and older who are

- in a high COVID level community,
- unvaccinated,
- immunocompromised,
- at higher risk for severe illness, including children and youth with special health care needs, or
- positive for COVID-19 or have been exposed to someone with COVID-19 in accordance [with CDC isolation and quarantine guidance](#).

People who are around children in these scenarios also should consider wearing a mask to protect them.

Masks may be considered for use in preschool, early education and child care settings for children who are at least 2 years old and teachers. All schools should support students and teachers who choose to wear face masks and should continue to encourage SARS-CoV-2 vaccination and testing. In turn, schools should be supported in reinstating face mask requirements if COVID-19 community levels rise or other school conditions warrant.

Masks are part of a comprehensive strategy to control the spread of COVID-19 along with vaccination of everyone ages 5 years and older, ventilation, physical distancing and testing.

Treatment

The AAP has added information about the anti-SARS-CoV-2 monoclonal antibody [bebtelovimab](#) to its [interim guidance on outpatient management of COVID-19](#). The treatment is an option for nonhospitalized individuals 12 years and older weighing at least 40 kilograms who have a mild to moderate COVID-19 infection and are at high risk for progressing to severe disease or hospitalization.

Updates to the guidance also include information on using a higher dose of tixagevimab and cilgavimab (Evusheld).

Patients who received Evusheld at the previously authorized dosing should receive an additional 150 milligrams (mg) of tixagevimab and 150 mg of cilgavimab as soon as possible. Those who have not received Evusheld but are eligible should get a 300 mg dose of tixagevimab and a 300 mg dose of cilgavimab.

There are no recommendations for optimal timing of repeated doses. Evusheld should be deferred at least two weeks after COVID-19 mRNA vaccination. However, individuals who have received COVID monoclonal antibodies can receive a COVID-19 vaccine at any time.

Sports

The [AAP strongly recommends](#) all athletes, coaches, officials and spectators wear a face mask at indoor sports events in a [community with a high COVID-19 level](#).

People in all COVID community levels should wear masks when in areas with close proximity like locker rooms, weight rooms and transportation if an athlete or someone in their home is immunocompromised or at high risk. If masks are removed, athletes should stay 3 feet away from other people.

The AAP has not changed its detailed guidance for athletes returning to sports and other physical activity after having COVID-19.

Resources

- [AAP interim guidance on face masks, sports and management of mild/moderate COVID](#)
- [CDC guidance on masking and other precautions](#)
- [Information for parents from HealthyChildren.org on mask myths](#)
- [CDC guidance for schools during the pandemic](#)
- [AAP interim guidance on school safety during the pandemic](#)