


TABLE 13: Symptom-specific assessment and management considerations for neurologic sequelae of Long COVID

Assessment Element	Assessment Details
History 	<ul style="list-style-type: none"> • Time course of neurologic symptoms • Acute versus chronic • Static versus progressive • Medication/supplement use that may impact signs, symptoms, or assessment parameters (e.g., anticholinergic medications)
Physical exam	<ul style="list-style-type: none"> • Thorough neurological examination to identify focal neurological deficits, as indicated based on the patient's reported symptoms and associated differential diagnosis <ul style="list-style-type: none"> ◦ Cognition, attention/concentration, expressive and receptive speech ◦ Cranial nerves, strength, sensation, reflexes, coordination, gait • If concern for cognitive impairment, see Table 11 [Cognitive Table]
Treatment Element	Treatment Details
Non-pharmacologic management	<ul style="list-style-type: none"> • For patients who achieve a return to ADLs, see Figure 1 for return to activity guidance. • For patients with headaches, consider ergonomic optimization, gentle stretching, deep breathing exercises, and acupuncture
Pharmacologic management	<ul style="list-style-type: none"> • Consider weaning/de-prescribing antihistamine, anticholinergic, antidepressant/anxiolytic, and muscle relaxant medications • For rebound headaches due to regular overuse of abortive headache medications (including acetaminophen and NSAIDs), reduce use of these medications to < 3 times weekly • See Table 5 for commonly used medications for Long COVID
Referral, as needed	<ul style="list-style-type: none"> • To emergency department, if new or worsening focal neurologic deficits • To physiatry or neurology, if chronic focal neurologic sequelae affecting gait, mobility, cognitive status, and/or activities of daily living • To neuroimmunology, if laboratory abnormalities concerning for neuroimmune dysregulation or paraneoplastic conditions (e.g. abnormal lymphocyte or immunoglobulin levels, paraneoplastic autoantibodies)⁸

Abbreviations: ADLs (activities of daily living), NSAIDs (non-steroidal anti-inflammatory drugs), MRI (magnetic resonance image).

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