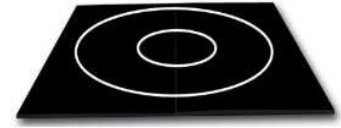


FACILITY HYGIENE

“TOP 10” CHECK SHEET



The following is a quick guide designed to decrease the risk of contracting spreading of skin lesions. Not all skin issues will be prevented, even when following this guide. However, significant science and common sense show that these guidelines may be effective in decreasing the prevalence of skin lesions. The MHSAA is NOT offering medical or legal advice, simply suggestions that may assist in this area.

| | |
|----|---|
| 1 | Sanitize mats (including wall mats) <u>BEFORE</u> and <u>AFTER</u> each practice or use (with appropriate cleaners). Use “fresh” supplies for each scheduled cleaning. Inspect mats daily. Repair according to manufacturer’s recommended procedures. |
| 2 | Have athletes put on shoes <u>AFTER</u> entering the wrestling room or practice facility. Have athletes take shoes off <u>BEFORE</u> leaving the wrestling room or practice facility. |
| 3 | Provide “booties” (slip on coverings) available to go over wrestling shoes in the event an athlete or coach must leave the room quickly. |
| 4 | Have appropriate material available onsite to clean mats in the event of contamination (blood, vomit, etc.) during practice or events. Fresh tape should be used <u>EACH</u> time the mats are set up. |
| 5 | Sanitize equipment used to clean mats on a <u>DAILY</u> basis. Use appropriate cleaners (including hot water and bleach) to sanitize equipment. Equipment used to clean the mats, must <u>ONLY</u> be used for this task and no other. |
| 6 | Possibly provide a “Sole Mat” (by “Kenshield”) or, at minimum a wet towel with approved cleaner for instances where a wrestler must leave or enter the room with their wrestling shoes on and “booties” are not available. |
| 7 | Provide drinking water in the wrestling room or practice facility to minimize the times athletes exit and enter the room wearing wrestling shoes. |
| 8 | Items such as a “Sterilazer” are acceptable, but should never completely replace mopping. Wet mopping removes grit and particles that can cause skin abrasions. |
| 9 | <u>INSIST</u> parents or non-participants REMOVE and leave shoes OUTSIDE of the wrestling room or practice facility. |
| 10 | ALL above guidelines and practices should be followed by middle school and <u>ESPECIALLY</u> youth programs that often use the same facility. |

ATHLETE HYGIENE

“TOP 10” CHECK SHEET



The following is a quick guide designed to decrease the risk of contracting spreading of skin lesions. Not all skin issues will be prevented, even when following this guide. However, significant science and common sense show that these guidelines may be effective in decreasing the prevalence of skin lesions. The MHSAA is NOT offering medical or legal advice, simply suggestions that may assist in this area.

| | |
|----|---|
| 1 | Shower <u>IMMEDIATELY</u> after each practice or competition. Simple soap and water is the <u>BEST</u> cleaning agent. <u>NEVER</u> share towels, bar soap, razors, nail clippers, athletic equipment, gear or water bottles. |
| 2 | Refrain from shaving immediately before and after practice or competitions. Athletes should refrain from body or “cosmetic” shaving (chest, legs, etc.) during the season. This will increase the risk of a skin infection. |
| 3 | Nails should be kept trimmed and filed smooth on a regular basis to avoid causing cuts or skin abrasions on other athletes which may create a higher risk of infection. |
| 4 | Abrasions or open sores <u>MUST</u> be evaluated by your coach or Athletic Trainer (ATC). Keep them clean and covered with proper dressings. Merely covering <u>infectious</u> , <u>contagious</u> or <u>draining</u> lesions is <u>NOT</u> acceptable. |
| 5 | Inform coach and trainer about any suspicious skin conditions <u>BEFORE</u> practice. Consider withdrawal until the condition is evaluated by your Health Care Provider (HCP). If it is considered infectious, wait to return to activities until cleared by your HCP using the required Communicable Disease “Skin Form”. Also have other teammates evaluated for such conditions. |
| 6 | Change any and all tape used on your body (hands, fingers, legs, etc.) after <u>EACH</u> match at a competition. |
| 7 | Consider wearing knee, elbow pads, and smooth or “Lycra” style long sleeve shirts (and possibly tights) during practice to reduce skin abrasions for you and your workout partners. |
| 8 | Sanitize equipment on a <u>DAILY</u> basis, and work-out clothing after <u>EACH</u> practice (<i>using hot water and bleach</i>). Wash smaller pads (<i>for knees or elbows</i>) often, if not daily, especially if soiled with contaminated material. |
| 9 | Consider maintaining multiple days’ worth of workout gear to always have fresh and clean gear <u>DAILY</u> . <u>NEVER</u> re-use “dirty” clothing. Always place dirty workout gear in a <u>separate</u> plastic bag, <u>NOT</u> directly into your duffle bag. |
| 10 | Shower at competitions with simple soap and water if time permits. Soap & water based wipes (“Sage Products” disposable washcloths) may also be utilized. Hand sanitizer as a replacement to showering is <u>NOT</u> recommended. |

HOME HYGIENE



“TOP 10” CHECK SHEET

The following is a quick guide designed to decrease the risk of contracting spreading of skin lesions. Not all skin issues will be prevented, even when following this guide. However, significant science and common sense show that these guidelines may be effective in decreasing the prevalence of skin lesions. The MHSAA is NOT offering medical or legal advice, simply suggestions that may assist in this area.

| | |
|----|--|
| 1 | Encourage your child to shower with simple soap & water <u>IMMEDIATELY</u> after each practice or competition. Soap & water based wipes may be used until a shower can be taken. Waiting to shower once home is <u>NOT</u> encouraged and may be too late. |
| 2 | Remind your child to avoid “cosmetic” shaving (chest, legs, etc.) as it may make the skin open to infection. Encourage your child to shave (if needed) at home, and to avoid any shaving immediately before or after practice. |
| 3 | Nails should be kept trimmed and filed smooth on a regular basis to avoid causing cuts or skin abrasions on other athletes which may create a higher risk of infection. |
| 4 | Check your child daily for abrasions or open sores. Connect with the coach and/or Certified Athletic Trainer (ATC) or Health Care Provider if needed. |
| 5 | Merely covering <u>infectious</u> , <u>contagious</u> or <u>draining</u> lesions is <u>NOT</u> acceptable. Appropriate medical and procedural steps <u>MUST</u> be taken before returning to <u>ANY</u> participation. |
| 6 | Encourage your child to shower at competitions with simple soap and water if time allows. Soap & water-based wipes (“Sage Products” disposable wash cloths) may also be utilized. Hand sanitizer as a replacement to showering is <u>NOT</u> recommended. |
| 7 | Encourage your child to wear smooth or “Lycra” style long sleeve shirts (and possibly tights) and other padding during practice to reduce skin abrasions. Remind your child to place dirty work out gear into a <u>separate</u> plastic bag. |
| 8 | Encourage your wrestler to keep their athletic locker clean and <u>NEVER</u> leave workout clothes or towels in it overnight. |
| 9 | Consider maintaining multiple days’ worth of workout gear to always have fresh and clean gear DAILY. Having a fresh towel daily is encouraged. |
| 10 | Sanitize equipment on a <u>DAILY</u> basis, and workout clothing after <u>EACH</u> practice (<i>using hot water and bleach</i>). Wash smaller pads (<i>for knees or elbows</i>) often, if not daily, especially if soiled with contaminated material. |



Wrestling: Skin Protection Guidelines



The following is a guide designed to decrease the risk of contracting or spreading of skin lesions. Not all skin issues will be prevented, even when following this guide. However, significant science and common sense show that these guidelines may be effective in decreasing the prevalence of skin lesions. PLEASE NOTE: The MHSAA is **NOT** offering medical or legal advice, simply offering suggestions that may assist in this area.

A school's sports medicine staff is responsible for educating everyone involved regarding infection control policies and procedures. This includes coaches, athletes, parents, custodial staff and doctors as needed.

WRESTLER HYGIENE

1. Shower IMMEDIATELY after every practice (*while your pores are still open*) with simple soap and water.
2. Simple soap and water is recommended as the best cleaning agent.
3. If possible, shower after every match at a competition with simple soap and water.
If not possible, soap and water skin wipes could be utilized, but should not be a substitute if a shower is possible.
4. NEVER share towels, bar soap, razors, nail clippers, athletic gear or water bottles.
5. Athletes should refrain from body shaving, and ANY shaving immediately before or after practice.
6. Keep nails trimmed and filed smooth to avoid scratching teammates, which may create an avenue for infection.
7. Clothing that a wrestler's unwashed body comes in contact with must be considered "dirty".
8. The use of general hand sanitizer on the face, neck or other body parts is NOT an effective way to prevent skin ailments and should NEVER replace actual showering with soap and water.
9. Shower before using whirlpools or common tubs. Do NOT use either with open wounds, scrapes or scratches.

CLOTHING AND GEAR

All clothing and wrestling gear is "dirty" after EACH activity.

1. "Dirty" clothing (practice gear, undergarments, outerwear, uniforms, etc.) MUST be laundered daily.
2. It is recommended that workout clothing be "white" or "workout grey" so that it may be washed with BLEACH IN HOT WATER AND DRIED IN A HOT DRYER SETTING. (*Check to make sure your clothing can handle these conditions.*)
3. Wrestlers are encouraged to wear long sleeve smooth "Lycra" type shirts (and possibly tights) during practice, as this may reduce skin abrasions for both the offensive and defensive wrestlers.
4. Wrestlers are encouraged to change into clean singlets and gear periodically at tournament type events.
5. Wrestlers are encouraged to take OFF their wrestling shoes when not competing at the various events.
6. If you choose not to shower at school (NOT RECOMMENDED), shower immediately once home and wash all clothes there after following recommendations above.
7. Store practice clothes in a SEPARATE plastic bag after changing, do NOT let them come in direct contact with your gym bag or backpack. Anything coming in contact with your practice clothes, gear, or unwashed body MUST also be washed.
8. Equipment (head gear, knee sleeves, ankle braces, wrestling shoes, etc.) should be disinfected DAILY in the manufacturer's recommended manner.
9. Tape worn on the body (finger, wrists, hands, legs, etc.) should be changed after each meet/match.

**If clean athletic gear is put in a dirty laundry or gym bag, the gear immediately becomes "dirty" and should be cleaned properly.*

PRACTICE ROOM HYGIENE

1. Clean mats *and* walls PRIOR to and AFTER each practice (*this includes youth level practices that take place on the same mats in the same facility*) with a disinfectant approved by the EPA.
2. Inspect mats daily. Repair according to manufacturers recommended procedures.
3. Items used to mop the mats will only be used for the wrestling mats and must be cleaned after daily use.
* It is recommended that these items are WASHED DAILY WITH BLEACH IN HOT WATER & DRIED IN A HOT SETTING.
4. Put wrestling shoes on in the practice room. This will eliminate one of the leading means of fungus entering the room. Grit brought in from outside the practice room is a contributor to abrasions and the transport of fungus.
5. Do NOT leave the practice room with your wrestling shoes on. Removing shoes or using booties (skins) is recommended. Having a few sizes available for when an athlete has to go to the bathroom is recommended.
6. If there will be traffic in and out of the room, use a towel as a floor mat, soaked with cleaning solution, to wipe off shoes upon entry, or use an item such as a "Sole Mat".
7. Fresh mat tape should be used EACH time the mats are set-up.

**Have water on hand in the room to decrease the frequency of needing to leave the room.*

#1: <https://www.epa.gov/pesticide-registration/selected-epa-registered-disinfectants>

MEET/TOURNAMENT MAT HYGIENE

1. Mats should be disinfected prior to each event, practice or competition, with a disinfectant approved by the EPA.
2. Hosts are encouraged to re-clean the mats after warm-ups on tournament days.
3. Hosts are encouraged to re-clean the mats during each tournament break.
4. Encourage wrestlers to cover or remove shoes when leaving mat-side.
5. Hosts could place "Sole Mats" near the mats that wrestlers may use before stepping on the mat.
6. Those teams/coaches/athletes possessing the MHSAA "Skin Form" **MUST** present it PRIOR to weigh-ins.
No coach, parent or athlete shall produce this form **AFTER** weigh-ins or inspection.

**Programs should invest in equipment made to clean mats quickly, so events are not delayed by the cleaning process.*

SKIN CHECKS/PROTOCOL

1. Remind athletes of protocol regularly.
2. Post protocols and educational materials in the locker room as well as the wrestling room.
3. Each team's coach should perform skin checks DAILY.
4. Athletic trainers (ATC's) should perform skin checks weekly and/or the day PRIOR to competition.
5. Any athlete with a suspicious lesion should be kept OUT of the wrestling room until seen and cleared by a medical professional. MERELY COVERING THE LESION IS NOT AN OPTION.

**Infected athletes practicing without a partner, in the wrestling room, during practice may spread infectious germs to the mat, which can subsequently infect another wrestler.*

SKIN CHECKS AT COMPETITIVE EVENTS

1. Skin checks should be performed by a medical professional, trained in recognizing skin lesions, during weigh-ins at every event. If appropriate medical personnel are unavailable, checks will be performed by the registered officials.
2. MHSAA "Skin Form" form **MUST** be provided and collected by the meet/tournament director PRIOR to weigh-ins.
3. Only the MHSAA "Skin Form" shall be used. The form must be signed by an MD, DO, PA or NP and submitted PRIOR to weigh-in.
4. Skin checks should be performed on each day of competition, including each day of multi-day tournaments.
5. If weigh-ins are prior to the day of competition, skin checks must still occur on each day of competition.

REPORTING LESIONS TO MEDICAL STAFF

Bacteria, virus and fungus occur on the skin naturally. It is when there is a disruption of the skin that they typically propagate and cause an infection. Any disruption of the skin is an avenue to infection.

1. Athletes should report all abrasions, cuts, and skin lesions to an ATC for proper cleansing, treatment, and dressing. All acute, uninfected wounds (*e.g., abrasions, blisters, lacerations*) should be covered with a semi-occlusive or occlusive dressing (*e.g., film, foam, hydrogel, or hydrocolloid*) until healing is complete to prevent contamination from infected lesions, items, or surfaces.

MEDICAL REQUIREMENTS/CONSIDERATIONS

1. Team should identify a "go-to" medical clinic and/or dermatologist specifically trained in skin issues of wrestlers.
2. Only the MHSAA **Communicable Disease Physicians Evaluation Form ("Skin Form")** is accepted.
DOCTORS NOTES DO NOT QUALIFY.
3. Completed MHSAA "Skin Form" **MUST** be given to the person performing the skin checks PRIOR to weigh-ins.
4. In the event of "Home Weigh-Ins", a completed MHSAA "Skin Form" **MUST** be presented to the official performing skin checks on the day of competition.
5. Athletes with a history of outbreaks may want to check with their Health Care Provider for more information that may help alleviate these outbreaks.
6. Proper treatment of Ringworm - multiple lesions or lesions on the scalp generally require oral antibiotics. Singular lesions, not on the scalp, may be treated with ointment. Please check with your Health Care Provider for more information.
7. Diagnosis of MRSA warrants cultures of all wrestlers in contact with the infected wrestler. Skin and nose cultures are recommended. Many skin infections develop a secondary infection of another type.
8. Virtually every skin lesion should improve by the third day of treatment. If no improvement occurs within 2-3 days, return to your doctor for a re-evaluation.
9. Don't blow-off "minor" skin injuries, these breaks in the skin open the pathway for all types of infection.

RESOURCES FOR FURTHER READING:

- The Mat Doc
 - <http://www.thematdoc.com/>
- NATA position statement
 - <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2902037/>

WIPES: The wipes mentioned are those that are "soap & water" based and are NOT in reference to typical "baby" wipes.

Special thanks to:

John Stawinski, MA, ATC, John Adams, and Dr. B.J. Anderson ("The Mat Doc") www.thematdoc.com
for their input in developing this material.

NFHS/MHSAA COMMUNICABLE DISEASE - PHYSICIAN EVALUATION -

Name: _____

Date of Exam: ____ / ____ / ____

Diagnosis: _____

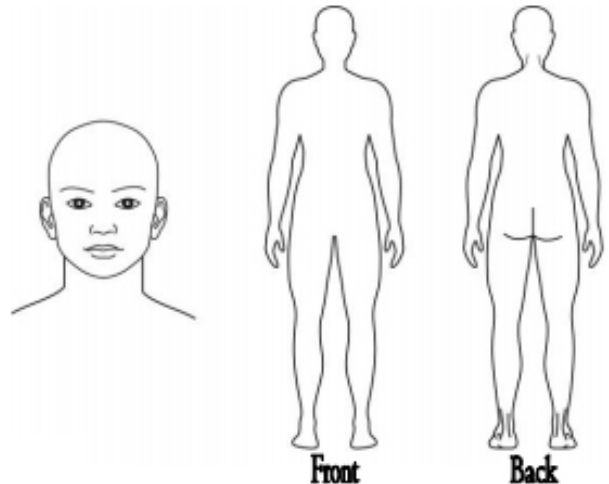
Mark Location AND Number of Lesion(s)

Location AND Number of Lesion(s): _____

Medication(s) Used to Treat Lesion(s): _____

Date Treatment Started: ____ / ____ / ____ Time: _____

Earliest Date the Wrestler May Return to Participation: ____ / ____ / ____



Provider Signature: _____

Office Phone #: _____

Provider Name (Must Be Legible): _____ (MD, DO, PA or NP)

Office Address: _____

Below are some treatment guidelines that suggest MINIMUM TREATMENT before return to wrestling:

Bacterial Diseases (impetigo, boils): To be considered "non-contagious," all lesions must be scabbed over with no oozing or discharge and no new lesions should have occurred in the preceding 48 hours. Oral antibiotic for 72 hours is considered a minimum to achieve that status. If new lesions continue to develop or drain after 72 hours, MRSA (Methicillin Resistant Staphylococcus Aureus) should be considered.

Herpetic Lesions (Simplex, fever blisters/cold sores, Zoster, Gladiatorum): To be considered "non-contagious," all lesions must be scabbed over with no oozing or discharge and no new lesions should have occurred in the preceding 72 hours. For a first episode of Herpes Gladiatorum, wrestlers should be treated and not allowed to compete for a minimum of 10 days. If general body signs and symptoms like fever and swollen lymph nodes are present, that minimum period of treatment before return to wrestling should be extended to 14 days. Recurrent outbreaks require a minimum of 120 hours of oral anti-viral treatment, again so long as no new lesions have developed and all lesions are scabbed over.

Tinea Lesions (ringworm on scalp or skin): Oral or topical treatment for 72 hours on skin and oral treatment for 14 days on scalp.

Scabies, Head Lice: 24 hours after appropriate topical management.

Conjunctivitis (Pink Eye): 24 hours of topical or oral medication and no discharge.

Molluscum Contagiosum: Upon treatment with curettage and hyfrecator, may cover with bioocclusive and wrestle immediately.

Note to Appropriate Health-Care Professionals: Non-contagious lesions do not require treatment prior to return to participation (e.g. eczema, psoriasis, etc.). Please familiarize yourself with NFHS Wrestling Rules 4-2-3, 4-2-4 and 4-2-5 which states:

"ART. 3 . . . If a participant is suspected by the referee or coach of having a communicable skin disease or any other condition that makes participation appear inadvisable, the coach shall provide current written documentation as defined by the NFHS or the state associations, from an appropriate health-care professional stating that the suspected disease or condition is not communicable and that the athlete's participation would not be harmful to any opponent. This document shall be furnished at the weigh-in for the dual meet or tournament. The only exception would be if a designated, on-site meet appropriate health-care professional is present and is able to examine the wrestler either immediately prior to or immediately after the weigh-in. Covering a communicable condition shall not be considered acceptable and does not make the wrestler eligible to participate."

"ART. 4 . . . If a designated on-site meet appropriate health-care professional is present, he/she may overrule the diagnosis of the appropriate health-care professional signing the medical release form for a wrestler to participate or not participate with a particular skin condition."

"ART. 5 . . . A contestant may have documentation from an appropriate health-care professional only indicating a specific condition such as a birthmark or other non-communicable skin conditions such as psoriasis and eczema, and that documentation is valid for the duration of the season. It is valid with the understanding that a chronic condition could become secondarily infected and may require re-evaluation."

Once a lesion is considered non-contagious, it may be covered to allow participation.

DISCLAIMER: The National Federation of State High School Associations (NFHS) shall not be liable or responsible, in any way, for any diagnosis or other evaluation made herein, or exam performed in connection therewith, by the above named provider, or for any subsequent action taken, in whole or part, in reliance upon the accuracy or veracity of the information provided herein.

Revised/Approved by NFHS SMAC – April 2018

NFHS/MHSAA MEDICAL RELEASE FORM FOR WRESTLER TO PARTICIPATE WITH SKIN LESION(S)

The National Federation of State High School State Associations' (NFHS) Sports Medicine Advisory Committee has developed a medical release form for wrestlers to participate with skin lesion(s) as a suggested model you may consider adopting for your state. The NFHS Sports Medicine Advisory Committee (SMAC) conducted a survey among specialty, academic, public health and primary care physicians and reviewed extensively the literature available on the communicability of various skin lesions at different stages of disease and treatment. No definitive data exists that allow us to absolutely predict when a lesion is no longer shedding organisms that could be transmitted to another wrestler. Another finding from the survey was the significant differences that exist among physicians relating to when they will permit a wrestler to return to participation after having a skin infection.

Neither the NFHS nor the NFHS SMAC presumes to dictate to professionals how to practice medicine. Nor is the information on this form meant to establish a standard of care. The NFHS SMAC does feel, however, that the guidelines included on the form represent a summary consensus of the various responses obtained from the survey, from conversations and from the literature. The committee also believes that the components of the form are very relevant to addressing the concerns of coaches, parents, wrestlers and appropriate health-care professionals that led to the research into this subject and to the development of this form.

GOALS FOR ESTABLISHING A WIDELY USED FORM:

1. Protect wrestlers from exposure to communicable skin disorders. Although most of the skin lesions being discussed generally have no major long term consequences and are not life threatening, some do have morbidity associated with them and student-athletes should be protected from contracting skin disorders from other wrestlers or contaminated equipment such as mats.
2. Allow wrestlers to participate as soon as it is reasonably safe for them and for their opponents and/or teammates using the same mat.
3. Establish guidelines to help minimize major differences in management among appropriate health-care professionals who are signing "return to competition forms". Consistent use of these guidelines should reduce the likelihood wrestlers catching a skin disease from participation and suffering from inequalities as to who can or cannot participate.
4. Provide a basis to support appropriate health-care professional decisions on when a wrestler can or cannot participate. This should help the appropriate health-care professional who may face incredible pressure from many fronts to return a youngster to competition ASAP. This can involve any student athlete who never wins a match or the next state champion with a scholarship pending.

IMPORTANT COMPONENTS FOR AN EFFECTIVE FORM:

1. Each state association needs to determine which appropriate health-care professional can sign off on this form.
2. Inclusion of the applicable NFHS wrestling rule so appropriate health-care professionals will understand that covering a contagious lesion is not an option that is allowed by rule. Covering a non-contagious lesion after adequate therapy to prevent injury to lesion is acceptable.
3. Inclusion of the date and nature of treatment and the earliest date a wrestler can return to participation. This should mitigate the need for a family to incur the expense of additional office visits as occurs when a form must be signed within three days of wrestling as some do.
4. Inclusion of a "bodygram" with front and back views should clearly identify the lesion in question. Using non-black ink to designate skin lesions should result in less confusion or conflict. Also including the number of lesions protects against spread after a visit with an appropriate health-care professional.
5. Inclusion of guidelines for minimum treatment before returning the wrestler to action as discussed above. This should enhance the likelihood that all wrestlers are managed safely and fairly.
6. Inclusion of all of the components discussed has the potential to remove the referee from making a medical decision. If a lesion is questioned, the referee's role could appropriately be only to see if the coach can provide a fully completed medical release form allowing the wrestler to wrestle.

This form may be reproduced, if desired, and can be edited in anyway for use by various individuals or organizations. It may also be modified and used for sports other than wrestling. In addition, the NFHS SMAC would welcome comments for inclusion in future versions, as this form will be reviewed yearly, and modified as needed.

Revised/Approved by NFHS SMAC - April 2018