

PHYSICIAN RELEASE FOR A WRESTLER TO PARTICIPATE WITH SKIN LESION(S)

The National Federation of High School State Associations has developed this release form. The Sports Medicine Advisory Committee (SMAC) to the VHSL 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. 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 Sports Medicine Advisory Committee nor the VHSL presumes to dictate to professionals how to practice medicine. The information on this form is not meant to establish a standard of care. However, the Sports Medicine Advisory Committee does believe the guidelines included on this form represent a summary consensus of the various responses obtained from the survey, conversations with medical professionals and from their literature. The committee also believes the components of this form are very relevant to addressing the concerns of coaches, parents, wrestlers and physicians that led to the research into this subject and to the development of this form.

GOALS FOR ESTABLISHING THIS 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 (i.e. MRSA) 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 physicians who are signing "return to competition forms". Consistent use of these guidelines should protect wrestlers from catching a skin disease from participation and from inequalities as to who can or cannot participate.
4. Provide a basis to support physician decisions on when a wrestler can or cannot participate. This should assist the physician who may face incredible pressure from many fronts to return a wrestler to competition ASAP. This could involve the first-year wrestler who never wins a match or the next state champion with a scholarship pending.

IMPORTANT COMPONENTS FOR FORM TO BE AFFECTIVE:

1. Inclusion of the applicable VHSL wrestling rule so physicians will understand that covering a lesion is not an option that is allowed by the rule.
2. Inclusion of the date and nature of treatment with the earliest date a wrestler can return to participation. This should minimize the need for a family to incur the expense of additional office visits regarding the same lesion.
3. 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.
4. Inclusion of a line to require the number of lesions or clusters of lesions that were present at the time of evaluation to reduce the chance of a new lesion appearing in a different area to be added to the form after MD evaluation.
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 a 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. In addition, the Sports Medicine Advisory Committee for the VHSL would welcome comments and suggestions for inclusion in future versions as this will continue to be a work in progress. VHSL Sports Medicine Advisory Committee of SMAC

Therefore, because the Northern Virginia Wrestling Federation per its bylaws follows VHSL rules, this form is required for any wrestler to participate at any NVWF meet or practice. Failure of a wrestler, parent or coach to follow up and use this form immediately under reasonable and customary care guidelines will result in immediate suspension and possible expulsion along with a fine by the NVWF Commissioner.*

NORTHERN VIRGINIA WRESTLING FEDERATION

Name of NVWF Club wrestler is a member: _____

PHYSICIAN RELEASE FOR WRESTLERS TO PARTICIPATE WITH SKIN LESION(S)

NAME: _____ DATE OF EXAM: ____ / ____ / ____

Mark Location of Lesion(s)



Front



Back

Diagnosis: _____

Location of Lesion(s): _____

Date Treatment Started: ____ / ____ / ____

Medication(s) used to treat lesion(s): _____

Earliest date may return to participation: ____ / ____ / ____

Total number of locations a lesion is present during evaluation: _____ (must equal lesions marked on bodygram)

Physician Name (Printed or Typed): _____

Provider Signature: _____
(M.D. OR D.O.)

Office Phone: _____

Office Address: _____

Note to Providers: Non-contagious lesions do not require treatment prior to return to participation (e.g. eczema, psoriasis, etc) Please familiarize yourself with VHSL rule below. VHSL Rule 4-2-3 states: "If a participant is suspected by the referee of having a communicable skin disease or any other condition that makes participation appear inadvisable, his coach shall provide current written documentation from a physician stating that the suspected disease or condition is not communicable and that the athlete's participation would not be harmful to his opponent. **Covering a communicable condition shall not be considered acceptable and does not make the wrestler eligible to participate.** This document shall be furnished at the weigh-in or upon arrival at the site of the dual meet or tournament."

NOTE: If an on-site tournament physician is present. She/he may overrule the diagnosis of the physician signing this form either for or against participation.

Below are some treatment guidelines that suggest minimum treatment before return to wrestling:
Bacterial diseases (impetigo, boils): Oral antibiotic for 2 days with no drainage, oozing or moist lesions.
Herpetic lesions (Simplex fever blisters, Zooster, Gladiatorum): No new lesions in 48 hours and all lesions scabbed over. No oral treatment is required.
Tinea lesions (ringworm, scalp, skin): Oral or topical treatment for 7 days on skin and 14 days on scalp.
Scabies, Head Lice: 24 hours after appropriate topical management.
Conjunctivitis: 24 hours of topical or oral medication and no discharge
Molluscum Contagiosum: 24 hours after curretage

*Failure of an NVWF wrestler to provide this form when necessary will result in immediate removal from any event.