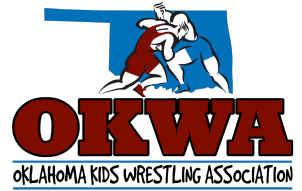


PHYSICIAN RELEASE FOR WRESTLER TO PARTICIPATE WITH SKIN LESION

THIS FORM HAS TO BE DATED WITHIN 7 DAYS OF EVENT (2 pages)

(BODY FORM on page 2 must be filled out and must accompany page 1)



Wrestler's Name: _____ Date of Exam: _____

Diagnosis _____

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

Date Treatment Started: _____

Earliest Date may participate: _____

Physician Signature _____ Office Phone #: _____

Physician Name (Printed or Typed) _____

Office Address _____

Note to Physicians: Non-contagious lesions do not require treatment prior to return to participation.

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 a physician 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. The only exception would be if a designated, on-site meet physician 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.

If a designated on-site meet physician is present, he/she may overrule the diagnosis of the physician signing the physician's release form for a wrestler to participate or not participate with a particular skin condition."

A contestant may have documentation from a physician 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 not considered contagious, it may be covered to allow participation.

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 three days is considered a minimum to achieve that status. If new lesions continue to develop or drain after 72 hours,

CA-MRSA(Methicillin Resistant Staph) should be considered and minimum oral antibiotics should be extended to 10 days before returning the athlete to competition or until all lesions are scabbed over, whichever occurs last.

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 48 hours. For primary (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 should be extended to 14 days. Recurrent outbreaks require a minimum of 120 hours or five full days of oral anti-viral treatment, again so long as no new lesions have developed and all lesions are scabbed over.

Tinea Lesions (ringworm scalp, skin): Oral or topical treatment for 72 hours on skin and 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: 24 hours after curettage.

Wrestler's Name: _____

Date of Exam: _____

ALL LOCATIONS MUST BE MARKED FRONT AND BACK

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