

UHSAA Sports Medicine Handbook

Updated: July 2021



Physical Examination

SECTION 13: Physical Examination Required

No student shall be eligible to compete in any athletic contest sponsored by this Association unless such student has a physician's certificate stating that he/she is physically able to compete in inter-school athletic contests.

Interps & Guidelines 1.13.1: HEALTH EXAMINATION POLICY

A. A health examination must be performed and the student athlete cleared for participation in a sport before any student may compete in athletic activities sponsored by this Association. It is recommended that the 4th edition PPE forms from the American Academy of Pediatrics, or an equivalent, be used as the appropriate assessment for student athletes.

B. To better maintain an efficient and accurate accounting of student athlete pre-participation physical exams (PPE's) in Register My Athlete, it is proposed that pre-participation physical exams have a common expiration date, so as to facilitate the current medical status of the student athlete. It is proposed that the pre-participation physical exam date should be performed on or after April 15th to be valid for the following school YEAR through July 15th of that year. (EXAMPLE: APRIL 15, 2021 GOOD THRU JULY 15, 2022).

C. A properly completed and signed Pre-Participation Athletic Health Examination Form indicating the student's clearance to participate plus a properly completed Disclosure and Consent Form must be on file at the school. The health examination should be completed and the form signed by a qualified medical professional, operating within the legal scope of their practice. Forms may be obtained on the UHSAA Website. These are minimum requirements.

Interps & Guidelines 1.13.2: COLD WATER IMMERSION

If exertional heat stroke is suspected, onsite cooling using cold water immersion before transport to the hospital. Cold water immersion tubs are available for onsite cooling.

Cold water immersion (usually understood as circulating, ice-water immersion) is considered the most effective strategy for rapid treatment of exertional heat stroke. The goal in any exertional heat stroke case should be to cool the athlete down to 102 degrees Fahrenheit within the first 30 minutes after collapse, prior to Emergency Medical Services (EMS) transport.

Accurate temperature measurement, via rectal thermometry, (PERFORMED BY HEALTH CARE PERSONNEL) is recommended. Exertional heat stroke is suspected if body temperature is higher than 105 degrees Fahrenheit and signs of central nervous system dysfunction are present (i.e. disorientation, confusion, dizziness, irritability, headache, inability to walk, loss of balance or muscle function, vomiting, diarrhea, loss of consciousness).

Working with EMS personnel toward a policy of "cool first, transport second" is the standard for suspected exertional heat stroke. Cooling an athlete via cold water immersion, if performed immediately, (HAS BEEN PROVEN TO) provides a 100% survival rate.

Interps & Guidelines 1.13.3: EMERGENCY ACTION PLAN

As part of each school's Emergency Action Plan (EAP), automated external defibrillators (AEDs) are accessible at (TO) each venue for early defibrillation by trained personnel for suspected sudden cardiac arrest (SCA).

Prompt recognition of SCA, immediate activation of the EMS system, early CPR, and immediate retrieval and application of the AED should be the initial steps of a comprehensive and thoughtful EAP. First responder programs, such as Anyone Can Save A Life (anyonecansavealife.org) and public access to AEDs are strongly encouraged.

Consensus guidelines and several public-access defibrillation studies uniformly support access to early defibrillation, targeting a time interval of less than 3 to 5 minutes from collapse to first shock. The EAP also should identify the individual(s) responsible for documentation of personnel training, equipment maintenance, actions taken during an emergency, and the post-event evaluation of the emergency response.

Practice Limitations

Interps & Guidelines 2.2.5: PRACTICE LIMITATIONS

A 20-hour practice limit is in effect for all UHSAA sponsored sports from August 1 to June 1, and for all UHSAA sponsored activities (music, speech/debate, theater/drama) from September 1 to June 1. The practice limit includes one (1) day off each week (Monday-Sunday). Competition days, including travel, will count as three (3) hours. Practice limitations include anytime a team is together which includes, but is not limited to: team practice, team dinners, film time, weight training, individual instruction, etc. Restrictions include any meeting of the team and/or individual sport-related contact with the coach.

Q&A: Practice Limitations

Q1. If a team has to travel six (6) hours to a location on the day of the tournament, and then competes in the tournament, which could be eight (8) hours, does that mean the team has used 14 hours in one day?

A1. No. The competition day is three (3) hours total, which includes travel time.

Q2. If a team travels 5 (five) hours the day before a contest, and they stop to do a one (1) hour walk through/practice, does that count for 6 (six) hours?

A2. No. The travel is part of the competition day (3 hours), but the walk through/practice would be included in the 20 hours.

Q3. Does time during an athletic period or the watching of film during the school day (including lunch time) count towards the 20-hour practice limitation?

A3. Yes. Anytime the team meets counts towards the 20-hour practice limitation. An exception is time used for study hall, if the focus of the study hall is academics, and the majority of the student athletes are using the time as a study hall.

Q4. Does a weight lifting class count towards the 20 hours?

A4. If the weight lifting class is not open to all students, then the time spent in class would count. If the majority of the class belongs to one specific team, but other students have the opportunity to be in the class as well, the time does not count.

Q5. If a team meets at the home of a team member for a "team night" (with or without the coach), does this count towards the 20-hour practice limitation?

A5. Yes. Anytime the team gets together for team meetings, team dinners, team film, etc. (with or without the coach) it counts towards the 20-hour practice limitation.

Q6. If an individual meets with the coach to go through skill development or talk X's and O's, does that count towards the 20-hour practice limitation?

A6. Yes. Anytime a student-athlete meets with a coach for individual instruction related to the sport, it counts towards the 20-hour practice limitation.

Q7. Does participation in an assembly count towards the 20 hours?

A7. No. Participation in assemblies does not count towards the 20 hours.

Q8. If students are participating in a fundraiser, does the time spent on the fundraiser count towards the 20 hours?

A8. If revenue is for a specific team account, the time spent at the fundraiser would count towards the 20 hours. If the revenue raised is going towards an individual's account, the time would not count. Anytime a fundraiser is required, the time must be counted.

Q9. If actors in a school play rehearse for three hours and the band rehearses for seven hours and the school choir for two hours. how is this calculated?

A9. Hours spent rehearsing for a school play is a school or district decision.

Coaches' Certification

SECTION 1: Coaches' Certification

All coaches (paid or nonpaid) shall be certified prior to coaching. The responsibility for verifying the certification of the coaches lies with the schools, districts or governing boards of charter or private high schools.

Interps & Guidelines 5.1.1: COACHES' CERTIFICATION

- A. The Utah High School Activities Association (UHSAA) and the Utah State Board of Education (USBE) requires that all individuals employed or acting as coaches meet specific training and certification requirements outlined by the UHSAA and USBE.
- B. Coaches' certification includes eight components and shall be completed prior to the start of any coaching. The eight (8) components are: Background Check; First Aid Training; CPR Training; yearly Concussion Training; yearly Child Sexual Abuse Prevention Training; yearly Bullying, Cyber-bullying, Hazing, Harassment, and Retaliation Training; the NFHS "Fundamentals of Coaching" course; and to meet a set of professional standards that are consistent with the Utah Educator Professional Standards as described in USBE Rule R277-515. The training must be completed through an approved or recognized program which complies with USBE requirements. First Aid and CPR components require current certification through an approved or recognized program which complies with USBE requirements. Yearly concussion training requires successful completion of the NFHS Concussion Course.
- C. School districts must verify compliance with all eight components required for coaches' certification. (To confirm a coach has completed the NFHS Fundamentals of Coaching and the yearly NFHS Concussions course, go to nfhslearn.com and click on "User Lookup" in the top right hand corner.
- D. The "Fundamentals of Coaching" course shall be completed prior to coaching. Head coaches and paid assistant coaches with a major, minor or endorsement in physical education or dance and/or a minor in coaching are not required to take the "Fundamentals of Coaching" course.
- E. Head coaches are required to attend the live UHSAA Rules clinic, or take the online UHSAA rules clinic applicable to his/her sport. Failure to complete the UHSAA sport-specific rules clinic will be a fine of \$50. Head coaches will be given a new deadline to complete the online clinic. If the clinic is not completed by this second deadline, schools will be fined an additional \$100

SECTION 2: Supervision of Students

A licensed faculty member or full-time faculty member must accompany his/her teams or students to all UHSAA state tournaments, meets or festivals for which they have qualified to participate unless arrangements are made with the Executive Director in advance for students to be under the supervision of a licensed or full time faculty member from another school. Teams or individuals without a licensed or full-time faculty representative will be barred from the activity.

Drugs, Alcohol, Tobacco and Vaping

BY-LAWS ARTICLE 10: DRUGS, ALCOHOL, TOBACCO and VAPING

SECTION 1: UHSAA Drugs, Alcohol, Tobacco and Vaping Policies

- A. The UHSAA supports the U.S. Supreme Court rulings regarding education. First, to prepare students to be good citizens and second, to teach them to be self-reliant and self-sufficient. Activities of the UHSAA contribute to both of these goals. The use of alcohol, tobacco products, vaping products or other drugs in almost every instance deters the realization of these goals. Every effort shall be made at the local, region and state levels of participation to eradicate the promotion, use or abuse of alcohol, drugs, tobacco and vaping products with regard to participation in high school sports and activities. Limitation for participation of students in Utah high school activities regarding the use of alcohol, tobacco, vaping products and other drugs during a sports season, as defined in the Utah Code are:
1. **First offense:** Suspension from two consecutive games, meets, matches, competitions or performances at the same level of play (and any intervening levels as well). Practice may be continued following a personal assessment of the student by a licensed substance abuse intervention or treatment program and/or participation in a district, governing board of a charter or private school approved intervention program.
 2. **Second offense:** A six-week suspension from games, meets, matches, competitions or performances. Student participation in an assessment by a licensed substance abuse intervention or treatment program with prescribed follow-up is required. Practice may continue only after the assessment has been completed and positive participation in the prescribed follow-up is occurring.
 3. **Third offense:** An eighteen-week suspension from all games, meets, matches, competitions, performances and practices. Reinstatement of eligibility at the end of the eighteen-week suspension is predicated upon successful completion of a formal assessment, intervention and treatment program. In all of the foregoing offenses, local school and/or district requirements which deal with discipline, suspension, corrective measures, parent/guardian involvement rehabilitation and so forth, must be met.

Interps & Guidelines 10.1.1: DRUGS, ALCOHOL, TOBACCO and VAPING

- A. Conditions of this policy include:
1. The use of electronic cigarettes or vapor products are prohibited.
- B. Implementation of Policy
1. Violations carry over year to year and sport/activity to sport/activity in a participant's career (there is no "fresh start" each year).
 2. Violations must occur and be discovered during a sport/activity season.
 3. Any penalties for violation follow the student to any school to which he/she transfers.
 4. Any violation beyond the third offense carries the same penalty as the third offense.

SECTION 2: Local School or District Requirements

Local school or district requirements may exceed those set forth in By-Laws Article 10

Bloodborne Pathogens

Blood Pathogens & Communicable Disease Precautions

A player or coach who is bleeding, who has an open wound or who has blood on his/her uniform shall be prohibited from participating further in the game until appropriate treatment has been administered. If medical care or treatment can be administered in a reasonable amount of time, the individual will not have to leave the game. The length of time that is considered reasonable is up to the judgment of the referee/umpire.

Heat Acclimaization

Heat Acclimatization

Before participating in the preseason practice period, all student-athletes should undergo a pre-participation medical examination administered by a qualified medical professional. The examination can identify predisposing factors related to a number of safety concerns, including the identification of youths at particular risk for exertional heat illness.

The heat-acclimatization period is defined as the initial 14 consecutive days of preseason practice for all student athletes. The goal of the acclimatization period is to enhance exercise heat tolerance and the ability to exercise safely and effectively in warm to hot conditions. This period should begin on the first day of practice or conditioning before the regular season. Any practices or conditioning conducted before this time should not be considered part of the heat-acclimatization period.

Regardless of the conditioning program and conditioning status leading up to the first formal practice, all student athletes (including those who arrive at preseason practice after the first day of practice) should follow the 14-day heat-acclimatization plan. During the preseason heat acclimatization period, if practice occurs on 6 consecutive days, student-athletes should have 1 day of complete rest (no conditioning, walk-throughs, practices, etc).

Days on which athletes do not practice due to a scheduled rest day, injury, or illness do not count toward the heat-acclimatization period. For example, an athlete who sits out the third and fourth days of practice during this time (e.g., Wednesday and Thursday) will resume practice as if on day 3 of the heat-acclimatization period when returning to play on Friday.

Definitions

A **practice** is defined as the period of time a participant engages in a coach-supervised, school approved, sport or coaching related physical activity. Each individual practice should last no more than three (3) hours. Warm-up, stretching, and cool down activities are part of the 3-hour practice time. Regardless of ambient temperature conditions, all conditioning and weight-room activities should be considered part of practice.

A **walk-through** is defined as a teaching opportunity with the athletes not wearing protective equipment (e.g., helmets, shoulder pads, catcher's gear, shin guards) or using other sport-related equipment (e.g., footballs, blocking sleds, pitching machines, soccer balls, marker cones). The walk-through is not part of the 3-hour practice period, can last no more than 1 hour per day, and does not include conditioning or weight-room activities.

A **recovery period** is defined as the time between the end of 1 practice or walk-through and the beginning of the next practice or walk-through. During this time, athletes should rest in a cool environment, with no sport or conditioning related activity permitted (e.g., speed or agility drills, strength training, conditioning, or walk-through). Treatment with the athletic trainer is permissible.

Heat Acclimatization

Requirements

- A. Days 1 through 5 of the heat-acclimatization period consist of the first 5 days of formal practice. During this time, athletes may not participate in more than one (1) practice per day.
- B. If a practice is interrupted by inclement weather or heat restrictions, the practice should recommence once conditions are deemed safe. Total practice time should not exceed 3 hours in any one (1) day.
- C. A 1-hour maximum walk-through is permitted during days 1–5 of the heat-acclimatization period; however, a 3-hour recovery period should be inserted between the practice and walk-through (or vice versa).
- D. During days 1–2 of the heat-acclimatization period, sports requiring helmets or shoulder pads, a helmet is to be the only protective equipment permitted. During days 3–5, helmets and shoulder pads are permitted. Beginning on day 6, all protective equipment may be worn and full contact may begin;
 - i. On days 3–5, contact with blocking sleds and tackling dummies may be initiated.
 - ii. Full-contact sports: 100% live contact drills should begin no earlier than day 6.
- E. A minimum of 1 rest day shall occur following 6 consecutive practice days.
- F. Beginning no earlier than day 6 and continuing through day 14, double-practice days must be followed by a single-practice day. On single-practice days, 1 walk-through is permitted, separated from the practice by at least 3 hours of continuous rest. When a double-practice day is followed by a rest day, another double-practice day is permitted after the rest day.
- G. On a double-practice day, neither practice shall exceed 3 hours in duration, nor shall student-athletes participate in more than 5 total hours of practice. Warm-up, stretching, cool-down, walk through, conditioning, and weight-room activities are included as part of the practice time. The two practices should be separated by at least 3 continuous hours in a cool environment.

Because the risk of exertional heat illnesses during the preseason heat-acclimatization period is high, it is strongly recommended that an athletic trainer be on site before, during, and after all practices

Lightning

At all UHSAA sanctioned events that are held in outdoor venues the host school shall designate an individual to monitor weather. This individual shall meet with the head official for the event prior to the contest. At that meeting the following will be discussed:

- A. The Guidelines on Handling Contests During Lightning Disturbances which appears in all NFHS Rules Books.
- B. Responsibilities of the individual charged with monitoring the weather and those of the head official relative to possible weather disturbances.
- C. Contingencies regarding possible suspensions of play due to lightning.

The head official in consultation with the individual assigned to monitor weather will affect any suspension due to lightning

Air Quality

All questions regarding air quality policies should be directed to your local school district or the governing body for your school for the appropriate policies and procedures.

National Federation of State High School Associations

Utah High School Activities Association



POSITION STATEMENT ON PHYSICAL ACTIVITY, AIR QUALITY AND WILDFIRES

National Federation of State High School Associations (NFHS)
Sports Medicine Advisory Committee (SMAC)

Background

Air pollution is due to a mixture of solid particles and gases that may result from a variety of sources including wildfires, internal combustion engines, and industrial emissions. In people without lung disease, the immediate effects, and long-term consequences of air pollution upon athletic performance are not well understood. There is some evidence to indicate that chronic exposure may adversely affect blood vessels throughout the body, but more studies are needed before making definitive statements. However, air pollution has long been known to worsen the symptoms of respiratory diseases such as asthma. When compared to adults, children may be more susceptible to having problems while exercising in polluted air.

There are two key components of air pollution that cause respiratory problems, especially in people with underlying respiratory problems: ozone and particulate matter. Ozone is found in smog and is often at its worst in the late afternoon and early evening on hot summer days. It forms through a variety of complex chemical interactions, all of which require sunlight as a catalyst. Ozone can travel significant distances and, contrary to conventional wisdom, is more predominantly a rural pollutant.

The particulate matter found in air pollution can be a hazard at any time of the year, especially when the air is still. Particle pollutants can be high near busy roads and factories, and at times when there is smoke in the air from wood stoves, fireplaces, or wildfires. Other potentially harmful air pollutants include carbon monoxide, nitrogen oxides and sulfur dioxide. Smoke from late summer forest and grass fires has very high levels of particulate matter and is of special concern in the western U.S., often causing severe air pollution coinciding with the beginning of the fall sports season.

It is important to realize air pollution may also occur indoors. Potential sources include tobacco smoke in any situation, dust in indoor rodeo arenas, and exhaust fumes from ice resurfacing equipment in ice arenas. Consequently, athletes with asthma should always have their medication available and be especially cautious in these venues.

Recognition and Management

The Air Quality Index (AQI) is a system developed by the US Environmental Protection Agency that describes the general health effects associated with different pollution levels, as well as whatever precautionary steps may need to be taken if air pollution levels rise into an unhealthy range. During times of suspected high air pollution, the AQI should be checked prior to all practices and contests. A particular location's AQI can be found at <https://www.airnow.gov/> <https://www2.purpleair.com/> <https://air.utah.gov/forecast.php>

Air Quality

The AQI takes into consideration the five major determinants of air pollution: ozone, particulate matter, carbon monoxide, nitrogen dioxide, and sulfur dioxide. The measured pollutant concentrations are then converted into a number on a scale of 0 to 500. Higher numbers correlate to a greater level of air pollution. Under the Clean Air Act, the National Ambient Air Quality Standard is 100. An AQI level greater than 100 indicates that a pollutant is in the unhealthy range. As specific public health department recommendations may vary, it is critical that state associations and schools consult local or state health departments for guidelines on when outdoor activities should be modified or cancelled.

Many western states have additional online resources to track air quality. These websites may use the AQI or a PM_{2.5} concentration. The PM_{2.5} describes fine inhalable particulate matter with diameters that are generally less than 2.5 micrometers. As a frame of reference, PM₁₀ is less than the width of a single human hair and is small enough to get into the lungs while matter that is PM_{2.5} can only be seen with an electron microscope. Because it is so light and small, these tend to stay in the air longer than heavier particles and can penetrate deep into the lung tissue.

Both the AQI and the PM_{2.5} are reported by a color-coded chart which remains consistent across these different tools. A red "unhealthy" day will be the same whether it is reported as an AQI or a PM_{2.5} value. The state or local health department is available to serve as a resource to learn more about how this data is reported.

School personnel should locate the air monitors closest to practice and competition venues at <https://www.airnow.gov/> <https://www2.purpleair.com/> <https://air.utah.gov/forecast.php> Not all schools and venues will have a nearby monitor, and weather variation (wind) and geographic features (hills and valleys) can account for large differences between relatively close locations. Therefore, anyone assessing air quality must be familiar with the 5-3-1 Visibility Index Method. Based on previous air pollution research, we know that there is a correlation between air quality and visibility.

The 5-3-1 Visibility Index Method is a simple way to use visibility to estimate air quality and health effects and is particularly useful with rapidly changing weather conditions, like smoke from wildfires. The key to successful use is preparation, as it requires knowledge of large landmarks visible from the venue. Using an online satellite map, locate three landmarks that can be seen from a specific venue. The landmarks you choose should be 1 mile away, 3 miles away and 5 miles away. If you use multiple venues, you will need to do this for each separate location. Standing with the sun behind you, look at the three objects and when the outline of the landmark can no longer be seen, then the visibility range is less than the distance marker. When the air is smoky and hazy, monitoring the AQI or the Visibility Index should be done at least hourly during competitions and practices as conditions can change quickly.

Some students may be more susceptible to the health effects of poor air quality. The Preparticipation Physical Examination helps to identify those students with underlying ailments that make them more affected by poor air quality. Conditions that put students at risk include asthma, recent respiratory infection, and chronic heart or lung disease.

All schools must have an Emergency Action Plan (EAP) in place for every practice and competition venue in case of respiratory or other medical emergencies. Students diagnosed with asthma should have an Asthma Action Plan that they follow if symptoms occur during or after exercise. If poor air quality persists over several days, at risk students will have symptoms triggered more easily than those without pre-existing conditions.

Air Quality

If the health effect category is in a zone where your state or local health department discourages outdoor activity, all practices and contests should be moved indoors or cancelled. If activities are moved indoors, you must check with the maintenance staff to ensure existing HVAC systems provide properly filtered indoor air. If the HVAC system cannot appropriately manage the burden of pollutants in the air, indoor air quality **MAY BE WORSE** than the outdoor air and it is not appropriate to practice or workout indoors. Furthermore, when moving indoors, Heat and Hydration Guidelines must be followed as temperatures may be hotter inside a gymnasium on a hot summer day than outside. If indoor practices are not an option, practice may be held earlier in the day to avoid warmer temperatures or moved to a location with better air quality.

Please note that all of the above principles are not limited to athletic events and should also be followed for physical education classes and other outdoor activities involving physical activity in order to protect both students and staff.

References

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DISCLAIMER - NFHS Position Statements and Guidelines

The NFHS regularly distributes position statements and guidelines to promote public awareness of certain health and safety-related issues. Such information is neither exhaustive nor necessarily applicable to all circumstances or individuals and is no substitute for consultation with appropriate health-care professionals. Statutes, codes, or environmental conditions may be relevant. NFHS position statements or guidelines should be considered in conjunction with other pertinent materials when taking action or planning care. The NFHS reserves the right to rescind or modify any such document at any time.