

KCA Board of Directors

KCA Sports Policy

Purpose: To establish requirements for sports participation of students, coaching responsibilities, and administration policies

Reference: MSHAA.org, NFHS.org, [www.cdc.gov/concussion](http://www.cdc.gov/concussion)

Activities: Basketball, Volleyball, Cheerleading, and other sports as they become available

Attachments:

From MSHSA.org/sportsmedicine (check website for latest versions)

- (1) MSHSAA Pre-participation Physical Evaluation
- (2) Sports Medicine Manual
- (3) Guidelines for preventing heat related problems
- (4) Heat and Lightening Recommendations
- (5) Concussion Information Packet( for parents)

Specific activity coaching requirements

- (1) Cheerleading

Required Training for Coaches:

Concussion in Sports (online video on sports head injuries)

<https://www.mshsaa.org/Resources/UploadedFiles/TrainingVideos/RulesMeeting634164285356329036/player.html>

NFHS Fundamentals of Coaching and First Aid course. Available at

<http://www.nfhslern.com/Courses.aspx>

KCA believes that sports and other activities further develop our students in areas of teamwork, physical fitness, sportsmanship, and personal growth. Extracurricular activities are on a voluntary basis and participation in extracurricular activities is a privilege and not a right. Student athletes shall respect the rights and beliefs of others, treat others with courtesy and consideration, and respect those persons responsible for supervising the activities including coaches, teachers, and other school representatives. Students must meet KCA academic policy requirements to participate. KCA follows MSHSAA guidelines where ever possible and is located in the MSHSAA Northeast District with local schools such as Fulton, North and South Callaway. MSHSAA is the

statewide organization that sets the standards for sports in Junior High, and High Schools as part of the National Federation of High Schools. (NFHS).

**I.Student/Parent Responsibilities:** All sports have inherent risks and this policy is to establish guidelines for supervision to minimize risks to our student athletes. Participants must obey all safety rules, report all injuries to their coaches, follow a proper conditioning program, and inspect their own equipment, where applicable, daily. Parents/Guardians, or students who may not wish to accept the risk of sports related injuries should not participate. Students may not participate without the consent of their parent/guardians. Student Athletes and their parent/guardian must complete the MSHSAA pre-participation physician evaluation form with their physician and return it to the office before a student may participate in any sports activity including practice. The latest form may be obtained through the office or online at [www.mshsaa.org/sportsmedicine](http://www.mshsaa.org/sportsmedicine). Parents agree to keep medical insurance for their child current and provide the insurance company name and policy number on the pre-participation physical evaluation form. Parents must give consent and agree that in the case of injury or illness requiring transportation to a health care facility, a reasonable attempt will be made to contact the parent or guardian, but if necessary the student will be transported via ambulance to the nearest hospital. Parents also agree that they will not hold the school responsible in case of accident or injury whether it be en route to or from another school or during practice or during a match or game, and to hold KCA, its employees, agents, representatives, coaches, Board, or volunteers harmless from any and all liability, actions, causes of actions, debts, claims, or demands of every kind and nature whatsoever which may arise by or in connection with participation by the student in any activities related to the sport or activity. By participating in an extracurricular activity, a student and his parent/guardians must agree to meet during the regular practice schedule as well as participation in games/matches. This may require transportation of the student athlete to and from practice and/or games that may be on or away from the KCA campus. Parents/Guardians shall understand that there may be additional costs for equipment and/or fees that may be required above the KCA student tuition. Parents/Guardians understand that all uniforms and equipment are KCA property and the Parents/Guardians are responsible for the care of the uniform and equipment. Uniforms and equipment must be returned before the end of school year, or as directed by the coach, clean, and in good condition. Parents/Guardians are responsible for the cost of repair or replacement of uniforms or equipment that is damaged beyond usual wear and tear. Students and parents/guardians understand that acceptable behavior during and around an activity are required. Teamwork and good sportsmanship is required of all KCA student athletes. Coaches have the right to send a child home from a practice or game if the student athlete does not display acceptable behavior. In conjunction with the school administrator, the coach may dismiss a student athlete from a team for behavioral issues. In case of disagreements or complaints, all students and parents/guardians will contact the coach for resolution. If not possible, the school administrator should be contacted following the KCA complaint policy.

## **II. Coaches and sports activities sponsor responsibilities.**

Coaches are an important part of sports activities that lead the students not only in the intricacies of the skill of the game, but also in sportsmanship, and teamwork. Coaches are also the direct supervisor of the students during and around practice times, and games. Coaches and sport supervisors must have undergone a background check and be approved by the office before supervising an event or practice. Although coaches cannot foresee every possible event, Coaches are responsible for a safe environment for the student athletes. Coaches and sports supervisors must complete training on basic sports medicine via the MSHSAA website on topics to include head injuries, heat injuries, lightening safety, and basic sports medicine. Specific guideline for certain activities must also be followed. Per MSHSAA guidelines, coaches are required to complete, at the minimum, the NFHS Fundamentals of Coaching, and First Aid courses. Coaches will obtain a basic first aid kit from the office for any games or practices off KCA campus. Coaches must act as a student advocate, allowing all eligible students adequate practice and game time. All students and parents/guardians have the reasonable expectation that their child will be able to participate in at least one game, meet or match during the season. Coaches are responsible for ensuring that only eligible students participate in practices or games. Coaches should contact the office to determine the eligibility of students. The office will maintain an update list of students based on academic eligibility as well as physical evaluation forms. Coaches are responsible for establishing a regular training/practice schedule and communicating change with parents or guardians. In the event that a practice or game is cancelled, it is the coach's responsibility to inform student athletes and their parents/guardians in a timely manner. All training/practices and games must have a coach or appointed adult supervisor during the entire time including adequate time before and after the game to supervise students as they prepare and depart from the game/practice. If a coach is unable to attend, then a suitable substitute must be present.

Off campus activities. Coaches shall maintain control of all KCA student athletes during off campus events. This includes accountability of student behavior and sportsmanship before, during, and after the event. Coaches should maintain a roster of participating students, and should verify that each student is present during the entirety of the program, and that each student has a parent/guardian to pick them up at the end of the event.

Specific sporting Coach responsibilities: see attachments  
Cheerleading- see NFHS <http://www.nfhs.org/content.aspx?id=3084>

## **III. Office/School Administrator Responsibilities**

The School Administrator or his/her representative will be responsible for the extracurricular programs of KCA. As the Administrator, overall responsibility of all school activities is necessary. The Administrator will appoint coaches and sports supervisors in conjunction with the Board of Directors. During this process, the Administrator shall conduct a background investigation on all coaches and sports supervisors. The Administrator, otherwise referred to as the office, shall be a point of contact for the

coaches. Each sport shall have, at the minimum, one coach and one assistant coach. At least one should be the same sex as the student athlete so that behavior in lockers rooms or other areas may be monitored. It is recommended that several additional sports supervisors be listed as back-ups if the coach cannot attend a practice or game. The office shall provide to the coach, academic eligibility per KCA policy at the quarter and semester end. The office shall also verify that a pre-participation physical evaluation form be on file for each student participant and provide to the coach a copy of the pre-participation physical evaluation form for each student athlete for off campus activities. The office shall provide the coach with a copy of the MSHSAA sports medicine guidelines and attachments to this policy. The office shall encourage all coaches to obtain coaching certification via the NFHS per MSHSAA guidelines and shall reimburse coaches the costs after successful completion of the certification as well as for NFHS Fundamentals of Coaching and first aid course. <http://www.nfhslearn.com/Courses.aspx> The Administrator or his/her appointed representative shall be present at each game/match that a KCA team shall participate.

# PRE-PARTICIPATION PHYSICAL EVALUATION HISTORY FORM

(Note: This form is to be filled out by the patient and parent prior to seeing the physician. The physician should keep a copy of this form in the chart for their records).

Date of Exam:			
Name:			Date of Birth:
Sex:	Age:	Grade:	School:
Sport(s):			
Medicines and Allergies: Please list all of the prescription and over-the-counter medicines and supplements (herbal and nutritional) that you are currently taking:			
Do you have any allergies: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please identify specific allergy below:			
<input type="checkbox"/> Medicines:		<input type="checkbox"/> Pollens:	
		<input type="checkbox"/> Food:	
		<input type="checkbox"/> Stinging Insects:	

**Explain "Yes" answers below. Circle questions you do not know the answer to.**

GENERAL QUESTIONS	Yes	No
1. Has a doctor ever denied or restricted your participation in sports for any reason?		
2. Do you have any ongoing medical conditions? If so, please identify below: <input type="checkbox"/> Asthma <input type="checkbox"/> Anemia <input type="checkbox"/> Diabetes <input type="checkbox"/> Infections Other:		
3. Have you ever spent the night in the hospital?		
4. Have you ever had surgery?		
HEART HEALTH QUESTIONS ABOUT YOU	Yes	No
5. Have you ever passed out or nearly passed out DURING or AFTER exercise?		
6. Have you ever had discomfort, pain, tightness, or pressure in your chest during exercise?		
7. Does your heart ever race or skip beats (irregular beats) during exercise?		
8. Has a doctor ever told you that you have any heart problems? If so, check all that apply: <input type="checkbox"/> High blood pressure <input type="checkbox"/> A heart murmur <input type="checkbox"/> High cholesterol <input type="checkbox"/> A heart infection <input type="checkbox"/> Kawasaki disease <input type="checkbox"/> Other:		
9. Has a doctor ever ordered a test for your heart? (For example, ECG/EKG, echocardiogram)		
10. Do you get lightheaded or feel more short of breath than expected during exercise?		
11. Have you ever had an unexplained seizure?		
12. Do you get more tired or short of breath more quickly than your friends during exercise?		
HEART HEALTH QUESTIONS ABOUT YOUR FAMILY	Yes	No
13. Has any family member or relative died of heart problems or had an unexpected or unexplained sudden death before age 50 (including drowning, unexplained car accident, or sudden infant death syndrome)?		
14. Does anyone in your family have hypertrophic cardiomyopathy, Marfan syndrome, arrhythmogenic right ventricular cardiomyopathy, long QT syndrome, short QT syndrome, Brugada syndrome, or catecholaminergic polymorphic ventricular tachycardia?		
15. Does anyone in your family have a heart problem, pacemaker, or implanted defibrillator?		
16. Has anyone in your family had unexplained fainting, unexplained seizures, or near drowning?		
BONE AND JOINT QUESTIONS	Yes	No
17. Have you ever had an injury to a bone, muscle, ligament, or tendon that caused you to miss a practice or a game?		
18. Have you ever had any broken or fractured bones or dislocated joints?		
19. Have you ever had an injury that required x-rays, MRI, CT scan, injections, therapy, a brace, a cast, or crutches?		
20. Have you ever had a stress fracture?		
21. Have you ever been told that you have or have you had an x-ray for neck instability or atlantoaxial instability? (Down syndrome or dwarfism)		
22. Do you regularly use a brace, orthotics, or other assistive device?		
23. Do you have a bone, muscle, or joint injury that bothers you?		
24. Do any of your joints become painful, swollen, feel warm, or look red?		
25. Do you have any history of juvenile arthritis or connective tissue disease?		

MEDICAL QUESTIONS	Yes	No
26. Do you cough, wheeze, or have difficulty breathing during or after exercise?		
27. Have you ever used an inhaler or taken asthma medicine?		
28. Is there anyone in your family who has asthma?		
29. Were you born without or are you missing a kidney, an eye, a testicle (males) or spleen, or any other organ?		
30. Do you have groin pain or a painful bulge or hernia in the groin area?		
31. Have you had infectious mononucleosis (mono) within the last month?		
32. Do you have any rashes, pressure sores, or other skin problems?		
33. Have you had a herpes or MRSA skin infection?		
34. Have you ever had a head injury or concussion?		
35. Have you ever had a hit or blow to the head that caused confusion, prolonged headaches, or memory problems?		
36. Do you have a history of seizure disorder?		
37. Do you have headaches with exercise?		
38. Have you ever had numbness, tingling, or weakness in your arms or legs after being hit or falling?		
39. Have you ever been unable to move your arms or legs after being hit or falling?		
40. Have you ever become ill while exercising in the heat?		
41. Do you get frequent muscle cramps when exercising?		
42. Do you or someone in your family have sickle cell trait or disease?		
43. Have you had any problems with your eyes or vision?		
44. Have you had any eye injuries?		
45. Do you wear glasses or contact lenses?		
46. Do you wear protective eyewear, such as goggles or a face shield?		
47. Do you worry about your weight?		
48. Are you trying to or has anyone recommended that you gain or lose weight?		
49. Are you on a special diet or do you avoid certain types of foods?		
50. Have you ever had an eating disorder?		
51. Do you have any concerns that you would like to discuss with the doctor?		
FEMALES ONLY	Yes	No
52. Have you ever had a menstrual period?		
53. How old were you when you had your first menstrual period?		
54. How many periods have you had in the last 12 months?		
<b>Explain "Yes" answers here:</b>		

I hereby state that, to the best of my knowledge, my answers to the above questions are complete and correct.		
Signature of Athlete:	Signature of Parent(s) or Guardian:	Date:

# PRE-PARTICIPATION PHYSICAL EVALUATION PHYSICAL EXAMINATION FORM

Name:	Date of Birth:
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- Physician Reminders:**
- Consider additional questions on more sensitive issues.
    - Do you feel stressed out or under a lot of pressure?
    - Do you ever feel sad, hopeless, depressed, or anxious?
    - Do you feel safe at your home or residence?
    - Have you ever tried cigarettes, chewing tobacco, snuff, or dip?
    - During the past 30 days, did you use chewing tobacco, snuff or dip?
    - Do you drink alcohol or use any other drugs?
    - Have you ever taken anabolic steroids or used any other performance supplements?
    - Have you ever taken any supplements to help you gain or lose weight or improve your performance?
    - Do you wear a seat belt, use a helmet, and use condoms?
  - Consider reviewing questions on cardiovascular symptoms (Questions 5-14).

**EXAMINATION**

Height:	Weight:	<input type="checkbox"/> Male	<input type="checkbox"/> Female
BP: / ( / )	Pulse:	Vision: R 20/ L 20/	Corrected: <input type="checkbox"/> Yes <input type="checkbox"/> No

MEDICAL	NORMAL	ABNORMAL FINDINGS
Appearance • Marfan stigmata (kyphoscoliosis, high-arched palate, pectus excavatum, arachnodactyly, arm span>height, hyperlaxity, myopia, MVP, aortic insufficiency)		
Eyes/Ears/Nose/Throat • Pupils equal • Hearing		
Lymph Nodes		
Heart* • Murmurs (auscultation standing, supine, +/- Valsalva) • Location of point of maximal pulse (PMI)		
Pulses • Simultaneous femoral and radial pulses		
Lungs		
Abdomen		
Genitourinary (males only)**		
Skin • HSV, lesions suggestive of MRSA, tinea corporis		
Neurologic***		

MUSCULOSKELETAL	NORMAL	ABNORMAL FINDINGS
Neck		
Back		
Shoulder/arm		
Elbow/forearm		
Hip/thigh		
Knee		
Leg/ankle		
Foot/toes		
Functional • Duck-walk, single leg hop		

\* Consider ECG, echocardiogram, and referral to cardiology for abnormal cardiac history or exam; \*\*Consider GU exam if in private setting. Having third party present is recommended. \*\*\*Consider cognitive evaluation or baseline neuropsychiatric testing if a history of significant concussion.

- Cleared for all sports without restriction.
- Cleared for all sports without restriction **with recommendations for further evaluation or treatment for:**
- Not Cleared
- Pending further evaluation
  - For any sports
  - For certain sports (please list):  
Reason:

Recommendations:

I have examined the above-named student and completed the pre-participation physical evaluation. The athlete does not present apparent clinical contraindications to practice and participate in the sport(s) as outlined above. A copy of the physical exam is on record in my office and can be made available to the school at the request of the parents. If conditions arise after the athlete has been cleared for participation, the physician may rescind the clearance until the problem is resolved and the potential consequences are completely explained to the athlete (and parents/guardians).

Name of Physician (type/print):	Date:
Address:	Phone:
Signature of Physician (MD/DO/ARNP/Chiropractor*):	

\*NOTE: Please refer to the MSHSAA Sports Medicine Manual, Page 2.

**PRE-PARTICIPATION PHYSICAL EVALUATION**

**Missouri State High School Activity Association (MSHSAA) Eligibility and Authorization Statement**

**STUDENT AGREEMENT (Regarding Conditions for Participation)**

This application to represent my school in interscholastic athletics is entirely voluntary on my part and is made with the understanding that I have studied and understand the eligibility standards that I must meet to represent my school and that I have not violated any of them.

I have read, understand, and acknowledge receipt of the MSHSAA brochure entitled "How to Maintain and Protect Your High School Eligibility," which contains a summary of the eligibility rules of the MSHSAA. (I understand that a copy of the *MSHSAA Handbook* is on file with the principal and athletic administrator and that I may review it in its entirety, if I so choose. All MSHSAA by-laws and regulations from the *Handbook* are also posted on the MSHSAA website at [www.mshsaa.org](http://www.mshsaa.org)).

I understand that a MSHSAA member school must adhere to all rules and regulations that pertain to school-sponsored, interscholastic athletics programs, and I acknowledge that local rules may be more stringent than MSHSAA rules.

I also understand that if I do not meet the citizenship standards set by the school or if I am ejected from an interscholastic contest because of an unsportsmanlike act, it could result in me not being allowed to participate in the next contest or suspension from the team either temporarily or permanently.

I understand that if I drop a class, take course work through Post -Secondary Enrollment Option, Credit Flexibility, or other educational options, this action could affect compliance with MSHSAA economic standards and my eligibility.

I understand that participation in interscholastic athletics is a privilege and not a right. As a student athlete, I understand and accept the following responsibilities:

- I will respect the rights and beliefs of others and will treat others with courtesy and consideration.
- I will be fully responsible for my own actions and the consequences of my actions.
- I will respect the property of others.
- I will respect and obey the rules of my school and laws of my community, state, and country.
- I will show respect to those who are responsible for enforcing the rules of my school and the laws of my community, state, and country.

I have completed and/or verified that part of this certificate which requires me to list all previous injuries or additional conditions that are known to me which may affect my performance in so representing my school, and I verify that it is correct and complete.

<b>Signature of Athlete:</b>	<b>Date:</b>
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**PARENT PERMISSION (Authorization for Treatment, Release of Medical Information, and Insurance Information)**

**Informed Consent:** By its nature, participation in interscholastic athletics includes risk of serious bodily injury and transmission of infectious disease such as HIV and Hepatitis B. Although serious injuries are not common and the risk of HIV transmission is almost nonexistent in supervised school athletic programs, it is impossible to eliminate all risk. Participants must obey all safety rules, report all physical and hygiene problems to their coaches, follow a proper conditioning program, and inspect their own equipment daily. **PARENTS, GUARDIANS, OR STUDENTS WHO MAY NOT WISH TO ACCEPT RISK DESCRIBED IN THIS WARNING SHOULD NOT SIGN THIS FORM. STUDENTS MAY NOT PARTICIPATE IN MSHSAA- SPONSORED SPORT WITHOUT THE STUDENT'S AND PARENT'S/GUARDIAN/S SIGNATURE.**

I understand that in the case of injury or illness requiring transportation to a health care facility, a reasonable attempt will be made to contact the parent or guardian in the case of the student-athlete being a minor, but that, if necessary, the student-athlete will be transported via ambulance to the nearest hospital.

We hereby give our consent for the above student to represent his/her school in interscholastic athletics. We also give our consent for him/her to accompany the team on trips and will not hold the school responsible in case of accident or injury whether it be en route to or from another school or during practice or an interscholastic contest; and we hereby agree to hold the school district of which this school is a part and the MSHSAA, their employees, agents, representatives, coaches, and volunteers harmless from any and all liability, actions, causes of action, debts, claims, or demands of every kind and nature whatsoever which may arise by or in connection with participation by my child/ward in any activities related to the interscholastic program of his/her school.

If we cannot be reached and in the event of an emergency, we also give our consent for the school to obtain through a physician or hospital of its choice, such medical care as is reasonably necessary for the welfare of the student, if he/she is injured in the course of school athletic activities. We authorize the release of necessary medical information to the physician, athletic trainer, and/or school personnel related to such treatment/care. We understand that the school may not provide transportation to all events, and permit / do not permit (CIRCLE ONE) my child to drive his/her vehicle in such a case.

To enable the MSHSAA to determine whether the herein named student is eligible to participate in interscholastic athletics in the MSHSAA member school, I consent to the release of the MSHSAA any and all portions of school record files, beginning with seventh grade, of the herein named student, specifically including, without limiting the generality of the foregoing, birth and age records, name and residence address of parent(s) or guardian(s), residence address of the student, academic work completed, grades received, and attendance data.

We confirm that this application for the above student to represent his/her school in interscholastic athletics is made with the understanding that we have studied and understand the eligibility standards that our son/daughter must meet to represent his/her school and that he/she has not violated any of them. We also understand that if our son/daughter does not meet the citizenship standards set by the school or if he/she is ejected from an interscholastic contest because of an unsportsmanlike act, it could result in him/her not being allowed to participate in the next contest or suspension from the team either temporarily or permanently.

I consent to the MSHSAA's use of the herein named student's name, likeness, and athletic-related information in reports of contests, promotional literature of the Association and other materials and releases related to interscholastic athletics.

We further state that we have completed that part of this certificate which requires us to list all previous injuries or additional conditions that are known to us which may affect this athlete's performance or treatment and we certify that it is correct and complete.

The MSHSAA By-Laws provide that a student shall not be permitted to practice or compete for a school until it has verification that he/she has basic health/accident insurance coverage, which includes athletics. Our son/daughter is covered by basic health/accident insurance for the current school year as indicated below:

Name of Insurance Company:	Policy Number:
Signature of Parent(s) or Guardian:	Date:

**PARENT AND STUDENT SIGNATURE (Concussion Materials)**

We have received and read the MSHSAA materials on Concussion, which includes information on the definition of a concussion, symptoms of a concussion, what to do if you have a concussion, and how to prevent a concussion.

Signature of Athlete:	Date:
Signature of Parent(s) or Guardian:	Date:

**EMERGENCY CONTACT INFORMATION**

Parent(s)/Guardian(s)	Address	Phone Number
Name of Contact	Relationship to Athlete	Phone Number
Name of Contact	Relationship to Athlete	Phone Number

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# LIGHTNING AND HEAT SAFETY INFORMATION

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## LIGHTNING SAFETY National Athletic Trainers' Association Guidelines



1. Formalize and implement a comprehensive, proactive lightning-safety policy or emergency action plan specific to lightning safety. The components of this policy should include the following:
  - An established chain of command that identifies who is to make the call to remove individuals from the field or an activity.
  - A designated weather watcher (i.e., a person who actively looks for the signs of threatening weather and notifies the chain of command if severe weather becomes dangerous).
  - A means of monitoring local weather forecasts and warnings.
  - A listing of specific safe locations (for each field or site) from the lightning hazard.
  - The use of specific criteria for suspension and resumption of activities (refer to recommendations 4, 5, and 6).
  - The use of the recommended lightning-safety strategies (refer to recommendations 7, 8, and 9).
2. The primary choice for a safe location from the lightning hazard is any substantial, frequently inhabited building. The electrical and telephone wiring and plumbing pathways aid in grounding a building. This is the reason it is safer to remain indoors during thunderstorms. It is important not to be connected to these pathways while inside the structure during ongoing thunderstorms.
3. The secondary choice for a safer location from the lightning hazard is a fully enclosed vehicle with a metal roof and the windows closed. Convertible cars and golf carts do not provide protection from lightning danger. It is important not to touch any part of the metal framework of the vehicle while inside it during ongoing thunderstorms.
4. Seeking a safe structure or location at the first sign of lightning or thunder activity is highly recommended. By the time the flash-to-bang count approaches 30 seconds (or is less than 30 seconds), all individuals should already be inside or should immediately seek a safe structure or location. To use the flash-to-bang method, the observer begins counting when a lightning flash is sighted. Counting is stopped when the associated bang (thunder) is heard. Divide this count by 5 to determine the distance to the lightning flash (in miles). For example, a flash-to-bang count of 30 seconds equates to a distance of 6 miles (9.66 km).
5. Postpone or suspend activity if a thunderstorm appears imminent before or during an activity or contest (regardless of whether lightning is seen or thunder heard) until the hazard has passed. Signs of imminent thunderstorm activity are darkening clouds, high winds, and thunder or lightning activity.
6. Once activities have been suspended, wait at least 30 minutes after the last sound of thunder or lightning flash before resuming an activity or returning outdoors. A message should be read over the public address system and lightning-safety tips should be placed in game programs alerting spectators and competitors about what to do and where to go to find a safer location during thunderstorm activity.

7. Extremely large athletic events are of particular concern with regard to lightning safety. Consider using a multidisciplinary approach to lessen lightning danger, such as integrating weather forecasts, real-time thunderstorm data, a weather watcher, and the flash-to-bang count to aid in decision making.
8. Avoid being in contact with, or in proximity to, the highest point of an open field or on the open water. Do not take shelter under or near trees, flag poles, or light poles.
9. Avoid taking showers and using plumbing facilities (including indoor and outdoor pools) and land-line telephones during thunderstorm activity. Cordless or cellular telephones are safer to use when emergency help is needed.
10. Individuals who feel their hair stand on end or skin tingle or hear crackling noises should assume the lightning-safe position (i.e., crouched on the ground, weight on the balls of the feet, feet together, head lowered, and ears covered). Do not lie flat on the ground.
11. Observe the following basic first-aid procedures, in order, to manage victims of lightning strike:
  - Survey the scene for safety. Ongoing thunderstorms may still pose a threat to emergency personnel responding to the situation.
  - Activate the local emergency management system.
  - Move the victim carefully to a safer location, if needed.
  - Evaluate and treat for apnea and a systole.
  - Evaluate and treat for hypothermia and shock.
  - Evaluate and treat for fractures.
  - Evaluate and treat for burns.
12. All persons should maintain current cardiopulmonary resuscitation (CPR) and first-aid certification.
13. All individuals should have the right to leave an athletic site or activity, without fear of repercussion or penalty, in order to seek a safe structure or location if they feel they are in danger from impending lightning activity.

## **LIGHTNING SAFETY**

### **National Federation of High School Associations Guidelines**

The purpose of these guidelines is to provide a default policy to those responsible for making decisions concerning the suspension and restarting of contests based on the presence of lightning. The preferred sources from which to request such a policy for your facility would include your state high school association and the nearest office of the National Weather Service. Proactive Planning:

1. Assign staff to monitor local weather conditions before and during events.
2. Develop and evacuation plan, including identification of appropriate nearby shelters.
3. Develop criteria for suspension and resumption of play.
  - When thunder is heard or a cloud-to-ground lightning bolt is seen, the thunderstorm is close enough to strike your location with lightning. Suspend play and take shelter immediately.
  - 30-Minute Rule: Once play has been suspended, wait at least 30 minutes after the last thunder is heard or flash of lightning is witnessed prior to resuming play.
  - Any subsequent thunder or lightning after the beginning of the 30-minute count, reset the clock, and another 30-minute count should begin.
4. Hold periodic reviews for appropriate personnel.

## **NFHS RECOMMENDATIONS FOR HYDRATION TO MINIMIZE THE RISK FOR DEHYDRATION AND HEAT ILLNESS**

- Appropriate hydration before, during, and after exercise is an important ingredient to healthy and successful sports participation.
- Rapid weight loss represents a loss of body water. A loss of just 1-2% of body weight can negatively impact performance. A loss of 3% or more of body weight can increase the risk for exertional heat-related illness.
- Athletes should be weighed before and after warm weather practice sessions and contests to assess fluid losses.
- Athletes with high body fat percentages can become dehydrated faster than athletes with lower body fat percentages while working out under the same environmental conditions.
- All athletes have different sweating rates and some lose much more salt through their sweat than others.
- Poor acclimatization/fitness levels can greatly contribute to an athlete's dehydration problems.
- Medications and fevers can each greatly contribute to an athlete's dehydration problems and risk for heat illness.
- Environmental temperatures and humidity both contribute to dehydration and heat illness.
- Clothing, such as dark, bulky, or rubber protective equipment can drastically increase the chance of dehydration and heat illness.
- Wet bulb temperature measurements should be taken 10-15 minutes before practices or contests. The results should be used with a heat index to determine if practices or contests should be started, modified, or stopped.
- Even dry climates can have high humidity if sprinkler systems are scheduled to run before early morning practices start. This collection of water does not evaporate until environmental temperatures increase and dew points lower.
- A heat index chart should be followed to determine if practices/contests should be held. The National Weather Services chart (see next page) is located at: [www.weather.gov/om/heat/index.shtml](http://www.weather.gov/om/heat/index.shtml)
- The heat index for your location can be determined by entering your postal zip code into the OSAA Heat Index Calculator at the Oregon School Activities Association's website found at: [www.osaa.org/heatindex/](http://www.osaa.org/heatindex/)
- A relative humidity of 35 percent and a temperature of 95 degrees Fahrenheit are likely to cause heat illness, with heat stroke likely.
- A relative humidity of 70 percent and a temperature of 95 degrees Fahrenheit are very likely to cause heat illness, with heat stroke very likely.

## NATIONAL WEATHER SERVICE HEAT INDEX GUIDE

		Temperature (°F)															
		80	82	84	89	88	90	92	94	96	98	100	102	104	106	108	110
Relative Humidity (%)	40	80	81	83	85	88	91	94	97	101	105	109	114	119	124	130	136
	45	80	82	84	87	89	93	96	100	104	109	114	119	124	130	137	
	50	81	83	85	88	91	95	99	103	108	113	118	124	131	137		
	55	81	84	86	89	93	97	101	106	112	117	124	130	137			
	60	82	84	88	91	95	100	105	110	116	123	129	137				
	65	82	85	89	93	98	103	108	114	121	128	136					
	70	83	86	90	95	100	105	112	119	126	134						
	75	84	88	92	97	103	109	116	124	132							
	80	84	89	94	100	106	113	121	129								
	85	85	90	96	102	110	117	126	135								
	90	86	91	98	105	113	122	131									
95	86	93	100	108	117	127											
100	87	95	103	112	121	132											

### Likelihood of Heat Disorders with Prolonged Exposure or Strenuous Activity

**“A” = Caution      “B” = Extreme Caution      “C” = Danger      “D” = Extreme Danger**

#### **It is recommended that:**

- If the heat index is between 95 and 105 degrees, practices and game conditions should be altered.
- If the heat index is over 105 degrees, a practice or contest should be postponed or rescheduled.

### TYPES OF SPORTS DRINKS

- **Fluid Replacers**
  - Examples include: Water, Gatorade, 10K, Quickkick, Max
  - These drinks are absorbed as quickly as water and typically are used for activities lasting less than 2 hours.
- **Carbohydrate Loaders**
  - Examples include: Gatorlode, Exceed High, Carboplex
  - These drinks replace more muscle glycogen to enhance greater endurance.
  - They should be used after ultra-endurance events to increase muscle glycogen resynthesis after exercise.
- **Nutritional Supplements**
  - Examples include: Gatorpro, Exceed Sports, Ultra Energy
  - These supplements are fortified with vitamins and minerals, and they may help athletes maintain a balanced diet.
  - They can be used as a meal replacement supplement for athletes who wish to skip a high-fat meal or as extra calories for athletes who wish to gain weight.

## WHAT TO DRINK DURING EXERCISE

- For most exercising athletes, the ideal fluid for pre-hydration and re-hydration is water. Water is quickly absorbed, well-tolerated, an excellent thirst quencher, and cost effective.
- The use of a sports drink with appropriate carbohydrates (CHO) and sodium as described below may prove beneficial in some general situations and for some individuals.
- Traditional sports drinks with appropriate CHO and sodium may provide additional benefit in the following general situations:
  - Prolonged continuous activity of greater than 45 minutes
  - Extremely intense activity with risk of heat injury
  - Extremely hot and humid conditions
- Traditional sports drinks with appropriate CHO and sodium may provide additional benefit for the following individual conditions:
  - Poor hydration prior to participation
  - Increased sweat rate
  - Poor caloric intake prior to participation
  - Poor acclimatization to heat and humidity
- A 6-8% addition of CHO to water is the maximum that should be utilized. Any greater concentration will produce slow emptying from the stomach and a bloated feeling to the athlete.
- The other ingredient that may be helpful is a low concentration (0.3 – 0.7 g/L) of sodium which may help with cramping.
- All fluids should be served cold to optimize gastric emptying.

## WHAT NOT TO DRINK DURING EXERCISE

- Fruit juices with greater than 8 percent carbohydrate content and soda can both result in a bloated feeling and abdominal cramping.
- Beverages containing caffeine, alcohol, and carbonation are not to be used because of the high risk of dehydration associated with excess urine production, or decreased voluntary fluid intake.
- Athletes should be aware that nutritional supplements are not limited to pills and powders; many of these new fluids contain stimulants such as caffeine and/or ephedrine.
  - These stimulants may increase the risk of heart or heat illness problems when exercising.
  - Many of these drinks are being produced by traditional water, soft drink, and sports drink companies and may provide confusion to the sports community. As is true with other forms of supplements, these “power drinks” or “fluid supplements” are not regulated by the FDA. Thus, the purity and accuracy of contents on the label are not guaranteed.
  - Many of these beverages, which claim to provide additional power, energy, etc., have additional ingredients that are not necessary, some that are potentially harmful, and some that actually include substances banned by such governing bodies as the NCAA and the USOC.

## HYDRATION TIPS AND FLUID GUIDELINES

- In general, athletes do not voluntarily drink sufficient water to prevent dehydration during physical activity.
- Drink early, by the time you are thirsty, you are already dehydrated.
- Drink before, during, and after practices and games. Specifically, the *American College of Sports Medicine* recommends the following:
  - Drink 16 ounces of fluid 2 hours before exercise.
  - Drink another 8 to 16 ounces 15 minutes before exercise.
  - During exercise, drink 4 to 16 ounces of fluid every 15 to 20 minutes.
  - After exercise, drink 24 ounces of fluid for every pound lost during exercise to achieve normal fluid status within 6 hours.
- The volume and color of your urine is an excellent way of determining if you're well hydrated. Large amounts of clear urine mean you're hydrated, small amounts of dark urine mean that you need to drink more. A Urine Color Chart can be accessed at:  
<http://at.uwa.edu/admin/UM/urinecolorchart.doc>
- The NFHS SMAC strongly recommends that coaches, certified athletic trainers, physicians, and other school personnel working with athletes not provide or encourage use of any beverages for hydration of these youngsters other than water and appropriate sports drinks that meet the above criteria. They should also make information on the potential harm and lack of benefit associated with many of these other beverages available to parents and athletes.

## HEAT STRESS AND ATHLETIC PARTICIPATION

Early fall football, cross country, soccer and field hockey practices are conducted in very hot and humid weather in many parts of the United States. Due to the equipment and uniform needed in football, most of the heat problems have been associated with football. From 1995 through the 2002 football season there have been 15 high school heat stroke deaths in football. This is not acceptable. There are no excuses for heatstroke deaths, if the proper precautions are taken. During hot weather conditions the athlete is subject to the following:

**HEAT CRAMPS** – Symptoms include painful cramps involving abdominal muscles and extremities caused by intense, prolonged exercise in the heat and depletion of salt and water due to profuse sweating.

**HEAT SYNCOPE** – Symptoms include weakness fatigue and fainting due to loss of salt and water in sweat and exercise in the heat; predisposes to heat stroke.

**HEAT EXHAUSTION (WATER DEPLETION)** – Symptoms include excessive weight loss, reduced sweating, elevated skin and core body temperature, excessive thirst, weakness, headache and sometimes unconsciousness.

**HEAT EXHAUSTION (SALT DEPLETION)** – Symptoms include exhaustion, nausea, vomiting, muscle cramps, and dizziness due to profuse sweating and inadequate replacement of body salts.

**HEAT STROKE** – An acute medical emergency related to thermoregulatory failure associated with nausea, seizures, disorientation, and possible unconsciousness or coma. It may occur suddenly without being preceded by any other clinical signs. The individual is usually unconscious with a high body temperature and a hot dry skin (heat stroke victims, contrary to popular belief, may sweat profusely).

It is believed that the above-mentioned heat stress problems can be controlled provided certain precautions are taken. According to the American Academy of Pediatrics Committee on Sports Medicine, heat related illnesses are all preventable. (Sports Medicine: Health Care for Young Athletes, American Academy of Pediatrics, July 2000). The following practices and precautions are recommended:

- Each athlete should have a physical examination with a medical history when first entering a program and an annual health history update. History of previous heat illness and type of training activities before organized practice begins should be included. State High School Associations recommendations should be followed.
- It is clear that top physical performance can only be achieved by an athlete who is in top physical condition. Lack of physical fitness impairs the performance of an athlete who participates in high temperatures. Coaches should know the **PHYSICAL CONDITION** of their athletes and set practice schedules accordingly.
- Along with physical conditioning the factor of acclimatization to heat is important. Acclimatization is the process of becoming adjusted to heat and it is essential to provide for **GRADUAL ACCLIMATIZATION TO HOT WEATHER**. It is necessary for an athlete to exercise in the heat if he/she is to become acclimatized to it. It is suggested that a graduated physical conditioning program be used and that 80% acclimatization can be expected to occur after the first 7-10 days. Final stages of acclimatization to heat are marked by increased sweating and reduced salt concentration in the sweat.
- The old idea that water should be withheld from athletes during workouts has **NO SCIENTIFIC FOUNDATION**. The most important safeguard to the health of the athlete is the replacement of water. Water must be on the field and readily available to the athletes at all times. It is recommended that a minimum 10-minute water break be scheduled for every twenty minutes of heavy exercise in the heat. Athletes should rest in a shaded area during the break. **WATER SHOULD BE AVAILABLE IN UNLIMITED QUANTITIES**.
- Athletes should weigh each day before and after practice and **WEIGHT CHARTS CHECKED**. Generally a 3 percent weight loss through sweating is safe and over a 3 percent weight loss is in the danger zone. Over a 3 percent weight loss the athlete should not be allowed to practice in hot and humid conditions. Observe the athletes closely under all conditions. Do not allow athletes to practice until they have adequately replaced their weight.

- Observe athletes carefully for signs of trouble, particularly athletes who lose significant weight and the eager athlete who constantly competes at his/her capacity. Some trouble signs are nausea, incoherence, fatigue, weakness, vomiting, cramps, weak rapid pulse, visual disturbance and unsteadiness.
- Teams that encounter hot weather during the season through travel or following an unseasonably cool period, should be physically fit but will not be environmentally fit. Coaches in this situation should follow the above recommendations and substitute more frequently during games.
- Know what to do in case of an emergency and have your emergency plans written with copies to all your staff. Be familiar with immediate first aid practice and prearranged procedures for obtaining medical care, including ambulance service.
- Warn your athletes about the use of any products that contain ephedra. Ephedra has been associated with two heat stroke deaths in athletes. Ephedra speeds metabolism and increases body heat, constricts the blood vessels in the skin preventing the body from cooling itself, and by making the user feel more energetic it keeps him/her exercising longer when they should stop. Do not use ephedra or ephedra products.

**HEAT STROKE – THIS IS A MEDICAL EMERGENCY – DELAY COULD BE FATAL.**

- Immediately cool body while waiting for transfer to a hospital. Remove clothing and immerse torso in ice/cold water. Immersion therapy has the best cooling rates. A plastic baby pool can be available at all practices and games, and can always be ready for immersion procedures. If not available apply ice packs in armpits, groin and neck areas. Continue cooling efforts until EMS arrives.

**HEAT EXHAUSTION – OBTAIN MEDICAL CARE AT ONCE.**

- Cool body as you would for heat stroke while waiting for transfer to hospital. Give fluids if athlete is able to swallow and is conscious.

**SUMMARY**

- The main problem associated with exercising in the hot weather is water loss through sweating. Water loss is best replaced by allowing the athlete unrestricted access to water. Water breaks two or three times every hour are better than one break an hour. Probably the best method is to have water available at all times and to allow the athlete to drink water whenever he/she needs it. Never restrict the amount of water an athlete drinks, and be sure the athletes are drinking the water. The small amount of salt lost in sweat is adequately replaced by salting food at meals. Talk to your medical personnel concerning emergency treatment plans.

## Cheerleading Coach responsibilities from NFHS

### Coaches' Responsibilities <http://www.nfhs.org/content.aspx?id=3084>

NOTE: The following guidelines have been developed and reviewed to serve as a useful reminder of basic - procedures for coaching spirit teams. No such review is a substitute, however, for an ongoing program of education about coaching and safety techniques, or for ongoing attention to the abilities and physical condition of each team member.

1. Spirit teams should be placed under the direction of a knowledgeable coach.
2. The coach should be knowledgeable in first aid techniques and emergency procedures. Coaches must develop an emergency plan for dealing with injuries at practice, games, performances and competitions. Participants must be made aware of these procedures.
3. Coaches should remain up-to-date on all new techniques, progressions and safety regulations by frequently attending conferences, clinics and rules meetings. The coach should also belong to appropriate professional spirit organizations.
4. Placement of spirit teams at athletic events:
  - a. Spirit coaches must coordinate the placement of the spirit team with the school administrator in charge.
  - b. Whenever possible, spirit teams should be at least 3-4 feet from any boundary line. When teams cheer:
    - (1) At a wrestling match, they should be ten feet from the edge of the wrestling mat unless the facility does not permit otherwise.
    - (2) At a volleyball match, they should not stand in any playable area unless the facility does not permit otherwise.
    - (3) Along the end line at a basketball game, they must not stand within the area of the free throw lane extended. (See 2-1-13)
  - c. Spirit teams should be aware of actions occurring within the contest and be prepared to move as play advances. They should be aware of the movement of game officials and not interfere with their game responsibilities.
  - d. No actions by the spirit team should be made to purposely distract the players.
5. Rules and eligibility requirements should be shared with every team member.
6. Coaches should conduct pre- and post-season meetings with parents.
7. The coach or other school approved adult representative must be in attendance and accessible at all practices, games, performances, competitions and other spirit activities.
8. The coach should establish a good line of communication with school administrators, the athletic director, coaches and the band director.
9. All spirit activities should be held in a location suitable for spirit teams, free of obstructions, and away from excessive noise or distractions.
10. Warm up and stretching should precede all spirit team performance activities. Suggestions for stunting warm ups at a basketball game when an alternate area is not available may include:
  - a. Arrive early to warm up stunts before player warm ups begin.
  - b. The coach could enlist others to stand between player warm up and stunting warm ups on the sidelines to deflect balls or individuals.
  - c. Warm up stunts when players return to dressing room after their warm ups.
  - d. Stunting might have to be delayed until after halftime of the first game if halftime is the first time an appropriate warm up area is available.
11. Coaches should recognize a team's particular ability level and limit its activities accordingly. "Ability level" refers to the team's talents as a whole, and to individuals who should not be pressed to perform specific activities nor be limited by the ability level of the team. (See p. 74, Progressions)
12. Coaches should not permit loose, slick, baggy clothes, nylon hose/tights which are not appropriate for the specific activity in which they are participating.
13. Coaches and participants should be trained in proper spotting techniques.
14. Proper progression, spotting techniques and when appropriate, matting should be used until stunts are mastered.
15. The coach should approve all cheers, chants, posters, signs, music, etc., and ensure good sportsmanship. All team activities should be approved by the coach.
16. The coach should inform the team that all new skills must first be reviewed and approved by the coach prior to performing them.
17. Coaches should be aware of how the demands placed on a spirit team member might impact the student athlete's academic achievement.
18. Travel arrangements for participants should be approved by the coach and/or the school administration.
19. When a team member is required to wear an insulin pump/pack or similar device during team activities, it

shall be the responsibility of the coach to obtain competent medical advice concerning the protection and safety of that individual and other team members with whom she/he may be performing or stunting.

#### Organizing an Effective Practice Schedule

All safety rules must be adhered to at every spirit activity including practice. A key element in any spirit program is effective use of practice time in preparation for games, pep rallies and other team appearances.

1. The coach or other school-approved adult representative must be in attendance and accessible at all practices, games, performances, competitions and other spirit activities.
2. Team members must realize that practice is just that - a time for the team to practice and prepare for upcoming events.
3. When appropriate, begin practices by critiquing the last performance and/or game situation. Discuss things that need improvement, were successful or need to be eliminated.
4. A portion of most sessions will include perfection of material for upcoming events. This segment of the practice schedule may be spent reviewing all of the traditional material that the team uses at every game (cheers, chants, dances and especially the material that has an incorporation of any jumps, tumbling, stunts and pyramids). Some of this time may be used to work on new material for crowd involvement.
5. The last segment of practice time might focus on improving individual skills, tumbling, dance, or in whatever area the team needs improvement.

#### Strength and Conditioning

The following is a recommended list of activities that will help participants reach their athletic potential for the demands of the activity.

**WARM UP** - Warm up should include general activities that warm the body, and are independent of specific skills. Walking, jogging and stretching are examples of warm up activities. A thorough stretching program should follow the general warm up. The stretch should be an organized routine covering all parts of the body.

**SPECIFIC ACTIVITIES** - The squad should include specific activities during practice which include flexibility, endurance and muscle strengthening.

Flexibility exercises incorporated in the practice are used to decrease the possibilities of pulled muscles.

Endurance training is essential for increasing the efficiency and capacity of the cardiopulmonary system to maintain a high level of performance throughout spirit activities. Participants who incorporate exercises for muscle strengthening in their practices will be less injury prone.

As spirit activities develop more and more into a physical and athletic activity, the participants need to develop as well. As the physical strength of the team members increase, so too must the technical skills of the coach. These are the directions in which the spirit program should be moving.

For questions or concerns regarding specific health and/or medical/orthopedic issues, please refer to the most recent edition of the NFHS Sports Medicine Handbook.

#### Spotting

The active spotter is an integral part of the safety of a program. The spotter is a person who assists in the building of, or dismounting from, a partner stunt or pyramid. The primary responsibility of a spotter is to watch for safety hazards and be in a position to minimize the potential of injury with special emphasis on the head, neck and shoulder areas. Spotters shall not provide primary support for others in the performance of a stunt.

Characteristics of an Effective Spotter

1. **CONSTANT ATTENTION**
  - Concentrates on the top person
  - Has a positive attitude of responsibility
2. **KNOWLEDGE**
  - Understands the capabilities of team members
  - Recognizes positioning for effective safety

Safety Tips for Spotters

1. Primarily focus on the flyer's head.
2. Reach upward to assist the descent of the flyer keeping the flyer's weight as near the spotter as possible.
3. Listen for cues from the designated person.
4. It is better to come down safely from a poorly built stunt than to force it to stay up.

Progressions:

As with any athletic activity, it is the coach's responsibility to ensure that team members demonstrate proficiency with lower level skills before progressing to more advanced skills.

Just as the prudent football, field hockey or volleyball coach does not allow a player to take the field without

adequate skills and preparation, the prudent spirit coach will not allow his/her participants to perform skills for which they are not adequately trained.

These progressions are general in nature, and do not attempt to list every skill. All spirit stunts should be learned according to accepted progressions which means from lower to higher and from easy to more complex.

#### Partner Stunt Progression:

1. Step-up drills
2. Double-base thigh stand
3. Double-base shoulder stand
4. Single-base shoulder stand
5. Extension prep, step off dismount
6. Cradle drills
7. Extension prep, cradle dismount
8. Press extension, return to shoulders, cradle dismount
9. Press extension, cradle dismount
10. Full extension Step-up Liberty
11. Ground-up Liberty
12. Braced liberty tick-tock
13. Skills to cradles  
(i.e., toe touches and twists)
14. Basket toss drills ("rides")
15. Basket toss skill execution  
(i.e., toe touches and twists)

Note: No partner stunt should be attempted until each individual skill in the progression is mastered.

#### Tumbling Skill Levels

##### Level 1

Basic rolls, bridges, handstands, cartwheel, round-off handstand forward roll, back walkover, front walkover

##### Level 2

Standing back handspring, round-off back handspring, standing back handspring series, aerial cartwheel

##### Level 3

Round-off back handspring series, standing back tuck, round-off back tuck, round-off back handspring back tuck, layouts from round-off back handspring, whip backs, half twists, full twists.

#### Transitional Stunts:

The area of transitional stunts is one of the fastest evolving and creative areas in modern spirit programs. These stunts involve the transition of one stunt to another. The coach and students must master the individual building block skills before attempting the transition from stunt to stunt. Most transitional stunts are considered advanced stunts and should only be performed by well trained, skillful teams that are taught and supervised by a well qualified coach.

Rule 2-11-1 permits a greater variety of transitional release stunts. The torso of the flyer is no longer required to remain upright, but the flyer must not become inverted. The release must also be a continuous up-and-down movement with no pause at the top. The flyer cannot lose contact with a bracer during the loss of contact with the base(s).

#### Training/Safety Equipment

As with other athletics, training aids may be made available to a spirit program. Training aids for spirit programs may include various types of matting, spotting belts, handspring trainers and spring-assisted equipment such as spring floors, mini-trampolines, and springboards. While some of these devices, such as spring-assisted apparatuses, may not be used for competition or performance, they may assist with the learning of a skill or allow for repetitive skill practice with less strain. Regardless of their use, it is the coach's responsibility to ensure that these aids are being used under properly trained supervision and that they are kept in proper condition.