ST. TAMMANY PARISH SCHOOL BOARD

EXTREME HEAT AND HYDRATION POLICY

The St. Tammany Parish School Board seeks to protect students participating in junior and senior high school athletics, marching band, dance, cheerleading and Junior Reserve Officer Training Corps (JROTC) -- henceforth collectively known as “student athletes” -- from heat-related illness or injury while engaged in school-sponsored programs or activities during and after school hours. Heat-related conditions that demand heightened attention include dehydration, heat cramps, heat exhaustion and heat stroke. The best defense is prevention. Overall strategies for the prevention of exertional heat illnesses include establishing guidelines for the prevention of and response to specific heat-related circumstances and setting required responsibilities of District personnel. Student athletes and staff need to be aware of who is at greatest risk and what actions can be taken to eliminate serious situations. Extreme caution and necessary steps to protect the student athletes must be followed as outlined in the Superintendent’s Guidelines. It is noted that on occasion there may be singular events that cannot be easily altered due to prior scheduling or date/time constraints (i.e. Louisiana State high school athletic playoffs, contracted games and off-campus band performances) despite the presence of extreme heat. When time permits, the involved school’s principal should consult with the Superintendent or her designee before participation in the activity. Although physical education, recess and field trips include exposure to heat, their duration is typically short. Thus, general guidelines for this Policy will exclude these events. District personnel are expected to exercise decisive awareness and implement precautions that pertain to heat-related illnesses and hydration during any school activity.

A hydration protocol which includes hydration and rehydration strategies that considers individual sport dynamics (rest breaks, fluid access), environmental factors, acclimatization state, exercise duration, exercise intensity and individual response to heat stress must be established. Instruction in the management of proper hydration along with increasing accessibility will promote the safety of student athletes.

The Superintendent shall be responsible for establishing written procedures and guidelines for physical athletics on days when the temperature and humidity are elevated resulting in a heat index of 90°F or above, thereby increasing the risk of heat illness. To address the potential risks inherent in exposure to increased levels of environmental heat stress, School District personnel will be required to monitor weather conditions and utilize these guidelines and protocols for modifying activities. When warranted, based on the Superintendent’s Extreme Heat and Hydration Guidelines, the on-site heat index will be measured using a scientifically approved heat index measurement instrument prior to the start of and during physical activities at each school. These guidelines are intended for promoting the well-being of student athletes and staff during times of extreme heat conditions by consistently implementing a planned management strategy. Such procedures shall be distributed each year to all school administrators, student athletes and staff involved in physical activities, along with appropriate training.

Adopted March 13, 2008
INTRODUCTION

The Superintendent’s Extreme Heat and Hydration Guidelines are created for the protection of students participating in junior and senior high school athletics, marching band, dance, cheerleading and Junior Reserve Officer Training Corps (JROTC) --henceforth collectively known as “student athletes” -- while performing their activities outdoors during periods of extreme heat. These guidelines and procedures are set forth to provide a strong framework by which the safety of practicing in extreme heat conditions may be gauged. These guidelines provide definitive recommendations for administrators, athletic trainers (ATC), athletic directors, coaches, band leaders, teachers or other supervisory staff regarding the modification or suspension of practices when necessitated by extreme heat conditions. Additional information regarding the appropriate recognition of heat illnesses and specific protocols to be followed for both initial management and eventual “return to play” are defined as well as the appropriate maintenance of hydration. It is noted that on occasion there may be singular events that cannot be easily altered due to prior scheduling or date/time constraints (i.e. Louisiana State high school athletic playoffs, contracted games and off-campus band performances) despite the presence of extreme heat. When time permits, the involved school’s principal should consult with the Superintendent or her designee before participation in the activity. Extreme caution and necessary steps to protect the student athletes must be followed as outlined in these guidelines. Although physical education, recess and field trips include exposure to heat, their duration is typically short. Thus, general guidelines for this Policy will exclude these events. District personnel are expected to exercise decisive awareness and implement precautions that pertain to heat-related illnesses and hydration during any school activity.

Some student athletes participating in designated sports are required to have an annual pre-participation physical examination. Although all athletic programs are not as exertional as others, they are still subject to extreme heat conditions. It is critical that all athletes are healthy and hydrated. As a proactive measure, which is to begin at the start of the 2008-2009 school year, all student athletes are required to obtain an annual pre-participation physical examination from a licensed physician before participating in any athletic, marching band, dance, cheerleading or JROTC activity. Appropriate documentation (APPENDIX A – Medical History and Physical Examination Forms) must be presented to the supervisory staff for review prior to student participation.

• HEAT ACCLIMATIZATION DURING THE PRESEASON

- An important way to help prevent heat stress and resultant heat illness is through proper acclimatization to the heat. In children and adolescents, this process can take 10-14 days – longer than in adults.
- Acclimatization improves the sweating mechanism of the student athlete. As a result, the dissipation of heat by the student athlete is enhanced reducing the risk of heat illness.
- A lack of acclimation to the heat and poor cardiovascular fitness, are prominent contributors to heat illness in student athletes.
- Optimal heat acclimation and cardiovascular fitness can be achieved only when the student athlete is well hydrated.
The first 2-3 days of preseason athletic practice present the greatest danger for serious heat illness because student athletes often report for practice insufficiently acclimated to the heat and/or in a poor state of cardiovascular fitness.

**SIGNS AND SYMPTOMS OF HEAT ILLNESS**

Equally as important as prevention of exertional heat-illness is the recognition of a wide-array of symptoms and expedient treatment. It is important to recognize that exercising children and adolescents do not adapt to temperature extremes as effectively as adults. This is due primarily to differences in surface area-to-body mass ratios, increased production of heat per mass unit, reduced sweating capacity and decreased physiological drive to drink fluids. Exercise tolerance for children and adolescents is significantly lower than that of adults when the air temperature exceeds 95°F. Humidity further complicates matters as fluid losses from sweating are increased while dissipation of heat from the body via evaporation is reduced. As a result, student athletes practicing in hot, humid conditions are at risk for both dehydration and the development of increased core body temperatures leading to heat-related illness.

Symptoms of heat-related illness range from mild to potentially life-threatening. Below is a common list of signs and symptoms associated with varying degrees of exertional heat illness that may occur during or even after discontinuing the activity:

- Muscle spasms / cramps
- Heavy or profuse sweating
- Cessation of sweating may occur in more severe cases
- Headache
- Skin changes such as flushing or cool, pale extremities
- Dizziness, lightheadedness
- Elevated core body temperature
- Nausea, vomiting
- Rapid pulse, shallow breathing
- Disorientation, confusion
- Loss of consciousness

**NOTE:** Student athletes with one or more of the following are at increased risk for heat illness:

- Prior history of heat illness
- Signs of poor heat acclimation and/or poor cardiovascular fitness
- Fever, nausea, diarrhea
- Individuals who routinely lose > 1% of their body weight during practice
- Use of supplements or medications with diuretic or stimulant properties
- History of Diabetes and/or Obesity
EXERTIONAL HEAT ILLNESS AND ON-FIELD TREATMENT

The following table summarizes the symptoms and specific recommended treatments. Individual responses to heat exposure varies and people may not exactly fit the below profile, therefore close assessment of each individual is required, as some people may progress quicker to Heat Stroke than others.

<table>
<thead>
<tr>
<th>TYPES OF HEAT ILLNESS</th>
<th>SYMPTOMS</th>
<th>INITIAL TREATMENT</th>
</tr>
</thead>
</table>
| **Dehydration**       | • Dry Mouth  
                        • Thirst  
                        • Headache  
                        • Dizziness  
                        • Muscle cramps  
                        • Excessive fatigue  
                        • Decreased performance | • Move student athlete to cool environment  
                                                        • Initiate oral rehydration  
                                                        • Maintain hydration throughout practice with appropriate fluids (refer to Hydration Guidelines)  
                                                        • If student athlete fails oral rehydration (due to excessive nausea or vomiting) transport to medical facility for intravenous fluids |
| **Heat Cramps**       | • Painful, persistent muscle spasms  
                        • Calves, abdomen predominate but may involve any muscle group  
                        • Not associated with pulled/strained muscles | • Re-establish normal hydration  
                                                        • Replace sodium losses  
                                                        • Stretching, relaxation or massage may help acute pain or cramping |
| **Heat Exhaustion**   | • Core temp: 97°-104°F  
                        • Unusual fatigue  
                        • Loss of coordination  
                        • Muscle cramps  
                        • Nausea / vomiting  
                        • Profuse sweating  
                        • Pale skin  
                        • Headache  
                        • Dizziness  
                        • Hyperventilation | • Remove student athlete from play  
                                                        • Immediately move to shaded or air-conditioned area  
                                                        • Remove excess clothing and equipment  
                                                        • Measure body-core temperature  
                                                        • Cool with fans, ice towels, ice bags (armpits/groin/neck) or ice bath  
                                                        • Legs kept above heart level  
                                                        • Rehydrate orally if athlete not nauseated or vomiting  
                                                        • Monitor: Heart Rate (HR), Respiratory Rate (RR), Blood Pressure (BP), Mental Status  
                                                        • Transport to emergency facility if rapid improvement not noted or athlete worsens |
| **Heat Stroke**       | • Core temp: > 104°F  
                        • Hallmark symptom: Change in mental status (confusion, irritability, altered consciousness, seizures, coma, etc.)  
                        • Hot and wet or dry skin  
                        • ↑ HR, ↑ RR, or ↓ BP  
                        • Other symptoms similar to heat exhaustion (see above) | • THIS IS A MEDICAL EMERGENCY  
                                                        • Activate 9-1-1, delay can be fatal  
                                                        • Aggressive and immediate cooling (see above) while awaiting Emergency Medical Services. Removal of clothing and immersion of torso in ice bath is most effective. |
Dehydration:
- If degree of dehydration, as assessed by team’s Athletic Trainer (ATC), supervising staff or coach, is minor and the student athlete is symptom-free (see previous list), continued participation is acceptable.
- If there is any concern for continuation of symptoms after oral rehydration on the field the student athlete should be held out from continued participation.

Heat Cramps:
- Student athlete should be held out until resolution of symptoms. When symptoms have resolved, student athlete should be reassessed by team’s ATC, supervising staff or coach to determine if he/she can perform at the level needed for successful participation.

Heat Exhaustion:
- Student athlete is held out of practice until the next day at a minimum. Student athlete must be symptom-free and fully hydrated as assessed by team’s ATC, supervising staff or coach. Physician clearance is strongly recommended to rule-out possible underlying condition(s) that may predispose the student athlete for further problems. Student athlete is held out of practice until the next day at a minimum.

Heat Stroke:
- Medical clearance is required for return to play. An individualized, step-wise return to play strategy is to be devised by the student athlete’s physician with the assistance of other qualified health care professionals as appropriate.

GUIDELINES FOR MODIFICATION OF PRACTICES BASED UPON HEAT INDEX

- The “Heat Index” is a measurement that takes into account both the ambient air temperature and relative humidity. This is a reliable measurement used to assess environmental heat stress upon student athletes with specific reference to heat illness.
- Thirty minutes prior to the start of activity, heat index measurements should be taken at the practice field or competition site. This will be done using portable heat index measurement devices provided to the schools. Readings must be performed on site. Any reading greater than 90°F Heat Index must be reported to all coaches, ATC, directors and sponsors in a timely manner.
- If a Heat Index reading requires modification of an activity (greater than 90°F Heat Index) then repeat readings would be required every 30 minutes to reassess the need to further curtail or allow increased activities.
- When a practice or event is “Black Flagged” (Heat Index greater than 109°F) repeat measurements will be taken each subsequent hour. Activity may resume once the heat index drops to an acceptable level.
- Heat Index readings will be performed by an individual designated by the school administrator. Preferably when possible, coaches should be excluded from this responsibility which may be performed by the school’s ATC, Athletic Director or a member of its administration or administrative designee. These measurements will be recorded on a Heat Index Measurement Record (APPENDIX B) and kept in a fashion that is available for inspection upon request.
- This procedure is to be used until such time as the temperature is below 90°F. At that point no combination of heat and humidity will result in the need to modify activity. For schools that have an ATC, Walkie/talkies will be utilized for ATC and selected athletic sponsors to instantly communicate in an emergency.

Practice includes total exposure to the heat. The recommendations in these guidelines do not indicate an exclusive course of treatment or serve as a standard of medical care. Variations, taking into account individual circumstances, may be appropriate.
Activities should be modified or eliminated based on the measured Heat Index as specified below.

<table>
<thead>
<tr>
<th>Heat Index Measurement</th>
<th>Guidelines for Modification of Practices</th>
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<tbody>
<tr>
<td>Under 90°F by Heat Index</td>
<td>All Sports</td>
</tr>
<tr>
<td>“Green Flag”</td>
<td>➢ Provide ample amounts of water. This means that water should always be available at regular intervals and student athletes should be able to take in as much water as they desire.</td>
</tr>
<tr>
<td></td>
<td>➢ Optional water breaks approximately every 15-20 minutes for 5-10 minutes duration.</td>
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<tr>
<td></td>
<td>➢ Ice-down towels for cooling.</td>
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<tr>
<td></td>
<td>➢ Watch / monitor student athletes carefully for necessary action.</td>
</tr>
<tr>
<td>90°F to 99°F by Heat Index</td>
<td>All Sports</td>
</tr>
<tr>
<td>“Yellow Flag”</td>
<td>➢ Provide ample amounts of water. This means that water should always be available at regular intervals and student athletes should be able to take in as much water as they desire.</td>
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<tr>
<td></td>
<td>➢ Mandatory water breaks approximately every 15-20 minutes for 5-10 minutes duration.</td>
</tr>
<tr>
<td></td>
<td>➢ Ice-down towels for cooling.</td>
</tr>
<tr>
<td></td>
<td>➢ Watch / monitor student athletes carefully for necessary action.</td>
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<tr>
<td></td>
<td><strong>Contact Sports</strong></td>
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<td></td>
<td>➢ Helmets and other possible equipment removed if not involved in contact or necessary for safety.</td>
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<tr>
<td></td>
<td>➢ Reduce time of outside activity. <strong>RECOMMENDATION:</strong> Practice should not exceed 2-1/2 hours. Consider moving practice to morning or later in the day.</td>
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<tr>
<td></td>
<td>➢ Re-check temperature and heat index approximately every 30 minutes to monitor for increased risks.</td>
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<tr>
<td>100°F to 109°F by Heat Index</td>
<td>All Sports</td>
</tr>
<tr>
<td>“Red Flag”</td>
<td>➢ Provide ample amounts of water. This means that water should always be available at regular intervals and student athletes should be able to take in as much water as they desire.</td>
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<tr>
<td></td>
<td>➢ Mandatory water breaks approximately every 15-20 minutes for 5-10 minutes duration.</td>
</tr>
<tr>
<td></td>
<td>➢ Ice-down towels for cooling.</td>
</tr>
<tr>
<td></td>
<td>➢ Watch / monitor student athletes carefully for necessary action.</td>
</tr>
<tr>
<td></td>
<td>➢ Alter uniforms by removing items where feasible.</td>
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<tr>
<td></td>
<td>➢ Allow for changes to dry T-shirts and shorts.</td>
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<tr>
<td></td>
<td>➢ Reduce time of outside activity as well as indoor activity if air conditioning is not available. Outdoor practice length should be 2 hours or less. Consider moving practice to morning or later in the day. Limited conditioning.</td>
</tr>
<tr>
<td></td>
<td><strong>Contact sports and activities with additional equipment</strong></td>
</tr>
<tr>
<td></td>
<td>➢ Helmets and other possible equipment removed if not involved in contact or necessary for safety. <strong>RECOMMENDATION:</strong> Football athletes practice in helmets, t-shirts and shorts.</td>
</tr>
<tr>
<td></td>
<td>➢ Re-check temperature and heat index approximately every 30 minutes for increased risks.</td>
</tr>
<tr>
<td>Above 110°F by Heat Index</td>
<td>All Sports</td>
</tr>
<tr>
<td>“Black Flag”</td>
<td>➢ Stop all outside activity in practice and/or play and stop all inside activity if air conditioning is unavailable.</td>
</tr>
</tbody>
</table>

**NOTE:** See **RECOMMENDATIONS FOR HYDRATION MAINTENANCE AND FLUID REPLACEMENT** for information on appropriate types of fluid replacement in addition to water.
RECOMMENDATIONS FOR HYDRATION MAINTENANCE
AND FLUID REPLACEMENT

- Before prolonged physical activity, the student athlete should be well-hydrated and well-fed.
  - 17-20 ounces of fluid 2-3 hours before the start of practice
  - 10-12 ounces of fluid 20-30 minutes before the start of practice
- During exercise, periodic drinking should be enforced – even if the student athlete does not feel thirsty. By the time the student athlete is thirsty, he/she is already dehydrated.
- Each 15-20 minutes the athlete should consume:
  - 5-8 ounces of fluid if weighing < 90 lbs.
  - 8-12 ounces of fluid if weighing > 90 lbs.
- After practice, replace fluids at a rate of 20-24 ounces for every pound of weight lost during practice.
- Check the color of the student athlete’s urine. A dark, gold color suggests dehydration.
- Pre- and post-practice weights are useful for assessing for levels of dehydration which generally occurs with the loss of > 2% of body weight.
  - Dehydration of just one to two percent of body weight (only 1.5-3 lb. for a 150-pound student athlete) can negatively influence performance.
  - Dehydration of greater than three percent of body weight increases an student athlete’s risk of heat illness (heat cramps, heat exhaustion, heat stroke).
- What to Drink?
  - The carbohydrate concentration in the ideal fluid replacement solution should be in the range of 6-8% carbohydrate.
  - During events when a high rate of fluid intake is necessary to sustain hydration, sports drinks with < 7% carbohydrate should be used to optimize fluid delivery. These sports drinks have a faster gastric emptying rate and thus aid in hydration.
  - Sports drinks with a sugar content > 8% and fruit juices should be avoided. Their ingestion results in a slow gastric emptying rate and can contribute to dehydration.
  - Fluids with salt (sodium chloride) are beneficial to increasing thirst and voluntary fluid intake as well as offsetting the amount of fluid lost with sweat. Salt should never be added to drinks and salt tablets should be avoided.
  - Cool beverages at temperatures between 50 to 59°F are recommended for best palatability and results with fluid replacement.
  - Carbonated beverages should be avoided. They can cause bloating and may decrease the amount of fluid consumed.
  - Caffeinated beverages should be avoided, such as coffee, tea, and soft drinks -- including “Energy Drinks” -- which are diuretics and increase the participant’s risk of dehydration and subsequent heat illness.

OTHER CONSIDERATIONS WHEN EXERCISING IN THE HEAT

- Light weight and light colored clothing should be worn. Layered clothing should be avoided.
- Articles of clothing that prevent water absorption should be avoided. “Dry-fit” or other similar clothing materials with “wicking” properties help reduce the risk of heat illness by enhancing evaporation.
- Early morning commonly produces a humid environment and lower temperatures. Usually, as the sun rises the temperature will increase and the humidity decreases. As the evening hours approach, the temperature decreases and the humidity will rise. Often, the most critical times to monitor athletes’ ability to exercise in
hot weather occurs when the temperature rises quickly during the early morning prior to the sun burning off the humidity or during storms when the humidity remains high due to cloud cover.

- A mild breeze can reduce the humidity on a particular field, as well as improve the evaporative process.
- Field watering after practice sessions are complete can help reduce the ambient humidity on or near the athletic field, thus reducing the heat stress on student athletes.
- When utilizing sunscreen or sun block lotions (UVA/UVB), only use products that do not block or interfere with the body’s cooling methods of sweating and evaporation.
- Since core body temperature in children can increase at an alarmingly fast pace, prevention is key.

**EDUCATION AND COMMUNICATION**

To clearly convey the necessary information concerning heat extremes and hydration to all parties, the following will be considered. In addition, parents will be encouraged to support these guidelines by cooperating and adopting them at home.

<table>
<thead>
<tr>
<th>Public/Parents</th>
<th>Letter from the Superintendent</th>
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<tbody>
<tr>
<td></td>
<td>Notification of Media</td>
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<tr>
<td></td>
<td>Posting on St. Tammany Parish School Board Website</td>
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<td></td>
<td>School Parent Meetings</td>
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<td></td>
<td>Parent/Teacher Association Newsletters</td>
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<td></td>
<td>Parent Volunteer Training when available</td>
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**Coaches/Sponsors/Directors & School Administrators**

<table>
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<tr>
<th>Letter from the Superintendent</th>
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<tbody>
<tr>
<td>Posting on St. Tammany Parish School Board Website</td>
</tr>
<tr>
<td>Posters in the Locker Rooms/Gyms/Activity Rooms</td>
</tr>
<tr>
<td>Inclusion in P.E. Curriculum (Suggested inclusion: Hydration under <em>Aim for Fitness</em> and Heat Illnesses/Prevention under <em>First Aid</em>)</td>
</tr>
<tr>
<td>Professional Development/Banking Hours</td>
</tr>
<tr>
<td>Certification in Cardiopulmonary Resuscitation &amp; First Aid for Designated Staff</td>
</tr>
<tr>
<td>Coaches/Sponsors/Directors &amp; School Administrators’ Meetings</td>
</tr>
</tbody>
</table>

**Student Athletes**

<table>
<thead>
<tr>
<th>Letter from the Superintendent</th>
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<tbody>
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<td>Posting on St. Tammany Parish School Board Website</td>
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<tr>
<td>Posters in the Locker Rooms/Gyms/Activity Rooms</td>
</tr>
<tr>
<td>Through Instruction in P.E. &amp; Extra Curricular Athletic Activities</td>
</tr>
<tr>
<td>Preseason Student Athlete Meetings and as needed</td>
</tr>
</tbody>
</table>
APPENDIX A

LHSAA MEDICAL HISTORY EVALUATION

IMPORTANT: This form must be kept on file with the school and is subject to inspection by the LHSAA Rules Compliance Team.

PART I: INFORMATION (To be filled out by parent or guardian only)

Name: ___________________________ Grade: ______________________ School: ______________________

Sex: M / F  Age: ______ Date of Birth: ____________  Home Telephone #: ____________  Sports: ______

Social Security Number: ___________________________ Address: ___________________________ City: ____________ Zip: ____________

Parent's Name: ___________________________ Parent's Employer: ___________________________ Work Telephone #: ____________

Insurance Company: ___________________________ Policy #: ___________________________ Family Doctor: ___________________________

PART II: MEDICAL HISTORY (To be filled out by parent or guardian)

Has or Does this athlete Circle & please explain all "yes" answers below

1. Have a medical problem or injury since his/her last evaluation? ............................................................... YES NO
   Ever not been allowed to participate in sports for a medical reason? .............................................................. YES NO
2. Ever been hospitalized? .......................................................................................................................... YES NO
   Ever had surgery? .................................................................................................................................. YES NO
   Have any missing organs? (eye, kidney, testicle, etc.) ............................................................................... YES NO
3. Presently take any medication? .............................................................................................................. YES NO
4. Have any allergies to medicine or insect bites? .......................................................................................... YES NO
5. Passed out during or after exercise? ........................................................................................................ YES NO
   Been dizzy or passed out during or after exercise? .................................................................................... YES NO
   Have chest pain during or after exercise? .................................................................................................... YES NO
   Tire more quickly than his/her friends during exercise? ............................................................................ YES NO
   Have high blood pressure? ....................................................................................................................... YES NO
   Been told he/she has a heart murmur? ........................................................................................................ YES NO
   Have racing of the heart or skipped heartbeats? .......................................................................................... YES NO
   Have a family member that died of heart problems or sudden death before age 50? .............................. YES NO
6. Have any skin problems? ......................................................................................................................... YES NO
7. Ever had a head or neck injury? ................................................................................................................ YES NO
   Ever been knocked out or unconscious? ..................................................................................................... YES NO
   Ever had a seizure? .................................................................................................................................. YES NO
   Ever had a stinger, burn, or pinched nerve? ................................................................................................. YES NO
8. Ever had heat cramps? ............................................................................................................................... YES NO
   Ever been dizzy or passed out in the heat? .................................................................................................... YES NO
9. Have trouble with breathing or coughing during or after activity? ...................................................... YES NO
10. Use any special equipment? (pads, braces, neck rolls, eye guards, kidney belt, etc.) ............................... YES NO
11. Have any problems with vision? ................................................................................................................ YES NO
12. Wear glasses or contacts? ......................................................................................................................... YES NO
13. Have any medical problems listed below? (Please check off)
   ➤ High Blood Pressure  ➤ Rheumatic Fever  ➤ Diabetes  ➤ Hepatitis
   ➤ Mononucleosis  ➤ Abnormal Bleeding  ➤ Tuberculosis  ➤ Asthma
   ➤ Sickle Cell Disease/Trait  ➤ Other (list)  ➤  ➤  ➤  ➤
15. Female athletes, list dates for:
   First menstrual period: ___________________________  Last menstrual period: ___________________________
   Longest time between periods last year: ____________

Please explain all "yes" answers from above: ___________________________________________________________
PART III: SIGNATURES
(You must answer these questions and sign for your child to be examined)

1. The information on the reverse is current and correct to the best of my knowledge .............................................................. YES NO
2. I give my permission for my child to be examined for school-related activities ................................................................. YES NO
3. If, in the judgment of a school representative, the named student athlete needs care or treatment as a result of an injury or sickness, I do hereby request, consent and authorize for such care as may be deemed necessary .................. YES NO
4. I recognize the evaluation to be done on my child is a standard pre-participation screening examination, and that no in-depth testing, x-rays, lab work, or cardiac testing will be performed................................................................. YES NO
5. I understand that if the medical status of my child changes in any significant manner after his/her physical examination, I will notify his/her principal of the change immediately................................................................. YES NO
6. I give my permission for the athletic trainer to release information concerning my child’s injuries to the head coach/athletic director/principal of his/her school ................................................................. YES NO

Signature of Parent/Guardian: ___________________________ Date: ___________________________

Signature of Student Athlete: ___________________________ Date: ___________________________

PART IV: PHYSICAL (To be filled out by a licensed physician /licensed nurse practitioner in collaboration with doctor or a licensed physician’s assistant under the supervision of a licensed physician.)

<table>
<thead>
<tr>
<th>Height</th>
<th>Weight</th>
<th>Blood Pressure /</th>
<th>Pulse</th>
</tr>
</thead>
<tbody>
<tr>
<td>SYSTEM</td>
<td>NORMAL</td>
<td>ABNORMAL</td>
<td>INITIALS</td>
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<td>LIMTED</td>
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<td>Heart</td>
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<td>Lung</td>
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<td>Other</td>
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<td>COMPLETE</td>
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<td>Abdominal</td>
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<td>Genitalia</td>
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<td>Neck</td>
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<td>Ankle</td>
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</tr>
<tr>
<td>Foot</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eye</td>
<td>Right 20/</td>
<td>Left 20/</td>
<td>Corrected</td>
</tr>
</tbody>
</table>

CLEARANCE:     _______A. Cleared
                _______B. Cleared after further evaluation/treatment
                _______C. Not cleared for: _______Collision _______Contact _______Non-contact

RECOMMENDATIONS: ______________________________________________________

NAME OF MD/NURSE PRACTITIONER: ___________________________ DATE: ___________________________

ADDRESS: ______________________________________ TELEPHONE: ___________________________

SIGNATURE OF MD/NURSE PRACTITIONER: ___________________________
### ST TAMMANY PARISH SCHOOL BOARD
#### HEAT INDEX MEASUREMENT RECORD
##### SPORT/ACTIVITY ____________________

<table>
<thead>
<tr>
<th>ACTION(S)</th>
<th>(Check those that apply.)</th>
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</thead>
</table>

<table>
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<tr>
<th>DATE</th>
<th>STARTING TIME OF ACTIVITY/ PRACTICE</th>
<th>ENDING TIME OF ACTIVITY/ PRACTICE</th>
<th>TIME OF HEAT INDEX READING</th>
<th>LOCATION OF READING</th>
<th>HEAT INDEX READING</th>
<th>CONTINUED AND MONITORED</th>
<th>CHANGED PRACTICE TIME</th>
<th>ADDED EXTRA WATER BREAKS</th>
<th>ICED-DOWN TOWELS FOR COOLING</th>
<th>PRACTICED IN LIMITED GEAR / ALTERED UNIFORM</th>
<th>REDUCED TIME OUTSIDE</th>
<th>ALLOWED CHANGE INTO DRY CLOTHES</th>
<th>STOPPED ALL OUTSIDE ACTIVITY</th>
<th>RELAYED INFO</th>
<th>COACH/ SPONSOR SIGNS</th>
<th>DESIGNEE SIGNS &amp; COMMENTS</th>
</tr>
</thead>
</table>


*Bid.*

