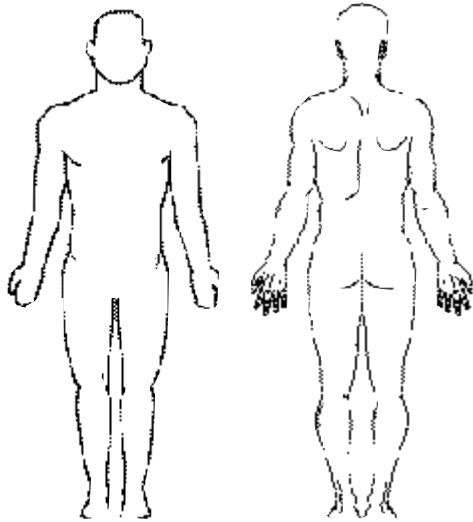


SAMPLE FORM
NATIONAL FEDERATION OF STATE HIGH SCHOOL ASSOCIATIONS
PHYSICIAN RELEASE FOR WRESTLER TO
PARTICIPATE WITH SKIN LESION

Name: _____ Date of Exam: ___/___/___

Mark Location of Lesion(s)



Diagnosis _____

Communicable _____ Non-Contagious _____

Location of Lesion(s) _____

Date Treatment Started: ___ / ___ / ___

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

Earliest Date may return to participation: ___ / ___ / ___

Physician Name (Printed or Typed) _____

Provider Signature _____ Office Phone #: _____
(M.D. or D.O.)

Office Address _____

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

Note: If an on-site tournament physician is present, he/she may overrule the diagnosis of the physician signing this form. Below are some Treatment guidelines that suggest minimum treatment before return to wrestling:

Bacterial diseases (impetigo, boils): Oral antibiotic for 2 days and no drainage, oozing, or moist lesions.

Herpetic lesions (Simplex fever blisters, Zooster, Gladiatorum): Minimum of 120 hours or a full five days of oral anti-viral treatment with no new lesions and all lesions scabbed over. If no oral treatment has been given, no visible lesions may be present.

Tinea lesions (ringworm scalp, skin): Oral or topical treatment for 7 days on skin and 14 days on scalp.

Scabies, Head Lice: 24 hours after appropriate topical management.

Conjunctivitis: 24 hours of topical or oral medication and no discharge.

Molluscum Contagiosum: 24 hours after curettage.