

WEBSTER PUBLIC SCHOOLS

Athletic Team/Extra-Curricular Participation Clearance

Student Name: _____

Age: _____ Date of Birth: _____ Grade: _____

Address: _____ Home Phone: _____

Name of Parent/Guardian: _____ Cell/Work Phone: _____

Sport/Activity: _____
School Year: _____
☐ Fall ☐ Winter ☐ Spring
Coach/Advisor: _____

This form is to be completed and signed by each student participating in athletics and/or extra-curricular activities and his/her parent/guardian. This form MUST be turned in to the appropriate coach/advisor prior to the first day of any athletic/activity participation. There are no exceptions to this requirement.

Parent: ☐ Student: ☐ I have read and understand the Student Handbook, including the Hazing Law, Chemical Health, Concussion, and Attendance Policy.

Parent: ☐ Student: ☐ I have received, read, and understand the opioid substance education materials.

Parent: ☐ Student: ☐ I have received, read, and understand the COVID-19 educational materials.
(Additional information can be found at [cdc.gov/coronavirus](https://www.cdc.gov/coronavirus))

Athletic Director's Sports Meeting: ☐ Fall ☐ Winter ☐ Spring

Parent: ☐ I did attend & understand the presentation ☐ I did not attend

Student: ☐ I did attend & understand the presentation ☐ I did not attend

Please check the boxes as they apply to you and/or your child:

Parent: ☐ Student: ☐ I have received concussion educational materials.

-AND/OR-

Parent: ☐ Student: ☐ I have completed the on-line concussion course.

(This course can be found at <http://www.nfhslearn.com>)

Parent/Guardian, please check one:

☐ Student HAS NOT experienced a concussion/head or brain injury.

☐ Student HAS experienced a concussion/head or brain injury. (Provide documentation from Physician.)

STUDENT Signature: _____ **Date:** _____

PARENT Signature: _____ **Date:** _____

For information/resources on rules, modifications, and guidelines visit
MIAA.net Covid-19 Task Force

**PARENT/GUARDIAN: PLEASE COMPLETE EMERGENCY CONTACT
INFORMATION ON REVERSE SIDE**

TO BE COMPLETED BY SCHOOL OFFICIALS:

☐ Eligible to participate ☐ Academic Eligibility

Athletic Director's Signature

Date

☐ Physical exam on file and up to date

Nurse's Signature

Date of Exam

To Be Filled Out By Parent:

STUDENT: _____ SCHOOL YEAR: _____
SPORT/EXTRA-CURRICULAR ACTIVITY: _____

EMERGENCY CONTACT INFORMATION

Please print all information

Parent/Guardian: _____ Home Phone: _____

Email: _____ Cell Phone: _____

Second Contact: _____ Relationship to Student: _____

Phone: _____ Cell Phone: _____

Student's Physician: _____ Phone: _____

Allergies: _____

Other Medical Conditions your child's Coach/ Advisor should be aware of: _____

Parents/Guardians: Please detach and return this completed form as soon as possible to your child's coach/advisor or to the Athletic Director. The attached informational documents are for you and your child; please put them in a safe place should you need access to the information provided.

Sept 30, 2020
Updated, February 2020; If

STAY SAFE ON AND OFF THE FIELD



Stay home if
you are sick.



Bring your own
equipment and gear
(if possible)



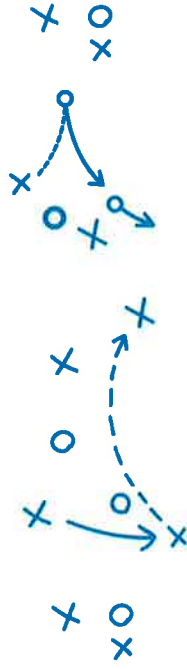
Cover your coughs
and sneezes with a
tissue or your elbow.



Wash your hands or
use sanitizer before
and after events and
sharing equipment.



Tell a coach or staff
member if you don't
feel well.



cdc.gov/coronavirus

KEEP YOUTH ATHLETES SAFE

Reduce the Spread of COVID-19 in Youth Sports

Accessible Version: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/youth-sports.html>

Reduce physical closeness between players when possible

- Allow players to focus on building individual skills, like batting, dribbling, kicking, and strength training
- Limit full contact between players to game days (avoid during practice)
- Increase space between players in the practice areas, including on the sideline, dugout, and bench
- Avoid high fives, handshakes, fist bumps or hugs



Minimize sharing of equipment or gear

- Encourage players to bring their own equipment, like gloves, balls, and helmets (if possible)
- Clean and disinfect shared items between use



Limit travel outside of your area

- Consider competing against teams in your local area (neighborhood, town, or community)

Identify small groups and keep them together

- Avoid mixing between groups
- Stagger the arrival and drop off of each group to limit interaction
- Have scrimmages within team to limit exposure



Implement plans to **space out spectators by 6 feet** at games or competitions. Limit nonessential visitors, spectators, and volunteers.

Lower Risk



Higher risk



Skill-building drills at home



Within-team competition



Full competition from different areas



cdc.gov/coronavirus

CONCUSSION FACT SHEET FOR PARENTS



WHAT IS A CONCUSSION?

A concussion is a type of traumatic brain injury. Concussions are caused by a bump or blow to the head. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious.

You can’t see a concussion. Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days or weeks after the injury. If your child reports any symptoms of concussion, or if you notice the symptoms yourself, seek medical attention right away.

WHAT ARE THE SIGNS AND SYMPTOMS OF CONCUSSION?

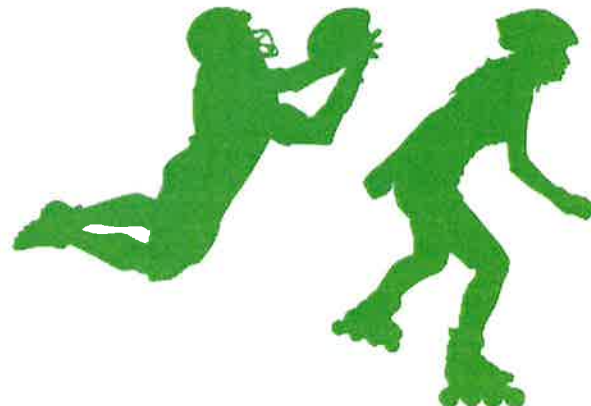
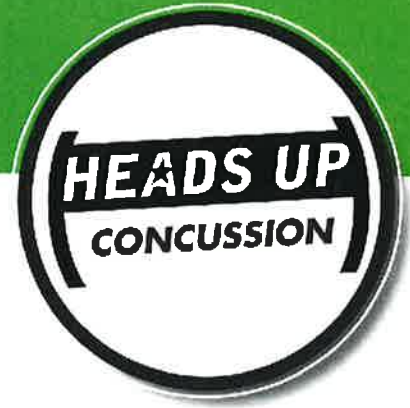
If your child has experienced a bump or blow to the head during a game or practice, look for any of the following signs of a concussion:

SYMPTOMS REPORTED BY ATHLETE:

- Headache or “pressure” in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Confusion
- Just not “feeling right” or is “feeling down”

SIGNS OBSERVED BY PARENTS/ GUARDIANS:

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior, or personality changes



DANGER SIGNS

Be alert for symptoms that worsen over time. Your child or teen should be seen in an emergency department right away if s/he has:

- One pupil (the black part in the middle of the eye) larger than the other
- Drowsiness or cannot be awakened
- A headache that gets worse and does not go away
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Difficulty recognizing people or places
- Increasing confusion, restlessness, or agitation
- Unusual behavior
- Loss of consciousness (even a brief loss of consciousness should be taken seriously)

WHAT SHOULD YOU DO IF YOU THINK YOUR CHILD HAS A CONCUSSION?

1. SEEK MEDICAL ATTENTION RIGHT AWAY

A health care professional will be able to decide how serious the concussion is and when it is safe for your child to return to regular activities, including sports.

2. KEEP YOUR CHILD OUT OF PLAY.

Concussions take time to heal. Don't let your child return to play the day of the injury and until a health care professional says it's OK. Children who return to play too soon - while the brain is still healing - risk a greater chance of having a second concussion. Repeat or later concussions can be very serious. They can cause permanent brain damage, affecting your child for a lifetime.

3. TELL YOUR CHILD'S COACH ABOUT ANY PREVIOUS CONCUSSION.

Coaches should know if your child had a previous concussion. Your child's coach may not know about a concussion your child received in another sport or activity unless you tell the coach.

HOW CAN YOU HELP YOUR CHILD PREVENT A CONCUSSION OR OTHER SERIOUS BRAIN INJURY?

- Ensure that they follow their coach's rules for safety and the rules of the sport.
- Encourage them to practice good sportsmanship at all times.
- Make sure they wear the right protective equipment for their activity. Protective equipment should fit properly and be well maintained.
- Wearing a helmet is a must to reduce the risk of a serious brain injury or skull fracture.
 - However, helmets are not designed to prevent concussions. There is no "concussion-proof" helmet. So, even with a helmet, it is important for kids and teens to avoid hits to the head.

HOW CAN I HELP MY CHILD RETURN TO SCHOOL SAFELY AFTER A CONCUSSION?

Children and teens who return to school after a concussion may need to:

- Take rest breaks as needed
- Spend fewer hours at school
- Be given more time to take tests or complete assignments
- Receive help with schoolwork
- Reduce time spent reading, writing, or on the computer

Talk with your child's teachers, school nurse, coach, speech-language pathologist, or counselor about your child's concussion and symptoms. As your child's symptoms decrease, the extra help or support can be removed gradually.

JOIN THE CONVERSATION  www.facebook.com/CDCHeadsUp

TO LEARN MORE GO TO >> WWW.CDC.GOV/CONCUSSION

Content Source: CDC's Heads Up Program. Created through a grant to the CDC Foundation from the National Operating Committee on Standards for Athletic Equipment (NOCSAE).



HEADS UP



HEADS UP CONCUSSION

FACT SHEET FOR HIGH SCHOOL ATHLETES

This sheet has information to help you protect yourself from concussion or other serious brain injury and know what to do if a concussion occurs.

WHAT IS A CONCUSSION?

A concussion is a brain injury that affects how your brain works. It can happen when your brain gets bounced around in your skull after a fall or hit to the head.

WHAT SHOULD I DO IF I THINK I HAVE A CONCUSSION?

REPORT IT.

Tell your coach, parent, and athletic trainer if you think you or one of your teammates may have a concussion. It's up to you to report your symptoms. Your coach and team are relying on you. Plus, you won't play your best if you are not feeling well.

GET CHECKED OUT.

If you think you have a concussion, do not return to play on the day of the injury. Only a health care provider can tell if you have a concussion and when it is OK to return to school and play. The sooner you get checked out, the sooner you may be able to safely return to play.

GIVE YOUR BRAIN TIME TO HEAL.

A concussion can make everyday activities, such as going to school, harder. You may need extra help getting back to your normal activities. Be sure to update your parents and doctor about how you are feeling.



WHY SHOULD I TELL MY COACH AND PARENT ABOUT MY SYMPTOMS?

- Playing or practicing with a concussion is dangerous and can lead to a longer recovery.
- While your brain is still healing, you are much more likely to have another concussion. This can put you at risk for a more serious injury to your brain and can even be fatal.

HOW CAN I TELL IF I HAVE A CONCUSSION?

You may have a concussion if you have any of these symptoms after a bump, blow, or jolt to the head or body:

- Get a headache
- Feel dizzy, sluggish, or foggy
- Are bothered by light or noise
- Have double or blurry vision
- Vomit or feel sick to your stomach
- Have trouble focusing or problems remembering
- Feel more emotional or "down"
- Feel confused
- Have problems with sleep

Concussion symptoms usually show up right away, but you might not notice that something "isn't right" for hours or days. A concussion feels different to each person, so it is important to tell your parents and doctor how you are feeling.

The information provided in this document or through linkages to other sites is not a substitute for medical or professional care. Questions about diagnosis and treatment for concussion should be directed to a physician or other health care provider.

HOW CAN I HELP MY TEAM?

PROTECT YOUR BRAIN.

Avoid hits to the head and follow the rules for safe and fair play to lower your chances of getting a concussion. Ask your coaches for more tips.

BE A TEAM PLAYER.

You play an important role as part of a team. Encourage your teammates to report their symptoms and help them feel comfortable taking the time they need to get better.

GOOD TEAMMATES KNOW:

**"IT'S BETTER TO MISS ONE GAME
THAN THE WHOLE SEASON."**



TO LEARN MORE GO TO

>> www.cdc.gov/HEADSUP

JOIN THE CONVERSATION AT

➔ www.facebook.com/CDCHEADSUP

Content Source: CDC's HEADS UP campaign. Customizable HEADS UP fact sheets were made possible through a grant to the CDC Foundation from the National Operating Committee on Standards for Athletic Equipment (NOCSAE).

HEADS UP
CONCUSSION

HEADS UP CONCUSSION ACTION PLAN



IF YOU SUSPECT THAT AN ATHLETE HAS A CONCUSSION, YOU SHOULD TAKE THE FOLLOWING STEPS:

1. Remove the athlete from play.
2. Ensure that the athlete is evaluated by a health care professional experienced in evaluating for concussion. Do not try to judge the seriousness of the injury yourself.
3. Inform the athlete's parents or guardians about the possible concussion and give them the fact sheet on concussion.
4. Keep the athlete out of play the day of the injury. An athlete should only return to play with permission from a health care professional, who is experienced in evaluating for concussion.

▶ **"IT'S BETTER TO MISS ONE GAME THAN THE WHOLE SEASON."**

CONCUSSION SIGNS AND SYMPTOMS

Athletes who experience one or more of the signs and symptoms listed below after a bump, blow, or jolt to the head or body may have a concussion.

SYMPTOMS REPORTED BY ATHLETE

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Confusion
- Just not "feeling right" or is "feeling down"

SIGNS OBSERVED BY COACHING STAFF

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior, or personality changes
- Can't recall events prior to hit or fall



JOIN THE CONVERSATION AT ➔ www.facebook.com/CDCHeadsUp

HEADS UP

TO LEARN MORE GO TO ➔ WWW.CDC.GOV/CONCUSSION

Guidance on Communications After a Non-Concussion Sports Injury

Teens who participate in extracurricular activities have a positive alternative to using drugs and alcohol. When student athletes are sidelined with an injury, their time may be less structured, they may be in need of pain management, and they may lose their connections to a supportive community. This may be a time of increased risk for substance misuse.

Coaches and parents or guardians should remember that they each have the same goal: ensuring the best possible outcome for the child. When a student athlete is injured, coaches and parents or guardians should work together to share information about the diagnosis and treatment plan and to craft the plan for returning to play.



- ✓ Adolescence is a time when students are encouraged to advocate for themselves and become more independent. **However, when it comes to health and injury, it is essential that a parent or guardian become involved.**
- ✓ **Information-sharing** should be coordinated among all those who may be appropriate in the care and management of a sports injury. This may include the parent or guardian, physician, school nurse, athletic trainer, physical therapist, coach, and/or athletic director. These individuals, as appropriate, should all participate in return-to-play decisions.
- ✓ **Pay attention to the social and emotional impact** of a sports injury. Being sidelined may lead to general depression and a loss of structured activity, connection to friends, and identity as an athlete. Speak to the

student athlete about his or her preferences, and find ways for the athlete to stay involved with the team.

- ✓ **Return-to-play decisions** should have the proper healing of the injured athlete as the primary objective. Some students may be eager to return to the game and will try to mask their discomfort. To avoid improper healing and premature participation, have a medical professional and/or the school's athletic trainer make the final decision regarding the athlete's return-to-play plan.

The Massachusetts Department of Public Health, The Massachusetts Technical Assistance Partnership for Prevention, and the Massachusetts Interscholastic Athletic Association support your efforts to keep youth healthy and strong.

What to Know About Prescription Opioids

Which medications are prescription opioids?

- ✓ Prescription opioids are narcotic pain medications that are prescribed for people with moderate to severe pain. They include Vicodin, OxyContin, Oxycodone, Percocet, Fentanyl, Opana, and codeine.

What should parents or guardians do if prescription pain medication is recommended for the injured athlete?

- ✓ Talk openly with the health care provider about the need for prescription pain medicine. Make sure to ask about possible risks and side effects, alternatives that may exist, precautions, and proper use of the medication.
- ✓ If anyone in the family has had problems with prescription drugs, alcohol, or any other drugs, share this information with the doctor.
- ✓ Be sure that the athlete takes the medication only as prescribed and uses only the minimal amount for the shortest period needed for effective relief.
- ✓ Keep control of the medication bottle, and supervise the athlete when he or she is taking the medication. Do not allow the athlete to self-administer. Count the pills or keep track of the level of medicine in the bottle on a regular basis.

- ✓ Keep the medication at home, if possible. If the athlete needs to take medication during the school day, the school (by law) must approve its use. Talk with school staff about proper supervision, and follow the necessary protocols.
- ✓ Remind the athlete that prescription medication is only good for the person it is prescribed for and that it could seriously hurt others.
- ✓ Be sure that the athlete takes the medication no longer than necessary.

How should prescription medications be stored?

- ✓ Don't keep prescription medicine in the medicine cabinet. Secure it in a place that only the parents know about. Ideally, keep all medicines, both prescription and over-the-counter, in a locked cabinet or other secure place that children and teens cannot access.
- ✓ Tell relatives, especially in homes that children and teens may visit, to lock up their medicines or keep them in a safe place.
- ✓ Talk to the parents of your teenager's friends, and encourage them to secure their prescriptions as well.

How should unused opioid medication be disposed of?

- ✓ Check www.mass.gov/DrugDropbox to see if there is a permanent waste medication collection site in your town or city that you can go to right away.
- ✓ If a medication Drop Box program does not exist in your community, the Food and Drug Administration recommends that opioids be flushed down the toilet, due to the high risk of accidental overdose for people and pets. Medications recommended for flushing include the following:*

Actiq (fentanyl citrate)

Daytrana Transdermal Patch
(methylphenidate)

Duragesic Transdermal System (fentanyl)

OxyContin Tablets (oxycodone)

Avinza Capsules (morphine sulfate)

Baraclude Tablets (entecavir)

Reyataz Capsules (atazanavir sulfate)

Tequin Tablets (gatifloxacin)

Zerit for Oral Solution (stavudine)

Meperidine HCl Tablets

Percocet (Oxycodone and Acetaminophen)

Xyrem (Sodium Oxybate)

Fentora (fentanyl buccal tablet)



DISPOSE OF UNUSED OPIOID MEDICATION SAFELY

Check www.mass.gov/DrugDropbox to see if there is a permanent waste medication collection site in your town or city that you can go to right away.

*Check the paperwork that came with the medicine to learn what other drugs can be flushed.

Injury Management: A Key Component of Prescription Opioid Misuse Prevention



NOTE: Painkillers are generally not prescribed for injuries that involve concussion, so those injuries are not addressed here. For more information on preventing and treating concussions, please see the **Massachusetts Executive Office of Health and Human Services** website: www.mass.gov/sportsconcussion

If a student athlete is injured:

- ✓ Ice can be used to reduce soreness and inflammation. If symptoms persist, contact a physician, especially if there is a lack of full-joint motion.
- ✓ Check with a health care provider to see if over-the-counter nonsteroidal anti-inflammatory medications are needed. As with all medications, always follow the directions on the label and any instructions from a health care provider.
- ✓ Opioids for pain should be considered only by a physician and only when other approaches have not provided relief.
- ✓ Fractures, sprains, and broken bones need plenty of rest to heal properly. The athlete should see an orthopedic specialist, who can evaluate and manage the healing process.
- ✓ The athlete's parents or guardians and coach should discuss together how the injury will impact the student's ability to play. If an injury will sideline the athlete, the parents or guardians and coach should consider creating a return-to-play plan together.



For more information on preventing sports injuries in youth:

The Massachusetts Interscholastic Athletic Association provides safety, wellness, and prevention resources and information for student athletes, teacher-coaches, athletic directors, and school personnel. www.miaa.net

The Micheli Center for Sports Injury Prevention offers sport-specific injury prevention information. <http://www.themichelicenter.com/resources/healthcare-providers-coaches/>

Bureau of Injury Prevention, Massachusetts Department of Public Health (MDPH) offers resources on reducing injuries among youth at school, at home, and in the community. www.mass.gov/dph/injury

MDPH Sports Concussion Prevention and Management Program provides information on a number of important topics, including regulations, training, required forms for schools and clinicians, and model policies for schools. www.mass.gov/sportsconcussion

CDC Child Injury Prevention offers many resources on injury prevention. <http://www.cdc.gov/safechild/index.html>

Boston Children's Hospital, Sports Medicine Division provides comprehensive multidisciplinary care to athletes of all ages and abilities, from professional athletes to eager novices. <http://www.childrenshospital.org/centers-and-services/division-of-sports-medicine/overview>

Sports Medicine Center, Mass. General Hospital provides interdisciplinary care for athletes. www.massgeneral.org/ortho-sports-medicine/

Preventing Prescription Opioid Misuse Among Student Athletes

Massachusetts is in the midst of an opioid epidemic. Athletes in particular, due to their risk of injury and the resulting pain, may be at risk for misusing prescription opioids.

While playing a sport and being on a team benefits middle and high school athletes in many ways—including social connections, structured afterschool time, and physical fitness—it can also lead to injury. In rare cases, sports injuries may result in pain that is severe or long-lasting enough to require a prescription painkiller.

If a student athlete is injured, whenever possible, treat the injury first with rest, ice, compression, elevation, and anti-inflammatory medication—but do seek medical care if it's necessary. Opioids for pain should be considered only by a physician and only when other approaches have not provided relief.

For the last four years, parents, coaches, athletic directors, athletic trainers, and school nurses involved in 6th–12th grade extracurricular sports have been required to complete an annual training on risks of concussion and head injury. New opioid legislation (An act relative to substance use, treatment, education and prevention) has added a requirement that BSAS provide educational materials on the dangers of opioid use and misuse to those persons participating in the annual head injury safety program. The educational materials shall also be distributed in written form to all students participating in an extracurricular athletic activity prior to the commencement of their athletic seasons (see also www.mass.gov/dph/resourcesforyouthopioidmisuse)

MOST IMPORTANT:

An injured athlete needs time to heal.
Missing a game or two is better than missing an entire season—or more.



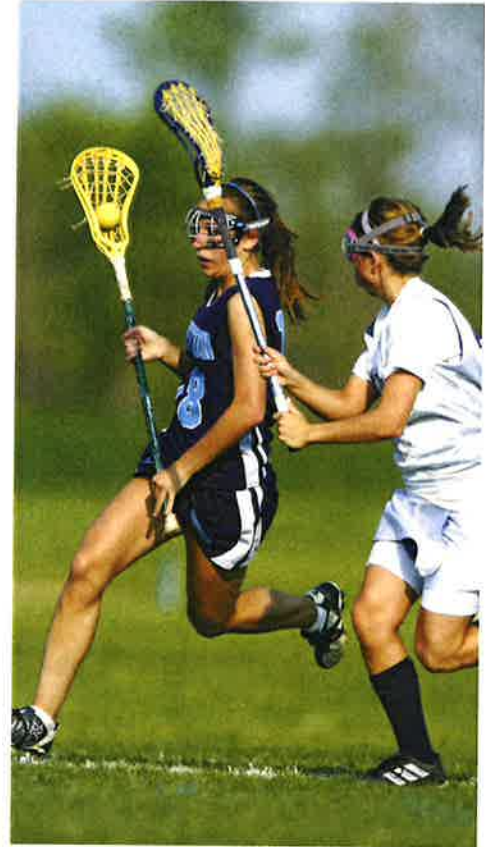
After an injury, it is important to have a communications and a return-to-play plan put in place. (Look at the format and wording of your school's concussion protocols for guidance.) Too often, athletes do not allow sufficient time to recover from their injuries and turn to pain medication to enable their continued participation in their sport. Care must be taken to avoid the common cycle of injury, pain, and re-injury.

In addition, keep in mind the mental and social components of being on a school team and how this may impact the athlete's recovery and behavior. Losing the social connection to the team can be as damaging in some ways as the physical injury. As appropriate, continue to include the student in team practices, games, and social events.

The Massachusetts Interscholastic Athletic Association (MIAA)

provides workshops and training programs for school administrators, educators, teacher-coaches, and student athletes. The MIAA Partners in Prevention is a consortium of more than 60 health, wellness, and safety organizations working together to provide resources and programming to schools and communities. The MIAA Sports Medicine Committee, comprising athletic directors, physicians, school nurses, administrators, and coaches, strives to ensure the safety of our students. The MIAA Youth Substance Misuse Prevention Collaborative is a committee of key Commonwealth stakeholders who provide prevention programming and resources. For information about MIAA initiatives and programming, please call **508-541-7997** or visit our website (www.miaa.net).

The MIAA is the Massachusetts Alliance Partner for the Partnership for Drug Free Kids. Learn more about the Partnership on its website: <http://www.drugfree.org/>



For more information and resources on preventing substance misuse:

Massachusetts Health Promotion Clearinghouse offers a number of free health education resources from the Massachusetts Department of Public Health. <https://massclearinghouse.ehs.state.ma.us/>

Massachusetts Substance Abuse Information and Education Helpline provides free and anonymous information and referrals for alcohol and other substance use problems. <http://helpline-online.com/>
1-800-327-5050 TTY: Use MassRelay at 711 or 1-800-439-2370

Massachusetts Department of Public Health Bureau of Substance Abuse Services oversees treatment for substance use disorders in the Commonwealth. <http://www.mass.gov/dph/bsas>

National Institute for Drug Abuse (part of the National Institutes of Health) is charged with advancing the science of addiction, and provides the latest research and resources. <https://www.drugabuse.gov/>
