

ATHLETE'S NAME: \_\_\_\_\_

GRADE: \_\_\_\_\_

Please Print



## MCHS 2020-21 ATHLETIC RELEASE PACKET

Before any student will be released to participate in any MCHS sport they must first complete the following:

- 1) Physical form
- 2) Academic release of eligibility
- 3) Athletic fee paid

An Athletic Release Packet must be completed for each sport played for the 2020-21 school year. The athletic fee is:

\$175.00/Football  
 \$150.00 for all other sports  
 \$100.00 for 3<sup>rd</sup> sport played

**NOTE: Failure to complete the entire packet will make the student ineligible to participate in any sport including any practice(s).**

Thank you for your cooperation,

MCHS Athletic Department

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**Sport:**    Baseball    Basketball    Cheerleading    Golf    Football    Soccer  
 Softball    Tennis    Track & Field    Volleyball    Wrestling    Cross Country

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### Athletic Office Use Only

Received in office date: \_\_\_\_\_

Athletic Fee Paid:

Ck # \_\_\_\_\_    Cash Amt: \$ \_\_\_\_\_   Date: \_\_\_\_\_   Initial \_\_\_\_\_

Academic Eligibility: Date: \_\_\_\_\_ Released by: \_\_\_\_\_

Date: \_\_\_\_\_ Released by: \_\_\_\_\_

- Emergency Information \_\_\_\_\_
- Physical completed \_\_\_\_\_
- Policy Page \_\_\_\_\_
- Concussion Form \_\_\_\_\_
- Sudden Cardiac Arrest Form \_\_\_\_\_
- Copy to Coach \_\_\_\_\_
- Heat Illness Prevention Form \_\_\_\_\_

ATHLETE'S NAME: \_\_\_\_\_

GRADE: \_\_\_\_\_

*Please Print*



## **MCHS 2020-21 ATHLETIC RELEASE PACKET PARENT AND ATHLETE ETHICS AND COMMITMENT**

The MC parent/athlete agrees to "Pursue Victory with Honor" by adhering to the rules of competition and sportsmanship, and to display the Six Pillars of Character (trustworthiness, respect, responsibility, fairness, caring and citizenship) on and off the playing field.

The MC parent/athlete agrees to establish a positive relationship with all opposing fans, players and officials.

The MC parent/athlete agrees to respect the integrity and judgment of all sports officials.

The MC parent/athlete agrees to abide by the coach's decisions and team rules. If unable to do so, the parent/athlete is to speak with the coach instead of other players, students or parents.

The MC parent/athlete agrees to advise the coach if there is some reason the athlete cannot practice. This is to be done prior to the start of practice.

The MC parent/athlete agrees to support all athletes and to work hard to maintain the unity among players and parents.

The MC parent/athlete agrees to be on time to all practices, games, team meetings, parent meetings and buses.

The MC athlete agrees to develop and pursue a relationship with Jesus Christ.

The MC parent/athlete agrees to attend all regularly scheduled award ceremonies for his/her sport season.

The MC parent/athlete agrees to support MC and to work hard to maintain unity of the athletic department and school.

The MC parent/athlete agrees that no parent, family member, or friend is allowed on the sideline, bench, dugout or locker room during an athletic contest.

The MC parent/athlete realizes that failure to abide by this agreement could result in the following action: a) lack of playing time; b) suspension for part of the season and c) removal from the team.

\_\_\_\_\_  
*Signature of Parent/Guardian*

\_\_\_\_\_  
*Athlete Signature*

\_\_\_\_\_  
*Date*

**MODESTO CHRISTIAN HIGH SCHOOL  
ATHLETIC EMERGENCY INFORMATION**  
**\*All Sports offered during the 2020-21 School Year\***

ATHLETE'S NAME: \_\_\_\_\_ GRADE: \_\_\_\_\_ DOB: \_\_/\_\_/\_\_  
*Please Print*

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Student's Cell #: \_\_\_\_\_ Parent/Guardian cell #: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_ Work #: \_\_\_\_\_

Parent's Email Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Tel#: \_\_\_\_\_ Relationship: \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_ Policy #: \_\_\_\_\_ Hospital Preference: \_\_\_\_\_

Chronic Ailments: \_\_\_\_\_ Allergies: \_\_\_\_\_ Medications: \_\_\_\_\_

I (We) the undersigned parent(s)/guardian(s) of \_\_\_\_\_ a minor, do hereby authorize Modesto Christian High School Athletics, as agents for the undersigned to consent to any X-rays deemed advisable by, and is to be rendered under the general or special supervision of any physician and/or surgeon licensed under the provision of Medicine Practice Act of the medical staff of any hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital.

It is understood that the authorization is given in advance of any specific diagnosis, treatment or hospital care being required but given to provide authority and power on the part of our aforesaid agents to give specific consent to any and all such diagnosis, treatment or hospital care which the aforementioned physician, in the exercise of his/her best judgment, may deem advisable.

This authorization is given pursuant to the provisions of *Section 25.8 of the Civil Code of California*.

**This authorization shall remain effective until June 30, 2021**, unless sooner revoked in writing and delivered to say agents.

**LIABILITY RELEASE**

**BOTH THE APPLICANT STUDENT & PARENT/GUARDIAN MUST READ CAREFULLY & SIGN**

It is my understanding that participation in any sport can be dangerous and involves MANY RISKS OF INJURY. Dangers and risks include, but are not limited to, serious neck and spinal injuries, paralysis, brain damage, injury to all internal organs, bones, joints, ligaments, muscles, tendons, and other aspects of the muscular skeletal system, and impairment to general health and well-being, to engaging in business, social and recreational activity and in general to enjoyment of life.

Because of the dangers of participating in any sport, I recognize the importance of following coaches' instructions regarding playing techniques, training and other team rules, etc., and agree to obey such instructions.

With participation in any sport I understand that I assume all of the risks associated with the sport and agree to hold harmless Modesto Christian School, its employees, agents, representatives, coaches and volunteers from any and all liability.

Insurance: MCS provides excess medical insurance for any member athlete participating in MCS sanctioned practice or event. If the athlete has other medical coverage, theirs will be applied first, followed by MCS insurance. If the athlete has no other coverage, the MCS policy becomes primary subject to terms and conditions of the policy.

I, \_\_\_\_\_ (parent/guardian) of \_\_\_\_\_ (student) have read the above warning and release and understand its terms. I understand that all sports can involve MANY RISKS OF INJURY, including, but not limited to those risks outlined above. In order to participate I agree to hold harmless Modesto Christian School and its employees, agents, representative, coaches, and volunteers from any and all liability, actions, causes of actions, debts, claims or demands of every kind and nature which may arise by, or in connection with, participation of my child in any activities related to the Modesto Christian School. The terms hereof shall serve as a release from my heirs, estate, executor, administrator, assignees, and for all members of my family.

\_\_\_\_\_  
*Signature of Parent/Guardian*

\_\_\_\_\_  
*Athlete Signature*

\_\_\_\_\_  
*Date*

**ATHLETE'S NAME:** \_\_\_\_\_

**GRADE:** \_\_\_\_\_

*Please Print*

**2020-21 MODESTO CHRISTIAN HIGH SCHOOL  
STUDENT TRANSPORTATION PERMISSION FORM**

We, the undersigned, understand and agree that Modesto Christian School desires to provide a safe and enjoyable time for all students. However, we understand and agree that accidents can still happen. We understand that there are risks/dangers involved with participation in any off-campus trip and its associated activities. In consideration of our children being allowed to participate in the events, we assume responsibility for reasonable risks associated with the travel and activities.

Without reservation, we agree to hold harmless Modesto Christian School, its affiliated organizations, employees, agents, and representatives, including volunteers and other drivers, from any and all claims arising from their children's participation.

We understand that our assumption of risk does not apply to claims of intentional (criminal) misconduct or gross negligence by the school, its employees, or volunteers. If such circumstances are proved in a court of law, we agree that the school can assume no financial liability beyond its actual liability insurance policy in force.

We understand that before driving, all volunteer drivers must: **1) obtain LiveScan clearance, 2) get a TB test 3) Provide copies of a valid state driver's license, 4) vehicle registration, and 5) declaration of vehicle insurance with minimum liability coverage of \$100,000/\$300,000.** We understand that driver's vehicle insurance is the primary coverage.

**We give permission for the following: (please initial the appropriate items)**

\_\_\_\_\_ For my child to drive his/her own car

\_\_\_\_\_ For my child to carry the following student passengers (**Complete name of each student**):

\_\_\_\_\_ For my child to be a passenger in a student driven vehicle driven by (**Complete name of each driver**): \_\_\_\_\_

\_\_\_\_\_ For my child to travel by public or chartered transportation

\_\_\_\_\_ For my child to ride with a school approved parent or employee driver to any MCHS athletic event

\_\_\_\_\_ For my child to travel by MCHS vehicle

\_\_\_\_\_ **Do not check until your paperwork is submitted.** I will provide a passenger vehicle with the proper seat-belts and that I cannot carry more than nine persons, including the driver.

\_\_\_\_\_ **Must be submitted each school year for each driver and vehicle.** I have provided a copy of my driver's license, proof of vehicle registration, and insurance declaration page.

We, as parents/legal guardians of \_\_\_\_\_, understand and agree to the conditions and terms as described above.

\_\_\_\_\_  
**Signature Parent/Guardian**

\_\_\_\_\_  
**Date**

I, \_\_\_\_\_, as an MC student understand and agree to the

**Print Athlete's Name**

conditions and terms as described above.

\_\_\_\_\_  
**Signature Athlete**

\_\_\_\_\_  
**Date**

**ATHLETE'S NAME:** \_\_\_\_\_

**2020-21 MODESTO CHRISTIAN HIGH SCHOOL**

**For coach use only**

**MCHS AND COACH'S RECORD OF STUDENT TRANSPORTATION**

**Parent signature**

**Person signing student out  
(if not a parent, a note from the  
parent is required)**

**Parent  
note  
attached**

**Date**

**Activity**

**Place**

1.				
2.				
3.				
4.				
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7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				

**2020-21 MODESTO CHRISTIAN HIGH SCHOOL**  
**Athletic Department Policies**

In order for your student(s) to participate in any athletic event at Modesto Christian High School there are a few policies you and your athlete must be aware of. Please review the following policies and sign below stating you've read and agree to abide by the policies.

**Eligibility/Appeals Policy:**

A.) Before an athlete can participate in a sport, he/she must be cleared by the Athletic Department. The following items must be completed in order for the athlete to be cleared:

1. Pay all athletic fees to the MCHS Athletic Office.
2. An athletic release packet completed with all necessary signatures.
3. A sports physical for current school year.
4. School tuition account paid up to date.

B.) An athlete who fails to complete a sport season cannot participate in his/her next season of sport for one month from the official start date of that sport. This restriction will not apply if the athlete withdraws from a sport for a verified medical reason. An athlete can drop a sport during the one month period without penalty. Students can make a lateral move from Sport A to Sport B in the same season of sport if both coaches agree.

C.) Student-athletes must have a 2.0 G.P.A. at each grading period (quarter) to be eligible for extracurricular activities. Students who are ineligible and wish to appeal will be granted one appeal each school year. The probation period for the appeal shall not exceed one quarter in length. Students cannot appeal fourth quarter of the current school year and first quarter of the following school year. The student is required to submit the necessary paperwork to the Athletic Director's Office in A5 one week prior to the time period considered. **All transfer students must be cleared through the Athletic Directors office.**

- A student-athlete is not allowed to appeal if he/she was ineligible the prior grading period. Example: a student-athlete who is ineligible for his/her first quarter grades is not eligible to appeal the next grading period (second quarter grades).
- A student-athlete who is currently ineligible will remain so until the next grading period when grades are officially posted. The student-athlete must meet school eligibility requirements at that time to be eligible for athletic participation.
- Student-athletes who are ineligible are allowed to practice and travel with the team at coach's discretion. School Administration reserves the right to require ineligible student to attend study hall in lieu of practice.
- Student-athletes who are ineligible and compete in a game will result in the team forfeiting the game.

D.) Eligibility/Ineligibility determination dates are as follows:

- |    |  |                                 |
|----|--|---------------------------------|
| 1. | Previous 4 <sup>th</sup> quarter, 2020 | Determined on June 5, 2020      |
| 2. | 1 <sup>st</sup> quarter, 2020-21       | Determined on October 9, 2020   |
| 3. | 2 <sup>nd</sup> quarter, 2020-21       | Determined on December 26, 2020 |
| 4. | 3 <sup>rd</sup> quarter, 2020-21       | Determined on March 12, 2021    |
| 5. | 4 <sup>th</sup> quarter, 2020-21       | Determined on June 2, 2021      |

E.) There is a period of one month from the date an athlete first joins a team in which he/she may drop and receive a refund of athletic fees. No refunds will be issued after the one month period.

**CBP Policy:**

CBP has been established to help curtail continual disruptions in the educational process. It is the intention of the administration that CBP is a powerful tool to effect a positive change in behavior. If a student has been assigned to CBP, he/she works directly with maintenance personnel to assist in maintaining our campus. Students assigned CBP are to serve on scheduled days with a cost of \$10.00 per 2 hours. At the end of the quarter in which CBP is served, if the total CBP amount charged is not paid in full it will be billed through FACTS. Students who fail to serve their designated CBP hours or have an unexcused absence will be suspended from any school activity until the CBP has been completed. CBP cannot be suspended until the end of an athletic season. Student-athletes will be scheduled for CBP on practice days.

**Discipline Policy:**

Student-athletes in violation of the MCHS Discipline Policy regarding Drugs, Alcohol & Tobacco will be suspended for two weeks **in addition** to any school-suspension days served. The two-week suspension includes all extracurricular activities such as clubs, organizations, productions, formals, grade-level trips, athletics, school day events, and field trips. Refer to Discipline Policy in Student Handbook.

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**Athletic Department Policy Agreement**

I/We, \_\_\_\_\_, as parent/guardian of \_\_\_\_\_ agree to the policies as described above.

\_\_\_\_\_  
**Signature Parent/Guardian**

\_\_\_\_\_  
**Date**

I, \_\_\_\_\_, as an MCHS student, understand and agree to the policies as described above.

\_\_\_\_\_  
**Signature Athlete**

\_\_\_\_\_  
**Date**



## CIF Concussion Information Sheet

### **Why am I getting this information sheet?**

You are receiving this information sheet about concussions because of California state law AB 25 (effective January 1, 2012), now Education Code § 49475:

1. *The law requires a student athlete who may have a concussion during a practice or game to be removed from the activity for the remainder of the day.*
2. *Any athlete removed for this reason must receive a written note from a medical doctor trained in the management of concussion before returning to practice.*
3. *Before an athlete can start the season and begin practice in a sport, a concussion information sheet must be signed and returned to the school by the athlete and the parent or guardian.*

Every 2 years all coaches are required to receive training about concussions (AB 1451), as well as certification in First Aid training, CPR, and AEDs (life-saving electrical devices that can be used during CPR).

### **What is a concussion and how would I recognize one?**

A concussion is a kind of brain injury. It can be caused by a bump or hit to the head, or by a blow to another part of the body with the force that shakes the head. Concussions can appear in any sport, and can look differently in each person.

*Most concussions get better with rest and over 90% of athletes fully recover.* However, all concussions should be considered serious. If not recognized and managed the right way, they may result in problems including brain damage and even death.

*Most concussions occur without being knocked out.* Signs and symptoms of concussion (see back of this page) may show up right after the injury or can take hours to appear. If your child reports any symptoms of concussion or if you notice some symptoms and signs, seek medical evaluation from your team's athletic trainer and a medical doctor trained in the evaluation and management of concussion. If your child is vomiting, has a severe headache, or is having difficulty staying awake or answering simple questions, call 911 to take him or her immediately to the emergency department of your local hospital.

On the CIF website is a **Graded Concussion Symptom Checklist**. If your child fills this out after having had a concussion, it helps the doctor, athletic trainer or coach understand how he or she is feeling and hopefully shows improvement. We ask that you have your child fill out the checklist at the start of the season even before a concussion has occurred so that we can understand if some symptoms such as headache might be a part of his or her everyday life. We call this a "baseline" so that we know what symptoms are normal and common for your child. Keep a copy for your records, and turn in the original. If a concussion occurs, he or she should fill out this checklist daily. This Graded Symptom Checklist provides a list of symptoms to compare over time to make sure the athlete is recovering from the concussion.

### **What can happen if my child keeps playing with concussion symptoms or returns too soon after getting a concussion?**

*Athletes with the signs and symptoms of concussion should be removed from play immediately. There is NO same day return to play for a youth with a suspected concussion.* Youth athletes may take more time to recover from concussion and are more prone to long-term serious problems from a concussion.

Even though a traditional brain scan (e.g., MRI or CT) may be "normal", the brain has still been injured. Animal and human research studies show that a second blow before the brain has recovered can result in serious damage to the brain. If your athlete suffers another concussion before completely recovering from the first one, this can lead to prolonged recovery (weeks to months), or even to severe brain swelling (Second Impact Syndrome) with devastating consequences.

There is an increasing concern that head impact exposure and recurrent concussions may contribute to long-term neurological problems. One goal of this concussion program is to prevent a too early return to play so that serious brain damage can be prevented.



**Signs observed by teammates, parents and coaches include:**

- |  |   |
|--|---|
| <ul style="list-style-type: none"><li>• Looks dizzy</li><li>• Looks spaced out</li><li>• Confused about plays</li><li>• Forgets plays</li><li>• Is unsure of game, score, or opponent</li><li>• Moves clumsily or awkwardly</li><li>• Answers questions slowly</li></ul> | <ul style="list-style-type: none"><li>• Slurred speech</li><li>• Shows a change in personality or way of acting</li><li>• Can't recall events before or after the injury</li><li>• Seizures or has a fit</li><li>• Any change in typical behavior or personality</li><li>• Passes out</li></ul> |
|--|---|

**Symptoms may include one or more of the following:**

- |  |  |
|--|--|
| <ul style="list-style-type: none"><li>• Headaches</li><li>• "Pressure in head"</li><li>• Nausea or throws up</li><li>• Neck pain</li><li>• Has trouble standing or walking</li><li>• Blurred, double, or fuzzy vision</li><li>• Bothered by light or noise</li><li>• Feeling sluggish or slowed down</li><li>• Feeling foggy or groggy</li><li>• Drowsiness</li><li>• Change in sleep patterns</li></ul> | <ul style="list-style-type: none"><li>• Loss of memory</li><li>• "Don't feel right"</li><li>• Tired or low energy</li><li>• Sadness</li><li>• Nervousness or feeling on edge</li><li>• Irritability</li><li>• More emotional</li><li>• Confused</li><li>• Concentration or memory problems</li><li>• Repeating the same question/comment</li></ul> |
|--|--|

**What is Return to Learn?**

Following a concussion, student athletes may have difficulties with short- and long-term memory, concentration and organization. They will require rest while recovering from injury (e.g., avoid reading, texting, video games, loud movies), and may even need to stay home from school for a few days. As they return to school, the schedule might need to start with a few classes or a half-day depending on how they feel. If recovery from a concussion is taking longer than expected, they may also benefit from a reduced class schedule and/or limited homework; a formal school assessment may also be necessary. Your school or doctor can help suggest and make these changes. Student athletes should complete the Return to Learn guidelines and return to complete school before beginning any sports or physical activities, unless your doctor makes other recommendations. Go to the CIF website ([cifstate.org](http://cifstate.org)) for more information on Return to Learn.

**How is Return to Play (RTP) determined?**

Concussion symptoms should be completely gone before returning to competition. A RTP progression involves a gradual, step-wise increase in physical effort, sports-specific activities and the risk for contact. If symptoms occur with activity, the progression should be stopped. If there are no symptoms the next day, exercise can be restarted at the previous stage.

RTP after concussion should occur only with medical clearance from a medical doctor trained in the evaluation and management of concussions, and a step-wise progression program monitored by an athletic trainer, coach, or other identified school administrator. Please see [cifstate.org](http://cifstate.org) for a graduated return to play plan. [AB 2127, a California state law effective 1/1/15, states that return to play (i.e., full competition) must be **no sooner** than 7 days after the concussion diagnosis has been made by a physician.]

**Final Thoughts for Parents and Guardians:**

*It is well known that high school athletes will often not talk about signs of concussions, which is why this information sheet is so important to review with them.* Teach your child to tell the coaching staff if he or she experiences such symptoms, or if he or she suspects that a teammate has had a concussion. You should also feel comfortable talking to the coaches or athletic trainer about possible concussion signs and symptoms that you may be seeing in your child.

References:

- American Medical Society for Sports Medicine position statement: concussion in sport (2013)
- Consensus statement on concussion in sport: the 4th International Conference on Concussion in Sport held in Zurich, November 2012
- <http://www.cdc.gov/concussion/HeadsUp/youth.html>



CIF Concussion Information Acknowledgement

Please read the CIF Concussion Information Sheet. Once completed, please sign and return this portion with the Athletic Release Packet to the office. This acknowledgement must be signed as part of completing the Athletic Release Packet in order for your student to be cleared for sports.

I, \_\_\_\_\_ (parent/guardian) of

\_\_\_\_\_ (student) have read the  
CIF Concussion Information sheet provided in the MCHS Athletic Release Packet.  
I have reviewed and understand the warning signs and symptoms as well as protocol  
coaches will follow if a student athlete shows any symptoms of a concussion.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Keep Their Heart in the Game

## A Sudden Cardiac Arrest Information Sheet for Athletes and Parents/Guardians

### What is sudden cardiac arrest?

Sudden cardiac arrest (SCA) is when the heart stops beating, suddenly and unexpectedly. When this happens blood stops flowing to the brain and other vital organs. SCA is NOT a heart attack. A heart attack is caused by a blockage that stops the flow of blood to the heart. SCA is a malfunction in the heart's electrical system, causing the victim to collapse. The malfunction is caused by a congenital or genetic defect in the heart's structure.

### How common is sudden cardiac arrest in the United States?

As the leading cause of death in the U.S., there are more than 300,000 cardiac arrests outside hospitals each year, with nine out of 10 resulting in death. Thousands of sudden cardiac arrests occur among youth, as it is the #2 cause of death under 25 and the #1 killer of student athletes during exercise.

### Who is at risk for sudden cardiac arrest?

SCA is more likely to occur during exercise or physical activity, so student-athletes are at greater risk. While a heart condition may have no warning signs, studies show that many young people do have symptoms but neglect to tell an adult. This may be because they are embarrassed, they do not want to jeopardize their playing time, they mistakenly think they're out of shape and need to train harder, or they simply ignore the symptoms, assuming they will "just go away." Additionally, some health history factors increase the risk of SCA.

**FAINTING**  
is the  
**#1 SYMPTOM**  
OF A HEART CONDITION

### What should you do if your student-athlete is experiencing any of these symptoms?

We need to let student-athletes know that if they experience any SCA-related symptoms it is crucial to alert an adult and get follow-up care as soon as possible with a primary care physician. If the athlete has any of the SCA risk factors, these should also be discussed with a doctor to determine if further testing is needed. Wait for your doctor's feedback before returning to play, and alert your coach, trainer and school nurse about any diagnosed conditions.

### What is an AED?

An automated external defibrillator (AED) is the only way to save a sudden cardiac arrest victim. An AED is a portable, user-friendly device that automatically diagnoses potentially life-threatening heart rhythms and delivers an electric shock to restore normal rhythm. Anyone can operate an AED, regardless of training. Simple audio direction instructs the rescuer when to press a button to deliver the shock, while other AEDs provide an automatic shock if a fatal heart rhythm is detected. A rescuer cannot accidentally hurt a victim with an AED—quick action can only help. AEDs are designed to only shock victims whose hearts need to be restored to a healthy rhythm. Check with your school for locations of on-campus AEDs.



## The Cardiac Chain of Survival

On average it takes EMS teams up to 12 minutes to arrive to a cardiac emergency. Every minute delay in attending to a sudden cardiac arrest victim decreases the chance of survival by 10%. Everyone should be prepared to take action in the first minutes of collapse.

### Early Recognition of Sudden Cardiac Arrest



Collapsed and unresponsive. Gaspings, gurgling, snorting, moaning or labored breathing noises. Seizure-like activity.

### Early Access to 9-1-1



Confirm unresponsiveness. Call 9-1-1 and follow emergency dispatcher's instructions. Call any on-site Emergency Responders.

### Early CPR



Begin cardiopulmonary resuscitation (CPR) immediately. Hands-only CPR involves fast and continual two-inch chest compressions—about 100 per minute.

### Early Defibrillation



Immediately retrieve and use an automated external defibrillator (AED) as soon as possible to restore the heart to its normal rhythm. Mobile AED units have step-by-step instructions for a bystander to use in an emergency situation.

### Early Advanced Care



Emergency Medical Services (EMS) Responders begin advanced life support including additional resuscitative measures and transfer to a hospital.

*Cardiac Chain of Survival Courtesy of Parent Heart Watch*

# Keep Their Heart in the Game

## Recognize the Warning Signs & Risk Factors of Sudden Cardiac Arrest (SCA)

Tell Your Coach and Consult Your Doctor if These Conditions are Present in Your Student-Athlete

### Potential Indicators That SCA May Occur

- Fainting or seizure, especially during or right after exercise
- Fainting repeatedly or with excitement or startle
- Excessive shortness of breath during exercise
- Racing or fluttering heart palpitations or irregular heartbeat
- Repeated dizziness or lightheadedness
- Chest pain or discomfort with exercise
- Excessive, unexpected fatigue during or after exercise

### Factors That Increase the Risk of SCA

- Family history of known heart abnormalities or sudden death before age 50
- Specific family history of Long QT Syndrome, Brugada Syndrome, Hypertrophic Cardiomyopathy, or Arrhythmogenic Right Ventricular Dysplasia (ARVD)
- Family members with unexplained fainting, seizures, drowning or near drowning or car accidents
- Known structural heart abnormality, repaired or unrepaired
- Use of drugs, such as cocaine, inhalants, "recreational" drugs, excessive energy drinks or performance-enhancing supplements

### What is CIF doing to help protect student-athletes?

CIF amended its bylaws to include language that adds SCA training to coach certification and practice and game protocol that empowers coaches to remove from play a student-athlete who exhibits fainting—the number one warning sign of a potential heart condition. A student-athlete who has been removed from play after displaying signs or symptoms associated with SCA may not return to play until he or she is evaluated and cleared by a licensed health care provider. Parents, guardians and caregivers are urged to dialogue with student-athletes about their heart health and everyone associated with high school sports should be familiar with the cardiac chain of survival so they are prepared in the event of a cardiac emergency.

I have reviewed and understand the symptoms and warning signs of SCA and the new CIF protocol to incorporate SCA prevention strategies into my student's sports program.

STUDENT-ATHLETE SIGNATURE

PRINT STUDENT-ATHLETE'S NAME

DATE

PARENT/GUARDIAN SIGNATURE

PRINT PARENT/GUARDIAN'S NAME

DATE

### For more information about Sudden Cardiac Arrest visit

California Interscholastic Federation  
<http://www.cifstate.org>

Eric Paredes Save A Life Foundation  
<http://www.epsavealife.org>

National Federation of High Schools  
(20-minute training video)  
<https://nfhslearn.com/courses/61032>





## Parent/Student CIF Heat Illness Information Sheet



### WHY AM I GETTING THIS INFORMATION SHEET?

You are receiving this information sheet about Heat Illness because of California state law AB 2800 (effective January 1, 2019), now Education Code § 35179 and CIF Bylaws 22.B.(9) and 503.K (Approved Federated Council January 31, 2019):

1. *CIF rules require a student athlete, who has been removed from practice or play after displaying signs and symptoms associated with heat illness, must receive a written note from a licensed health care provider before returning to practice.*
2. *Before an athlete can start the season and begin practice in a sport, a Heat Illness information sheet must be signed and returned to the school by the athlete and the parent or guardian.*

Every 2 years all coaches are required to receive separate trainings about concussions (AB 1451), sudden cardiac arrest (AB 1639), and heat illness (AB 2800), as well as certification in First Aid training, CPR, and AEDs (life- saving electrical devices that can be used during CPR).

### WHAT IS HEAT ILLNESS AND HOW WOULD I RECOGNIZE IT?

Intense and prolonged exercise, hot and humid weather and dehydration can seriously compromise athlete performance and increase the risk of exertional heat injury. Exercise produces heat within the body and when performed on a hot or humid day with additional barriers to heat loss, such as padding and equipment, the athlete's core body temperature can become dangerously high. If left untreated, this elevation of core body temperature can cause organ systems to shut down in the body.

Young athletes should be pre-screened at their pre-participation physical evaluation for heat illness risk factors including medication/supplement use, cardiac disease, history of sickle cell trait, febrile or gastrointestinal illness, obesity, and previous heat injury. Athletes with non-modifiable risk factors should be closely supervised during strenuous activities in a hot or humid climate.

Sweating is one way the body tries to reduce an elevated core temperature. Once sweat (salt and water) leaves the body, it must be replaced. Water is the best hydration replacement, but for those athletes exercising for long periods of time where electrolytes may be lost, commercial sports drinks with electrolytes are available. Energy drinks that contain caffeine or other “natural” stimulants are not adequate or appropriate hydration for athletes and can even be dangerous by causing abnormal heart rhythms.

**PREVENTION** There are several ways to try to prevent heat illness:

#### ADEQUATE HYDRATION

Arrive well-hydrated at practices, games and in between exercise sessions. Urine appears clear or light yellow (like lemonade) in well-hydrated individuals and dark (like apple juice) in dehydrated individuals. Water/sports drinks should be readily available and served chilled in containers that allow adequate volumes of fluid to be ingested. Water breaks should occur at least every 15-20 minutes and should be long enough to allow athletes to ingest adequate fluid volumes (4-8 ounces).

#### GRADUAL ACCLIMATIZATION

Intensity and duration of exercise should be gradually increased over a period of 7-14 days to give athletes time to build fitness levels and become accustomed to practicing in the heat. Protective equipment should be introduced in phases (start with helmet, progress to helmet and shoulder pads, and finally fully equipped).

#### ADDITIONAL PREVENTION MEASURES

Wear light-colored, light-weight synthetic clothing, when possible, to aid heat loss. Allow for adequate rest breaks in the shade if available. Avoid drinks containing stimulants such as ephedrine or high doses of caffeine. Be ready to alter practice or game plans in extreme environmental conditions. Eat a well-balanced diet which aids in replacing lost electrolytes.

A **FREE** online course “Heat Illness Prevention” is available through the CIF and NFHS at <https://nfhslearn.com/courses/61140/heat-illness-prevention>.



## Parent/Student CIF Heat Illness Information Sheet



### HEAT EXHAUSTION

Inability to continue exercise due to heat-induced symptoms. Occurs with an elevated core body temperature between 97 and 104 degrees Fahrenheit.

- Dizziness, lightheadedness, weakness
- Headache
- Nausea
- Diarrhea, urge to defecate
- Pallor, chills
- Profuse sweating
- Cool, clammy skin
- Hyperventilation
- Decreased urine output

### TREATMENT OF HEAT EXHAUSTION

Stop exercise, move player to a cool place, remove excess clothing, give fluids if conscious, **COOL BODY:** fans, cold water, ice towels, ice bath or ice packs. Fluid replacement should occur as soon as possible. The Emergency Medical System (EMS) should be activated if recovery is not rapid. When in doubt, CALL 911. Athletes with heat exhaustion should be assessed by a physician as soon as possible in all cases.

### HEAT STROKE

Dysfunction or shutdown of body systems due to elevated body temperature which cannot be controlled. This occurs with a core body temperature greater than 107 degrees Fahrenheit. *Signs observed by teammates, parents, and coaches include:*

- Dizziness
- Drowsiness, loss of consciousness
- Seizures
- Staggering, disorientation
- Behavioral/cognitive changes (confusion, irritability, aggressiveness, hysteria, emotional instability)
- Weakness
- Hot and wet or dry skin
- Rapid heartbeat, low blood pressure
- Hyperventilation
- Vomiting, diarrhea

### TREATMENT OF HEAT STROKE

This is a **MEDICAL EMERGENCY**. Death may result if not treated properly and rapidly.

Stop exercise, Call 911, remove from heat, remove clothing, immerse athlete in cold water for aggressive, rapid cooling (if immersion is not possible, cool the athlete as described for heat exhaustion), monitor vital signs until paramedics arrive.

### FINAL THOUGHTS FOR PARENTS AND GUARDIANS

Heat stress should be considered when planning and preparing for any sports activity. Summer and fall sports are conducted in very hot and humid weather across regions of California. While exertional heat illness can affect any athlete, the incidence is consistently highest among football athletes due to additional protective equipment which hinders heat dissipation. Several heatstroke deaths continue to occur in high school sports each season in the United States. Heatstroke deaths are preventable, if the proper precautions are taken.

You should also feel comfortable talking to the coaches or athletic trainer about preventative measures and potential signs and symptoms of heat illness that you may be seeing in your child.

I acknowledge that I have received and read the CIF Heat Illness Information Sheet.

\_\_\_\_\_  
Student-Athlete Name

*Printed*

\_\_\_\_\_  
Student-Athlete

*Signature*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Legal Guardian Name

*Printed*

\_\_\_\_\_  
Parent or Legal Guardian

*Signature*

\_\_\_\_\_  
Date