



Wrestling Skin Evaluation and Participation Status Form (Physician Release for Student-Athlete to Participate with Skin Lesion)

Student-Athlete: _____

Date of Exam: _____

Institution: _____

Please Mark Location of Lesion(s):

Dual(s)/Tournament: _____

Number of Lesion(s): _____

Cultured: No Yes Location: _____ Date: _____

Diagnosis: _____

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

Date Treatment Started: _____ Time: _____

Earliest Date Student-Athlete May Return to Participation: _____

Physician Name (Printed): _____

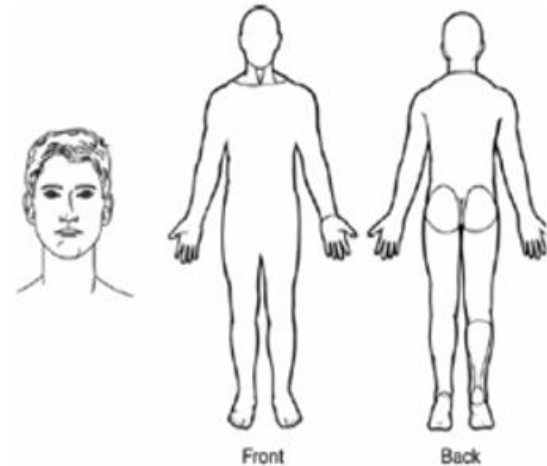
Specialty: _____

Physician Signature (M.D./D.O.): _____

Office Address: _____

Contact #: _____

Institution Certified Athletic Trainer Notified: No Yes Signature: _____



Note to Physician: Non-contagious lesions do not require treatment prior to return to participation (e.g., eczema, psoriasis, etc.) Please familiarize yourself with NCAA Wrestling Rules which state (refer to the NCAA Wrestling Rules Book for complete information):

Rule 9.1.7 "The presence of a communicable skin disease...shall be full and sufficient reason for disqualification."

Rule 9.1.9 "If a wrestler has been previously diagnosed as having a skin condition and is currently being treated by a physician, who has determined it is safe for the individual to compete without jeopardizing the health of the opponent, the entrant may be considered for competition after review of the required treatment documents (and after examining the wrestler)."

Rule 9.1.11 "Final determination of the entrant's ability to compete shall be made by the host site's physician or certified athletic trainer who conducts the medical examination after review of any such documentation and the completion of the exam."

Below are some treatment guidelines that suggest **MINIMUM TREATMENT** before return to wrestling:

Adequately covered is defined as, "the lesion is covered by a gas impermeable dressing, pre-wrap and stretch tape that is appropriately anchored and cannot be dislodged throughout the sport activity."

Bacterial Infections (Furuncles, Carbuncles, Folliculitis, Impetigo, Cellulitis or Erysipelas, Staphylococcal disease, MRSA): Wrestler must have been without any new skin lesion for 48 hours before the meet or tournament. Wrestler must have completed 72 hours of antibiotic therapy and have no moist, exudative or draining lesions at meet or tournament time. Gram stain of exudate from questionable lesions (if available). Active purulent lesions shall not be covered to allow participation.

Herpetic Lesions (Simplex, fever blisters/cold sores, Zoster, Gladiatorum): Skin lesions must be surmounted by a FIRM ADHERENT CRUST at competition time, and have no evidence of secondary bacterial infection. For primary (first episode of Herpes Gladiatorum) infection, the wrestler must have developed no new blisters for 72 hours before the examination, be free of systemic symptoms of viral infection (fever, malaise, etc.), and have been on appropriate dosage of systemic antiviral therapy for at least 120 hours before and at the time of the meet or tournament. Recurrent outbreaks require a minimum of 120 hours of appropriate dosage of systemic antiviral therapy, again so long as no new lesions have developed and all lesions are completely dry and surmounted by a firm adherent crust. Active herpetic infections shall not be covered to allow participation.

Tinea Lesions (ringworm): Oral or topical antifungal agent therapy for 72 hours on skin and 14 days on scalp required for non-coverable areas. Wrestlers presenting appropriate documentation of a diagnosed Tinea infection, is under treatment, and the infection is in a coverable area, may participate even though the 72 hours have not expired

Molluscum Contagiosum: Lesions must be curetted or removed before the meet or tournament and adequately covered.

Verrucae: Wrestlers with multiple digitate verrucae of their face will be disqualified if the infected areas cannot be covered with a mask. Solitary or scattered lesions can be curetted away before the meet or tournament but cannot be seeping. Wrestlers with multiple verrucae plana or verrucae vulgaris must have the lesions adequately covered.

Hidradenitis Suppurativa: Wrestler will be disqualified if extensive or purulent draining lesions are present; covering is not permissible.

Pediculosis: Wrestler must be treated with appropriate pediculicide and reexamined for completeness of response before wrestling.

Scabies: Wrestler must have negative scabies prep at meet or tournament time.

DISCLAIMER: The NCAA shall not be liable or responsible, in any way, for any diagnosis or other evaluation made herein, or exam performed in connection therewith, by the above named physician/provider, or for any subsequent action taken, in whole or in part, in reliance upon the accuracy or veracity of the information provided herein.