



NUTRITIONAL SUPPLEMENTS & ANABOLIC STEROIDS

- Contents and purity of nutritional supplements are not tested or regulated by the Food and Drug Administration
- Contaminated supplements could lead to a positive steroid test
- Athletes should have their nutritional needs met through a healthy balanced diet and not dietary supplements

SUDDEN CARDIAC ARREST

In the United States each year, sudden cardiac arrest kills 350,000 people, which is approximately a 1000 people per day. This can also occur in the athletic environment. Death during an athletic event can result from direct or indirect causes. The direct causes of death are primarily traumatic. The major indirect cause is from arrhythmia or electrical malfunction resulting in sudden cardiac arrest. Sudden cardiac death is usually caused by unsuspected heart disease or disorder. The National Athletic Trainers Association and the American Heart Association reviewed 158 cases of deaths in athletics and found the following:

- The median age was 17
- Most of the occurrences were in football and basketball, but 18 different sports had occurrences
- Only 12 of the cases reported any symptoms

PREVENTION: Prevention is difficult if the preexisting cardiac condition is not recognized. To try to achieve this physicians should include a thorough history and cardiac examination as part of the preparticipation physical exam. Athletes must report symptoms during the physical exam that alert medical personnel of the risk of sudden cardiac arrest. **THE KEY: A GOOD HISTORY IN THE PREPARTICIPATION PHYSICAL EXAM**

CAUSES: Hypertrophic Cardiomyopathy, Marfan Syndrome, Wolff-Parkinson-White Syndrome, Long QT Syndrome, Coronary Artery Abnormalities

WARNING SIGNS: Palpitations, Dizziness, Chest Pain or Tightness with exercise, Shortness of breath, Syncope, Family History of sudden cardiac death

Treatment & Care: CHAIN OF SURVIVAL



STAPHYLOCOCCUS AUREUS

Staphylococcus aureus, referred to commonly as "staph" are bacteria commonly carried on the skin or in the nose of healthy people (approximately 30%-50% of the population is colonized). Staph can sometimes cause skin infections.

Some staph bacteria have mutated and cannot be killed with commonly used antibiotics. MRSA is a type of staph that is resistant to antibiotics including methicillin and other more common antibiotics such as penicillin and amoxicillin.

MRSA: Methicillin Resistant Staphylococcus Aureus

Prevention of Staph:

- Keep your hands clean (wash hands frequently)
- Keep scrapes and cuts clean & covered
- Shower after physical activity
- Properly clean gear and equipment
- Consult Athletic Trainer, Nurse or Physician for active wounds
- Avoid contact with other peoples wounds
- Avoid sharing personal items such as towels and razors

Treatment: See Athletic Trainer, Nurse or Physician Immediately

ASTHMA

Asthma is a chronic disease that affects your airways. The inside of the airways become inflamed or swollen which restricts the amount of air volume that can reach the lungs.

Causes:

- Allergens—Pollen, Mold, Pet Dander, Dust Mites
- Irritants—Scented Products, Pollution, Weather Changes
- Other—Medicines, Gastric Reflux, Infections

Major Signs & Symptoms:

- Coughing
- Wheezing
- Tightness in chest (chest pain)
- Shortness of breath
- Breathing difficulty at night
- Breathing difficulty when exposed to allergens

Treatments:

- Quick Relief Medicine—Inhaler (Can be used before exercise) i.e. Albuterol, Xopenex
- Long Relief Medicine—Inhaler
- Avoid Triggers

✦ Pulmonary measuring devices are available at all athletic venues

CONCUSSION

A concussion is defined as an acute deceleration event causing temporary or permanent damage to the inner ear or brain. The mechanism of injury determines the severity of the symptoms. This is a breakdown of grades of concussion with some common symptoms:

GRADE I

- No Loss of consciousness
- Appropriate verbal and motor responses
- Mild confusion
- Transient imbalance
- Nausea
- Dizziness
- Disorientation lasting less than 15 minutes

GRADE II

- No loss of consciousness
- Confusion
- Imbalance
- Nausea
- Dizziness
- Disorientation longer than 15 minutes
- Same as Grade I but lasts longer than 15 minutes

GRADE III

- Any loss of consciousness
- Any sign of inappropriate speech
- Severe confusion
- Severe loss of balance

SECONDARY IMPACT

- Previous history of concussion
- Visual, motor or sensory changes
- Difficulty with memory and/or thought
- Collapse into coma
- Signs of cranial nerve and brainstem pressure

Treatment: See Athletic Trainer, Coach, Nurse, or Physician for immediate evaluation and care. In the case of a Grade III with loss of consciousness activate EMS.

DIABETES

Hypoglycemia (Blood sugar 70 or less)

Treatment:

- 4 oz fruit juice
- 15 gm glucose tablets
- 1 tube glucose gel
- 4-6 small hard candies
- 1-2 tablespoons of honey
- 6 oz regular soda

Mild Symptoms:

Hunger, shakiness, weakness, paleness, blurry vision, sleepiness, changed behavior, sweating, anxiety, dilated pupils

Moderate to Severe Symptoms

Yawning, Confusion, restlessness, irritability, frustration, extreme fatigue, dazed appearance, sudden crying, seizures, inability to swallow, Coma

Normal Blood Glucose Levels

Adult: 90-130
Children: 100-140

Hyperglycemia (Blood Sugar 180 or more)

Mild Symptoms:

Lack of concentration, thirst, frequent urination, blurred vision, flushing of skin, increased hunger, sweet fruity breath, fatigue, weight loss, stomach pain

Moderate Symptoms

Dry mouth, vomiting, nausea, stomach cramps

Severe Symptoms

Very weak, labored breathing, confused, unconscious

Treatment:

- Verify blood glucose
- Allow free use of bathroom and access to water
- Administer insulin
- Call parents

HEAT ILLNESS

Disorder	Symptoms	Treatment
<p>Heat Cramps May occur after working in moderate-to-hot environments. This disorder usually occurs after performing hard physical work. Heat cramps may occur during or after school.</p>	<ul style="list-style-type: none"> • Cramps in skeletal muscles or abdominal muscles • Cramps may be recurrent • Muscle pain may continue after cramps subside 	<ul style="list-style-type: none"> • Move person to cool environment • Remove unnecessary clothing • Provide water or electrolyte solution • Transport to medical facility
<p>Heat Syncope Occurs due to salt loss and water loss in sweat. Predisposes to heatstroke.</p>	<ul style="list-style-type: none"> • Weakness, fatigue • Fainting 	<ul style="list-style-type: none"> • Move person to cool environment • Provide water or electrolyte solution
<p>Heat Exhaustion May occur after working in hot environments without adequate fluid replacement or electrolyte replacement. Heat exhaustion may be confused with heat stroke, which is a medical emergency.</p>	<ul style="list-style-type: none"> • Weakness, Fatigue • Headache, nausea, vomiting and/or loss of appetite and thirst • Pale, clammy skin with large amount of sweating • Lightheadedness, fainting • Impaired performance 	<ul style="list-style-type: none"> • Emergencies Call 911 • Call ambulance and move patient to cool environment • Do not delay transportation to a medical facility • Remove unnecessary clothing • Person should lie flat • If person is alert, offer small amounts of cool water
<p>Heat Stroke <i>Least Common, but most dangerous</i> Occurs when the body's system of temperature regulation fails and the body's temperature rises to critical levels. This disorder is associated with high fatality rates, so early recognition and treatment is critical</p>	<ul style="list-style-type: none"> • Red or flushed skin • Confusion, irrational behavior • Lack of sweating, hot dry skin (although person may have been sweating earlier) • High body temperature • Dizziness, convulsions, nausea, vomiting, and headache can result • Loss of consciousness 	<ul style="list-style-type: none"> • Emergencies Call 911 • Do not delay transport to a medical facility • Move to a cool environment and remove unnecessary clothing • Sponge body with cool water and fan individual • If patient is alert, give sips of cool water • No one suspected of being ill from heat stroke should be sent home without a medical evaluation

LIGHTNING SAFETY

Designate a safe shelter for each venue

Flash-to-Bang count: (can be used to determine when to go to safety)

- When flash-to-bang count approaches thirty seconds all individuals should be already in a safe structure

Once activities have been suspended, wait at least thirty minutes after the last sound of thunder or lightning flash before resuming activities

Avoid being at the highest point in an open field

Do not take shelter near trees, flagpoles or light poles.

Individuals who feel their hair stand on end, skin tingle, or hear "crackling" noises should assume the lightning safe position: *crouched on ground, weight on balls of feet, feet together, head lowered and ears covered. Never lie flat on the ground.*

First Aid

- Survey the scene for safety
- Activate EMS
- Victims are safe to touch—they do not carry a charge
- Evaluate airway, breathing, and circulation and begin CPR if necessary
- Evaluate for hypothermia, shock, fractures and burns.

CISD SAFETY TRAINING RECORD

SPORT: _____

COACH: _____

PRINT NAME	SIGNATURE	DATE TRAINED

These students have been properly trained in the safety program developed by the UIL and complies with SB 82.

Coach Signature: _____

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