

# MARYSVILLE HIGH SCHOOL SPORTS MEDICINE HANDBOOK



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## **EMERGENCY ACTION PLAN**

**Marysville High School** has a written emergency plan that should be followed in the event of a medical emergency. All coaches should be familiar with this document and their role and responsibility in an emergency. Any questions should be directed to the head athletic trainer (or school administrator, in the absence of a licensed athletic trainer).

An **emergency** is the need for Emergency Medical Services (EMS) to give further medical attention and/or transport an athlete to the hospital. It is important in these situations that coordination between the athletic trainer, coaches, administrators and student responders be effective. This guide is intended to delineate roles and outline the protocol to be followed should an emergency occur. Situations when 911 should be called are:

- an athlete is not breathing
- an athlete has lost consciousness
- it is suspected that an athlete may have a neck or back injury (Fractures)
- an athlete has an open fracture (bone has punctured through the skin)
- severe heat exhaustion or suspected heat stroke
- severe bleeding that cannot be stopped

### **Chain of Command**

Certified Athletic Trainer  
 Administrator  
 Head Coach  
 Assistant Coach  
 Sports Medicine Student Assistant  
 Other Athletes

The highest person in the chain of command who is present at a scene will be the designated person in charge, or leader. That person is responsible for deciding whether or not to call 911, instructing others how they may be of help and will be the person who stays with the athlete until EMS arrives.

Once it has been decided that EMS should be called, the following protocol should be followed:

1. The highest person on the chain of command will be deemed the leader, and will stay with the athlete to monitor the athlete's condition and administer necessary first aid. If possible, someone else on the chain of command should also stay and assist. The front office or an administrator should be notified that there is an emergency situation on campus.
2. The highest person on the chain of command will make the call to EMS or will designate another person to make the call. (911 from a cell phone, DIAL 9 before dialing 911 on school phones. EMS should be told what the emergency is, the condition of the athlete and how to get to where the athlete is. Also, tell EMS that someone will meet them at the closest intersection to aid in directing the ambulance. **DO NOT HANG UP UNTIL EMS HANGS UP FIRST.**

3. Phones at Marysville High School are located in the main office, classrooms, and in the athletic training room.
4. The leader will send runners to all intersections between where the athlete is located and Marysville High School/venue-specific location to direct the ambulance to the athlete. The runners should stay in their positions and wave the ambulance through the proper turns to get to the athlete.
5. The leader will designate another person to attempt contact with the athlete's parents. **Emergency contact information can be found** with the head coach and/or head athletic trainer and should be with them at all times. If a parent is not present, the form should accompany the athlete to the hospital.
6. If transport is deemed necessary by EMS, the athlete will be taken to **Rideout Memorial Hospital - 726 4th St, Marysville, CA 95901**, unless the parent requests otherwise.

**Marysville High School** is located at: **12 18th St, Marysville, CA 95901**

- The closest intersection to the school, softball field, basketball gym, and weight room, is **18<sup>th</sup> Street and Ramirez Street.**
- The closest intersection to the Football, Baseball, Swimming Pool, and Soccer Field is **Ramirez Street and Scott Lane.**

### Locations of AEDs

An AED will always be located in the Athletic Training Clinic, R.O.P. Sports Medicine Room, Ward Pavilion, and onsite with either coach or covering Certified Athletic Trainer.

### Important Phone Numbers

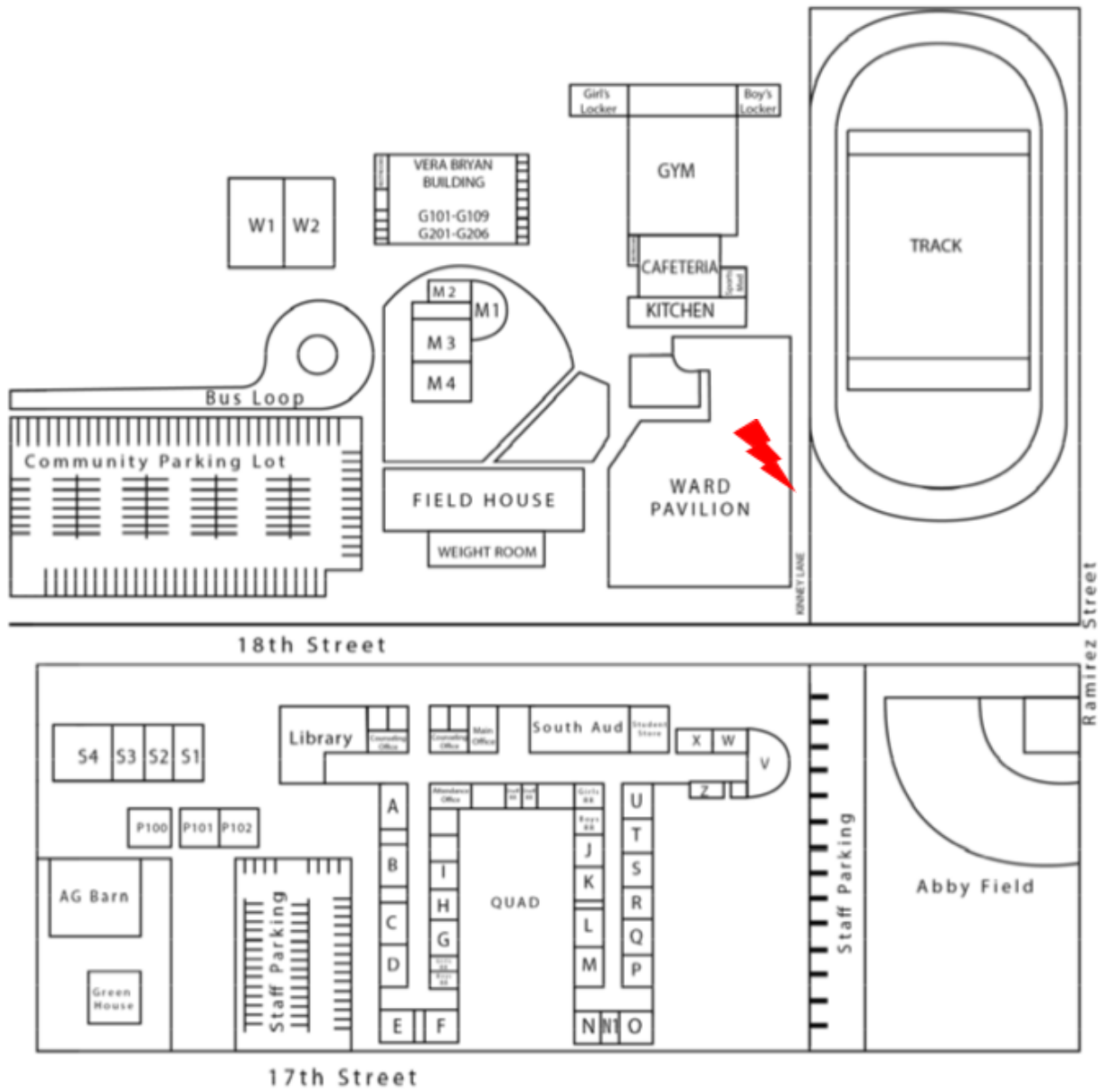
**EMS: 911**  
**Certified Athletic Trainer: 530 - 446 - 1533 (C)**  
**Principal: 530-741-6180 X 3102 (O) / 530-570-6899**  
**Athletic Director: 530.741.6180 x 3123 (O) / 530- 632-8230 (C)**  
**Main Office: 530-741-6180**  
**PG&E: 1-800-743-5000**

### EMS Routes to Hospital from Venues

- **Baseball / Football / Soccer / Swimming/ JV Softball:**
  1. Take **Right** on **Ramirez Street** exiting the east end of the parking lot at **War Memorial Stadium.**
  2. Turn **Right** on to **East 10<sup>th</sup> Street**
  3. Turn **Left** on to **Yuba Street**

4. Turn **Right** on to **6<sup>th</sup> Street**
  5. Turn **Left** on to **B Street**
  6. Turn **Right** on to **5<sup>th</sup> Street**
  7. Turn **Left** on to **H Street**
  8. Turn **Left** on to **4<sup>th</sup> Street**
  9. Destination is on your **Right**
- **Basketball / Cheer / Varsity Softball/ Track & Field / Wrestling / Volleyball / Field House:**
    1. Take **Left** from **Kinney Lane** onto **18<sup>th</sup> Street**
    2. Turn **Right** onto **Ramirez Street**
    3. Turn **Right** on to **East 10<sup>th</sup> Street**
    4. Turn **Left** on to **Yuba Street**
    5. Turn **Right** on to **6<sup>th</sup> Street**
    6. Turn **Left** on to **B Street**
    7. Turn **Right** on to **5<sup>th</sup> Street**
    8. Turn **Left** on to **H Street**
    9. Turn **Left** on to **4<sup>th</sup> Street**
    10. Destination is on your **Right**
  - **Tennis**
    1. Head **south** toward **18th Street**
    2. Turn **Right** toward **18th Street**
    3. Turn **Left** toward **18th Street**
    4. Turn **Right** onto **18th Street**
    5. Turn **Left** onto **B Street**
    6. Turn **Right** onto **14th Street**
    7. Turn **Left** on to **H Street**
    8. Turn **Left** on to **4<sup>th</sup> Street**
    9. Destination is on your **Right**

### Temporary Map with AED Location related to Venue Location



 = AED

## **Air Quality Implications for Athletic Events, Practices, and Physical Activity**

### **Monitoring**

Air quality forecasts will be monitored daily by **School Administration** and the **District Athletic Trainers**. All restrictions placed on activity must be imposed based on “Real Time” measurements taken from the Air Quality Index (AQI) <http://www.airnow.gov>

### **Notification**

**Physical Educators, Coaches, and Transportation Personnel** should all be informed when restrictions are imposed, as well as when air quality restrictions are being considered.

To prevent wasted travel expenses, gameplay restrictions **must be decided prior to the visiting high school’s departure.**

During local wildfire disasters, Air Quality updates should be presented to all parties on a daily basis.

**Any questions or concerns regarding AQI Guidelines please contact the Athletic Director or Athletic Trainer.**

**Air Quality Activity Guidelines**

AQI	Air Pollution Quality	Health Implications	Outdoor Restrictions	Field-house Restrictions	Gym Restrictions
0-50	Excellent	No health implications.	No Restrictions	No Restrictions	No Restrictions
51-100	Good	Some pollutants may slightly affect very few hypersensitive individuals.	No Restrictions	No Restrictions	No Restrictions
101-150	Light Pollution	Healthy people may experience slight irritations and sensitive individuals will be slightly affected to a larger extent.	<b>Outdoor practices limited to an hour</b>	No Restrictions	No Restrictions
151-200	Moderate Pollution	Sensitive individuals will experience more serious conditions. The hearts and respiratory systems of healthy people may be affected.	<b>All Outdoor practices must be moved to field-house and/or gym</b>	<b>Limit Practices to an hour</b>	No Restrictions
201-300	Heavy Pollution	Healthy people will commonly show symptoms. People with respiratory or heart diseases will be significantly affected and will experience reduced endurance in activities.	<b>All Practices must be moved to the gym</b>	<b>All Practices must be moved to the gym</b>	No Restrictions
>300	Severe Pollution	Healthy people will experience reduced endurance in activities and may also show noticeably strong symptoms. Other illnesses may be triggered in healthy people. Elders and the sick should remain indoors and avoid exercise. Healthy individuals should avoid outdoor activities	<b>No Activity</b>	<b>No Activity</b>	<b>No Activity</b>

\*All students with respiratory issues must have proper medication on site with their coach

\*\*If air quality is 100 or above please secure doorways to indoor facilities

## **Heat Index Implications for Athletic Events, Practices, and Physical Activity**

The district appointed Athletic Trainer will take daily measurements using a Wet-Bulb Globe Meter during Summer and Spring months of the year. Restrictions will be based off WBGT reading as well as OSHA's general heat index restrictions:

[https://www.osha.gov/SLTC/heatillness/heat\\_index/index.html](https://www.osha.gov/SLTC/heatillness/heat_index/index.html)

Heat related restrictions will pertain to all outdoor sports. The coaches of these sports should have frequent contact with athletic training staff and school administration. Coaches **MUST** follow CIF mandated heat acclimation protocols to ensure athlete safety regardless of heat related restrictions.

### **Guidelines**

When temperatures reach 96-99 degrees or heat index rises to 104 degrees.

- All Outdoor Sports - 5 minute water break / 30 minutes of practice. (**Shaded Area**)
- Practice is not to exceed 2 hours total outdoor time. Water should be available at all times during practice.
- Football - Helmets off during breaks
- Cross Country - Runners should run a course where all athletes can be viewed by a coach at all times, preferably on campus.

When temperatures reach 100-103 degrees or heat index is between 105-109 degrees.

- All Outdoor Sports - Practices will include a 5 minute break /30 minutes of practice (**Shaded Area**) Practice is not to exceed 2 hours total outdoor time. Water should be available at all times during practice.
- Football - Shorts and shoulder pads for practice. Helmets and shoulder pads off during breaks.
- Cross Country - Runners should run a course where all athletes can be viewed by a coach at all times, preferably on campus.

When the temperature is above 103 up to 105 degrees or heat index is between 110-118 degrees.

- All Outdoor Sports - Practices will include a 5 minute break / 15 minutes of Practice (**Shaded Area**) Practice is not to exceed 1.5 hours total outdoor time. Water should be available at all times during practice.
- Football - Practices will be in t-shirts and shorts with helmet. Helmets off during breaks
- Cross Country - Runners should run a course where all athletes can be viewed by a coach at all times, preferably on campus.

**When the temperature reaches 106 degrees or the heat index is over 119 degrees. OUTDOOR PRACTICES SHOULD BE CANCELLED OR RESCHEDULED**



# **Marysville High School Concussion Protocol**

## **Baseline Testing**

- Athletes who participate in **all** sports will be required to perform annual baseline concussion testing prior to competition.
- The baseline examination should consist of a clinical history (including any symptoms), physical and neurologic evaluations, measures of motor control (eg, balance)\*\*\*, and neurocognitive function.

\*\*\* Motor Control Baseline to be implemented upon the advent of new software provided by District.

## **Evaluation and Diagnosis**

- Any athlete suspected of sustaining a concussion should be immediately removed from participation and evaluated by a physician or designated medical employee (eg, AT).
- The concussion diagnosis is made through clinical evaluation and supported by assessment tools.
- When the rapid assessment of concussion is necessary (eg, during competition), a brief concussion-evaluation tool (eg, Standardized Assessment of Concussion [SAC]) should be used in conjunction with a motor-control evaluation and symptom assessment to support the physical and neurologic clinical evaluation.

## **Return to Play**

- Once a concussion diagnosis has been made, the patient should undergo a daily focused examination to monitor the course of recovery.
- A concussed athlete should not be returned to athletic participation on the day of injury.
- No concussed athlete should return to physical activity without being evaluated and cleared by a physician or designated medical professional (eg, AT) specifically trained and experienced in concussion evaluation and management.
- A physical-exertion progression should begin only after the concussed athlete demonstrates a normal clinical examination, the resolution of concussion-related symptoms, and a return to preinjury scores on tests of motor control and neurocognitive function.

Once concussion related symptoms subside, the athlete is to successfully complete the following protocol:

### Graduated Return to Sport Strategy

Exercise step	Functional exercise at each step	Goal of each step
1. Symptom-limited activity	Daily activities that do not provoke symptoms.	Gradual reintroduction of work/school activities.
2. Light aerobic exercise	Walking or stationary cycling at slow to medium pace. No resistance training.	Increase heart rate.
3. Sport-specific exercise	Running or skating drills. No head impact activities.	Add movement.
4. Non-contact training drills	Harder training drills, e.g., passing drills. May start progressive resistance training.	Exercise, coordination, and increased thinking.
5. Full contact practice	Following medical clearance, participate in normal training activities.	Restore confidence and assess functional skills by coaching staff.
6. Return to play/sport	Normal game play.	

***\*\*\*If the athlete experiences symptoms from any step of the protocol, he or she must be regressed back to the previous step. (e.g. Light Aerobic Exercise during step 2 aggravates symptoms, athlete must go back to step 1.)***

## **Marysville High School Lightning Safety Protocol**

Prior to weekly events, weather forecasts will be monitored utilizing the **National Weather Service** ([www.weather.gov](http://www.weather.gov)). If lightning risk is identified, the athletic trainers, coaches, and school administrators will monitor vicinity with *The Lightning App* that is available on all Android and Apple devices. If a strike is identified by any administrator, coach, or athletic trainer, he or she should begin the Flash to Bang Counting Method

### **Flash to Bang Counting Method**

Utilize the Flash to Bang Counting Method to determine whether a lightning strike is within 6-8 miles of outdoor activity:

1. When a strike is seen, begin counting
2. When thunder is heard, stop counting
3. Divide the amount of seconds by 5 to determine the distance of most recent strike (in miles).
4. Flash to Bang count of 30 seconds or less equates to a distance of 6 miles or less
5. Play should be suspended if any strike falls within 6 miles of outdoor activity. Crowd, Coaches, and Players should be escorted to protected facilities listed below.

### **Evacuation**

Once a strike is identified within 6 miles of activity, coaches, athletic trainers, and attending administrators should evacuate the teams and/or spectators to designated safe facilities located around campus.

- **Baseball / Football / Soccer / Swimming/ JV Softball:**

Utilize War Memorial Locker Room or Snack Bar facilities during an event or practice

- **Varsity Softball/ Track & Field/ Tennis**

Utilize high school, basketball gym, or Fieldhouse gym

Tennis should exit through the east gate and head into basketball gym

### **Emergency**

In the event of an emergency, activate standard EAP and call 911. Refer to the chain *of command* once 911 is dialed.

## **Athletic Hazard and Communicable Disease Prevention**

### **Field Inspection Checklist**

At the end of a game, and on a daily basis the grounds staff will ensure that the sports fields are safe for athletic participation. The grounds crew checklist included but is not limited to;

- Scan/fix the field of hazards such as potholes, ruts, eroded sprinklers, etc
- Scan/fix the bleachers for trash, and any broken boards that could lead to injury
- Scan/Fix any divots that may occur on the dirty track

### **Locker Room Cleaning Procedure**

It is the responsibility of the coaching staff as well as janitorial staff to ensure that the safety within the locker room is preserved. Coaches are required to verify that athletes;

- Pick up their clothes out of the walk ways
- Equipment is put away in lockers
- Floor is free of debris or hazards that could cause someone to trip
- Waste produced by the athletes makes it into the garbage

The Janitorial staff is responsible for the sanitization and cleaning of the locker room beyond that of the messes that athletes produce.

The janitorial staff`s locker room cleaning checklist includes;

- Pick up trash
- Empty garbage
- Replace toilet paper, and paper towels
- Clean and sanitize urinals and toilets
- Keep the showers clear of debris
- Mop and sanitize the floors of the locker room

### **MJUSD Mat Cleaning Policy**

It is the responsibility of the head wrestling coach to ensure that the mats are disinfected adequately before practice or duels.



## MJUSD Athletic Training Clinic Cleaning/Sanitization Policy

It is the responsibility of the site specific Athletic Trainer to ensure that MJUSD sports medicine clinics are sanitized regularly to ensure a safe environment for students and staff.

### MJUSD Athletic Training Clinic Cleaning/Sanitization Protocol

The Athletic Training clinic will have a daily/weekly/seasonally/and yearly sanitation calendar created to ensure the clinic is being thoroughly sanitized. It will be the responsibility of the site specific Athletic Trainer(and any graduate students) to create, and complete the sanitation schedule outlined in the procedure section of 2.7.

### MJUSD Athletic Training Clinic Cleaning/Sanitization Procedure Cleaning/Sanitization Log

Area/Item	Daily	Weekly	Seasonally
Sanitize Tapping Tables	X		
Sanitize HI/LO Table	X		
Sanitize Foldout Table	X		
Sanitize Stools	X		
Sanitize Soft Tissue Tools	X		
Sanitize Foam Rollers	X		
Sanitize Echo bike		X	
Sanitize Barbells		X	
Sanitize Kettlebells Handles		X	
Sanitize Jump Ropes		X	
Sanitize TRX Handles		X	
Sanitize Mouse/Keyboard		X	
Sanitize Office Phone		X	
Sanitize Ice Scoop Handles		X	

Wash the Whole Gator			X
Clean/Organize back Storage			X
Organize Filing Cabinet			X
Clean Floors			X
Cleaning/Organize Cabinet Storage			X
Clean fridge			X
Deep clean of the clinic <i>(to be performed in the summer before the school year begins)</i>			

### **MJUSD Hydration Sanitization Policy**

It is the responsibility of the site specific Athletic Trainer to ensure that school supplied hydration equipment is properly sanitized on a regular basis for the health and safety of the student athletes.

### **MJUSD Hydration Sanitization Protocol**

Football games will be the only time the school provides hydration. It will be the site specific Athletic Trainer`s responsibility to ensure that the hydration equipment being utilized for football games has been previously sanitized, as well as properly sanitized following the game.

### **MJUSD Hydration Sanitization Procedure**

The Athletic Training staff will have a combination of large coolers, motor powered water apparatuses, and water bottles. If ice is to be used it should come from ice machines that have the proper filtration system for consumption. Only previously sanitized equipment should be used. When athletes are using the water bottles they are to refrain from making mouth to nozzle contact. At the end of a game the athletic trainer or coach should dump the remains and wash out the containers with soap and water, and then leave the bottles/coolers upside down to air dry. Once completely dried the tops should be placed back on and the bottles stored in a safe place.

## MJUSD Referral Guidelines

### Athletic Trainer Discretionary Referral

*External medical professionals are to be referred to when a MJUSD medical provider believes a pathology is outside his/her scope of practice, or requires a secondary opinion. Or when the AT is unable to produce a MCID within a successive 14 day period.*

### Adventist Health

Family Medicine	Vineet Gupta, MD	(530) 674-2434
Orthopedics	Sukhdeep Sagoo, DO	(530) 751-7201
Neurology	Wenchiang Han, MD	(530) 749-8801
Cardiology	Amit Bahia, MD	(530) 844-5640

### Sutter Health

Family Medicine	Sharndeeep Bains, DO	(530) 749-3420
Orthopedics	Hafiz Kassam, MD	(530) 749-3463
Neurology	Arish Eduljee, MD	(530) 749-3341
Cardiology	Tin Way, MD	(530) 749-3346
Dermatology	Robert Peppercorn, MD	(530) 671-4182

### Private Medical Professionals

Chiropractic	David Ellyson, DC	(530) 743-2093
Chiropractic	Charles Price, DC	(530) 755-3200
Physical Therapy	Torben Ulrich, DPT	(530) 673-0567
Physical Therapy	Shawn Christensen, DPT	(530) 329-8490

### EMERGENCY SERVICES

911
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## MJUSD Guidelines for Athlete Healthcare, Rehabilitation, and Referral

### On-Site Services

District Athletic Trainers will be available for rehabilitation services during most class periods. Depending on the situation and type of injury, an athlete may be expected to perform rehabilitation and treatment protocols multiple times a week.

School and District administration have granted access to injured athletes during any class period. Athletic Trainers should prioritize physical education and elective classes when pulling students out of class and should avoid pulling a student whom is performing poorly in ANY class (Grade of C or lower). Athletic Trainers should be expected to communicate with teachers when a student is expected to spend multiple weeks performing rehabilitation.

Athletic Trainers will allow for treatment/rehabilitation during lunch periods, and after school activity hours (3-5 pm). Due to the high volume of injured athletes at any given time, after school hours may be necessary but will not be guaranteed (Contract includes compensation for 40 hour work weeks).

When an Athletic Trainer is on campus he or she may be performing auxiliary tasks required for the position. These tasks include but are not limited to:

- Sport/Practice Coverage
- Athletic Performance and Strength Training
- Performing a clinical evaluation
- Administrative Duties
- On Campus Meetings with Coaches, Parents, Athletes, and Admin Schedule

District Athletic Trainers will have evolving schedules based on the current season. An example of this would be:

*FALL SEASON: M-TH: 10 - 6pm // F: 2 - 10pm*

*WINTER SEASON: M-F: 12 - 8 pm // Coverage Responsibilities Vary*

### Interventions

Interventions include but are not limited to:

- Therapeutic and Corrective Exercises
- Joint Mobilizations (grades 1-4)
- Soft Tissue Techniques
- Movement Training
- Motor Control Training
- Task-Specific Functionality Training
- Therapeutic Activities
- Home Care Material
- Cardiovascular Training

### **Referral**

District Athletic Trainers are expected to suggest and/or implement referral for any athlete that is dealing with an orthopedic, neurological, physiological, or psychological issue that lies outside of their scope of practice. Athletic Trainers who feel an alternative opinion may be needed should suggest referral to athlete and parent(s) of athlete. The Athletic Trainers should be knowledgeable of avenues of referral in the proximal Yuba-Sutter Area.

### **Outcomes**

The healthcare provided by District Athletic Trainers should be monitored via outcome measures taken during each visit or frequently enough to monitor (weekly, bi-weekly, monthly etc...). Outcome measures used may include but aren't limited to:

- Subjective/Objective Evaluation Measures
- QuickDASH
- Foot and Ankle Ability Measure
- Oswestry Low Back Pain Disability Questionnaire
- SCAT 5 Concussion Form
- FMS Score Sheets
- Refer to 10.4 for a complete analysis of outcome measures

If an athlete is not progressing in a reasonable manner based on the injury they have sustained, it is the Athletic Trainer's responsibility to take proper steps toward making improvements (referral, changing interventions, re-evaluation etc...).

### **Modality Hazard Inspection**

All modalities that require a power source must be inspected by an outsourced

professional once per year. The Athletic Trainer will be in charge of scheduling while the district provides compensation for said services.

## **MJUSD Football Equipment Fitting Policy**

### **Helmet and Shoulder Pad Fitting Procedure**

Coaches, parents, and athletes will be provided documents that outline proper fitting procedures. Fitting will be conducted by a coach/athletic trainer who has studied and is educated in proper fitting procedure. (CDC, NATA, USA Football Etc...)

### **Education Requirement**

At least one coach from each level of the football program (Varsity, Junior Varsity, and Freshman) has to provide documentation of a completed continuing education course regarding football equipment fitting. This information will be documented on an annual log provided by the school district. Along with the specified education, each staff member will make themselves familiar with fitting procedure documents as a way to ensure that every athlete in the district has been fitted properly.

<https://www.helmetfitting.com> (\$10 Fee Reimbursed by MJUSD)

### **MJUSD Reconditioning/Recertification Policy**

NAERA recommends that during every football, lacrosse, baseball and softball season or practice period, every helmet should be cleaned and inspected regularly by a school or organization staff member with knowledge of manufacturer recommendations. We further recommend every helmet should be reconditioned and recertified every other year (standard ND 001 6.1.1) unless stated otherwise by the manufacturer. ONLY a company licensed by NOCSAE can perform the recertification of football, lacrosse, baseball and softball helmets (Continental Athletic Supply 1050 Hazel Street, Gridley, CA 95948).

It is expected that a log will be kept that shows who was issued what, and when it was certified/recertified for use, and by whom.

## **MJUSD Medical Care and Coverage Policy**

## On-site Recognition, Evaluation, and Treatment

It is the responsibility of each MJUSD Coach to **recognize** and **report** suspected acute and/or chronic injuries to qualified medical professionals. MJUSD Athletic Trainers are the only medical professionals legally required to **evaluate** and **treat** suspected injuries on either campus.

## Communication

Anytime an Athletic Trainer is unavailable, or isn't present on campus, the Coach must exercise proper precautions depending on the situation. In the event of an emergency, activate site specific Emergency Action Plan (EAP). If a suspected injury occurs that may require imaging or referral, recommend the athlete's parent take their child into urgent care or doctor, and give the parent their Athletic Trainer's contact information. The Coach must then contact the Athletic Trainer with the athlete's name and explanation of injury.

Regardless of the situation, all Coaches must make Athletic Trainer aware of injuries so athletes can be seen in a timely manner, and protected from further injury. The Athletic Trainer's contact information (i.e. phone and email) will be provided to all coaches prior to their respective seasons.

## Athletic Trainer Medical Care and Coverage Calendar

### Fall Sports

#### Hierarchy or coverage

- 1st priority-Football
- 2nd priority-Volleyball
- 3rd priority-Cheer
- 4th priority-Cross Country
- 5th priority-Golf

#### Schedule

- Mon-12:30-7:30pm
- Tues-12:30-7:30pm
- Wed-12:30-7:30pm
- Thurs-12:30-7:30pm
- Fri-2:00-10:00pm

### Winter Sports

#### Hierarchy or coverage

- 1st priority-Wrestling
- 2nd priority-Soccer
- 3rd priority-Basketball

#### Schedule

- Mon-12:30-7:30pm
- Tues-12:30-7:30pm
- Wed-12:30-7:30pm
- Thurs-12:30-7:30pm
- Fri-12:30-7:30pm

### Spring Sports

#### Hierarchy or coverage

- 1st priority-Track and Field
- 2nd priority-Softball
- 3rd priority-Baseball
- 4th priority-Tennis
- 5th priority-Swim
- 6th priority-Golf

#### Schedule

- Mon-12:30-7:30pm
- Tues-12:30-7:30pm
- Wed-12:30-7:30pm
- Thurs-12:30-7:30pm
- Fri-12:30-7:30pm

## MJUSD Athlete Nutrition Guidelines

Nutritional instruction provided by MJUSD Athletic Training and Strength staff will be targeted around recovery principles that promote healthy habits. Although most high-school athletes will be concerned with muscular adaptation and hypertrophy, our role as strength coaches and educators, must acknowledge that long-term health supersedes short-term desires. Coaches must be aware of their scope as it pertains to nutrition, and be sure to refer out when inquiries require medical consultation.

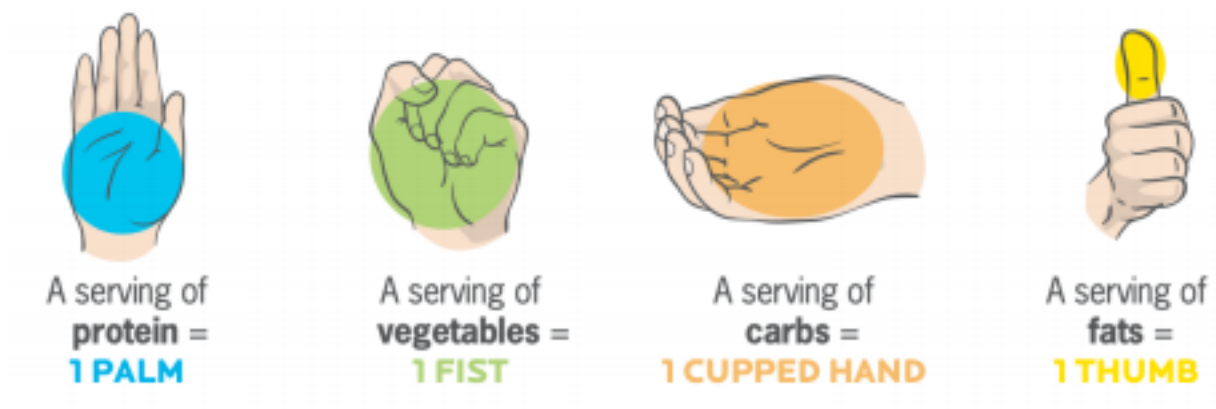
The overall nutrition for student athletes at MJUSD is simple and is tailored to benefit the development of behavioral attributes that will benefit each student after high school. The main points of our system can be summarized into 3 principles with subsets that outline ways in which principles can be achieved.

### Principle 1 - Meet Energy Demands with Calorie Intake

- **Monitor Consumption**
  - Student athletes have enough homework to do when they get home from school. As coaches we support a minimal approach to meal tracking. Initially we would like students to report a meal consistency worksheet. A coach should help each athlete develop goals for each meal. All athletes need to do is track whether their meals meet the goals they set out to achieve.
  
- **Understand Macronutrients**
  - Carbohydrates are broken down easily and efficiently by our body. If we consume more than we are able to metabolize (breakdown) then our body stores them into our muscles and organs, usually as glycogen(energy that fills up your muscles), but sometimes as fat(energy that goes into fat cells). There are **simple** and **complex** carbohydrates:
    - **Complex** carbohydrates are more robust in nature, house other beneficial nutrients, and keep us feeling full for long periods of time. Fiber is usually included with complex carbohydrates, great for many mechanisms, including digestion (vegetables, fruits, whole grains etc..).
    - **Simple** carbohydrates digest easily but don't produce a "full" sensation. Usually house trans-fats, lots of sodium, flavorings and preservatives. (Pasta, cookies, cakes etc.)
  - Dietary protein is involved in repair and recovery of our tissues, hormones, and immune system. Although not usually utilized for energy, protein is an incredibly useful tool for long term athletic development.
    - There are many different types of proteins, AKA *Amino Acids*, which makes it important to diversify your protein sources. Different types of meats, dairy, and beans contain protein that will help you recover and adapt. Protein supplementation shouldn't be introduced until athletes are meeting their daily requirements through normal nutrition.
  - Fats are our most robust sources of energy. Fats are oxidized during physical

activity, giving energy to different tissues in the body. If fats are not used for energy purposes they are stored in adipose tissue (fat cells), skeletal muscle... etc. Like all other macronutrients we want a diversified mix, containing less processed fats. These include but aren't limited to:

- o Olives
- o Nuts/Seeds
- o Avocado
- o Dairy
- o Eggs
- o Meats
- o Coconuts?!?!?
- Since the typical American diet unfortunately leads to an unbalance of Omega-3/Omega-6 Fatty Acids (two different types of fat present in food), a fish oil supplement may be warranted. Keys to remember with Fatty Acids - Omega 6 is a pro-inflammatory (Beef, pork, dairy, eggs)
- Omega 3 is an anti-inflammatory (Avocados, Nuts, Fish). Both are necessary for adaptation but we usually don't get enough Omega-3.
- **Portion, not Calculation**
  - o Our athletes shouldn't obsess over calculating caloric intake perfectly. Athletes who are merely capable of meeting their energy needs usually produce successful outcomes. Coaches will provide relative objectives based on the demands of each sport (intensity and weekly load). When attempting to meet these objectives, athletes should measure their meals by using hand sized portion measurements (Figure ?? Below).



- o The goal for each meal should be **1 palm of protein, 1 fist of vegetables, 3 cups of carbs, 2 thumbs of fat.** (4 - 6 Meals a day)

## Principle 2 - Rely on Non-Processed Foods

- **Learn meaning of Whole Foods**
  - o Whole Foods can be identified using simple rules:
    - The food is recognizable in nature

- Minimal Packaging
- Have an expiration
- **Monitor Consumption**
  - Tracking meals should identify whether there is an over-abundance of processed food in an athlete's diet. Continuous support should be given to athletes to correct this over time.

**Principle 3 -Sleep 8 Hours//Night ; 8 Cups of Water/Day + 1-4 Cups/Hour of Physical Activity**

- **Downregulation Ritual**
  - Remove all electronics/screen from your attention for 45 - 30 minutes prior to sleep. Read, stretch, or write goals for the next day before falling asleep. Ask coaches for ideas on this principle.
- **Bring Water to School**
  - Athletes who have something on them that reminds them to drink water (water bottle), are more likely to m

**MJUSD Dietary Supplement Resource/Guidelines**

*Adapted from the Wisconsin Interscholastic Athletic Association's Position Statement on Performance Nutrition*

MJUSD strongly opposes the use of supplements by high school athletes for performance enhancement due to the lack of published scientific research that documents the benefits and/or risks of supplement use, particularly in adolescents. Supplements should only be used on the advice of one's health care provider for health-related reasons; not for the purpose of gaining a possible competitive advantage. School personnel and coaches should never recommend, endorse, or encourage the use of any supplement, drug, or medication for performance enhancement to a student athlete.

Products typically promoted as performance enhancing include: dietary or nutritional supplements, ergogenic aids, health supplements or sport supplements. While some mainstream supplements are made by responsible manufacturers, a growing number of products contain dangerous and hidden ingredients, including steroids and prohormones. In making a decision to use a supplement, several factors should be considered:

- **Evaluating Supplements for Discouraged or Banned Substances:** Supplements are not regulated like drugs, food or medication. Supplement companies do not have to follow the same "truth in labeling" regulations as for food or medication. Supplement labels are not required to list all the ingredients in the product and can omit listing ingredients that are in a bottle. A growing number of products contain dangerous and undisclosed ingredients, including steroids, stimulants and dangerous drugs. Proprietary ingredients are a "company secret" and do not have to be listed on the label. To minimize the risk of taking a supplement that contains a banned ingredient, visit the NFS Certified for Sport website <http://www.nfsport.com/> or Informed Choice <http://www.informed-choice.org/> for a listing of supplements that have been tested for purity and potency.
- **Health Consequences:** Supplement products have been known to be contaminated with banned or harmful ingredients. Taking supplements with dangerous hidden drugs such as designer steroids has been a known cause of liver injury, stroke, kidney failure, and pulmonary embolism. Supplement products with hidden stimulants can cause irregular heart rhythm, increased blood pressure, stroke, even death.
- **Contamination:** Supplements can accidentally contain banned or discouraged ingredients due to cross-contamination when manufacturing equipment isn't cleaned properly between batches of products. In other cases manufacturers will spike a product with stimulants or prohormones without listing them on the label to deceive the athletes that the product will cause big gains while claiming the product is "all natural" or "legal."
- **Sources of information:** Supplement store staff or company distributors get paid by selling a product. They are well-trained to sell the most popular product with the biggest profit margin. The staff generally may not have training in nutrition, biochemistry or pharmacology. In addition, they may not know or understand WIAA rules/regulations of supplement use by athletes. A supplement/product that is "legal" for the company to sell to the athlete, however, may not be allowed for an athlete to use.
- **Testimonials from professional athletes:** Supplement companies frequently advertise



their products with testimonials from professional athletes or well-known sports figures. These testimonials are not proof that a supplement works. Athletes who are paid to endorse a product are generally at the end of their career and did not use the supplement when they were young and training to become successful.

- **Pre-Workout Boosters:** These products claim to provide increased energy and endurance for a workout. Supplements in this category generally contain several sources of stimulants - many not listed on the label - that affect the heart and blood pressure and can cause serious health consequences. In addition, this category of products has a history of containing hidden banned supplements, including illegal prohormones and steroids. Use of pre-workout boosters has caused many athletes to fail drug tests, be suspended from competition, and has been related to several deaths.
- **Protein Powders:** Most diets supply adequate protein. However, in cases where athletes can't eat enough food or when protein needs are higher than normal, limited supplementation may be needed. In these cases, a physician or sport dietitian consultation may be helpful. If extra protein is needed, read labels carefully. Protein powders may contain discouraged or banned ingredients not listed on the label. A 2007 study by Informed Choice Labs randomly selected 50 protein powders off the shelves of well known supplement stores. They found that 25% of the powders contained anabolic steroids. In addition 11% of the protein powders tested positive for stimulants not listed on the label. Look for labels that list protein as the first ingredient, have few added ingredients and do not claim to be "mass builders." **If you can't pronounce ingredients listed on the label don't take it.**

The primary reason student-athletes choose to use supplements are to gain mass and weight, get stronger, reduce body fat, and have more energy. Student athletes who want to improve athletic performance should focus on good training strategies, a good diet, and proven recovery strategies that stress the 4 "R's": rest, refuel, rehydrate, and repair. In the vast majority of cases, a few changes to the student-athlete eating habits will lead to muscle growth, fat loss, improved strength and faster recovery.

### **MJUSD Policy for Safe and Effective Training Strategies**

It is the policy of MJUSD that a qualified medical professional oversees the flexibility, strength, and cardiovascular training programs; as well as ensuring proper precautions are observed within MJUSD athletics by coaches and athletes alike.

### **MJUSD Protocol for Safe and Effective Training Strategies**

MJUSD requires that each sports coach communicates an outline of their offseason strengthening and conditioning plan prior to the beginning of each season. The outline should include the coaches plan for developing flexibility, strength, and cardiovascular conditioning with their athletes.

The program utilized to develop strength with a specific team should be geared toward injury reduction, long term athletic development, as well as athletic performance. The Athletic Training staff will be able to assist the coach in identifying specific exercises that will be critical to developing a well rounded athlete who is resilient to injury.

The flexibility program should focus on areas notorious for injury rate increases within a specific sport. Communication with the athletic training staff can aid the coach in understanding what areas are commonly tight in athletes participating in a particular sport.

The coaching staff needs to design a cardiovascular conditioning program that is geared towards developing the prerequisite conditioning needed for participation in their given sport. The Athletic Training staff can be a useful resource for coaches to better understand the bioenergetics behind a specific sport.

Having a documented plan will allow the department to track progress as athletes venture through their developmental process. Refining goals and objectives year to year will lead to better outcomes for the athlete's health and performance.

## **MJUSD Procedure for Designing Effective Flexibility, Strength, and Cardiovascular Conditioning Programs**

### **Proper Flexibility Program Design**

When designing a flexibility program it is imperative that the coach knows specifically what outcomes they are trying to produce. A haphazard full body flexibility program will likely not produce the desired results, and will leave the coach wondering why none of their athletes are making progress in their flexibility. Focused stretching designed to work on problem areas will yield a greater result.

- First, the coach should meet with the Athletic Training staff to identify problem areas within the team's mobility.
- Before meeting with the Athletic Training staff the coach should decide how long (i.e. 10 minutes at the end of practice), and how often (i.e. 3 times a week) they want to have their team focusing on stretching.
- General guidelines for flexibility programs:
  - Dynamic stretching is more effective at the beginning of practice. Not only does it serve the purpose of gaining flexibility, but unlike static stretching it will also begin to warm-up the athlete for physical activity.

- Static stretching should be reserved for the end of practice when the athlete is not expected to perform any more physical activity. Static stretching will effectively “turn off” your muscles and will cause an athlete's muscles to respond slower to stimulus. Thus, it is not appropriate before practice or competition.
- Flexibility training benefits more from a short daily practice, versus a more significant sem-daily practice. Therefore, it is recommended that coaches incorporate some form of flexibility training every day with their athletes.

### Proper Strength Training Design

Strength training in high school does not need to look like professional weightlifting to be beneficial for your athletes. Strength training for adolescents should be focused on creating more efficient movement patterns, dynamic control, and overall force production. With even minimal effort/time commitment, coaches may be surprised by the results that a consistent strength training program can yield.

- First, the coach needs to meet with the Athletic Training staff to discuss their goals for the team.
- Before meeting with the Athletic Training staff the coach needs to decide the duration (i.e. daily time allotment), and frequency (i.e. how many days a week) the coach plans to focus on strength training.
- General guidelines for strength training:
  - Strength training benefits increase with frequency up until a point. 1 session of strength training a week is too low to yield results. 2 days a week is the minimum when developing a strength and conditioning program. 3 days a week provides substantially more benefits than two days a week. 4 days a week is when the benefits of a strength training program will begin to taper off. 4-5 days a week will still provide more yield of strength, but come at a higher cost, and may not be needed for particular sports. 2-3 days is the recommended dosage for adolescents participating in high school sports.
  - The ideal amount of recovery that a muscle needs is 48-72 hours. That means if you exercise a muscle on monday it will be “recovered” by wednesday-friday. For adolescent athletes each muscle should be stimulated during strength training a minimum of 2 times a week, and maximum of 3 times a week.
  - A program with 2 days of strength training ideally has 2-3 days in between sessions (i.e. monday and thursday). This type of training is best for in-season training because the time commitment is lower, and allows for more time practicing the sport.
    - A strength training routine utilizing 2 days a week should focus on full body training both days. That way every muscle in the body can be exercised twice a week. Therefore, more dynamic exercises that utilize multiple joints are ideal for time management, and muscle recruitment efficiency.

- A program based on training 3 times a week ideally has a day of rest in between every session. (i.e. monday, wednesday, friday). This style of training is best for the pre-season when the coach is trying to build resilience within their athletes. With 3 day strength training programs a full body approach can still be utilized because there is still time for adequate recovery between sessions. If the coach wants to have 2 days back to back the program can be split up to accommodate that.
  - I.e. Let's say the coach wants their athletes strength training on Monday, Tuesday and Thursday. Because Monday and Tuesday are back to back the coach now needs to divide the body in two for those two days. Monday could be a lower body day, and Tuesday an upper body day, while Thursday is still a full body day.
- 4-5 day strength training programs are only appropriate for the off-season when the overall demands on the adolescent athlete are low, which will allow them to adequately recover from the high volume strength training program.
  - A 4-5 day program can become more complicated depending on the days the athletes are lifting. Because the risk of over working your athletes can exist with specific styles of training that utilize 4-5 days. It is advised that the coach works directly with the Athletic Training staff to design a workout that allows for maximal performance gains, while still ensuring adequate recovery under a 4-5 days a week program.
- 6-7 days a week strength training is not advised for adolescents. Adolescent athletes are not equipped to handle and recover from such programs and will usually experience injury and burnout when placed under such training protocols.

### Cardiovascular Conditioning Program

Cardiovascular conditioning, like everything else, benefits from consistency over intensity. It is impossible to impose cardiovascular changes in a two week time span, therefore 2 week conditioning “hell week” dead periods are obsolete and are NOT creating long term conditioning adaptations, and are **likely** to cause injury to untrained athletes.

- When designing a conditioning program, the coach needs to first identify the type of conditioning that their athletes need. The conditioning to play a game of basketball, versus a softball game are completely different, and should utilize different methods to prepare their athletes.
  - As a general rule of thumb there are three forms of cardiovascular fitness. There is the ATP-PCR system (fancy acronym for 3-10 seconds bursts of energy, think a football play, or a high jumper). There is the anaerobic system (this system dominates effort from 45 seconds to 2 minutes, think 400-800m run, or a round of wrestling). And your aerobic system (2 minute or longer, like cross country).
  - Most sports are a combination of all three, and therefore require parceling out prioritization to match the demands of the sport.

- Before meeting with the Athletic Training staff the coach needs to decide the duration (i.e. daily time allotment), and frequency (i.e. how many days a week) the coach plans to focus on conditioning.
- 1-2 days a week of conditioning is ideal for in-season training.
- 2-3 days a week is ideal for pre-season training.
- 4-5 days a week is ideal for off-season training.
- 6-7 days a week is not recommended for adolescents.
- Anywhere from 5-30 minute of conditioning should suffice depending on the type of conditioning being developed.

