

# SPORTS PACKET

**\*\*Sports Physical (\*Freshmen, please see note)**

## FORMS IN THIS PACKET

1. IHSA Performance-Enhancing Substance Policy
2. IHSA Performance-Enhancing Banned Substance List
3. Windsor CUSD #1 Random Drug Testing Policy
4. IHSA Concussion Information Sheet
5. Windsor CUSD #1 Concussion Policy
6. **IHSA Performance-Enhancing Policy Acknowledgement and Consent Form**
7. **Windsor CUSD #1 Random Drug Testing Consent Form**
8. **Windsor CUSD #1 Concussion Policy Acknowledgement Form**
9. **Windsor CUSD #1 Sports Insurance Waiver**

**Bold = Forms and physicals must be on file BEFORE the 1<sup>st</sup> official practice**

\* Sports physicals do not count as school physicals for incoming Freshmen

\*\*Physicals must have been completed within the last 395 days (1 year plus 1 month) to count as an adequate physical per IHSA rules. Please contact the school nurse if you are unsure about the date of your last physical.



## IHSA PERFORMANCE-ENHANCING SUBSTANCE POLICY 2019-20

### Introduction

In accordance with the work of its Sports Medicine Advisory Committee, the Illinois High School Association shall implement a performance-enhancing substance testing program for student-athletes at IHSA member schools.

### Background

The value of high school interscholastic programs is found in the over-all physical, emotional, and intellectual development of student-athletes. In that pursuit, anabolic steroids and performance-enhancing dietary substances offer no positive contribution. Rather, their use jeopardizes not only the health of student-athletes, but also impedes in their over-all development. And since this use runs counter to the purpose and value of interscholastic programs, coaches, administrators, school officials or employees, or booster club/support group members have an obligation and responsibility to provide only healthy, safe, and approved substances to student-athletes. In a national study conducted by the U.S. Department of Health in 2003, findings of the survey suggested that just over 3% of surveyed 10<sup>th</sup> and 12<sup>th</sup> graders were either currently using anabolic steroids or had within the past year of the survey. A combination of these results and increased dialogue between member schools and the IHSA brought about the realization that the membership was desirous of more direction on this issue. Furthermore, in December of 2006, member schools approved IHSA By-Law 2.170, which took effect on July 1, 2007 and identifies what schools or school officials can and can not distribute to student-athletes, a change aimed at strengthening the relationship between students and their schools by affirming the school's commitment to offering a safe environment in which their students can develop.

Since 2005, the IHSA, through the work of its Sports Medicine Advisory Committee and in conjunction with the National Federation of State High School Associations, has attempted to increase awareness on anabolic steroid use by high school students and provided resources which schools, athletes, and parents could use to reinforce the dangers of anabolic steroids and performance-enhancing dietary substances. For a complete list of resources, interested individuals can access the IHSA's Sports Medicine Advisory Committee's Special Topics at [www.ihsa.org](http://www.ihsa.org).

Since 2008-09, over 2,000 high school student-athletes have been tested as a part of the IHSA's Performance-Enhancing Substance Testing Program. The testing program began as a post-season testing program but has evolved over the years to make any student who participates in an IHSA-sponsored or sanctioned athletic event eligible for substance testing in accordance with this policy.

### General Prohibitions

1. It shall be considered a violation of the IHSA By-law 2.170 and its subsections for any student-athlete to ingest, or otherwise use any substance of the IHSA's Banned Substance Classes, without a written prescription and medical documentation provided by a licensed physician who evaluated the student-athlete for a legitimate medical condition.
2. Violations found as a result of the IHSA's Performance-Enhancing Substance Testing program shall be penalized in accordance with this policy.
3. Violations found as a result of any other drug or substance testing conducted by a member school shall be penalized in accordance with the member school's athletic code of conduct policy.



## **Banned Substances**

A posting of banned substance classes shall be prepared annually by the IHSA Sports Medicine Advisory Committee and approved by the IHSA Board of Directors. It shall be subject to updates at any point during a school term. A complete posting of the current year's banned substance classes list can be accessed at [www.ihsa.org](http://www.ihsa.org).

## **Consent**

The association shall prohibit a student from participating in an athletic competition sponsored or sanctioned by the association unless the following conditions are met:

- The student agrees not to use any performance-enhancing substances on the association's most current banned substances classes list, and, if the student is enrolled in high school, the student submits to random testing for the presence of these substances in the student's body, in accordance with the program established by the association.
- The association obtains from the student's parent a statement signed by the parent and acknowledging: that the parent's child, if enrolled in high school, may be subject to random performance-enhancing substance testing; that State law prohibits possessing, dispensing, delivering, or administering a performance-enhancing substance in a manner not allowed by State law; that State law provides that bodybuilding, muscle enhancement, or the increase of muscle bulk or strength training through the use of a performance-enhancing substance by a person who is in good health is not a valid medical purpose; that only a licensed practitioner with prescriptive authority may prescribe a performance-enhancing substance for a person with a documented medical need; and that a violation of State law concerning performance-enhancing substances is a criminal offense punishable by confinement in jail or imprisonment.

## **Selection of Athletes to be tested**

- The method for randomly selecting Schools or Student-athletes to be tested for performance-enhancing substances will be approved by the IHSA in advance of any performance-enhancing substance testing, administered by the third party administrator and implemented by the assigned testing certified collector.
- Student-athletes in the 9th, 10th, 11th and 12th grades at IHSA member-schools are subject to random selection for performance-enhancing substance testing.
- Selection of Student-athletes will be based upon a random selection process approved by the IHSA and conducted by the third party administrator.
- Student-athletes will be randomly selected from the current IHSA Performance-Enhancing Substance Testing Student-athlete Listing Form. The IHSA Performance-Enhancing Substance Testing Student-athlete Listing Form shall be the official list of all Student-athletes in grades 9-12 participating in IHSA athletic activities. The School is required to utilize the IHSA Performance-Enhancing Substance Testing Student-athlete Listing Form, which is available for download on the IHSA web site.
- If a student is selected for substance testing and is notified and then subsequently excused from testing that day by the certified collector, the third party administrator may return at a later date to test the student-athlete.
- A substitution, who will also have been randomly selected, shall be made for a Student-athlete who is selected for performance-enhancing substance testing but is absent on the day of said testing. Randomly selected Student-athletes who do not appear for testing for reasons other than an Excused Absence will be treated as if there was a positive test result for a performance-enhancing substance and subject to applicable penalties as described later in this policy

### **School and Student-athlete Notification of Testing**

- The member school representative and testing site coordinator at a selected School will be officially notified of the performance-enhancing substance testing a minimum of twenty-four (24) hours (1 business day) but no more than forty-eight (48) hours (2 business days) before the day of testing by the third party test administrator.
- The member school representative, testing site coordinator, and/or any other school personnel notified of a performance-enhancing substance testing event are required to keep such notification confidential. Failure of a member school representative, testing site coordinator and/or any other school personnel so notified to keep such notification information confidential will be considered a violation of this policy and subject the member-school to possible sanctions in accordance with section 1.460 of the IHSA Constitution.
- Upon notification of testing, the member school representative will be required to provide an accurate and current list of all Student-athletes in grades 9-12 who are currently participating or who have participated in IHSA athletic activities at the school during the current school year to the third party test administrator for Student-athlete random selection. The member school representative will be required to submit the list within the time frame specified by the third party test administrator in their notification. The member-school is required to utilize the IHSA Performance-Enhancing Substance Testing Student-athlete Listing Form, which will be available for download on the IHSA web site. The IHSA has the authority to perform audits to ensure that schools are providing complete and accurate Performance-Enhancing Substance Testing Student-athlete Listing Forms to the third party test administrator.
- Upon arrival at the School, the Performance-Enhancing Substance testing certified collector will provide the member school representative with a list of the randomly selected Student-athletes for performance-enhancing substance testing. The randomly selected Student-athletes will be notified of performance-enhancing substance testing by the member school representative. The member school representative will notify the Student-athlete in person to report immediately to the Collection Station.
- Upon notification the member school representative will have the Student-athlete read and sign the IHSA Student-athlete Notification Form. The time of notification will be recorded on the form. The Student-athlete will report for performance-enhancing testing immediately upon notification. Failure of the Student-athlete to report immediately may be found by the Certified collector to be a violation of this protocol.
- School Personnel will be available in the Collection Station at all times to certify the identity of Student-athletes who cannot provide photo identification and will be responsible for security of the Collection Station at all times.

### **Administration of tests**

Specimens shall be collected by an independent third party administrator and forwarded to a performance-enhancing substance testing laboratory with current certification from the Substance Abuse and Mental Health Services Administration of the United States Department of Health and Human Services, the World Anti-Doping Agency, or another appropriate national or international-certifying organization.

### **Specimen Collection Procedures**

The methodology for taking and handling samples shall be in accordance with current legal standards and shall be reviewed annually as a part of this policy. A full explanation of the collection protocols are outlined in Appendix A of this policy.



### **Sufficiency of results**

A positive result will be any result reported as positive by the accredited laboratory. The Medical Review Officer (MRO) may grant a Medical Exception to a student-athlete who is able to produce documentation showing a legitimate medical need and a prescription from a licensed physician for a banned substance. Results reported as positive by the laboratory shall maintain positive status even though a sanction may not be applied to the student-athlete.

### **Appeal process**

If the certified laboratory reports that a student-athlete's sample has tested positive, and the IHSA Medical Review Officer confirms that there is no legitimate medical reason for a positive result, a penalty shall be imposed unless the student-athlete proves, by a preponderance of evidence, that he/she bears no fault or negligence for the violation. Appeals shall be heard in accordance with IHSA By-law 1.460 before the IHSA Board of Directors.

### **Penalties**

1. Any person who tests positively in an IHSA administered test, or any person who refuses to provide a testing sample, or any person who attempts to alter the integrity or validity of the urine specimen, or any person who reports his or her own violation, or any other breach of the IHSA protocol as determined by the independent third party administrator shall immediately forfeit his or her eligibility to participate in IHSA competition for a period of 365 days from the test results are reported to the student and the school. Any such person shall also forfeit any individual honor earned while in violation. The student may apply for reinstatement of his/her athletic eligibility no sooner than 90 calendar days of the suspension following successful completion of an approved educational program and testing negative in a subsequent substance test administered by the association's third party test administrator. The costs of the educational program, and the additional substance test, are the responsibility of the student.

Additionally, the IHSA reserves the right to conduct follow-up substance tests, in accordance with the procedures outlined in this policy, on any such person who tests positive for a banned substance class in an IHSA administered test.

2. Under the provisions of Article 1.460 of the IHSA Constitution, the Executive Director will evaluate each positive test result situation on a case by case basis to determine if a team/school penalty is appropriate.

3. Under the provisions of Article 1.460 of the IHSA Constitution, the Executive Director will evaluate each positive test result situation on a case by case basis to determine if a coach at a member school knowingly violated the rules of the testing program and if a subsequent penalty against any such coach is appropriate.

4. Under the provisions of Article 1.460 of the IHSA Constitution, appeals will be heard by the IHSA Board of Directors.

### **Reporting of Results**

In reporting results of IHSA administered substance tests, the accredited laboratory will forward all completed substance test results to the third party administrator. The third party administrator will forward all negative results to the designated IHSA representative. Upon receipt of negative test results, the IHSA will notify member schools of those results.

In the event of positive test results, however, the third party administrator will forward all positive substance test results to the MRO to determine if a medical exception is to be granted to the student-athlete. In such cases, the following shall serve as this policy's medical review process:

1. The third party administrator will notify the MRO of the positive test result. At this time, the IHSA will also be notified that a positive test result has occurred.
2. The MRO will have 48 hours from the time of their notification of the positive test result to contact the student's parent(s)/legal guardian(s). If the MRO is unable to establish contact within 48 hours, the submission time outlined in #3 shall begin.
3. The student's parent(s)/guardian(s) have 48 hours from the time of their notification of the positive test result from the MRO to respond and provide appropriate documentation/materials. If appropriate documentation is not submitted within the prescribed time period, a medical exception shall be denied.
4. Upon receipt of appropriate documentation, the MRO shall have five (5) business days to review submitted documentation/materials and make any final determination whether a medical exception shall be granted or denied.
5. Final determination will be forwarded to the third party administrator and then to the IHSA.
6. If a medical exception is not granted by the MRO for a Student-athlete with a positive finding on Specimen A, Specimen B will automatically be tested. The third party test administrator will notify the member school representative by telephone as soon as possible of the initial positive finding on Specimen A. The telephone contact will be followed by a letter (marked "confidential"), which will be mailed to the member school representative. The third party test administrator will, during the telephone conversation, advise the member school representative that Specimen B will be tested.

#### **Specimen B**

- For Student-athletes not granted a medical exception and with a positive finding on Specimen A, there is no penalty imposed until completion of analysis of Specimen B.
- The third party test administrator will contact the Parent by telephone as soon as possible and notify them of the positive finding in reference to Specimen A and that Specimen B will be tested. The telephone contact will be followed by a letter (marked "confidential"), which will be mailed to the Parent.
- The third party test administrator will, during the telephone conversation, advise the Parent that Specimen B will be tested. The third party test administrator also will inform the Parent that the Student-athlete may have representation at the Laboratory for the testing of Specimen B and that the Student-athlete in question is not subject to penalty until completion of analysis of Specimen B.
- Notification by the Parent of the intent to have representation at the Laboratory must be given to the third party test administrator within 48 hours (2 business days) of being advised that Specimen B will be tested. Notification of the desire to have a representation at the Laboratory can be accomplished via telephone, fax, e-mail or in writing to the third party test administrator.
- If the Parent desires representation for the Student-athlete at the Laboratory, they must present themselves, or, upon appropriate permissions for confidentiality being granted, their representative, at the Laboratory, at an appointed date and time, within 2 business days of the notification of intent to have representation. Any expenses associated with travel to the Laboratory for this purpose are the responsibility of the Student-athlete or their Parent. If the Parent of the Student-athlete cannot arrange for such representation, the Laboratory will arrange for a Surrogate to attend the testing of Specimen B.
- The Surrogate will not otherwise be involved with the analysis of the Specimen.



- At the testing for Specimen B, the Student-athlete, the Parent, their representative or the Surrogate will verify by signature as to the Specimen Bar Code on Specimen B, that the Specimen Bar Code seal is intact, and that there is no evidence of tampering. If the Specimen Bar Code seal on Specimen B does not match, is not intact or there is evidence of tampering, Specimen B will not be tested and will be discarded by the Laboratory. The result for that Specimen Bar Code will be reported to the third party test administrator as negative and the Student-athlete will not be subject to penalty. In this scenario, the IHSA may require that the third party test administrator collect another Specimen from the Student-athlete.
- Specimen B findings will be final. The Laboratory will inform the third party test administrator of the results.
- For Student-athletes who have a Specimen B negative finding, no further action will be taken and the Student-athlete will not be subject to penalty. Negative results for Specimen B will be communicated in the same manner that negative results for Specimen A are communicated. For Student-athletes who have a Specimen B positive finding, the third party test administrator will contact the IHSA, the Parent and the member school representative by telephone as soon as possible and notify each of the Specimen B positive finding,
- Upon notification of the Specimen B positive finding, the IHSA Executive Director shall notify the school of the student's and/or school's penalty for the positive test result.
- A positive finding may be appealed by the Student-athlete or by the Parent on the Student-athlete's behalf to the IHSA.
- Specimens with negative results are kept for five (5) business days and then discarded by the Laboratory. Specimens with positive results are kept by the Laboratory for a minimum of one (1) year.

### **Confidentiality**

Results of all tests shall be considered confidential and, unless required by a court order, shall only be disclosed to the student, his or her parents/legal guardian, the principal, assistant principal(s), and athletic director(s) of the school attended by the student.

### **Collection of results**

The IHSA Sports Medicine Advisory Committee shall annually compile and report the results of the testing program to the IHSA Board of Directors. In addition, the committee shall hear an annual report from its selected Medical Review Officer (MRO) and third party test administrator regarding the previous year's testing as a means of consultation prior to its determination of tested sports for the following school term.

### **Program renewal**

The IHSA Board of Directors shall annually determine whether this policy shall be renewed or discontinued.



## Appendix A Non-SCAN® (Paper CCF) Monitored Specimen Collection Protocol

1. Only those persons authorized by the collection crew chief or client representative/site coordinator will be allowed in the collection station.
2. Upon entering the collection station, the athlete will provide photo identification and/or a client representative/site coordinator will identify the athlete and the athlete will officially be signed into the collection station.
3. The crew chief and/or client representative may release a sick or injured athlete from the collection station or may release an athlete to return to competition or meet academic obligations only after appropriate arrangements for having the athlete tested have been made and documented.
4. The athlete will select a Paper CCF from a supply of such at the check-in area. With the collector's and/or client representative/site coordinator's assistance, print the athlete's name, grade, sport/activity, sex, high school name, name of parent/guardian, and parent/guardian phone number in the spaces provided. Instruct the athlete to wait in a specific area of the collection room for the monitor-collector.
5. A collector, serving as monitor (must be same gender as athlete), will determine the athlete's readiness to provide a specimen and then instruct the athlete to select a beaker from a supply of such. [Note: the beakers MUST be adequately secured in the collector room and closely observed by the collectors at ALL TIMES. The beakers must NOT be placed near the exit.]
6. The monitor will take the CCF from the athlete, verify the athlete's name with that printed on the CCF, and then escort the athlete to the restroom having the athlete keep the beaker in the monitor's view at all times.
7. Athletes may not carry any item other than his/her beaker into the restroom when providing a specimen. The athlete must remove all outer clothing (e.g., jackets, sweaters). Any problem or concern should be brought to the attention of the collection crew chief or client representation for documentation.
8. A collector will serve as a monitor to assure the integrity of the specimen until the designated volume of urine has been collected. The monitor must secure the room being used for the monitored collection so that no one except the athlete and the monitor can enter it until after the collection has been completed. Dying agents will be added to toilet bowls to prevent sample substitution and any unsupervised access to water will be eliminated during the collection process.
9. Monitors must be members of the official drug-testing crew and of the same gender as the athlete providing the specimen. The athlete is required to empty contents of all pockets (pockets should be turned inside out) and place in container to be left in a location where the athlete and the monitor can observe. The monitor must request the athlete raise his/her shirt high enough to observe the midsection area completely ruling out any attempt to manipulate or substitute a sample.
10. The monitor will instruct the athlete to rinse and dry hands (no soap).

11. The monitor will then remove one (1 of 4) of the short Specimen ID number barcodes from the upper right corner of the CCF and instruct the athlete to place the barcode label on the lid of the beaker. This should be done PRIOR to urinating into the beaker.
12. The monitor will allow the athlete to enter the stall and close the door for privacy during the voiding process. If the monitor hears sounds or makes other observations indicating and attempt to tamper with a specimen, there must be an additional collection.
13. The athlete must provide specimen volume of at least 90 mL.
14. Once a specimen is provided, the athlete is responsible for keeping the collection beaker closed and controlled. Athletes are then encouraged to wash hands with soap and water following urination. The monitor will inspect the volume and temperature of urine in the beaker and if not an adequate volume, place a line with a marker at the urine volume level on the outside of the beaker. The athlete should be instructed to secure the beaker. The monitor must NOT touch the beaker.
15. The athlete is allowed to place belongings back into his/her pockets.
16. The monitor must then escort the athlete back to the collection room keeping the athlete and his/her beaker in full view the entire time. The monitor will provide the athlete with his/her CCF and must instruct the athlete where to sit, how to maintain integrity of the specimen and CCF. The monitor should also advise on fluids and/or food.
17. Fluids and food given to athletes who have difficulty voiding must be from sealed containers (approved by the collector) that are opened and consumed in the station. These items must be free of any other banned substances.
18. If the specimen is incomplete, the athlete must remain in the collection station until the sample is completed. During this period, the athlete is responsible for keeping the collection beaker closed and controlled.
19. If the athlete has to leave, but will return to testing, any incomplete specimen will be discarded. The crew chief will document the reason for the athlete's departure as well as the time at which the athlete will return. If the athlete has to leave, and will not return, any incomplete specimen will be packaged and shipped to the laboratory. The crew chief will document the reason for departure and partial specimen.
20. If the specimen is incomplete and the athlete must leave the collection station for a reason approved by the collector, specimen must be discarded, but the collector can retain the partially completed CCF for the athlete's return and use to continue the specimen collection process.
21. Upon return to the collection station, the athlete will begin the collection procedure again.
22. Once an adequate volume specimen is provided, the monitor may sign his/her name in the space provided on the CCF and also mark the appropriate temperature box. The monitor will escort the athlete to the specimen processing table.
23. A collector serving as specimen processor will verify (with the athlete verbally) the beaker/specimen and CCF Specimen ID numbers match and assure the athlete's name on the CCF is correct. The specimen collector will instruct the athlete to closely observe the specimen processing steps.



24. The specimen processor will then pour less than 5 mL of urine from the beaker into a small cup and measure the specific gravity using a refractometer.
25. If the urine has a specific gravity below 1.005 (1.010 if measured with a reagent strip), no value will be recorded on the CCF and the specimen will be discarded by the athlete with the monitor observing. The athlete must remain in the collection station until another specimen is provided. The athlete will provide another specimen.
26. If the urine is concentrated (1.005 SG or higher), the specimen processor will record the specific gravity value on the CCF and then measure the urine's pH (with pH reagents or a pH meter). If in range (4.5-7.5 inclusive), the specimen processor will record the pH value on the CCF in the appropriate area. If the athlete has a pH greater than 7.5 or less than 4.5, the specimen will be discarded by the athlete with the monitor observing. The athlete must remain in the collection station until another specimen is provided. The athlete will provide another specimen. (No more than three specimens with a pH of greater than 7.5 will be collected. The third specimen will be packaged for shipment to the laboratory.
27. Once the specimen processor has determined the specimen has a specific gravity above 1.005 and a pH between 4.5 and 7.5 inclusive, the sample will be processed and sent to the laboratory. The laboratory ultimately makes final determination of sample adequacy.
28. If the laboratory determines that an athlete's sample is inadequate for analysis, at the client's discretion, another sample may be collected.
29. If an athlete is suspected of manipulating specimens (e.g., via dilution), the client will have the authority to perform additional tests on the athlete.
30. Once a specimen has been provided that meets the on-site specific gravity and pH parameters, the athlete will select a sample collection kit from a supply of such.
31. The specimen processor will open the kit, demonstrate to the athlete the vials are securely sealed, open the plastic, and open the A vial lid. The processor will pour approximately 60 mL of urine into the "A vial" and close the lid. The processor will pour approximately 25 mL into the "B vial" and close the lid.
32. The specimen processor will securely close the lids on each vial and then seal each vial using the vial seals attached to the CCF; assuring seals are tightly adhered to the vials with no tears or loose areas.
33. The specimen processor must then collect all necessary signatures (and dates/times where indicated) on the CCF (donor, witness, and collector/specimen processor). Any deviation from the procedures must be described and recorded. If deviations are alleged, the athlete will be required to provide another specimen.
34. The specimen processor will place the laboratory copy of the CCF in the back pouch of the plastic bag and the vials the front pouch of the same bag. The bag should then be sealed by removing the cover from the glue on the flap and accurately placing the glued flap area directly over the bag opening ("railroad tracks"). The sealed bag with vials will then be placed in the sample box. The box will then be sealed with the box seal attached to the bottom right of the CCF.
35. The specimen processor will have the athlete confirm the box seal Specimen ID number is the same as the bar-coded number printed on the CCF in the upper right corner.

36. The athlete is then released by the collector.
37. All sealed samples will be secured in a shipping case. The collector will prepare the case for forwarding.
38. After the collection has been completed, the samples will be forwarded to the laboratory and copies of any forms forwarded to the designated persons.
39. The samples become the property of the client.
40. If the athlete does not comply with the collection process, the collector will notify the client representative/site coordinator and third party administrator responsible for management of the drug-testing program.





## 2019-20 IHSA Banned Substances

The IHSA bans the following classes of substances:

- a. Stimulants
- b. Anabolic Agents
- c. Diuretics and Other Masking Agents
- d. Peptide Hormones and Analogues

**Note: Any substance chemically related to these classes is also banned.**

The member school and the student-athlete shall be held accountable for all substances within the banned substance class regardless of whether they have been specifically identified.

**Substances and Procedures Subject to Restrictions:**

- a. Manipulation of Urine Samples.
- b. Caffeine if concentrations in urine exceed 15 micrograms/ml.

**IHSA Nutritional/Dietary Supplements Warning:**

- **Before consuming any nutritional/dietary supplement product, review the product and its label with your athletics department staff!**
- Dietary supplements, including vitamins and minerals, are not well regulated and may cause a positive substance test result.
- In the IHSA's program and other programs that test for the same substances as the IHSA's program, student-athletes have tested positive and lost their eligibility using dietary supplements.
- Many dietary supplements are contaminated with banned substances not listed on the label.
- **Any product containing a dietary supplement ingredient is taken at your own risk.**

**It is your responsibility to check with your athletics staff  
before using any substance.**



## Some Examples of IHSA Banned Substances in each class

**NOTE: There is no complete list of banned substance examples!!**

Check with your athletics department staff or the Resource Exchange Center (REC) to review the label of any product, medication or supplement before you consume it!

### **Stimulants:**

amphetamine (Adderall); caffeine (guarana); cocaine; ephedrine; fenfluramine (Fen); methamphetamine; methylphenidate (Ritalin); phentermine (Phen); synephrine (bitter orange); methylhexanamine, "bath salts" (mephedrone); etc.

*exceptions: phenylephrine and pseudoephedrine are not banned.*

### **Anabolic Agents** (sometimes listed as a chemical formula, such as 3,6,17-androstenetrione):

boldenone; clenbuterol; DHEA (7-Keto); nandrolone; stanozolol; testosterone; methasterone; androstenedione; norandrostenedione; methandienone; etiocholanolone; trenbolone; epi-trenbolone; ostarine; stenbolone; etc.

### **Diuretics (water pills) and Other Masking Agents:**

bumetanide; chlorothiazide; furosemide; hydrochlorothiazide; probenecid; spironolactone (canrenone); triameterene; trichlormethiazide; etc.

### **Peptide Hormones and Analogues:**

human growth hormone (hGH); human chorionic gonadotropin (hCG); erythropoietin (EPO); etc.

**Any substance that is chemically related to the class of banned substances, even if not listed as an example, is also banned!**

**It is your responsibility to check with your athletics staff  
before using any substance.**



**WINDSOR CUSD #1  
RANDOM DRUG TESTING POLICY  
APPLICABLE TO STUDENTS PARTICIPATING IN COMPETITIVE  
EXTRACURRICULAR ACTIVITIES AND DRIVING TO SCHOOL**

Substance abuse is a common occurrence in our society and community, which can endanger the welfare of students who participate in competitive extracurricular activities and of students who drive to school requiring adherence to various health and safety standards. There is great concern regarding the increase in substance abuse taking place within the community. Students who avail themselves of the privilege of participating in competitive extracurricular activities and those who exercise the privilege of driving to school within the Windsor Community Unit School District # 1 act as representatives of the District, and are viewed as leaders within the community.

To protect the health and safety of students engaging in competitive extracurricular activities, students who drive to school, and students with whom students engaged in competitive extracurricular activities and students driving to school, as well as to insure that student leaders and District representative maintain high standards of conduct, it is the policy of the District to require that students submit to random drug testing as a condition of participation in competitive extracurricular activities and as a condition of being able to drive to school. The Administration shall establish rules and regulations implementing this policy.

Nothing in this policy precludes administering a drug test to a student participating in competitive extracurricular activities or a student who drives to school, based on reasonable suspicion that the student is violating the Board of Education's policy prohibiting drug use. Any drug test on the basis of reasonable suspicion conducted shall be performed in accordance with the test procedures specified in the rules implementing this policy. Positive tests based on reasonable suspicion may result in consequences under the Student Discipline Code as well as under the Extracurricular Code of Conduct.

**Legal References:**

- Bd. of Educ. of Indep. School Dist. No. 92 v. Earls, 122 S. Ct. 2559 (2002).
- Joy v. Penn-Harris-Madison School Corp., 212 F. 3d 1052 (7th Cir. 2000)
- Todd v. Rush County Schools, 133 F.3d 984 (7th Cir. 1998), cert. denied 119 S.Ct. 68 (1998).
- Vernonia School Dist. 47 J v. Acton, 515 U.S. 646 (1995).
- Schaill by Kross v. Tippecanoe County School Corp., 864 F.2d 1309 (7th Cir. 1988).

**ADMINISTRATIVE RULES**  
**RANDOM DRUG TESTING OF STUDENTS PARTICIPATING IN COMPETITIVE**  
**EXTRACURRICULAR ACTIVITIES AND STUDENTS WHO DRIVE TO SCHOOL**

**I. Purposes**

The purposes of the Random Drug Testing Policy of Windsor Community Unit School District # 1 are 1) to protect the health and safety of students participating in competitive extracurricular activities; 2) to protect the health and safety of all students from students who drive vehicles to school and park on school property; and 3) to maintain high standards of conduct for students who participate in competitive extracurricular activities as role models and representatives of the District.

**II. Definitions**

A. Competitive Extracurricular Activities include the following:

HS Baseball, HS Boy's Basketball, HS Girl's Basketball, HS Dance, HS Golf, HS Softball, HS Track, HS Volleyball, HS Cheerleading, HS FFA, HS Scholastic Bowl, HS Academic Competitions, HS Special Olympics, JH Baseball, JH Boy's Basketball, JH Girl's Basketball, JH Softball, JH Volleyball, JH Cheerleading, JH Track, JH Scholastic Bowl, JH Academic Competitions, JH Special Olympics

Competitive Extracurricular Activities do not include graded courses and classes or activities for which academic credit is receive.

B. Prohibited Substances are substances that are prohibited under the District's Parent/Student Handbook listed under "Prohibited Student Conduct" (Student Discipline 6.30).

C. Students, for the purposes of this policy, mean students who participate in competitive extracurricular activities and student who drive to school.

D. Reasonable Suspicion is a reasonable belief that a student is violating a school rule regarding the possession or use of drugs or alcohol, based on specific, contemporaneous, articulable observations concerning the appearance, behavior, speech, or body odors of the student. The observations may relate to the chronic and withdrawal effects of controlled substances.



### **III. Consent**

All students, and parent(s) or legal guardian(s) of minor students, must sign the District-approved consent form as a condition to participating in any competitive extracurricular activities and as a condition of being permitted to drive to school. By signing and returning the consent form to the District, the student and parent(s) or guardian(s) agree that the student will comply with the random drug testing policy and these rules. If a student, and parent(s) or legal guardian(s) of minor students, refuse to sign the consent form the student will be suspended from participating in all competitive extracurricular activities and from driving to school for one calendar year.

### **IV. Testing Protocols**

- A. The District shall select a qualified testing facility and comply with the testing protocols of the selected facility.
- B. The selected laboratory will provide training and direction to those who supervise the testing program, set up the collection environment and supervise chain of custody of the specimens.
- C. After it is collected and turned over to the testing laboratory, each specimen will be tested for the presence of prohibited substances.

### **V. Testing Procedures**

- A. Students participating in competitive extracurricular activities and students who drive to school will be subject to random testing for drug use throughout the school term. Students will not be given advance notice of the drug test.
- B. Each student will be assigned a number. The principal or the principal's designee will select up to 20% of the students from time to time for drug testing.
- C. Each student selected will be required to provide a urine sample according to the quality control standards and policy of the laboratory conducting the urinalysis. The designated monitor will escort the student to the collection site. The student selected will not be allowed to go to his/her locker prior to testing.
- D. Before submitting a specimen, the student will fill out, sign, and date any form which may be required by the testing laboratory. The form shall state that if a student chooses, he/she may notify the laboratory administrator of any medications legally prescribed for the student in the preceding thirty (30) days, or

of other circumstances which may affect the results of the test. The parent(s)/guardian(s) shall be able to confirm the medication list submitted by their child during the twenty-four (24) hours following any drug test. The medication list shall be submitted to the laboratory in a sealed and confidential envelope and shall not be viewed by District employees.

- E. A sanitized kit containing a specimen bottle will be given to each student. The bottle will remain in the student's possession until a seal is placed on the bottle.
- F. The monitor will escort each student to a private restroom. Each student will be instructed to empty their pockets and to wash his/her hands. The student will enter the private restroom by himself/herself to provide the specimen. The toilet will contain a colored dye so the water cannot be used to dilute the sample. The monitor will wait outside of the private restroom with the door closed. When finished, the toilet is not to be flushed until the specimen is given to the monitor. The monitor will verify the normal warmth and appearance of the specimen.
- G. Selected students will remain at the collection site until each student has produced an adequate specimen. If unable to produce a specimen, the student will be given up to 24 ounces of fluid. If still unable to produce a specimen within two hours, the student will be taken to the principal's office and told that he/she is no longer eligible to participate in competitive extracurricular activities and no longer permitted to drive and park at school. In addition, the parent/guardian will be telephoned and informed that the student is unable to produce a sample for the testing procedure and that he/she may be tested at a later date to be reinstated for eligibility.
- H. After the student has produced a specimen, lab personnel will seal and transport the specimen to the laboratory. The student will sign a form stating that the specimen has been sealed. The seal may be broken only by the laboratory personnel testing the specimen.
- I. A specimen will be deemed invalid if its seal is tampered with or broken after leaving the student's possession and before arriving at the lab. The student will be requested to provide a second specimen as soon as possible. The student will remain eligible for competitive extracurricular activities and will be permitted to drive to and park at school pending completion of testing.
- J. For retesting purposes pursuant to section VII.B of this Policy, the unused portion of a specimen that tests positive shall be preserved by the laboratory for a period not exceeding six months.



## **VI. Confidentiality**

- A. In order to maintain confidentiality, urine specimens will not be identified by the name of the student who provided the specimen. The container will be identified through a random identification number. The results of the urinalysis will be mailed or faxed back to the principal or principal's designee with no student name attached; only the random identification number will appear on the results sheet.
- B. Positive test results will be disclosed to the principal or principal designee. Other school personnel will be informed on a "need to know" basis. The results of negative tests will be kept confidential to protect the identity of all students being tested.
- C. School personnel with knowledge of drug test results shall not disclose the test results except as may be required to enforce this policy.

## **VII. Notification of Test Results**

- A. The principal or principal's designee will provide notice of positive test results to the affected student and to his/her parent(s) or guardian(s) if the student is a minor. Upon notification of the test results, the principal or principal's designee will review with the student and his/her parent(s)/guardian(s) the consequences of a positive drug test as identified in Section VIII of this Policy and inform the student and his/her parent(s)/guardian(s) that such consequences will be implemented immediately. Also at this time, the principal or principal's designee will schedule a conference to be held within the next two school days to discuss the test results with the student and his/her parent(s)/guardian(s) if the student is a minor.
- B. The student will remain subject to the consequences identified in this Policy pending any retest of the student's urine specimen or challenge by the student or the student's parent(s)/guardian(s).
- C. If at any time during the testing the student refuses to submit to the urinalysis and/or follow the procedures and abide by the consequences provided for in this policy, the student will be suspended from participating in all competitive extracurricular activities and from driving to school for one calendar year and until after a test is conducted and the student tests negative.



## **VIII. Consequences**

### **A. 1<sup>st</sup> Offense:**

1. Miss 1/3 of the contests and complete counseling (5 hours) and community service (10 hours).
  - a. If you do not complete the requirements you cannot participate in any other activity.
  - b. Individuals cannot go out for a sport that they have never played before, unless you are a freshman, to complete requirements.
  - c. Individuals must participate in all practice activities, attend all games and pay all fees while serving suspension for athletics.
2. The student will be suspended from driving to school and parking at school for thirty (30) calendar days.
3. The student will be required to participate and complete, at the student's expense, in a school-selected drug assistance program.

### **B. 2<sup>nd</sup> Offence:**

1. Suspended from extra-curriculars for one year with counseling (10 hours) and community service (20 hours).
  - a. Suspension of 1 calendar year is from the date of enforcement of the penalty.
2. The student will be suspended from driving to school and parking at school for sixty (60) calendar days.
3. The student will be required to participate and complete, at the student's expense, in a school-selected drug assistance program.

### **C. 3<sup>rd</sup> Offense and Subsequent Offences:**

1. Student is suspended from extra-curriculars for the remainder of career.
2. The student will be suspended from driving to school and parking at school for one calendar year.
3. The student will be required to participate and complete, at the student's expense, in a school-selected drug assistance program.

## **IX. Financial Responsibility**

- A. The District will pay for all initial random drug tests, all initial reasonable suspicion drug tests, and all initial follow up drug tests necessitated by an invalid specimen.
- B. Counseling and subsequent treatment by non-school agencies is the financial responsibility of the student and/or parent(s)/guardian(s).

## **X. Compliance with Other Rules**

- A. Rules issued by athletic associations, school sponsored organizations, or other entities which regulate the Windsor CUSD #1's competitive extracurricular activities shall be enforced in conjunction with this policy. Any student who violates a rule or requirement as a member of a team or an activity will be subject to the consequences as defined in the applicable rules.







## Concussion Information Sheet

A concussion is a brain injury and all brain injuries are serious. They are caused by a bump, blow, or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, **all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly.** In other words, even a “ding” or a bump on the head can be serious. You can’t see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. If your child reports any symptoms of concussion, or if you notice the symptoms or signs of concussion yourself, seek medical attention right away.

### 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 vomiting</li><li>• Neck pain</li><li>• Balance problems or dizziness</li><li>• Blurred, double, or fuzzy vision</li><li>• Sensitivity to 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>• Amnesia</li><li>• “Don’t feel right”</li><li>• Fatigue or low energy</li><li>• Sadness</li><li>• Nervousness or anxiety</li><li>• Irritability</li><li>• More emotional</li><li>• Confusion</li><li>• Concentration or memory problems (forgetting game plays)</li><li>• Repeating the same question/comment</li></ul> |
|--|--|

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

- Appears dazed
- Vacant facial expression
- Confused about assignment
- Forgets plays
- Is unsure of game, score, or opponent
- Moves clumsily or displays incoordination
- Answers questions slowly
- Slurred speech
- Shows behavior or personality changes
- Can’t recall events prior to hit
- Can’t recall events after hit
- Seizures or convulsions
- Any change in typical behavior or personality
- Loses consciousness



## IHSA Sports Medicine Acknowledgement & Consent Form

### Concussion Information Sheet (Cont.)

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

Athletes with the signs and symptoms of concussion should be removed from play immediately. Continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after that concussion occurs, particularly if the athlete suffers another concussion before completely recovering from the first one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences. It is well known that adolescent or teenage athletes will often fail to report symptoms of injuries. Concussions are no different. As a result, education of administrators, coaches, parents and students is the key to student-athlete's safety.

#### **If you think your child has suffered a concussion**

Any athlete even suspected of suffering a concussion should be removed from the game or practice immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without medical clearance. Close observation of the athlete should continue for several hours. The Youth Sports Concussion Safety Act requires athletes to complete the Return to Play (RTP) protocols for their school prior to returning to play or practice following a concussion or after being removed from an interscholastic contest due to a possible head injury or concussion and not cleared to return to that same contest.

You should also inform your child's coach if you think that your child may have a concussion. Remember it's better to miss one game than miss the whole season. And when in doubt, the athlete sits out.

For current and up-to-date information on concussions you can go to:  
<http://www.cdc.gov/ConcussionInYouthSports/>



## IHSA Sports Medicine Acknowledgement & Consent Form

### **IHSA Performance-Enhancing Substance Policy**

In 2008, the IHSA Board of Directors established the association's Performance-Enhancing Substance (PES) Policy. A full copy of the policy and other related resources can be accessed on the IHSA Sports Medicine website. Additionally, links to the PES Policy and the association's Banned Drug classes are listed below. School administrators are able to access the necessary resources used for policy implementation in the IHSA Schools Center.

As a prerequisite to participation in IHSA athletic activities, we have reviewed the policy agree that I/our student will not use performance-enhancing substances as defined by the policy. We understand that failure to follow the policy could result in penalties being assigned to me/our student either by the my/our student's school or the IHSA.

IHSA PES Policy

<http://www.ihsa.org/documents/sportsMedicine/2017-18/2017-18 PES policy.pdf>

IHSA Banned Drug Classes

<http://www.ihsa.org/documents/sportsMedicine/current/IHSA Banned Drugs.pdf>





## IHSA Sports Medicine Acknowledgement & Consent Form

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# Windsor Community Unit School

## District #1

Windsor, IL 61957

*Windsor....Where Pride and Tradition Meet Success*

*Elementary School*  
808 Wisconsin  
Windsor, IL 61957  
(217) 459-2447  
Fax (217) 459-2408

*Superintendent of Schools*  
1424 Minnesota  
Windsor, IL 61957  
(217) 459-2636  
Fax (217) 459-2794

*Jr. Sr. High School*  
1424 Minnesota  
Windsor, IL 61957  
(217) 459-2636  
Fax (217) 459-2794

### Concussion Policy

#### Purpose:

1. Manage concussions and head injuries suffered by students and ensure legal compliance with the; Youth Sports Concussion Safety Act (Illinois Public Act 099-0245); the protocols, policies, and by-laws of the Illinois High School Association (IHSA); and the Illinois Elementary School Association (IESA), including the requirements in the Youth Sports Concussion Safety Act and the Protocol for National Federation of State High School Associations (NFHS) Concussion Playing Rules and its return to play policy.
2. Provide education and training about concussions for coaches, school personnel, parents, and student-athletes.
3. Appoint a Concussion Oversight Team (COT). The COT shall establish a Return-to-Learn (RTL) and a Return-to-Play (RTP) protocol, based on peer-reviewed scientific evidence consistent with Centers for Disease Control (CDC) prevention guidelines. The COT will include at minimum one person who is responsible for implementing and complying with the RTL and RTP protocols. The person with supervisory responsibilities may not be a coach of interscholastic athletics team.
4. Develop a school-specific emergency action plan for interscholastic activities to address the serious injuries and acute medical conditions in which the condition of the student may deteriorate rapidly. The plan shall include delineation of roles, methods of communication, available emergency equipment, and access to and plan for emergency transport. The emergency actions plan must be:
  1. In writing
  2. Reviewed by the COT
  3. Approved by the district superintendent
  4. Distributed to appropriate personnel
  5. Posted conspicuously at all venues utilized by school
  6. Reviewed annually by athletic trainers, first responders, coaches, school nurse, athletic director, and volunteers for interscholastic activities

**Possible Head Injury Protocol:**

- A concussion is caused by a bump, blow, or jolt to the head and can also occur from a blow to the body that causes the head and brain to move rapidly back and forth. Even what seems to be a mild bump to the head can be serious. These athletes should be given an on-field (sideline) cognitive test. This test can be completed by coaching, administrative, or medical staff. A copy of the on-field assessment can be viewed at <https://www.impacttest.com/pdf/ConcussionCardsTM.pdf>.
- A student athlete who exhibits signs, symptoms, or behaviors consistent with a concussion (such as loss of consciousness, headache, dizziness, confusion, or balance problems, etc.) or fails an on field cognitive test in a practice or game shall be removed from participation or competition at that time.
- A student should be seen in an emergency department right away if s/he has: One pupil (the black part of the eye) larger than the other, Drowsiness or cannot be awakened, a headache that gets worse and does not go away, weakness, numbness, or decreased coordination, repeated vomiting or nausea, slurred speech, convulsions or seizures, difficulty recognizing people or places, increasing confusion, restlessness, or agitation, unusual behavior, or loss of consciousness.
- A student must also be removed from an interscholastic athletics practice or competition immediately if one of the following persons believes the student might have sustained a concussion during the practice or competition:
  - a coach
  - a physician
  - a game official
  - an athletic trainer
  - the student's parent/guardian
  - the student
  - any other person deemed appropriate under the school's return-to-play protocol
- An athlete can only be cleared to return to practice or competition the same day as removed by a licensed physician or a certified athletic trainer working in conjunction with a licensed physician.
- In the cases when an athlete is not cleared to play the same day, coaching staff must notify the COT and the parent/guardian of a student who exhibits symptoms consistent with that of a concussion as soon as possible.
- The parent/guardian of that student must be given the CDC's Concussion Guide for Parents. The student should never be left alone and should not be allowed to drive until he/she is seen by a physician.
- The student must then be evaluated by a physician (chosen by the student or the student's parent or guardian) or an athletic trainer working under the supervision of a physician before returning to school and documentation confirming or negating suspected concussion must be obtained.
- If documentation obtained does not indicate a concussion the student may return to learn/play without restriction (if indicated by physician/trainer), but should still be monitored for delayed concussion symptoms.
- If the student is diagnosed with a concussion the Return-to-Learn Protocol will be initiated once a written statement indicating that in the physician's professional judgement, it is safe to return has been received.
- Upon return to school the following steps will be taken:
  1. Documentation from initial evaluation by the physician or trainer confirming a concussion and a post-concussion consent form signed by parent(s)/guardian(s) and student must be obtained.
  2. A neurocognitive assessment will be done, when student has been symptom free 24 hours, using the Immediate Post-Concussion Assessment and Cognitive Testing (ImPACT) Software. Results will be sent to the athletic trainer to be read.



3. The school nurse or responsible COT member will notify the student-athlete's teachers of the injury and recommend appropriate academic accommodations.
4. The school nurse or other COT member will monitor the student-athlete on a regular basis throughout the school day and make recommendations to plan of care as needed.
  - A second post-injury test will be completed when the RTL protocol is completed.
  - Return-to-Play Protocol will be initiated once a written statement indicating that in the physician's professional judgement it is safe has been received, the student has successfully completed the requirements of the RTL protocol, and post-injury test within normal range of baseline.
  - Another post-injury test will be completed when student has no recurring symptoms following physical exertion and has completed the RTP protocol. This final test may serve as their new baseline.
  - Further post-injury testing will be done as needed as recommended by the athletic trainer.

### **Return to Learn (RTL) and Return to Play (RTP) Protocols**

#### Purpose:

Provide a safe return to activity and the classroom for all student-athletes following a concussion.

#### Return-to-Learn Protocol

#### Background:

A concussion can have direct effects on learning and evidence suggests that using a concussed brain to learn may worsen concussion symptoms and may prolong recovery. Return-to-Learn following a concussion should be managed in a stepwise program that fits the needs of the individual. The protocol emphasizes allowing the student to participate in school in a modified fashion so as not to worsen symptoms.

#### Protocol:

1. Stay at home with complete cognitive and physical rest until medical clearance is given.
2. Light cognitive activity may be started once child has had no symptoms at rest for at least 24 hours.
  - ❖ Progress to next level when able to tolerate up to 30 minutes of mental exertion without increase of symptoms.
3. May attend school with accommodations (see Concussion Fact Sheet for School Professionals, <http://www.cdc.gov/headsup/schools/teachers.html>) such as shortened day/schedule, extra time and (or) modification of assignments, no significant classroom standardized testing, and quiet place for mental rest as needed or other accommodations as recommended by trainer/physician/administration.
  - ❖ Progress to next level when able to tolerate up to 60 minutes of mental exertion without increase in symptoms.
4. Attend school full time with minimal accommodations.
  - ❖ Progress to Return-to-Play Protocol when able to tolerate all class periods in succession without increase in symptoms AND receives medical clearance for full return to academics.

**\*\*Progression is individual. All concussions are different. Students may start at any of these steps, depending on symptoms, and may remain at a step longer if needed. When symptoms continue beyond 3-4 weeks, prolonged in-school supports are required. Request a 504 meeting to plan and coordinate student supports.**

## Return-to-Play Protocol

### Background

It is important to emphasize to athletes that minimizing the amount of activity and physical activity that they do early on is very important because not doing so will delay resolution of concussion symptoms and recovery.

### Protocol:

Begin stage 1 when: Student is cleared by health care provider, has had no symptoms for 24 hours, and when ImPACT test scores back to baseline.

- Stage 1: Light aerobic activity (20-30 minutes)
  - ❖ Sample activities: walking, stationary bike

Begin stage 2 when: 24 hours have passed since student began stage 1 AND student has not experienced any return of symptoms in the previous 24 hours.

- Stage 2: Sport-specific training
  - ❖ Sample activities: running, resistance training

Begin stage 3 when: 24 hours have passed since student began stage 2 AND student has not experienced any return of symptoms in the previous 24 hours.

- Stage 3: Non-contact drills
  - ❖ Sample activities: full participation in team's regular strength and conditioning program

Begin stage 4 when: 24 hours have passed since student began stage 3 AND student has not experienced any return of symptoms in the previous 24 hours.

- Stage 4: Full-contact practice and full participation in Physical Education (P.E.)
  - ❖ Sample activities: unrestricted participation in practices and P.E.

Begin stage 5 when: 24 hours have passed since student began stage 4 AND student has not experienced any return of symptoms in the previous 24 hours.

- Stage 5: Game play

**\*\*It is specifically recommended that each step should be separated by 24 hours. Furthermore, any recurrence of concussive symptoms should lead to the athlete dropping back to the previous level. In other words, if an athlete is asymptomatic at rest and develops a headache following light aerobic exercise, the athlete should return to complete rest.**

### **Required Training and Consents:**

**Student/Parent Requirements:**

Prior to participation in an interscholastic sports activity the following requirements must be completed:

- A baseline neurocognitive test using ImPACT software will be done on all athletes every two years from 6th grade to senior year of high school.
- The student and the student's parent(s)/guardian(s) must sign the Concussion Information Sheet yearly, acknowledging that they received and read information explaining concussions, including symptoms; treatment; what can happen if child keeps playing with a concussion or returns to soon; and what to do if you think your someone has suffered a concussion.
- The student-athletes and their parent(s)/guardian(s) must read the Windsor CUSD #1 Concussion policy including the RTL and RTP protocol and provide a signature of agreement yearly.
- All student athletes must view the ISHA video about concussions once during the school year.
  - <http://www.ihsa.org/multimedia/articulate/2015-16/concussion/presentation.html>
- Student-Athlete must read the NCAA Concussion Fact Sheet for Student-Athletes yearly

**Staff/Coaches Requirements:**

The following persons must take and show proof of a training course from an authorized training provider every 2 years:

- A coach or assistant coach (whether volunteer or a district employee) of an interscholastic athletic activity. Such coach or assistant coach must take the training course on concussions approved by IHSA.
- Members of the concussion oversight team who aren't coaches.
- A nurse must take a course concerning the matter of concussions that has been approved for continuing education credit by the Department of Financial and Professional Regulation.
- An athletic trainer must take a concussion-related continuing education course from an athletic trainer continuing education sponsor approved by the Department of Financial and Professional Regulation.

**Emergency Action Plan (EAP), Management, and Referral Guidelines:**

The following situations indicate a medical emergency and require activation of the Emergency Medical System (911):

- Any student-athlete with witnessed loss of consciousness (LOC) of any duration should be spine boarded and transported immediately to nearest emergency department via emergency vehicle.



- Any student-athlete who has symptoms of a concussion, and who is not stable (worsening of signs and symptoms), is to be transported immediately to the nearest emergency department via emergency vehicle.
- Any student-athlete who exhibits any of the following symptoms should be transported immediately to the nearest emergency department, via emergency vehicle;
  - Deterioration of neurological function
  - Decreasing level of consciousness
  - Decrease or irregularity in respirations
  - Any signs or symptoms of associated injuries, spine or skull fracture, or bleeding
  - Mental status changes: lethargy, difficulty maintaining arousal, confusion or agitation
  - Seizure activity
- A student-athlete who is symptomatic but stable, may be transported by his or her parents/guardians. They should not be allowed to drive and they should not be left unattended. The parents/guardians should be advised to contact the student-athlete's primary care provider, or seek care at the nearest emergency department, on the day of injury.
- In the event of a medical emergency:
  - Call 911
  - Administer First Aid per the American Red Cross Guidelines, including the use of an AED if needed
    - i. Jr. Sr. High School AED locations:
      1. Outside of new (East) gymnasium
      2. Outdoor concession stand
    - ii. Elementary School AED locations:
      1. Outside main office
      2. Outdoor concession stand
  - Contact Parents and School Principal

\*See Venue-Specific Action Plan posted at all venues utilized by the school, for more information regarding medical emergencies.



## IHSA Sports Medicine Acknowledgement & Consent Form

### Acknowledgement and Consent

#### Student/Parent Consent and Acknowledgements

By signing this form, we acknowledge we have been provided information regarding concussions and the IHSA Performance-Enhancing Substance Policy.

#### STUDENT

Student Name (Print): \_\_\_\_\_ Grade (9-12) \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### PARENT or LEGAL GUARDIAN

Name (Print): \_\_\_\_\_

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

Relationship to student: \_\_\_\_\_

#### Consent to Self Administer Asthma Medication

Illinois Public Act 098-0795 provides new directions for schools concerning the self-carry and self-administration of asthma medication by students. In order for students to carry and self-administer asthma medication, parents or guardians must provide schools with the following:

- Written authorization from a student's parents or guardians to allow the student to self-carry and self-administer the medication.
- The prescription label, which must contain the name of the asthma medication, the prescribed dosage, and the time at which or circumstances under which the asthma medication is to be administered.

A full copy of the law can be found at <http://www.ilga.gov/legislation/publicacts/98/PDF/098-0795.pdf>.





Windsor CUSD #1  
Drug Testing Consent Form

I, \_\_\_\_\_ (student's name) have been provided a copy of the Windsor CUSD #1's Random Drug Testing Policy and its implementing rules. I understand that as a condition of participating in \_\_\_\_\_ (name of competitive extracurricular activity) I will be subject to random urinalysis tests for detection of prohibited substances and specimens, testing and analysis of the urine specimens, and all other rules of the Board of Education which involve random drug testing of students involved in competitive extracurricular activities. I understand that I may be asked to provide to the testing laboratory a confidential list of my prescribed medications in order to ensure accuracy in interpretation of the results. I agree to fully cooperate with the testing procedures.

I consent to the limited disclosure of the sampling, testing, and results of the testing as provided for in the policy and the rules, and to that extent I waive any right to non-disclosure provided for by state or federal statute.

\_\_\_\_\_  
Student Signature

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date



*Windsor Community Unit School*  
*District #1*  
*Windsor, IL 61957*

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*Windsor....Where Pride and Tradition Meet Success*

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*Elementary School*  
*808 Wisconsin*  
*Windsor, IL 61957*  
*(217) 459-2447*  
*Fax (217) 459-2408*

*Superintendent of Schools*  
*1424 Minnesota*  
*Windsor, IL 61957*  
*(217) 459-2636*  
*Fax (217) 459-2794*

*Jr. Sr. High School*  
*1424 Minnesota*  
*Windsor, IL 61957*  
*(217) 459-2636*  
*Fax (217) 459-2794*

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**Windsor CUSD #1**  
**Head Injury/Concussion Agreement Form**

Please sign and return this form to the Jr. Sr. High School or Elementary School Main Office

**PARENT AND STUDENT ATHELETE:**

I have read and understand the Windsor CUSD #1 Concussion Policy and agree to the provisions listed and explained in the policy.

I acknowledge that I have been provided with information regarding concussions in the form of the IHSA's Concussion Information Sheet.

**STUDENT-ATHELETE:**

I have viewed the IHSA concussion video once this school year.

I have read the NCAA Concussion Fact Sheet for Student-Athletes once this school year.

**Student's Name (Print):**

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**Student's Signature:**

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**Parent's Name (Print):**

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**Parent's Signature:**

---

**Date:**

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Elementary School  
808 Wisconsin  
(217) 459-2447  
Fax (217) 459-2408

Superintendent of Schools  
1424 Minnesota  
(217) 459-2922

Jr.-Sr. High School  
1424 Minnesota  
(217) 459-2636  
Fax (217) 459-2794

## Sports Insurance Waiver School Year 2023-2024

Choose #1 or #2 and fill out.

Student Grade \_\_\_\_\_ Student Name \_\_\_\_\_

1. My child, \_\_\_\_\_, a student in the Windsor Community Unit School District No. 1, has adequate health and accident/hospitalization insurance coverage. Therefore, I choose not to participate in the insurance program offered by the WCUSD #1.
2. My child, \_\_\_\_\_, a student in the Windsor Community Unit School District No. 1, chooses to participate in the insurance program offered by the WCUSD #1. I have been given the application and understand it is my responsibility to secure such insurance.

\_\_\_\_\_  
Signature (Parent or Guardian)

\_\_\_\_\_  
Date

