WVSSAC Heat Acclimatization and Heat Illness Policy and Procedures

This policy describes required practices for the WVSSAC schools to follow for the prevention, monitoring, acclimatization, and treatment of exertional heat illnesses for student athletes, faculty, and staff of WVSSAC member schools. Exertional heat illnesses may include full body cramps, syncope/fainting, exhaustion, and stroke. The policy applies to all practice and conditioning activities (in season, out of season, summer) in which heat illness poses a risk, both outdoor and indoor.

Prevention:

Coaches will be notified of any student athlete with pre-existing conditions that place the individual at higher risk of exertional heat illness

Monitoring:

Monitoring will occur at the beginning of each practice or conditioning session, and continue every 30 minutes during the activity, using a Wet Bulb Globe Thermometer (WBGT) device. The monitoring will be recorded either in a hard copy or stored in the device. Modifications will be made as follows:

WBGT Reading	Activity Guidelines/Modifications
Under 82.0	Normal activities. Provide at least three separate rest breaks each hour with a minimum duration of three minutes each during the workout.
82.0-86.9	Use discretion for intense of prolonged exercise; watch at-risk players carefully. Provide at least three separate rest breaks each hour with a minimum duration of 4 minutes each.
87.0-89.9	Maximum practice time is 2 hours. **For football**: players are restricted to helmet, shoulder pads, and shorts during practice, and all protective equipment must be removed during conditioning activities. If the WBGT rises to this level during practice, players may continue to work out wearing football pants without changing to shorts. **For all sports:** Provide at least four separate rest breaks each hour with a minimum duration of 4 minutes each.
90.0-92.0	Maximum practice time is 1 hour. **For football**: no protective equipment may be worn during practice, and there may be no conditioning activities. **For all sports**: There must be 20 minutes of rest breaks distributed throughout the hour of practice.
Over 92.0	No outdoor workouts. Delay practice until a cooler WBGT level is reached.

Acclimatization:

For Football:
Days 1- 2 – Organized Practice, Helmets Only, No Contact
Days 3-4 – Helmet and Shoulder Pads, Soft Equipment Contact Only (bag, shield, sled, tackling wheel, etc.)
Day 5 – Full Pads – Soft Equipment Contact Only (bag, shield, sled, tackling wheel, etc.)
Day 6 – Full Pads, Full Contact

Hydration:
Water breaks are to be provided as outlined in the activity modification chart.

Treatment:

Monitoring of student athlete safety will be continuous during any physical activity. School staff should be educated on the signs and symptoms of exertional heat illness. The signs and symptoms include, but are not limited to:

Headache, confusion or "out of it" look, disorientation, or dizziness, altered consciousness or coma, nausea or vomiting, diarrhea, hot and moist or dry skin. A rectal temperature greater than 104 F at time of incident indicates exertional heat stroke.

If a student athlete is suspected of having exertional heat stroke, EMS should be called immediately, followed by COOL FIRST and then transport.

A cooling zone must be designated at each practice site. Treatment must include minimum:
-Removing excess clothing
-Placing patient in a cold-water immersion tub (35-59 F), or ice floating on top of tub if no thermometer available to check water temperature
-Placing an ice-cold towel over the head/neck and rewetting/replacing every 2 minutes while in the tub

Once diagnosed with exertional heat illness, the student athlete must complete a rest period and/or obtain medical clearance from a physician before returning to play, depending on the type of illness diagnosed.

While the majority of this Heat Acclimatization and Heat Illness Policy and Procedures addresses the risks of practicing in extreme heat conditions, all physical activity carries risk in the heat which clearly includes competitions. It is recommended that all steps be taken to mitigate risk such as, but not limited to, moving start times, increasing frequency and duration of breaks, increasing water breaks, increasing available shade and fans, etc.

This policy shall be reviewed annually with all appropriate school personnel.

Note – This policy was developed using information provided by the Korey Stringer Institute. Approved by WVSSAC Board of Directors on May 17, 2022, on recommendation of the WVSSAC Sports Medicine Committee.

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