



Skin Infection Protocol

In sports, skin infections in athletes are common. Due to the nature of sports, especially contact sports, the skin is exposed to trauma and infectious agents regularly. Irving ISD encourages all student athletes to avoid sharing towels, razors, water bottles and other personal items to prevent the spread of infections. Washing hands regularly with soap and water and showering immediately after physical activity also helps to prevent infection. Student athletes are required to report and cover all open wounds prior to all physical activity. If a wound is diagnosed as infectious, the following protocol is required for return to sport.

Wounds diagnosed as staphylococcus aureus or MRSA, impetigo, cellulitis, or tinea corporis (ringworm):

- No new lesions for at least 48 h
- Minimum 72 h antibiotic therapy
- No moist, exudative, or draining lesions
- Active lesions cannot be covered to allow participation

Wounds diagnosed as Herpes simplex (primary):

- Free of systemic symptoms of viral infection (fever, malaise, etc)
- No new lesions for at least 72 h
- No moist lesions; all lesions must be covered with a firm, adherent crust
- Minimum 120 h systemic antiviral therapy
- Active lesions cannot be covered to allow participation

Wounds diagnosed as Herpes simplex (recurrent):

- No moist lesions; all lesions must be covered with a firm, adherent crust
- Minimum 120 h systemic antiviral therapy
- Active lesions cannot be covered to allow participation

Reference:

Zinder, Steven M., PhD, ATC; Basler, Rodney S.W., MD; Foley, Jack, ATC; Scarlata, Chris, ATC; Vasily, David B., MD. (2010). National Athletic Trainers' Association Position Statement: Skin Diseases. *Journal of Athletic Training*, 45(4), 411-428.