

# RESPONSE GUIDE: Reducing Heat Illness in College and High School Sports



When athletes experience symptoms of heat illness, coaching and medical staff should work together to provide immediate on-site treatment. Consider these suggestions.

## Exercise-Associated Muscle Cramps

Instruct athletes experiencing cramps to:

- Rest to cool down
- Consume salty foods or a concentrated, salty liquid (e.g., broth, electrolyte beverage with salt added, pickle juice)
- Practice gentle, range-of-motion stretching and massage of the affected muscle group
- Avoid strenuous activity for several hours or longer after heat cramps go away
- Get medical treatment if cramps do not quickly improve with treatment

Once athletes complete treatment and are symptom-free, have medical staff assess whether they can perform at required levels of play. Review what caused the cramps and whether to make any change to practice to prevent further illness.



## Heat Exhaustion

When athletes experience heat exhaustion:

- Move the athlete to a cool space or provide cold ice towels (towels engineered to quickly cool athletes)
- Rest the athlete on their back with legs elevated higher than heart level
- Loosen and remove unnecessary clothing and equipment
- Instruct the athlete to drink cool fluids



Athletes who complete heat exhaustion treatment should rest for the remainder of the day. Participation should only resume after a medical provider rules out underlying illness and gives written clearance to engage in activity. Athletic staff should review acclimatization issues and fitness level prior to the athlete's return.

## Exertional Heat Stroke (EHS)

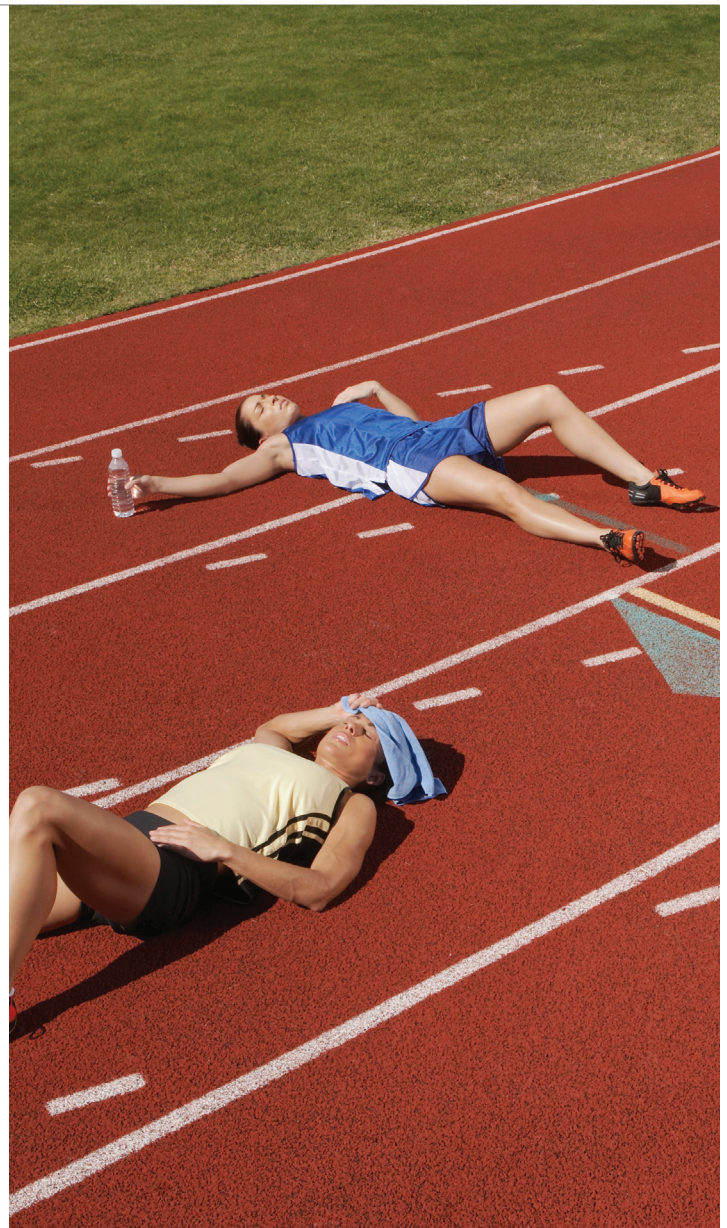
When athletes experience heatstroke:

- Cool first, transport second
- Immerse entire body in ice and water
- Continuously stir water and ice around body
- Rotate soaked towels on any extremities that are not in the ice water
- Monitor rectal temperature at least every five minutes. Cool until rectal temperature is 102 degrees Fahrenheit or below



EHS victims need to be cooled within 30 minutes of onset. After the athlete is cooled, medical professionals should transport the athlete to the hospital for further emergency treatment and follow-up.

Require athletes who experience EHS to receive written clearance from a physician before returning to play. Suspend their participation for a minimum of one week after release from medical care. Under a qualified medical professional's supervision, the athlete can then begin a gradual return-to-play schedule created by their physician.



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