

# SKIN LESION AWARENESS

This is an informational poster only and is not to be used as a source of diagnosis and/or treatment.

## BACTERIAL LESION: (IMPETIGO)



A common contagious bacterial (Staph) infection affecting the superficial layers of skin, usually the face, arms and legs. Usually begins when there has been a break in the skin. Impetigo is spread from person to person contact, communal

towels or other unsanitary conditions. Risk increases with illness which lowers the body's resistance, warm, moist environments and poor hygiene.

**PREVENTION:** Good general health and hygiene help to prevent infection. Impetigo is highly contagious, so avoid skin contact with person having drainage from impetigo lesions.

**SIGNS AND SYMPTOMS:** Impetigo begins as an itchy, red sore that appears as a blistering skin lesion with a top layer being a yellow-honey colored pustule. Infection is carried in the fluid that oozes from the blisters.

**TREATMENT:** Use of individual towels and anti-bacterial soap will help reduce chances of infection. Also the use of anti-bacterial ointments and/or oral antibiotics prescribed by your physician. The washing of all equipment (headgear, shoes, pads, towels, etc) in hot water. Note: NFHS rules state that in order to participate, lesions should have no drainage, oozing or moist lesion and must have been on oral antibiotics a minimum of 2 days.

## CONJUNCTIVITIS (PINK EYE):

Infection of the membrane lining the eyelids which is exposed to bacteria and other irritants.

Tears usually wash away bacteria and inhibit its growth. This infection is contagious and spreads rapidly.

**PREVENTION:** Wash hands frequently and keep them away from the eyes. Do not share towels, change pillowcases frequently and follow the proper use and care of contacts.

**SIGNS AND SYMPTOMS:** Increased tearing, redness, itching, gritty feeling in the eye, crusts, blurred vision and sensitivity to light.

**TREATMENT:** Antibiotic ointment



## HERPES LESIONS:

(Fever blisters, zoster, gladiatorum, etc): An acute viral infection causing painful blisters that remind you of chickenpox. It runs its course along a single spinal nerve appearing as

a red rash with small blisters which break forming small ulcers which begin to dry and form crusts.

**PREVENTION:** Prevention is uncertain. Avoid contact with the skin lesions of person with herpes zoster infection

**SIGNS AND SYMPTOMS:** Warning symptom of unilateral pain, tingling or burning

sensation to one side of body. Red skin followed by blisters that ooze and crust. Lymph node swelling may occur.

**TREATMENT:** No new lesions in 48 hours and all lesions scabbed over. Usually no oral treatment is required, but prescribed medication may shorten the duration, reduce the pain and complications.



## FUNGAL LESION (RINGWORM):

A common fungal infection found all over the body but also known as athlete's foot when found on the feet or jock itch when present in genital area. Is usually spread by person to person contact or by contaminated towels, mats, equipment (headgear, braces, shoes or cloth material). Risk increases with warm, dark, moist environments and unsanitary conditions.

**PREVENTION:** Good general hygiene. Keep the skin clean and dry. Clothing, hairbrushes and other items should be cleaned and dried.

**SIGNS AND SYMPTOMS:** These lesions are characterized by itching, reddened, ring-like rash that may be scaly or crusted on the borders. Borders may spread as the center clears up.

**TREATMENT:** Antifungal cream containing miconazole and clotrimazole are effective in treating. Application should be twice a day for 2-4 weeks. Must keep area clean and dry. If not clearing up within a week, physician visit is recommended.



## GENERAL RULES FOR PREVENTION OF SKIN LESIONS:

1. Take shower daily using an antibacterial soap before going home from practice/game or match.
2. Clean all skin openings (cuts, abrasions, etc) with soap and water. Using triple antibiotic ointment and covering before practice or games.
3. Wash all cloth gear (shirts, shorts, athletic supporters, socks, pads and towels) on a daily basis.
4. Clean all equipment daily (mats, shoes, headgear) with a disinfectant.

NATIONAL FEDERATION HIGH SCHOOL, Rule 4-2-3 which states, "If a participant is suspected by the referee, coach or athletic trainer of having a communicable skin disease or any other conditions that makes participation appear inadvisable, his coach shall provide current written documentation from a physician (MD or DO) stating that the suspected disease or condition is not communicable and that the athlete's participation would not be harmful to his opponent." Covering a communicable condition shall not be considered acceptable and does not make the wrestler eligible to participate.

**NOTE:** If an on-site tournament Physician is present, he/she may overrule the diagnosis of the physician signing the OSSAA skin condition form.