In Executive Order 72, issued December 20, 2005, Governor Richard Codey directed the New Jersey Department of Education to work in conjunction with the New Jersey State Interscholastic Athletic Association (NJSIAA) to develop and implement a program of random testing for steroids, of teams and individuals qualifying for championship games.

Beginning In the Fall, 2006 sports season, any student-athlete who possesses, distributes, ingests or otherwise uses any of the banned substances on the attached page, without written prescription by a fully-licensed physician, as recognized by the American Medical Association, to treat a medical condition, violates the NJSIAA’s sportsmanship rule, and is subject to NJSIAA penalties, including ineligibility from competition. The NJSIAA will test certain randomly selected individuals and teams that qualify for a state championship tournament or state championship competition for banned substances. The results of all tests shall be considered confidential and shall only be disclosed to the student, his or her parents, and his or her school. No student may participate in NJSIAA competition unless the student and the student’s parent/guardian consent to random testing.

By signing below, we consent to random testing in accordance with the NJSIAA steroid testing policy. We understand that if the student or the student’s team qualifies for a state championship tournament or state championship competition, the student may be subject to testing for banned substances. For a list of NJSIAA Banned-Drug Classes, please go to www.njsiaa.org, click on medical issues, and click on the latest revised document.

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**NJSIAA STEROID TESTING POLICY – CONSENT TO RANDOM TESTING**

In order to help protect the student athletes of New Jersey, the NJSIAA has mandated that all athletes, parents/guardians and coaches follow the NJSIAA Concussion Policy. A concussion is a brain injury and all brain injuries are serious. They may be 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/player 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:**

- Headache
- Nausea/Vomiting
- Balance problems or dizziness
- Double vision or changes in vision
- Sensitivity to light or sound/noise
- Feeling of sluggishness or fogginess
- Difficulty with concentration, short-term memory, and/or confusion
- Irritability or agitation
- Depression or anxiety
- Sleep disturbance

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

- Appears dazed, stunned or disoriented
- Forgets plays or demonstrates short-term memory difficulties (e.g., is unsure of the game, score or opponent)
- Exhibits difficulties with balance or coordination
- Answers questions slowly or inaccurately
- Loses consciousness
- Demonstrates behavior or personality changes
- Is unable to recall events prior to or after the hit

*What can happen if my child/player 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 severe brain swelling (second impact syndrome) with devastating and even fatal consequences. It is well known that adolescent or teenage athletes will often under report symptoms of injuries. And concussions are no different. As a result, education of administrators, coaches, parents and students is the key for student-athlete’s safety.

*If you think your child/player 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. Close observation of the athlete should continue for several hours. An athlete who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from competition at that time and may not return to play until the athlete is evaluated by a medical doctor or doctor of Osteopathy, trained in the evaluation and management of concussion and received written clearance to return to play from that health care provider. You should also inform your child’s Coach, Athletic Trainer (ATC), and/or Athletic Director, if you think that your child/player may have a concussion. And when it doubt, the athlete sits out. For current and up-to-date information on concussions you can go to:

- [http://www.cdc.gov/ConcussionInYouthSports/](http://www.cdc.gov/ConcussionInYouthSports/)
- [www.nfhslearn.com](http://www.nfhslearn.com)

Acknowledgement of all information confirmed on the signing of Northern Burlington County Regional School District’s SPORTS PHYSICAL PACKET cover page.