



NEBRASKA SCHOOL ACTIVITIES ASSOCIATION

Minimum Wrestling Weight MEDICAL CLEARANCE FORM

Medical Professional:

The Nebraska School Activities Association (NSAA) has instituted the Wrestling Weight Management Program to encourage healthy weight management by interscholastic wrestlers. As part of this program, a minimum weight is established for each wrestler prior to his/her competitive season.

Each wrestler is first required to pass a hydration test based upon a specific gravity of 1.025g/ml or less. Next, the body fat and lean body mass is measured by an NSAA-registered assessor through skinfold measurements or Bioelectrical Impedance Analysis. The standard error for this method is $\pm 2\%$ for lower weights and $\pm 4\%$ for higher weights. A minimum weight is then determined by a minimum allowance of 7% body fat for males and 12% for females. During the season wrestlers are also monitored to ensure they do not lose more than 1.5% of their body weight per week.

Your patient was assessed as having 7% body fat or less (or 12% body fat for females). **The athlete is requesting that he or she be allowed to lose an additional 2% Body Weight from the established Minimum Wrestling Weight with Variance as determined by the assessment - (alpha test or body fat appeal test).** Because the assessment results indicated 7% or less (for males) or 12% (for females) body fat, NSAA guidelines require clearance from the athlete's personal licensed medical professional. Most adolescents require at least 5-7% body fat (males) or 10-12% body fat (females) to achieve optimal growth and development. However, there are some adolescents who are naturally lean and develop normally at a lower percent body fat.

Please evaluate your patient for normal growth and development, paying particular attention to weight fluctuations and his or her growth curve. Based on the patient's history and your exam, determine if his or her present weight is compatible with normal growth and development and good health. Please complete the form on the reverse side to indicate your examination results.

Thank you,

Darin Boysen
NSAA Assistant Director

IMPORTANT: A faxed copy of the Medical Clearance Form must be received by the NSAA.



NEBRASKA SCHOOL ACTIVITIES ASSOCIATION

MEDICAL CLEARANCE FOR WRESTLER AT OR BELOW BODY FAT ALLOWANCE

NSAA • P.O. Box 85448 • Lincoln, Nebraska 68501-5448

Phone: 402-489-0386 FAX: 402-489-0934

If any successful Alpha Test or Body Fat Appeal results are at or below 7% Body Fat for males or 12 % Body Fat for females, the next higher weight class shall be the wrestler's minimum weight class. A wrestler may request to lose an additional 2% Body Weight below his or her Minimum Wrestling Weight with Variance (MWWV) with a Medical Clearance.

*****This form shall be completed and all data entered into the NWCA site by the NSAA BEFORE the athlete may wrestle.*****

The individual giving the medical examination, the purpose of which is to allow an athlete whose body fat test was at or below 7%/12% to lose an additional 2% Body Weight beyond the establish Minimum Wrestling Weight with Variance, should be medically licensed to diagnose, treat, or recommend treatment. The individual giving the medical opinion must do so within the scope of his/her training and within the limits defined by state statutes as to services that can be legally performed by the field of practice to which the individual belongs. The athlete will not be allowed to lose more than 1.5% in Body Weight per week as per the Individual Weight Loss Plan. This medical opinion is good for one season's duration and expires at the conclusion of the NSAA State Wrestling Tournament each year.

The athlete at or below-7% male or 12% female, who receives clearance may only be allowed to lose an additional 2% Body Weight beyond the MWWV which was established by a successful Alpha Test or Body Fat Appeal Test. The additional 2% Body Weight reduction may or may not qualify the wrestler to compete at a lower weight class.

WRESTLER'S NAME: _____ **GRADE:** _____

CITY/SCHOOL: _____ **CLASS:** _____

DATA REVIEW: ALPHA or APPEAL DATE ___ / ___ / ___ ALPHA WT. _____ POUNDS BODY FAT _____ %

MINIMUM WRESTLING WEIGHT WITH VARIANCE (MWWV): _____

WEIGHT CLASS WHICH IMMEDIATELY ABOVE THE ALPHA WT: _____

MEDICAL PROFESSIONAL'S EXAM:

WEIGHT & DATE OF EXAM: _____ POUNDS DATE OF EXAM: _____

CIRCLE "A - YES" OR "B - NO"

A. YES, the wrestler named has received clearance as provided by the Nebraska Weight Management Plan to lose an additional 2% in Body Weight beyond the Minimum Wrestling Weight with Variance (MWWV) as established by his/her successful Alpha Test or Body Fat Appeal Test.

EXAMPLE: MWWV 114 pounds: with 6.2% body fat. The wrestler may lose an additional 2.28pounds.

NOTE: A wrestler may not lose more than 1.5% body weight per week.

OR

B. NO, the wrestler named is advised to wrestle at a weight class which meets or exceeds the 7% or 12% body fat minimum requirement and MAY NOT lose an additional 2% in body weight class. *EXAMPLE: MWWV 114 pounds: with 6.2% body fat. The wrestler may wrestle no lower than the 119 pound weight class.*

The wrestler named has been given permission to lose an additional 2% body weight beyond the established MWWV. This may or may not enable the athlete to qualify for one of the National Federation weight classes listed below. This permission is valid through the NSAA State Wrestling Championships.

103 - 112 - 119 - 125 - 130 - 135 - 140 - 145 - 152 - 160 - 171 - 189 - 215 - 285

The earliest date on which the wrestler may compete at a weight class will be determined by the Individual Weight Loss Plan.

MEDICAL

SIGNATURE: _____ **DATE:** _____

ADDRESS: _____ **CITY:** _____ **ZIP:** _____

PARENT SIGNATURE: _____ **DATE:** _____

NOTE: This form is the only document accepted as a "Medical Clearance". A copy of this form shall be retained by the Head Coach. Please FAX a copy of this form to the NSAA immediately upon completion. All data must be entered into the NWCA site by the NSAA BEFORE the athlete may wrestle.