



MECHANICSBURG AREA SCHOOL DISTRICT ATHLETIC DEPARTMENT

INSTRUCTIONS FOR OBTAINING A PRE-PARTICIPATION PHYSICAL EVALUATION

Dear Parents/Guardians:

The Pennsylvania Interscholastic Athletic Association (PIAA) has developed procedures for obtaining a Comprehensive Initial Pre-Participation Physical Evaluation (CIPPE) and subsequent Re-Certification for participation in interscholastic athletics. The process is as follows:

- ALL Athletes **MUST** have a completed 6-page double-sided 2018-2019 physical packet, containing the CIPPE, dated June 1st, 2018 or later in order to be eligible to participate in interscholastic athletics during the 2018-2019 school year. Physicals dated prior to June 1st, 2018 **will not** be valid.
- A completed physical packet or subsequent re-certification form **MUST** be turned in to the Athletic Trainers prior to the start of each sports season. If the physical packet is not completed and turned in, the student will not be eligible to participate.
- A 3-page white re-certification form is only necessary for all athletes participating in winter and spring sports. A re-certification form is only valid if a current completed physical packet is on file. Winter re-certifications must be dated after October 5, 2018. Spring re-certifications must be dated after January 21, 2019. A white re-certification form must be on file even if you did not participate in a fall sport.
- The CIPPE may be obtained from your personal family physician or the Mechanicsburg Area School District Athletic Team Physician.
- If you choose to have your family physician complete the CIPPE portion of the physical packet, the signing physician **MUST** complete any subsequent re-certifications.
- Athletes who had the CIPPE portion of the physical packet completed by the MASD Athletic Team Physician will have their Re-certifications completed by the athletic trainers.
- All students are strongly encouraged to participate in these free exams, even if they are not sure whether they will participate in a sport.

In an attempt to streamline the Athletic Physical Evaluation process at MASD, the following changes have been made:

- Athletic Pre-Participation Physical Evaluations will be given by appointment only during the dates listed below.
- NO physicals will be given during the school year by the MASD Athletic Team Physician.
- 70 physicals will be scheduled each hour for a total of 360 & 240 for each date, respectively.
- Scheduled physicals will be on a first come, first serve basis utilizing a web-based sign-up conference scheduler. Use the link below and then click on Mechanicsburg Athletic Physicals. The page will then display all times which are available. Click on "Sign Up" to schedule your time. After you schedule your time, you will receive a confirmation email.
- When you sign-up, you will receive an email confirming your time.
- Physicals will take approximately 1 hour from your assigned time.
- Physicals obtained from the MASD Athletic Team Physician can only be used for interscholastic athletics.
- For the June 1 date, Middle School students will not be scheduled until the 4 pm hour.
- Dates, times and locations for the MASD free physicals:

Wednesday, June 6, 2018: 4:00 pm – 9:00 pm

Mechanicsburg High School Main Lobby

Thursday, Aug 2, 2018: 4:00 p.m. – 8:00 p.m.

Mechanicsburg High School Main Lobby

If you have questions or concerns, contact Sandy Zettlemoyer (717-691-4548 or SZettlemoyer@mbgsd.org). Completed forms should be returned to Sandy Zettlemoyer (High School) or Amy Burhans (Middle School).

The following link is to be used to sign-up for physicals. The link is also listed at the school district website under the Athletics section.

<https://www.myconferencetime.com/mbgsdathletics/schedule/152752>

Sincerely,

Dr. Alex "Sandy" Zettlemoyer, DAT, ATC, LAT, CES
Head Athletic Trainer

Seth A. Pehanich, MS
Athletic Director





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Mechanicsburg Area School District
Athletic Department

Interscholastic Sports Pre-Participation Physical Evaluation and Permission to Participate Form



Prior to any student participating in an interscholastic sport, the student is required to obtain a pre-participation physical evaluation performed by the Mechanicsburg Area School District Athletic Team Physicians or the students own Family Physician. This packet must be filled out in its entirety and returned to the Athletic Office or Athletic Training Room prior to the beginning of each sport season. **If your own Physician is completing the form, it must be dated AFTER JUNE 1, 2018.**

If you participate in multiple sports within in the same school year, you are required to complete a Re-Certification Form for each additional sport you participate in. The Re-Certification Form must be returned to the Athletic Office or Athletic Training Room before the beginning of the Winter and/or Spring Sport Season.

If you have questions regarding the Physical Evaluation Process, visit www.gomechanicsburg.com or call Alex "Sandy" Zettlemoyer, Head Athletic Trainer at 717-691-4548.

Students are asked to wear shorts and a t-shirt during the physical evaluation.

Name: _____ ID #: _____ Grade for 2018-19: _____

Sport: _____

Address: _____

Age: _____ Date of Birth: _____ / _____ / _____

Parent Email Address: _____

Parent Primary Phone: (____) _____ - _____ Parent Secondary Phone: (____) _____ - _____

Student Email Address: _____

Student Primary Phone: (____) _____ - _____ Student Secondary Phone: (____) _____ - _____

CIRCLE each year you have participated in this school sponsored sport, include the current year:

7 8 9 10 11 12

Are you a HOMESCHOOL or CYBERSCHOOL student: YES NO

NON-DISCRIMINATION POLICY

The Mechanicsburg Area School District, an equal opportunity employer, will not discriminate in employment, educational programs or activities based on sex, race, religion, national origin, color or handicap. This policy of non-discrimination extends to all other legally protected classifications. Publication of this policy in this document is in accordance with state and federal laws including Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1973, and Section 504 of the Rehabilitation Act of 1973, and the American's With Disabilities Act. Inquiries should be directed to the Compliance Officer, Personnel Coordinator, Mechanicsburg Area School District, 500 South Broad Street, Mechanicsburg, PA 17055-4199

FORMS SHOULD BE RETURNED TO SANDY ZETTLEMOYER
(HIGH SCHOOL) OR AMY BURHANS (MIDDLE SCHOOL)



Guidelines:

- 1. Consent to Play:** By its nature, participation in interscholastic athletics includes risk of injury, which may range in severity from minor to disabling to even death. Although serious injuries are not common in supervised school athletic programs, it is impossible to eliminate the risk. Participants can and have the responsibility to help reduce the chance of injury. Participants must obey all safety rules, report all physical problems to their coaches and Athletic Trainer follow a proper conditioning program and inspect their own equipment daily.
- 2. Permission to administer emergency medical care:** I consent for an emergency medical care provider to administer any emergency medical care deemed advisable to the welfare of the herein named student while the student is practicing for or participating in Inter-School Practices or Scrimmages and Contests. Further, this authorization permits if reasonable efforts to contact me have been unsuccessful, physicians to hospitalize, secure appropriate consultation, to order injections, anesthesia (local, general, or both) or surgery for the herein named student. I hereby agree to pay for physicians' and/or surgeons' fees, hospital charges, and related expenses for such emergency medical care. I further give permission to the school's athletic administration, coaches, and medical staff to consult with the Authorized Medical Professional who executes Section 6 regarding a medical condition or injury to the herein named student.
- 3. Permission to Consult:** Permission is granted to the Athletic Administration and Medical Staff to consult with the student's physician or other medical specialist, at their discretion, regarding an injury or medical condition. The MASD and the MASD Physicians are responsible for the health and safety of all student athletes. In occasional instances, this may require superseding your physician's recommendations.
- 4. Return to Play:** It is important to notify the Mechanicsburg Area School District Athletic Trainers of any injury. The Athletic Trainers will evaluate and treat all injuries as well as determine the need for additional evaluation by our Team Physicians. A licensed physician of medicine or a physician of osteopathic medicine (MD or DO) and member of Mechanicsburg School District's Sports Medicine Team (MASDSMT) will determine the final decision of the participation status of a Mechanicsburg Area School District (MASD) student-athlete when it comes to injury, illness, and pregnancy. In the absence of the MASD student-athlete's Team licensed physician of medicine or osteopathic medicine (MD or DO), the licensed athletic trainer and member of the MASDSMT will determine the final decision of the participation status of a Mechanicsburg Area School District (MASD) student-athlete when it comes to injury, illness, and pregnancy. If you choose to take your athlete to your physician, you will need to return the re-certification form (available online) before they will be permitted to return to practice and/or games. This form will outline any required treatment as well as any restrictions your athlete may have.
- 5. Insurance Information:** The Athletic Department of the Mechanicsburg Area School District provides accident insurance coverage for all students participating in interscholastic athletics (grades 7-12). This insurance coverage is an excess plan. This means the insurance company will pay the first \$100 of a claim up to the benefit limit. If a claim exceeds \$100 and the benefit limit is above \$100, the insurance company will pay a benefit only if there is no other personal insurance which may be payable covering the same accident. All injuries must be reported and documented by the Mechanicsburg Area School District's Athletic Trainers before a claim can be filed. The Mechanicsburg Area School District does offer parents the opportunity to purchase Student Accident Insurance for school time or 24 hour coverage at the start of each school year. Forms are available from the Business Office. The Athletic Department does not assume responsibility for medical expenses due to any injury that might occur in practice or at a contest.
- 6. Confidentiality Statement:** The information on this CIPPE shall be treated as confidential by school personnel. It may be used by the school's athletic administration, coaches and medical staff to determine athletic eligibility, to identify medical conditions and injuries, and to promote safety and injury prevention. In the event of an emergency, the information contained in this CIPPE may be shared with emergency medical personnel. Information about an injury or medical condition will not be shared with the public or media without written consent of the parent(s) or guardian(s).

Extracurricular Conduct Code – MASD BOARD POLICY #122

The Mechanicsburg Area School District Board of School Directors has adopted an **Extracurricular Conduct Code** that further regulates participant behavior and outlines universal penalties to be applied to participants in the extracurricular program who are involved in the use, possession and/or distribution of alcoholic beverages, controlled substances, anabolic steroids, or look-alike drugs. Exclusion from school shall include a prohibition for participation in or attendance at any school-sponsored activity during the period of the exclusion. The coach or director of the extracurricular activity may, with approval of the principal, also impose special training rules and reasonable dress requirements that are required for participation in the activity. These rules will be communicated to students and parents at the beginning of each season. Parents and students need to be aware that participation in extracurricular activities is a privilege.

The rules outlined in the Extracurricular Conduct Code apply to participants in extracurricular activities on a twenty-four hour basis on and off school property during the period of participation. A copy of this Extracurricular Conduct Code is distributed to each participant. Student and parent verification of understanding will be on file with the District before participation is allowed.

Mechanicsburg Area School District Drug, Alcohol, Tobacco, and Steroid Policies

These policies are to be followed by all students participating in Mechanicsburg Area School District sponsored organizations. The Board of School Directors, Administration, Faculty, and Staff of the Mechanicsburg Area School District consider participation in school-sponsored organizations to be a privilege. Students participating in school-sponsored organizations are expected to accept the responsibilities granted them by this privilege. As school district representatives who are scrutinized by their peers and the community, students participating in school sponsored organizations are **expected to accept a drug, alcohol, tobacco, and steroid-free lifestyle**. Possession of Tobacco Products, Use of Tobacco Products, Possession, Use, Transfer, Sale or Aiding in the Procurement of Drugs, Mood-Altering Substances, Alcohol, Anabolic Steroids (except for a valid medical purposes), and Controlled Substances as defined in the Mechanicsburg Area School District Code of Conduct and Board Policy are prohibited by any student. Students who violate this policy shall be subject to: (a) the disciplinary action listed below, (b) the specific guidelines established by the individual organizations, (c) the normal disciplinary action outlined in the Mechanicsburg Area School District Drug and Alcohol Policy, (d) mandated referral (except for tobacco incidents) to the Student Assistance Program with successful completion of the assessment and any recommended counseling and/or interventions, possible referral to law enforcement.

First Offense: The student may be removed for a period of up to 45 consecutive school days from participation as a member in any Mechanicsburg Area School District sponsored organization. (Organizations include but are not limited to athletic teams, honor societies, student council, key club, debate team, concerts, band, music performances, musical, play, ski club, etc.) The suspension will be in effect from the issuance of disciplinary consequences until the end of the 45th consecutive school day. During this period, the student may not practice, perform or compete with the club, team or activity. The suspension will be carried into the next school year if the 45th consecutive school day does not occur within the current school year.

Second Offense: The student may be removed for a period of time (not to exceed one calendar year from the issuance of disciplinary consequences) from participation as a member in any Mechanicsburg Area School District sponsored organization.

While the administrative staff, coaching staff, advisors and faculty cannot observe students seven days a week/twenty-four hours a day, students are expected to abide by all school regulations. Parents and guardians are obligated and expected to support and enforce these regulations. Any violation brought to the attention of the administration shall be investigated.

Students have the right to due process. During the due process proceedings, if the allegations are found to be factual, the associated penalty shall be imposed.

ACADEMIC ELIGIBILITY REQUIREMENTS

Students must meet the following minimum academic requirements for participation in any extra-curricular activity:

1. The student must be passing at least four major subjects (courses that meet every day). Eligibility shall be based on cumulative grades for the current grading period.
 2. Grades are monitored on a weekly basis. If a student is not passing at least four major subjects, the student will become academically ineligible for one week (Sunday-Saturday). At the end of one week, if the student is still not meeting the minimum standards, he/she will continue to be academically ineligible. Academic ineligibility means the student is unable to dress or participate in any event, competition or performance that is considered an extra-curricular activity. Ineligible students will not be dismissed from school to participate and/or travel with their respective team/organization. The decision as to whether the student may participate in practice sessions will be at the discretion of the coach/advisor of the extra-curricular activity.
 3. A student must have passed at least four full credit subjects or the equivalent during the previous school year. At the end of the school year, the student's final credits, rather than the credits for the last grading period shall be used to determine his/her eligibility for the first grading period of the next school year. A student whose work does not meet the academic eligibility standards, who attends summer school and corrects their deficiencies shall be eligible. In cases where a student's work in the preceding school year does not meet the standards, the student shall be ineligible to participate in any extra-curricular activities for at least fifteen school days of the next school year beginning on the first day of school.
 4. A student must have passed at least four full-credit subjects, or the equivalent, during the previous grading period. In cases where a student's work in any preceding grading period does not meet the standards, the student shall be ineligible to participate in any extra-curricular activities for at least fifteen school days of the next grading period beginning on the first day report cards are issued.
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SCHOOL ATTENDANCE – ADMINISTRATIVE REGULATION

Extracurricular activities are a valuable component of the school's educational program and provide opportunities for students to grow and excel beyond the classroom. Although these experiences are valuable, it is essential that the student recognizes the importance of regular daily attendance and academic achievement. With this in mind, the school district has instituted the following daily attendance regulations for students participating in extracurricular activities.

Students participating in any school-sponsored activity (practice, game competition, concert, production, etc.) occurring on a School day must be in school. Students who arrive tardy to school or are absent from school are subject to consequences limiting their participation in an extracurricular activity.

Tardy to School – If a student arrives to school after the tardy bell and within the first two (2) hours of the school day, the following actions will result:

- **First Offense:** The student will receive a warning from the coach/advisor with a copy also forwarded to the athletic director or principal's office that will be mailed to the parents/guardians.
- **Second Offense and Subsequent Offenses:** The student will not participate in his/her scheduled school activity that day or evening.

Absence – Half Day or Full Day – If a student is absent a half day or the entire day, the student will not be allowed to participate in his/her scheduled school-sponsored activity that day or evening (no warnings). If a student is absent from school or sent home by the nurse on a given day, he/she cannot return to participate in his/her activity that day or evening or be a spectator at a school event on that day.

Exceptions to this regulation must be approved by an administrator and include a student who has a signed excuse from a doctor stating that he/she is fit to participate that day, school district transportation problems, an unavoidable family emergency or a pre-approved absence for a doctor's appointment, field trip, job shadowing, post-secondary institution visit, funeral, or religious observance.

The Wildcat Code

The Wildcat Code was developed by Mechanicsburg Area School District students and staff members who stated the following: "If you are true to the values listed below, you will be a credit to your family, to your peer group, and to every organization with which you are associated. You will be justifiably proud of your actions and accomplishments, and will be a personal and professional success at whatever undertakings you should attempt."

Willingness to serve: Recognize that there are things in your life that are more important than "self". At times the welfare of others or the group is more important than the welfare of the individual. Learn the satisfaction that comes from selflessly helping others without the need for public recognition.

Integrity: Do what is right - legally and morally. The right moral action may not be popular with your peers. You must be strong and confident enough to follow your convictions. Integrity is not lying, cheating or stealing, or tolerating others who do. When you know of someone who has acted improperly, you must take action to correct his/her indiscretion.

Loyalty: You must consistently support those around you if you expect to be part of a group that is unified and successful.

Duty: Fulfill your obligations and accept the consequences, positive or negative, of your actions. Accepting responsibility is a sign of maturity.

Courage: Face up to fear, danger and adversity that you are certain to confront in your life. Physical and moral courage is not the absence of fear; it is overcoming that fear and doing what must be done.

Attitude: Be positive and self-confident, and treat others with the respect they deserve as fellow human beings. If you do not give others respect, you cannot expect them to give it to you.

Tolerance: Do not allow superficial differences to separate you from others. Another person's race, color, culture and religion must not cause in you a thoughtless, automatic and negative reaction. This would deny you the wisdom, joy, companionship and accomplishments that your open association with those different from you can bring. Do not limit your own potential by denying yourself access to the potential available in the majority of people in this world who do not share your race, religion and culture.

GOOD CITIZENSHIP/CODE OF CONDUCT/SPORTSMANSHIP

1. **School Discipline Referral** – Any student referred to the office for school rule violations may be denied the privilege of participation in all extra-curricular activities for a period to be determined by the school principal. Any student involved in any extra-curricular activity that is suspended out of school once or in-school twice for any reason may be dismissed from all current activities for a maximum of 45 school days.
2. **School Law Enforcement Referral** – Any student referred to law enforcement authorities by school officials for school rule violations may be denied the privilege of participation in all extra-curricular activities for a period to be determined by the principal.
3. **Arrest** – Any student, who is arrested for a felony or gross misdemeanor during school hours, school functions, and on the way to and from participating in a school event, may be denied the privilege of participating in all extra-curricular activities for a period to be determined by the principal.
4. **Individual Team Rules** – It is understood that each Coach/Advisor will have individual team rules and regulations. A copy of the rules should be given to each student for their signature. It is understood that each Coach/Advisor has the authority to determine appropriate disciplinary action for team rules infractions. If a student or parent feels that any disciplinary action has not been fairly administered, an appeal may be taken to the athletic director and/or school principal.
5. **Code of Conduct** – The Mechanicsburg Area School District Code of Conduct applies to all extra-curricular activities.
6. **Sportsmanship** - The Mechanicsburg Area School District is interested in promoting good sportsmanship among our coaches, players, cheerleaders, parents and spectators at all our athletic contests. As a PIAA member school, we firmly believe that the outcome of the game should be determined by the quality of play on the field or court and by positive support of the spectators. Our athletes look not only to their coaches and teammates but to the people in the stands – their parents, fellow students and citizens of the community – for positive reinforcement, that they made the right choice in wanting to compete for their school. The message that the spectator gives these young people is crucial. When you cheer use only those cheers that support and uplift the teams involved and applaud good plays by both teams. Show respect for the officials' decisions, even the tough ones. Take satisfaction of being a fan and not the coach, and forgive the human mistakes that all competitors are subject to. We need your support at all of our athletic contests! You have the perfect opportunity to help shape the lives of our young people by being a good role model by always displaying GOOD SPORTSMANSHIP! **THANK YOU FOR YOUR SUPPORT OF WILDCAT ATHLETICS!**

My signature below acknowledges that I have read and fully understand the contents of this permission form and contract, that I hereby certify to the best of my knowledge all the information I have listed on this form is true and complete and that I have received and read this document which states the Mechanicsburg Area School District's Drug, Alcohol, Tobacco and Steroid Policy, Concussion Statements, Sudden Cardiac Arrest Symptoms and Warning Signs, Attendance Guidelines, Academic Eligibility Requirements, Wildcat Code, Good Citizenship Statement, Code of Conduct and Uniform & Equipment procedures that I will adhere to the expectations set forth. Furthermore, I give consent for my child to participate in Practices, Inter-School Practices, Scrimmages, and/or Contests during the 2018-2019 school year in the sport indicated on page 3 of this form.

Student's Signature _____ Date ____ / ____ / ____

Parents/Guardian's Signature _____ Date ____ / ____ / ____

UNDERSTANDING OF RISK OF CONCUSSION AND TRAUMATIC BRAIN INJURY

What is a concussion?

A concussion is a disturbance in brain function that occurs following either a blow to the head or as a result of a violent shaking of the head. A concussion...

- Can change the way a student's brain normally works.
- Can occur during Practices and/or Contests in any sport.
- Can happen even if a student has not lost consciousness.
- Can be serious even if a student has just been "dinged" or "had their bell rung."

All concussions are serious. A concussion can affect a student's ability to do schoolwork and other activities (such as playing video games, working on a computer, studying, driving, or exercising). Most students with a concussion get better, but it is important to give the concussed student's brain time to heal.

What are the symptoms of a concussion?

Concussions cannot be seen; however, in a potentially concussed student, **one or more** of the symptoms listed below may become apparent and/or that the student "doesn't feel right" soon after, a few days after, or even weeks after the injury.

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Bothered by light or noise
- Feeling sluggish, hazy, foggy, or groggy
- Difficulty paying attention
- Memory problems
- Confusion

What should students do if they believe that they or someone else may have a concussion?

- **Students feeling any of the symptoms set forth above should immediately notify their Athletic Trainer, Coach and their parents.** Also, if they notice any teammate evidencing such symptoms, they should immediately notify their Athletic Trainer and/or coach.
- **The student should be evaluated** by their athletic trainer and a licensed physician of medicine or osteopathic medicine (MD or DO), sufficiently familiar with current concussion management. Mechanicsburg Area School District (MASD) Athletic Team Physicians and Certified Athletic Trainers will evaluate all head injuries for the evidence of a concussion. The MASD and the MASD Physicians are responsible for the health and safety of all student athletes. In occasional instances, this may require superseding your physician's recommendations. The MASD Sports Medicine staff will follow a step-wise return to play procedure for all concussions beginning with removal from play, appropriate treatment until symptom free, and eventual stepwise progression back to play. The procedures are recognized by the PIAA's Sports Medicine Advisory Committee as well as by National and International conferences on concussion management as appropriate standards of care.

Concussed students should give themselves time to get better. If a student has sustained a concussion, the student's brain needs time to heal. While a concussed student's brain is still healing, that student is much more likely to have another concussion. Repeat concussions can increase the time it takes for an already concussed student to recover and may cause more damage to that student's brain. Such damage can have long term consequences. It is important that a concussed student rest and not return to play until the student receives permission from their athletic trainer or an MD or DO, sufficiently familiar with current concussion management. Additionally, once the student is symptom free they may begin the step-wise return to play guidelines

How can students prevent a concussion? Every sport is different, but there are steps students can take to protect themselves.

- Use the proper sports equipment, including personal protective equipment. For equipment to properly protect a student, it must be:
 - The right equipment for the sport, position, or activity;
 - Worn correctly and the correct size and fit; and
 - Used every time the student Practices and/or competes.
- Follow the School Districts rules for safety and the rules of the sport.
- Practice good sportsmanship at all times.

If a student believes they may have a concussion: Don't hide it. Report it. Take time to recover.

Mechanicsburg Area School District Sports Medicine Staff:

- Dr. Scott Lynch, M.D. – Athletic Team Physician
- Dr. Matt Silvis, M.D. – Athletic Team Physician
- Dr. Rory Tucker, MD – Athletic Team Physician
- Dr. Alex "Sandy" Zettlemyer, DAT, ATC, LAT, CES – Head Athletic Trainer
- Mrs. Amy Burhans, MS, ATC, LAT, CES – Assistant Athletic Trainer

Athlete/Parent/Guardian Sudden Cardiac Arrest Symptoms and Warning Signs Information Sheet and Acknowledgement of Receipt and Review Form



What is sudden cardiac arrest?

Sudden cardiac arrest (SCA) is when the heart stops beating, suddenly and unexpectedly. When this happens, blood stops flowing to the brain and other vital organs. SCA is NOT a heart attack. A heart attack may cause SCA, but they are not the same. A heart attack is caused by a blockage that stops the flow of the blood to the heart. SCA is a malfunction in the heart's electrical system, causing the heart to suddenly stop beating.

How common is sudden cardiac arrest in the United States?

There are about 300,000 cardiac arrests outside hospitals each year. About 2,000 patients under 25 die of SCA each year.

Are there warning signs?

Although SCA happens unexpectedly, some people may have signs or symptoms, such as:

• Dizziness	• Fatigue (extreme tiredness)
• Lightheadedness	• Weakness
• Shortness of Breath	• Nausea
• Difficulty Breathing	• Vomiting
• Racing or Fluttering Heartbeat (palpitations)	• Chest Pains
• Syncope (fainting)	

These symptoms can be unclear and confusing in athletes. Often, people confuse these warning signs with physical exhaustion. SCA can be prevented if the underlying causes can be diagnosed and treated.

What are the risks of practicing or playing after experiencing these symptoms?

There are risks associated with continuing to practice or play after experiencing these symptoms. When the heart stops, so does the blood that flows to the brain and other vital organs. Death or permanent brain damage can occur in just a few minutes. Most people who have SCA die from it.

Act 59 – Sudden Cardiac Arrest Prevention Act (the Act)

The Act is intended to keep student-athletes safe while practicing or playing. The requirements of the Act are:

Information about SCA symptoms and warning signs.

- Every student-athlete and their parent or guardian must read and sign this form. It must be returned to the school before participation in any athletic activity. A new form must be signed and returned each school year.
- Schools may also hold information meetings. The meetings can occur before each athletic season. Meetings may include student-athletes, parents, coaches and school officials. Schools may also want to include doctors, nurses and Athletic Trainers.

Removal from play/return to play

- Any student-athlete who has signs or symptoms of SCA must be removed from play. The symptoms can happen before, during or after activity. Play includes all athletic activity.
- Before returning to play, the athlete must be evaluated. Clearance to return to play must be in writing. The evaluation must be performed by a licensed physician, certified registered nurse practitioner or cardiologist (heart doctor). The licensed physician, certified nurse practitioner or cardiologist (heart doctor) may consult any other licensed or certified medical professionals.

Mechanicsburg Area School District Sports Medicine Staff:

- Dr. Scott Lynch, M.D. – Athletic Team Physician
- Dr. Matt Silvis, M.D. – Athletic Team Physician
- Dr. Rory Tucker, M.D. – Athletic Team Physician
- Dr. Alex “Sandy” Zettlemoyer, DAT, ATC, LAT, CES – Head Athletic Trainer
- Mrs. Amy Burhans, MS, ATC, LAT, CES – Assistant Athletic Trainer

HEALTH HISTORY

**Explain “Yes” answers at the bottom of this form.
Circle questions you don’t know the answers to.**

- | | | | | |
|--|--|-----|--|----|
| | | Yes | | No |
|--|--|-----|--|----|
1. Has a doctor ever denied or restricted your participation in sport(s) for any reason? Yes No
 2. Do you have an ongoing medical condition (like asthma or diabetes)? Yes No
 3. Are you currently taking any prescription or nonprescription (over-the-counter) medicines or pills? Yes No
 4. Do you have allergies to medicines, pollens, foods, or stinging insects? Yes No
 5. Have you ever passed out or nearly passed out DURING exercise? Yes No
 6. Have you ever passed out or nearly passed out AFTER exercise? Yes No
 7. Have you ever had discomfort, pain, or pressure in your chest during exercise? Yes No
 8. Does your heart race or skip beats during exercise? Yes No
 9. Has a doctor ever told you that you have (check all that apply):

<input type="checkbox"/> High blood pressure	<input type="checkbox"/> Heart murmur
<input type="checkbox"/> High cholesterol	<input type="checkbox"/> Heart infection
 10. Has a doctor ever ordered a test for your heart? (for example ECG, echocardiogram) Yes No
 11. Has anyone in your family died for no apparent reason? Yes No
 12. Does anyone in your family have a heart problem? Yes No
 13. Has any family member or relative died of heart problems or of sudden death before age 50? Yes No
 14. Does anyone in your family have Marfan syndrome? Yes No
 15. Have you ever spent the night in a hospital? Yes No
 16. Have you ever had surgery? Yes No
- | | | | | | | | |
|------------|------------|----------|-----------|-------|-----------|------------------|---------------|
| Head | Neck | Shoulder | Upper arm | Elbow | Forearm | Hand/
Fingers | Chest |
| Upper back | Lower back | Hip | Thigh | Knee | Calf/shin | Ankle | Foot/
Toes |
17. Have you ever had an injury, like a sprain, muscle, or ligament tear, or tendonitis that caused you to miss a practice or Contest? Yes No
If yes, circle affected area below:
 18. Have you had any broken or fractured bones or dislocated joints? If yes, circle below: Yes No
 19. Have you had a bone or joint injury that required x-rays, MRI, CT, surgery, injections, rehabilitation, physical therapy, a brace, a cast, or crutches? If yes, circle below: Yes No
 20. Have you ever had a stress fracture? Yes No
 21. Have you been told that you have or have you had an x-ray for atlantoaxial (neck) instability? Yes No
 22. Do you regularly use a brace or assistive device? Yes No

- | | | | | |
|--|--|-----|--|----|
| | | Yes | | No |
|--|--|-----|--|----|
23. Has a doctor ever told you that you have asthma or allergies? Yes No
 24. Do you cough, wheeze, or have difficulty breathing DURING or AFTER exercise? Yes No
 25. Is there anyone in your family who has asthma? Yes No
 26. Have you ever used an inhaler or taken asthma medicine? Yes No
 27. Were you born without or are you missing a kidney, an eye, a testicle, or any other organ? Yes No
 28. Have you had infectious mononucleosis (mono) within the last month? Yes No
 29. Do you have any rashes, pressure sores, or other skin problems? Yes No
 30. Have you had a herpes skin infection? Yes No
- CONCUSSION OR TRAUMATIC BRAIN INJURY**
31. Have you ever had a concussion (i.e. bell rung, ding, head rush) or traumatic brain injury? Yes No
 32. Have you been hit in the head and been confused or lost your memory? Yes No
 33. Do you experience dizziness and/or headaches with exercise? Yes No
 34. Have you ever had a seizure? Yes No
 35. Have you ever had numbness, tingling, or weakness in your arms or legs after being hit or falling? Yes No
 36. Have you ever been unable to move your arms or legs after being hit or falling? Yes No
 37. When exercising in the heat, do you have severe muscle cramps or become ill? Yes No
 38. Has a doctor told you that you or someone in your family has sickle cell trait or sickle cell disease? Yes No
 39. Have you had any problems with your eyes or vision? Yes No
 40. Do you wear glasses or contact lenses? Yes No
 41. Do you wear protective eyewear, such as goggles or a face shield? Yes No
 42. Are you unhappy with your weight? Yes No
 43. Are you trying to gain or lose weight? Yes No
 44. Has anyone recommended you change your weight or eating habits? Yes No
 45. Do you limit or carefully control what you eat? Yes No
 46. Do you have any concerns that you would like to discuss with a doctor? Yes No
- FEMALES ONLY**
47. Have you ever had a menstrual period? Yes No
 48. How old were you when you had your first menstrual period? Yes No
 49. How many periods have you had in the last 12 months? Yes No

#’s	Explain “Yes” answers here:

I hereby certify that to the best of my knowledge all of the information herein is true and complete.

Student’s Signature _____ **Date** ____ / ____ / ____

Parents/Guardian’s Signature _____ **Date** ____ / ____ / ____

PIAA Comprehensive Initial Pre-Participation Physical Evaluation And Certification of Authorized Medical Examiner

Must be completed and signed by the Authorized Medical Examiner (AME) performing the herein named student's comprehensive initial pre-participation physical evaluation (CIPPE) and turned in to the Principal, or the Principal's designee, of the student's school. **MUST BE DATED AFTER JUNE 1, 2018.**

Student's Name: _____ Age: _____ Grade: _____

Enrolled in Mechanicsburg Middle School/Mechanicsburg High School Sport: _____

Height _____ Weight _____ % Body Fat (optional) _____ Brachial Artery BP _____/_____/_____ (_____/_____, ____/____) RP _____

If either the brachial artery blood pressure (BP) or resting pulse (RP) is above the following levels, further evaluation by the student's primary care physician is recommended.

Age 10-12: BP: >126/82, RP: >104; **Age 13-15:** BP: >136/86, RP >100; **Age 16-25:** BP: >142/92, RP >96.

Vision: R 20/____ L 20/____ Corrected: YES NO (circle one) Pupils: Equal____ Unequal____

MEDICAL	NORMAL	ABNORMAL FINDINGS
Appearance		
Eyes/Ears/Nose/Throat		
Hearing		
Lymph Nodes		
Cardiovascular		<input type="checkbox"/> Heart murmur <input type="checkbox"/> Femoral pulses to exclude aortic coarctation <input type="checkbox"/> Physical stigmata of Marfan syndrome
Cardiopulmonary		
Lungs		
Abdomen		
Genitourinary (males only)		
Neurological		
Skin		
MUSCULOSKELETAL	NORMAL	ABNORMAL FINDINGS
Neck		
Back		
Shoulder/Arm		
Elbow/Forearm		
Wrist/Hand/Fingers		
Hip/Thigh		
Knee		
Leg/Ankle		
Foot/Toes		

I hereby certify that I have reviewed the HEALTH HISTORY, performed a comprehensive initial pre-participation physical evaluation of the herein named student, and, on the basis of such evaluation and the student's HEALTH HISTORY, certify that, except as specified below, the student is physically fit to participate in Practices, Inter-School Practices, Scrimmages, and/or Contests in the sport(s) consented to by the student's parent/guardian in Section 2 of the PIAA Comprehensive Initial Pre-Participation Physical Evaluation form:

CLEARED **CLEARED**, with recommendation(s) for further evaluation or treatment for: _____

NOT CLEARED for the following types of sports (please check those that apply):

COLLISION CONTACT NON-CONTACT STRENUOUS MODERATELY STRENUOUS NON-STRENUOUS

Due to _____

Recommendation(s)/Referral(s) _____

AME's Name (print/type) _____ License # _____

Address _____ Phone () _____ - _____

AME's Signature _____ MD, DO, PAC, CRNP, or SNP (circle one) Certification Date of CIPPE ____/____/____

THIS FORM MUST BE COMPLETED FOR EACH SPORT

**MECHANICSBURG AREA SCHOOL DISTRICT
SPORTS MEDICINE DEPARTMENT
500 SOUTH BROAD STREET
MECHANICSBURG, PA 17055-4199
717-691-4548**

PERSONAL AND EMERGENCY INFORMATION

PERSONAL INFORMATION

Student's Name _____ Age _____ Grade _____

Sport _____

Current Physical Address _____

Parent Email Address: _____

Parent Primary Phone: (____) _____ - _____

Parent Secondary Phone: (____) _____ - _____

EMERGENCY INFORMATION

Emergency Contact Person's Name _____ Relationship _____

Address _____ Telephone: (____) _____ - _____

Medical Insurance Carrier _____ Policy Number _____

Address _____ Telephone: (____) _____ - _____

Family Physician's Name _____, MD or DO (circle one)

Address _____ Telephone: (____) _____ - _____

Student's Allergies _____

Student's Health Condition(s) of Which an Emergency Physician Should be Aware _____

Student's Prescription Medications _____

Student's Immunizations (e.g. tetanus/diphtheria; measles, mumps, rubella; hepatitis A, B; influenza; poliomyelitis, pneumococcal; meningococcal; varicella):

Up to date

Not up to date