

Medical Examination ~~Prior to Determine Fitness for~~
Participation in Athletics on a School-
Sponsored Interscholastic or Intramural Team or Squad

Mar 16
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R 2431.2 MEDICAL EXAMINATION PRIOR TO DETERMINE FITNESS
FOR PARTICIPATION IN ATHLETICS ON A SCHOOL-SPONSORED
INTERSCHOLASTIC OF INTRAMURAL TEAM OR SQUAD

~~A. A medical examination conducted to determine the fitness of a pupil in grades six through twelve for participation in a school-sponsored interscholastic or intramural athletic team or squad shall include, as a minimum, the following:~~

~~1. Health History Questionnaire~~

~~A health history questionnaire must be completed as part of the required medical examination. The medical history questionnaire shall be completed and signed by the parent(s) or legal guardian(s) of the pupil, to determine whether the pupil:~~

- ~~a. Has been medically advised not to participate in any sport, and the reason for such advice;~~
- ~~b. Is under physician's care and the reasons for such care;~~
- ~~c. Has experienced loss of consciousness after an injury;~~
- ~~d. Has experienced a fracture or dislocation;~~
- ~~e. Has undergone any surgery;~~
- ~~f. Takes any medication on a regular basis, the names of such medication, and the reasons for such medication;~~
- ~~g. Has allergies including, but not limited to: hives, asthma, or reactions to bee stings;~~
- ~~h. Has experienced frequent chest pains or palpitations;~~
- ~~i. Has a recent history of fatigue and undue tiredness;~~
- ~~j. Has a history of fainting with exercise;~~
- ~~k. Has a history of a family member who died suddenly; and~~



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1. ~~Has a history of any past health events required to be reported to the examining physician, advanced practice nurse, or physician's assistant.~~

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2. ~~Report of Health Findings of the Medical Examination~~

~~The report of health findings of the medical examination for pupils in grades six through twelve participating in a school-sponsored interscholastic or intramural athletic team or squad shall be documented on the Preparticipation Physical Examination Form approved by the Commissioner of Education to determine whether the pupil had or currently has any of the following conditions since their last physical:~~

- a. ~~Injuries;~~
- b. ~~Chronic or ongoing illness;~~
- c. ~~Prescribed medication;~~
- d. ~~Allergies;~~
- e. ~~Head related injuries;~~
- f. ~~Heart related conditions;~~
- g. ~~Eye, ear, nose, mouth, or throat conditions;~~
- h. ~~Neuromuscular/orthopedic condition; and~~
- i. ~~General or exercise related conditions.~~

3. ~~Medical Report Determination~~

~~The medical report shall include a determination concerning the pupil's participation from the examining physician, advanced practice nurse, or physician's assistant which includes, at a minimum, the following normalities:~~

- a. ~~Measurement of weight, height, and blood pressure;~~
- b. ~~Examination of the skin to determine the presence of infection, scars of previous surgery or trauma, jaundice, and purpura;~~



- ~~e. — Examination of the eyes to determine visual acuity, use of eyeglasses or contact lenses and examination of the sclera for the presence of jaundice;~~

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- ~~d. — Examination of the ears to determine the presence of acute or chronic infection, perforation of the eardrum, and gross hearing loss;~~
- ~~e. — Examination of the nose to assess the presence of deformity which may affect endurance;~~
- ~~f. — Assessment of the neck, back and spine to determine range of motion, the presence of pain associated with such motion, and abnormal curvature of the spine;~~
- ~~g. — Examination of chest contour;~~
- ~~h. — Auscultation and percussion of the lungs;~~
- ~~i. — Assessment of the heart with attention to the presence of murmurs, noting rhythm and rate;~~
- ~~j. — Assessment of the abdomen with attention to the possible presence of hepatomegaly, splenomegaly, or abnormal masses;~~
- ~~k. — Examination of upper and lower extremities to determine abnormal mobility or immobility, deformity, instability, muscle weakness or atrophy, surgical scars, and varicosities;~~
- ~~l. — Examination of the testes to determine presence and descent of both testes, abnormal masses or configurations, or hernia;~~
- ~~m. — Assessment of physiological maturation, and~~
- ~~n. — Neurological examination to assess balance and coordination.~~

~~The medical report shall indicate whether the pupil is allowed or disallowed to participate in a program of athletic competition and must be completed and signed by the original examining physician, advanced practice nurse, or physician's assistant. A form that is incomplete shall be returned to the pupil's medical home for completion. A pupil that~~



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~~does not have a completed Athletic Preparticipation Physical Examination Form shall not be permitted to participate.~~

B. ~~Health History Update~~

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~~Each pupil whose medical examination was completed more than sixty days prior to the first practice session of the athletic competition shall provide a health history update of medical problems experienced since the last medical examination. The health history update, completed and signed by the pupil's parent(s) or legal guardian(s), shall include the following information about the pupil:~~

- ~~1. Hospitalizations and operations;~~
- ~~2. Illnesses;~~
- ~~3. Injuries;~~
- ~~4. Care administered by a physician of medicine or osteopathy, advanced practice nurse, or physician's assistant; and~~
- ~~5. Medications.~~

C. ~~Written Notification to Parent/Legal Guardian~~

~~The school district will provide written notification to the parent(s) or legal guardian(s), signed by the school physician, stating approval of the pupil's participation in a program of athletic competition based solely on the medical report, or the reasons for the school physician's disapproval of the pupil's participation.~~

Adopted: 15 January 2013

Revised: 16 April 2013



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- A. Students are required to receive medical examinations in accordance with the provisions of N.J.S.A. 18A:40-4 and N.J.A.C. 6A:16-2.2(f). Each student medical examination shall be conducted at the medical home of the student. If a student does not have a medical home, the school district shall provide the examination at the school physician's office or other comparably equipped facility.

The school district shall ensure students receive medical examinations in accordance with N.J.A.C. 6A:16-2.2(f) and prior to participation on a school-sponsored interscholastic or intramural team or squad for students in grades six through twelve.

1. **Required Medical Examination**

- a. The examination shall be conducted within 365 days prior to the first day of official practice in an athletic season and shall be conducted by a licensed physician, advanced practice nurse (APN), or physician assistant (PA).
- b. The physical examination shall be documented using the Preparticipation Physical Evaluation (PPE) form developed jointly by the American Academy of Family Physicians, American Academy of Pediatrics, American College of Sports Medicine, American Medical Society for Sports Medicine, American Orthopaedic Society for Sports Medicine, and American Osteopathic Academy of Sports Medicine and is available online at, <http://www.state.nj.us/education/students/safety/health/records/athleticphysicalsform.pdf>, in accordance with N.J.S.A. 18A:40-41.7.



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- (1) **Prior to performing a preparticipation physical examination, the licensed physician, APN, or PA who performs the student-athlete's physical examination shall complete the Student-Athlete Cardiac Screening professional development module and shall sign the certification statement on the PPE form attesting to the completion, pursuant to N.J.S.A. 18A:40-41.d.**
 - (a) **If the PPE form is submitted without the signed certification statement and the school district has confirmed that the licensed physician, APN, or PA from the medical home did not complete the module, the student-athlete's parent may obtain a physical examination from a physician who can certify completion of the module or request that the school physician provides the examination.**
 - (2) **The medical report shall indicate if a student is allowed or not allowed to participate in the required sports categories and shall be completed and signed by the original examining physician, APN, or PA.**
 - (3) **An incomplete form shall be returned to the student's medical home for completion unless the school nurse can provide documentation to the school physician that the missing information is available from screenings completed by the school nurse or physician within the prior 365 days.**
- c. **Each student whose medical examination was completed more than ninety days prior to the first day of official practice in an athletic season shall provide a health history update questionnaire completed and signed by the student's parent. The completed health history update questionnaire shall include information listed below as required by N.J.S.A. 18A:40-41.7.b. The completed health history update**



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questionnaire shall be reviewed by the school nurse and, if applicable, the school athletic trainer and shall include information as to whether, in the time period since the date of the student's last preparticipation physical examination, the student has:

- (1) Been advised by a licensed physician, APN, or PA not to participate in a sport;
- (2) Sustained a concussion, been unconscious, or lost memory from a blow to the head;
- (3) Broken a bone or sprained, strained, or dislocated any muscles or joints;
- (4) Fainted or blacked out;
- (5) Experienced chest pains, shortness of breath, or heart racing;
- (6) Had a recent history of fatigue and unusual tiredness;
- (7) Been hospitalized, visited an emergency room, or had a significant medical illness;
- (8) Started or stopped taking any over the counter or prescribed medications; or
- (9) Had a sudden death in the family, or whether any member of the student's family under the age of fifty has had a heart attack or heart trouble.

- d. The school district shall provide to the parent written notification signed by the school physician stating approval of the student's participation in athletics based upon the medical report or the reasons for the school physician's disapproval of the student's participation.



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- e. **The Board of Education will not permit a student enrolled in grades six to twelve to participate on a school-sponsored interscholastic or intramural team or squad unless the student submits a PPE form signed by the licensed physician, APN, or PA who performed the physical examination and, if applicable, a completed health history update questionnaire, pursuant to N.J.S.A. 18A:40-41.7.c.**

- f. **The school district shall distribute to a student-athlete and his or her parent the sudden cardiac arrest pamphlet developed by the Commissioner of Education, in consultation with the Commissioner of Health, the American Heart Association, and the American Academy of Pediatrics, pursuant to N.J.S.A. 18A:40-41.**
 - (1) **A student-athlete and his or her parent annually shall sign the Commissioner-developed form that they received and reviewed the pamphlet, and shall return it to the student's school pursuant to N.J.S.A. 18A:40-41.d.**

 - (2) **The Commissioner shall update the pamphlet, as necessary, pursuant to N.J.S.A. 18A:40-41.b.**

 - (3) **The Commissioner shall distribute the pamphlet, at no charge, to all school districts and nonpublic schools, pursuant to N.J.S.A. 18A:40-41.b.**

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