KSU Athletic Physical Form

New Student Athlete: ☐

Athlete Name:		**Date:**
KSU ID:	**DOB:**	**Gender:** ☐ Male ☐ Female

PARTICIPATES IN THE FOLLOWING SPORT(S):

☐ Basketball	☐ Cross Country	☐ Soccer	☐ Softball	☐ Tennis
☐ Baseball	☐ Volleyball	☐ Golf	☐ Cheer	☐ Track/Field
☐ Dance	☐ Lacrosse	☐ Football	☐	☐

VITALS

Height:	**Weight:**	**BP:**	**HR:**
Eyes: L:_____ R:_____ OU:_____	**Hgb** *(females only)*:	**LMP(***females only)***:**	

Examination Findings:

HEENT		☐ WNL	☐ Abnormal:
UPPER EXTREMITIES	**Shoulders:**	☐ WNL	☐ Abnormal:
	Elbows:	☐ WNL	☐ Abnormal:
	Hand/Wrist:	☐ WNL	☐ Abnormal:
SPINE	**Neck:**	☐ WNL	☐ Abnormal:
	Thoracic:	☐ WNL	☐ Abnormal:
	Lumbar/Sacral:	☐ WNL	☐ Abnormal:
LOWER EXTREMITIES	**Hip:**	☐ WNL	☐ Abnormal:
	Knee:	☐ WNL	☐ Abnormal:
	Ankle/ Foot:	☐ WNL	☐ Abnormal:
HEART			
LUNGS			
SKIN			
ABDOMEN	**Spleen:**	☐ WNL	☐ Abnormal:
	Liver:	☐ WNL	☐ Abnormal:
GENITOURINARY (Males)	**Hernia:**	☐ WNL	☐ Abnormal:
	Testicles:	☐ WNL	☐ Abnormal:

CLEARANCE

Cleared For:	
Not Cleared	Pending:

Provider Signature

Date of Physical

Sickle Cell Trait Information

[excerpts from National Athletic Trainers Association (NATA) Consensus Statement]

Sickle cell disease is an inherited disorder that affects red blood cells. Sickle cell trait is a condition in which there is one gene for the formation of sickle hemoglobin and one for the formation of normal hemoglobin. Usually, people with sickle cell trait do not have any medical problems and they can lead normal lives. They do not develop sickle cell disease.

During intense or extensive exertion, the sickle hemoglobin can change the shape of red cells from round to quarter-moon, or "sickle." This change, exertional sickling, can pose a grave risk for some athletes. In the past seven years, exertional sickling has killed nine athletes, ages 12 through 19.

Research shows how and why sickle red cells can accumulate in the bloodstream during intense exercise. Sickle cells can "logjam" blood vessels and lead to collapse from ischemic rhabdomyolysis, the rapid breakdown of muscles starved of blood. Major metabolic problems from explosive rhabdomyolysis can threaten life. Sickling can begin in 2-3 minutes of any all-out exertion – and can reach grave levels soon thereafter if the athlete continues to struggle. Heat, dehydration, altitude, and asthma can increase the risk for and worsen sickling, even when exercise is not all-out. Despite telltale features, collapse from exertional sickling in athletes is under-recognized and often misdiagnosed. Sickling collapse is a medical emergency.

In addition to African Americans (1 in 12), the sickle gene is also present in those of Mediterranean, Middle Eastern, Indian, Caribbean and South and Central American ancestry; hence, the required screening of all newborns in the United States. While rare (one in 2,000 to 10,000), white Americans carry the sickle gene.

In the past four decades, exertional sickling has killed at least 15 football players. In the past seven years alone, sickling has killed nine athletes: five college football players in training, two high school athletes (one a 14-year-old female basketball player), and two 12-year-old boys training for football. Of 136 sudden, non-traumatic sports deaths in high school and college athletes over a decade, seven (5%) were from exertional sickling.

The NCAA and the NATA have recommended testing to determine Sickle Cell Trait Status. Testing for Sickle Cell Trait involves a blood draw (needle). In response to these recommendations, Kennesaw State University has decided to offer Sickle Cell Testing for all NCAA intercollegiate student-athletes.

Please note that a Positive Sickle Cell Trait test does not mean that you cannot participate in KSU Athletics. It simply means that you, as well as the KSU Coaches and Athletic Trainers, need to monitor your condition and your hydration level more closely.

Please complete the attached form(s) regarding Sickle Cell Trait Status and testing.

SICKLE CELL TRAIT SCREENING
ASSUMPTION OF RISK, LIABILITY RELEASE,
AND COVENANT NOT TO SUE

This is a legally-binding Release made by me, _____ (student), and my parent/legal guardian_____(if under 21).

This is to acknowledge that Kennesaw State University (KSU) has provided me with information about sickle cell disease and sickle cell trait and that the disorder may adversely affect persons involved in physical exertion, sports or intense exercise. KSU has also informed me of the NCAA's recommendation that all student athletes be screened for the sickle cell trait if they are not aware of their sickle cell trait status in an effort to avoid future health problems, sickness or death. KSU has provided me with the opportunity to be screened for the sickle cell trait at no cost to me, and I have made an informed decision to decline the screening.

I fully recognize that there are dangers and risks to which I may be exposed by participating in sports activity if I have the sickle cell disease or sickle cell trait. The following is a description and examples of specific, significant or non-obvious dangers and risks associated with the activity: dehydration, collapse from ischemic rhabdomyolysis (the rapid breakdown of muscles starved of blood), heat exhaustion, muscle cramps, fainting, paralysis, coma and death. I understand that KSU does not require me to participate in sports or physical activity, but I want to do so, despite the possible dangers and risks and despite this Release.

I therefore agree to assume and take on myself all of the risks and responsibilities in any way associated with participating in sports without the sickle cell trait screening. In consideration of and return for the services, facilities, and other assistance provided to me by KSU in this activity, I release KSU (and its governing board, employees, and agents) from any and all liability, claims and actions that may arise from injury or harm to me, from my death or from damage to my property in connection with this activity. I understand that this Release covers liability, claims and actions caused entirely or in part by any acts or failures to act of KSU (or its governing board, employees, or agents), including but not limited to negligence, mistake, or failure to supervise by KSU.

I recognize that this Release means I am giving up, among other things rights to sue KSU, its governing board, employees, and agents for injuries, damages, or losses I may incur. I also understand that this Release binds my heirs, executors, administrators, and assigns, as well as myself.

I have read this entire Release, I fully understand it and I agree to be legally bound by it.

THIS IS A RELEASE OF YOUR RIGHTS. READ CAREFULLY BEFORE SIGNING.

_____
Releasor's Signature

_____
(Print Name)

_____
(Parent or Guardian if Releasor is under 21 years old)

_____
Date

KSU/LAform7.24.09