Tips for Completing Athletics Physical Update Forms

- Use pen to complete all forms.
- Page one - Complete all demographics and emergency contact information.
- Health History Update Questionnaire - Complete entire form. Parent must sign and date.
- Clearance Status Letter – Write the student’s name, sport and school year. Physician will complete the rest.
- Sudden Cardiac Death Pamphlet Sign Off Sheet – Name of School, Student Signature, Parent Signature and Date are required.
- Cardiac Pamphlet is for parents to keep.
- Use and Misuse of Opioid Drugs Fact Sheet – Name of School, Student Signature, Parent Signature and Date are required.
- The Opioid Use and Misuse Pamphlet is for parents to keep.

Completed Sports Physical Update Forms are to be returned to the Nurse’s Office 7-10 days prior to the scheduled physical date.

June 18, 2019
Health Office
Mount Olive Department of Athletics
Update Form

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<th>Home Of The Marauders</th>
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<td>Nurse</td>
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<th>Eligible</th>
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For official use only

Today's Date: ___________________________ Date of Last Physical: ___________________________

Student's Name: ___________________________ Sex: M F (circle one) Age: ______ Place of Birth (City & State) _____________

Address: ________________________________________________________________

City/State/Zip: ___________________________

Date of Birth: ________ Sport: ___________ Home Phone: ___________________________

Grade: ________ School: ____________________ District: __________________________

Physician: ___________________________ Phone: ___________________________ Fax: ___________________________

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EMERGENCY CONTACT INFORMATION

Name: ___________________________ Relationship to student: ___________________________

Phone (work): ___________________________ Phone (home): ___________________________

Phone (cell): ___________________________

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Mount Olive Nurse’s Office To Complete Information Below:

Date of Physical: ________________________________________________________________

Physical performed by: ___________________________________________________________
STATE OF NEW JERSEY
DEPARTMENT OF EDUCATION

HEALTH HISTORY UPDATE QUESTIONNAIRE

Name of School ____________________________

To participate on a school-sponsored interscholastic or intramural athletic team or squad, each student whose physical examination was completed more than 90 days prior to the first day of official practice shall provide a health history update questionnaire completed and signed by the student's parent or guardian.

Student ____________________________ Age _______ Grade _______

Date of Last Physical Examination ____________________ Sport _______

Since the last pre-participation physical examination, has your son/daughter:

1. Been medically advised not to participate in a sport? Yes___ No____
   If yes, describe in detail ____________________________________________

2. Sustained a concussion, been unconscious or lost memory from a blow to the head? Yes___ No____
   If yes, explain in detail ____________________________________________

3. Broken a bone or sprained/strained/dislocated any muscle or joints? Yes___ No____
   If yes, describe in detail ____________________________________________

4. Fainted or "blacked out"? Yes___ No____
   If yes, was this during or immediately after exercise? ____________________________

5. Experienced chest pains, shortness of breath or "racing heart"? Yes___ No____
   If yes, explain ____________________________________________________________

6. Has there been a recent history of fatigue and unusual tiredness? Yes___ No____

7. Been hospitalized or had to go to the emergency room? Yes___ No____
   If yes, explain in detail __________________________________________________

8. Since the last physical examination, has there been a sudden death in the family or has any member of the family under age 50 had a heart attack or "heart trouble"? Yes___

9. Started or stopped taking any over-the-counter or prescribed medications? Yes___ No____
   If yes, name of medication(s) ____________________________________________

Date: ________________________ Signature of parent/guardian __________________

PLEASE RETURN COMPLETED FORM TO THE SCHOOL NURSE'S OFFICE
Dear Parent/Guardian:

This letter serves as written notification that your son/daughter ______________________, can/cannot (circle one) participate in ______________________ sports for the 2019-2020 school year pursuant to N.J.A.C. 6A:16-2.2. Please be advised that this letter reflects the recommendation of the examining physician who completed and signed the Athletic Pre-Participation Examination Form (Parts A and B) submitted to the school on behalf of your son/daughter.

If your child is deemed unable to participate based on an incomplete form, please ensure that the original examining physician completes the form and returns it to the school to be reviewed for eligibility.

Remarks: ___________________________________________________________

______________________________________________________________

Thank you for your cooperation.

Sincerely,

Physician’s Stamp ___________________________ Date ______________________

Physician’s Signature ______________________________________________
State of New Jersey
DEPARTMENT OF EDUCATION

Sudden Cardiac Death Pamphlet
Sign-Off Sheet

Name of School District: __________________________________________________________

Name of Local School: __________________________________________________________

I/We acknowledge that we received and reviewed the Sudden Cardiac Death in Young Athletes pamphlet.

Student Signature: _____________________________________________________________

Parent or Guardian
Signature: _________________________________________________________________

Date: ______________________________________________________________________
Sudden Cardiac Death in Young Athletes

Learn and Live

American Heart Association
Department of Education

The Basic Facts on Sudden Cardiac Death in Young Athletes

What are the Most Common Causes?

1. Heart Rhythm Abnormalities
2. Coronary Artery Disease
3. Congenital Heart Defects
4. Cardiomyopathy

How Common is Sudden Death in Young Athletes?

Of all deaths among athletes, 77% occur suddenly and unexpectedly. It is estimated that this number represents 10% of all sudden deaths in the population. The most common cause of sudden death in young athletes is hypertrophic cardiomyopathy.

Is Sudden Cardiac Death in Young Athletes Preventable?

Yes. It is preventable through early detection and management of risk factors.

Collaborating Agencies:

- American Heart Association
- American College of Cardiology
- American Academy of Pediatrics
- American College of Sport Medicine

Website Resources:

www.heart.org
www.heart.org/healthy/conditions/sudden-cardiac-death-in-athletes

Address for Further Information:

American Heart Association
1717 N Street, NW
Washington, DC 20036
Toll Free: 1-877-AHA-USA1 (24-2871)
www.heart.org
www.sudden-cardiac-death-in-athletes.org

For more information about Sudden Cardiac Death in Young Athletes, please visit the American Heart Association's website.
OPPIOID USE AND MISUSE

EDUCATIONAL FACT SHEET

Keeping Student-Athletes Safe

School athletics can serve an integral role in students’ development. In addition to providing healthy forms of exercise, school athletics foster friendships and camaraderie, promote sportsmanship and fair play, and instill the value of competition.

Unfortunately, sports activities may also lead to injury and, in some cases, result in pain that is severe or long-lasting enough to require a prescription opioid painkiller. It is important to understand that overdoses from opioids are on the rise and are killing Americans of all ages and backgrounds. Families and communities across the country are coping with the health, emotional, and economic effects of this epidemic.

This educational fact sheet, created by the New Jersey Department of Education as required by state law (N.J.S.A. 18A:40-41.10), provides information concerning the use and misuse of opioid drugs in the event that a health care provider prescribes a student-athlete or cheerleader an opioid for a sports-related injury. Student-athletes and cheerleaders participating in an interscholastic sports program and their parent or guardian, if the student is under age 18, must provide their school district written acknowledgment of their receipt of this fact sheet.

In some cases, student-athletes are prescribed these medications. According to research, about a third of young people studied obtained pills from their own previous prescriptions (i.e., an unfinished prescription used outside of a physician’s supervision), and 63 percent of adolescents had unsupervised access to their prescription medications. It is important for parents to understand the possible hazard of having unsecured prescription medications in their homes. Parents should also understand the importance of proper storage and disposal of medications, even if they believe their child would not engage in non-medical use or diversion of prescription medications.

According to the National Council on Alcoholism and Drug Dependence, 12 percent of male athletes and 8 percent of female athletes had used prescription opioids in the 12-month period studied. In the early stages of abuse, the athlete may exhibit unprovoked nausea and/or vomiting. However, as he or she develops a tolerance to the drug, these signs will diminish. Constipation is not uncommon, but may not be reported. One of the most significant indications of a possible opioid addiction is an athlete’s decrease in academic or athletic performance, or a lack of interest in his or her sport. If these warning signs are noticed, best practices call for the student to be referred to the appropriate professional for screening, such as provided through an evidence-based practice to identify problematic use, abuse, and dependence on illicit drugs (e.g., Screening, Brief Intervention, and Referral to Treatment [SBIRT]) offered through the New Jersey Department of Health.

What Are Some Ways Opioid Use and Misuse Can Be Prevented?

According to the New Jersey State Interscholastic Athletic Association (NJSIAA) Sports Medical Advisory Committee chair, John F. Kilgour, D.O., “Studies indicate that about 80 percent of heroin users started out by abusing narcotic painkillers.”

The Sports Medical Advisory Committee, which includes representatives of NJSIAA member schools as well as experts in the field of healthcare and medicine, recommends the following:

- The pain from most sports-related injuries can be managed with non-narcotic medications such as acetaminophen, non-steroidal anti-inflammatory medications like ibuprofen, naproxen or aspirin. Read the label carefully and always take the recommended dose, or follow your doctor’s instructions. More is not necessarily better when taking an over-the-counter (OTC) pain medication, and it can lead to dangerous side effects.
- Ice therapy can be utilized appropriately as an anesthetic.
- Always discuss with your physician exactly what is being prescribed for pain and request to avoid narcotics.
- In extreme cases, such as severe trauma or post-surgical pain, opioid pain medication should be prescribed for more than five days at a time.
- Parents or guardians should always control the dispensing of pain medications and keep them in a safe, non-accessible location; and
- Unused medications should be disposed of immediately upon cessation of use. Ask your pharmacist about drop-off locations or home disposal kits like Deterra or Medisaway.
Even With Proper Training and Prevention, Sports Injuries May Occur

There are two kinds of sports injuries. Acute injuries happen suddenly, such as a sprained ankle or strained back. Chronic injuries may happen after someone plays a sport or exercises over a long period of time, even when applying overuse-preventative techniques.

Athletes should be encouraged to speak up about injuries, coaches should be supported in injury-prevention decisions, and parents and young athletes are encouraged to become better educated about sports safety.

What Are Some Ways to Reduce the Risk of Injury?

Half of all sports medicine injuries in children and teens are from overuse. An overuse injury is damage to a bone, muscle, ligament, or tendon caused by repetitive stress without allowing time for the body to heal. Children and teens are at increased risk for overuse injuries because growing bones are less resilient to stress. Also, young athletes may not know that certain symptoms are signs of overuse.

The best way to deal with sports injuries is to keep them from happening in the first place. Here are some recommendations to consider:

- **Preparation:** Obtain the preparticipation physical evaluation prior to participation on a school-sponsored interscholastic or intramural athletic team or squad.
- **Conditioning:** Maintain a good fitness level during the season and off-season. Also important are proper warm-up and cooldown exercises.
- **Adequate Hydration:** Keep the body hydrated to help it more easily pump blood to muscles, which helps muscles work efficiently.
- **Rest Up:** Take at least 1 day off per week from organized activity to recover physically and mentally. Athletes should take a combined 12 days off per month from a specific sport (may be divided throughout the year in one-month increments). Athletes may remain physically active during rest periods through alternate low-intensity activities such as stretching, yoga or walking.
- **Proper Equipment:** Wear appropriate and properly fitted protective equipment such as pads (neck, shoulder, elbow, chest, knee, and shin), helmets, mouthpieces, face guards, protective cups, and eyewear. Do not assume that protective gear will prevent all injuries while performing more dangerous or risky activities.

Resources for Parents and Students on Preventing Substance Misuse and Abuse

The following list provides some examples of resources:

- **National Council on Alcoholism and Drug Dependence - NJ:** Promotes addiction treatment and recovery.
- **New Jersey Department of Health, Division of Mental Health and Addiction Services:** Committed to providing consumers and families with a wellness and recovery-oriented model of care.
- **New Jersey Prevention Network:** Includes a parent’s guide on the effects of opioids.
- **Operation Prevention Parent Toolkit:** Designed to help parents learn more about the opioid epidemic, recognize warning signs, and open lines of communication with their children and those in the community.
- **Partner for a Drug Free New Jersey:** New Jersey’s anti-drug alliance created to localize and strengthen drug-prevention media efforts to prevent unlawful drug use, especially among young people.

The Science of Addiction: The Stories of Teens shares common misconceptions about opioids through the voices of teens.

Youth IMPACING NJ is made up of youth representatives from coalitions across the state of New Jersey who have been impacting their communities and peers by spreading the word about the dangers of underage drinking, marijuana use, and other substance misuse.

References:

1. Massachusetts Technical Assistance Partnership for Prevention
2. Center for Disease Control and Prevention
3. New Jersey State Intramural Athletic
4. Association (NJSSAA) Sports Medicine Advisory Committee (SMAC)
5. Athletic Management, David Coyle, athletic trainer, Binghamton High School, NJSSAA SMAC
6. National Institute of Alcohol and Drug Abuse
7. USA TODAY
8. American Academy of Pediatrics

An online version of this fact sheet is available on the New Jersey Department of Education’s Alcohol, Tobacco, and Other Drug Use webpage. Updated Jan. 30, 2018.
Mount Olive High School  
18 Corey Road  
Flanders, NJ 07836

Use and Misuse of Opioid Drugs Fact Sheet  
Student-Athlete and Parent/Guardian Sign-Off

In accordance with N.J.S.A. 18A:40-41.10, public school districts, approved private schools for students with disabilities, and nonpublic schools participating in an interscholastic sports program must distribute this Opioid Use and Misuse Educational Fact Sheet to all student-athletes and cheerleaders. In addition, schools and districts must obtain a signed acknowledgement of receipt of the fact sheet from each student-athlete and cheerleader, and for students under age 18, the parent or guardian must also sign.

This sign-off sheet is due to the appropriate school personnel as determined by your district prior to the first official practice session of the spring 2018 athletic season (March 2, 2018, as determined by the New Jersey State Interscholastic Athletic Association) and annually thereafter prior to the student-athlete’s or cheerleader’s first official practice of the school year.

Name of School:

Name of School District (if applicable):

I/We acknowledge that we received and reviewed the Educational Fact Sheet on the Use and Misuse of Opioid Drugs.

Student Signature: ________________________________

Parent/Guardian Signature (also needed if student is under age 18): _______________________

Date: __________________

*Does not include athletic clubs or intramural events.*