

Public Schools of Edison Township
Sports Physicals

**SCHOLASTIC STUDENT-ATHLETE SAFETY ACT
INFORMATION FACT SHEET
FOR PARENTS/GUARDIANS**

Prior to participation on a school-sponsored interscholastic or intramural athletic team or squad, each student-athlete in grades 6 through 12 must present a completed pre-participation physical evaluation (PPE) form / **PHYSICAL FORM #14A** to the designated school staff member (Coach in High School or School Nurse in Middle Schools). Important information regarding the PPE-FORM **#14A** is provided below, and you should feel free to share with your child's medical home health care provider.

1. **The Form #14A-may ONLY be completed by a licensed physician, advanced practice nurse (APN) or physician assistant (PA) that has completed the Student-Athlete Cardiac Assessment professional development module.** It is recommended that you verify that your medical provider has completed this module before scheduling an appointment for a Physical.
2. The required **Form #14A**, must be conducted within 365 days prior to the first official practice in an athletic season. **Form #14A** is available on the District website at www.edison.k12.nj.us, scroll over to Departments then Health Services and on the left scroll over to forms and you will find **Form 14A**.
3. The parent/guardian must complete the *History Form* (page one), and insert the date of the required physical examination at the top of the page.
4. The parent/guardian must complete *The Athlete with Special Needs: Supplemental History Form* (page two), if applicable, for a student with a disability that limits major life activities, and insert the date of the required physical examination on the top of the page.
5. The licensed physician, APN or PA who performs the physical examination must complete the remaining two pages of **Form 14A**, and insert the date of the examination on the *Physical Examination Form* (page three) and *Clearance Form* (page four).
6. The school district must provide written notification to the parent/guardian, signed by the school physician, indicating approval of the student's participation in a school-sponsored interscholastic or intramural athletic team or squad based upon review of the medical report, or must provide the reason(s) for the disapproval of the student's participation.
7. For student-athletes that had a medical examination completed more than 90 days prior to the first official practice in an athletic season, the *Health History Update Questionnaire* (HHQ-**Form 14G**) must be completed, and signed by the student's parent/guardian. The **Form 14G** must be reviewed by the school nurse and, if applicable, the school's athletic trainer. The **Form 14G** is available at the Edison website.

For more information, please review the *Frequently Asked Questions* which are available at <http://www.state.nj.us/education/students/safety/health/services/athlete/faq.pdf>. You may also direct questions to **the Coach, School Nurse or Athletic Director**.