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RICHLAND SCHOOL DISTRICT 2 HIGH SCHOOL PRE-PARTICIPATION PACKET FOR ATHLETICS

CHECKLIST

1._____Review

- Educational information regarding concussion
- Instructions for creating an account, completing required digital pre-participation forms, and uploading the completed SCHSL Physical Exam Form on Student Central

2._____Print SCHSL Physical Form Take form to exam. Provider must clear athlete to participate.

3._____Student Central All new athletes and parents should create a Student Central account. Returning athletes and parents should log in into their existing Student Central account. All athletes and parents need to complete the required digital pre-participation forms.
* Middle school athletes that will be participating in the eligible high school sports should put the high school they are participating at as an additional school in Student Central

4._____Upload completed SCHSL Physical Examination Form. All forms should be completed & uploaded to Student Central at least 1 week prior to any athletic participation**.** *Per SCHSL requirement – all forms must be dated after April 1, 2023.*

*Please place forms on a flat surface and ensure all corners can be seen in image before uploading

5._____Upload Birth Certificate to Student Central or verify again if uploaded previously.

Note: To be eligible to compete per the SCHSL, each athlete must also have:

- Academic eligibility
  - Middle School students participating in sports at the HS need to see their middle school AD to have the MS Eligibility form completed and submitted to the district for approval. Linked form: Middle School Eligibility Form.
- If you are a transfer student, you MUST see the Athletic Director to complete your transfer prior to participation.
- Once team rosters have been named, $50 participation fee paid to the fees office or online through parent portal to the school they are participating at. This fee only needs to be paid once for the school year even if they play multiple sports

A FACT SHEET FOR

High School Parents

CDC HEADS UP
SAFE BRAIN. STRONGER FUTURE.

This sheet has information to help protect your teens from concussion or other serious brain injury.

What Is a Concussion?

A concussion is a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move quickly back and forth. This fast movement can cause the brain to bounce around or twist in the skull, creating chemical changes in the brain and sometimes stretching and damaging the brain cells.

How Can I Help Keep My Teens Safe?

Sports are a great way for teens to stay healthy and can help them do well in school. To help lower your teens' chances of getting a concussion or other serious brain injury, you should:

- Help create a culture of safety for the team.
  - Work with their coach to teach ways to lower the chances of getting a concussion.
  - Emphasize the importance of reporting concussions and taking time to recover from one.
  - Ensure that they follow their coach's rules for safety and the rules of the sport.
  - Tell your teens that you expect them to practice good sportsmanship at all times.
- When appropriate for the sport or activity, teach your teens that they must wear a helmet to lower the chances of the most serious types of brain or head injury. There is no "concussion-proof" helmet. Even with a helmet, it is important for teens to avoid hits to the head.

How Can I Spot a Possible Concussion?

Teens who show or report one or more of the signs and symptoms listed below—or simply say they just "don't feel right" after a bump, blow, or jolt to the head or body—may have a concussion or other serious brain injury.

Signs Observed by Parents

- Appears dazed or stunned
- Forgets an instruction, is confused about an assignment or position, or is unsure of the game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior, or personality changes
- Can't recall events *prior to* or *after* a hit or fall

Symptoms Reported by Teens

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness, or double or blurry vision
- Bothered by light or noise
- Feeling sluggish, hazy, foggy, or groggy
- Confusion, or concentration or memory problems
- Just not "feeling right," or "feeling down"

Talk with your teens about concussion. Tell them to report their concussion symptoms to you and their coach right away. Some teens think concussions aren't serious or worry that if they report a concussion they will lose their position on the team or look weak. Remind them that *it's better to miss one game than the whole season.*

GOOD TEAMMATES KNOW:

IT'S BETTER TO MISS ONE GAME THAN THE WHOLE SEASON.

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CONCUSSIONS AFFECT EACH TEEN DIFFERENTLY.

While most teens with a concussion feel better within a couple of weeks, some will have symptoms for months or longer. Talk with your teens' healthcare provider if their concussion symptoms do not go away or if they get worse after they return to their regular activities.

Plan ahead. What do you want your teen to know about concussion?

What Are Some More Serious Danger Signs to Look Out For?

In rare cases, a dangerous collection of blood (hematoma) may form on the brain after a bump, blow, or jolt to the head or body and can squeeze the brain against the skull. Call 9-1-1, or take your teen to the emergency department right away if, after a bump, blow, or jolt to the head or body, he or she has one or more of these danger signs:

- One pupil larger than the other
- Drowsiness or inability to wake up
- A headache that gets worse and does not go away
- Slurred speech, weakness, numbness, or decreased coordination
- Repeated vomiting or nausea, convulsions or seizures (shaking or twitching)
- Unusual behavior, increased confusion, restlessness, or agitation
- Loss of consciousness (passed out/knocked out). Even a brief loss of consciousness should be taken seriously

What Should I Do If My Teen Has a Possible Concussion?

As a parent, if you think your teen may have a concussion, you should:

1. Remove your teen from play.
2. Keep your teen out of play the day of the injury. Your teen should be seen by a healthcare provider and only return to play with permission from a healthcare provider who is experienced in evaluating for concussion.
3. Ask your teen's healthcare provider for written instructions on helping your teen return to school. You can give the instructions to your teen's school nurse and teacher(s) and return-to-play instructions to the coach and/or athletic trainer.

Do not try to judge the severity of the injury yourself. Only a healthcare provider should assess a teen for a possible concussion. You may not know how serious the concussion is at first, and some symptoms may not show up for hours or days. A teen's return to school and sports should be a gradual process that is carefully managed and monitored by a healthcare provider.

Teens who continue to play while having concussion symptoms or who return to play too soon—while the brain is still healing—have a greater chance of getting another concussion. A repeat concussion that occurs while the brain is still healing from the first injury can be very serious, and can affect a teen for a lifetime. It can even be fatal.

Revised January 2019

To learn more, go to **cdc.gov/HEADSUP**

CDC HEADS UP

A FACT SHEET FOR

High School Athletes

CDC HEADS UP
SAFE BRAIN. STRONGER FUTURE.

This sheet has information to help you protect yourself from concussion or other serious brain injury and know what to do if a concussion occurs.

WHAT IS A CONCUSSION?

A concussion is a brain injury that affects how your brain works. It can happen when your brain gets bounced around in your skull after a fall or hit to the head.

What Should I Do If I Think I Have a Concussion?

Report It. Tell your coach, parent, and athletic trainer if you think you or one of your teammates may have a concussion. It's up to you to report your symptoms. Your coach and team are relying on you. Plus, you won't play your best if you are not feeling well.

Get Checked Out. If you think you have a concussion, do not return to play on the day of the injury. Only a healthcare provider can tell whether you have a concussion and when it is OK to return to school and play. The sooner you get checked out, the sooner you may be able to safely return to play.

Give Your Brain Time to Heal. A concussion can make everyday activities, such as going to school, harder. You may need extra help getting back to your normal activities. Be sure to update your parents and doctor about how you are feeling.

Why Should I Tell My Coach and Parent About My Symptoms?

- Playing or practicing with a concussion is dangerous and can lead to a longer recovery.
- While your brain is still healing, you are much more likely to have another concussion. This can put you at risk for a more serious injury to your brain and can even be fatal.

GOOD TEAMMATES KNOW:

IT'S BETTER TO MISS ONE GAME THAN THE WHOLE SEASON.

cdc.gov/HEADSUP

How Can I Tell If I Have a Concussion?

You may have a concussion if you have any of these symptoms after a bump, blow, or jolt to the head or body:

- **Get a headache**
- **Feel dizzy, sluggish, or foggy**
- **Are bothered by light or noise**
- **Have double or blurry vision**
- **Vomit or feel sick to your stomach**
- **Have trouble focusing or problems remembering**
- **Feel more emotional or "down"**
- **Feel confused**
- **Have problems with sleep**

Concussion symptoms usually show up right away, but you might not notice that something "isn't right" for hours or days. A concussion feels different to each person, so it is important to tell your parents and doctor how you are feeling.

How Can I Help My Team?

Protect Your Brain.
Avoid hits to the head and follow the rules for safe and fair play to lower your chances of getting a concussion. Ask your coaches for more tips.

Be a Team Player.
You play an important role as part of a team. Encourage your teammates to report their symptoms and help them feel comfortable taking the time they need to get better.

The information provided in this document or through linkages to other sites is not a substitute for medical or professional care. Questions about diagnosis and treatment for concussion should be directed to a physician or other healthcare provider.

To learn more, go to cdc.gov/HEADSUP

CDC HEADS UP

Athletic Pre-Participation Forms Getting Started Guide (Parent & Student)

Your school has elected to collect pre-participation forms online through BigTeams. Follow the steps below to complete pre-participation registration:

1. Create Accounts	• Both a parent and student are required to create separate accounts. Each account must have a unique email or mobile #. • Go to **https://studentcentral.bigteams.com/** • If your school has provided their *Quick Account Code*, TEXT the code to 69274 to create your parent & student account. **Creation of accounts can be done on all devices with a connection: Computers, Smart Phones, Tablets, iPads, etc.*
	• Home School selection- this is the school that you/your student attends/studies. • My student plays for both the Middle School and High School?! If your student plays on both a middle and high school team, upon account creation, select the home school in which your *STUDENT STUDIES*. You will be able to select a secondary school within the Additional Schools section after creating your account.
2. Emergency Contact Section	**STUDENT:** not required to input. Can proceed to clicking on "Link Account" **PARENT:** required to input as much information as possible, which will then automate information into the forms, saving time and duplicate work.
3. Link Parent & Student Accounts	Once logged in, you will be prompted to link the parent and student account. Enter the email address or mobile # to send an invitation to the parent/student. The invited person clicks on the link in the email or text message to finish the linking process. The invited person can also login and accept the link request by clicking on the Link Account Button and selecting accept.
	Why do I have to link accounts? Forms required by your school, often require both a parent and student signature to mark the form as completed. For the system to know what student and parent will be viewing and signing the proper forms, a linked parent/student account is required.
4. Athletic Forms button	Click the ***Athletic Forms button*** to move to the Pre-Participation Forms Overview Page and complete the required digital forms.
5. Select the Sports you will participate	In the ***Sports Interest*** section, check the sports you will be trying out for. By checking these sports, you are allowing the coach of that team to view your pre-participation paperwork…
6. Additional Schools (If Applicable)	If you/your student participate in sports at multiple schools, add the additional schools here. If you/your student do not play for multiple schools, leave this section blank. Adding additional schools will allow the Athletic Director(s) at the additional school(s) view your pre-participation paperwork.
7. Complete & Sign Digital Forms	Click on each form link, complete each form, and click the *Sign & Submit* button. **Both the parent and student must complete this step.** Your school/district chooses which forms require the student, parent, or student AND parent signatures. Upon completion of each form, you should be auto promoted to the next form.
	Students with accounts may begin completing digital forms immediately. Parents must be linked to a student account to see the electronic version of the forms. If they are not linked, they will only see example PDF versions of the forms. You can complete forms or see their status at any time by clicking on the ATHLETIC FORMS button. This gives the ability for students to send a parent linked account request and to upload the physical exam signed by the physician during group physicals.
	Upload Buttons are shown when you are required to upload a document instead of completing the web-form. For example, the physical exam form your physician completes or a birth certificate. These forms can be uploaded by either the parent or student but require the parents signature.
8. Accepted Forms Notification	When your school has accepted all forms, a notification will be sent to you stating all forms have been accepted. You will be notified via email and/or text message (if you have selected the text message option during account creation), if a form has been denied by your school. You will be sent a notification, in which you will be given the reason for denial and a link to review and resubmit your changes back to the school.

If you need assistance with BigTeams or need more information, please consult the help documents found here https://bigteams.force.com/support/s/ or email schoolsupport@planeths.com. If you have questions regarding the content of form requirements, please contact your school Athletic Director.

Returning (Student/Parent) Athletic Pre-Participation Forms Registration

Your school has elected to collect pre-participation forms online. Follow the steps below to re-complete pre-participation registration:

1. Login with previous year account credentials	• Both a parent and student are required to log back in for the new year and complete athletic forms • Go to https://studentcentral.bigteams.com/ • If you do not remember your login credentials, please utilize the *Forgot Password* option or contact the school athletic department
2. Update Home School (If Applicable) *****Rising 9th Graders******	• After logging in, click on your name at the top right of the screen, and then select *Settings* • Type in school name within the *School* text field, and then select the appropriate school • Update any contact information such as phone, email address and mailing address • Click *Save* at bottom of screen
3. ***Athletic Forms button***	Click the ***Athletic Forms button*** to move to the Pre-Participation Forms Overview Page and complete the required digital forms. - Make sure the Date Range is set to 2022-2023
4. ***Select the Sports you will participate in***	In the ***Sports Interest*** section, check the sports you will be trying out for. By checking these sports, you are allowing the coach of that team to view your pre-participation paperwork.
5. ***Additional Schools (If Applicable)***	If you/your student participate in sports at multiple schools, add the additional schools here. If you/your student do not play for multiple schools, leave this section blank. Adding additional schools will allow the Athletic Director(s) at the additional school(s) view your pre-participation paperwork.
6. ***Complete & Sign Digital Forms***	Click on each form link, complete each form, and click the *Sign & Submit* button. **Both the parent and student must complete this step.** Your school/district chooses which forms require the student, parent, or student AND parent signatures. Upon completion of each form, you should be auto promoted to the next form.
	Students with accounts may begin completing digital forms immediately. Parents must be linked to a student account to see the electronic version of the forms. If they are not linked, they will only see example PDF versions of the forms. You can complete forms or see their status at any time by clicking on the ATHLETIC FORMS button. This gives the ability for students to send a parent linked account request and to upload the physical exam signed by the physician during group physicals.
	Upload Buttons are shown when you are required to upload a document instead of completing the web-form. For example, the physical exam form your physician completes or a birth certificate. These forms can be uploaded by either the parent or student but require the parents signature.
	Re-Use Document Buttons (If Applicable) are displayed within forms that have been completed in previous years, allowing parent/student the ability to update necessary information prior to submitting the form for the new year.
7. Accepted Forms Notification	When your school has accepted all forms, a notification will be sent to you stating all forms have been accepted. You will be notified via email and/or text message (if you have selected the text message option during account creation), if a form has been denied by your school. You will be sent a notification, in which you will be given the reason for denial and a link to review and resubmit your changes back to the school.

If you need assistance with PlanetHS or need more information, please consult the help documents found here https://schoolsupport.helpdocs.com or email schoolsupport@planeths.com. If you have questions regarding the content of form requirements, please contact your school Athletic Director.

Preparticipation Physical Evaluation - History Form

Note: Complete and sign this form (with your parents if younger than 18) before your appointment.

Name:_____Date of Birth:_____Sex: _____

Date of Examination:_____Sport(s): _____

List past and current medical conditions: _____

Have you ever had surgery? If yes, list all pastsurgical procedures: _____

Medicines and supplements: List all current prescriptions, over-the-counter medicines, and supplements (herbal and nutritional): _____

Do you have any allergies? If yes, please list all your allergies (ie, medicines, pollens, food, stinging insects): _____

General Questions. Explain "Yes" answers at the end of this form. Circle questions if you don't know the answer.	**Yes**	**No**
1. Do you have any concerns that you would like to discuss with your provider?		
2. Has a provider ever denied or restricted your participation in sports for any reason?		
3. Do you have any ongoing medical issues or recent illness?		
Heart Heath Questions About You	**Yes**	**No**
4. Have you ever passed out or nearly passed out DURING or AFTER exercise?		
5. Have you ever had discomfort, pain, tightness, or pressure in your chest during exercise?		
6. Does your heart ever race, flutter in your chest or skip beats (irregular beats) during exercise?		
7. Has a doctor ever told you that you have any heart problems?		
8. Has a doctor ever ordered a test for your heart? (for example Electrocardiography (ECG) or echocardiography.		
9. Do you get lightheaded or feel shorter of breath than your friends during exercise?		
10. Have you ever had a seizure?		
Health Questions About Your Family	**Yes**	**No**
11. Has any family member or relative died of heart problems or had an unexpected or unexplained sudden death before age 35 (*including drowning or unexplained car accident*)?		
12. Does anyone in your family have a genetic heart problem such as hypertrophic cardiomyopathy, Marfan syndrome, arrhythmogenic right ventricular cardiomyopathy (ARVC), long QTsyndrome (LQTS), short QT syndrome (SQTS), Brugada syndrome, or catecholaminergic polymorphic ventricular tachycardia (CPVT)?		
13. Does anyone in your family had a pacemaker or implanted Defibrillator before age 35?		
Bone and Joint Questions	**Yes**	**No**
14. Have you ever had a stress fracture or an injury to a bone, muscle, ligament, joint or tendon that caused you to miss a game or practice?		
15. Do you have a bone, muscle, ligament or joint injury that bothers you?		

Medical Questions	**Yes**	**No**
16. Do you cough, wheeze, or have difficulty breathing during or after exercise?		
17. Are you missing a kidney, an eye, a testicle (males), your spleen, or any other organ?		
18. Do you have groin or testicle pain or a painful bulge or hernia in the groin area?		
19. Do you have any recurring skin rashes or rashes that come and go, including herpes or methicillin-resistant Staphylococcus aureus (MRSA)?		
20. Have you ever had a concussion or head injury that caused confusion, a prolonged headache, or memory problems?		
21. Have you ever had numbness, tingling, or weakness in your arms or leg, or been unable to move your arms or legs after being hit or falling?		
22. Have you ever become ill while exercising in the heat?		
23. Do you or someone in your family have sickle cell trait or disease?		
24. Have you ever had or do you have any problems with your eyes or vision?		
25. Do you worry about your weight?		
26. Are you trying to or has anyone recommended that you gain or lose weight?		
27. Are you on a special Diet or do you avoid certain types of foods?		
28. Have you ever had an eating disorder?		
Females Only	**Yes**	**No**
29. Have you ever had a menstrual period?		
30. How old were you when you had your first menstrual period?		
31. When was your most recent menstrual period?		
32. How many periods have you had in the past 12 months?		

Explain a "Yes" answer here: _____

I hereby state that, to the best of my knowledge, my answers to the questions on this form are complete and correct.

Signature of athlete: _____

Signature of parent or guardian: _____

Date _____

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Preparticipation Physical Evaluation - Physical Form

Last Name _____ First Name _____ Middle Initial _____ Date of Birth _____

Examination			
Height:	Weight:		
BP: / (/)	Pulse:	Vision: R 20/ L 20/	Corrected____Yes_____No

Medical	Normal	Abnormal Findings
Appearance: Marfan stigmata (kyphoscoliosis, high–arched palate, pectus excavatum, arachnodactyly, hyperlaxity, myopia, mitral valve prolapse (MVP), and aortic insufficiency		
Eyes / Ears / Nose / Throat - Pupils equal / Hearing		
Lymph Nodes		
Heart - Murmurs (auscultation standing, auscultation supine, and +/- Valsalva maneuver		
Lungs		
Abdomen		
Skin - Herpes simplex virus (HSV), lesions suggestive of methicillin-resistant Staphylococcus aureus (MRSA), or tinea corporis		
Neurologic		
Musculoskeletal:		
- Neck		
- Back		
- Shoulders/Arm		
- Elbow/Forearm		
- Wrist/Hand/Fingers		
- Hip/Thighs		
- Knees		
- Leg/Ankles		
- Foot/Toes		
- Functional: Double-leg squat test, single leg squat test, and box drop or step drop test		

Consider: electrocardiography (ECG), echocardiography, and referral to cardiologist for abnormal cardiac history or examination findings or a combination of those.

Preparticipation Physical Evaluation

____Medically eligible for all sports without restriction.

____Medically eligible for all sports without restriction with recommendations for further evaluation or treatment of: _____

_____

____Medically eligible for certain sports: _____

____Not medically eligible pending further evaluation.

____Not medically eligible for any sports.

Recommendations: _____

_____

I have examined the student named on this form and completed the preparticipation physical evaluation. The athlete does not have apparent clinical contraindications to practice and can participate in the sport(s) as outlined on this form. If conditions arise after the athlete had been cleared for participation, the physician may rescind the medical eligibility until the problem is resolved and the potential consequences are completely explained to the athlete and parents or guardians.

Name of health care professional (print or type):_____Date:_____

Address:_____Phone:_____

Signature of health care professional:_____MD, DO, NP, or PA

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