# CUMBERLAND VALLEY SCHOOL DISTRICT 2017-2018

TO: Athletes and Parents/Guardians

FROM: Athletic Department

DATE: January 18, 2017

SUBJECT: INTERSCHOLASTIC ATHLETIC PHYSICAL EVALUATIONS

#### Dear Parents/Guardians:

On Thursday, June 1<sup>st</sup> and Monday, June 5<sup>th</sup>, from 6 to 8pm Cumberland Valley and Orthopaedic & Spine Specialists (OSS) will offer physicals to athletes participating in sports for the 2017-2018 school year. Physicals will begin outside the Athletic office and the cost is \$15 per physical. We will accept cash or check. Please make checks out to CV Athletics. OSS will sponsor a hospitality room for waiting parents in the LGI room, which is near the check in table.

The Pennsylvania Interscholastic Athletic Association (PIAA) has developed procedures for obtaining a Comprehensive Initial Pre-Participation Physical Evaluation (CIPPE). This process is as follows:

- All athletes <u>MUST</u> have a completed 6-page physical packet, containing the CIPPE, dated June 1<sup>st</sup>, 2017 or later in order to be eligible to participate in interscholastic athletics during the 2017-2018 school year. Physicals dated prior to June 1<sup>st</sup>, 2017 <u>WILL NOT</u> be valid.
- The 6-page PIAA CIPPE packet can be obtained on the CV website under the Athletics page, then click "Athletic Training." Additional forms needed also are: Risk of Injury and Random Drug Testing forms.
- Please have a payment of \$15 in cash or check made out to the CV Athletics
- Physicals will take place at the high school, and the start line is outside the Athletic Office
- Physicals will be filed with the Athletic Trainers, if you need a copy for your records please let us know at the check-in desk.

Pre-participation physical evaluation, for students who will be in grades 7 through 12 and participating in interscholastic athletic programs during the 2017-2018 school year, will be conducted at Cumberland Valley High School according to the following schedule:

Thursday – June 1, 2017	<b>Monday – June 5, 2017</b>
(Athletes Last Name A through L)	(Athletes Last Name M through Z)
6:00 – 6:30 PM – Athletes A-B-C	6:00 – 6:30 PM – Athletes M-N-O
6:30 – 7:00 PM – Athletes D-E-F	6:30 – 7:00 PM – Athletes P-Q-R
7:00 – 7:30 PM – Athletes G-H-I	7:00 – 7:30 PM – Athletes S-T-U-V
7:00 – 8:00 PM – Athletes J-K-L	7:30 – 8:00 PM – Athletes W-X-Y-Z
*Physicals may take an hour to be completed	*Physicals may take an hour to be completed

All students are asked to wear shorts or loose fitting pants to be able to check the knee area

Please Note: No appointment is necessary, just show up during your time slot. Students who do not report as scheduled will be asked to wait until scheduled athletes are completed. If it is necessary that the time and/or date of your physical be changed, you MUST contact the Athletic Trainers (Sheila Mueller 717-422-4737, smueller@cvschools.org or Ann Seaton 717-422-8586 as soon as possible.)

(Detach this memo from packet and SAVE as a reminder of physical dates/times)
INSTRUCTIONS FOR COMPLETION ON REVERSE SIDE

#### INSTRUCTIONS FOR COMPLETION OF ATHLETIC PACKET

### PLEASE PUT THE GRADE FOR 2017-2018 SCHOOL YEAR

- **Section 1:** Personal and Emergency Information – This form provides information to the CV School District in the event of an emergency situation. Every student is required to complete this form and have it on file prior to participating in any interscholastic sport.
- Certification of Parent/Guardian This form grants the athlete permission to participate in the Section 2: CV Interscholastic Athletic programs.
  - (1) Parent or Guardian signatures are required beside **EACH SPORT** in which the student intends to participate and/or "try-out"
  - (2) Parent or Guardian signatures are required on FIVE LINES (B THROUGH F) designated at the bottom of the form.
- **Section 3:** Understanding the Risk of Concussion and Traumatic Brain Injury – This forms provides information on Concussions and Traumatic Brain Injuries that may be sustained as a part of participating in the CV Interscholastic Athletic program. Parent/ Guardian and Student must sign and date this form at the bottom.
- Section 4: Understanding the Risk of Sudden Cardiac Arrest Symptoms & Warning Signs - This forms provides information on Sudden Cardiac Arrest Symptoms and Warning Signs that may be sustained as a part of participating in the CV Interscholastic Athletic program. Parent/ Guardian and Student must sign and date the bottom of this form.
- Section 5: **Health History** – This form provides information that the doctors need before they conduct the physical exam. All questions must be answered and dates noted as requested.
- Section 6: PIAA Comprehensive Initial Pre-Participation Physical Evaluation and Certification of **Authorized Medical Examiner** – This form is for the physical examination and must be signed by a PHYSICIAN. This is the only form that will be accepted as a valid physical examination. Please complete student's name, age, grade, and sport at the top of the form prior to the exam.

## **Additional forms needed**: Risk of Injury and Random Drug Testing Forms

All athletes who receive an athletic physical screening from the school or those who elect a private physical at his/her own expense will be required to complete the Section 7: Re-Certification Form prior to the start of each subsequent sports season (Winter & Spring).

Any Private Physical may NOT be administered prior to June 1, 2017 and must be completed on the Comprehensive Initial Pre-Participation Physical Form – Section 6.

The first day of TRY-OUTS for each season is as follows:

Fall Sports – August 14<sup>th</sup> (JV/V Football Heat Acclimation August 7<sup>th</sup>)

Winter Sports – November 17<sup>th</sup> Spring Sports – March 5<sup>th</sup>

If you have any questions, please contact Sheila Mueller 717-422-4737 or email her at smueller@cvschools.org. All the forms can be found off the school districts website, cvschools.org under athletics, then click on Athletic Training. All forms are at the bottom of the page.