

REGULATION

PATERSON SCHOOL DISTRICT

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Medical Examination Prior to
Participation on a School-Sponsored
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R2431.2 MEDICAL EXAMINATION PRIOR TO PARTICIPATION
ON A SCHOOL-SPONSORED INTERSCHOLASTIC OR
INTRAMURAL TEAM OR SQUAD

- A. Students are required to receive medical examinations in accordance with the provisions of N.J.S.A. 18A:40-4 and N.J.A.C. 6A:16-2.2(f). Each student medical examination shall be conducted at the medical home of the student. If a student does not have a medical home, the school district shall provide the examination at the school physician's office or other comparably equipped facility.

The school district shall ensure students receive medical examinations in accordance with N.J.A.C. 6A:16-2.2(f) and prior to participation on a school-sponsored interscholastic or intramural team or squad for students in grades six through twelve.

1. Required Medical Examination

- a. The examination shall be conducted within 365 days prior to the first day of official practice in an athletic season and shall be conducted by a licensed physician, advanced practice nurse (APN), or physician assistant (PA).
- b. The physical examination shall be documented using the Preparticipation Physical Evaluation (PPE) form developed jointly by the American Academy of Family Physicians, American Academy of Pediatrics, American College of Sports Medicine, American Medical Society for Sports Medicine, American Orthopaedic Society for Sports Medicine, and



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American Osteopathic Academy of Sports Medicine
and is available online at,

[http://www.state.nj.us/education/students/
safety/health/records/athleticphysicalsform.pdf](http://www.state.nj.us/education/students/safety/health/records/athleticphysicalsform.pdf),
in accordance with N.J.S.A. 18A:40-41.7.

- (1) Prior to performing a preparticipation physical examination, the licensed physician, APN, or PA who performs the student-athlete's physical examination shall complete the Student-Athlete Cardiac Screening professional development module and shall sign the certification statement on the PPE form attesting to the completion, pursuant to N.J.S.A. 18A:40-41.d.
 - (a) If the PPE form is submitted without the signed certification statement and the school district has confirmed that the licensed physician, APN, or PA from the medical home did not complete the module, the student-athlete's parent may obtain a physical examination from a physician who can certify completion of the module or request that the school physician provides the examination.
- (2) The medical report shall indicate if a student is allowed or not allowed to participate in the required sports categories and shall be completed and signed by the original examining physician, APN, or PA.



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- (3) An incomplete form shall be returned to the student's medical home for completion unless the school nurse can provide documentation to the school physician that the missing information is available from screenings completed by the school nurse or physician within the prior 365 days.
- c. Each student whose medical examination was completed more than ninety days prior to the first day of official practice in an athletic season shall provide a health history update questionnaire completed and signed by the student's parent. The completed health history update questionnaire shall include information listed below as required by N.J.S.A. 18A:40-41.7.b. The completed health history update questionnaire shall be reviewed by the school nurse and, if applicable, the school athletic trainer and shall include information as to whether, in the time period since the date of the student's last preparticipation physical examination, the student has:
- (1) Been advised by a licensed physician, APN, or PA not to participate in a sport;
 - (2) Sustained a concussion, been unconscious, or lost memory from a blow to the head;
 - (3) Broken a bone or sprained, strained, or dislocated any muscles or joints;
 - (4) Fainted or blacked out;



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- (5) Experienced chest pains, shortness of breath, or heart racing;
 - (6) Had a recent history of fatigue and unusual tiredness;
 - (7) Been hospitalized, visited an emergency room, or had a significant medical illness;
 - (8) Started or stopped taking any over the counter or prescribed medications; or
 - (9) Had a sudden death in the family, or whether any member of the student's family under the age of fifty has had a heart attack or heart trouble.
- d. The school district shall provide to the parent written notification signed by the school physician stating approval of the student's participation in athletics based upon the medical report or the reasons for the school physician's disapproval of the student's participation.
- e. The Board of Education will not permit a student enrolled in grades six to twelve to participate on a school-sponsored interscholastic or intramural team or squad unless the student submits a PPE form signed by the licensed physician, APN, or PA who performed the physical examination and, if applicable, a completed health history update questionnaire, pursuant to N.J.S.A. 18A:40-41.7.c.
- f. The school district shall distribute to a student-athlete and his or her parent the sudden cardiac



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arrest pamphlet developed by the Commissioner of Education, in consultation with the Commissioner of Health, the American Heart Association, and the American Academy of Pediatrics, pursuant to N.J.S.A. 18A:40-41.

- (1) A student-athlete and his or her parent annually shall sign the Commissioner-developed form that they received and reviewed the pamphlet, and shall return it to the student's school pursuant to N.J.S.A. 18A:40-41.d.
- (2) The Commissioner shall update the pamphlet, as necessary, pursuant to N.J.S.A. 18A:40-41.b.
- (3) The Commissioner shall distribute the pamphlet, at no charge, to all school districts and nonpublic schools, pursuant to N.J.S.A. 18A:40-41.b.

Adopted: 17 June 2009
Revised: 08 January 2014
Revised: 31 August 2016

