

# Harrisville Central School

Fax (315) 543-2360

## Athlete and Grade - Mandatory Physical Exam Form

Patient Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_

Vital Signs: Ht: \_\_\_\_\_ Wt: \_\_\_\_\_ BP: \_\_\_\_\_ P: \_\_\_\_\_ R: \_\_\_\_\_ T: \_\_\_\_\_ BMI: \_\_\_\_\_

Visual Acuity: OD: 20/\_\_\_\_ OS: 20/\_\_\_\_ OU: 20/\_\_\_\_ Correction: Yes/No Pupils: Equal/ Unequal

Hearing: Whisper test at 5ft: \_\_\_\_\_/5 Right; \_\_\_\_\_/5 Left Audioscope - see chart

	Normal	Abnormal	Comments
<b>Medical</b>			
Appearance			
HEENT			
Lymph Nodes			
Respiratory			
Cardiovascular			
Abdomen			
Male Genitalia			
Skin			

### **Musculoskeletal**

Neck			
Back			
Shoulder/arm			
Elbow/forearm			
Wrist/hand			
Hip/Thigh			
Knee			
Leg/ankle			
Foot			

### **Grade Mandatory Only**

Dental			
Tanner Stage			
Nutritional Status			
Scoliosis Evaluation			
Speech			

Assessment: \_\_\_\_\_

### **For Sport's Physical Only**

- Cleared
- Cleared after completing evaluation / rehabilitation for: \_\_\_\_\_
- Not cleared for: \_\_\_\_\_ Reason: \_\_\_\_\_
- Have Albuterol MDI available during sports
- Have Epi Pen available during sports

Additional Comments: None/ \_\_\_\_\_

Name of Provider: \_\_\_\_\_

Provider's Signature: \_\_\_\_\_ Date: \_\_\_\_\_