

**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 six through 12 must present a completed **Preparticipation Physical Evaluation (PPE)** form to the designated school staff member. Important information regarding the PPE is provided below, and you should feel free to share with your child's medical home health care provider.

1. **The PPE 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 PPE.
2. **The required PPE must be conducted within 365 days prior to the first official practice** in an athletic season. The PPE form is available in English and Spanish at <http://www.state.nj.us/education/students/safety/health/records/athleticphysicalsform.pdf>.
3. **The parent/guardian and student must complete the History Form** (page one), and **insert the date of the required physical examination** at the top of the page.
4. **The licensed physician, APN or PA, who performs the physical examination must complete the remaining two pages of the PPE**, and **insert the date of the examination** on the Physical Examination Form (page three) and Clearance Form (page four). (**MUST** include the date the physical was performed, not just the date the form was filled out!)
5. **The licensed physician, APN or PA, must also sign the certification statement on the PPE form** attesting to the completion of the professional development module. Each board of education and charter school or nonpublic school governing authority must retain the original signed certification on the PPE form to attest to the qualification of the licensed physician, APN or PA to perform the PPE.
6. **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 must be completed, and signed by the student's parent/guardian. The HHQ must be reviewed by the school nurse. The HHQ is available at <http://www.state.nj.us/education/students/safety/health/records/HealthHistoryUpdate.pdf>.
7. **The parent/guardian and student must also read the Concussion, Cardiac Sudden Death and Opioid Use and Misuse handouts and sign, date and submit the declarations** that they were read.
8. **The parent/guardian and student must read the Sports Related Eye Injury fact sheet.** No forms need to be signed.

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 **L'via Weisinger, RN, Nurse@naalehighschool.org**