



PRE-PARTICIPATION PHYSICAL EXAMINATION

MEDICAL PACKET DIRECTIONS & CHECKLIST

These forms are for first-year/transfer student-athletes **ONLY!** Returning student-athletes will fill out paperwork during the physical examination.

The following forms should be filled out completely and **mailed** to the address on the opening page of the medical packet **OR** brought to the physical exam:

- 1) Insurance Information Form:** Please fill out all applicable information. All insurance information including member ID, group number, etc. can be found on front or back of the insurance card. Please include all parent information as this will be needed in the circumstance that the primary insurance will be used if the student-athlete is injured. **Parent/guardian signature is required on this form. PLEASE INCLUDE A FRONT AND BACK COPY OF ANY MEDICAL, DENTAL, PRESCRIPTION AND/OR VISION CARDS.**
- 2) SMU Student-Athlete Information Sheet:** If the dorm room/address or student ID is unknown at the time the form is filled out, please leave blank and the student-athlete can fill it out during physicals.
- 3) Notice of Privacy Practices:** This is a two-page form regarding the release of protected medical information. Please read through both pages and sign at the bottom of the second page.
- 4) Health History Form:** This is a two-page document regarding the health history of the student-athlete. Please check all boxes and fill out all blanks regardless of whether it is a "yes" or "no" answer. Student-athlete must sign at the bottom of this form.
- 5) Orthopedic Examination Form:** This is a three-page document. Please proceed through each box and circle the "Y" or "N" depending on if the student-athlete has ever injured that body part before. If yes, please identify the side by circling "L" or "R" and write a small description within the box of the injury. For example, if the student-athlete dislocating their right shoulder in 2005, please circle "Y," "R," and write "dislocated right shoulder in 2005." Please include if there was surgery due to this injury. **DO NOT** fill out the physician signature section. This will be completed by an SMU physician during the physical examination.
- 6) Female Health History Form:** Females need only to fill out this form. Please answer all questions and explain any "yes" answers at the bottom of the form.
- 7) Policies & Procedures:** This is a two-page document outlining some of the policies and procedures of the SMU Sports Medicine Department. Please read through both pages. If over 18, the student-athlete should sign at the bottom of the second page. **If under 18, parent or guardian must sign this form.**
- 8) Insurance Policies & Procedures:** This is one-page document outlining our insurance policies and procedures. **Parent or guardian must initial this form.**

If you have any further questions regarding filling out these forms, please e-mail Kelli Clay at kellie@smu.edu or call (214) 768-2312.