

Comprehensive Initial Pre-Participation Physical Evaluation (CIPPE)

Section 1 – Personal and Emergency Information:

This section needs to be filled out by the student's parent/guardian and turned into the Athletic Office for the initial sport only.

*If there is any change in personal and emergency information, please contact the athletic office as soon as possible.

Section 2 – Certification of Parent/Guardian:

This section needs to be filled out by the student's parent/guardian and turned into the Athletic Office for the initial sport only.

PLEASE SIGN BY ALL THE SPORT(S) THEY MAY PARTICIPATE IN DURING THE YEAR.

NOTE: PLEASE SIGN ON THE LINE BESIDE EACH SPORT THAT YOUR CHILD MAY PARTICIPATE IN DURING THE ENTIRE SCHOOL YEAR. THIS INFORMS THE DOCTOR OF ALL THE SPORTS THE STUDENT MAY PARTICIPATE IN DURING THE SCHOOL YEAR TO HELP WITH THE COMPREHENSIVE PHYSICAL EVALUATION.

Section 3 – Health History:

This section needs to be filled out by the student's parent/guardian and turned into the Athletic Office for the initial sport only.

Section 4 – PIAA Comprehensive Initial Pre-Participation Physical Evaluation & Certification of Authorized Medical Examiner:

This section should be filled out by either your family physician or our school doctor. Please make sure there is an authorized signature and date at the bottom of this page. Your paperwork will not be accepted without both the signature AND date.

An "authorized physician" includes: a licensed physician of medicine or osteopathic medicine, a certified registered nurse practitioner, or a certified physician's assistant.

A valid physician's signature and date on this section after June 1st for the upcoming school year is valid for all three seasons. This is all that is required unless there has been a change in the health of the student athlete or he/she has sustained an injury since the initial physical evaluation.

Section 5 – PIAA Re-Certification by Parent/Guardian:

This section needs to be filled out by the student's parent/guardian and turned into the Athletic Office each time the student is trying out for his/her 2nd or 3rd sport season. It is not required for the initial sport unless the physical is dated 14 days prior to the start of the official sport season. The form must be completed and dated 14 days prior to the start of any sports season.

If there has been an injury or change in health since the initial evaluation, meaning they have checked or circled yes to any of the “Supplemental Health History” questions on the bottom of Section 5, the student must have their personal physician fill out Section 6 of the CIPPE to be cleared to try out, practice, or play in a subsequent sport season.

Section 6 – PIAA Comprehensive Pre-Participation Physical Re-Evaluation and Re-Certification by Authorized Medical Examiner:

This Section needs to be filled out by your family doctor ONLY if the student athlete has sustained an injury since the initial evaluation or his/her health has changed. If the student athlete is in good health and has been since the initial physical evaluation, there is no need to have your doctor fill out this section.

If any Supplemental Health History question is circled or checked yes on Section 5, the student is required to go back to his/her physical and have Section 6 completed. If they are going to a different physician other than the one who performed the original comprehensive physical, you must take Sections 1, 2, 3, 4, and 5 with you to your appointment for completion of Section 6. This must be on file at the Athletic Office before the start of the next sport season to be eligible for try-outs, practice or play. Please do not wait to schedule an appointment if he or she has sustained an injury or by checking yes to any of the questions on Section 5 from the previous season.

Section 7 – CIPPE Minimum Wrestling Weight Classification:

All student-athletes participating in wrestling must complete this section no earlier than 6 weeks prior to the first practice date of the winter sports' season.

Section 8 - Insurance Waiver Form:

This section needs to be filled out and signed by the student-athlete and his/her parent/guardian before EACH participating sports' season. If the student is participating in a fall, winter, and spring sport, we should have (3) of these forms on file in the Athletic Office.

Section 9 - Eligibility Questionnaire Form:

This section needs to be filled out and signed by the student athlete and his/her parent/guardian before the first sport season.

Explanation of Sections Needed for Each Sport Physical

START DATE FOR PIAA WINTER SEASON IS NOVEMBER 17, 2008.

START DATE FOR PIAA SPRING SEASON IS MARCH 2, 2009.

INITIAL SPORT PHYSICALS (Represents the first sport an athlete intends to play in a school year)

Must include:

- Section 1
- Section 2- Sign all sports that your child may participate in during the year
- Section 3
- Section 4
- Section 5-** You must complete this form unless the physical has been performed within 14 days of the start of the season. It must be turned into the athletic office within 14 days before the official PIAA season starts to try out, practice or play not before.
- Section 7 – For wrestlers only (to be completed 6 weeks prior to start of season)
- Section 8 – Insurance Waiver Form
- Section 9 – Eligibility Questionnaire Form
- Section 10- NovaCare Form

***EXAMPLE: If you had the physical done in the summer for a winter or spring sport, please wait to complete Section 5 until 14 days before the start of the winter season which is November 17, 2008; the spring season start date is March 2, 2009.**

RE-CERTIFICATION PHYSICALS – WITHOUT INJURIES AS WELL AS PHYSICALS DATED 14 DAYS PRIOR TO THE START OF THE PIAA SEASON

(Represents all subsequent sports' seasons in a school year provided there have been no injuries to the athlete from the initial evaluation. This is also required if there has been a lapse of time between the comprehensive physical (CIPPE) and the first day of official practice of more than 14 days.

Must include:

- *Section 5** (if checked yes to any questions in this section, you must have a physician complete section 6; please follow the Re-Certification of Physicals with Injuries below).
- *Section 8**

RE-CERTIFICATION PHYSICALS - WITH INJURIES

(Represents all subsequent sports' seasons in a school year when the athlete has sustained an injury or change in health since the initial evaluation. Please schedule an appointment as soon as possible so there is not a delay in being eligible for the next sport season).

Must include:

- *Section 5**
- *Section 6** - Requires a doctor's signature and updated date
- *If you are going to a different physician than the one who performed the original physical, you must take with you Sections 1, 2, 3, 4, and 5 to the appointment.**
- *Section 8**

