

Health Tips

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with

Dr. D



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Health Tip: A Realistic Look at the Sports Pre-Participation Physical

The sports physical is an annual rite for millions of students who participate in school athletics. Even though the necessity of these exams in the young, healthy population in which they are performed has been questioned, the National Federation of State High School Associations (NFHS) Board of Directors, acting on a recommendation from the NFHS Sports Medicine Advisory Committee, has stated that "pre-participation physical evaluations for high school student-athletes are a necessary and desirable precondition to interscholastic athletic practice and competition."



When performed appropriately, the sports physical can theoretically serve a number of useful purposes such

as:

- Identifying medical or musculoskeletal conditions that could make sports participation unsafe.
- Detecting previously undiagnosed health problems.
- Evaluating for previous injuries that may not have been adequately rehabilitated.

There are some very definite limitations with the way many of these examinations are currently being performed. Parents should be aware of these limitations, and if necessary, take steps to assure the safe participation of their children:

1. The sports physical cannot be viewed to be the same as a general physical exam. These exams tend to focus on sport-related issues and do not cover a number of important health issues potentially impacting adolescents such as tobacco use, risky sexual behaviors or improper nutrition. Scheduling an appointment for a health maintenance exam along with the completion of the school's required form may be a better approach if a more in depth evaluation is warranted.
2. Sports physicals are usually performed in the doctor's office or by

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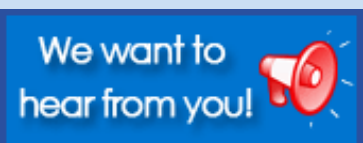
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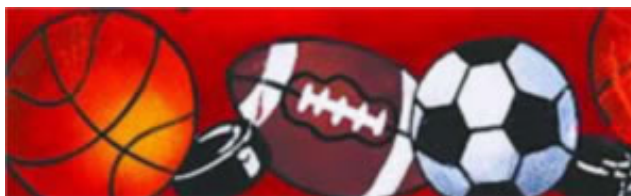
multiple providers in a mass screening. Of these methods, the mass screening format is by far the most common. While either format can be



effective, the mass screening exams are usually performed in gymnasiums or auditoriums. This can result in the loss of privacy or the opportunity for the student to bring up a personal concern with the doctor. The examination area may also be noisy which limits the ability of the doctor to accurately diagnose problems such as heart

murmurs.

3. Perhaps the most important part of any examination is the medical history. Relying on information provided by adolescents who require clearance to pursue their dreams is risky. It is important that parents participate in completing these forms or be present during the exam to provide pertinent medical information.
4. Expecting the sports physical to absolutely assure safe participation is unrealistic. For example, the most common cause of sudden cardiac death in young athletes is a heart condition known as hypertrophic cardiomyopathy. This condition may have no physical examination findings and may even be associated with a normal electrocardiogram (which is not routinely performed as a part of these exams). There may be some important historical clues to its presence, but as mentioned, this information is unlikely to come from the student athlete.
5. Typically, the school athletic department will schedule the mass-screening examination shortly before the beginning of the athletic season (usually in August prior to the start of football practice). Unfortunately, this often times does not allow for the follow-up of identified problems. For example, if elevated blood pressure is discovered, repeat readings or treatment will need to be done. Or, if an ankle sprain has resulted in persistent ankle weakness, several weeks may be required to adequately rehabilitate the injury. Ideally, these exams should be performed 4-6 weeks prior to the start of the season.



The ramifications of athletic participation with an unrehabilitated ankle sprain are one thing and missing a potentially life-threatening heart condition is another. The American Heart Association has recommended a [12-point screening tool](#) that they believe will help prevent sudden cardiac death in high school and college competitive athletes. As previously discussed, central to this evaluation is the medical history. Abnormalities in any of the 12 areas assessed would prompt further cardiovascular evaluation. Parents who want to try to assure the safe participation of their children should make sure that these 12 points are adequately addressed.

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