MSHSL ANNUAL SPORTS HEALTH QUESTIONNAIRE

			-	Birth Date//		
irade _	School	Sport(s)				
ddress	·					
hone	Date of L	ast Sports Qualifyin.	g Physical	Exam (SQPE)//	1	
uestionr	Check Yes or No boxes for each question AST YEAR, since your last complete Sports Qualifyinaire, HAVE YOU HAD ANY CHANGES TO THE FOL e last year, has a doctor restricted your participation in s IMPORTANT HEART HEAL	ing Physical Exam with LOWING QUESTIONS sports for any reason wit TH QUESTIONS ABOU	h your physi hout clearing I YOU IN TH	cian or your Year 2 Annual Health you to return to sports? E LAST YEAR	YES	
 In the 	the last year, have you passed out or nearly passed out <i>during</i> or <i>after</i> exercise?					
 In the In the arrhy 	before age 50 (including an unexplained drowning, an unexplained car accident, or Sudden Infant Death Syndrome)? In the last year, has anyone in your immediate family had instances of unexplained fainting, seizures, or near drowning? In the last year, has anyone in your immediate family been diagnosed with hypertrophic cardiomyopathy, Marfan Syndrome, arrhythmogenic right ventricular cardiomyopathy, long or short QT Syndrome, Brugada Syndrome, or catecholaminergic polymorphic ventricular tachycardia?					
 In the In the 	e last year, has anyone in your immediate family under MEDICAL RIS e last year, have you had a head injury or concussion th	ear, has anyone in your immediate family under age 50 had a heart problem, pacemaker, or implanted defibrillator? MEDICAL RISK QUESTIONS IN THE LAST YEAR ear, have you had a head injury or concussion that still has symptoms like continuing headaches, concentration problems problems?				
	Parents or Legal Guardians: Please note below for the coaches	any health concerns, r or athletic/activities di		• • •		
l do no	nt know of any existing physical or additional health reas questions are true and accu				o the ab	ove
			nlete Signatu	ге [Date	
	Parent or Legal Guardian Signature	At.	liele Signatu		ale	

Reference: Preparticipation Physical Evaluation (Third Edition): AAFP, AAP, AMSSM, AOSSM, AOASM ; McGraw-Hill, 2004.

SQPE Due _____

_/___/ ____

CLEARED FOR SPORTS: YES NO