

# Adna Middle/High School Sports Physical Examination Form

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Exam Date: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Pulse \_\_\_\_\_ BP \_\_\_\_/\_\_\_\_ Audiometry: \_\_\_\_\_

Vision: R \_\_\_\_\_ Corrected: \_\_\_\_\_ Uncorrected: \_\_\_\_\_

L \_\_\_\_\_ Corrected: \_\_\_\_\_ Uncorrected: \_\_\_\_\_

	NORMAL	FINDINGS				
Chest						
Ears, Nose, Throat						
Mouth and Teeth						
Neck						
Cardiovascular						
Chest and Lungs						
Abdomen						
Skin						
Genitalia/Hernia (male)						
Musculoskeletal: Rom Strength						
Neuromuscular						
Physical Maturity		1	2	3	4	5

**Comments/Abnormal Findings:**

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**Participation Recommendations:**

1. No participation in: \_\_\_\_\_
2. Limited Participation in: \_\_\_\_\_
3. Requires: \_\_\_\_\_
4. Full Participation: \_\_\_\_\_

**PHYSICIAN'S SIGNATURE:** \_\_\_\_\_

**Date:** \_\_\_\_\_