
HEALTH REQUIREMENTS FOR PARTICIPATION IN William Paterson University ATHLETICS

Counseling, Health & Wellness Center

1. PHYSICAL EXAMS

- a. Every athlete must get an athletic physical exam done prior to participation, *within 6 month of the start of the season*. If you do not submit a physical exam, you will not be allowed to practice or play.
- b. ALL 5 pages of the **PREPARTICIPATION FORMS** must be filled out, signed, and stamped by a health care provider as indicated on the forms.
 1. Incomplete forms will not accepted so please make sure your healthcare provider fills them out thoroughly.
- c. If you are currently, getting medical treatment and /or you have had a recent surgery and are *not yet cleared* for sports by the surgeon/provider, do not schedule a physical appointment. Once you are cleared for the condition or surgery you can get your physical exam done. Make sure to send us any clearance notes you may have gotten for illness, injury or surgery.
- d. COVID-19: if you have had Covid-19 infection in the past year, you are required to get and ECG/ EKG, electrocardiogram, by your healthcare provider. They must also write on your forms that from a cardiac and respiratory persepective you are cleared to participate in sports post covid infection
- e. Make sure you check your WPU emails and portal messages as we may reach out to you regarding your sports clearance. Include your phone number on your forms where indicated. If we cannot get in touch with you, your clearance will be delayed.

2. SICKLE CELL TEST REPORT

- a. Provide a record of a sickle cell blood test- *Required for NCAA ATHLETICS*
 1. The date the test was done does not matter. Can be from birth records.
- b. Your health care provider can order the test for you at the time of your physical exam. Make sure to get a copy of the lab report

3. HOW TO SUBMIT PHYSICAL EXAM AND SICKLE CELL TEST RECORDS

- a. Once you have all of the required forms completed,
Log into the STUDENT HEALTH PORTAL via <https://www.wpunj.edu/health-wellness/health-services/>
- b. ***Complete all of the following consent forms in the portal under FORMS:** * If you are a minor, under 18 years old, your parent or guardian must fill out and sign all the forms provided in the minors packet
 1. **Telehealth (*medical) consent**
 2. **Medical- consent for treatment**
 3. **Notice of Privacy Practice**
 4. **Athletic records release**
- c. **Submit all completed paper forms*:**
 1. **PRE PARTICIPATION PHYSICAL EXAM (all 5 pages)**
 2. **Sickle cell questionnaire**

3. Sickle cell lab report
 4. Consent forms for minors if age 17 and younger- signed by a parent or guardian
 5. Covid-19 Screening for Student-Athlete
- d. Answer required portal questionnaire

4. *HOW TO SUBMIT PAPER FORMS

- a. If you do not have a scanner, you may submit clear pictures of the full pages
- b. To access the **STUDENT HEALTH PORTAL**:
 1. Log into WP Connect
 2. Go to Student and scroll down to Campus Life
 3. Click on Student Health Portal
 4. Put in your date of birth and click "Proceed"
 5. You are now in the Home page of the Student Health Portal
- c. To submit your athletic physical forms or send a message to the Health and Wellness Center:
 1. At the Home page, click Message on the left side of the screen.
 2. Click New Message
 3. Click "My message is regarding my Athletic or Club Sport clearance" and then click Continue
 4. Click Add Attachment to upload your health forms. You may write a message in the box provided.
 5. When you are ready to send, click Send.

5. HOW TO ANSWER REQUIRED QUESTIONNAIRE in the Student Health Portal

- o Student Health Portal
- o Go to APPOINTMENTS
 - At the bottom of the page under CURRENTLY SCHEDULED APPOINTMENTS, choose COMPLETE QUESTIONNAIRE to answer the questions

6. REQUIRED: IMMUNIZATION/VACCINE RECORDS

- a. All Immunization records must be entered into the Student Health Portal by the deadlines. Follow instructions here: <https://www.wpunj.edu/health-wellness/health/> under IMMUNIZATION REQUIREMENTS
- b. Required vaccines include: MMR, Hepatitis B and meningococcal ACYW
- c. Make sure you upload as an *immunization record*, not in the same files with your sports clearance forms
- d. COVID vaccine records must be uploaded into the COVID-19 vaccine portal in PC Connect

William Paterson University Counseling, Health & Wellness Center

Office phone # 973-720-2360

For questions, you can email wpimmunization@wpunj.edu

William Paterson Athletics Physical Checklist

Use this as a cheat sheet to make sure you have completed everything before you submit all of your forms- You do not need to submit this form

STEP 1. Schedule an athletic physical at home to be done by your primary health care provider within 6 months of the first date of practice. Example, February 20 if your first practice is August 20.

STEP 2. Make sure all 5 pages of the pre-participation forms are filled out, signed, and stamped by your health care provider. **Incomplete papers will not be accepted.**

STEP 3. Get a copy of your sickle cell test lab results. Can be from birth records or your health care provider can order the test during your physical exam. You need to have a copy of the records!

Once the first 3 steps are done, upload all of your forms to the student health portal

A nurse will then schedule you for a telehealth “appointment”. Don’t worry about the exact date or time of the appointment. You do not need to be present in person or virtually. You will be notified if you are missing any of the requirements and what you need to do to hopefully get cleared to play. Once all the requirements are met, you will receive a portal message in your WPU email.

- **Complete ALL 4 consent forms in the portal:**
 - Telehealth (*medical) consent
 - Medical- consent for treatment
 - Notice of Privacy Practice
 - Athletic records release

- **Submit all completed paper forms via the portal:**
 - Pre Participation Physical exam (All Pages)
 - Sickle cell lab report
 - Sickle Cell questionnaire
 - Consent forms for minors (if age 17 and younger only)
 - Covid-19 Screening for Student-Athletes

- **Fill out the required questionnaire**

- **Submit all Immunization/Vaccine Records, if not done so already**