Adna Middle/High School

Sports Physical Examination Form

Name:	Age:_	Exam Date:
Height: Weight: I	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		
Gentalia/Hernia (male)		
Musculoskeletal: Rom Strength		
Neuromuscular		
Physical Maturity		1 2 3 4 5

Comments/Abnormal Findings:

Participation Recommendations:

- 1. No participation in:
- 2. Limited Participation in:_____
- 3. Requires:_____
- 4. Full Participation:_____

PHYSICIAN'S SIGNATURE:_____

Date:_____