

University of Dubuque Student-Athlete and Parent/Guardian

MEDICAL FORMS TO BE COMPLETE

You will receive an email as well as a packet mailing from
Debra Runkle, UD Medical Coordinator/ Head Athletic Trainer

Required Forms to be complete by UD Student-Athlete

UD Emergency/Medical/Insurance Form – (received via Email-ECHO – complete & submit online)

Current Physical Examination including (PPE)/Sickle Cell and HGB/HCT Results – (Mailed Packet)

Echo email:

1. The ***UD Emergency/Medical/Insurance Form*** will be emailed to you to complete “prior” your registration date or to complete as soon as you receive.
 - a. Please check your email/clutter & junk boxes for this email from “medcoor or drrunkle@dbq.edu”
 - b. Open highlighted link in email and continue to complete the form
 - c. Instructions are included in email, but key points to remember:
 - i. Complete via smartphone or computer.
 - ii. All colored “*” blanks must be filled. (Use **N/A** if category doesn’t apply)
 - iii. The front and back of the health insurance card must be attached.
 1. best way is take a picture on your smartphone and attach
 - iv. Immunizations attached or dates.
 1. If you do not have your immunization, records please email or bring them to your registration day.
 - v. Echo will not let you sign unless all information is completed.
 - vi. Once completed and signed you will be prompted to submit. The form will be submitted back to the Medical Coordinator.

Packet:

1. ***Physical Form (PPE): (Light pink-4pg UD form)***
 - a. Must take physical after June 1, 2018 on University of Dubuque Physical Form
 - i. Do NOT complete prior to June 1, 2018
 - ii. Complete Prior to July 31, 2018
 - b. Parent/student: *complete page 1, 2 & 4 prior to doctor’s appointment*
 - c. Doctor must “COMPLETE” page 3” (doctor—not a chiropractor or HS physical)
 - i. Doctor: Complete page 3.
 1. **Including:** checking the correct box on blood labs and attach results
 2. **Must provide “actual” Sickle Cell Test Results (not just marked)**
(Results must be from MD, birth records stating sickle cell or hemoglobinopathy results, or from the sickle cell registry)
2. ***Accommodations/Medicine etc. Form*** (light pink-single pg) will need to be completed by your physician if need for accommodations and if on ANY Medications (prescription or OTC) must be on file esp. if drug tested by NCAA.