



PHYSICIAN/HEALTH REPORT

- In order to participate in the PGC course at WCSU, all participants must provide a Physician Health Report. This form can be used or you may use a form provided by your health care provider. Bring this form with you to your session. Do not mail it to PGC Basketball.
- The information on this form must be completed & signed by a physician and be current within two years of attendance of the 2014 PGC session.

Participant's Name: _____ D.O.B. _____

Height: _____ Weight: _____ Age: _____ Blood Pressure: _____ Gender: _____

SIGNIFICANT ILLNESS AND OPERATIONS: (Check only if satisfactory, give details if not.)

Measles _____ German Measles _____ Scarlet Fever _____ Mumps _____

Chicken Pox _____ Diabetes _____ Hypertension _____ Mononucleosis _____

Convulsions _____ Asthma _____ Heart Defects/Disease _____

Bleeding/Clotting Disorders _____ Allergies _____

Other: _____

Details: _____

IMMUNIZATION SUMMARY: HISTORY OF ALL SHOTS TAKEN

<u>Date & Year</u>	<u>IMMUNIZATION</u>	<u>BOOSTER</u>
DPT _____	DT _____	
TETANUS _____		
POLIO OPV _____		
MEASLES _____		
GERMAN MEASLES _____		
MUMPS _____		
MANTOUX TUBERCULIN _____		
HAEMOPHILUS INFLUENZA _____		
HEPATITUS B _____		

CURRENT EXAMINATION: (Check if satisfactory; circle if unsatisfactory and give details)

Eyes _____ Hearing _____ Heart _____ Hernia _____ Posture _____ Vision _____

Throat _____ Lungs _____ Musc/Skel _____ Genitalia _____ Ears _____ Teeth _____

Abdomen _____ CNS _____ Skin _____

Any notable conditions: (Glasses, etc.) _____

Medicine to be administered, specific dosages, and frequency _____

Physician's Summary Statement: This is to certify that I have examined this person, on this date, and found him/her to be in good physical condition. There is no evidence that he/she should not participate in all camp activities, except as stated. I have noted any restrictions, conditions, and required medications.

Signed _____ M.D. Date _____

Print Name _____

Address _____

Telephone _____

BE SURE TO BRING THIS SHEET WITH YOU TO YOUR SESSION