v PREPARTICIPATION PHYSICAL EVALUATION

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! PREPARTICIPATION PHYSICAL EVALUATION (Interim Guidance)

PHYSICAL EXAMINATION FORM

Name: _____ Date of birth: _____

PHYSICIAN REMINDERS

1. Consider additional questions on more-sensitive issues.
   - ¥ Do you feel stressed out or under a lot of pressure?
   - ¥ Do you ever feel sad, hopeless, depressed, or anxious?
   - ¥ Do you feel safe at your home or residence?
   - ¥