Dear Parent(s) of High School Student Athletes,

The Utah High School Athletics Association (UHSAA) now requires that all student athletes have a pre-participation physical exam each calendar year.

Historically, many pre-participation physicals have been completed in a large group setting where quick, non-personal exams are done and paperwork signed. While this is commonly offered for convenience it is not necessarily the best medical approach.

Our Team and Our Approach to Physicals
Our medical team offers comprehensive sports medicine services with both orthopedic surgery and primary care physicians who specialize in sports medicine. We are able to provide an extensive breadth of medical care including management of sport related injuries and primary care needs for student athletes.

To provide the best medical care, we recommend your student athlete be seen for an annual preventative visit in a standard clinical setting. This allows adequate time to review medical history and perform a thorough physical exam. It also allows time to discuss any health problems your student athlete may have, such as asthma, acne, or other concerns. Many teenage student athletes prefer seeing a physician whose practice is focused on athletes. Improved coordination of care with your school and coaches is another great benefit.

Annual Preventative Visits are Free to You
If it has been more than a year since your student athlete’s last annual preventative visit, we recommend you schedule one. These are almost always covered 100% by insurance. As part of the visit we will complete your sports physical forms.

Limited Sports Physicals
While we recommend annual preventative visits, we do offer limited sports physicals. These visits are limited to sport related preventative screening but are adequate for the requirements of the sports physical paperwork. Presently, these are being provided for $25. Scenarios where a limited sports physical is acceptable:

- If your student athlete sees another primary care provider regularly and you plan to schedule an annual preventative visit with that provider.
- If you have already had an annual preventative visit within the last calendar year.
- If we are out-of-network for your insurance plan.
What You Need to Do
1. Call for appointment. Call 801-858-3715 or 801-533-2002. Inform the receptionist you need an appointment for an annual physical with Dr. Kirk or Dr. Cosgrave.

2. Bring with you to your appointment:
   a. Pre-participation History and Physical Form. Please complete pages 1-3 prior to the visit. Page 4 is for us. Be sure to review the concussion handouts in this packet and sign than you have read them on page 2.
   b. Insurance card.

3. Parents, please accompany your student athlete to the appointment. Medical and family history is more accurate when provided by parents. Also, we are not allowed to see minors without consent from a parent/guardian.

4. Don’t procrastinate. Let’s get everything taken care of long before any deadline and avoid the rush.

5. Have a great year!

Location
Comprehensive Orthopedics & Sports Medicine
Jordan Commons Office Tower
9350 S. 150 E. Suite 460 (4th floor)
Sandy, Utah, 84070
PRE-PARTICIPATION EXAMINATION FORM

Instructions for completing pre-participation (athletic) Health Examination and Consent Form

COMPLETING THIS FORM:
1. PLEASE TYPE OR PRINT LEGIBLY
2. Parent/Guardian along with the student are to complete the Health History on page 3 and the Disclosure and Consent Document on page 2. Please note student and parent are to sign both forms. The Health History is to be taken to the physical examination for the physician/provider to review.
3. Physician/Provider is to complete and sign the Physical Examination form on page 4.
4. Entire completed form is to be returned to school administration.

SUBMITTING THIS FORM:
1. School personnel should review form to assure it is completed properly.
2. ORIGINAL copy is to be retained in school files.

A health examination must be performed annually and the Pre-participation Physical Evaluation Form must be completed before any student may participate in athletic activities sponsored by this Association. A Pre-participation Physical Evaluation Form along with the Disclosure and Consent Document must be on file at the school before any participation in athletic activities.

The health examination may be completed and the form signed by any Medical Doctor (MD), Doctor of Osteopathy (DO), Physician’s Assistant (PAC), Chiropractic Physician (DC), or Registered Nurse Practitioner (RNP) functioning within the legal scope of their practice.

THE UTAH HIGH SCHOOL ACTIVITIES ASSOCIATION DOES NOT PROVIDE PRINTED COPIES OF THIS FORM. PLEASE MAKE ALL NECESSARY COPIES.
Pre-Participation Health Examination Form, Updated July, 2014

Participant & Parental Disclosure and Consent Document

PLEASE NOTE: It is the responsibility of the parent/guardian to notify the school if there are any unique individual problems that are not listed on the Pre-participation Physical Evaluation Form.

Name of Student ___________________________ School ___________________________

Is the student covered by health/accident insurance? □ Yes □ No

Name of health insurance provider ___________________________

If no insurance provider, explain ___________________________

CONSENT FORM

Parent or Guardian Statement of Permission, Approval, and Acknowledgement:

By signing below, I the parent or legal guardian of the above named student do:

- Hereby consent to the above named student participating in the interscholastic athletic program at the school listed above. This consent includes travel to and from athletic contests and practice sessions.

- Further consent to treatment deemed necessary by health care providers designated by school authorities for any illness or injury resulting from his/her athletic participation.

- Recognize that a risk of possible injury is inherent in all sports participation. I further realize that potential injuries may be severe in nature including such conditions as: fractures, brain injuries, paralysis or even death.

- Acknowledge and give consent that a copy of this form will remain in the student’s school. I agree that if my student’s health changes and would alter this evaluation, I will notify the school as soon as possible but within no longer than 10 days.

- Hereby acknowledge having received education including receiving written information regarding the signs, symptoms, and risks of sport related concussion. I also acknowledge that I have read, understand and agree to abide by the UHSAA Concussion Management Policy and/or the policy of the school listed above. http://www.uhsaa.org/SportsMed/ConcussionManagementPlan.pdf

Parent or Guardian Name ___________________________ Parent or Guardian Signature ___________________________

Date ___________________________

Student Statement

By signing below I acknowledge:

- This application to compete in interscholastic athletics for the above school is entirely voluntary on my part and is made with the understanding that I have not violated any of the eligibility rules and regulations of the Utah High School Activities Association.

- My responsibility to report to my coachs and parent(s)/guardian(s) illness or injury I experience.

- Having received education including receiving written information regarding signs, symptoms, and risks of sport related concussion. I also acknowledge my responsibility to report to my coachs and parent(s)/guardian(s) any signs or symptoms of a concussion.

Signature of Student ___________________________ Date ___________________________

THIS FORM MUST BE ON FILE AT THE MEMBER HIGH SCHOOL PRIOR TO PARTICIPATION.
# Preparticipation Physical Evaluation History Form

(Note: This form is to be filled out by the patient and parent prior to seeing the physician. The physician should keep this form in the chart.)

Date of Exam ____________________________

Name ____________________________________________ Date of birth ____________________________

Sex ______ Age ______ Grade ______ School ______ Sport(s) ______

Medicines and Allergies: Please list all of the prescription and over-the-counter medicines and supplements (herbal and nutritional) that you are currently taking.

<table>
<thead>
<tr>
<th>Medicines</th>
<th>Pollens</th>
<th>Food</th>
<th>Stinging Insects</th>
</tr>
</thead>
</table>

Do you have any allergies? __ Yes __ No __ If yes, please identify specific allergy below.

* Medicines
* Pollens
* Food
* Stinging Insects

Explain "Yes" answers below. Circle questions you don't know the answers to.

## General Questions

<table>
<thead>
<tr>
<th>General Questions</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Has a doctor ever denied or restricted your participation in sports for any reason?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Do you have any ongoing medical conditions? If so, please identify below: A Asthma, B Arthritis, C Diabetes, D Infections Other:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Have you ever spent the night in the hospital?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Have you ever had surgery?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Heart Health Questions About You

<table>
<thead>
<tr>
<th>Heart Health Questions About You</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>5. Have you ever passed out or nearly passed out during or after exercise?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Have you ever had discomfort, pain, tightness, or pressure in your chest during exercise?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Does your heart ever race or skip beats (irregular beats) during exercise?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Has a doctor ever told you that you have any heart problems? If so, check all that apply: A High blood pressure, B A heart murmur, C High cholesterol, D A heart infection, E Kawasaki disease Other:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Has a doctor ever ordered a test for your heart? (For example, ECG/ECG, echocardiogram)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Do you get lightheaded or feel more short of breath than expected during exercise?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Have you ever had an unexplained seizure?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Do you get more tired or short of breath more quickly than your friends during exercise?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Heart Health Questions About Your Family

<table>
<thead>
<tr>
<th>Heart Health Questions About Your Family</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>13. Has any family member or relative died of heart problems or had an unexpected or unexplained sudden death before age 50? (Including drowning, unexplained car accident, or sudden infant death syndrome)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Does anyone in your family have hypertrrophic cardiomyopathy, Marfan syndrome, amyloidosis, Marfanoid chest wall abnormalities, long QT syndrome, short QT syndrome, Brugada syndrome, or catecholaminergic polymorphic ventricular tachycardia?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. Does anyone in your family have a heart problem, pacemaker, or implanted defibrillator?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. Has anyone in your family had unexplained fainting, unexplained syncope, or near drowning?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Bone and Joint Questions

<table>
<thead>
<tr>
<th>Bone and Joint Questions</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>17. Have you ever had an injury to a bone, muscle, ligament, or tendon that caused you to miss a practice or a game?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. Have you ever had any broken or fractured bones or dislocated joints?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. Have you ever had an injury that required x-rays, MRI, CT scan, injections, therapy, a brace, a cast, or crutches?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Have you ever had a stress fracture?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. Have you ever been told that you have or you had an x-ray for neck instability or atlantoaxial instability? (Down syndrome or dwarfism)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22. Do you regularly use a brace, orthotics, or other assistive device?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23. Do you have a bone, muscle, or joint injury that bothers you?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24. Do any of your joints become painful, swollen, feel warm, or look red?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25. Do you have any history of juvenile arthritis or connective tissue disease?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I hereby state that, to the best of my knowledge, my answers to the above questions are complete and correct.

Signature of athlete ____________________________ Signature of parent/guardian ____________________________ Date ____________________________


Page 3 of 4
# Preparticipation Physical Evaluation

**Physical Examination Form**

**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?
   - Have you ever tried cigarettes, chewing tobacco, snuff, or dip?
   - During the past 30 days, did you use chewing tobacco, snuff, or dip?
   - Do you drink alcohol or use any other drugs?
   - Have you ever taken any supplements to help you gain or lose weight or improve your performance?
   - Have you ever taken any medications to help you gain or lose weight or improve your performance?
   - Do you wear a seat belt, use a helmet, and use condoms?

2. Consider reviewing questions on cardiovascular symptoms (questions 5–14).

---

## Examination

<table>
<thead>
<tr>
<th>Height</th>
<th>Weight</th>
<th>☐ Male</th>
<th>☐ Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>BP / ( ) /</td>
<td>Pulse</td>
<td>Vision R 20/</td>
<td>L 20/</td>
</tr>
</tbody>
</table>

### Medical

- Appearance
  - Marfan stigmata (hypertelorism, high-arched palate, pectus excavatum, arachnodactyly, arm span > height, hyperlexia, myopia, MVP, aortic insufficiency)
- Eyes/ears/nose/throat
  - Pupils equal
  - Hearing
- Lymph nodes
- Heart
  - Murmurs (auscultation stridulous, suprains, +/- Valsalva)
  - Location of point of maximal impulses (PMI)
- Pulses
  - Simultaneous femoral and radial pulses
- Lungs
- Abdomen
- Genitourinary (males only)*
- Skin
  - HSV lesions suggestive of MRSA, linea corporis
- Neurologic:

### Musculoskeletal

- Neck
- Back
- Shoulder/Arm
- Elbow/Forearm
- Wrist/hand/fingers
- Hip/thigh
- Knee
- Leg/ankle
- Foot/toes
- Functional
  - Walk, single leg hop

---

*Consider ECG, echocardiogram, and referral to cardiology for abnormal cardiac history or exam.
*Consider GI exam if in private setting; having third party present is recommended.
*Consider cognitive evaluation or baseline neuropsychiatric testing if a history of significant concussion.

☐ Cleared for all sports without restriction
☐ Cleared for all sports without restriction with recommendations for further evaluation or treatment for __________

☐ Not cleared
  - ☐ Pending further evaluation
  - ☐ For any sports
  - ☐ For certain sports

Reason __________

Recommendations __________

I have examined the above-named student and completed the preparticipation physical evaluation. The athlete does not present apparent clinical contraindications to practice and participate in the sport(s) as outlined above. A copy of the physical exam is on record in my office and can be made available to the school at the request of the parents. If conditions arise after the athlete has been cleared for participation, the physician may rescind the clearance until the problem is resolved and the potential consequences are completely explained to the athlete (and parents/guardians).

Name of physician (print/type) __________ Date __________

Address __________ Phone __________

Signature of physician __________

What is a concussion?
A concussion is a brain injury. Concussions are caused by a bump, blow, or jolt to the head or body. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious.

What are the signs and symptoms?
You can’t see a concussion. Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days after the injury. If your teen reports one or more symptoms of concussion listed below, or if you notice the symptoms yourself, keep your teen out of play and seek medical attention right away.

<table>
<thead>
<tr>
<th>Signs Observed by Parents or Guardians</th>
<th>Symptoms Reported by Athlete</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appears dazed or stunned</td>
<td>Headache or “pressure” in head</td>
</tr>
<tr>
<td>Is confused about assignment or position</td>
<td>Nausea or vomiting</td>
</tr>
<tr>
<td>Forgets an instruction</td>
<td>Balance problems or dizziness</td>
</tr>
<tr>
<td>Is unsure of game, score, or opponent</td>
<td>Double or blurry vision</td>
</tr>
<tr>
<td>Moves clumsily</td>
<td>Sensitivity to light or noise</td>
</tr>
<tr>
<td>Answers questions slowly</td>
<td>Feeling sluggish, hazy, foggy, or groggy</td>
</tr>
<tr>
<td>Loses consciousness (even briefly)</td>
<td>Concentration or memory problems</td>
</tr>
<tr>
<td>Shows mood, behavior, or personality changes</td>
<td>Confusion</td>
</tr>
<tr>
<td>Can’t recall events prior to hit or fall</td>
<td>Just not “feeling right” or is “feeling down”</td>
</tr>
<tr>
<td>Can’t recall events after hit or fall</td>
<td></td>
</tr>
</tbody>
</table>

How can you help your teen prevent a concussion?
Every sport is different, but there are steps your teens can take to protect themselves from concussion and other injuries.
- Make sure they wear the right protective equipment for their activity. It should fit properly, be well maintained, and be worn consistently and correctly.

- Ensure that they follow their coaches’ rules for safety and the rules of the sport.
- Encourage them to practice good sportsmanship at all times.

What should you do if you think your teen has a concussion?
1. Keep your teen out of play. If your teen has a concussion, her/his brain needs time to heal. Don't let your teen return to play the day of the injury and until a health care professional, experienced in evaluating for concussion, says your teen is symptom-free and it's OK to return to play. A repeat concussion that occurs before the brain recovers from the first—usually within a short period of time (hours, days, or weeks)—can slow recovery or increase the likelihood of having long-term problems. In rare cases, repeat concussions can result in edema (brain swelling), permanent brain damage, and even death.

2. Seek medical attention right away. A health care professional experienced in evaluating for concussion will be able to decide how serious the concussion is and when it is safe for your teen to return to sports.

3. Teach your teen that it’s not smart to play with a concussion. Rest is key after a concussion. Sometimes athletes wrongly believe that it shows strength and courage to play injured. Discourage others from pressuring injured athletes to play. Don't let your teen convince you that s/he’s “just fine.”

4. Tell all of your teen’s coaches and the student’s school nurse about ANY concussion. Coaches, school nurses, and other school staff should know if your teen has ever had a concussion. Your teen may need to limit activities while s/he is recovering from a concussion. Things such as studying, driving, working on a computer, playing video games, or exercising may cause concussion symptoms to reappear or get worse. Talk to your health care professional, as well as your teen’s coaches, school nurse, and teachers. If needed, they can help adjust your teen’s school activities during her/his recovery.

If you think your teen has a concussion:
Don't assess it yourself. Take him/her out of play.
Seek the advice of a health care professional.

It's better to miss one game than the whole season.
For more information and to order additional materials free-of-charge, visit: www.cdc.gov/Concussion.

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

June 2010
What is a concussion?
A concussion is a brain injury that:
- Is caused by a bump, blow, or jolt to the head or body.
- Can change the way your brain normally works.
- Can occur during practices or games in any sport or recreational activity.
- Can happen even if you haven’t been knocked out.
- Can be serious even if you’ve just been “dinged” or “had your bell rung.”

All concussions are serious. A concussion can affect your ability to do schoolwork and other activities (such as playing video games, working on a computer, studying, driving, or exercising). Most people with a concussion get better, but it is important to give your brain time to heal.

What are the symptoms of a concussion?
You can’t see a concussion, but you might notice one or more of the symptoms listed below or that you “don’t feel right” soon after, a few days after, or even weeks after the injury.
- Headache or “pressure” in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Bothered by light or noise
- Feeling sluggish, hazy, foggy, or groggy
- Difficulty paying attention
- Memory problems
- Confusion

What should I do if I think I have a concussion?
- Tell your coaches and your parents. Never ignore a bump or blow to the head even if you feel fine. Also, tell your coach right away if you think you have a concussion or if one of your teammates might have a concussion.
- Get a medical check-up. A doctor or other health care professional can tell if you have a concussion and when it is OK to return to play.
- Give yourself time to get better. If you have a concussion, your brain needs time to heal. While your brain is still healing, you are much more likely to have another concussion. Repeat concussions can increase the time it takes for you to recover and may cause more damage to your brain. It is important to rest and not return to play until you get the OK from your health care professional that you are symptom-free.

How can I prevent a concussion?
Every sport is different, but there are steps you can take to protect yourself.
- Use the proper sports equipment, including personal protective equipment. In order for equipment to protect you, it must be:
  - The right equipment for the game, position, or activity
  - Worn correctly and the correct size and fit
  - Used every time you play or practice
- Follow your coach’s rules for safety and the rules of the sport.
- Practice good sportsmanship at all times.

If you think you have a concussion:
Don’t hide it. Report it. Take time to recover.

It’s better to miss one game than the whole season.

For more information and to order additional materials free-of-charge, visit: www.cdc.gov/Concussion.

June 2010
PHYSICIANS

ANDREW D. COOPER, MD, PC
Dr. Cooper spent most of his early years in Salt Lake City, Utah. He graduated from Skyline High School and received his Bachelor's Degree in Biology from the University of Utah. Afterward, he returned to his roots, attending the Medical University of South Carolina in Charleston, South Carolina, graduating in the top of his class and earning multiple academic scholarships and awards, including membership in the AOA Honor Society. He then completed an orthopedic surgery residency at the University of Kansas Medical Center in Kansas City, Kansas, followed by a fellowship in Sports Medicine at the Steadman Hawkins Clinic in Denver, Colorado. During his training he was involved with the care of high school, collegiate and professional athletes, including the Denver Broncos and Colorado Rockies. Dr. Cooper moved back to Salt Lake City in 2005 as a founding partner in Comprehensive Orthopedics and Sports Medicine and starting Sports Med Utah. His interest today includes minimally invasive techniques in ligament and cartilage reconstruction and getting athletes back to their sport safely. Currently, he is the head team physician and orthopedic surgeon for the Real Salt Lake Major League Soccer team, US Freeski (US Ski and Snowboard), Westminster College and Ballet West. Dr. Cooper is also the medical director of Solitude Resort Ski Patrol and Clinic. In addition, he has worked closely with multiple high schools in the area and is the former orthopedic surgeon for the Utah Blaze AFL team. Dr. Cooper is board certified in orthopedic surgery by the American Academy of Orthopaedic Surgery (AAOS). When not treating athletes and spending time with his family, Dr. Cooper enjoys endurance sports. He has competed in more than 50 triathlons, including eight Ironman events, LOTOJA 206 mile bike race, too many marathons and ultra-marathons to count - running Boston multiple times. He is an avid outdoorsman and enjoys skiing, hunting, fishing and backpacking in the remote wilderness. Specialties include ankle, knee, shoulder, and sports medicine.

STEPHEN KIRK, MD
Dr. Kirk is a fellowship trained orthopedic sports medicine physician. He completed his medical degree at the University of Iowa in Iowa City. After medical school, Dr. Kirk completed a family medicine residency at Utah Valley Family Medicine followed by a sports medicine fellowship at Utah Valley Sports Medicine and Orthopedics in Provo. Dr. Kirk is currently a team physician for Real Salt Lake, Real Monarchs, Westminster College, Ballet West, US Ski and Snowboard Association, Utah Speedskating, Utah Jazz, East High School, Taylorsville High School, Summit Academy High School, and Juan Diego Catholic High School. Dr. Kirk sees the full spectrum of sports medicine and orthopedic (non-surgical) injuries. He has a special interest in running related injuries, biomechanical analysis of running, fracture care, concussion care, osteoarthritis, regenerative medicine, and tendon injuries.

MICHAEL L. COSGRAVE, DO
Dr. Cosgrave is a family medicine physician specializing in sports medicine. He received a Doctor of Osteopathic Medicine from Lake Erie College of Osteopathic Medicine in Bradenton, Florida. Dr. Cosgrave then completed both a residency in family medicine and a fellowship in sports medicine at Utah Valley Regional Medical Center in Provo, Utah. Dr. Cosgrave has served as a team physician for BYU, UVU, and high school athletic teams during his fellowship. He is also a physician for the Official Ford Ironman Triathlon in St. George, the Utah Valley Marathon, and is a ringside physician for MMA events. Dr. Cosgrave's areas of special interest include running medicine, non-surgical fracture care, osteopathic manipulative treatment, and concussion management.

PHYSICAL THERAPIST

ADAM B. KERSHAW, MPT, OCS
Adam is the Clinic Director and Outpatient Clinical Coordinator at Salt Lake Regional Physical Therapy at Jordan Commons. He is a physical therapist and board-certified orthopaedic clinical specialist with extensive experience treating orthopaedic and sports medicine injuries. Adam received his undergraduate degree in exercise and sport science and exercise physiology from the University of Utah, and then completed a master's degree in physical therapy, also from the University of Utah. Currently, Kershaw works closely with REAL Salt Lake, Westminster College, Summit Academy High School, Juan Diego Catholic High School, and local athletic teams. Areas of focus: Orthopaedics, spine, sports medicine, manual therapy, Graston Technique®, shoulder/throwing rehab, knee rehab

ATHLETIC TRAINER

ANDREW SPADAFORA, MED, ATC-L
Andrew is a native of Provo, Utah. He received a Bachelor of Science in Exercise Science with an emphasis in Athletic Training. He earned a Master of Education from the University of Virginia in 2011 in Athletic Training/Sports Medicine where his thesis research involved ethics education and professional socialization in athletic training. For the last 7 years he has been at the Virginia Military Institute as an Assistant Athletic Trainer for 6 years and then Associate Head Athletic Trainer for the last year. Andrew is currently the Head Athletic Trainer at Juan Diego Catholic High School.
EMERGENCY CARE & IMAGING SERVICES

Salt Lake Regional Medical Center
801-350-4111
1050 East South Temple
Salt Lake City, UT 84102

PHYSICIAN CLINIC LOCATIONS

Comprehensive Orthopedics and Sports Medicine
Andrew D. Cooper, MD
Stephen Kirk, MD
Michael L. Cosgrave, DO

801-533-2002
Sandy (Jordan Commons Tower)
9350 South 150 East, Suite 460
Sandy, UT 84070

Salt Lake City Location
82 South 1100 East, Suite 303
Salt Lake City, UT 84102

OUTPATIENT CLINIC LOCATIONS/HOURS

Physical Therapy at Jordan Commons
9350 South 150 East, Suite 460
Sandy, UT 84070
(801) 748-1861
Hours: Monday - Friday 7:00 a.m. - 7:00 p.m.
Clinic Director: Adam Kershaw, MPT, OCS

Salt Lake Regional Physical Therapy
Salt Lake Regional Medical Center
1050 E. South Temple, Ground Floor
Salt Lake City, UT 84102
(801) 350-4593
Hours: Monday, Wednesday, Friday 7:00 a.m. - 7:00 p.m.
Tuesday, Thursday 8:00 a.m. - 7:00 p.m.
Clinic Director: Ted Sexton, MS, PT

EXCLUSIVE SPORTS MEDICINE PROVIDER FOR THE FOLLOWING:

[Logos of various organizations]
OUR FOCUS

Sports Medicine is a specialty in medicine that focuses on the medical care for the casual or competitive athlete. Athletic injuries can be of such varied nature that multiple specialists are sometimes called upon. What sets Sports Med Utah's program apart from the usual and customary medical care is the "team" of experts that have been assembled to work together to provide early diagnosis, treatment, surgery and rehabilitation of the athlete. Sports Med Utah at Salt Lake Regional Medical Center provides the following services:

- Orthopedic Surgeons
- Sports Medicine Physicians
- Physical Therapists
- Athletic Trainers
- Free Injury Evaluation
- Access to hospital services and multiple specialists
- Acceleration Program

A successful sports medicine program incorporates a philosophy of care that includes:

- Prevention of injury
- Conditioning
- Proper fitting equipment
- Safe environment of play
- Sports exam
- Early diagnosis of an injury
- Immediate treatment and or proper support for the injury
- Return to activity ASAP

YOUR REPRESENTATIVES

The Sports Med Utah “System” begins with Andrew Spadafora, MEd, ATC-L. If an injury is identified, Andrew has the option of:

1. Managing and treating the injury
2. Coordinate care with sports medicine physicians
3. When appropriate, refer the athlete to Physical Therapy at Jordan Commons
   (801)748-1861
   9350 South 150 East, Suite 460, Sandy, UT 84070
4. Access to Salt Lake Regional Medical Center services

   - If an injury requires specialists or further testing, appointments are set-up with the appropriate physician or testing facility.
   - Participation within our sports medicine program assures accurate and timely injury information to parents, coaches, and other providers with the system.
1050 East South Temple, Salt Lake City, UT 84102
www.saltlakeregional.org | 866-431-WELL (9355)

For more than a century, Salt Lake Regional Medical Center has provided high quality healthcare for residents of the Salt Lake Valley. Conveniently located near the heart of the city, our historic acute care hospital provides Health Care from the Heart — a legacy that has earned us a reputation for being one of the most trusted medical centers in Utah.

Hospital Highlights

**EMERGENCY MEDICINE**
- Emergency Care, 24/7
- Geriatric and Psychiatric Services 24/7
- Helipad for Life-flight Services
- Board Certified Emergency Physicians
- Online ER Check-In
- Pastoral Care
- State Certified STEMI Receiving Center (Heart Attack)

**BEHAVIORAL HEALTH**
- Inpatient Geriatric Psychiatry
- Intensive Outpatient group program
- Medication Management
- Outpatient Geriatric Mental Health
- Transportation available

**HEART CARE**
- Advanced Cardiology Services
- Cardiac Catheterization
- Cardiac Rehabilitation
- Cardiac Ultrasound (ECHO)
- Cardiovascular Intensive Care
- HeartView Screenings
- Open-Heart Surgery
- PAD Screening
- STEMI Receiving Center
- Treatment for Arrhythmia
- Vein Center

**ORTHOPEDICS & SPORTS MEDICINE**
- Acceleration Program
- Foot & Ankle Specialist
- Hand Specialist
- Physical Medicine & Rehabilitation
- Rehabilitation Services
  - Aquatic Pool, Physical, Occupational and Speech Therapy
  - Acute Inpatient Rehabilitation Unit
- Shoulder Specialist
- Sports Medicine for student athletes
- Sports Medicine Program “SportsMedUtah.com”
- Total Joint Replacement

**WOMEN'S HEALTH**
- Abdominal Health Center
- Bone Density Screenings
- Breast Care Center
- Cancer Treatment
- Gynecology
- Mammography - on-line appointments
- Maternity Care
- Obstetrics
- Pelvic Floor Disorders
- Physician-Assisted Robotic Surgery
- Private rooms
- Surgical & Non Surgical Weight Loss
Medical Specialties

- Abdominal Health Center
- Acute Rehabilitation
- Allergy & Immunology
- Arthritis/Total Joint Replacement
- Bariatric Surgery
- Behavioral Health
- Breast Surgery
- Cancer Services
- Cardiology
- Cardiothoracic Surgery
- Critical Care
- Dermatology
- Ears, Nose, and Throat (ENT)
- Emergency Medicine
- Endoscopy/Gastroenterology
- Family Medicine
- Geriatrics/Senior Services
- Gynecology
- Hand Surgery
- Heartburn Care Center
- Hematology/Oncology
- Hyperbaric Medicine
- Infectious Disease
- Internal Medicine
- Lab Services
- Nephrology
- Neurology
- Neurosurgery
- Nurse Midwifery
- Obstetrics
- Occupational Therapy
- Oculoplastic Surgery
- Oral/Maxillofacial Surgery
- Orthopedics
- Pain Management
- Pathology
- Physical Therapy
- Plastic Surgery
- Podiatry
- Psychology
- Pulmonology
- Radiation Oncology
- Radiology
- Rehabilitation
- Robotic Assisted Surgery
- Sleep Disorders
- Speech Therapy
- Sports Medicine
- Surgical Services
- Urology
- Vascular Medicine
- Vein Center
- Weight loss (surgical and non-surgical)
- Women's Services
- Wound Care

Accepted Managed Healthcare Contracts

AETNA (Utah connected network excluded)
AETNA-PEAK PREFERENCE NETWORK
ALTIUS
AMERICA'S HEALTH PLAN
AUTO LIV
BCE EMERGIS
BEHAVIORAL MEDICINE
CIGNA Behavioral Health
Davis Behavioral Health
HMO
Life Synch
Optum Behavioral Health
United Behavioral Health
REGENEX Blue Cross/Blue Shield
(BC Regence Focal Point and Blue options excluded)
BCBS Regency GP Admin
Blue Card (National)
Federal Employee Program (FEP)
Regence (Traditional Plans)
Valuecare
CHAMPUS
CHOICE CARE
CIGNA HEALTHCARE OF UTAH
(Excludes Mountain Star Network)
Cigna Behavioral Health
GreatWest (Cigna)
CLEARFIELD JOB CORP (MTC)
CONCENTRA PREFERRED SYSTEMS
COVENTRY
DMBA
EMPLOYER DIRECT HEALTHCARE
FIRST HEALTH
FOCUS HEALTHCARE
GEHA
HEALTH CHOICE UTAH
HEALTH MANAGEMENT NETWORK (HMN)
HEALTHNET FEDERAL SERVICES
HEALTH UTAH
HEALTHY PREMIERE GROUP*
HEALTHY U
HOSPICE
CareSource Hospice
Inspiration Hospice
Odyssey Healthcare
Vista Hospice
HSA HEALTH PLANS
HUMANA
HUMANA CHOICECARE NETWORK
INTEGRATED HEALTH PLAN
J-U-B ENGINEERING**
MAIL HANDLERS
UTAH MEDICAID (Except Community Care)
MEDICARE
MEDICARE ADVANTAGE PLANS
AARP Medicare Complete
AETNA*
Alitis
Healthy Advantage
HumanaChoice PPO
Humana Gold Choice
MED-CARE Advantage
Molina Healthcare Options
Regence BCBS
United Healthcare
MERITAN HEALTHCARE***
MOLINA
MULTIPLAN
NPPN (PlanCare America; Plan Vista)
PEHP
Murray City - Preferred Care
Outside Agencies - Preferred Care
Salt Lake County - Preferred Care
University of Utah - Preferred Care
Utah School Boards Association - Gold & Silver Care
PEHP CAPITAL
PEHP SUMMIT CARE
PHCS (Private Health Care Systems)
PLANCARE AMERICA (See NPPN)
QMS
THREE RIVERS NETWORK (EBMS)
TRI-CARE/UNITED MILITARY SERVICES
UNITED BEHAVIORAL HEALTH
UNITED HEALTHCARE OPTIONS PPO
UNIVERSITY OF UTAH HEALTH PLANS***
USA MANAGED CARE
WISE PROVIDER NETWORK
WORKERS COMPENSATION - All Plans

*Healthcare Exchange Plans
**Employer Direct Contracts
***Some plans may be out of network

All Insurances Accepted
Through Emergency Room

Private Pay:
Patients are eligible for substantial discounts when payment is made at time of service.

Some affiliates may not be listed.