

THE SCHOOL DISTRICT OF OSCEOLA COUNTY, FLORIDA  
**Cardiology Report: Electrocardiogram (ECG) Finding**  
**(to be completed by a licensed physician)**

Parents: An ECG screen (also referred to as an EKG) can help identify young athletes who are at risk for sudden cardiac death, a condition where death results from an abrupt loss of heart function. An ECG screening may assist in diagnosing several different heart conditions that may contribute to sudden cardiac death. The School District is requiring one (1) cleared ECG, during a student's four (4) years of high school, to assure the health of any student participating in athletics.

Please have the reviewing physician fill out and sign this form and return to: \_\_\_\_\_ (Name of School)

Date: \_\_\_\_\_

Student's Name: \_\_\_\_\_

Sex: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Ethnicity: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

***ECG in office:***

Normal: \_\_\_\_\_ Abnormal: \_\_\_\_\_

**Cardiac Clearance**

Name of Physician or Approved Health Care Professional

Date: \_\_\_\_\_

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Signature)

Address: \_\_\_\_\_

City / St \_\_\_\_\_ Zip \_\_\_\_\_

Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_