



Sickle Cell Information/Waiver

The NCAA has recently adopted legislation for Division II institutions that requires all new student-athletes who are beginning their initial season of eligibility and students who are trying out for a team undergo a medical examination or evaluation administered or supervised by a physician to document the Sickle Cell status of student-athletes as part of their pre-participation medical examination prior to any athletic participation. The NCAA and the University of the District of Columbia recommend that all student-athletes be aware of their Sickle Cell status. Student-athletes may provide documentation of a prior blood test for Sickle Cell status and satisfy the NCAA requirement. Student-athletes may waive medical testing for Sickle Cell status as long as they sign the waiver which states they understand the risk of exercising in certain situations with Sickle Cell Trait.

The following information is provided to help our student-athletes make an informed decision.

- Sickle Cell Trait is the inheritance of one gene for sickle hemoglobin and one for normal hemoglobin, the oxygen carrying protein in red blood cells.
- Sickle Cell Trait is a common condition that affects more than 3 million Americans
- Although Sickle Cell Trait is most predominant in African-Americans and those of Mediterranean, Middle Eastern, Indian, Caribbean, and South and Central American ancestry, persons of all races and ancestry may test positive for the trait.
- Sickle Cell Trait is usually benign, but during intense exercise, red blood cells containing the sickle hemoglobin can change shape and accumulate in the bloodstream blocking normal blood flow. This can lead to collapse and even death due to the rapid breakdown of muscles starved of blood.
- More information regarding the Sickle Cell Trait and the rationale for the NCAA's legislation can be found at NCAA.org/health-safety.
- The NCAA and the University of the District of Columbia recommend that any athlete who is positive for Sickle Cell Trait engage in conditioning exercises in a slow and gradual progression and use adequate rest and recovery sessions. Those affected should stay well hydrated at all times, especially in hot and humid conditions, maintain proper asthma management, and be aware of any change in altitude while training as these conditions may exacerbate the onset of symptoms due to sickling.
- Student-athletes are reminded that if they experience any symptoms such as muscle pain, abnormal weakness, undue fatigue or breathlessness, that they stop activity and immediately alert their Athletic Trainer or coach.



Department of Intercollegiate Athletics

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Sickle Cell Testing

- The University of the District of Columbia offers testing via blood test through the student health center. Student-athletes beginning their initial eligibility or plan to try out for an intercollegiate team may make an appointment by calling 202-274-5030. The Student Health Center is located A-33 building 44; the hours of operation 8:30 am to 6:30 pm; please contact Tracy Edwards or Candice Moore for more information.
- Testing can also be performed at a different laboratory or physician’s office of the student-athlete’s choosing. Fees for these tests will be the responsibility of the student-athlete.
- If the student-athlete chooses not to be tested and does not wish to provide the results of a previous test the following waiver must be completed and on file in the Sports Medicine Office before the student-athlete is allowed participate in practice, competition or out of season conditioning activities.

I _____ understand and acknowledge that the NCAA and the University of the District of Columbia recommend that all student-athletes have knowledge of their Sickle Cell status. Additionally, I have read and fully understand the aforementioned information about Sickle Cell Trait and testing options. By signing this waiver I confirm that I do not wish to provide results of a previous test for Sickle Cell nor do I wish to undergo testing as part of my pre-participation medical examination, and hereby assume all the risks associated with participation in Athletics at the University of the District of Columbia. And agree to hold the College, its Trustees, Officers, Directors, staff, employees, agents, independent contractors, students, representatives, physicians, coaches, and volunteers harmless from any and all liability, actions, causes of actions, debts, claims or demands of any kind and nature whatsoever that may arisen by or in connection with my participation in the University of the District of Columbia Athletics. The terms hereof shall serve as a release and assumption of risk for my heirs, estate, administrator, assignees, and for all members of my family.

Student-athlete signature: _____ Date: _____

Printed name: _____ Sport _____

Parent/Guardian (if under 18) _____ Date: _____

Printed name: _____



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