International Selection Pool

Competition Readiness Overview
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Competition Readiness Overview

Competition Readiness is the PROCESS by which a skater and his/her coach prepare strategically for the upcoming competitive figure skating season. While competition readiness is a process from which all competitive skaters and their coaches can benefit, this document applies immediately and directly to all skaters that have been named to the U.S. Figure Skating International Selection Pool (ISP). The ISP includes skaters that have been selected by the International Committee and may subsequently be eligible for assignment to an international ISU sanctioned event during the upcoming competitive season.

The foundation of competitive readiness lies in planning. Seasonal planning in particular allows you to identify, discuss, understand, and execute all factors that affect your daily and competition performance. These factors include, but are not limited to: goals (big/small, short-/long-term), strengths, weaknesses and opportunities for improvement, needs (athlete, coach, parent, support team), resources (personal/professional, human/financial), roles (athlete, coach, parent, support team), and expectations (athlete, coach, family, federation).

A well-designed, well-communicated seasonal plan will promote physical and mental fitness and significantly reduce the risk of the common issues of injury and physical and mental stamina. A good seasonal plan also levels expectations and equalizes your team’s vision of PERFORMANCE. Competition readiness is the process of preparing strategically for such performance.

Submission Instructions

All competition readiness requirements must be completed in the Athlete High Performance database, Ex3. No exceptions! Please see separate instructions document for further information.
Competition Readiness Agreement

Please read, sign, and submit in Ex3 only.

I, __________________________, a U.S. Figure Skating athlete and member of the International Selection Pool, hereafter referred to as “the skater,” understand that to represent U.S. Figure Skating’s Team USA during the upcoming international competitive figure skating season I must complete the ISP Competition Readiness Process, the components of which are outlined in this agreement. I understand that strict due dates apply and are published in Appendix A – COMPETITION READINESS TIMELINE.

**Passport.** I, the skater, agree to obtain/maintain a current passport, on which the expiration date is at least six months later than my assigned competition date. I, the skater, agree to update/upload a copy of my current passport to the Athlete High Performance database (Ex3) no later than the deadline outlined in Appendix A – COMPETITION READINESS TIMELINE.

**Electronic Signature.** I, the skater, agree to update/upload an electronic signature to the Athlete High Performance database (Ex3) for usage during the 2019-20 season no later than the deadline outlined in Appendix A – COMPETITION READINESS TIMELINE.

**Seasonal Plan.** I, the skater, agree to develop and submit a seasonal plan that identifies and supports my ultimate seasonal performance goal. I understand that my plan must meet the criteria outlined in Appendix B – SEASONAL PLAN REQUIREMENTS and that my plan will be reviewed and tentatively approved by qualified representatives of U.S. Figure Skating in order to complete this step in the competition readiness process.

**Summer Intentions and Planned Program Content.** I, the skater, agree to notify U.S. Figure Skating when my competitive programs are complete and ready to perform. I understand that this notification will include a list of planned elements along with a description of which summer competitions I plan to attend, their individual priority level, and what my performance intentions are for each competition (ex. working on placement of quad, and/or still optimizing footwork, and/or experimenting with spin positions, etc.). I understand that providing such information helps create perspective for the ISP officials that watch my programs at these competitions, thereby clarifying issues that may otherwise develop and impact my opportunity for assignment.

**Pre-participation Physical Evaluation.** I, the skater, agree to undergo and submit the results of a pre-participation physical evaluation using the data and clearance form provided in Appendix C – PRE-PARTICIPATION PHYSICAL EVALUATION. I understand that once submitted, this information will be handled with the utmost discretion and will be used solely for the purposes of (1) confirming my ability to train and compete to the best of my ability and (2) providing Team USA medical personnel with accurate and up-to-date information about my medical status so that they are better able to care for me during my assigned competition.

**Program Performance.** I, the skater, agree that I will perform my completed competition programs at a minimum of one eligible or “otherwise approved” event at least 35 days prior to departure for my first international competition of the season. Eligible events include Pairs Camp, Chesapeake Open (Dance), Broadmoor Open, Glacier Falls, Skate Detroit, Lake Placid Ice Dance Championships, Philadelphia Summer Championships, and Champs Camp. “Otherwise approved” events may include any competition that is held in the United States at which official detailed results sheets are readily available and which I have had individually pre-approved directly by my Discipline Group Chair and the International Committee Chair. This component will be considered complete when U.S. Figure Skating receives a copy of the detailed results sheet from the coach or the skater. Under special
circumstances exceptions can be made only with prior unanimous approval from the International Committee Chair, Discipline Group Chair, and U.S. Figure Skating Senior Director, Athlete High Performance.

Technical Feedback (required for all skaters assigned to a Senior Grand Prix competition, otherwise strongly recommended for the 2019-20 season). I, the skater, agree to participate in a technical feedback session that will provide me with constructive feedback regarding my competitive programs and/or components for the upcoming season. I may complete the performance feedback session by way of (a) video review (i.e. I may submit a video via the Athlete High Performance database (Ex3) of both short and free programs for technical specialists to comment on, with the understanding that this video-based feedback may not be returned to us for 30 days), and/or (b) in-depth technical feedback session (i.e. I may apply for a pre-arranged in-depth technical feedback session at any of the summer competitions [Pairs Camp, Dance Camp, High Performance Singles Camp, Glacier Falls, Skate Detroit, Lake Placid Ice Dance Championships, Philadelphia Summer Championships], where I may or may not be competing), and/or (c) Champs Camp (i.e. if I am assigned to a Senior Grand Prix competition).

Mental Preparation. I, the skater, in an effort to further enhance my mental preparation and skills, agree to participate in at least one mental preparation session conducted by a qualified sport psychologist. This session will include an assessment of my current mental skill-set, followed by an introduction of a new mental skill that I can train at home and implement at competition. Pre-approved and pre-arranged mental preparation sessions will be available to me at Team USA Summer Camps and Champs Camp. If I elect to complete this mental preparation requirement at a location other than one of these camps, I must first obtain confirmation from U.S. Figure Skating that my sport psychologist meets the minimum qualifications to conduct such training and ensure that my sport psychologist submits a summary of completion report to fulfill this competition readiness requirement. I understand that this component of the competition readiness process is included solely as a proactive performance-enhancing measure and that the conversation details of my mental training session(s) will not be disclosed and will remain confidential, unless their release is authorized by me in writing.

Doping Control. I, the skater, agree to review, confirm, and record the status of all my current prescription medications, over-the-counter medications, and dietary supplements using the online drug reference resource provided by the U.S. Anti-Doping Agency. I further agree to ensure that all appropriate required documentation for each medication has been filled or will be filled immediately and that all new medications and documentations will be reviewed and made current at least 30 days prior to my international event departure date. I understand that doping control rules are determined and implemented collaboratively with the World Anti-Doping Agency, International Skating Union, and U.S. Anti-Doping Agency and that it is my own responsibility to comply with these rules in order to maintain my eligibility to compete. Finally, I understand that I can be tested at any time (in-competition or out-of-competition) regardless if I am enrolled in a Registered Testing Pool.

Training Commitment, Injury & Case Management. I, the skater, agree to develop and maintain a level of health and fitness that will enable me to train at a high level and compete in peak condition. In the event that I become injured and/or ill to the extent that I require surgery and/or ongoing medical treatment, and/or am otherwise unable to train consistently and effectively (off the ice for more than three days due to injury and/or illness or having to adapt training due to injury and/or illness for one week or more), and which may therefore jeopardize my ability to compete at the athlete’s highest performance level for Team USA, I agree to communicate the situation to U.S. Figure Skating Senior Director, Athlete High Performance with a copy to U.S. Figure Skating Director, Sports Science and Medicine and Manager, Team USA. Under such circumstances, I authorize U.S. Figure Skating to request a Return-to-Play Plan & Status Report (see Appendix D – RETURN-TO-PLAY PLAN) from me and/or my healthcare provider(s). Upon receiving the Return to Play Plan & Status Report, U.S. Figure Skating may share the information with the International Committee Chair and the Sports Science and Medicine Committee Chair and/or the Vice Chair of Medical Services for the Sports Science and Medicine Committee. I understand that
all such communication will be handled with the utmost discretion and will be used to enable U.S. Figure Skating to help facilitate access to services that may support the athlete’s effort to recover.

In addition to the previous paragraph, any injury or illness within 21 days (three weeks) prior to the departure of the athlete for the events listed in Exhibit B in the Athlete Funding Agreement must be reported within 24 hours of occurrence of the injury/illness and/or knowledge of the injury/illness by the athlete and/or coach, whichever occurs first, to the Senior Director, Athlete High Performance and the Director, Sports Science and Medicine. The following procedure will then be followed:

- The Senior Director, Athlete High Performance will notify the International Committee Chair that there is an injury or illness.
- Depending on the severity of the injury or illness, U.S. Figure Skating reserves the right to assemble an injury/illness evaluation group and meet via conference call. The evaluation group shall include:
  - U.S. Figure Skating Senior Director, Athlete High Performance
  - U.S. Figure Skating Director, Sports Science and Medicine
  - Medical representative for U.S. Figure Skating
  - U.S. Figure Skating International Committee Chair
  - Athlete’s physician diagnosing the injury or illness
  - Primary coach of the athlete
  - AAC Chair or AAC representative

The athlete and (if requested or if the athlete is a minor) the parents of the athlete may also participate in the meeting to discuss the injury or illness.

The purpose of the evaluation group is to provide the athlete, in a confidential manner, a support mechanism to communicate factual information to aid in the recovery and allow the athlete to compete at the highest level at the assigned international event. The athlete’s support staff (medical team, coach, etc.) will develop a plan to provide:

- A timeline for recovery and training that will achieve the performance goal agreed upon by the evaluation group.
- A timeline for communication on the progress of the athlete.

The primary coach of the next substitute athlete may be notified by the International Committee Chair that a substitute may be needed depending on the severity of the injury or illness with a timeline to be determined.

If the athlete is unable to progress in the timeline approved by the evaluation group, the coach and athlete must notify the Senior Director, Athlete High Performance, and a follow-up conference call will be arranged to discuss the options for the athlete. At this point the athlete will decide whether to withdraw, or if the athlete decides that he/she is not ready to withdraw from the event, then the following will occur:

1. The evaluation group will work with the athlete and support staff to adjust the timeline, or
2. If it is determined by the evaluation group, in its sole discretion, that it is not in the best interest of the athlete and/or U.S. Figure Skating for the athlete to attend the assigned international event, the evaluation group will recommend to the International Committee Chair that the athlete is replaced by the next substitute athlete. The International Committee Chair will take the recommendation of the evaluation group to a vote by the appropriate Discipline Group to replace the athlete.
Important Note: In certain circumstances, the International Committee selection meeting may need to occur less than 21 days from the athletes’ departure date for an international event (i.e. Four Continents Championships). If an athlete has submitted an intent to compete form for any competition with a departure date 21 days or sooner from the date of the International Committee selection meeting for that event, the athlete is obligated to report ANY illness or injury within the 21 day reporting period, whether the athlete has been selected to the team or not.

When an athlete is named as an alternate to any international event by the International Committee, the named alternate and coach must provide a training plan to the athlete high performance department and follow the training plan that will maintain full competition readiness and thus will keep the athlete fully prepared to compete in the event an assigned competitor becomes unable to compete.

Failure to Comply. I, the skater, understand that if I individually fail to meet each of the competition readiness requirements defined by U.S. Figure Skating, I may be deemed “not ready” or “unprepared” for competition, in which case, except for Senior Grand Prix events, the Grand Prix Final, and the World Team Trophy/Team Challenge Cup, U.S. Figure Skating reserves the right to replace me on a team, or revoke all of my expense coverage related to my assigned competition (ex. travel, lodging, apparel, etc.). For Senior Grand Prix events, the Grand Prix Final, and the World Team Trophy/Team Challenge Cup, U.S. Figure Skating reserves the right to decline to pay for travel and lodging expenses of my coach.

Change of Coach. I, the skater, understand that in the event of a change in my primary coach, I will be required to submit a new Competition Readiness Agreement signed by my new primary coach. I understand that the status of all my completed components will remain unaffected, with the exception of Part 1 – Seasonal Plan outlined in Appendix B – SEASONAL PLAN REQUIREMENTS, which will also require the signature of my new coach and any revisions he/she may intend to incorporate into my preparation for the competitive season.

Acknowledgement & Signature. I, the skater, have read this agreement and understand and accept the terms of the U.S. Figure Skating ISP Competition Readiness Process. I have had the opportunity to ask questions and have had those questions answered to my satisfaction. By signing this agreement, I express my acceptance of its terms, and I understand that I can be held to the terms of this agreement to such extent that it may affect my eligibility to represent U.S. Figure Skating’s Team USA during the upcoming competitive figure skating season.

I, the coach, have read this agreement and understand its terms.

Acknowledgement & Signature. I, the coach, have read this agreement and understand its terms.
### Appendix A – Competition Readiness Outline

#### 2019-20 Competition Readiness Outline

**All competition readiness requirements must be completed before an athlete or coach’s flight can be booked to an international event**

Questions? Contact Ingrid Benson at ibenson@usfigureskating.org or 719-228-3427

<table>
<thead>
<tr>
<th>Competition Readiness Agreement &amp; Basic Information</th>
<th>Due: Sunday, April 14 (World Team Sunday, April 21)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Competition readiness agreement</td>
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<tr>
<td>☐ Edit contact information</td>
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<tr>
<td>☐ Upload/update passport</td>
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<tr>
<td>☐ Upload/update electronic signature</td>
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<td>☐ Parent/guardian electronic signature (for minors)</td>
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<tr>
<th>Seasonal Plan</th>
<th>Due: Sunday, April 21 (World Team Sunday, May 5)</th>
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<tr>
<td>☐ Strategic Plan</td>
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<tr>
<td>☐ Event Calendar</td>
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<td>☐ Fitness Worksheet</td>
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<thead>
<tr>
<th>Summer Intentions &amp; International Competition Preference</th>
<th>Due: Sunday, May 5</th>
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<tbody>
<tr>
<td>☐ Summer Intentions</td>
<td></td>
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<tr>
<td>☐ International Competition Preference</td>
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<tr>
<td>☐ Planned Program Content Sheet</td>
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<tr>
<th>Pre-Participation Physical Evaluation (PPE)</th>
<th>Due: Monday, August 5</th>
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<tbody>
<tr>
<td>☐ IJP 1-3 skaters and alternates: Submit no later than Monday, July 15 unless pre-booked at a High Performance Summer Camp</td>
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<tr>
<td>☐ Champs Camp skaters: Complete at Discipline Camps</td>
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<tr>
<td>☐ Pre-participation Physical Eval (PPE)</td>
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<tr>
<th>Complete Program Performance</th>
<th>Due: At least 35 days prior to departure for your first international event</th>
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<table>
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<tr>
<th>Grand Prix Skaters Only (Required)</th>
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<tbody>
<tr>
<td>☐ Champs Camp (August 24-28, 2019)</td>
<td></td>
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<tr>
<td>☐ Discipline Camp</td>
<td></td>
</tr>
<tr>
<td>☐ Technical Feedback Session</td>
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</tbody>
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<tr>
<th>Other Strongly Recommended Items</th>
<th>Due: Monday, August 5</th>
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</thead>
<tbody>
<tr>
<td>☐ Non-Grand Prix Skaters: Complete technical feedback session</td>
<td></td>
</tr>
<tr>
<td>☐ Mental Training (offered in group/private sessions at High Performance Summer Camps)</td>
<td></td>
</tr>
<tr>
<td>☐ Review/Confirm doping control requirements</td>
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</table>

**Note:** If you think you may be eligible for P.E.T. funding, you cannot miss the competition readiness deadlines! If you become eligible for P.E.T. funding and you fail to submit your Strategic Plan on time, your investment eligibility may, at the discretion of the Senior Director of Athlete High Performance, be forfeited.
Appendix B – Seasonal Plan Requirements

This is a descriptive document. All parts must be submitted via the Athlete High Performance database (Ex3) by the deadline outlined in Appendix A – COMPETITION READINESS TIMELINE.

PART 1 – STRATEGIC PLAN

a) ULTIMATE PERFORMANCE GOAL. Define your single ultimate performance goal for this season in terms of total program points and competition placement at World Championships, World Junior Championships, or U.S. Championships. In addition, in the season of the Olympic Games, define your ultimate performance goal if selected to the Olympic Team in terms of total program points and competition placement, if applicable.

b) S.W.O.T. ANALYSIS – Strengths, Weaknesses, Opportunities, Threats. Describe your current strengths and weaknesses and your anticipated opportunities and threats.

   a. Strengths are current features that consistently contribute to your success and require some maintenance, whereas opportunities are features that are or may become available to you that you have yet to take advantage of.

   b. Weaknesses are generally current features that you know you can improve upon, whereas threats are challenges you anticipate will need to be overcome in order to reach your ultimate performance goal.

   c. SWOTs may be any combination of physical, mental, financial, social, and competitive factors.

   d. SWOTS may be associated with your physical development and/or the situation around you.

   e. Describe SWOTs relative to how they impact your performance in general and how they may contribute to or work against your ultimate performance goal.

c) OBJECTIVES. Describe up to 5 objectives you plan to meet that will lead you to your ultimate performance goal.

   a. Objectives must be specific, attainable, and directly related to your ultimate performance goal.

   b. Objectives must be described with details that demonstrate how they are related to your ultimate performance goal and how you plan to achieve them.

   c. Examples of acceptable objectives: working on speed, fixing cheated triple axel, spinning faster, mental training, choreography, improving flexibility. Extra day-to-day general lessons not directly related to a specific objective are not acceptable.

d) COMMITMENT. The following statement of commitment must be included in your seasonal plan: “We, the skater and the coach, have jointly developed this seasonal plan. We agree to adhere to this seasonal plan and to develop and maintain a level of health and fitness in the skater that will enable him/her to train and compete without injury or illness. In the event that the skater becomes injured and/or ill to the extent that he/she is unable to train consistently, effectively, and according to this seasonal plan, we agree to take reasonable measures to help the skater recover, especially those measures recommended by a qualified physician or healthcare professional. We understand that in the case of such injury or other significant and unforeseen incidents, this seasonal plan may require adjustment, in which case we agree to
collectively revise the plan to meet the developmental needs of the skater and with respect to the ultimate performance goal.” To be followed by signatures of skater(s) and primary coach.

PART 2 – EVENT CALENDAR & FITNESS WORKSHEET
(Contact Director, Sports Sciences and Medicine to outline the extent of reporting on this form). See Appendix E.

Provide detailed information on important events that you will participate in this season that will contribute to and/or affect your objectives and your ultimate performance goal.

- Include the names and dates of all competitions you intend to participate in and assign a priority (1, 2 or 3) to each, giving consideration to your ultimate performance goal.
- Include other significant non-negotiable engagements (shows, camps, weddings, graduations, etc.)
- **Assign the various components of fitness that you plan to address during certain weeks of the season.**
- Include competition readiness requirements/events (ex. technical feedback session, pre-participation physical).
- Include sport science/sport medicine assessment dates (ex. if one of your objectives is to improve flexibility, you must include dates you plan to measure progress in this area). A progress inquiry may occur by the U.S. Figure Skating Sports Sciences and Medicine Director. It is understood that items in this section may change based on competition readiness feedback.
- Include the name of the fitness/conditioning specialist with whom your calendar and overview will be shared for fitness plan development.
# Appendix C – Pre-participation Physical Evaluation

<table>
<thead>
<tr>
<th>Select Season:</th>
<th>PPE Date:</th>
<th>PPE Physician Last Name</th>
<th>PPE Physician First Name</th>
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</table>

Answer each of the following questions with Yes or No. Explain “Yes” answers in the space provided at the end. SAVE when finished.

1. Has a doctor ever denied or restricted your participation in sports for any reason? (Yes No)
2. Do you have an ongoing medical condition (like diabetes or asthma)? (Yes No)
3. Are you currently taking any prescription or nonprescription (over-the-counter) medicines or pills? (Yes No)
4. Do you have any allergies to medicines, pollens, foods, or stinging insects? (Yes No)
5. Have you ever passed out or nearly passed out during exercise? (Yes No)
6. Have you ever passed out or nearly passed out after exercise? (Yes No)
7. Have you ever had discomfort, pain, or pressure in your chest during exercise? (Yes No)
8. Does your heart race or skip beats during exercise? (Yes No)
9. Check all that apply (Has your doctor ever told you that you have):
   - High Blood Pressure
   - High Cholesterol
   - Heart Murmurs
   - A Heart Infection
10. Has a doctor ever ordered a test for your heart? (for example: ECG, EchoCardiogram) (Yes No)
11. Has anyone in your family died of an apparent reason? (Yes No)
12. Does anyone in your family have a heart problem? (Yes No)
13. Has any family member or relative died of heart problems or of sudden death before age 50? (Yes No)
14. Does anyone in your family have Marfan syndrome? (Yes No)
15. Have you ever spent the night in a hospital? (Yes No)
16. Have you ever had surgery? (Yes No)
17. Have you ever had an injury, like a sprain, muscle or ligament tear, or tendinitis, that caused you to miss a practice or game? (Yes No)
18. Have you had any broken or fractured bones, or dislocated joints? (Yes No)
19. Have you had a bone or joint injury that required x-rays, MRI, CT, surgery, injections, rehabilitation, physical therapy, a brace, a cast, or casts? (Yes No)
20. Have you ever had a stress fracture? (Yes No)
21. Have you been told that you have or have had an x-ray for Atlantoaxial (neck) instability? (Yes No)
22. Do you regularly use a brace or assistive device? (Yes No)
23. Has a doctor ever told you that you have allergies? (Yes No)
24. Do you cough, wheeze, or have difficulty breathing during or after exercise? (Yes No)
25. Is there anyone in your family who has asthma? (Yes No)
26. Have you ever used an inhaler or taken asthma medicine? (Yes No)
27. Were you born without or are you missing a kidney, an eye, a testicle, or any other organ? (Yes No)
28. Have you had infectious mononucleosis (mono) within the last month? (Yes No)
29. Do you have any rashes, pressure sores, or other skin problems? (Yes No)
30. Have you had a herpes skin infection? (Yes No)
31. Have you ever had a head injury or concussion? (Yes No)
32. Have you ever been hit in the head and been confused or lost your memory? (Yes No)
33. Have you ever had a seizure? (Yes No)
34. Do you have headaches when exercising? (Yes No)
35. Have you ever had numbness, tingling, or weakness in your arms or legs after being hit or falling? (Yes No)
36. Have you ever been unable to move your arms or legs after being hit or falling? (Yes No)
37. When exercising in the heat, do you have severe muscle cramps or become ill? (Yes No)
38. Has a doctor told you that you or someone in your family has sickle cell trait or sickle cell disease? (Yes No)
39. Have you had any problems with your eyes or vision? (Yes No)
40. Do you wear glasses or contact lenses? (Yes No)
41. Do you wear protective eyewear, such as goggles or a face shield? (Yes No)
42. Are you happy with your weight? (Yes No)
43. Are you trying to gain or lose weight? (Yes No)
44. Has anyone recommended you change your weight or eating habits? (Yes No)
45. Do you limit or carefully control what you eat? (Yes No)
46. Do you have any concerns that you would like to discuss with a doctor? (Yes No)

**FEMALES ONLY**

47. Have you ever had a menstrual period? (Yes No)
48. How old were you when you had your first menstrual period? (Yes No)
49. How many periods have you had in the last 12 months? (Yes No)
**Follow-up Questions on More Sensitive Issues**

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>1. Do you feel stressed or under a lot of pressure?</td>
<td>🎨</td>
<td>🎨</td>
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<tr>
<td>2. Do you ever feel so sad or hopeless that you stop doing some of your usual activities for more than a few days?</td>
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<tr>
<td>3. Do you feel safe?</td>
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<td>🎨</td>
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<tr>
<td>4. Have you ever tried cigarette smoking, even 1 or 2 puffs? Do you currently smoke?</td>
<td>🎨</td>
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<td>5. During the past 30 days, did you use chewing tobacco, snuff or dip?</td>
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<td>6. During the past 30 days, have you had at least 1 drink of alcohol?</td>
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<tr>
<td>7. Have you ever taken steroid pills or shots without a doctor’s prescription?</td>
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<tr>
<td>8. Have you ever taken any supplements to help you gain or lose weight or improve your performance?</td>
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**Notes:**

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**MEDICAL**

| Appearance | 🎨 |
| Eyes/ears/nose/throat | 🎨 |
| Hearing | 🎨 |
| Lymph nodes | 🎨 |
| Heart | 🎨 |
| Murmurs | 🎨 |
| Pulses | 🎨 |
| Lungs | 🎨 |
| Abdomen | 🎨 |
| Genitourinary (males only)* | 🎨 |

**MUSCULOSKELETAL**

| Neck | 🎨 |
| Back | 🎨 |
| Shoulder/arm | 🎨 |
| Elbow/forearm | 🎨 |
| Wrist/hand/fingers | 🎨 |
| Hip/thigh | 🎨 |
| Knee | 🎨 |
| Leg/ankle | 🎨 |
| Foot/toes | 🎨 |

*Having a third party present is recommended for the genitourinary examination.

**Notes:**

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**CLEARANCE SECTION**

- Cleared without restriction
- Cleared, with recommendations for further evaluation or treatment for:

| Not cleared for | All sports | Certain sports: |

**PHYSICIAN INFORMATION**

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**Date:**
RETURN-TO-PLAY PLAN & STATUS REPORT

To be completed by healthcare provider.

Athlete Name: ________________________________

ProviderName/Email/Signature: ________________________________

1. **DIAGNOSIS**: original Dx, plus update with current status.

2. **IMPLICATIONS**: how does the diagnosis impact short- and long-term sport and skill performance.

3. **TREATMENT/REHAB**: a brief description, including people and modalities prescribed to treat the injury, plus general time commitment and schedule expectations; include referrals if applicable.

4. **Return to Play GUIDELINES**: best practices applicable to this situation, general limitations, suggestions; include referrals if applicable.

5. **Sport-Specific RESTRICTIONS**: any on- and/or off-field skills or activities that the athlete should limit (and to what extent) and/or avoid altogether; include appropriate alternatives if applicable.

6. **Potential OBSTACLES/COMPLICATIONS**: things that could come up and interfere with this plan and/or cause additional injury/illness to the athlete; include course of action in the event of such complication(s).

7. **Anticipated RETURN-TO-FULL DATE** if plan is followed
Appendix E – Fitness Plan

In figure skating when we think about “strength and conditioning,” what we are typically referring to is not just strength training and cardiovascular conditioning, but everything that goes into training in addition to on-ice training (technical elements).

The purpose of this checklist and the accompanying information sheets is to provide a starting point for athletes, coaches, and trainers to consider when designing and supplementing their existing training routines. Keep in mind that while these checklist items are geared towards particular aspects of your training routine, all of these areas come together to integrate into your overall training routine. Some exercises serve multiple purposes; for example, your injury prevention routine that includes ankle strengthening and coordination exercises may also help you improve your jump performance.

Read through the numbered items in the checklist below and write a brief note (one to three sentences) describing how your off-ice (and on-ice, where applicable) training routine reflects each area.

If you need help completing this form please contact Peter Zapalo at pzapalo@usfigureskating.org.

How does your training plan include each of the following (give specific examples):

1. **Dynamic warm-up routine: to be done every day prior to getting on the ice (10-30 minutes)**

2. **Mobility: for performance and injury prevention – including dynamic and passive stretching**

3. **Agility and coordination training: for skills enhancement, proprioception, and injury prevention**

4. **Injury prevention exercises: core training for back stability, balance, proprioception (especially lower extremity), and foot/ankle strengthening for impact injury prevention**
5. **Strength and power training:**
   - General base of total body strength for ability to train and for injury prevention
   - Sports-specific strength and power work – explosive jumping, lifting, etc.

6. **Cardiovascular/endurance training:**
   - Aerobic energy system to support endurance and recovery, ability to train effectively throughout a session
   - Anaerobic energy system – bursts of energy as needed, ability to execute jumps, lifts, etc.
   - Aerobic/anaerobic system – sustained intensity throughout the program, tolerance to lactic acid accumulation
   - Program performance/sports-specific conditioning
   - Balance with body composition and energy intake.

7. **Recovery routine:**
   - Recovery warm-down – flexibility, muscle recovery (rolling), massage
• Recovery nutrition – to help your body be ready for the next training session

8. What is your recovery nutrition plan in training?

OR check:
☐ I don’t have a recovery plan and could use some guidance.

9. What is your plan for competition day eating?

OR check:
☐ I don’t have a competition day eating plan and could use some guidance.

10. What is your plan for competition day recovery nutrition?

OR check:
☐ I don’t have a competition day recovery plan and could use some guidance.