Sickle Cell Testing Facts and Waiver

**Sickle Cell Trait Facts**

- Sickle cell trait is an inherited condition related to hemoglobin, the oxygen-carrying protein in red blood cells. Individuals with sickle cell trait inherit one gene for sickle hemoglobin and one for normal hemoglobin.
- Individuals at high risk for sickle cell trait are those with ancestors from Africa, South or Central America, India, Saudi Arabia, the Caribbean or Mediterranean countries. However, any individual, regardless of race or ethnicity, may have sickle cell trait.
- During intense exercise, red blood cells with the sickle hemoglobin may sickle. Sickled red blood cells block the flow of normal blood cells. As a result, blood carrying oxygen may not get to the tissues and muscles.
- Although the sickle trait usually is benign, some individuals with the sickle cell trait have experienced significant physical distress after rigorous exercise, and some individuals have died. Extreme heat and dehydration likely increase the risk of these outcomes.

**Sickle Cell Trait Testing**

- The NCAA recommends that all student-athletes have knowledge of their sickle cell trait status.
- The NCAA requires that each Division I, II, III student-athlete new to his/her campus: 1) consent to a blood test for the sickle cell trait; 2) provide results of a prior sickle cell trait test (usually a newborn test); or 3) sign a written waiver declining the test. Any student who does not comply with the options 1 or 2, must sign a waiver declining the test.
- Westfield State University recommends that all student-athletes have the sickle cell trait testing conducted prior to participating in intercollegiate athletics.
- Student-athletes can get sickle cell testing done or obtain there screening test from the Department of Public Health Newborn Screening lab, pediatrician’s office and/or his/her hospital of birth. Student-athletes can fax a request (authorization of release of medical information) to the lab at 617-522-2846. The request must include the student-athletes full name at birth, date of birth, mother’s full name and the hospital they were born at. Sickle cell screening in Massachusetts began on 3/6/1990. Student-athletes from out of the state of MA must contact the appropriate screening Lab. Please see the attached link for phone numbers and information.
- Individuals with positive sickle cell trait tests will not be prohibited from intercollegiate athletics.

**Student-Athlete Sickle Cell Trait Testing Documentation**

Student-athletes must provide the documentation below to the Westfield State University Athletic Training & Athletics Department, or sign the waiver in the next section.

- Copy of previous (usually newborn) sickle cell trait test
- OR
- Copy of recent sickle cell trait test

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1The Facts Section is based on the NCAA guidelines 2r, *The Student Athlete with Sickle Cell Trait* (revised June 2008), and the NCAA Fact Sheets for Student-Athletes and Coaches.
Westfield State University  
Sickle Cell Testing Waiver

I, __________________________, hereby agree as follows:

I understand and acknowledge that the NCAA and Westfield State University recommend that all student athletes have knowledge of their sickle cell trait status. In addition, I confirm that I have read and fully understand the Facts and Testing sections above. I also have read the NCAA Fact Sheet for Student-Athletes available at: http://fs.ncaa.org/Docs/health_safety/SickleCellTraitforSA.pdf

I understand that sickle cell trait does not prohibit me from participating in intercollegiate athletics. I understand that recognizing my true physical condition is dependent upon an accurate medical history and full disclosure of any symptoms, complaints, prior injuries, ailments, and/or disabilities. I affirm that I have fully disclosed in writing any prior medical history and/or knowledge of sickle cell trait to Westfield State University Department of Athletic Training & Athletics.

I have not provided any prior sickle cell trait test and do not wish to undergo sickle cell trait testing prior to my participation in intercollegiate athletics at Westfield State University. I voluntarily agree to release, discharge, indemnify, and hold harmless Westfield State University, its officers, employees, and agents from any and all costs, liabilities, expenses, claims, demands or causes of action due to any loss or personal injury that might result from my non-compliance with the recommendation of the NCAA and Westfield State University. This release is binding on me, and my heirs, assigns and personal representatives.

I have read and signed this document with full knowledge of its significance. I am fully aware of the risks and hazards of refusing to have sickle cell trait testing conducted prior to participation in intercollegiate athletics.

I am fully competent and at least 18 years of age. If I am under 18 years old, my parents also have to sign below.

Student-Athlete Signature: __________________________  Date: __________________

Student-Athlete (Print Name): __________________________

Parent/Guardian Signature (if under 18 years of age): __________________________  Date: ________

Parent/Guardian (Print Name): __________________________