

ALASKA MILITARY YOUTH ACADEMY PHYSICAL EXAMINATION FORM

PURPOSE: The following information must be filled in and signed by either a Physician, a Physician Assistant licensed by a State Board of Physician Assistant Examiners, or an Advanced Practice Nurse by the Board of Nurse Examiners. **Examination forms signed by any other health care practitioner will not be accepted. You may substitute this form but any substitution should include all the required information below. A school sports physical will be accepted.**

APPLICANTS

NAME: _____ **DATE:** _____
Last First Middle

Gender: Male Female **Age:** _____ **Date of Birth:** ____/____/____

Height: _____ **Weight:** _____ **P:** _____ **R:** _____ **B/P:** _____

Immunization Current: Yes or No **If not current, why?** _____

Vision: R 20/____ L 20/____ **Corrected?** Yes or No

Allergies: _____

NORMAL	ABNORMAL	
		HEAD, FACE, NECK, SCALP
		EARS – GENERAL
		DRUMS (PERFORATION)
		NOSE
		SINUSES
		MOUTH & THROAT
		EYES – GENERAL
		OPHTHALMOSCOPIC
		PUPILS
		OCULAR MOTILITY
		LUNGS & CHEST
		HEART

NORMAL	ABNORMAL	
		VASCULAR SYSTEM
		ABDOMEN & VISCERA (include hernia)
		ENDOCRINE SYSTEM
		G-U SYSTEM
		UPPER EXTREMITIES
		FEET
		LOWER EXTREMITIES
		SPINE, OTHER MUSCULOSKELETAL
		IDENTIFYING BODY MARKS, SCARS, TATTOOS
		SKIN, LYMPHATIC
		NEUROLOGICAL
		PSYCHIATRIC

- Cleared for Full Participation – No Restrictions
- Cleared after completing evaluation / rehabilitation for: _____
- Cleared for Participation with the following accommodations for: _____
- Diagnosis: _____
- Treatment Plan / Accommodations: _____
- Not cleared for: _____ Reason: _____

PHYSICIAN SIGNATURE:

 Physician Printed Name & Signature _____ Physician Phone # ____/____/____ Date of Evaluation

 Physician Address _____ Physician Fax # _____ Physician E-mail

Alaska Military Youth Academy
P O Box 5727 JBER, AK 99505-0727
Main Campus Medical: 1 (907) 428-7364 | Medical Fax: 1(907) 428-7386

Dear Health Care Provider:

Please complete this Physical Form for admission to Alaska Military Youth Academy (AMYA). AMYA is a volunteer program for youth 16-18 years of age who are at risk of not completing their high school education, located on JBER, Alaska. This program consists of a 22-week residential stay on JBER. The program training can be mentally and physically demanding. Physical training could include such physically strenuous activities as:

1. A daily run of two or more miles.
2. Daily vigorous physical exercises.

The program is structured with a quasi-military model, promoting personal time management, accountability, and promoting positive and negative consequences for behavior. Cadets will be expected to comply with rules and regulations.

Mental and emotional demands of the program include separation from family and loved ones, military style discipline, military ceremonial drill for prolonged periods of time, marching and physical training. Cadets will live in close communal barracks with up to 60 other cadets and must be able to cope with the inherent stress levels of barracks life.

We are staffed medically by an RN who will see cadets for minor injuries and illnesses. **Medications will need to be maintained by the original prescriber throughout the student's stay at AMYA. Please provide or arrange for refills for the entire 5 months of their stay.**

This examination is for determining fitness to engage in strenuous activities and the highly structured, stressful environment as outlined above. The exam should be performed within the prior six (6) months of the first day of the class start date in most cases, exams may be accepted within 12 months if unable to update due to cost/location. A shorter time interval may be required in some cases.

Any questions you have concerning this examination or your patient's ability to participate can be answered by contacting our medical staff at 907-428-7364. All participants must have a physical, up to date immunizations, and, if required, additional mental health clearance.

Additional Medical Review may be conducted to determine acceptance for youth with:

- Bi-polar, Schizophrenia
- Extensive, recent drug history (within last 12 months)
- Congenital Heart Conditions
- Diabetes
- Immune Deficiency
- Kidney Failure
- Severe Respiratory disorder NOT controlled by an inhaler
- Cystic Fibrosis
- Marfan Syndrome
- Hemophilia/Blood Disorders

Youth with the following are not appropriate for AMYA

- Youth who require regular off campus appointments whether physical/mental/behavioral
- Intensive Outpatient Counseling/Therapy
- Active Audio Hallucinations
- AMYA cannot be a discharge plan/option from acute care

Included with the physical is a form regarding the Limited Medical Services at AMYA. In addition, families are to complete a Medical History and Prescription Medication & Allergies form that they have been asked to share with their Health Care Provider.