



Sportsmetrics™ Training

St. Ursula Academy Soccer, Volleyball, Field Hockey

Pre-test: June 6th, 2011

Training Dates: June 8th – July 20th, 2011; Mondays, Wednesdays & Fridays, **no training July 4th**

Post-test: July 22nd, 2011

Location: SUA

Times: 8:00a – 9:45a Volleyball
9:30a – 11:15a Soccer/Field Hockey
12:15p – 2:00p Volleyball/Soccer/Field Hockey

**On June 13th and 15th, the 8am session will be moved to 3:30pm and the 12:15 session will be moved to 4:30pm

REGISTRATION FOR SPORTSMETRICS™

In order to sign up for Sportsmetrics™ you must agree to attend every session including the pre- and post-test dates. If you know in advance that you will miss the pre- or post-test and/or more than three sessions, you will not be able to participate in the program. It is very important to take the testing and every training session seriously in order to get the full benefits of injury prevention. This program is a \$750 value that you are getting at a greatly discounted price.

Athlete's Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Daytime phone: _____ Email: _____

Have you done Sportsmetrics before? Yes No; If yes, when? _____

FEES: \$80 per participant

Payment info: Check

American Express Discover Visa MasterCard

Card #: _____ Exp. Date: _____

Name on Card: _____

Signature: _____ Phone #: _____

*****Please sign and date the last page of the consent form below and turn in with registration and payment to Coleen Vogelgesang.**

Cincinnati SportsMedicine & Orthopaedic Center
and Cincinnati SportsMedicine Research and Education Foundation
Sports Injury Testing and Sportsmetrics™ Training

INFORMED CONSENT

CONTACT: Stephanie Tutalo, Sportsmetrics™ Research Associate, 513-346-4514

Please note: If you are reading this form to decide if your child should participate in Sportsmetrics™ Training at Cincinnati SportsMedicine, the term “you” refers to your child.

INTRODUCTION

Before agreeing to participate in Sportsmetrics™, it is important to understand the following explanation. Prior to your first visit, you will be asked to read and sign this consent form. You must be under the care of a physician or have had a physical examination by your primary care physician within the past year. In order to begin Sportsmetrics™, you must have full, pain-free range of knee motion, no ankle or knee instability and no joint swelling. **If you have had an ACL reconstruction, you must be evaluated and approved by Dr. Noyes in order to safely participate in the program.**

First Sports Injury Testing—

The Sports Injury Test will be performed before Sportsmetrics™ Training begins and then again after completion of training. This will determine if you qualify to participate by evaluating your medical history. The test may include a video assessment of lower extremity alignment (hips, knees, ankles) on landing from a drop-jump and a single-leg triple jump, surface electromyography (EMG) to determine muscle activation during running and cutting, isokinetic testing to measure quadriceps and hamstring strength, measurement of vertical jump and distance hopped on each leg, assessment of running speed core strength and aerobic capacity.

Sportsmetrics™ Training—

Training will be conducted 3 days per week for 6 weeks. The training time will be approximately 90 minutes per day and includes the following components:

- ***Dynamic Warm-Up:*** prepares the body for activity with functional based exercises that use sport specific motions. It raises core body temperature, increases blood flow to the muscles and improves flexibility, balance and coordination.
- ***Plyometric Training:*** focuses on correct jumping technique and is divided into three two-week phases. Each phase has a different training focus and exercises. The goal is to develop muscle control and strength for reducing the risk of knee injury and to increase jump height. Depending on level of athleticism, resisted jumping may be included.
- ***Speed and Agility Training:*** emphasizes body alignment and form while performing sprinting and cutting movements. The goal of speed and agility training is to condition your body and increase skill level.
- ***Strength Training:*** emphasizes proper alignment and form while performing a structured strength-training program. The goal of strength training is to improve your overall muscle efficiency.
- ***Flexibility Training:*** includes stretching through a complete range of motion to decrease injury and post-training soreness.

The Trainers will discuss and demonstrate each exercise or drill to be performed.

Second Sports Injury Test—

After completing Sportsmetrics™, a second Sports Injury Test will be performed to measure the effect of training on strength and flexibility, coordination, and jumping and landing techniques. A report of the Sports Injury Tests will be given to you.

RISKS, EXPERIENCE, BENEFITS AND PRECAUTIONS

The Sports Injury Test and Sportsmetrics™ Training Program may involve the following risks and/or discomforts:

Injury to the lower extremity

The training is rigorous and includes double and single-leg jumping exercises and strength training activities. Potential injuries may include muscle strains and ligament sprains. These injuries are the same as those that can happen during any sports activities that involve jumping, running, pivoting, cutting and lifting. The training is done under the supervision of certified personnel who conduct all training sessions. If you experience any unusual pain, notify the certified personnel immediately. You will receive an evaluation by an orthopedic surgeon as soon as possible if you have an injury during testing or training.

Generalized muscle pain

You may have generalized muscle soreness or stiffness from testing and training. You should notify the certified personnel if you experience significant muscle pain or stiffness.

Cincinnati SportsMedicine & Orthopaedic Center
and Cincinnati SportsMedicine Research and Education Foundation
Sports Injury Testing and Sportsmetrics™ Training

INFORMED CONSENT

UNFORESEEN RISKS

There may be risks from participating in this training that are unknown.

BENEFITS

The benefits of the Sports Injury Test include an assessment of your knee and leg muscular strength, power, flexibility, coordination, and jumping/landing technique. This test may allow for the identification of any deficiencies that could place you at an increased risk for a knee injury. There is no guarantee of benefit from participating in Sportsmetrics™ Training.

CONFIDENTIALITY

Records involving your participation in testing and training will be confidential to the extent allowed by law and will not be released to the general public. Aggregate results may be published, but your name will not appear in any report or publication.

INJURY PROCEDURE

As with any sports activity, you may be injured as a result of your participation in the Sports Injury Test and Sportsmetrics™ Training. Cincinnati SportsMedicine staff will evaluate and immediately treat any unusual conditions that occur during testing or training. If you are injured during testing or training, you will be examined by Dr. Noyes as soon as possible.

LIABILITY RELEASE:

By signing this document, you 1) represent that you are in good health and are capable of full participation in rigorous physical activity; 2) agree to assume all risk of personal injury while attending and participating in this program; and 3) are acting for yourself, your heirs, personal representatives, and assigns, you release Cincinnati SportsMedicine Research and Education Foundation and Cincinnati SportsMedicine and Orthopaedic Center and its staff from any loss or liability for any accident or injury, fatal or otherwise, which may result directly or indirectly from your involvement with this program.

FINANCIAL POLICY:

It is policy that payment for participation be made at or prior to time of signing this document. If during the course of this program you must terminate your participation due to injury or illness, you will receive a prorated refund for remaining sessions not attended upon receipt of written documentation from a licensed physician stating that you can no longer participate. Missed sessions due to non-medical reasons cannot be made up and will not be refunded.

PHOTOGRAPH RELEASE:

Your photographs may be published or utilized by Cincinnati SportsMedicine Research and Education Foundation and Cincinnati SportsMedicine and Orthopaedic Center for educational, promotional or informational purposes. Your photographs may also be used by other news media with the knowledge and permission of Cincinnati SportsMedicine Research and Education Foundation and Cincinnati SportsMedicine and Orthopaedic Center. **Your identification will not be released with the photographs.**

CONSENT

I have read and understand the preceding information. I have had an opportunity to ask questions and all of my questions have been answered to my satisfaction. This form is being signed voluntarily by me, indicating my agreement to participate in the Sports Injury Test or Sportsmetrics™ Training. By signing this consent form, I do not give up any of my legal rights and I verify that I have the legal authority (legal custody) to give permission for this child to participate in the Sports Injury Test and Sportsmetrics™ Training.

Printed Name of Participant

Printed Name of Parent or Legal Guardian*

Signature of Participant Date

Signature of Parent or Legal Guardian* Date