SICKLE CELL TRAIT EXPLANATION AND CONSENT FORM

The Division I Legislative Council declared that all incoming Division I student-athletes must be tested for sickle cell trait or show proof of a prior test. **These results must be completed/submitted prior to collegiate sport participation**. The new rule will be in effect for the 2022-23 academic year. This legislation is effective as of August 1, 2022 and is applicable to student-athletes who are beginning their initial year of eligibility and student-athletes trying out for a team, including transfers.

Sickle cell trait can change the shape of red blood cells during intense or extensive exertion, causing a blockage in blood vessels and rapid breakdown of muscles, including the heart. Initial tests for the trait are inexpensive, though follow-up testing can be more expensive.

Sickle cell trait is not a disease. Sickle cell trait is the inheritance of one gene for sickle hemoglobin and one for normal hemoglobin. During intense or extensive exertion, the sickle hemoglobin can change the shape of red cells from round to quarter-moon, or "sickle." This change, exertional sickling, can pose a grave risk for some athletes. In the past seven years, exertional sickling has killed nine athletes, ages 12 through 19. Between 2000-09, a reported seven football student-athletes with sickle cell trait died during conditioning activities. Sickled red cells may accumulate in the bloodstream during intense exercise, blocking normal blood flow to the tissues and muscles. During intense exercise, athletes with sickle cell trait have experienced significant physical distress, collapsed and even died. Heat, dehydration, altitude and asthma can increase the risk for and worsen complications associated with sickle cell trait, even when exercise is not intense. Athletes with sickle cell trait should not be excluded from participation as precautions can be put into place.

People at high risk for having sickle cell trait are those whose ancestors come from Africa, South or Central American, India, Saudi Arabia and Caribbean and Mediterranean countries. Sickle cell trait occurs in about 8 percent of the U.S. African-American population, and between one in 2,000 to one in 10,000 in the Caucasian population. Most U.S. states test at birth, but most athletes with sickle cell trait don't know they have it. Knowledge of sickle cell trait status can be a gateway to education and simple precautions that may prevent collapse among athletes with sickle cell trait, allowing one to thrive in their sport.

The College of the Holy Cross requires that all incoming student athletes be tested for sickle cell trait. A lab report by a primary care physician is needed showing either a positive or negative test result. This has to be completed prior to participation in collegiate athletics. It is the sole responsibility of the student-athlete and their insurance for the cost of the testing. The College of the Holy Cross will not provide free testing to incoming student-athletes. A student-athlete may also provide documentation of a prior test such as the one received at birth.

Please mark **ONE** of the following options below and provide the appropriate documentation.

_____ I will undergo sickle cell testing with my primary care physician and provide a lab report back to the Sports Medicine Department with the lab results that are either positive or negative.

_____ I will provide prior lab results dating at birth that show either a negative or positive result.

THESE RESULTS MUST BE COMPLETED/SUBMITTED PRIOR TO COLLEGIATE SPORT PARTICIPATION

Please sign below that you have read and understood the content of this document.

PRINT NAME OF STUDENT-ATHLETE:_____SPORT:_____

SIGNATURE OF STUDENT-ATHLETE:_____DATE:_____