



Electrocardiogram (ECG/EKG) Consent – Sports Physical

I understand that an electrocardiogram (ECG/EKG) is a noninvasive test that measures the electrical activity of the heart and may help identify certain cardiac abnormalities. I acknowledge that, when consented to, an ECG/EKG may be performed as a standard component of the sports physical conducted by PanCare of Florida, Inc., in accordance with applicable guidelines.

I acknowledge and agree that:

- I voluntarily consent to the performance and interpretation of an ECG/EKG as part of the sports physical.
- I understand that the ECG/EKG is a screening tool only and is not a complete medical examination or diagnosis.
- I understand that normal results do not guarantee the absence of heart disease and abnormal results do not necessarily indicate a heart condition.
- I understand that the ECG/EKG reflects heart activity only at the time it is performed and does not diagnose all causes of sudden cardiac events.
- I understand that this screening does not replace evaluation, diagnosis, or treatment by a primary care provider or cardiologist.
- I acknowledge that I am responsible for seeking and obtaining any recommended follow-up care.
- I understand and authorize that PanCare personnel, contractors, and volunteers may disclose your screening results to individuals that oversee your involvement in athletics.
- I understand that PanCare of Florida, Inc. will use and disclose my health information in accordance with applicable state and federal privacy laws, including HIPAA and, where applicable, FERPA.

I am the patient and am 18 years of age or older

I am the parent or legal guardian of the minor patient and have authority to consent

Patient Name: _____ Date of birth: _____

Email Address: _____

Patient/Parent/Guardian Signature: _____ Date: _____

If ECG/EKG results indicate that follow-up is recommended, additional medical evaluation may be required prior to participation in athletic activities