

**PA/USATF Sports Medicine Committee**  
Answers to Your Frequently Asked Questions  
*(Updated 5/10/2013)*

**RE: MEDICAL SUPERVISION**

As part of the approval process for obtaining a sanction, the Pacific Association requires that you have ONE OF THE FOLLOWING AS YOUR PRIMARY MEDICAL PROVIDER(THEY MUST BE ON SITE OF THE EVENT AT ALL TIMES: EMT (BASIC / PARAMEDIC); NURSE (RN OR LVN); DOCTOR (MD OR DO). We need to identify this person and how to contact this person with current PHONE AND EMAIL). You must include this information on the sanction form under the Medical Section.

**APPROVED MEDICAL PROVIDERS (PRIMARY PROVIDER):**

- EMT (BASIC / PARAMEDIC) with their own malpractice insurance
- NURSE (RN OR LVN) with their own malpractice insurance
- DOCTOR (MD OR DO) with their own malpractice insurance

**NOT APPROVED AS PRIMARY PROVIDER (SECONDARY PROVIDER OK):**

- ATHLETIC TRAINER
- CHIROPRACTOR
- FIRST AID (BASIC/ADVANCED)
- FIRST RESPONDERS
- EMR (EMERGENCY MEDICAL RESPONDER)
- PARK RANGERS

Any other questions or assistance, please contact the Sports Medicine Committee Chair at either 415-722-8876 or [specialmed1@yahoo.com](mailto:specialmed1@yahoo.com).

If you also need help finding a medical provider for your event, let us know. We can provide you with a list of providers who have done prior sanctioned events.

**RE: MEDICAL WAIVER**

If you are taking prescription medications for asthma or diabetes that contain prohibited substances (listed below), you must submit a Medical Notification form annually

<http://www.usatf.org/about/legal/antidoping/medicalWaiver.asp>

Request for accommodation pursuant to ADA ACT

<http://www.usatf.org/about/legal/policies/ADA/MedicalReleaseADA.pdf>

**RE: MEDICAL CLAIM FORM**

<http://www.usatf.org/membership/benefits/USATF Sport Accident claim form.pdf>