



Athletic Training Systems Athlete Portal Directions Returning Student Athletes

Important Information on Medical Compliance for Returning Student-Athletes

Dear Returning Student Athlete,

We hope you are enjoying your summer. In order to expedite your clearance for participation in a varsity program next year at the University, as well as ensure proper medical care, we have enclosed the following checklist to make sure that all requirements are met. All materials need to be completed in the University of Rochester Athletic Trainer System (ATS) Database by **AUGUST 1ST**. Failure to complete the required materials will delay your ability to begin any and all training with your team.

Please follow steps 1-4 to complete your varsity clearance


Step 1 Ensure you are connected to a secure Wi-Fi network. Then, navigate to the following link:


<https://rochester2.atsusers.com>

Step 2 At the login screen:

- Enter your Athlete ID
- Enter your Password
- If database is blank, enter “atsrochester”

Athletic Trainer System ® Athlete Portal Login

 University of Rochester



Athlete ID:
Password:
Database:

[Forgot your Username or Password?](#)

If you have ANY questions or problems you need to contact your sports medicine staff at your school.

atsrochesterATS Athlete Portal Version 2.0.0.0
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Step 3

- **IF ANYTHING HAS CHANGED**, please update that information in the appropriate tabs.

Athlete Information UNIVERSITY OF ROCHESTER

Menu Logout

General Medical History Immunizations/Paperwork Insurance Contacts Forms eFiles

Yellow colored items need to be filled out.

Name: [Redacted] (First) [Redacted] (MI) [Redacted] (Last)

Gender: [Redacted]

DOB: [Redacted] **Format must be mm/dd/yyyy**

Phone: [Redacted] Cell: [Redacted]

Step 4

- Click on the “Forms” tab to complete all necessary forms for participation in UR athletics (there are 10)
 1. Medial History Form – PPE
 2. Athletic Consent Form
 3. Assumption of Risk
 4. Consent for Disclosure of Protected Health Information
 5. Concussion Fact Sheet for Student-Athletes
 6. Student-Athlete Concussion Statement
 7. Insurance Verification Form (only if insurance information has changed)

Please choose a form name and click New to start a new form. Choose a form name and a date to view that existing form. Read all questions and click Yes/No, enter a range value or enter an explanation to those that apply.

* Items required to be filled out

Form Name: Medical History Form - PPE
 Athletic Consent Form
 Assumption of Risk
 Consent for Disclosure of Protected Health Information
 Concussion Fact Sheet for Student-Athletes
 Student-Athlete Concussion Statement
 Sickle Cell Trait Fact Sheet
 Sickle Cell Trait Verification/Waiver Form
 Athletic Director Letter to Parents
 Insurance Verification Form

Date: [Redacted]

New Save Print/View

Database: atsrochester | ATS Athlete Portal Version 2.0.0.0
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Menu Logout

- Select a form from the drop down box to complete
- Click “New” to open the blank form and complete the form





- **To Sign:**
 - Sign the form in the space provided
 - Type your name into the box below
 - Click “Sign” to save your signature
 - Save the form at the bottom of the page

- Keep in mind that *some* of these forms require a parent/guardian signature *for everyone*
- **All forms require a parent/guardian signature if you are under the age of 18**

Enjoy your summer, see you in the Fall!

If you have any questions or concerns, please contact the Head Athletic Trainer

Eric Rozen

erozen@sports.rochester.edu

