

Name _____

Immunization: Record date of each dose received (mm/dd/yy)	Record date of each dose received (mm/dd/yy)							Record date of each dose received (mm/dd/yy)		
	1st	2nd	3rd	4th	5th	6th		1st	2nd	3rd
DTaP (Diphtheria, pertussis, tetanus)							MMR (Measles, Mumps, Rubella)			
Td/DT/Tdap							Hep B (Hepatitis B)			
OPV or IPV (Polio)							Varicella (Chicken Pox)			
HIB (Hemophilus influenza B)							Hep A			

The above immunizations have been verified by the following: _____

Signature of physician or other qualified person

PHYSICAL EXAMINATION: TO BE COMPLETED BY APPROVED HEALTH CARE PROVIDER.

Height _____ Weight _____ Hgb or Het _____
 Pulse _____ Blood Pressure _____ Lead _____
 Urinalysis _____ Sickle Cell _____ TB _____

Code Each Item as Follows: 0=No sig. findings 1=Significant findings	Code	Description of Findings
General Appearance		
Integument		
Head - Neck		
EENT		
Oral - Dental		
Thorax		
Breasts		
Cardiovascular		
Abdomen		
Musculoskeletal		
Genitourinary		
Neurological		

SCREENING

- Nutritional Evaluation - Results _____
- Development: Type of screen _____ Results _____
- Speech: Type of screen _____ Results _____
- Hearing: Type of screen _____ Results _____ Date of last screen _____
- Visioin: Type of screen _____ Results _____ Date of last screen _____

Significant Assessment Findings:

Anticipatory Guidance: (circle those discussed)

- | | |
|--------------------|----------------|
| 1. Safety | 8. Lifestyle |
| 2. Nutrition | 9. Development |
| 3. Parenting | 10. Behavior |
| 4. Family Planning | 11. Sexuality |
| 5. Discipline | 12. Dental |
| 6. Immunizations | 13. Other |
| 7. Hygiene | |

Recommendations: (to parents, teachers – include any referrals)

Comments:

Follow Up:

RECOMMENDATIONS FOR PHYSICAL EDUCATION:

Full program _____ Restricted (explain) _____

No participation (explain) _____

Additional information may be attached.

Date _____ Signature of Physician or Nurse approved to perform health assessments

Medication may be given at school only with a signed physician order and brought to school in the original container.