



PHYSICIAN'S REPORT

Students enrolling in the school are required to have a health appraisal, including history and physical examination for tuberculosis. Immunizations must meet Ohio and school standards. Please supply the requested information and explain any abnormal results.

Child's Name _____ Birth date ____/____/____

School _____ Grade _____

Medical History: Normal Abnormal

Motor/Language Milestones: Normal Abnormal

Social/Emotional Development: Normal Abnormal

Height _____ Weight _____ Pulse _____ Respiratory Rate _____ Blood Pressure ____/____

Physical Examination: Normal Abnormal

Auditory Acuity: Normal Abnormal

Visual Acuity: Normal Abnormal

Speech/Language: Normal Abnormal

List any chronically prescribed medications or supplements:

___ Fluoride Supplement Other: _____

___ Food Supplement _____

___ Modified Diet (specify) _____

Can this child participate fully in academic programs? Yes No

Explain problem and any limitations: _____

Can this child participate fully in age appropriate physical education and sports? Yes No

Explain problem and any limitations: _____

Physician's Name (please print) _____ Date of Exam ____/____/____

Physician's signature _____ Date signed ____/____/____

Phone _____ Fax _____



IMMUNIZATION DATES (required immunizations in bold) :

DTP/DTaP#1	DTP/DTaP#2	DTP/DTaP#3	DTP/DTaP#4	DTP/DTaP#5	Tdap/Td booster
OPV/IPV#1	OPV/IPV#2	OPV/IPV#3	OPV/IPV#4	OPV/IPV#5	
MMR#1	MMR#2				
HepB #1**	HepB #2**	HepB #3**			
Varicella #1	Varicella #2				

Is student at high risk for tuberculosis by CDC criteria? Yes No

If yes, results of PPD or chest X-ray within the year prior to enrollment: Test _____ Date _____
 Result _____ Date read _____

Physician's Name (please print) _____ Date of Exam ____/____/____

Physician's signature _____ Date signed ____/____/____

Phone _____ Fax _____



Immunization Summary for School Attendance

Vaccines	Fall 2011 Required Immunizations for School Attendance
DTaP/DTP/DTTdap/Td Diphtheria, Tetanus, Pertussis	<p>Kindergarten 5 doses of DTaP, DTP, or DT, or any combination, if the fourth dose was administered prior to the 4th birthday.</p> <p>Grades 1-12 3-4 doses of DTaP, DTP, DT or Td or any combination.</p> <p>Grades 7-8 1 dose of Tdap or Td vaccine must be administered prior to entry.</p>
POLIO	<p>K-1 3 or 4 doses of IPV, the final dose must be administered on or after the 4th birthday regardless of the number of previous doses; 4 doses if a combination of OPV and IPV was administered.</p> <p>Grades 2-12 4 doses if a combination of OPV and IPV was administered. 4 doses of all OPV or all IPV is required if the third dose of either vaccine was administered prior to the 4th birthday.</p>
MMR Measles, Mumps, Rubella	<p>K-12 2 doses of MMR. Dose 1 must be administered on or after the first birthday. The second dose must be administered at least 28 days after dose 1.</p>
Hib <i>Haemophilus Influenzae</i> Type b	None
HEP B Hepatitis B	<p>K-12 3 doses of Hepatitis B. The second dose must be administered at least 28 days after the first dose. The third dose must be given at least 16 weeks after the first dose and at least 8 weeks after the second dose. The last dose in the series (third or fourth dose), must not be administered before age 24 weeks.</p>
Varicella (Chickenpox)	<p>K-1 2 doses of varicella vaccine must be administered prior to entry.</p> <p>Grade 2-5 1 dose of varicella vaccine must be administered on or after the first birthday</p>

NOTES:

- The 4 day “grace” period applies to all age and interval minimums. If MMR and Varicella are not given on the same day, the doses must be separated by at least 28 days with no grace period.
- The Tdap and Varicella requirements will be progressive.
- Only full doses of vaccine using proper intervals shall be counted as valid doses.
- For additional information please refer to the Ohio Administrative Code 5101:2-12-37 for Child Attendance. These documents list required and recommended immunizations and indicate exemptions to immunizations.

Please contact the Ohio Department of Health Immunization Program at (800) 282-0546 or (614) 466-4643 with questions or concerns.