St. Antoninus Catholic School

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SCHOOL PRE-ENROLLMENT HEALTH SCREENING/EXAMINATION

This form must be completed by a physician and/or appropriate medical personnel

Child's Name: ___________________________________ Date of Birth: ___________________
Parent/Guardian Names: ____

He/she has received immunizations as follows: (enter month/day/year) (or attach copy of immunization record)

2ND DOSE MMR REQUIRED BY START OF SCHOOL

DPT _________ ; _________ ; ________ ; __________ ; __________ Grade 7 Tdap Booster ____________
POLIO __________ ; _________ ; _________ ; __________ (fourth dose on or after fourth birthday)
MMR1 ___________ MMR2 ____________ HEPATITIS B (3 DOSES) ____________ ; _____________ ; ____________
VARICELLA (CHICKEN POX) ______________ ; _______________ TUBERCULIN TEST _________ RESULT ___________
OTHER ____

Visual Acuity: R ___________ L __________ Muscle Balance: Far _________ Near _________
Hearing Acuity: R 500 Hz @ 25 Db _______ L 500 Hz @ 25 Db _______
1000 Hz @ 20 Db _______ 1000 Hz @ 20 Db _______
2000 Hz @ 20 Db _______ 2000 Hz @ 20 Db _______
4000 Hz @ 20 Db _______ 4000 Hz @ 20 Db _______
Speech: Normal _______ Delayed _________
Communication: Normal _______ Delayed _________
If delayed, please explain:____

Do you feel there may be a need for further screening for developmental disorders?
No _________ Yes ________ If yes, explain: ____________________________________

Child is able to participate in all regular physical and athletic activities:
No _________ Yes ________ Restrictions (if any) _________________________________

Allergies: No _________ Yes ________ Specify ____
Medical Conditions: ____

Based upon his/her medical history and physical condition at the time of this examination, he/she is free from communicable disease and is in suitable condition for enrollment in school.

PLEASE PRINT: Physician's Name: ____
Tel: ____________________________ Fax: ______________________________

____ _______________________

Physician's Signature **Date**

In compliance with Section 3313.673 of the Ohio Revised Code, this information is provided to the parent(s)/guardian(s) of kindergarten and first grade students who are enrolling in St. Antoninus School for the first time.