Whitehall City Schools Health Record
Physician's Report

Child's Name:	**☐ Male ☐ Female**	**Age**	**DOB**

MEDICAL ALERT

If the child has a life threatening allergy and/or acute medical condition please describe and attach appropriate documentation to allow the school to make necessary accommodations.
Condition and necessary accommodations: _____
_____
_____
_____

Objective Data

Height _____	**Weight _____**	
Percentile for age _____%	**Percentile for age _____%**	**Blood Pressure _____/_____**

Screening Tests

Vision **Date**	**Hearing** **Date**
Distance Acuity: right _____ left _____	Pure tone testing:
Muscle Balance ☐ pass ☐ fail ☐ not done	Right ear ☐ pass ☐ fail ☐ not done
Farsightedness ☐ pass ☐ fail ☐ not done	Left ear ☐ pass ☐ fail ☐ not done
Color ☐ pass ☐ fail ☐ not done	Other tests [specify] _____
Child wears glasses? ☐ yes ☐ no	_____
Test with glasses? ☐ yes ☐ no	Child wears hear aid? ☐ yes ☐ no
Referral made? ☐ yes ☐ no	Tested with hearing aid? ☐ yes ☐ no
	Referral made? ☐ yes ☐ no

Speech/Language

Speech Assessment: ☐ completed ☐ not completed ☐ no discernible speech problem
Child has a possible problem with: ☐ articulation ☐ rhythm ☐ voice ☐ language
Speech evaluation recommended: ☐ yes ☐ no

Continued on the reverse side.

Physical Examination:

Date examined
☐ Essentially normal ☐ Abnormalities and any limitations advised: _____ _____ _____ _____

Laboratory Tests

☐ Hematocrit/hemoglobin ☐ Urine protein ☐ Urine blood ☐ Urine glucose ☐ Other _____

Immunization Record

Type	Date	Date	Date	Date	Date	Date
DPT						
TD						
POLIO						
MMR						
HEPATITIS B						
VARICELLA						
HIB-D						
TUBERCULIN						
OTHER:						

Physician's Assessment

If this child has any physical, developmental or behavioral problems, please recommend accommodations the school could incorporate to help the child be successful. _____ _____ _____ _____ _____

Please Print or Stamp

Physicians Name:	Physician's Signature:
Address:	Date Signed:
	Phone Number:

Thank you for your assistance in completing this form.
Whitehall City Schools