

PLSD KINDERGARTEN PHYSICIAN'S REPORT – Fall 2019

Student's Name:		Sex: Male Female	Date of birth: / /
Height:	Weight:	BMI percentile:	BP:

Vision: Date performed:		Hearing: Date performed:		Speech/Language: Date performed:	
Distance Acuity	R ___ L ___	Pure Tone		Speech assessment completed	Yes No
Muscle Balance	Pass Fail	Right Ear	Pass Fail	Child has no discernible speech problem	Yes No
Stereopsis	Pass Fail	Left Ear	Pass Fail	Speech evaluation recommended	Yes No
Color	Pass Fail	Child wears hearing aid?	Yes No	Child has possible problem with:	
Child wears glasses?	Yes No	Child under care of hearing specialist?	Yes No		
Tested with glasses?	Yes No	Referral made?			

Ohio Department of Health REQUIRED KINDERGARTEN VACCINES (Fall 2019)	IMMUNIZATIONS					
	Vaccine	Record complete dates (month/day/year)				
4 doses or more of DTaP or DT, or any combination. If all 4 doses were given before 4 th birthday, a 5 th dose is required. If 4 th dose was given at least 6 months after 3 rd dose, and on or after the 4 th birthday, a 5 th dose is not required. Recommended intervals for K students: 4 weeks between doses 1-2 and 2-3; 6-month minimum intervals between doses 3-4 and 4-5.	DTaP					
	DT					
3 or more doses of IPV; the FINAL dose must be administered on or after the 4 th birthday regardless of the number of previous doses. If a combination of OPV and IPV was received, 4 doses of either vaccine are required (Final polio dose in IPV series must be administered at age 4 or older with at least 6 months between final and previous dose)	Polio (IPV)					
	Polio (OPV)					
3 doses of Hepatitis B. 2 nd dose must be administered at least 28 days after 1 st dose. 3 rd dose must be given at least 16 weeks after 1 st dose and at least 8 weeks after the 2 nd dose. Last dose in the series (3 rd or 4 th dose), must not be administered before age 24 weeks.	Hepatitis B (Hep B)					
2 doses of MMR. Dose 1 must be administered on or after the first birthday. 2 nd dose must be administered at least 28 days after dose 1. If MMR and Varicella are not given on the same day, doses must be separated by at least 28 days with no grace period.	Measles, Mumps, Rubella (MMR)					
2 doses of Varicella. Dose 1 must be administered on or after the first birthday. 2 nd dose should be administered at least 3 months after dose 1; however, if the 2 nd dose is administered at least 28 days after 1 st dose, it is considered valid. If MMR and Varicella are not given on the same day, doses must be separated by at least 28 days with no grace period.	Varicella (Chickenpox)					

HEALTH HISTORY (Serious or chronic illnesses/injuries/surgeries)

	Allergies? (Drugs, Foods, Bees, Others)
	Tx:

PHYSICAL EXAMINATION Date of most recent examination: ____ / ____ / ____

Essentially normal Abnormalities as follows:
Is this child able to participate fully in: Classroom and academic activities: Yes No Physical education classes: Yes No
If limitations are advised, please specify:
Does this child have any physical, developmental or behavioral issues that may affect his/her educational process?

Health Care Provider Signature X _____	Print name:	Phone:	Fax:
Address:	City, State, Zip:		Date:

--	--	--