

OHIO SCHOOL HEALTH RECORD
PHYSICIAN'S REPORT

Child's Name _____ Male _____ Female _____ Age _____ Date _____

OBJECTIVE DATA:

Height: _____ (%) Weight _____ (%) B.P. _____/_____

SCREENING TESTS

VISION				Date Done:	HEARING				Date Done:
Distance Acuity	R			L	Audiometric thresholds:				
Muscle Balance	Pass	Fail	Not Done		R-ear	Pass	Fail	Not Done	
Farsightedness	Pass	Fail	Not Done		L-ear	Pass	Fail	Not Done	
Color	Pass	Fail	Not Done		Other rests (specify)				
Child wears glasses?	Yes	No			Child wears hearing aid?	Yes	No		
Tested with glasses?	Yes	No			Tested with hearing aid?	Yes	No		
Referral made?	Yes	No			Referral hearing aid?	Yes	No		

SPEECH/LANGUAGE

Speech assessment: done _____ not done _____

Child has no discernible speech problem _____

Child has possible problem with:

Disorders: (check) Articulation _____ Rhythm _____ Voice _____ Language _____

Speech evaluation recommended: yes _____ no _____

LABORATORY TESTS

Hematocrit/Hemoglobin _____ Urine protein _____ Urine blood _____ Urine glucose _____ Other: _____

PHYSICAL EXAMINATION: Date examined _____ Essentially normal _____ Abnormalities as follows:

Is this child able to participate fully in the following:

- A. Classroom and academic activities? yes _____ no _____
- B. Physical education classes? yes _____ no _____
- C. Competitive athletics? yes _____ no _____
- D. Contact and collision sports? yes _____ no _____

If limitations are advised, please specify those limitations:

If this child has any physical, developmental or behavioral problems, how can the school assist with special programs, placement or attention?

PHYSICIAN'S ASSESSMENT

Problem List

Recommendation for School Management

1.	1.
2.	2.
3.	3.

PLEASE PRINT OR STAMP

Physician's Name _____

Physician's Signature _____

Address _____

Phone _____

Date Signed _____

IMMUNIZATION RECORD

Type	DATE					
DTaP						
TD						
Polio						
Hepatitis B						
Hib (Haemophilus Influenzae)						
Measles (Rubeola)						
Rubella						
Mumps						
MMR Combined						
Varicella						
Other						