TREDYFFRIN/EASTTOWN SCHOOL DISTRICT



Physical Examination Report Grades K,6,11 and all new students to Pennsylvania

The Pennsylvania School Health Law requires physical examinations upon entrance to school (kindergarten or grade 1), grade 6, grade 11 and all new students moving to Pennsylvania. It is strongly recommended that your family physician performs the exam as they are the most familiar with your child's health needs. This examination form should be completed by your family physician and returned to your child's school nurse

Name	Gender	Birthdate	Grade
Immunizations		Dates Given	
Diphtheria, Pertussis, Tetanus,		Dates Given	
Tdap			
Polio			
Hepatitis B (indicate if 2 dose series)			
Measles - Mumps - Rubella (MMR)			
Meningococcal Conjugate Vaccine			
OTHER:			
Chicken Pox disease: TB Test Date Allergies: Significant Past Medical Histo Current Medications:	Results	munization dates:	
Current Physical Findings:		e of Current Exam:	_
Height:Weight:	BMI:	Blood Pressure:	Pulse:
Recommendation if abnormal			
• Scoliosis: NormalAbnormal	Degree of C	Curve if abnormal	
Recommendation if abnormal			
• Vision Exam Results: NEAR	/(LEFT	Γ) FAR	(LEFT)
NEAR	/(RIGH	T) FAR	/(RIGHT)
Hearing Exam Results:		<u>—</u>	
Explain any problem of vision, hearing the application of school nurse:			ng or follow-up with
Explain any condition which limit	s mobility, endur	ance, or physical educati	on:
Please print or stamp Physicians Name: Address:	P	hysicians Signature:	
Phone:	Г	Date:	Revised 5/2020