## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF HEALTH

## PRIVATE PHYSICIAN'S REPORT OF PHYSICAL EXAMINATION OF A PUPIL OF SCHOOL AGE

					DAT		Procedulation of the communication of the contraction of the contracti	20	
AME OF SCHOOL					GRADE		HOMEROOM		
AME OF CHILD							DATE	OF BIRTH	SEX
Last	First				Middle	SING HARMONIC MICHIGANIC MICHINARIA			M
	riist			P	MIGGIE				101
DDRESS									
No. and Street City of	City or Post Office Borou			gh or Township County			State Zip Code		
	16.45	MEDICAL			•				
		MUNIZATION , Day, and Ye		IESI	5				
VACCINE		n was given DOSE					BOOSTERS & DATES		
Diphtheria and Tetanus (Circle): DTaP, DTP, DT, TD	1 / /	2	3	/	, 4	1 /	1	5 /	1
	1	2	3	,	/	-	,	5	
Polio (Cirde): OPV, IPV	1	2	/	/	/		1		
Measles, Mumps, Rubella	1 1		/	prijektijk sameljen i (se gazanik) pom		i manianta da managan			
Hepatitis B	1 /	1	2	/	1		3	1	/
HIB	1 /	1	2	1	1	nti di spensetta usus punisamentes di di jugan da	3		/
Varicella	1 /	1	2	/	J	Varicella Disease or Lab Evidence Date:			
Other:									
RELIGIOUS EXEMPTION statement from the parent/gu  Applicable:  Tuberculin Tests	ardian)	ng moral or eth	ical convict	on simi	ilar to a r	eligious	belief and re	quires a writ	ten
Date Applied	Arm	Device	A	tigen	1	Manu	ıfacturer	Sig	nature
	-	<del> </del>							
Data Bead	Populte	e (mm)				Sin	natura		
Date Read	Results	s (mm)				Sig	nature		

## Significant Medical Conditions ( $\sqrt{}$ ) If Yes, Explain

	Yes	No										
Allergies	님	Н -	had still depublic sittle stalls comes dendinologie delay sinur tennomisis existe have applytted a comit value arter	gane mano salan mida sapir-mala shorr-salik-salik-takin sara-salah- (mida-prop-spri-reple) (1919-1919) (1919-1919) (1919-1919)								
Asthma	님		de speciliares video serve sepo-veue nom verel veten verel veten pelanten desse provincian desse provincian des	metricophet spoje responsent maks folder optiv mine sitter observemen sammen daste detter betrief stade stade folder observemen.	THE STATE OF THE S							
Chamical Danandanay	H	H -		STOT BEFORE STOTE STATES STOTE STATES REGIST AND								
Chemical Dependency	H	H -	tean calaptive cantain seature seature september september september september seature seature september s	риворчин бирознай наволяціў зарочнаці, Якінської заробиную ченнями очення оченнями фосполности поветую в								
Drugs Alcohol	H	<b>—</b>										
Diabetes Mellitus	Ħ			michalis agus anno destribus casa elle anno ilian anno man man agus agus agus agus agus agus agus agus								
Gastrointestinal Disorder	Ħ	H		MANY LANGUS CHANGE SANGELS SELVEL BOOK OLD AND CONTROL SENSON SENSON OF SIME ARMAN SHIP THE PARTY OF THE SENSON SE	Clinical Manuschians America (no de Constation (no principal no constation de Constation (no processor consecutions personal no processor (no processor consecutions) personal no processor (no proc							
Hearing Disorder	Ħ	П										
Hypertension	$\Box$		constructing and separate recovering separate resident and construction debut or debut separate above them to have been experienced and the construction of the constr	орин удин деринуары (офб-уары акулсадского нартаруу уларыннай ком-барактынын Аракымай Анал-Соностой о майыныны	operature vision describes an appropriate production of the state of t							
Neuromuscular Disorder												
Orthopedic Condition			ette kild i diskal kild i diskal diskal diskal sakal sakal sakan yang ngan masa sakan masa singal ngang yang s	ante, anno copro reconocumento condo admir mana many dans traffic alcumunas, latafa abmohammanham sundi made abber darbambah	add medicity in the in-blank resource delices, to delay delices, to the control of the control o							
Respiratory Illness												
Seizure Disorder				pany naharahnya, namatamban-nahit isangi anyay apparahnya ahany undo-rayarahna dakan sassasasanahna iginan-arawahn-masurahna								
Skin Disorder												
Vision Disorder			CONTRACTOR OF THE STREET OF THE STREET CONTRACTOR OF THE STREET CONTRACTOR OF THE STREET OF THE STRE	and-order SAA, Advis office Series Action (SSAA COSA COSA COSA COSA COSA COSA COSA								
Other (Specify)												
Are there any special medical problems or chronic diseases which require restriction of activity, medication or which might affect his/her education? If so, specify												
- Height (inches)	Parameter Communication Commun	Normal	Abnormal	Not Examined	Comments							
Height (inches)												
Weight (pounds) BMI												
Pulse ( )												
<ul> <li>Blood Pressure</li> </ul>												
Hair/Scalp		VIII - LABOUR LIGHT - THE COLUMN TO THE COLU										
■ Skin		Page and the Control of the Control	da esta Asta ministra de acadadem um esta del de la ministra del ministra de la ministra de la ministra del ministra de la ministra del ministra de la ministra della minis									
■ Eyes/Vision												
Ears/Hearing		ere fred to be southerfue to half of 600 500 following device dependence on an activative										
Nose and Throat												
Teeth and Gingiva												
<ul> <li>Lymph Glands</li> </ul>												
■ Heart – Murmur, etc												
<ul> <li>Lung – Adventitious Finding</li> </ul>												
<ul> <li>Abdomen</li> </ul>												
<ul> <li>Genitourinary</li> </ul>		and the second s	орож мустану н <mark>а в</mark> ення одного одного основного									
Neuromuscular System												
<ul> <li>Extremities</li> </ul>			Detailed to the second									
<ul> <li>Spine (Presence of Scoliosis)</li> </ul>		<del>andere ser le l'este accessore modelli des contre e siste distribuli (l'interiore se employ en</del>	must must be the state of the s									
Date of Examination												
Signature of Examiner			PRINT Name of	PRINT Name of Examiner								
Address			Telephone Nu	Telephone Number								