

PHYSICAL EXAMINATION

Allergies _____ Chicken Pox _____ Diabetes _____ Mumps _____
 Drug sensitivities _____ Epilepsy _____ Measles _____
 Rheumatic Fever _____ Tuberculosis _____ Whooping Cough _____ Other _____
 Head _____
 Eyes _____ Vision R 20/ _____ L 20/ _____
 Ears _____ Hearing _____
 Nose _____ Mouth _____
 Throat _____ Adenoids _____ Tonsils _____
 Heart _____ Blood Pressure _____
 Lungs _____ Abdomen _____ Hernia _____
 Extremities _____
 Genitalia _____

IMMUNIZATION RECORD

DTP (DtaP)	(3 mos.)	(5 mos.)	(7 mos.)	(19 mos.)	(4 yrs. or older)
OPV / IPV	(3 mos.)	(5 mos.)	(19 mos.)	(4 yrs. or older)	
Hib	(3 mos.)	(5 mos.)	(7 - 12 mos.)	(12 mos. - 4 yrs)	
MMR	(12-19 mos.)	(4 yrs. or older)			
Hep B	(3 mos.)	(5 mos.)	(19 mos.)		
Varicella	(12-19 mos.)				

Children must receive their last Dtap, polio, and MMR before they start kindergarten.

STATE LAW REQUIRES THE FOLLOWING MINIMUM DOSES

5 DTP, DtaP, DT doses (if 4th dose is after 4th birthday, 5th dose is not required.)
4 POLIO VACCINE doses (if 3rd dose is after 4th birthday, 4th dose is not required.)
1 Hib dose-at least 1 Hib on/after 1st birthday and before 5 years of age. (Not required after age 5)
2 MMR doses (1st dose on/after 1st birthday)
3 Hep B doses for children born after July 1, 1994
1 Varicella dose-children 12-19 months of age born on or after April 1, 2001

(Physician's signature)

(Date)