

SCHOOL/CAMP EXAM FORM - Confidential Information

St. John the Apostle Catholic School

7601 Vine St., Lincoln NE 68505

402-486-1860

PATIENT:

D.O.B.

SEX:

ADDRESS:

PHONE:

PARENTS: MOM
DAD

HEALTH SUMMARY: MEDICATIONS, ALERTS and RECOMMENDATIONS:

ALLERGIES:

MOST RECENT: Visit:			PEX Visit:		Screening Tests:	Date:
WEIGHT	lbs	%	HEENT	ABD		
HEIGHT	In.	%	EYES	HERNIA		
B/P	/		EARS	GEN/TAN		
PULSE			DENTAL	EXTREM		
BMI		%	HEART	SPINE		
			LUNGS	SKIN		
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Note:

IMMUNIZATIONS: Total number: 0 Age on Date Printed: yrs. mos.

Hep B	HIB	D-T-P Group	Polio
Pneumococcal	Rotavirus	MMR	Varicella
Hep A	Meningococcal ACWY	Influenza	Other Vaccines
Td Group	MenB		
HPV	MenCY		

- Student may participate in the regular program of physical education, recreation, intramurals, athletics, or related activities without undue risk or injury.
- Student may NOT participate in physical education, recreation, intramurals, athletics, or related activities.