

INTERLOCAL CAP HEAD START

CHILD'S NAME _____

BIRTHDATE _____

PARENT'S NAME _____

ADDRESS _____

PHYSICAL EXAMINATION

HEIGHT		WEIGHT		AGE		BLOOD PRESSURE	
IN. OR CM.	PERCENTILE	LB. OR KG.	PERCENTILE	YEARS	MONTHS		
DOES THE EXAMINATION REVEAL ANY ABNORMALITY IN			A B N O R M A L	N O R M A L	N O T	E X A M I N E D	DESCRIBE FULLY ANY ABNORMAL FINDINGS
GENERAL APPEARANCE, POSTURE, GAIT							
SPEECH							
BEHAVIOR DURING EXAMINATION							
SKIN							
EYES: EXTERNALS							
OPTIC FUNDI							
EARS: EXTERNAL AND CANALS							
TYMPANIC MEMBRANES							
NOSE, MOUTH, PHARYNX							
TEETH							
HEART							
LUNGS							
ABDOMEN (INCLUDE HERNIAS)							
GENITALIA							
BONES, JOINTS, MUSCLES							
NEUROLOGICAL EXAMINATION							
OTHER							

DEVELOPMENTAL SCREENING EXAMINATION

	NORMAL FOR AGE	OTHER (EXPLAIN)	REMARKS
GROSS MOTOR FUNCTION			
FINE MOTOR AND MANIPULATIVE FUNCTIONS			
ADAPTIVE FUNCTION			
LANGUAGE FUNCTION			
PERSONAL - SOCIAL FUNCTION			

IMMUNIZATION RECORD (NOTE DATE AND ANY ADVERSE REACTIONS)

DIPHTHERIA, PERTUSSIS, TETANUS, (DPT)	ORIGINAL SERIES	#1		#2		#3	
	BOOSTERS (DT AFTER AGE 6)	#1	#2	#3	#4	#5	
POLIO	FOR EACH IMMUNIZATION, INDICATE TYPE OF VACCINE (OPV-T = TRIVALENT ORAL; OPV-I = TYPE 1 ORAL; S = SALK)						
	#1	#2	#3	#4	#5	#6	
MMR				VARICELLA			
HIB				PREVNAR			
HBV				LEAD SCREENING			

SCREENING TESTS RECORD

REASON FOR NOT ADMINISTERING TB TEST

INTRADERMAL TUBERCULIN TESTS	DATE	RESULT		URINALYSIS OR URINE CULTURE	DATE	RESULT
	RESULT				RESULT	
HEMATOCRIT OR HEMOGLOBIN	DATE	RESULT		URINALYSIS OR URINE CULTURE	DATE	RESULT

SIGNATURE OF PHYSICIAN _____

DATE _____

ICAP Head Start Vision Screening

Teacher's Name: _____

Classroom: _____

Child's Name: _____

Child's Age: _____

Address: _____

Parent(s) Name: _____

Has the child visited an eye doctor before? Yes _____ No _____

Eye Examination

Vision: Right _____ Left _____

Needs Another Exam: Yes _____ No _____

Needs Corrective Work: Yes _____ No _____

Comments: _____

Date of Examination: _____

Doctor's Signature: _____