



Health Table of Contents

* Indicates if applicable

Section Two: Health

- Consent for Health Services
- Emergency Consent and Medical Information Release form
- Health Contact Follow-up form *
- Documentation of Insurance/Medicaid/Chip or No Insurance/Health Coverage Form
- Health History Form 2A (2 pgs)
- Child Health Record - Nutrition
- Release of Information-Physical
- Child Health Record- Physical
- Lead/Hemoglobin or Hematocrit results
- Hearing and Vision Screener: 3 year old *
- Immunization record
- Risk Assessment for Lead Exposure: Parent Questionnaire
- Tuberculosis - Parent Questionnaire
- Release of Information-Dental
- Child Health Record- Dental
- Child Plus Growth Charts - printed at the end of the year when all 3 growth assessments are completed.
- In House Referral *
- Accident Report *
- Optional / Other forms