**MANDATORY SCHOOL DISTRICT HEALTH FORMS**

**1**. **STATE-MANDATED IMMUNIZATIONS** **must be submitted by the first day of school**. Pursuant to School District policy and State law, students without all required immunizations are prohibited from attending school. **Your child may be prevented from attending school until the immunizations are received at CAPA. PLEASE NOTE: A 2nd Varicella vaccine is now mandated for all students.** The PA Department of Health strongly recommends that your child receive TDAP (Tetanus, Diphtheria, Pertussis) booster and two doses of the Meningitis vaccine., 1st dose at age 11-16 and a 2nd dose is required after 16YO or on admission to 12th grade.

Immunizations are available through your child's doctor or at one of the City of Philadelphia Health Centers. If you have any questions feel free to call the CAPA Certified School Nurse for assistance, (215) 400-8140 and press prompt #2.

**Please see the attached list of immunizations as mandated by the Pennsylvania DOH.**

**2.** **STATE-MANDATED REPORT OF PHYSICAL EXAMINATION**. All students entering 9th grade and ALL new students to CAPA are required to have a Physical Exam completed bya licensed health care provider prior to entry. See MEH-1 form attached. This physical **exam cannot be dated prior to January 1, 2018.**  Please submit a copy to the school at the start of the 2018-2019 academic year.

**3.** **CONSENT FOR RELEASE OF INFORMATION** - **Form M-68.** Please complete the following portions of the form: ***Name of Student***, ***DOB***, ***Address***, ***Zip Code***, ***Name of Parent/Guardian***, and ***Signature of Parent/Guardian***. The information regarding ***Agency/Doctor*** should **not** be completed.

**4.** **PUPIL MEDICAL HISTORY**. **Please include the name of your health insurance provider, Primary Care Physician (including their location and phone #),** **and answer all other questions**. If your child does not have health insurance, please contact the CAPA School Nurse at (215) 400-8140. She is available to assist you in accessing health insurance for your child.

**5.** **CHRONIC HEALTH CONDITIONS:** **If your child has a chronic health condition** they must have a **STUDENT HEALTH STATUS form** on file in the Health Suite. Please complete attached form (S-865).

**6**. **MEDICATION ADMINISTRATION FORM, (MED-1)** Students requiring medication in school other than **occasional** Acetaminophen (for aches or fever) or Ibuprofen (given for menstrual cramps only) must also have on file in the Health Suite a MED-1 form. **These forms are available at CAPA in either the front office or by contacting the Nurse.** This form must be completed by the prescribing health care professional and signed by the parent / legal guardian. **This pertains to ALL medications the students take during the day, even Inhalers. Acetaminophen and Ibuprofen are administered based on the School Nurse's assessment and nursing judgment**.

**If you have any questions about the health forms requested, please contact**

**Colleen Quinn MSN, RN, ACNS-BC, CEN, CSN**

**CAPA Certified School Nurse, (215) 400-8140 and press prompt #2.**