

GARFIELD PUBLIC SCHOOLS

JAMES MADISON SCHOOL # 10

55 LINCOLN PLACE, GARFIELD, NEW JERSEY 07026

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Mrs. Jennifer Alfonso
PRINCIPAL

Mrs. Amanda Silva, BSN, RN
SCHOOL NURSE
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PHYSICAL EXAMINATION

Name: _____

Date: _____

DOB: _____

Height: _____ Weight: _____ B/P: _____

Vision Screening: Without glasses

With glasses

OD ___ OS ___ OU ___

OD ___ OS ___ OU ___

Hearing Screen: Right Ear _____ Left Ear _____

Scoliosis Screening: _____

Medical Exam

Appearance _____

Extremities _____

Skin _____

Neurological _____

Head _____

Sensory _____

Ears _____

Motor _____

Eyes _____

Reflexes _____

Nose/Throat _____

Development _____

Mouth/Teeth _____

Allergies _____

Chest/Lungs _____

Asthma _____

Abdomen _____

Other _____

Medications

Comments

Immunizations

DPT/TD: _____ TDAP Booster: _____

Polio: _____ Varicella: _____ Disease: _____

MMR: _____ Measles: _____ Meningo-coccal vaccine: _____

HepB: _____

HIB: _____

Mantoux: _____ Results: _____ Chest X-ray: _____

Immunizations attached: _____

Physician Signature

Address

Phone