

PARENT/GUARDIAN COMPLETE THIS PAGE Child's Name: _____

Tell us about your child's health. Place an **X** in the box if the sentence applies to your child. Check *all* that apply to your child. This will help your health care provider plan your child's physical exam.

Growth

I am concerned about my child's growth.

Appetite

I am concerned about my child's eating/feeding habits or appetite.

Rest -

I am concerned about the amount of sleep my child needs.

Illness/Surgery/Injury - My child

had a serious illness, injury, or surgery..

Please describe:

Physical Activity - My child

must restrict physical activity.

Please describe:

Development and Learning

I am concerned about my child's behavior, development, or learning.

Please describe:

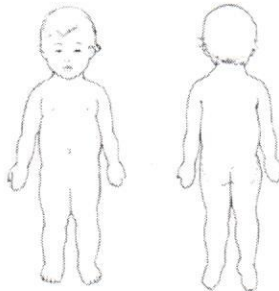
Allergies-My child has allergies. (Medicine, food, dust, mold, pollen, insects, animals, etc.).

Please describe:

Special Needs Care Plan – My child has a special needs care plan (IEP, IFSP, Asthma Action Plan, Food Allergy Action Plan, etc.). **Please discuss with your health care provider.**

Body Health - My child has problems with
 Skin, birthmarks, Mongolian spots, hair, fingernails or toenails.

Map and describe color/shape of skin markings birthmarks, scars, moles



- Eyes \ vision, glasses
- Ears \ hearing, hearing aides or device, ear-aches, tubes in ears
- Nose problems, nosebleeds, runny nose
- Mouth, teething, gums, tongue, sores in mouth or on lips, mouth-breathing, snoring
- Frequent sore throats or tonsillitis
- Breathing problems, asthma, cough, croup
- Heart, heart murmur
- Stomach aches, upset stomach, spitting-up
- Using toilet, toilet training, urinating
- Bones, muscles, movement, pain when moving, uses assistive equipment.
- Nervous system, headaches, seizures, or nervous habits (like twitches)
- Needs special equipment.

List equipment:

Medication - My child takes medication. (List the name of medication, time medication taken, and the reason medication prescribed).

Parent/Guardian questions or comments for the health care provider: