

PHYSICAL EXAM — Must be completed by physician

Height _____	Weight _____	Scalp _____
Vision: Right _____ Left _____	Glasses _____	Contacts _____
Nose _____	Throat _____	Teeth _____
Ears _____	Hay fever _____	Heart _____
Mouth _____	Tonsils _____	Blood Pressure _____
Lymph Glands _____	Thyroid _____	Pulse _____
Chest-Lungs _____		
Abdomen _____		
Hernia _____	Genitalia _____	Spine _____
Extremities _____		
Skin _____		
Neurological Examination _____		
Emotional Stability _____		
Menses _____	Regularity _____	
Serology (optional) _____		

Medication Allergies (specify)? _____

Food Allergies (specify)? _____ EpiPen? _____

Other Allergies? _____

Regularly Taken Medications _____

Operations, Injuries, or Disabilities, Limitations _____

Impressions _____

IMMUNIZATION HISTORY — Must be completed and signed by physician

Patient Name: _____ Date of Birth: _____
 Month Day Year

REQUIRED IMMUNIZATIONS

Negative TB test or chest x-ray (required within last six months regardless of "risk")

MM/DD/YY _____

Results _____

Td or Tdap (circle one) (required within the last 10 years) MM/DD/YY #1 _____

DTP History MM/DD/YY #1 _____ #2 _____ #3 _____

MMR (Measles, Mumps, Rubella) Two doses required after first birthday.

#1 MM/DD/YY _____

#2 MM/DD/YY _____

OR

Titers (if applicable)

<input type="checkbox"/> MEASLES	<input type="checkbox"/> Immune	<input type="checkbox"/> Not Immune
<input type="checkbox"/> MUMPS	<input type="checkbox"/> Immune	<input type="checkbox"/> Not Immune
<input type="checkbox"/> RUBELLA	<input type="checkbox"/> Immune	<input type="checkbox"/> Not Immune

Hepatitis B Vaccine Series (required)

#1 MM/DD/YY _____

#2 MM/DD/YY _____

#3 MM/DD/YY _____

Chicken Pox Vaccine (required if not previously infected)

Date of infection: _____ or _____

One dose required after first birthday

Two doses required after the 13th birthday

#1 MM/DD/YY _____ #2 MM/DD/YY _____

STRONGLY RECOMMENDED IMMUNIZATIONS

Please note: The American College Health Association has provided the following information about freshmen students and the risk of meningococcal meningitis: "Recent studies show that certain college students, particularly freshmen living in dormitories, have a sixfold increased risk for meningitis ... Cases of meningitis among teens and young adults 15 to 24 years of age — the age of most college students — have more than doubled since 1991 ... A vaccine is available against four strains of the bacteria that cause meningococcal meningitis in the United States." **Johnson & Wales University's Health Services strongly recommends receiving the meningococcal vaccine. Vaccine information is available at Health Services.**

Meningitis Vaccine (mandatory for students attending JWU's North Miami Campus)

MM/DD/YY _____

Hepatitis A Vaccine Series

#1 MM/DD/YY _____ #2 MM/DD/YY _____

PHYSICIAN'S SIGNATURE **DATE**

Print Name _____

Street Address _____

City _____ State _____ Zip _____