

KENT CENTER SCHOOL REQUIREMENTS FOR ENTRY (PRE-SCHOOL - 8th Grade)

Connecticut Public Law 80-440 & 91-327 requires children to have a physical examination with documentation of proper immunizations before entering school.

The immunization requirements are as follows:

Polio - (IPV/OPV) minimum of three (3) doses; the last dose after the child's fourth (4th) birthday.

D.P.T. - (Diphtheria, Tetanus, Pertussis)

minimum of four (4) doses; the last dose after the fourth (4th) birthday.

M.M.R. - (Measles, Mumps, Rubella)

- a single dose of MMR vaccine given after the first (1st) birthday. A second (2nd) dose of measles vaccine given at least thirty (30) days after the first (1st) dose.

- Students already enrolled require two doses of measles for entry into 7th grade.

H.I.B. (Hemophilus Influenza Type B)

Immunization after twelve (12) months of age for children entering school before the age of five (5).

H.B.V. (Hepatitis B)

- a series of three (3) doses of vaccine for children born on or after January 1, 1994

-Students already enrolled require one dose of HBV for entry into 7th grade – beginning August 2000. Three doses of HBV before entry into 8th grade beginning 2001

OR:

- protection against Hepatitis B confirmed in writing by a physician and a blood test.

VARICELLA (Chicken Pox)

- Children born on or after January 1, 1997 require one dose of Varicella vaccine on or after the individual's first (1st) birthday.

- Children born before January 1, 1997 and entering 7th grade on or after August 2000, require one dose of Varicella vaccine before entry into 7th grade{those children over thirteen (13) years of age will require two(2) doses of Varicella, given at least four (4) weeks apart, if first dose given after thirteenth birthday}

OR:

-written statement dated and signed by physician or physician's assistant indicating that the individual has already had Varicella based on family or medical history.

These immunizations are all asterisked on the blue state health form and must be recorded in order for the physical to be accepted.

HEALTH ASSESSMENT SCHEDULE

GRADE

PHYSICAL EXAM DATE

All Grades

Must be submitted prior to attending.

Out of State Entrants

*Must meet Connecticut requirements.

***Out of state entrants must have Tuberculosis (TB) risk assessment /screening.**

Exams done up to 12 months prior to Registration date are acceptable.

Pre-School

Must be submitted prior to attending.

Kindergarten

*Exams done within 12 months of Kindergarten/Pre-School entry are acceptable.

***Kindergarten exams must include Tuberculosis (TB) risk assessment/screening**

6th Grade

*Exam must be done between January 1 of the 5th Grade year, but before March 30 of the 6th Grade year. ***Exam must include Tuberculosis (TB) risk assessment/screening.**

7th and 8th Grade sports

*Exam must be done **within 12 months of the date of the last sport season game/practice.**

We recommend that the sports physical be done after June 1st to cover all sport seasons.

***PLEASE NOTE:** All Health Assessments (excluding sports physicals) must include height, weight, blood pressure, hematocrit or hemoglobin blood test, **Tuberculosis(TB) risk assessment / screening**, vision and hearing screening, gross dental exam (by a physician) and a postural exam.

PLEASE TEAR OFF AND RETURN THIS PORTION TO THE SCHOOL HEALTH OFFICE.

Keep requirement papers to review with your Physician.

I have read the above information and I am aware that Connecticut Public Law 80-440 and 91-327

requires my child, _____, to have a physical exam with the proper immunizations as listed on this form, prior to entry into school.

Parent/ Guardian

Signature_____

Date_____