

OAK LAWN COMMUNITY HIGH SCHOOL DISTRICT 229

9400 Southwest Highway, Oak Lawn, Illinois 60453-2372
Telephone 708.424.5200
District Fax 708.424.5297
High School Fax 708.424.5263

Michael J. Riordan, Ed.D.
Superintendent
Joseph A. McCurdy
Assistant Superintendent/CSBO

Jeana L. Lietz, Ed.D.
Principal
Lauren B. May
Assistant Principal
Marcus J. Wargin
Assistant Principal
Michael L. Sunquist
Student Services Director
Jeremy K. Cryan
Athletic Director

Dear Parent/Guardian,

In order to comply with Illinois School Code, Section 27-89, it's **mandatory** that all freshman students entering high school have a **PHYSICAL EXAMINATION** and **VERIFICATION of all IMMUNIZATIONS** on file **BEFORE** starting the new school year. Physical exams must be completed by a licensed physician, advanced practice nurse, or physician assistant and turned in by July 31st. Please have the following physical exam information (below checklist) completed during your scheduled physical examination:

- _____ Parents/Guardians are to **complete** the **front side of physical exam folder** with necessary emergency contact information, including student's name, address and contact phone numbers.
- _____ Parents/Guardians are required to **complete** and **sign** the **Health History** portion inside the physical exam folder, which will be verified by your health care provider.
- _____ Health care provider is to complete the **Physical** section of the folder.
- _____ Health care provider is to complete **Immunization** section of the folder. All childhood required vaccinations must be recorded on the health folder by month, date and year it was administered. Please bring a copy of your child's elementary/middle school immunizations to your office visit to better help your health care provider. (Please see attached list of required immunizations)
- _____ Physician signature is required in two places, one verifying immunization history, the other verifying he/she performed the physical exam.
- _____ The **Interscholastic Sports** section in the physical exam folder must be checked if your child is participating in sports. There is no need for a separate sports physical as long as this section is completed.

The completed physical exam folder **MUST** be returned in a timely matter to OLCHS main office (RM 126) by **July 31st**.

- _____ According to the Child Dental Examination Requirement (HB 4908/PA 100-0829), beginning the 2019-2020 school year, 9th grade students are required to have a dental exam completed. (Please see attached dental form)
- _____ If your child requires medication during the school day, a **Permission Form for Prescribed Medication** must be completed by a physician and parent/guardian annually. This form can be found on the OLCHS.org website, under the "Parents – Nurse's Office" selection.

If you have any questions regarding the above information, please feel free to call the Nurse's office at 708-741-5640 before last day of school attendance.

Healthy Regards,



Amy Tucker BSN, RN-BC, PEL-CSN

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Immunization Requirements

The required immunizations are as follows:

Diphtheria, Pertussis, Tetanus	3 doses or more of DTP/Dtap with last dose qualifying as a booster <i>and</i> received on or after their 4 th birthday
Tdap	1 dose required for 9 th grade entrance regardless of interval since the last DTap, DT or Td dose
Polio	3 dose or more of the polio with last dose qualifying as a booster <i>and</i> received on or after their 4 th birthday
Measles	2 doses, first dose received in or after the first birthday, second dose no less than 28 days after the first dose (Usually given as an MMR)
Mumps	1 dose received on or after the 1 st birthday (Usually given as an MMR)
Rubella	1 dose received on or after the 1 st birthday (Usually given as an MMR)
Hepatitis	3 doses, with third dose no earlier than 6 months age. <i>Minimum intervals between doses: 1 & 2 (4 weeks), 2 & 3 (2 months), 1 & 3 (4 months)</i>
Varicella (Chicken Pox)	2 doses, first dose received on or after 1 st birthday and second dose no less than 28 weeks later. Physician statement verifying disease history or laboratory evidence of varicella immunity is also accepted
Meningococcal Conjugate Vaccine	1 dose of MCV4 for 9 th grade entrance. 2 doses of MCV4 are required for 12 th grade, <i>unless</i> the first dose is administered to a child who was 16 years of age or older, in which case only 1 dose would be required at 12 th grade