



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
SECTION FOR CHILD CARE REGULATION

**CHILD MEDICAL EXAMINATION REPORT (INFANT/TODDLER/PRE-SCHOOL)**

SAVE

PRINT

RESET

**IDENTIFYING INFORMATION**

CHILD'S NAME	BIRTHDATE
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**CURRENT STATE OF HEALTH**

Based on my assessment of this child's medical history, current state of health and my physical examination of the child on \_\_\_\_ / \_\_\_\_ / \_\_\_\_, this child can participate in a child care program. This child has no special care needs unless specified below.

*(Date of medical examination must be within the last 12 months.)*

**PHYSICIAN'S INSTRUCTIONS FOR SPECIALIZED CARE**

Complete this section only if child requires special care at a child care facility, e.g. special diets, allergies, ear infections, convulsions, diabetes, asthma, behavior problems, hearing or visual impairment, etc. (Attach additional pages as needed.)

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SIGNATURE OF PHYSICIAN OR REGISTERED NURSE UNDER THE SUPERVISION OF A PHYSICIAN		DATE
PHYSICIAN'S OR NURSE'S NAME (PLEASE PRINT)		
NAME AND ADDRESS OF CLINIC, GROUP, PRACTICE OR OTHER (MAY USE STAMP)	IF NURSE IS SUPERVISED BY A PHYSICIAN, INDICATE PHYSICIAN'S NAME (PLEASE PRINT)	
	TELEPHONE NUMBER	

## Great Mines Health Center – Pediatrics Vaccine Schedule

Ashley Reese, MSN, APRN, CPNP-PC  
508 W. Pine Street  
Farmington, MO 63640  
Phone: 573.664.1221

Hospital: Hepatitis B # 1

1 week: Hepatitis B # 1 if it was not given in the hospital

2 months: Hepatitis B # 2, Pentacel (DTaP, Polio, Hib), Prevnar 13, Rotateq

4 months: Pentacel (DTaP, Polio, Hib), Prevnar 13, Rotateq

6 months: Pentacel (DTaP, Polio, Hib), Prevnar 13, Rotateq

9 months: Hepatitis B # 3

12 months: Hepatitis A # 1, Prevnar 13

15 months: MMR, Varivax

18 months: Hepatitis A # 2, Pentacel (DTaP, Polio, Hib)

2 - 4 year: will be seen for yearly well exam, however no vaccines if up to date

5 year: Kinrix (DTaP, Polio), MMRV

6 - 10 year: will be seen for yearly well exam, however no vaccines if up to date

11 year: Tdap, Menactra # 1, Gardasil

12 - 15 year: will be seen for yearly well exam, however no vaccines if up to date

16 year: Menactra # 2,