

AMADOR COUNTY UNIFIED SCHOOL DISTRICT

217 Rex Avenue, Jackson, California 95642

(209) 223-5426 Fax: (209) 257-5384

Dear Parent/Guardian,

Congratulations, your child is about to enter school! Amador County Unified School District is committed to assuring that your child has success in school. As the School Nurse, it is my responsibility to be sure that your child has:

- Been fully immunized
- Obtained a physical exam
- Received a dental exam

The purpose of these requirements and assessments is to detect unrecognized health problems that may interfere with your child's ability to learn and be successful.

IMMUNIZATIONS:

The State of California requires that all students meet the minimum immunization requirements before entering school. The following immunizations are required for school entry:

- Polio - 3 doses if the last dose was given after the age of 4, otherwise 4 doses
- DTP - 4 doses if the last dose was given after the age of 4, otherwise 5 doses
- MMR - 2 doses, on or after the 1st birthday
- Hepatitis B - 3 doses
- Varicella - 2 doses or note from doctor if child has had chickenpox

Immunizations can be obtained from your personal physician, at the Amador County Health Department (Medi-Cal only), or at WellSpace 209-268-0560. For information regarding Health Department immunization clinic dates and times call 209-223-6407.

PHYSICAL EXAM:

It is required that your child has a physical exam prior to entry into first grade, **but often a child will have this exam prior to entering Kindergarten**. A physical exam done after March 1, 2019 will satisfy this requirement. The attached "Report of Health Examination for School Entry" form should be completed by your physician. If you need assistance in obtaining a free physical, call Amador County CHDP at 209-223-6669 or WellSpace 209-268-0560. Return the completed form to school, so that your child's records can be updated.

DENTAL EXAM:

Your child is required to have a dental check-up prior to May 31 of their first year in school (May 31, 2020). Please see the attached information and resources about this requirement. The "Oral Health Assessment/Waiver" form needs to be completed by your dentist and returned to the school. If you cannot take your child for this required exam, please indicate the reason in Section 3 of the form and return it to the school.

If you have any questions or if I can be of any assistance, please call me at 257-5426 or e-mail dawn.leibold@amadorcoe.k12.ca.us. I look forward to working with you to assure your child's success in school.

Dawn Leibold, RN, BSN
School Nurse
Amador County Unified School District
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