CHILD'S MEDICAL HISTO		RY Slaw sail to
DATE:		
Child's Physician	Date Last Seen	
Address of your child's Phy	sician	Office Phone
	alth? Yes	
1. Does your child have a r	nealth problem? Yes	
If yes, explain	is tack of dodg! chairs the acts of dogge	and the nemeric field and the second
	ad or been treated by a physic	
	Character Character	
	heck	Check
Problems at Birth	No ?	Yes No ?
	~ Startings that	Arthritis
Heart Murmur	Today sub- north School	Cancer
Heart Disease	Salesi no	Cerebral Palsy
Rheumatic Fever		Seizures
Anemia Sielde Cell Anemia		Autism
Sickle Cell Anemia	I Figure	Asthma
Bleeding/Hemophilia	5.74.74.76.7	Cleft Lip/Palate
Blood Transfusion		Speech Problems
Hepatitis		Hearing Problems
AIDS or HIV+	THE SHALL STATE OF STATE	Eye Problems
Tuberculosis	note and the state of the control of	Skin Problems
Liver Disease	Tonsi	il/Adenoid Problems
Kidney Disease	co to top at white year at set 1	Sleep Problems
Diabetes	Emotional	/Behavior Problems
	Gastro Esophaç	geal Reflux Disease
yes to any above, please ex	plain:	
		siberrence brusence
ther problems		
ther problems.		
llergies (Please list)		
	d. As and the or of my poster place pole	
ast medications taken by offi	an egyariai ng mua al massar tre. Ked	estable street in mortaneum. An
aily medications taken by chi	d:	COURS STING THESE PORMS BOARD
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