

January 2024

Dear Incoming 6th Grade Parent(s)/Guardian(s),

In preparation for the 2024-2025 school year, this informational letter is being sent to you regarding the required health record information for your incoming 6th-grade student.

REQUIRED PHYSICAL EXAMINATION
[State of Illinois Certificate of Child Health Examination](#)

Students entering 6th grade must present a completed State of Illinois Certificate of Child Health Examination to the school. A licensed healthcare provider (MD, DO, APN, or PA) must complete the physical examination and immunization section. The form must be dated within 1 year prior to the first day of the school year (on or after August 22, 2023).

* The State of Illinois Certificate of Child Health Examination was updated 12/2023. The updated form can be found on the link above or on the [District 27 Health Office](#) website.*

State of Illinois Certificate of Child Health Examination forms dated 11/2015 on the left lower corner of the form will not be accepted after December 31, 2024.

The minimum immunization requirements for children entering 6th grade in an Illinois school include:

- All students are required to show proof of three or more doses of Diphtheria, Tetanus, Pertussis (DTP, DTap, pediatric DT, or Td) vaccine with the last dose being received on or after the 4th birthday.
- All students are required to show proof of three doses of Polio (IPV) vaccine with the last dose being received on or after the 4th birthday.
- All students entering K-8, two doses of measles, mumps, and rubella (MMR) at mandated intervals are required.
- All students entering K and 6th, two doses of varicella (chickenpox) at mandated intervals are required.
- All students entering 6th grade, three doses of Hepatitis B at mandated intervals are required.
- All students entering 6th grade, one dose of meningococcal vaccine on or after the 11th birthday is required.
- All students entering 6th grade, one dose of Tdap vaccine on or after the 11th birthday is required, regardless of interval since the last dose of DTP, DTap, or Td.

Completed State of Illinois Certificate of Child Health Examination forms are due 2 weeks prior to the first day of school (Thursday, August 8, 2024). If your child's physical and immunization appointment is scheduled after August 8, 2024, proof of an upcoming appointment is required no later than Thursday, August 8, 2024.

Completed health and immunization forms and proof of upcoming appointments can be emailed to wohealthforms@nb27.org or dropped off at Wood Oaks Junior High School.

Parent/Guardian Sections to Complete

1. The top section of page 1 includes the student's name, birth date, sex, race/ethnicity, school/grade level, address, parent/guardian name, and contact information.
2. The Health History Section, located below the first section on page 1, must be completed, signed, and dated by a parent or guardian. Please ensure that all Yes/No questions are answered.
3. The top section of page 2 includes the student's name, birthdate, sex, school, and grade level.
4. Illinois state law requires the parent or guardian to complete the Health History section before a school can accept the health exam.

Failure to comply with this requirement by Tuesday, October 15, 2024, will result in your child's exclusion from school beginning Wednesday, October 16, 2024.

REQUIRED VISION EXAMINATION (STUDENTS NEW TO ILLINOIS SCHOOLS)

[State of Illinois Eye Examination Report](#)

Illinois law requires proof of an eye examination by an optometrist or physician (such as an ophthalmologist) who provides eye examinations to be submitted to the school no later than October 15 of the year the child first enrolled or as required by the school for other children. The examination must be completed within one year prior to the first day of the school year when the child enters the Illinois school system for the first time.

Parent/Guardian Sections to Complete

1. Page 2 requires a parent/guardian signature.
2. Page 2 requires that the form be dated by the parent/guardian.

The completed eye examination report must be dated on or after August 22, 2023.

The parent of any child who is unable to obtain an eye examination must submit a waiver form to the school ([State of Illinois Eye Examination Waiver Form](#)) no later than Tuesday, October 15, 2024.

REQUIRED DENTAL EXAMINATION

[State of Illinois Proof of School Dental Examination Form](#)

Illinois law requires proof of an oral health examination for all incoming 6th-grade students. The examination must have occurred within 18 months prior to May 15 of the school year. A licensed dentist must complete the examination, sign, and date this Proof of School Dental Examination Form.

The completed dental examination report must be dated between November 15, 2023 - May 15, 2025.

The parent of any child who is unable to obtain a dental examination must submit a waiver form to the school ([State of Illinois Dental Examination Waiver Form](#)) no later than Wednesday, May 15, 2025.

OUT-OF-STATE TRANSFER STUDENTS

Students who transfer into District 27 from out of state or outside of the United States after the start of the school year must meet all Illinois physical examination and immunization requirements. Students will have 30 days from the day they start school to show proof of a current physical examination and immunizations on the [State of Illinois Certificate of Child Health Examination](#) form. The form must be dated on or after August 22, 2023. The form must be completed by a healthcare provider (MD, DO, APN, or PA) licensed to practice in the United States. All requirements listed on pages 1 and 2 of this letter must be met before the school can accept the health form.

MEDICATION ADMINISTRATION AT SCHOOL

[Medication Administration Consent Form](#)

Illinois law requires that all medications given in school, including both prescription and non-prescription medication, shall be prescribed by a licensed prescriber on an individual basis as determined by the student's health status. All student medication given at school must have a completed Medication Administration Consent Form on file in the health office prior to the administration of any prescription or non-prescription medication. Verbal orders from a licensed healthcare provider or a parent will not be accepted. A parent/guardian may come to the school to administer a student's medication in the event that a completed Medication Administration Consent Form is not on file in the health office. Each medication requires a separate form.

Illinois law requires that all prescription medication be brought to the school in a container, labeled appropriately by the pharmacist or licensed prescriber.

Prescription medication shall display:

1. Student's Name
2. Prescription Number
3. Medication Name and Dosage
4. Administration Route or Other Directions
5. Date and Refill
6. Licensed Prescriber's Name
7. Pharmacy Name, Address, and Phone Number
8. Name or Initials of Pharmacist

Non-prescription (Over-the-Counter Medication) medication shall:

1. Be brought in with the manufacturer's original label with the ingredients listed.
2. The child's name must be affixed to the container.

ASTHMA

Parent(s)/Guardian(s) of students with an asthma diagnosis are requested to provide written authorization for the self-administration and self-carry of any asthma medication ([Medication Administration Consent Form](#)).

Parent(s)/Guardian(s) are requested to provide both the prescribed medication as well as an Asthma Action Plan signed by the student's prescribing healthcare provider and a parent/guardian.

EPINEPHRINE

Parent(s)/Guardian(s) of students who may require the use of Epinephrine during the school day are required to provide written authorization for the self-administration and self-carry of Epinephrine ([Medication Administration Consent Form](#)).

Parent(s)/Guardian(s) of students who may require the use of Epinephrine and/or the use of antihistamines during the school day are requested to provide both the prescribed medication(s), non-prescription medication, and an Allergy Action Plan signed by the student's prescribing healthcare provider and a parent/guardian.

I invite you to explore the [District 27 Health Office](#) website for further information.

Please feel free to contact Olivia Hamby, RN (Wood Oaks school Nurse - 847-272-1900 x5536 or hamby.o@nb27.org) or me with any questions or concerns you may have.

My best,

Mel

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