## CHILD HEALTH REPORT

(55 PA CODE §§3270.131, 3280.131 AND 3290.131)

CHILD'S NAME: (LAST)	(FI	RST)		PARENT/GUA	KDIAN:					
DATE OF BIRTH:	НО	ME PHONE:		ADDRESS:						
HILD CARE FACILITY NAME:	Child Dev	elopment	Center							
Treasure House Child Development				WORK PHONE:						
I authorize the child care staff and my child	t's health profe	essional to con	nmunicate dir	ectly if needed	to clarify info	ormation on th	is form at	out my chile	d.	
PARENT'S SIGNATURE:	3 neolen prove									
				NY INFORM	ATTON					
This form may be updated	by a health p	rofessional.	Initial and d	ate any new	data. The ch	ild care facil	ity needs	a copy of	the form.	15 1100
HEALTH HISTORY AND MEDICAL INFORMA	ATION PERTIN	NENT TO RO	UTINE CHIL	D CARE AND	DIAGNOSIS	TREATMENT	IN EME	RGENCY (D	DESCRIBE	, IF ANY):
DESCRIBE ALL MEDICATION AND ANY SP CHILD RECEIVES SHOULD BE DOCUMENT NONE	ECIAL DIET T ED IN THE E	THE CHILD R VENT THE C	ECEIVES AN	ID THE REAS RES EMERGE	ON FOR MEI	DICATION AN	ND SPECI TACH AD	AL DIET. A DITIONAL	SHEETS I	ATIONS A F NECESSA
CHILD'S ALLERGIES (DESCRIBE, IF ANY	):									
NONE										
LIST ANY HEALTH PROBLEMS OR SPECIA	AL NEEDS AN	ND RECOMM	IENDED TRE	ATMENT/SE	RVICES. AT	TACH ADDIT	IONAL SI	HEETS IF N	NECESSAF	RY TO
DESCRIBE THE PLAN FOR CARE THAT S	HOULD BE F	OLLOWED F	OR THE CHI	LD, INCLUD	ING INDICA	TION OF SP	ECIAL TR	AINING R	EQUIRED	FOR STAF
EQUIPMENT AND PROVISION FOR EMER NONE	GENCIES.									
			CIVID CAR	5 1110 005		D APPEAR TO	) BE FRE	E FROM C	ONTAGIO	US OR
	DIE TO DAD				S THE CHILL					
COMMUNICABLE DISEASES?			CHILD CAR	E AND DOE	5 THE CHILL					
IN YOUR ASSESSMENT, IS THE CHILD A COMMUNICABLE DISEASES?		NSWER:								
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXP	LAIN YOUR A	ANSWER:	OW TE THE	DECILITE OF	VISION H	FARING OR I	FAD SC	REENINGS	WERE A	BNORMAL.
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPI	LAIN YOUR A	NOTE BELO	OW IF THE	RESULTS OF	VISION, HI	EARING OR	LEAD SC	REENINGS	WERE A	BNORMAL.
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPINATE THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PRHEALTH CARE SERVICES CURRENTLY RECEIVED BY THE AMERICAN ACADEMY OF PEDIATR	OPRIATE REVENTIVE	NOTE BELC THE SCREE INFORMAT CARE FACT	OW IF THE ENING WAS TION ABOU ILITY.	RESULTS OF ABNORMAI T REFERRAL	VISION, HI , PROVIDE S, IMPLICA	FARING OR I	LEAD SC	REENINGS	WERE A	BNORMAL.
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPINANT THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PRHEALTH CARE SERVICES CURRENTLY RECEIVED AMERICAN ACADEMY OF PEDIATR SCHEDULE AT WWW.AAP.ORG)	OPRIATE REVENTIVE	NOTE BELC THE SCREI INFORMAT CARE FACT VISION (S	OW IF THE ENING WAS TION ABOU'	RESULTS OF ABNORMAI T REFERRAL until age 3)	VISION, HI , PROVIDE S, IMPLICA	EARING OR	LEAD SC	REENINGS	WERE A	BNORMAL.
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPINATE THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PRHEALTH CARE SERVICES CURRENTLY RECEIVED BY THE AMERICAN ACADEMY OF PEDIATR	OPRIATE REVENTIVE	NOTE BELC THE SCREI INFORMAT CARE FACT VISION (S	OW IF THE ENING WAS TION ABOU'	RESULTS OF ABNORMAI T REFERRAL	VISION, HI , PROVIDE S, IMPLICA	EARING OR	LEAD SC	REENINGS	WERE A	BNORMAL.
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPINATION  HAS THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PRHEALTH CARE SERVICES CURRENTLY RECEIVED AMERICAN ACADEMY OF PEDIATR SCHEDULE AT WWW.AAP.ORG)  YES NO	OPRIATE EVENTIVE COMMENDED LICS? (SEE	NOTE BELC THE SCREI INFORMAT CARE FACT VISION (S HEARING	OW IF THE ENING WAS TION ABOU' ILITY. subjective	RESULTS OF ABNORMAI T REFERRAL until age 3)	VISION, HI , PROVIDE S, IMPLICA	EARING OR I THE DATE T TIONS OR A	LEAD SC HE SCRE CTIONS	REENINGS ENING WA RECOMME	S WERE A AS COMPL NDED FO	BNORMAL. ETED AND R THE CHI
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPINANT THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PRHEALTH CARE SERVICES CURRENTLY RECEIVED AMERICAN ACADEMY OF PEDIATR SCHEDULE AT WWW.AAP.ORG)	OPRIATE EVENTIVE COMMENDED LICS? (SEE	NOTE BELC THE SCREI INFORMAT CARE FACT VISION (S HEARING	OW IF THE ENING WAS TION ABOU' ILITY. subjective	RESULTS OF ABNORMAI T REFERRAL until age 3)	VISION, HI , PROVIDE S, IMPLICA	EARING OR I THE DATE T TIONS OR A	LEAD SC HE SCRE CTIONS	REENINGS ENING WA RECOMME	S WERE A AS COMPL NDED FO	BNORMAL. ETED AND R THE CHI
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPINANCE THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PROBLEM TO THE AMERICAN ACADEMY OF PEDIATR SCHEDULE AT WWW.AAP.ORG)  YES NO  RECORD DATES OF IMM	OPRIATE EVENTIVE COMMENDED LICS? (SEE	NOTE BELC THE SCREI INFORMAT CARE FACT VISION (S HEARING	OW IF THE ENING WAS TION ABOU' ILITY. subjective	RESULTS OF ABNORMAI T REFERRAL until age 3)	VISION, HI , PROVIDE S, IMPLICA	EARING OR I THE DATE T TIONS OR A	LEAD SC HE SCRE CTIONS	REENINGS ENING WA RECOMME	S WERE AN AS COMPINDED FO	BNORMAL. ETED AND R THE CHI
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPI  HAS THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PR HEALTH CARE SERVICES CURRENTLY REC BY THE AMERICAN ACADEMY OF PEDIATR SCHEDULE AT WWW.AAP.ORG)  YES NO  RECORD DATES OF IMM  IMMUNIZATIONS	OPRIATE REVENTIVE COMMENDED LICS? (SEE	NOTE BELOW	OW IF THE ENING WAS TION ABOUT ILITY. Subjective is (subjective OR ATTAC	RESULTS OF ABNORMAI T REFERRAL until age 3) We until age	VISION, HI , PROVIDE S, IMPLICA 4)	EARING OR I THE DATE T TIONS OR A	LEAD SC HE SCRE CTIONS	REENINGS ENING WA RECOMME	S WERE AN AS COMPINDED FO	BNORMAL. ETED AND R THE CHI
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPI  HAS THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PR HEALTH CARE SERVICES CURRENTLY REC BY THE AMERICAN ACADEMY OF PEDIATR SCHEDULE AT WWW.AAP.ORG)  YES NO  RECORD DATES OF IMM  IMMUNIZATIONS  HEP-B	OPRIATE REVENTIVE COMMENDED LICS? (SEE	NOTE BELOW	OW IF THE ENING WAS TION ABOUT ILITY. Subjective is (subjective OR ATTAC	RESULTS OF ABNORMAI T REFERRAL until age 3) We until age	VISION, HI , PROVIDE S, IMPLICA 4)	EARING OR I THE DATE T TIONS OR A	LEAD SC HE SCRE CTIONS	REENINGS ENING WA RECOMME	S WERE AN AS COMPINDED FO	BNORMAL. ETED AND R THE CHI
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPI  HAS THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PR HEALTH CARE SERVICES CURRENTLY REC BY THE AMERICAN ACADEMY OF PEDIATR SCHEDULE AT WWW.AAP.ORG)  YES NO  RECORD DATES OF IMM  IMMUNIZATIONS  HEP-B  ROTAVIRUS	OPRIATE REVENTIVE COMMENDED LICS? (SEE	NOTE BELOW	OW IF THE ENING WAS TION ABOUT ILITY. Subjective is (subjective OR ATTAC	RESULTS OF ABNORMAI T REFERRAL until age 3) We until age	VISION, HI , PROVIDE S, IMPLICA 4)	EARING OR I THE DATE T TIONS OR A	LEAD SC HE SCRE CTIONS	REENINGS ENING WA RECOMME	S WERE AN AS COMPINDED FO	BNORMAL. ETED AND R THE CHI
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPI  HAS THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PR HEALTH CARE SERVICES CURRENTLY REC BY THE AMERICAN ACADEMY OF PEDIATR SCHEDULE AT WWW.AAP.ORG)  YES NO  RECORD DATES OF IMM  IMMUNIZATIONS  HEP-B  ROTAVIRUS	OPRIATE REVENTIVE COMMENDED LICS? (SEE	NOTE BELOW	OW IF THE ENING WAS TION ABOUT ILITY. Subjective is (subjective OR ATTAC	RESULTS OF ABNORMAI T REFERRAL until age 3) We until age	VISION, HI , PROVIDE S, IMPLICA 4)	EARING OR I THE DATE T TIONS OR A	LEAD SC HE SCRE CTIONS	REENINGS ENING WA RECOMME	S WERE AN AS COMPINDED FO	BNORMAL. ETED AND R THE CHI
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPI  HAS THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PR HEALTH CARE SERVICES CURRENTLY REC BY THE AMERICAN ACADEMY OF PEDIATR SCHEDULE AT WWW.AAP.ORG)  YES NO  RECORD DATES OF IMM  IMMUNIZATIONS  HEP-B  ROTAVIRUS  DTAP/DTP/TD  HIB	OPRIATE REVENTIVE COMMENDED LICS? (SEE	NOTE BELOW	OW IF THE ENING WAS TION ABOUT ILITY. Subjective is (subjective OR ATTAC	RESULTS OF ABNORMAI T REFERRAL until age 3) We until age	VISION, HI , PROVIDE S, IMPLICA 4)	EARING OR I THE DATE T TIONS OR A	LEAD SC HE SCRE CTIONS	REENINGS ENING WA RECOMME	S WERE AN AS COMPINDED FO	BNORMAL. ETED AND R THE CHI
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPI  HAS THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PR HEALTH CARE SERVICES CURRENTLY REC BY THE AMERICAN ACADEMY OF PEDIATR SCHEDULE AT WWW.AAP.ORG)  YES NO  RECORD DATES OF IMM  IMMUNIZATIONS  HEP-B  ROTAVIRUS  DTAP/DTP/TD  HIB  PNEUMOCOCCAL	OPRIATE REVENTIVE COMMENDED LICS? (SEE	NOTE BELOW	OW IF THE ENING WAS TION ABOUT ILITY. Subjective is (subjective OR ATTAC	RESULTS OF ABNORMAI T REFERRAL until age 3) We until age	VISION, HI , PROVIDE S, IMPLICA 4)	EARING OR I THE DATE T TIONS OR A	LEAD SC HE SCRE CTIONS	REENINGS ENING WA RECOMME	S WERE AN AS COMPINDED FO	BNORMAL. ETED AND R THE CHI
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPI  HAS THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PR HEALTH CARE SERVICES CURRENTLY REC BY THE AMERICAN ACADEMY OF PEDIATR SCHEDULE AT WWW.AAP.ORG)  YES NO  RECORD DATES OF IMM  IMMUNIZATIONS  HEP-B  ROTAVIRUS  DTAP/DTP/TD  HIB  PNEUMOCOCCAL  POLIO	OPRIATE REVENTIVE COMMENDED LICS? (SEE	NOTE BELOW	OW IF THE ENING WAS TION ABOUT ILITY. Subjective is (subjective OR ATTAC	RESULTS OF ABNORMAI T REFERRAL until age 3) We until age	VISION, HI , PROVIDE S, IMPLICA 4)	EARING OR I THE DATE T TIONS OR A	LEAD SC HE SCRE CTIONS	REENINGS ENING WA RECOMME	S WERE AN AS COMPINDED FO	BNORMAL. ETED AND R THE CHI
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPI  HAS THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PR HEALTH CARE SERVICES CURRENTLY REC BY THE AMERICAN ACADEMY OF PEDIATR SCHEDULE AT WWW.AAP.ORG)  YES NO  RECORD DATES OF IMM  IMMUNIZATIONS  HEP-B  ROTAVIRUS  DTAP/DTP/TD  HIB  PNEUMOCOCCAL	OPRIATE REVENTIVE COMMENDED LICS? (SEE	NOTE BELOW	OW IF THE ENING WAS TION ABOUT ILITY. Subjective is (subjective OR ATTAC	RESULTS OF ABNORMAI T REFERRAL until age 3) We until age	VISION, HI , PROVIDE S, IMPLICA 4)	EARING OR I THE DATE T TIONS OR A	LEAD SC HE SCRE CTIONS	REENINGS ENING WA RECOMME	S WERE AN AS COMPINDED FO	BNORMAL. ETED AND R THE CHI
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPINANCE THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PREDET HEALTH CARE SERVICES CURRENTLY RECEIVED AND THE AMERICAN ACADEMY OF PEDIATR SCHEDULE AT WWW.AAP.ORG)  RECORD DATES OF IMM  IMMUNIZATIONS  HEP-B  ROTAVIRUS  DTAP/DTP/TD  HIB  PNEUMOCOCCAL  POLIO	OPRIATE REVENTIVE COMMENDED LICS? (SEE	NOTE BELOW	OW IF THE ENING WAS TION ABOUT ILITY. Subjective is (subjective OR ATTAC	RESULTS OF ABNORMAI T REFERRAL until age 3) We until age	VISION, HI , PROVIDE S, IMPLICA 4)	EARING OR I THE DATE T TIONS OR A	LEAD SC HE SCRE CTIONS	REENINGS ENING WA RECOMME	S WERE AN AS COMPINDED FO	BNORMAL. ETED AND R THE CHI
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPI  HAS THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PR HEALTH CARE SERVICES CURRENTLY REC BY THE AMERICAN ACADEMY OF PEDIATR SCHEDULE AT WWW.AAP.ORG)  YES NO  RECORD DATES OF IMM  IMMUNIZATIONS  HEP-B  ROTAVIRUS  DTAP/DTP/TD  HIB  PNEUMOCOCCAL  POLIO  INFLUENZA	OPRIATE REVENTIVE COMMENDED LICS? (SEE	NOTE BELOW	OW IF THE ENING WAS TION ABOUT ILITY. Subjective is (subjective OR ATTAC	RESULTS OF ABNORMAI T REFERRAL until age 3) We until age	VISION, HI , PROVIDE S, IMPLICA 4)	EARING OR I THE DATE T TIONS OR A	LEAD SC HE SCRE CTIONS	REENINGS ENING WA RECOMME	S WERE AN AS COMPINDED FO	BNORMAL. ETED AND R THE CHI
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPI  HAS THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PR HEALTH CARE SERVICES CURRENTLY REC BY THE AMERICAN ACADEMY OF PEDIATR SCHEDULE AT WWW.AAP.ORG)  YES NO  RECORD DATES OF IMM  IMMUNIZATIONS  HEP-B  ROTAVIRUS  DTAP/DTP/TD  HIB  PNEUMOCOCCAL  POLIO  INFLUENZA	OPRIATE REVENTIVE COMMENDED LICS? (SEE	NOTE BELOW	OW IF THE ENING WAS TION ABOUT ILITY. Subjective is (subjective OR ATTAC	RESULTS OF ABNORMAI T REFERRAL until age 3) We until age	VISION, HI , PROVIDE S, IMPLICA 4)	EARING OR I THE DATE T TIONS OR A	LEAD SC HE SCRE CTIONS	REENINGS ENING WA RECOMME	S WERE AN AS COMPINDED FO	BNORMAL. ETED AND R THE CHI
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPI  HAS THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PR HEALTH CARE SERVICES CURRENTLY REC BY THE AMERICAN ACADEMY OF PEDIATR SCHEDULE AT WWW.AAP.ORG)  YES NO  RECORD DATES OF IMM  IMMUNIZATIONS  HEP-B  ROTAVIRUS  DTAP/DTP/TD  HIB  PNEUMOCOCCAL  POLIO  INFLUENZA  MMR  VARICELLA	OPRIATE REVENTIVE COMMENDED LICS? (SEE	NOTE BELOW	OW IF THE ENING WAS TION ABOUT ILITY. Subjective is (subjective OR ATTAC	RESULTS OF ABNORMAI T REFERRAL until age 3) We until age	VISION, HI , PROVIDE S, IMPLICA 4)	EARING OR I THE DATE T TIONS OR A	LEAD SC HE SCRE CTIONS	REENINGS ENING WA RECOMME	S WERE AN AS COMPINDED FO	BNORMAL. ETED AND R THE CHI
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPI  HAS THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PR HEALTH CARE SERVICES CURRENTLY REC BY THE AMERICAN ACADEMY OF PEDIATR SCHEDULE AT WWW.AAP.ORG)  YES NO  RECORD DATES OF IMM  IMMUNIZATIONS  HEP-B  ROTAVIRUS  DTAP/DTP/TD  HIB  PNEUMOCOCCAL  POLIO  INFLUENZA  MMR  VARICELLA  HEP-A  MENINGOCOCCAL	OPRIATE REVENTIVE COMMENDED LICS? (SEE	NOTE BELOW	OW IF THE ENING WAS TION ABOUT ILITY. Subjective is (subjective OR ATTAC	RESULTS OF ABNORMAI T REFERRAL until age 3) We until age	VISION, HI , PROVIDE S, IMPLICA  4)  COPY OF 1	EARING OR I	LEAD SCHE SCRECTIONS S IMMU	REENINGS ENING WA RECOMME	N RECOR	BNORMAL, ETED AND R THE CHI
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPI  HAS THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PR HEALTH CARE SERVICES CURRENTLY REC BY THE AMERICAN ACADEMY OF PEDIATR SCHEDULE AT WWW.AAP.ORG)  YES NO  RECORD DATES OF IMM  IMMUNIZATIONS  HEP-B  ROTAVIRUS  DTAP/DTP/TD  HIB  PNEUMOCOCCAL  POLIO  INFLUENZA  MMR  VARICELLA  HEP-A	OPRIATE REVENTIVE COMMENDED LICS? (SEE	NOTE BELOW	OW IF THE ENING WAS TION ABOUT ILITY. Subjective is (subjective OR ATTAC	RESULTS OF ABNORMAI T REFERRAL until age 3) We until age	VISION, HI , PROVIDE S, IMPLICA  4)  COPY OF 1	EARING OR I THE DATE T TIONS OR A	LEAD SCHE SCRECTIONS S IMMU	REENINGS ENING WA RECOMME	N RECOR	BNORMAL, ETED AND R THE CHI
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPI  HAS THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PR HEALTH CARE SERVICES CURRENTLY REC BY THE AMERICAN ACADEMY OF PEDIATR SCHEDULE AT WWW.AAP.ORG)  YES NO  RECORD DATES OF IMM  IMMUNIZATIONS  HEP-B  ROTAVIRUS  DTAP/DTP/TD  HIB  PNEUMOCOCCAL  POLIO  INFLUENZA  MMR  VARICELLA  HEP-A  MENINGOCOCCAL  OTHER	OPRIATE REVENTIVE COMMENDED LICS? (SEE	NOTE BELOW	OW IF THE ENING WAS TION ABOUT ILITY. Subjective is (subjective OR ATTAC	RESULTS OF ABNORMAI T REFERRAL until age 3) We until age	VISION, HI , PROVIDE S, IMPLICA  4)  COPY OF 1	EARING OR I	LEAD SCHE SCRECTIONS S IMMU	REENINGS ENING WA RECOMME	N RECOR	BNORMAL, ETED AND R THE CHI
COMMUNICABLE DISEASES?  YES NO IF NO, PLEASE EXPI  HAS THE CHILD RECEIVED ALL AGE APPR SCREENINGS LISTED IN THE ROUTINE PR HEALTH CARE SERVICES CURRENTLY REC BY THE AMERICAN ACADEMY OF PEDIATR SCHEDULE AT WWW.AAP.ORG)  YES NO  RECORD DATES OF IMM  IMMUNIZATIONS  HEP-B  ROTAVIRUS  DTAP/DTP/TD  HIB  PNEUMOCOCCAL  POLIO  INFLUENZA  MMR  VARICELLA  HEP-A  MENINGOCOCCAL  OTHER	OPRIATE REVENTIVE COMMENDED LICS? (SEE	NOTE BELOW	OW IF THE ENING WAS TION ABOUT ILITY. Subjective is (subjective OR ATTAC	RESULTS OF ABNORMAI T REFERRAL until age 3) We until age	VISION, HI , PROVIDE S, IMPLICA  4)  COPY OF 1	EARING OR I	LEAD SCHE SCRECTIONS S IMMU	REENINGS ENING WA RECOMME	N RECORNIS	BNORMAL, ETED AND R THE CHI