## Certification of Health for School Personnel (K.S.A. 72-5213)

Must be completed within a year of start date

Birthdate:

To be completed by the Applicant/Employee: (form to become part of the personnel file)

T TOTAL TO .		2.11.100.101			
Address:	Worksite:				
Job Title:					
	Tuberculin Te	etina Results			
/To k		•			
·	be completed by the	e nealin care Pi	ovider)		
Tuberculosis has been ruled out b	<b>y</b> :				
Test	Date	Date Read	Result		
1001	Administered	Date ricad	ricodii		
Mantaly/DDD	/ WITH 1131616U				
Mantoux/PPD					Nonati
			mm in	duration	Negati
					Positive
Chest X-Ray					1000
(only needed if positive from skin test)					Negati
					Positive Positive
Administered by:	•		1		•
Read by:			Health Facility:		
(signature)			,		

## Health Assessment – Provider's Statement (To be completed by the Health Care Provider)

I have, on this date, examined, \_\_\_\_\_ and find no evidence of any physical condition that would conflict with the health, safety, or welfare of the pupils or would prevent the individual from working in a safe and healthful manner.

List limitations or restrictions, if any:
Comments:
Signature of Licensed Physician, Registered Physician's Assistant, or Advance Registered Nurse Practitioner:
Exam Date:

KSA 72-52 I3. Certification of health; ...(a) Every board of education shall require all employees of the school district, who come in regular contact with the pupils of the school district, to submit a certification of health on a form prescribed by the secretary of health and environment and signed by a person licensed to practice medicine and surgery under the laws of any state, or by a person who is registered as a physician's assistant under the laws of this state when such person is working at the direction of or in collaboration with a person licensed to practice medicine and surgery, or by a person holding a certificate of qualification to practice as an advanced registered nurse practitioner under the laws of this state when such person is working at the direction of or in collaboration with a person licensed to practice medicine and surgery. The certification shall include a statement that there is no evidence of physical condition that would conflict with the health, safety, or welfare of the pupils; and that freedom from tuberculosis has been established by chest x-ray or negative tuberculin skin test....



Name: