Stanislaus County Office of Education
Tom Changnon, Superintendent

Child & Family Services

Tony Jordan, Executive Director
1100 H Street • Modesto CA 95354 • (209) 238-1800 • FAX (209) 238-4217

Fax Cover Sheet
Requesting Information from Doctor

DATE: _____ Please fax requested information to:

TO: _____ Attn: _____
(Staff Name)

FAX: _____ Fax #: _____

FROM: _____ Phone #: _____

SUBJECT: _____

Our records show that _____ _____ is in need of:

❒ Physical Exam	❒ HGB/HCT	❒ DTP	❒ TB Assessment
❒ Hep B	❒ Polio	❒ MMR	❒ TB Skin Test Result
❒ Varicella	❒ Hep A	❒ HIB	❒ Lead Blood Level
❒ Urinalysis	❒ Food/Drug Allergy Information		❒ Dental Exam/Treatment

❒ Asthma paperwork (care plan)

❒ Pulmonary paperwork (care plan)

❒ Medical Treatment follow-up records

❒ Blood Pressure

❒ Medications at the center/FCCH

❒ Height and Weight

❒ Vision

❒ Hearing

❒ Other _____

Thank you for your cooperation and immediate response.

_____
Staff Signature

Mandatory
Revised 1/11
CF/H-18