



Date: _____

Dear Parent/Guardian:

The PUSD district Nurses would like to notify you of a change in the requirement of scoliosis screening that affects just middle school students. Normally all 7th grade girls and 8th grade boys receive a screening exam for scoliosis during their PE classes.

Per the State Budget Act of 2010, the funding for scoliosis screening is suspended until further notice. With the suspension of funding, the requirement is also suspended.

That being said, we will not be conducting our routine scoliosis screening for all 7th grade girls and 8th grade boys. Many students who receive physical exams by their medical provider annually (or every two years), would probably have their backs checked for scoliosis at that time. However, if you would like your student to be screened individually by the District Nurse, please fill out the form below and sign your name authorizing the brief exam no later than **Friday, May 13, 2016**. This exam will be done in private. Your District Nurse will notify you of the results.

If you have any questions, please do not hesitate to contact the District Nurses.

Thank you,

The District Nurses

925-462-5500, x4168

To the District Nurses:

I am requesting that my son/daughter has a scoliosis screening exam by the District Nurse this year. I understand I will be notified of the results.

Student's name _____

Grade: _____ **ID:** _____

Parent/Guardian Signature: _____ **Date:** _____

Return to the school Health Office
(This applies to 7th grade girls and 8th grade boys only)
