



April 4, 2019

Dear Parent/Guardian:

The annual scoliosis screening program, conducted by our school physician Dr. Mandel, will be held on April 17, 2019. This procedure is mandated by state law biennially for all school pupils between the ages of 10 and 18. Fifth and seventh grade students will be screened, along with any fourth grade students who have reached 10 years of age.

Scoliosis is defined as a condition in which the spine may curve to the left or to the right. It is most commonly found during these years of rapid growth and may progress if not treated. The purpose of this screening program is to recognize scoliosis in its earliest stages. You will be informed immediately of any suspected problem.

Any pupil may be exempt from this examination if requested in writing by a parent or guardian. **Please complete the form below if you would like your child to be excused from the screening and return it to the nurse by April 12, 2019.**

Children should wear loose fitting shirts. If you have any questions, please call me at 930-5600 ext. 148 between 8:30 a.m. and 3:00 p.m.

In Good Health,

Allison Baker

Allison Baker R.N., B.S.N., NJ-CSN
Dorchester Elementary School Nurse
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Please excuse my child _____ in 4th/5th _____ class
from the Scoliosis screening.

Signature Parent/Guardian: _____ Date: _____