

FORM NO 4

Rule 5

MEDICAL REPORT ON HEALTH OF CHILD

Note –

This form is for a medical report on a child who may be adopted. The report is for the benefit of the adopters and the Court. In order that the adopters may benefit fully from the report, it is important that the certifying doctor should explain to the adopters the nature and extent of any disability or abnormality disclosed by the examination which might affect their decision whether or not to adopt the child.

Child's name Date of birth.....

Sex Weight Height.....

A General condition

Skin

Eyes (including vision)

Ears (including hearing)

Nose and throat

Speech

Cardio-vascular system

Respiratory system

Alimentary system

Genito-urinary system (including examination of urine for albumen, sugar and phenylpyruvic acid)

Skeletal and articular system (including examination for congenital dislocation of hip)

Nervous system (including fits)

Lymphatic system

Any other comments

Is the child physically normal having regard to the child's age ?

B Are there any items in the child's history or examination which suggest that the child may be mentally abnormal having regard to the child's age ?

C Particulars of any illnesses from which the child has suffered.

D If known,

Weight at birth (if child is under one year of age)

Details of birth, including result of mother's serological tests for syphilis

Particulars, with dates, of vaccination or immunization against –

Tuberculosis (state result of Mantoux test or whether child has been successfully vaccinated with B.C.G. vaccine)

Smallpox

Diphtheria

Whooping cough

Poliomyelitis

Tetanus (active)
Any other disease.

E Result of suitable serological test of the child's blood for syphilis taken 6 weeks or later after birth
(please specify test).

F I examined the child on the day of 20, and I have informed the
adopters of the state of health of the child disclosed by the examination.

Signature Date

Qualifications

Address