

Health Services Records

Form No. (If Any)	Class	Record Title	Required			**If Imaged**	
			Hard Copy Retention	Recommended Retention	Reason For Recommended Period	Hard Copy Retention	Media Retention
PM-100	3	Annual Report of Hearing Testing	3 Years	4 Years	Timing/Fiscal Year	--	--
PM-272	1	Annual School District and Private School Report of Screening Examinations and Waivers and Invoices: CHDP	Permanent	Permanent		4 Years	Permanent
PM-160	3	Billing/Screening-CHDP	3 Years	4 Years	Timing/Fiscal Year	--	--
PM-286	1	California School Immunization Record	Permanent	Permanent		4 Years	Permanent
PM-171	3	Certificate of Physical to Enter First Grade	3 Years	4 Years	Timing/Fiscal Year	--	--
	3	Certificate of Waiver to Enter First Grade	3 Years	4 Years	Timing/Fiscal Year	--	--
	(a)	CHDP Appointment and Information	(a)	(a)	Retain until Appointment is made	--	--
	3	Consent for Physical	3 Years	4 Years	Timing/Fiscal Year	--	--
	(a)	Consent to Administer Medication Administered	(a)	5 Years	Retain as long as	--	--
H519	3	Consent to Immunize	3 Years	4 Years	Timing/Fiscal Year	--	--
	(a)	Consent to Transport	(a)	1 Year	Retain During School Year	--	--
	(a)	Dental Referral/Parent Response	(a)	(a)	Most Current	--	--
	(a)	Doctors and Hospital Records	(a)	(a)	Most Current	--	--
	(a)	Health Information/Parent Questionnaire	(a)	(a)	Most Current	--	--
	1	Health Record Card (Student)	Permanent	Permanent	With "Cum" File	4 Years	Permanent
	1	Hearing Referral/Test Results (Fail Tests and Prescriptions)	Permanent	Permanent		4 Years	Permanent
	(a)	Immunization Notification/Requests	(a)	(a)	Most Current	--	--
	1	Immunization Record (Student)	Permanent	Permanent	With "Cum" File	4 Years	Permanent
CD-2206	1	Parents Report - Child's Preadmission Health History	Permanent	Permanent		4 Years	Permanent
	1	Physical Performance Test Report Annual Report	Permanent	Permanent		4 Years	Permanent
CD-2207	1	Physician's Report - Child's Preadmission Health History	Permanent	Permanent		4 Years	Permanent
	(a)	Release of Health Information Authorization	(a)	(a)	Retain Until Information is Received	--	--
	(a)	Restricted Physical Education Activity Guide	(a)	(a)	Most Current	--	--
PM-236	1	School Immunization Survey Annual Report	3	4	--	--	--
	(a)	Scoliosis Referral/Screen Results	(a)	(a)	Most Current	--	--
	3	Student Physical Evaluation	3 Years	4 Years	Timing/Fiscal Year	--	--
	1	Vision Referral/Test Results (Fail Tests and Prescriptions)	(a)	(a)	Until Graduation	4 Years	Permanent

Class 1 -Permanent Records Class 2 -Optional Records Class 3 -Disposable Records -- Feasibility to Microfilm at District Discretion