## Instructions for Using the Newcomer Health Initial Health Screening Physical Exam/Assessment Form

- 1. Place a patient label in the lower right hand corner of the form.
- 2. Date of Exam this should be the date the actual physical exam/assessment occurred.
- 3. Fill in age, BMI, height, weight, blood pressure, pulse, and respiratory rate for all patients. Head circumference should be completed for children less than 2 years of age.
- 4. Place an (X) under the appropriate box, yes if an abnormality is noted and no if an abnormality is not noted, for each body system. Use the comments section to record specific information. If additional space is needed, use a separate progress notes page.
- 5. Print and sign the name and title of the person completing the exam/assessment.
- 6. Place an (X) next to the box for any referrals that are made as a result of the initial health screening.
- 7. Indicate with an (X) whether or not the individual was linked/referred to a primary care provider.