

OTS Medical Monthly Report

Month of _____

Health Call	Triage	Physician	Dentist	Psychiatrist/ Psychologist	TOTAL

# of Physician Exams / Follow-ups:	Current Obstetrical: 0
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# of Psychiatric Evaluations:	# of Psychiatric Follow-ups:

# of Dental Screenings/Work:	# of Hygienist Cleanings/Sealants/X-Rays:

Communicable Diseases:

# of ER Visits	True Emergencies	Off-Campus Referrals

Comments:

Immunizations			Lab Work		
Hepatitis A	MMR		Routine		
Hepatitis B	Meningococcal		Special		
Tetanus	Influenza		Pregnancy tests		
Tdap	TB skin test		Positive STDs		
Varivax	HPV		Positive TB skin tests		

Infirmery/Observation		Isolation		Hospital Stays	
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Fractures		X-Rays		Sutures	
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Admissions	Discharges	# Seen For Medications/ Labs	TOTAL # Seen For Month