

Scoliosis Refusal Form

Saint Bernadette School will be doing an annual Postural Screening on Grades 5 – 8. The purpose of this is to find early signs of possible spinal problems in children. It is not a diagnostic service but a program to identify young people who should have further medical evaluation.

If your child has any unusual findings, you will be notified and asked to take the child to a physician as a precaution. The majority of students exhibit no findings. If nothing unusual is found, we will not be contacting you again until the screening next year.

Female children are asked to wear a sports bra, halter top, or a swimsuit top the day of the screening. These items can be worn under the school gym uniforms. This type of clothing permits more accurate observation of the back.

Please sign the form below if your child has been screened within the year, is being followed by a physician for spinal problems, or if you do not wish your child to participate in the screening.

If you have any questions, please contact the Health Office

(508) 351-2945

My child _____ will not participate in the Postural Screening.

Parent/Guardian Signature _____

Date _____