

WINTON SCHOOL DISTRICT  
Winton Middle School  
6300 Cypress Ave – P.O. BOX 1299  
Winton, CA 95388  
Phone: (209) 357-6189 Fax: (209) 358-5889



**SCOLIOSIS REFERRAL AND REPORT:**

Dear Parent/Guardian of: \_\_\_\_\_ Date: \_\_\_\_\_

A recent screening of scoliosis (curvature of the spine) was conducted at school. Our screening indicated that your child appears to have some deviation from normal. Early diagnosis of this problem usually permits correction and prevents deformity. We suggest that you contact your health care provider. Thank you for your cooperation.  
**PLEASE TAKE THIS FORM WITH YOU AT THE TIME OF YOUR EXAMINATION.**

Winton Middle School Health Office \_\_\_\_\_  
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Dear Physician:

The pupil listed above was advised to seek further medical evaluation because our recent scoliosis screening detected the following. The Scoliosis Research Society has recommended a STANDING AP X-RAY as essential to diagnosis.

REASON FOR RESCREENING (please circle):

Unequal leg length	R/L	Prominent lumbar/flank	R/L
Unequal shoulder height	R/L	Lordosis	[ ]
Prominent scapula	R/L	Kyphosis	[ ]
Prominent thorax when bending over	R/L		(check box)

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Please complete the following and return it to the School's Health Office:

NAME OF STUDENT: \_\_\_\_\_ DOB: \_\_\_\_\_

**DIAGNOSIS:**

\_\_\_\_\_ Within Normal Limits  
\_\_\_\_\_ Kyphosis  
\_\_\_\_\_ Scoliosis:  
\_\_\_\_\_ a. Type of curve (please circle)  
                  Thorax convex R/L  
                  Lumbar convex R/L  
\_\_\_\_\_ b. Etiology-Idiopathic Adolescent Scoliosis  
\_\_\_\_\_ c. Other (use notes to explain): \_\_\_\_\_

**TREATMENT:**

\_\_\_\_\_ No-Treatment                      \_\_\_\_\_ Exercise                      \_\_\_\_\_ Surgery  
\_\_\_\_\_ Brace                                      \_\_\_\_\_ Other                                      \_\_\_\_\_ Follow up x-ray at regular interval

PRINT PHYSICIAN'S NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ FAX: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ DATE: \_\_\_\_\_

PLEASE RETURN TO: Winton Middle School ATTN: Health Office PO BOX 1299 Winton, CA 95388