

**Englische Übersetzung des Formulars „Mitteilung an die Eltern und an die Jugendlichen über die obligatorischen schulärztlichen Untersuchungen“ / Ausgabe 2021**

## **Notice to Parents and Adolescents Concerning Compulsory Medical Examinations by the School Doctor**

Dear parents and adolescents,

By law, the municipalities of the Canton of Berne are obliged to have school children examined by doctors at the School Medical Service. The examinations are aimed at monitoring the state of health of children attending public or private kindergartens and schools during the compulsory school years.

Examinations will be carried out in the first semester of the second year of kindergarten (or, if a child does not attend the second year of kindergarten, in the first semester of the first primary school year), in the fourth year of primary school and in the second semester of the second year at secondary school level I. On the back of this notice, you will find information about the examinations' content and scope. Additional examinations will be provided for children joining the school at a later stage who have not undergone any previous examinations.

These school medical examinations are compulsory. They may be carried out either by the school doctor, free of charge, or by your family doctor, at your expense. Your family doctor will have to confirm, in writing, that an examination has taken place (see overleaf), if need be by means of the scheduled examination appointment. This confirmation will have to be submitted to the school doctor **one week prior to the school medical examination. If no such statement has been presented by the day of the medical examination, the school doctor will proceed with the compulsory check-up.**

The school medical examinations include a check on vaccinations. The school doctor can administer the necessary vaccinations with your written permission. Otherwise you are recommended to have them administered by your family doctor.

Should the school medical examination reveal a health problem, the school doctor will inform you accordingly and request you to contact your family doctor for further examinations or treatment. The School Medical Service is not responsible for providing further examinations or treatment.

The school doctor will be happy to advise you on all questions regarding any health problems your child may have in connection with school.

Vorgesehener Termin der schulärztlichen Untersuchung durch die Schulärztin/den Schularzt/Scheduled date of the school medical examination by the school doctor:

\_\_\_\_\_

Die Schulärztin/der Schularzt:  
The school doctor

**This form has to be distributed by the primary school teacher at least one month prior to the scheduled examination date.**

**Please turn over!**



**Scope and content of the compulsory school medical examinations pursuant to the Decree dated 8 June 1994 on the School Medical Service**

- 2<sup>nd</sup> year of kindergarten
- Review of the medical history by means of a questionnaire or an interview with the parents;
  - Review of vaccinations administered to date, possibly recommendation or administration of additional vaccinations;
  - Hearing and eyesight test (an audiometry is prescribed);
  - Assessment of impairments relevant to school attendance; particularly regarding motor ability, language skills and development;
  - Height and weight measurement.
- 4<sup>th</sup> year of primary school
- Review of the medical history by means of a questionnaire or an interview with the parents;
  - Review of vaccinations administered to date, possibly recommendation or administration of additional vaccinations;
  - Hearing and eyesight test (an audiometry is prescribed);
  - Examination of the musculoskeletal system, especially with regard to scoliosis, pelvic obliquity and posture;
  - Height and weight measurement.
- 2<sup>nd</sup> year of secondary school level I
- Interview with the adolescent about health questions and health care behaviour based on a questionnaire completed by the adolescents;
  - Review of vaccinations administered to date, possibly recommendation or administration of additional vaccinations;
  - Hearing and eyesight test (an audiometry is prescribed);
  - Blood pressure measurement to monitor hypertension;
  - Height and weight measurement.

At the request and with the permission of the parents or the adolescent, the school doctor can carry out further physical examinations at each school medical examination or advise in the event of problems.

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**Bestätigung der Hausärztin/des Hausarztes über die schulärztliche Untersuchung, die wie oben beschrieben durchzuführen ist: \*Family doctor's confirmation regarding the school medical examination to be carried out as described above:\***

Hiermit bestätige ich, dass ich die obligatorische schulärztliche Untersuchung gemäss Verordnung vom 8. Juni 1994 über den schulärztlichen Dienst bei / I hereby confirm that

Name/Family name: \_\_\_\_\_ Vorname/First name: \_\_\_\_\_

Geburtsdatum/Date of birth: \_\_\_\_\_ Klasse/Class: \_\_\_\_\_ Schulhaus/School: \_\_\_\_\_

Name/Vorname der Eltern/Family name(s) and first names of parents: \_\_\_\_\_

Adresse/Address: \_\_\_\_\_

durchgeführt habe oder/has undergone or

am durchführen werde/will undergo on (date): \_\_\_\_\_

the compulsory school medical examination, pursuant to the Decree dated 8 June 1994 on the School Medical Service.

Ort und Datum/Place and date: \_\_\_\_\_

Stempel und Unterschrift der Hausärztin/des Hausarztes:  
Family doctor's stamp and signature

**\*This certificate must be submitted to the school doctor a week prior to the school medical examination.**