



Capitol Region Education Council

Health Services

474 School Street
East Hartford, CT 06108
(860) 289-8131
Fax (860) 289-8380
<http://www.crec.org/>

DATE

Dear Parent/Guardian,

This is to inform you about the additional services that are now being offered at the _____ Health Center. Joining the school nurse on a part time basis will be nurse practitioners and physicians providing care supplementing the traditional school nurse health services.

The following are some services that are being offered in the Health Center:

- Physical Examinations – mandated school and sport physicals
- Diagnosis and treatment of acute illnesses, i.e.: strep throat, ear infection, asthma, acne
- Co-management with the Primary Care Physician of chronic conditions i.e.: asthma, diabetes, allergies
- Health Education (Promotion/Prevention) Individual and group i.e.: nutrition/weight management, acne, asthma/allergies
- Health Screening
- Counseling – Crisis intervention and psychosocial problems

Attached is an Insurance Information Form (for billing receipt purposes), an health history form, and an acknowledgement of notice of privacy practices, that must be filled out and signed prior to any services. There are no co-payments and we will not seek payment from you if the claim we submit is denied.

Please read all forms carefully and sign in all 4 noted areas:

1. Insurance Form
2. History Form
3. Acknowledgement of notice of privacy practices

If you have any questions please call your school's health center.