Appendix A to Rule 5101:2-12-08

Medical Statement Requirements for Administrator, Employees, and Child Care Staff Members in a Licensed Child Care Center

The following items are to be contained in a medical statement:

- The date of the examination (must be within the previous twelve months).
- The signature, business address, telephone number of the licensed physician, as defined in Chapter 4731. of the Revised Code, physician's assistant, advanced practice registered nurse, certified nurse midwife or certified nurse practitioner who completed the examination.
- A statement that verifies that the individual is:
 - o Physically fit for employment in a center caring for children.
 - o Immunized against measles, mumps and rubella (MMR), except that for persons born on or before December 31, 1956, a history of measles or mumps disease may be substituted for the vaccine. A history of rubella disease shall not be substituted for rubella vaccine. Only a laboratory test demonstrating detectable rubella antibodies shall be accepted in lieu of rubella vaccine.
 - Immunized against tetanus, diphtheria-and pertussis (Tdap) from a licensed physician as defined in Chapter 4731. of the Revised Code, physician's assistant, advanced practice registered nurse, certified nurse midwife, certified nurse practitioner or licensed pharmacist.
 - The person may be exempt from the immunization requirement for religious reasons with written documentation signed by the individual, and for medical reasons with written documentation signed by a licensed physician.
 - Screened for TB as outlined in rule 5101:2-12-08 of the Administrative Code, including the following information:
 - Has the individual resided in a country identified by the world health organization (WHO) as having a high burden of TB?
 - Has the individual arrived in the United States within the five years immediately preceding the date of application for employment?
 - If the answer to both questions above are yes, the individual is to be tested for TB.
 - If tested for TB, the medical statement is to include the TB test date and TB test results as positive or negative.
- An additional report or examination by a licensed physician or mental health professional may be required when there is concern about an employee's ability to perform required duties.