



Form #4400
Certificate of Scoliosis Screening

Scoliosis Screening is required for students in two grade levels determined by each school district.
This form must be completed in its entirety and returned to the child’s school.
This form is for use by providers when screening, not for mass screening events provided at school.

Student name: _____
First Middle Last

Date of Birth: ___/___/___ Gender: Male___ Female___ Grade: _____

Student Address: _____
Street City

_____ Zip code County State

Name of School: _____

Parent/Guardian Contact information:

Name: _____

Phone number: _____

Email: _____@_____

Scoliosis Screening (Adams Forward Bend Test) Results:

Negative screen: _____
Needs further evaluation: _____
Referred to provider: _____

Screener’s Comments: _____

Screening completed by:

Physician Practice: _____ County Health Department: _____
Licensed School Nurse: _____

Screener Information:

Name: _____ Office Address: _____
Signature: _____ Date: ___/___/___

Parent/Guardian – Complete This Portion Only if Student Will Not Be Screened

Opt-out

____ I do not want my student to be screened for scoliosis at this time.

____ The student listed above is currently under professional care for scoliosis.

Parent/Guardian’s Signature: _____ Date: ___/___/___

Georgia Department of Public Health

Form #4400

Certificate of Scoliosis Screening

What is scoliosis?

Scoliosis is an abnormal curvature of the spine. If detected early in a child's life, it may be possible to treat the condition and prevent it from becoming more serious.

Who is required to file this Form #4400?

The parent or guardian of a student entering the grade levels which are determined by each school district shall furnish to school authority a properly executed DPH Form #4400, Certificate of Scoliosis screening. The grade level which this is needed is determined by each school district. It will take place twice between 5th and 10th grade.

These time periods were chosen because these are the years when rapid growth occurs, and scoliosis is most likely to become observable.

What is the purpose of Form #4400?

Form #4400 is intended to ensure every child in Georgia public schools is screened for spinal deformities. The best place for this screening to take place is in the student's medical home. The earlier these problems are detected the earlier parents/guardians can seek professional help for their student.

What screenings are required?

The "Adams Forward Bend Test" is required, and the results must be documented on the Form #4400 before it is filed with the school. The Adams Forward Bend test is a simple painless observation of the child's back as he or she stands and bends over.

What provider can conduct the screenings?

The screening can be conducted by a physician with an active GA license or a PA, NP, RN, LPN or other staff working under the supervision of a physician with an active GA license, nurses at the local health department, and licensed school nurses.

What should a parent do if the "Needs further evaluation" box is checked?

If the "Needs further evaluation" box is checked, then the parent/guardian should take the student to a medical provider for a more detailed evaluation. Your physician or local health department may be able to help or recommend someone who can help.

What if a Form #4400 was previously filed for the child at another school?

Form #4400 should become part of the student's permanent record. If a student transfers schools, the school where the form was filed is required to forward Form #4400 to the new school.

What happens if Form #4400 is not completed for students in the two grade levels designated by the school district?

Students without Form #4400 on file will be screened by school staff during a mass scoliosis screening event during the school year. The grade level in which this screening is performed is determined by each school district. It will take place twice between 5th and 10th grade.