

NAME:

ROXBURY TOWNSHIP PUBLIC SCHOOLS – STREP PERMISSION FORM

Dear Parent or Guardian,

Rheumatic Fever is one of the most important causes of heart disease in children and adolescents. It is a preventable disease. Strep infections of the throat can cause attacks of Rheumatic Fever. However, to prevent this disease, we must first find the strep germs which are commonly found in the nose and throat. A throat culture is the only reliable way to diagnose a strep infection.

Your child can have a throat culture without charge in the school nurse's office, if he or she shows signs of a nose or throat infection.

To help protect your child's heart, please sign the following permission form. This form will remain in effect as long as the student is enrolled in the Roxbury Township School System.

The school nurse has my permission to obtain a throat culture on my child.

Student's Name

____/____/____

Birth Date

Parent/Guardian Signature

____/____/____

Date

