## **Physical Education Modification**

The School Nurse assists the physical education teacher with the program modifications for the student who is restricted in physical education activities due to health problems. Recommendations from the student's licensed healthcare provider should be obtained in writing and based on the activities in which the student can participate.

Temporary excuses for up to three consecutive days of modification in physical education classes for minor illness and injury may be issued by the school nurse.

## **Temporary Medical Excuse for Physical Education Modification**

School District	School Name
	Grade
	Date
(School st	aff member and title)
Nature of disease or injury	
	n
Will re-examination be necess	ary? Date
Student is able to do the follo	wing activities:
No physical activity	Moderate Calisthenics
Non-vigorous phys	ical activity Moderate running
Vigorous physical	activity
Exercises such as _	
Daginning	(data) this student would benefit from eversions such as
Deginning	(date), this student would benefit from exercises such as
which may be taken during ph	ysical education class.
Date	Name of Physician (M.D. or D.O., N.P. or School Nurse)
Date	Name of Filysician (M.D. of D.O., N.F. of School Nuise)
	Address