

No.		Value	UOM	Interface
1	School Region	TEXT		
2	School Name	TEXT		
3	Grade	Number Value		
4	Student Number	Number Value		
5	Student EID	Number Value		ADT
6	Register Date	Date		
7	DOB	Date		ADT
8	Age At Visit	Number Value		ADT
9	Gender	Female/Male		ADT
10	Nationality	TEXT		ADT
11	General consent available / signed	Multiple chose Yes / No		
12	Height	Number value	cm	ORU-VITALS
13	Waist Measurement	Number Value	cm	ORU-VITALS
14	Did the student have breakfast this morning	Yes/ NO		
15	Weight	Number Value	Kg	ORU-VITALS
16	BMI	Number Value		ORU-VITALS
17	Z score	Number Value	kg/m ²	
18	Z Score Interpretation	Multiple choices		

	<p>according to the age</p> <p>BMI for ages 2 to less than 5 years old Z-score (SD)</p> <table border="1"> <thead> <tr> <th>Z score range</th><th>Interpretation</th></tr> </thead> <tbody> <tr> <td>-2 to +1</td><td>Normal Weight</td></tr> <tr> <td>Above +1 to +2</td><td>Overweight</td></tr> <tr> <td>Above +3</td><td>Obese</td></tr> <tr> <td>Below -2 to -3</td><td>Wasted</td></tr> <tr> <td>Below -2 to -3</td><td>Severely Wasted</td></tr> </tbody> </table> <p>BMI for ages 5 to 19 years old Z-score (SD)</p> <table border="1"> <thead> <tr> <th>Z score range</th><th>Interpretation</th></tr> </thead> <tbody> <tr> <td>-2 to +1</td><td>Normal Weight</td></tr> <tr> <td>Above +1 to +2</td><td>Overweight</td></tr> <tr> <td>Above +2 to +3</td><td>Obese</td></tr> <tr> <td>Above +3</td><td>Severely Obesity</td></tr> <tr> <td>Below -2 to -3</td><td>Thinness</td></tr> <tr> <td>below -3</td><td>Severely Thinness</td></tr> </tbody> </table> <p>BMI for 19 years and above Z-score (SD)</p>	Z score range	Interpretation	-2 to +1	Normal Weight	Above +1 to +2	Overweight	Above +3	Obese	Below -2 to -3	Wasted	Below -2 to -3	Severely Wasted	Z score range	Interpretation	-2 to +1	Normal Weight	Above +1 to +2	Overweight	Above +2 to +3	Obese	Above +3	Severely Obesity	Below -2 to -3	Thinness	below -3	Severely Thinness	
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		BMI range	Interpretation		
		18.5 – 24.9	Normal Weight		
		25 – 29.9	Overweight		
		30 and above	Obese		
		Below 18.5	Underweight		
19	Systolic BP	Number Value or percentile as per age , gender, height score			ORU-VITALS
20	Diastolic BP	Number Value or percentile as per age , gender, height score			ORU-VITALS
21	Results Interpretation	Normal/Abnormal			
22	Color blindness	Normal/Abnormal			ORU-DIAGNOSTICS
23	Vision Testing Performed	Yes / No	If no Reason required		
24	Corrective Lenses	Multiple chose <ul style="list-style-type: none"> • None • Glasses • Contact lenses • Surgical correction • Other 	If other selected Reason is required		ORU-DIAGNOSTICS
25	Right eye	Multiple choices <ul style="list-style-type: none"> • 6/3 • 6/3.8 • 6/4.8 • 6/6 			ORU-DIAGNOSTICS

		<ul style="list-style-type: none"> • 6/7.5 • 6/9.5 • 6/12 • 6/15 • 6/19 • 6/24 • 6/30 • 6/38 • 6/48 • 6/60 								
26	Left eye	Same above list		ORU-DIAGNOSTICS						
27	Right eye with Corrective lenses	Same above list		ORU-DIAGNOSTICS						
28	Left eye with Corrective lenses	Same above list		ORU-DIAGNOSTICS						
29	vision screening results	<p>Normal or abnormal</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 30%;">Age Group</th> <th style="text-align: left;">Abnormal Result</th> </tr> </thead> <tbody> <tr> <td style="background-color: #e0f2ff;">3-5 years</td> <td>Abnormal 6/15 or worse one or more test line differences between the eyes.</td> </tr> <tr> <td style="background-color: #e0f2ff;">For 6 years and above</td> <td>Abnormal 6/12 or worse</td> </tr> </tbody> </table>	Age Group	Abnormal Result	3-5 years	Abnormal 6/15 or worse one or more test line differences between the eyes.	For 6 years and above	Abnormal 6/12 or worse		
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For 6 years and above	Abnormal 6/12 or worse									

		one or more test line differences between the eyes.		
30	Referral	YES/NO		
31	Referral to	TEXT	If applicable	
32	Chronic disease	TEXT		PPR