Grade	:			

School	Year:	

Student Health Information

Please print

Print Child's Last/First Name	MI	Birth date			
Phone Number	Parent/Guardian siç	gnature Date			
Does your child have					
Frequent colds	Nose bleeds	Frequent_stomach aches			
Frequent headaches	Frequent cough	Frequent constipation			
Frequent use of toilet	Frequent earaches				
Has your child been diag	nosed/treated for				
Arthritis/RA	Asthma	Anemia			
Diabetes	Epilepsy/Seizures	Eczema			
ADHD	Depression/Anxiety	Hearing Loss			
Heart Condition	Migraine Headaches	High Blood Pressure			
Seasonal Allergies/Sinus	Headaches	Orthopedic Condition			
Known medical/food allerg If yes , does your child have					
When was your child's last	physical exam?				
Does your child now wear or has ever worn prescription glasses?					
Date of last eye exam perfe	ormed by an optometrist_				

Are there any other medical issues the school should be made aware of?	
List prescription medications your child currently takes	
Please notify Health Aide of any medications taken during school hours. Non-prescription (over the counter medications) are available through the Health Office. These are medications given for minor ailments (headaches, cramps, cuts and scrape stomachaches, coughs) that occur while your child is in school. Non-prescription medications will not be given for more than three consecutive days without an order from the student's physician. We do not dispense medications to take home. If your child is sick, or has a fever 101.0 or higher, PLEASE DO NOT SEND YOUR CHILD TO SCHOOL. Keep your child home or take them to the hospital for medical treatment. Same Day appointments may be available at Sells Hospital. If your child is seen and evaluated by a doctor or nurse practitioner, please ask for a "medical excuse" for the school office. Unless you feel your child is too sick to learn, a child with a cough or runny nose may come to school. In order to give your child any type of medication, parental permission is required. The common types of medications available in the health office are listed below. Please circle Y or N if you give permission for the Health Aide to give the medication as needed.	s,
Children's acetaminophen (Tylenol) for minor aches and pains	N
Children's ibuprofen (Motrin) for minor aches and pains	N
Antibiotic cream or Hydrocortisone Cream for minor skin injuries/IrritationsY	N
Pepto-Bismol for upset stomach	N
Call before giving any over the counter (OTC) medication	N

IN A MEDICAL EMERGENCY, 911 WILL BE CALLED AND PARENTS NOTIFIED