

Emergency Record
Independent School District 882
Pinewood Elementary
Phone: 763-272-2400
Fax: 763-272-2409

Office Use Only:
Student ID:
Family ID:

Student Name: _____ **Home Phone:** () _____
Grade: _____ **Date of Birth:** _____ **Gender:** _____
Home Address: _____
City: _____ **State:** _____ **Zip Code:** _____

Mailing Address (if different from above) _____

Please use area code and identify phone number types: W=Work C= Cell P=Pager E=Evening

Parent or Guardian 1: _____ **Relationship to Student:** _____ **Child Lives With** _____
Phone 1: _____ () _____ **Phone 2:** _____ () _____ **Phone 3:** _____ () _____
E-mail: _____ **Step-parent:** _____
Address if (if different than above) _____

Parent or Guardian 2: _____ **Relationship to Student:** _____ **Child Lives With:** _____
Phone 1: _____ () _____ **Phone 2:** _____ () _____ **Phone 3:** _____ () _____
E-mail: _____ **Step-parent:** _____
Address if different than above _____

Immunizations within the last year: (Type and mo/day/yr) _____

Chronic condition(s): _____

Medications: _____

IN CASE OF AN EMERGENCY (Two contacts that would take care of this child in case a parent or guardian cannot be reached)

Contact 1: _____ **Relationship to Student:** _____
Phone 1: _____ () _____ **Phone 2:** _____ () _____ **Phone 3:** _____ () _____

Contact 2: _____ **Relationship to Student:** _____
Phone 1: _____ () _____ **Phone 2:** _____ () _____ **Phone 3:** _____ () _____

Day Care Provider: _____ **Phone 1:** _____ () _____

Address of Day Care Provider: _____

KI Consent: ___ Yes ___ No: I consent to have the school nurse or his/her designee administer Potassium Iodide (KI) to my child.

Our procedure will be to contact the parent at home or at work. You will be asked to pick up the child and provide proper care. If we cannot reach you we will call the friend, relative, or neighbor that you have listed above and ask them to care for your child. In extreme emergency, an ambulance will be called and your child will be taken to the nearest hospital. The cost of this will be covered by the parent.

Parent or Guardian Signature: _____ **Date:** _____

Please take a few minutes to review the information on the backside of this sheet. **The sheet combines the emergency information and the KI Parent/Guardian Consent Form.** By combining both forms, all emergency information is found on one sheet for your student. The form does need to be returned to the school even if there are no changes made for this school year. Thank you for your cooperation. If you have any questions, please call. Additional comments below:

Health Card/Emergency Information

Up-to-date contact information is important in the case of an emergency; we all hope that we never need to use this information. Please review the information that has been entered for you. If there are changes, please cross off and print the new information on the sheet. If you are new to the school, please fill in the blanks the best that you can. Please **return the form** to your child's teacher.

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Potassium Iodide

Parent/Guardian Informed Consent Form

Reason for Taking Potassium Iodide

In the case of an accident at a nuclear power plant or what is known as a radiological emergency, radioactive iodine will be released into the air. This material may be inhaled or ingested and enter the thyroid gland where it can cause cancer and/or disease. Children and infants are the most vulnerable to this occurrence. When taken by pill or liquid, potassium iodide (KI) floods the thyroid with non-radioactive iodine and prevents the thyroid from absorbing the radioactive material. Potassium iodide needs to be given before or shortly after exposure to radiation. Potassium iodide works only to prevent the thyroid from absorbing radioactive iodine.

Potential Side Effects of Potassium Iodide

It is possible to experience any or all of the following side effects when taking Potassium Iodide:

- Upset stomach
- Rash
- Allergic reaction

Risks of Taking Potassium Iodide

Taking Potassium Iodide is safe for most people. Potassium Iodide **should not be taken** if someone:

- Is allergic to iodine
- Has Graves Disease
- Has any other thyroid illness
- Takes thyroid medication

Administration of Potassium Iodide

Potassium Iodide will only be given:

- In case of a radiological emergency
- Directed by MN State Public Health Officials
- If a parent/guardian signs a consent form for a child

If you have any questions, please call the school nurse at the following number:

Pinewood Elementary: 763-272-2421 Little Mountain Elementary & Eastview Elementary: 763-272-2620

Middle School: 763-272-2121 High School: 763-272-3020

Please return this form as soon as possible to the school office. Thanks for your help.