THEOLOGY & ANTHROPOLOGY IMMERSION COURSES

MEDICAL HISTORY FORM*

2011-12

NAME								SS#		
La	ast			First						
ADDRESSS	treet				Ci	ty			State	Zip
DATE OF BIRTH	Мо	/ Day		CLASS (circle)		•	JR	SR		•
FAMILY HISTOR	Y (SIBI	LINGS,	PARI	ENTS, GRANDPA	REN'	Γ)				
HEART DISEAS DIABETES ASTHMA HIGH BLOOD F		RE		_ STROKE _ KIDNEY DISEASE _ EPILEPSY	E			CANCER THYROID D ALLERGIES		
CHRONIC MEDICA	L CONI	DITION		heck all that apply: of onset						
ASTHMA DIABETES SEIZURES HEART DISEAS HIGH BLOOD F CANCER KIDNEY DISEA DEPRESSION MIGRAINES HEMOPHELIA	PRESSUI	RE								
SURGERY (Date):										
SERIOUS INJURIES:										
MEDICATIONS & CU	JRRENT	DOSA	AGE:							
The above named stud restrictions. List restri	ent had a ctions be	comple low:	te phys	sical examination on				_ and'	"does"	_ "does not" have any

*Note: Completed medical form, signed by personal physician or college physician <u>must be submitted 30 days prior to Immersion trip.</u>

IMMUNIZATION RECORD

TO BE COMPLETED AND SIGNED BY YOUR HEALTH CARE PROVIDER

NAME	
A.	M.M.R. (Measles, Mumps, Rubella)
	Dose 1 given at 12-15 months of age or later mo/yr/
	Dose 2 given at age 4-6 or later mo/yr/
B.	Polio
	1. Completed primary series of polio immunizations: Yes No date of last booster/
	2. Type of vaccine: Oral (OPV) Injected (IPV) IPV/OPV Sequential
C.	Varisella (Chickenpox)
	1. History of Disease Yes No Vaccinated/
D.	Tetnus-Diptheria
	1. Tetnus-Diptheria booster must be within the last 10 yearsmo/yr/
E.	Hepatitis B 1. Immunized with 3 injection series (mo/yr):
	Injection #1/ Injection #2/ Injection #3/
	2. Hepatitis B surface antigen antibody/ Reactive Nonreactive
F.	Tuberculosis (PPD required regardless of prior BCG inoculation 2 step required for nursing and physical therapy majors;
	annual only for all other majors)
	1. PPD (Mantoux) within the past 12 mo. (tine or momovac not acceptable)
	Step 1: Date given//_ Date read//_ Result Neg Posmm induration Day 1 Day 3
	Step 2: Date given// Date read// Result Neg Posmm induration Day 15
	Annual: Date given/ Date read/ Result Neg Poss mm induration
	2. If greater that 5mm induration, chest x-ray required. X-ray result: Normal Abnormal mo/yr/
	Meningococcal (one dosepreferably at entry into college for freshmen living in dormitories or residence halls who reduce their risk of meningococcal disease. Any undergraduate less than 25 years who wishes to reduce their risk of can consider the vaccine) mo/yr/
Н.	Influenza (Annual immunization recommended to avoid disruption to academic activities.) mo/vr /

Health Care Provider:	
Name	Address
Signature	Phone ()