

Student Name (print first) \_\_\_\_\_ (print last) \_\_\_\_\_ DOB \_\_\_\_\_ Grade \_\_\_\_ M  F

Your student’s health history is important to provide the best care at school. It is the responsibility of the parent /guardian to notify the school of new or existing health concerns. If your student is prescribed medication or requires a treatment at school, it is the responsibility of the parent or guardian to notify the school and provide the medication or necessary equipment for use at school.

\*Release of Information: The disclosure of health information within the school is limited to information necessary to serve the student’s health and education interests. Your voluntary agreement gives permission for the nurse to inform school staff of precautions and procedures necessary to protect your child at school and foster academic success.

I Agree  I Disagree Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**My student has the following (NEW or EXISTING) medical condition(s). Additional listing provided on BACK PAGE. (Check all that apply)**

- HEAD
 Brain Injury
 Concussion (loss of consciousness)
 Concussion (no loss of consciousness)
 Epilepsy
 Migraines (diagnosed)
 Seizure
EYES
 Astigmatism
 Color Blindness Genetic
 Glasses/Contacts
 Myopia (nearsighted)
 Nystagmus (involuntary eye movements)
 Vision Loss/both
 Vision Loss/one eye
EAR/NOSE/THROAT/ MOUTH/NECK
 Acute Suppurative OM
 Hearing Aid
 Hearing Loss/Condition
 OtitisM(acute/chro)NonDraining
 Perforated Tympanic Membrane (hole in eardrum)
 Speech Problems
 Swallowing Problem
 Tracheostomy
HEART/LUNGS/BRAIN
 Arrhythmia
 Asthma, Asthmatic
 Cystic Fibrosis
 Heart Murmur
 Hypertension
 Rheumatic Fever
 Stroke
ABDOMEN/INTESTINAL/ URINARY
 Colostomy
 Constipation
 Crohn’s Disease
 Encopresis (bowel incontinence)
 Enuresis (urinary incontinence)
 Gastroesophageal reflux
 Gastrostomy (GT)
BONE/MUSCLE/JOINT
 Muscular Dystrophy
 Osteopenia
 Osteoporosis
 Rheumatoid Arthritis/Juvenile
 Scoliosis
ENDOCRINE/BLOOD
 Clotting Defect
 Diabetes/Insulin Dependent
 Diabetes/Type II
 Hemophilia
 Neoplasm (cancer)
 Sickle Cell
SKIN
 Dermatitis/Chronic
 Eczema
 Psoriasis
 Urticaria, Cold/Heat
ALLERGIES
 Allergy, Airborne
 Allergy, Animals
 Allergy, Drug
 Allergy, Food/eaten
 Allergy, Food/skin
 Allergy, Latex
 Anaphylactic Shock
 Anaphylactic/foods
 Anaphylactic/nuts
 Anaphylactic/peanuts
 Anaphylactic/stings
 Lactose Intolerance
EMOTIONAL/BEHAVIORAL/ PSYCHOLOGICAL
 ADD
 ADHD
 Anxiety
 Asperger’s
 Autism
 Bipolar
 Developmental Delay
 Depression
 Eating Disorder
 Mood Disorder
 Obsessive Compulsive
 Oppositional Defiant Disorder
 Post Traumatic Stress
 Psychiatric Disorder
 Schizophrenia
CHROMOSOME/GENETIC
 Down Syndrome
OTHER
 Fetal Alcohol Syndrome

If a medical condition(s) is not listed ABOVE or on the BACK PAGE, check this box AND follow up with your School Nurse:

Other Diagnosis not listed
(If this box is checked, you must follow up with School Nurse regarding the student’s medical condition(s).)

If your student DOES NOT have any (new or existing) known allergies or medical condition(s), check this box:

My Child has NO (new or existing) health concerns.
(If this box is checked, you agree to communicate with the School Nurse regarding new health concerns during the school year.)

**My child will require the following medication types given during the school day (Check all that apply)**

\*Homeopathic & herbal remedies cannot be given at school. \*
 Long-Term Prescribed Medication
The Long-Term form must be completed by the parent/guardian AND healthcare provider: MD/DO/ANP/PA & medication delivered in a properly labeled pharmacy container.

Short-Term Prescribed Medication
The Short-Term form must be completed by parent/guardian & medication delivered in a properly labeled pharmacy container.

OTC/Over the Counter Medication
To have an Over-The-Counter medication at school, a parent must complete a separate form and provide medication in the original container.

**My child will require the following medication(s) at school (Check all that apply)**

- Epi-pen (Parent or Guardian MUST provide epi-pen)
 Antihistamine (Benadryl)
 Inhaler

**My child will require the following plan or other treatment at school (Check all that apply)**

- Student Allergy/Anaphylaxis Action Plan
 Asthma Action Plan
 Diabetes Care Plan
 Diabetes Care Plan with pump
 Seizure Action Plan
 Other treatment in school

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USE THIS SIDE IF YOUR CHILD HAS A MEDICAL CONDITION(S) NOT LISTED ON FRONT PAGE  
(CHECK ALL THAT APPLY)

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**Head**

- Alopecia (hair loss)
- Disfigurement/Head
- Encephalitis (Brain inflammation)
- Epilepsy/Clonic/Tonic
- Epilepsy/Jacksonian
- Epilepsy/Petit mal
- Febrile Seizure
- Hydrocephalus
- Meninges Tumor/Benign
- Shunt

**Eyes**

- Amblyopia (lazy eyes)
- Artificial Globe
- Color Blindness Congenital
- Congenital Cataracts
- Duane's Retraction (eye movement disorder)
- Esophoria (eyes turn inwards)
- Exophoria (eyes turn outwards)
- Glaucoma, congenital
- Hypermetropia (longsighted)
- Intraocular lenses
- Ptosis (drooping eyelid)
- Retinitis Pigmentosa (damaged retina)
- Retinoblastoma
- Retinoschisis, Juvenile
- Stargardt's Disease (early macular degeneration)

**Ear/Nose/Mouth/Throat/Neck**

- Bell's palsy (facial paralysis)
- Cervical Joint Disease
- Cleft Palate
- Epistaxis (nosebleed)
- Hearing/Condition
- Sensorineural
- Meniere's Syndrome (inner ear disorder)
- Microtia (small outer ear)
- Pain, neck
- Polyp, larynx
- Respirator dependent
- Trach/Obstruction
- Trach/Stoma Problem
- Tracheomalacia
- Vertigo (dizziness)

**Heart/Lungs/Brain**

- Aortic Stenosis
- Atrial Septal Defect
- Breathing Exercises
- Breathing, Bronchial
- Bruit
- Congestive Heart Failure
- Cardiac Valve Disease
- Cardiomyopathy
- Hemiparesis
- Kawasaki Disease

- Mitral Valve Prolapse
- Pacemaker, Cardiac
- Paroxysmal Tachy (AV)
- Patent Ductus Arteriosus
- Pulmonary Hypertension
- Pulmonary Stenosis
- Pulmonary Tuberculosis
- Suctioning/aspirator
- Tachycardia
- Tuberculosis Miliary
- Transposition Great Vessels
- Vasovagal Syncope
- Ventricular Septal Defect
- Ventricular Tachycardia
- Wolff-Parkinson-White Syndrome

**Abdomen/Genito-Urinary**

- Bladder Extrophy
- Celiac Disease
- Chronic Renal Failure
- Colitis
- Cystic Disease Medulla
- Dialysis, Renal
- Duodenal Spasm
- Dysmenorrhea
- Dyspepsia (impaired digestion)
- Esophageal Reflux
- Esophagus stricture
- Gastroschisis
- GT/Stoma Malfunction
- Hepatitis
- Hepatitis B Carrier
- Hepatitis C Carrier
- Hiatal Hernia
- Hirschsprung's Disease
- Ileostomy
- Irritable Bowel Syndrome
- Jejunostomy
- Kidney Removed
- Kidney Transplant
- Nephritis
- Nephrotic Syndrome
- Neurogenic Bladder
- Polycystic Kidney
- Short Bowel Syndrome
- Suprapubic Catheter
- Transplant, Liver
- Ulcer, Gastric
- Ulcer, Peptic
- Wilms' Tumor

**Bone/Muscle/Joint**

- Amputation below knee
- Arthritis, Chronic
- Arthrogryposis
- Cerebral Palsy
- Chronic Fatigue Syndrome
- Fibrodysplasia Ossificans

- Fibromyalgia
- Legg-Calve'-Perthes
- Myasthenia Gravis
- Osteochondritis Dissecans
- Osgood-Schlatter
- Osteogenesis Imperfecta
- Osteosclerosis
- Paralysis, Paralytic
- Paraplegia
- Rhabdomyosarcoma
- Spinal Muscular Atrophy
- Tic

**Endocrine, Blood**

- Abnormal glucose
- Anemia
- Diabetes Insipidus
- Diabetes/Diabetic
- Diamond-Blackfan Anemia
- Diseases of Blood
- Galactosemia
- Graves' Disease
- Growth Hormone Deficiency
- Hodgkin's Disease
- Hyperthyroidism
- Hypoglycemia
- Hypopituitarism
- Hypothyroidism
- Leukemia, lymphoblastic
- Lymphoma (malignant)
- Precocious Puberty
- Raynaud Syndrome
- Spherocytosis
- Thalassemia
- Thrombocytopenia
- Vasculitis
- Vascular device/implant
- Von-Willebrand Disease

**Skin**

- Acne
- Albino
- Dermatitis/Cold
- Dermatitis/Diaper
- Dermatitis/Impetigo
- Dermatitis/Metals
- Dermatitis/Seborrhea
- Dermatitis/Simplex
- Dermatitis/Zoster
- Henoch Schonlein Syndrome
- Lichen Sclerosis
- Pseudoxanthoma/Keratosis
- Scleroderma
- Staph Infection Unspecified
- Varicella
- Warts

**Allergies**

- Allergy, Other
- Allergy/grass

- Allergy/insect
- Emotional/Behavioral/ Psychological**
- Anorexia
- Bulimia
- Dysthymia
- Emot/Beh/Mental Health
- Manic/Depressive
- Narcolepsy
- Obesity
- Pica
- Retardation & Development
- Trichotillomania

**Chromosome/Genetic**

- Arnold-Chiari Malformation
- Cornelia de Lange Syndrome
- DiGeorge Syndrome
- Fragile X Syndrome
- Kartagener's Syndrome
- Klinefelter's Syndrome
- Klippel-Feil Syndrome
- Marfan's Syndrome
- Mobius Syndrome
- Nager S/Macrocephaly
- Neurofibromatosis
- Phenylketonuria/PKU
- Prader-Willi Syndrome
- Sensory disorders
- Soto's Syndrome
- Spina bifida
- Trisomy 13
- Trisomy 18
- Turner's Syndrome
- Waardenburg's Syndrome

**Other**

- Budd-Chiari Syndrome
- Cytomegalic Inclusion Disease
- Drainage Device
- Dwarf/Achondroplasia
- Dyslexia
- Dyspraxia
- Erb's palsy
- Hemorrhoids
- HIV Disease
- Hypogammaglobulinemia
- Immunodeficiency
- Lupus
- Motor problems/head
- Motor problems/limbs
- Other vein problem
- Spastic Hemiplegia
- Stone's Syndrome
- Tourette Syndrome
- Wheelchair