STUDENT HEALTHCARE INFORMATION 2012-2013

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Student's Family Name | Given Name | Parent Name(s) | Address | Home Phone | Date of Birth |
|  |  |  |  |  |  |

Does the student have any medical condition or other HealthCare concern?

## YES NO

|  |  |
| --- | --- |
|  |  |

If yes give details below

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you aware of any medical/healthcare emergency that could arise?

## YES NO

|  |  |
| --- | --- |
|  |  |

If yes give details below

|  |  |
| --- | --- |
| **Type of emergency and how to recognise it** |  |
| **Avoidance precautions** |  |
| **Emergency treatment** |  |

Does the Student take any prescribed medication, including inhalers?

## YES NO

|  |  |
| --- | --- |
|  |  |

 If yes give details below.

|  |  |  |  |
| --- | --- | --- | --- |
| **Medication** | Dose | **When & How Taken** | **Side Effects?** |
|  |  |  |  |

Is the student immunised against tetanus? (If in doubt, ask your Doctor)

## YES NO

|  |  |
| --- | --- |
|  |  |

Date of last Tetanus booster \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Medicare Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If the student is covered by a private health/medical and/or ambulance fund, give details below.

|  |  |  |  |
| --- | --- | --- | --- |
| Health Fund | **Benefit Table** | Membership No. | **Ambulance Fund No.** |
|  |  |  |  |

## Emergency contact numbers for after school hours:

|  |  |  |
| --- | --- | --- |
|  | **Printed Name** | **Contact Phone Number** |
| **Contact Person 1** |  |  |
| **Contact Person 2** |  |  |

## Is your child able to swim 100 metres? YES NO

**Parent/Caregiver Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_**