



IONA COLLEGE

STUDENT HEALTH INFORMATION RECORD 2021

To assist with keeping your son's medical information correct for 2021, please complete and return this form in the prepaid envelope provided by Friday 6 November 2020. **PLEASE SIGN THIS FORM OVERLEAF.**

STUDENT DETAILS: (please use a **separate** form for each son)

Surname Date of Birth.....

First Name..... Second Name (s).....

Year Level in **2021**..... Medicare No.....

Medicare No on card (eg 1, 2, 3 ...) Exp date:

Please indicate below (using a tick) if your son suffers from any of the following conditions:

Asthma		Malaria	
Diabetes		Surgery	
Epilepsy		Physical Disabilities	
Allergies or Anaphylaxis		Behavioural (ACHD, OCD, ADD, ADHD, ASD etc)	*Specify
Migraine		Psychological condition or special emotional needs	
Blood Disorder		Ear, nose and throat conditions (e.g. nose bleeds, recurrent tonsillitis, hearing difficulties)	*Specify
Hereditary Condition (s)		Eye conditions (colour blindness, needs corrective glasses etc)	*Specify
Cardiac Condition		Any other health issue eg: Past Head Injury/Concussion	

IF YOUR SON HAS A CONDITION WHICH IS POTENTIALLY LIFE THREATENING, AN EMERGENCY PLAN IS REQUIRED.

I have provided an emergency / care plan to the school (ASCIA plan is preferred for anaphylaxis). Yes No

The College practices the Asthma Foundation of Australia's First Aid Plan in unexpected asthma flare-ups, unless an alternative plan is provided.

If unsure, please contact the school nurses for assistance on 3893 8865 or mobile 0499 989 158

Email: allnurses@iona.qld.edu.au

PLEASE SPECIFY THE NATURE OF, AND ANY SPECIFIC REQUESTS IN RELATION TO, ANY CONDITIONS:

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MEDICATIONS AT SCHOOL

Paracetamol, Ibuprofen, Antihistamines & Antacids are available at school for administration by the College Nurses (weight appropriate dose). Please indicate your authorisation by marking yes or no (please indicate for **ALL FOUR MEDICATIONS**).

Authorisation	Yes	No
Paracetamol (Panadol, Panamax)		
Ibuprofen (Nurofen, Advil)		
Antihistamines		
Antacids		

OTHER MEDICATION FOR ADMINISTRATION AT SCHOOL AS SUPPLIED BY PARENT/GUARDIAN

These must be in a pharmacist labeled container.

1) Name of medication..... Dose..... Route.....
 Frequency..... Special Considerations.....

2) Name of medication..... Dose..... Route.....
 Frequency..... Special Considerations.....

3) Name of medication..... Dose..... Route.....
 Frequency..... Special Considerations.....

PLEASE NOTE

- Medication cannot be given without written permission from a parent /guardian.
- All medication (s) required at school *excluding asthma puffers and Epipens*, must be administered from the school Health & Wellness Centre. Exceptions to this rule, are as by arrangement with the College.
- It is your son's responsibility to present to the College Nurses for medication administration.
- Supply of student medication is the responsibility of the parent/guardian.
- It is the responsibility of the parent/guardian to inform the College should their son have a potentially life threatening condition.
- It is recommended that any special medical requirements be discussed with the College Nurses.**

PARENT/GUARDIAN SIGNATURE.....DATE.....

PARENT/GUARDIAN NAMEDATE

Please note: VACCINATIONS

The Brisbane City Council offers vaccinations on the College premises, **however**, records of these remain with the Council. The College cannot provide information on your son's vaccination status.

Please return this form in the prepaid envelope provided to the College by Friday 6 November 2020.