

# Landsborough State School

## Student Medical Details UPDATE ADVICE

### EMERGENCY CONTACT DETAILS (Other emergency contact details if parents/carers listed previously are not emergency contacts or cannot be contacted)\*

	Emergency contact	Emergency contact
Name		
Relationship (e.g. aunt)		
1 <sup>st</sup> phone contact number*	Work/home/mobile	Work/home/mobile
2 <sup>nd</sup> phone contact number*	Work/home/mobile	Work/home/mobile
3 <sup>rd</sup> phone contact number*	Work/home/mobile	Work/home/mobile

### STUDENT MEDICAL INFORMATION (including allergies)\*

#### Privacy Statement

The Department of Education, Training and Employment (DETE) is collecting this medical information in order to address the medical needs of students during school hours as well as during school excursions, school camps, sports and other school activities. DETE will not use this information to make a decision about a student's eligibility for enrolment. The information will only be used by authorised employees of the department and DETE will only record, use and disclose the medical information in accordance with the confidentiality provisions at Section 426 of the Education (General Provisions) Act 2006.

It is essential that you advise the school before your child's first day of attendance if he or she has any medical conditions. You must also inform the school administration staff as soon as you are aware of any new medical conditions or a change to medical conditions.

Should your child need to take medication during school hours, an Individual Health Plan, including Emergency Health Plan if relevant, or Authority to Administer Medication Form will need to be completed each year and retained at the office.

My child does not have any known medical conditions	<input type="checkbox"/>		
Medical condition (including allergies/sensitivities), symptoms and management (please refer to the list of Medical Condition categories provided)			
Medical condition (including allergies/sensitivities), symptoms and management (please refer to the list of Medical Condition categories provided)			
Medical condition (including allergies/sensitivities), symptoms and management (please refer to the list of Medical Condition categories provided)			
Does the student require any medical aids or devices (such as glasses, contact lenses, prosthetics or orthotics)? This is for the purpose of informing planning for school activities such as sport and school excursions)	<input type="checkbox"/> No <input type="checkbox"/> Yes, please specify <hr/> <hr/>		
Name of student's medical practitioner (optional)	Contact number of medical practitioner		
Do you authorise school staff to contact the student's medical practitioner for the purposes of seeking advice in cases where an immediate but non-life threatening response is required (for instance, when the student may be on an excursion or sporting event)? (answer only if medical practitioner details have been provided above)		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Medicare card number (optional)	Position Number		
Cardholder name (if not in name of student)			
Private health insurance company name (if covered) (optional)	Private health insurance membership number (leave blank if company name is not provided)		

Parent/Carer Signature:

Date:

OFFICE USE

UPDATED      Date:

Staff Signature:

V1 2015 REVIEW T32016

### State Schools Standardised Medical Condition Category List

Acquired brain injury
Allergies/Sensitivities
Anaphylaxis
Airway/lung/breathing - Oxygen required (continuously/periodically)
Airway/lung/breathing - Suctioning
Airway/lung/breathing - Tracheostomy
Airway/lung/breathing - Other
Artificial feeding - Gastrostomy device (tube or button)
Artificial feeding - Nasogastric tube
Artificial feeding - Jejunostomy tube
Artificial feeding - Other
Asthma
Attention-deficit /Hyperactivity disorder (ADHD)
Autism Spectrum Disorder (ASD)
Bladder and bowel - Urinary wetting, incontinence
Bladder and bowel - Faecal soiling, constipation, incontinence
Bladder and bowel - Catheterisation (continuous, clean intermittent)
Bladder and bowel - Stoma site, urostomy, Mitrofanoff, MACE, Chair
Bladder and bowel - Other
Blood disorders - Haemophilia
Blood disorders - Thalassaemia
Blood disorders - Other
Cancer/oncology
Coeliac disease
Cystic Fibrosis
Diabetes - type one
Diabetes - type two
Ear/hearing disorders - Otitis Media (middle ear infection)
Ear/hearing disorders - Hearing loss
Ear/hearing disorders - Other
Epilepsy - Seizure
Eye/vision disorders
Endocrine disorder - Adrenal hypoplasia, pituitary, thyroid
Heart/cardiac conditions - Heart valve disorders
Heart/cardiac conditions - Heart genetic malformations
Heart/cardiac conditions - other
Mental Health - Depression
Mental Health - Anxiety
Mental Health - Oppositional defiant disorder
Mental Health - Other
Muscle/bone/musculoskeletal disorders - spasticity (Baclofen Pump)
Muscle/bone/musculoskeletal disorders - Other
Skin Disorders - eczema
Skin Disorders - psoriasis
Swallowing/dysphagia - requiring modified foods
Swallowing/dysphagia - requiring artificial feeding
Transfer & positioning difficulties
Travel/motion sickness
Other

**Parent/Carer Signature:**

**Date:**

**OFFICE USE**

UPDATED Date:

Staff Signature:

V1 2015 REVIEW T32016