



## HEALTH AND MEDICATION UPDATE 2017-2018

Please use this form to update the school of any changes to your child's health; including but not limited to significant injuries, surgery, illness, allergies and any changes in your child's medications.

Students with serious medical conditions may also need the **Anaphylaxis Plan** and/or **Medical Alert Plan**, as appropriate. If your child needs to have medications administered at school, please also fill out the **Administration of Medication** form.

Please submit the completed form to the First Aid/Medical Team Leader: Valerie Neduha, [vneduha@fraseracademy.ca](mailto:vneduha@fraseracademy.ca).

Student Name

Grade

Date of Birth (YY/MM/DD)

Please list the details of your child's injury, medical condition, or change of medication:

Name of Parent/Guardian

Date (YY/MM/DD)

Signature of Parent/Guardian