



## PUPIL MEDICAL CARD

Pupils name

Date of Birth

Address

Parent/Carers Name

Doctor Name/Surgery

Doctor Telephone Number

This card is for you to record any medical conditions that may affect a pupil during school hours. Please give as much detail as possible to help us care for the student as best we can. These records will be updated annually. Please ensure all paperwork has been completed for any medications sent into school. For those pupils with greater medical needs a medical healthcare plan will be completed to go along with this form.

**Does the pupil suffer from Asthma?**

Yes

No

Reliever Treatment when needed:

Inhaler	Mild Asthma Attack dosage	Severe Asthma dosage
<b>Pupil carries own inhaler</b>	<b>School will be given a spare.</b>	
Yes/No	Yes / No	

The School holds a central reliever inhaler and spacer. I give my permission for the above pupil to use this.

Parent/Carer Signature:

Date:



School completed a medical care plan with Parent/Carer

Dated

**Does the Pupil suffer from Allergies requiring medical attention eg Peanut?**

Allergies	Signs and Symptoms	Epipen Required/ Dosage	Other Treatment Dosage

Pupil carries own Epipen	School will be given a spare.	Pupil carries own spare.
Yes/No	Yes/No	Yes/No

The school holds an emergency Epipen. I give permission for the above pupil to use it.

Parent/Carer Signature:

Date:
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School completed a medical care plan with Parent/Carer

Dated

Does the pupil suffer from Diabetes?

Yes

No

Diabetes Type

Signs and Symptoms	Pupil carries Adrenaline	Other Meds	Information given from hospital nurse



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Information regarding treatment for Hypo/Hyper:

School completed a medical care plan with Parent/Carer

Dated

**Does the Pupil suffer from Epilepsy?**

Yes

No

Signs and Symptoms	Any Triggers	Treatment

Details of any medications/treatment required by the school if applicable:

School completed a medical care plan with Parent/Carer

Dated

Details of any other medical ailments the pupil suffers with. Please include details of the signs and symptoms, medications and treatment that the school may need to provide.

Is a medical care plan required?

Yes

No

School completed a medical care plan with Parent/Carer

Dated

**Medical Pass**

Should the pupil require a medical pass during school, medical evidence from within the last 6 months will need to be supplied to the school along with this form. Please note any passes that were issued before 2<sup>nd</sup> November 2020 will not be valid from this date.

Pass required

	Pass Required	Reason
Toilet		
Footwear		
Lift		

Parent/Carer Signature: .....

Date: .....

Staff First Aider: .....

Date: .....

Date to be reviewed.....