

OUR LADY OF FATIMA PRIMARY SCHOOL

HEALTH / MEDICINE RECORD 2012/13

Child's NameClass

Medical Condition(s)

.....

Name of Medicine(s)
(If applicable)

.....

.....

When taken

Any other instructions

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Please note: we only administer medicines (including inhalers) that are prescribed by a doctor. This requires a parent to complete a consent form (available from the school office). Children must not be given medicines to bring to school. Parents must bring / collect prescribed medicines to the main office.

It is the parents' responsibility to ensure medicines, including inhalers, are up-to-date.

If your child's medical condition (and medication) changes, please update this record. Further copies of this form are available from the main office.

School should be made aware of food allergies and other foods that children cannot eat due to religious observance:

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Signed (parent)

Date