COMMISSION SCOLAIRE CENTRAL QUÉBEC
CENTRAL QUÉBEC SCHOOL BOARD

2046, Chemin St-Louis
Québec, QC G1T 1P4

# STUDENT MEDICAL HISTORY

| 1. Student's Surname (Family name) : | 2. Student's First Name (Given name) : |
|---|---|
| | |

| 3. Previous surgery, injury and/or serious illness? *(Please specify)* |
|---|
| Date: |

| 4. Fractures sustained? *(Please specify)* |
|---|
| Dates: |

| 5. Allergies? *(Please specify)* | | | |
|---|---|---|---|
| | | | |
| | | | |

| 6. Regular medication taken? | 7. Do you use an inhaler? | 8. Do you wear glasses / Contact lenses? |
|---|---|---|
| Over the counter ❑ | Yes ❑ No ❑ | Yes ❑ No ❑ |
| Prescription ❑ | | |

| 9. Do you require regular injections? *(If yes, please describe)* |
|---|
| |
| |

| 10. Any family illness that we should be aware of? *(Please specify)* |
|---|
| |
| |

**11. Are you taking any medication at this time?** *(If yes, please describe)*

**12. Do you have an eating disorder?** *(If yes, please explain)*

**13. Are you under treatment for any medical or emotional conditions?** *(If yes, please explain)*

**14. Have you ever had any of the following?** *(Please check all that apply)*

| | | | |
|---|---|---|---|
| a. | Allergies to drugs ❑ | n. | Measles ❑ |
| b. | Food allergies ❑ | o. | Menstrual cycle problems ❑ |
| c. | Pet allergies ❑ | p. | Mumps ❑ |
| d. | Anorexia or bulimia ❑ | q. | Poliomyelitis ❑ |
| e. | Appendicitis ❑ | r. | Pneumonia ❑ |
| f. | Asthma ❑ | s. | Rheumatic fever ❑ |
| g. | Chicken pox ❑ | t. | Scarlet fever ❑ |
| h. | Cough (persistent, recurring) ❑ | u. | Seizure disorder ❑ |
| i. | Diabetes ❑ | v. | Tonsillitis ❑ |
| j. | German Measles ❑ | w. | Tuberculosis ❑ |
| k. | Migraines ❑ | x. | Typhoid fever ❑ |
| l. | Hepatitis ❑ | y. | Vertigo, dizziness ❑ |
| m. | Malaria ❑ | z. | Ulcers ❑ |
| | | | Others *(Please specify)* |

**15. Please list all vaccinations:**

**This medical information is being collected so that appropriate health care plans may be developed, if necessary.**
**This information will be kept strictly confidential and will only be shared with appropriate individual if necessary.**