

## MEDICAL AND HEALTH REQUIREMENTS FOR ALL STUDENTS 2016-2017

### PLEASE REVIEW CAREFULLY

The health, safety, and well-being of our students are of the utmost importance to YUHSG. The NYC Department of Health and Mental Hygiene-Department of Education and the NYS Department of Education have established guidelines to promote all students' well-being. The Medical and Health Requirements are detailed in the documents/forms linked below. The SPECIAL REQUIREMENTS FOR INTERSCHOLASTIC ATHLETIC PARTICIPATION can be [found here](#). Please read them in their entirety and submit the appropriate forms on or before Orientation Day, Tuesday, September 6, 2016. **All forms are accessible by clicking on the links below.**

Name of Document/Form:	Submitted by:	Completed/signed by:	Notes:
<a href="#">Child and Adolescent Health Examination Form</a>	All incoming 9 <sup>th</sup> graders, rising 10 <sup>th</sup> graders, and new transfers into all grades	<b>Healthcare Provider</b> (including HCP stamp)	Acceptable for 12 months from the date of the examination
<a href="#">NYC Immunization and Medical Requirements</a>	Immunizations are required for all students	Informational only. If you have any questions, please follow this link: <a href="#">NYS Meningococcal Vaccine Requirement -FAQs</a>	Beginning <b>Sept.1, 2016</b> , 12 <sup>th</sup> grade students <b>must have</b> proof of having 2 doses of <b>meningococcal vaccine</b> with the booster dose given on or after age 16 or one 1 dose if your child's first dose was given on or after age 16
Student Health History/ Emergency Contact Form (to be completed online)	All students annually	<b>Parent/Guardian</b>	You will receive a personalized email from the school on or about by July 1, 2016; the completed form must be submitted no later than August 15, 2016

### MEDICATION ADMINISTRATION FORMS

Name of Document/Form:	Submitted by:	Completed and signed by:	Notes:
<a href="#">Allergy/Anaphylaxis Medication Administration Form (MAF)</a>	Any student with allergies which require an epi-pen or antihistamine	<b>Healthcare Provider</b> (including HCP stamp); <b>Parent/Guardian</b> (signature only)	<b>Please Note:</b> all students with medical conditions (or history) that require them to carry epi-pens, inhalers, diabetic medications, or other emergency "as needed" medication should bring in extra pharmacy-labeled medication to be stored in the office, in addition to what they carry personally
<a href="#">Asthma MAF</a>	Any student required to carry medication for Asthma including inhalers	<b>Healthcare Provider</b> (including HCP stamp); <b>Parent/Guardian</b> (signature only)	
<a href="#">Diabetes MAF</a>	Any student required to carry medication for Diabetes	<b>Healthcare Provider</b> (including HCP stamp); <b>Parent/Guardian</b> (signature only)	
<a href="#">Non-Asthma/Non-Allergy MAF</a>	Any student required to carry medication for non-Asthma and Non-Allergy related illnesses	<b>Healthcare Provider</b> (including HCP stamp); <b>Parent/Guardian</b> (signature only)	
<a href="#">Self Medication/OTC Release Form</a>	Any student needing to self-medicate ANY type of medication during school hours and activities	<b>Healthcare Provider</b> (including HCP stamp); <b>Parent/Guardian</b> (signature only)	

*Please be advised:* The school will NOT provide any medication to students (including over-the-counter medication, such as ibuprofen and acetaminophen) unless the student has properly completed and submitted a MAF Form or a Self-Medication Release/OTC Form (above) and has provided the school office with the medication in the original labeled container with their name affixed to it. **Please note that YUHSG does not have a school nurse.**