

CENTRAL COLLEGE CHRISTIAN ACADEMY
975 South Sunbury Road
Westerville, OH 43081
614-794-8146

MEDICAL UPDATE

2008-2009

Please share with us any new medical conditions, medications, allergies, or immunizations that your child has been diagnosed with, received, or is currently being treated with since last school year. Feel free to include any health concerns that you have for your child. This information will help us stay current with your child's health. Please return this form to school at your earliest convenience. (If there are no new changes, this form does not have to be returned.)

**For Kindergarten students: Over the summer many of your children will have received their "kindergarten boosters" which include: the second MMR, 5th DPT, and 4th Polio. Please make sure I have these new immunization dates for your child, as by the 15th day of school all children must have proof of these immunizations according to State of Ohio law.

My child _____ has:

New medical condition: _____

New Allergies: _____

New Medication: _____

Recent Immunization: 2nd MMR _____, 5th DPT _____, 4th Polio _____, Other _____

Concerns I have regarding my child's health include: _____

Thank you,
Amy Taylor, RN

Parent Signature _____ Date _____