

Dauntsey's – Medical Declaration Form

Please complete and return this form to:

The Medical Centre, Dauntsey's School, West Lavington, Devizes, Wiltshire, SN10 4HE

E-mail: medicalcentre@dauntseys.wilts.sch.uk

Pupil Information	
Surname:	First names:
Date of birth:	NHS no:
Religion:	
Country and place of birth:	

Home Address: <i>(If both parents do not live at the same address please give both addresses)</i>	
1)	2)
Parent's phone no (home / landline):	Parent's phone no (home / landline):
Parent's phone no (mobile):	Parent's phone no (mobile):
E-mail:	E-mail:
Pupil's mobile (boarders only):	

Guardian <i>(boarders only)</i>	
Name:	
Address:	Phone no (home / landline):
	Phone no (mobile):
	E-mail:

Previous School

Name of school:

Address of school:

Pupil's Doctor

Name of child's doctor:

Phone no:

Address:

If your child is NOT a British resident

Has your child previously been resident in the UK?

YES / NO

Date of arrival:

Date of leaving:

Has your child previously been registered with a UK doctor?

YES / NO

Name and address:

General information

Has your child ever had any illness or significant injury?

YES / NO

If yes, please give details:

Has your child consulted a Doctor in the last 12 months for any kind of health problem? YES / NO

If yes, please give details:

General information Cont'd

Has your child ever been treated in a hospital? YES / NO

If yes, please give reasons and dates:

Is your child currently having any medical treatment or investigation? YES / NO

If yes, please give details:

Is your child taking any medication at present? YES / NO

If yes, please give details:

Is your child allergic to any medication: YES / NO

Please give details:

How many days' absence from school through illness or treatment has your child had in the last 12 months?

Please give reasons for any absence:

Is your child registered as disabled? YES / NO

If yes, please give details of the disability:

Does your child have any hearing problems? YES / NO

If yes, please give details:

Has your child ever suffered from any mental/emotional illness, psychological or psychiatric problem, including depression, anxiety, obsessive-compulsive disorder, self-harm or eating issues?

YES / NO

If yes, please give details:

Has your child ever had any previous counselling or therapy?

YES / NO

If yes, please give details:

Immunisations - Has your child received any of the following vaccinations?

	Date		Date		Date
Last Diphtheria		Last Tetanus		Last Polio	
MMR 1		Yellow Fever		Mengivac	
MMR 2		BCG		Typhoid	
Men. C		Hepatitis A		Covid 1	
HPV 1		Hepatitis B		Covid 2	
HPV 2		Men. ACWY		Covid 3	
Rabies		Encephalitis - Japanese		Tickborne Encephalitis	
Pertussis (whooping cough)					

Does your child suffer from any of the following?

If yes, please give details below:

Asthma	YES / NO	Bone or joint problems	YES / NO
Eczema	YES / NO	Hearing problems	YES / NO
Hay Fever	YES / NO	Migraines	YES / NO
Frequent sore throats	YES / NO	Anxiety problems	YES / NO
Eating disorders	YES / NO	Self Harm	YES / NO
Long covid	YES / NO		

Does your child have any known allergies?

YES / NO

If yes, please give details:

Does your child have any dietary requirements?

YES / NO

If yes, please give details:

Eyesight (*boarders only*)

Are glasses/contact lenses worn?

YES / NO

Date of last eye test:

Colour vision test:

Would you like your child to be registered with an optician in Devizes and appointments made through the school?*

YES / NO

Dental Care (*boarders only*)

If you do not wish your child to continue with your family Dentist, we can register him/her with a practice in Devizes.*

I would like to have my child registered with an NHS dental practice in Devizes

YES / NO

**Dental and Optical appointments: for boarding pupils we ask that routine dental, orthodontic and optical care appointments are arranged during school holidays. Emergency appointments will be arranged by the Medical Centre.*

I agree to my child being registered with the school doctor (*boarders only*)

The School surgery is: Lansdowne Surgery, Waiblingen Way, Devizes
SN10 2BU. Phone: 01380 722278

YES / NO

I agree that I will notify the school if there are any changes in my child's medical conditions.
In the event of an emergency, I agree to the school to act in loco parentis for any emergency procedure deemed necessary by the Consulting Physician.

Child's name:	
Parent's name:	
Signed:	Date:

MEDICAL DECLARATION CONFIRMATION

I confirm that within the Application Form and this document I have disclosed all known medical issues and I am willing for this declaration to be shared with the medical staff at Dauntsey's prior to my child's admission. I accept where a failure to disclose medical conditions results in additional medical care having to be provided by the school, I will be liable for the costs incurred. I understand that failure to disclose individual circumstances requested in this form could result in the withdrawal of a place.

Signature of parent:	
Please also print name:	
Date of signing:	

EMERGENCY OPERATIONS OR IMMEDIATE TREATMENT

In the event of such cases the school will contact parents/guardians immediately to obtain permission for an anesthetic/operation to be carried out. If the parents/ guardians cannot be reached, the danger of waiting can be overcome if the school has the parents' agreement and consent in advance to give permission in their place.

I **do** / **do not** give my permission

Signature of parent:	
Please also print name:	
Date of signing:	

MEDICATION IN SCHOOL

Day pupils requiring medication during the school day should bring their medication into school and hand it to the school nurses. Please label clearly with name, date of birth and administration instructions. In the event of your child requiring medication during the school day, we will require your consent.

Boarding pupils will be able to receive medication if required from suitably qualified members of staff under the instruction of the school nurses or school doctor. Boarders must not bring any medication into Dauntsey's unless accompanied by a doctor's prescription and shown to the school nurses on arrival.

Pupils are expected to hand in all medications (including homeopathic remedies) to the school nurse / Housemaster/ Housemistress upon arrival to the boarding house. Pupils are not allowed to keep medication in the boarding houses unless it has been individually agreed with the Senior Nurse.

I **do / do not** give my permission for my child to be given medication in school or on a school trip as required.

Signature of parent:

Please also print name:

Date of signing:

FURTHER INFORMATION

It is the parents' responsibility to keep the school informed of any changes in the content of this medical details form in order that we update your child's school record. If you would like to speak to the Senior Nurse on any matter, please contact the Medical Centre. Children under 16 are not automatically presumed to be legally competent to make decisions about their health care but will be competent to give valid consent to a particular intervention if they have "sufficient understanding" and intelligence to enable them to understand fully what is proposed.

CONFIDENTIALITY

In accordance with the school doctor's and / or school nurse's professional obligations, medical information about pupils, regardless of their age, will remain confidential. However, in providing medical and nursing care for a pupil, it is recognized that on occasions the doctor or nurse may liaise with the Head, members of the Safeguarding Team or academic staff, boarding staff and parents or guardians, and that information, ideally with the pupil's prior consent, will be passed on as necessary. With all medical and nursing matters, the doctor and nurses will respect a pupil's confidence except on the very rare occasions when, having failed to persuade that pupil, or his or her authorised representative, to give consent to divulgence, the doctor and nurses considers that it is in the pupil's better interests or necessary for the protection of the wider school community, to breach confidence and pass information to a relevant person or body.