

4/11/2014

SELF DISCLOSURE MEDICAL/DISABILITY DISCUSSION PAGE GRADUATE AND PROFESSIONAL INTERNATIONAL PROGRAMS

The purpose of this form is to help you determine if you will need any medical or other assistance while you are travelling internationally. You should look this over and then meet with the program coordinator or clinical coordinator to discuss any issues that you feel are important. If you have a serious condition, take medication or have a serious allergy, please place a description with your passport or wear a medical identification bracelet. Do not turn this form into the coordinator. It is for discussion only.

- 1. Are you currently being treated for any physical or psychological/emotional problems?
- 2. Are you concerned that a problem may become more serious while you are in another country?
- 3. Are you currently taking any medications, or do you receive any treatments on a regular basis?
- 4. Do you have any allergies? If yes, are they serious enough that you carry epinephrine?
- 5. Do you have any dietary restrictions that you will need to let people at your housing situation know about?
- 6. Do you have any medical conditions that may require treatment overseas (diabetes, asthma) If yes, will you be taking this medication with you?
- 7. Do you have needs that must be accommodated on site because of a physical or learning disability or other condition?

Action Plan:	To be	healthy o	on this t	rip I wil	l need to	do the	following	ng things	before I	leave:

1.			
2.			
3.			

4.