

ST. VINCENT'S SPECIAL NEEDS SERVICES - STUDENT INFORMATION
PHYSICIAN CONTACT - RELEASE OF INFORMATION

Student's Name: _____ Date of Birth: _____

PEDIATRIC SERVICES: The *Medical Advisor, a Developmental Pediatrician*, conducts annual chart reviews, consultations and assists medical and instructional staff to better understand and respond to students' health related needs. In addition, the Medical Advisor is available to meet with you if you would like her input concerning your child. Please call the Medical Department if you would like an appointment to meet with her.

Parents/Guardians will receive a copy of all reports. If at any time you would like a copy of specific report sent to someone **other than your child's Primary Care Physician**, please contact the Education Office at 203-386-2742.

Please provide us with the names of your child's physicians:

PRIMARY CARE PHYSICIAN : (Our school policy requires that all students have a physical examination by their Primary Care Physician **every two years**.)

PCP Name:	Phone #:
Address:	

Neurologist's Name:	Phone #:
Address:	

Orthopedist's Name:	Phone #:
Address:	

Ophthalmologist's Name:	Phone #:
Address:	

Pulmonologist's Name:	Phone #:
Address:	

Dentist's Name:	Phone #:
Address:	

GI:	Phone #:
Address:	

Other:	Phone #:
Address:	

Permission is given to the SVSNS to share reports and request and/or share information for treatment purposes with the above physicians: yes no ***Active until consent is withdrawn or enrollment ends.**

Signature of Parent/Guardian

Date