

Part 2: SAC GENERAL HEALTH QUESTIONS

General Health History:

- Check "Yes" or "NO" for each statement.

	Yes	No		Yes	No
1. Ever been hospitalized?			11. Had fainting or dizziness?		
2. Ever had surgery?			12. Passed out/Had chest pain during exercise?		
3. Have recurrent/chronic illnesses?			13. Had mononucleosis in past 12 mos?		
4. Had a recent infectious disease?			14. If female, had problems with periods/menstruation?		
5. Had a recent injury?			15. Have problems with falling asleep/sleepwalking?		
6. Has asthma/wheezing/shortness of breath?			16. Ever had back joint problems?		
7. Have diabetes?			17. Have a history of bedwetting?		
8. Had seizures?			18. Have problems with diarrhea/constipation?		
9. Had headaches			19. Have any skin problems?		
10. Wear glasses, contacts or protective eyewear?			20. Traveled outside the country in last 9 mos?		

Please explain any "yes" items note the question number and include date of occurrences: _____

MENTAL, EMOTIONAL AND SOCIAL HEALTH

Check yes or no for each statement:

Yes No

Ever been treated for attention deficit disorder (ADD) or attention deficit hyperactivity disorder (ADHD)?		
Ever been treated for emotional, behavioral difficulties or an eating disorder?		
During the last 12 months seen a professional to address mental/emotional health concerns?		
Had a significant life event that continues to affect the camper's life?		

Please explain the "yes" answers below noting the number of the question.

MEDICATIONS

- This camper will not take any medications while attending camp.
- This camper will take the following medications while at camp:

Medication is any substance a person takes to maintain and or improve his/her health. This includes vitamins and natural remedies.

MEDICATION	Date Started	Reason for taking it	When it is given	Dosage	How it is given

