

UNIVERSITY OF DETROIT JESUIT

HIGH SCHOOL AND ACADEMY

Medical Health Form Addendum

Wedical Health Form Addendam			
	Name:		
	Grade in 2021-2022:		
	To questions answered yes:		
	1.	Is your son <u>currently</u> experiencing the symptoms you have indicated?	
	2.	Is the condition checked currently an active medical problem for your son?	
	If so, is he receiving some form of treatment-whether with or without medication. Please describe.		
	acserik		
	3.	When was the last time your son used an inhaler or asthma medication?	
	4. any foi	If your son has any food or environmental allergy, has it ever resulted in anaphylaxis or m of hospitalization?	
	-	our son have any medical issues not mentioned on the MHSAA Health form such as a bleeding er, kidney disorder, or condition requiring regular visits with a doctor?	
		ou for your help in making University of Detroit Jesuit High School a safer environment for your	
	son.		