

**Office of the School Nurse**

TO: Department Head/Grade Level Chairpersons

**FROM:**

**SUBJECT:** CONFIDENTIAL HEALTH PROBLEMS

The attached list is a **CONFIDENTIAL LIST** of students with chronic health problems. The purpose of preparing this list is NOT to make you worry excessively about a student, but to alert you to the fact that the student could have a potential problem in your class. In other words, if the student looks ill and/or request a pass to see me, please allow them to go to the Health Office without undue delay.

Since students with problems are often very sensitive about being "different", it is usually better NOT to ask the student about his/her problem in the classroom setting. If you would like additional information about the student or what to do in case of emergency, **please see me before asking the student further questions.**

This list is not a complete list of students with health problems. Students with minor problems have been omitted. If there is anyone not on this list you would like to discuss with me, please contact me. Please circulate this list in your department/grade level. Each teacher may copy information about students that she/he has in class or in an activity. Teachers should then file the information. Remember that this is **CONFIDENTIAL INFORMATION.**

Each teacher in the department/grade level should sign below indicating that they have reviewed the list. After everyone has signed the list the department head/grade level chairperson will return the list to:

School Nurse: \_\_\_\_\_

Health Office

\_\_\_\_\_  
Signature of department/grade level members and date

***Please note: This form is not recommended as a teacher notification method if a computer program is available to create confidential lists for teachers on an individual basis.***

