

# **Health and Medical Information**

Students participating on a Union study abroad program must receive a complete physical examination before departure. It is your responsibility to be prepared to manage your health, both physical and mental, while away.

It is also your responsibility to make the determination, in consultation with your health care provider(s), regarding the medical suitability of your proposed study abroad.

Please read the following information carefully. Then complete the Student Health Information Form and review it with your physician during your required physical examination. Your physician will complete the Physician's Statement Form, which should be based upon an examination made within six months of the expected overseas program participation. All information provided will remain confidential.

## **Medications**

You must be aware of any prohibitions regarding medications in your host country. You are responsible for making appropriate adjustments to your medications, if necessary.

Be informed of the availability of medications in your host country and make sure you have an adequate supply, bringing necessary medications and prescriptions with you.

It is difficult to send medications abroad; it would be best if you could obtain an adequate supply in advance for your entire stay.

It is recommended you bring with you a letter from your health care provider explaining your prescriptions, the need for medications and other pertinent related information.

The following State Department link will be helpful: http://travel.state.gov/travel/tips/tips 1232.html#medications

#### **Disabilities**

You should be aware that the learning and other accommodations you may be accustomed to at Union are not likely to be available in your host country.

Know the availability of these accommodations before applying for a study abroad program by consulting the International Programs web site.

Please also consult the web site to make yourself aware of any programmatic requirements that might be impacted by your disability.

Should you be accepted to a program, you must make a request for accommodation letters from the Office of Student Support Services at least one month before your departure and before you leave for the summer if you are going abroad in the fall. The director can discuss suitability of the accommodations/program requirements with you.

It will be your responsibility to inform your program director abroad and provide him/her with any necessary documentation.

If you believe you are entitled to accommodations and have not yet provided the Office of Student Services with the necessary documentation, do so immediately.

# **Mental Health**

You should be aware that you are not likely to have access in your host country to mental health services in the manner you may be accustomed to at Union College.

It is your responsibility to learn what services are available in programs you are pursuing.

Due to cultural adjustments and other changes inherent in studying abroad, if you are currently receiving mental health counseling, you should make an appointment at the Union College Counseling Center to discuss the advisability of your proposed study.

The program directors will be informed, to the fullest extent permitted by law, about your situation.

#### **Medical Emergencies**

In the event of a medical/mental health emergency, hospitalization or other such event, the College will determine, in consultation with medical personnel and the program director, whether you need to return home. You will need to make plans on how to deal with such a situation. It will be the responsibility of your parent/guardian to make necessary arrangements for your return; therefore, it is essential that they have a valid passport.



## **Student Health Information**

To the Student: Complete this portion of the form and review it with our physician during your required physical examination. The information provided by you and your physician will remain confidential. Are you in generally good physical condition? (If no, explain) Have you had any major injuries, diseases or ailments in the last 5 years? (If yes, explain) Have you ever been or are you currently being treated for any psychological or emotional problems? (If yes, have your physician or counselor attach a note of explanation) Do you have other ongoing emotional or physical conditions (including eating disorders) that might require treatment while you're away or that might be exacerbated by stress caused by changes in culture, climate, diet or exercise? (If yes, list and indicate recommended treatment) Do you have allergies, reactions to medications and/or dietary restrictions? (If yes, explain) Are you currently taking any medications on a regular basis? (Please list medication name and ailment) Person to notify in case of emergency, illness or accident: Name: \_\_\_\_\_\_ Relationship to student: \_\_\_\_\_ Street/Apt #: City, State, ZIP: Phone #: E-mail address:

I have read the above and understand my responsibilities with regard to my health care needs on my proposed plan to study abroad.



# PHYSICIAN'S STATEMENT

**To the Student:** Please authorize by your signature below the release of any medical information that may be relevant in the opinion of your physician to your participation in a study abroad program.

Name:				
	Last	First	Middle	
Student's Signature			Date	
Program/	Dates of Travel:			
Physicia	an Information:			
Name (pl	ease print):			
Address:				
Signature	:	Date	e:	
Program This rep	n. S/he will live and study for port should be based upon an Please indicate your relati	10 weeks, 20 weeks, 3 weeks or in some case examination made within six months of the examination with the student. (Note: Parent-phys	ician reports are not acceptable.)	
	Family Physician Union Health Service's		versity Physician be):	
2.		he Student Health Information form s/he con lp to further explain and/or clarify the stude	mpleted. Please describe below any additional ent's self-reported health information.	
3.	Based upon your physical Physical Findings:	examination of this student, please explain	your findings and recommendations.	
	Recommendations:			
4.	Is the student allergic to any medications? If so, please list:			
5.	Is there any existing health condition that may require treatment during the period of study abroad? If so, what is the condition and what treatment may be required?			
6.	To your knowledge are there any predisposing medical, physical, or emotional factors which under stress of adjusting to another culture may require treatment while the student is abroad? If so, please specify.			
7.	Review and update routin	e vaccinations as you deem necessary.		