

CVM Student Medical Surveillance Checklist

This Checklist is designed to help you identify conditions that could increase your risk of health problems due to the exposures you will have as a veterinary student. If you have answered “Yes” to any of the questions below, you are encouraged to see your personal physician or schedule a consult with Student Health Services <https://healthypack.dasa.ncsu.edu/appointments/> or by calling 919 513-2563.

For your medical privacy, **DO NOT send this checklist** to anyone at the College of Veterinary Medicine, and do not sign it. **This checklist is solely for your own use.**

- ✚ Do you have signs of allergies such as itchy eyes, runny nose, sneezing, wheezing, shortness of breath, asthma, hives, welts, or redness that are associated with animals, medications, chemicals, latex, or other substances such as pollen or food?
- ✚ Are you being treated for asthma? If you are unsure as to whether your asthma may be influenced by any of the above allergens please contact Student Health Services.
- ✚ Are you immunocompromised? If No, proceed to question 4. Immunocompromised individuals may be adversely affected by certain zoonotic diseases such as Q fever.
- ✚ Do you have a valvular disease (heart murmurs) or other congenital heart disease? Valvular diseases may be affected by bacterial infections such as Q fever.
- ✚ Do you have an existing medical condition that may create an animal contact health risk? If yes, or you are unsure and would like to speak with a health professional concerning a particular condition, contact Student Health Services.
- ✚ Have you ever been diagnosed with an infectious viral, bacterial or parasitic illness that had been confirmed to have come from an animal and was associated with your research/studies/work at NC State University or elsewhere?
- ✚ Have you ever suspected that you have acquired an illness from an animal, animal materials/tissues at NC State University or elsewhere, but were unable to confirm this?
- ✚ Are you pregnant or do you plan to become pregnant this year?

For specific information on health risks including zoonotic diseases and physical injuries, please refer to the ‘Animal Contact Risk Table’ located on the EHSC website under ‘Animal Contact.’

CVM Veterinary Student Attestation Form

If you answered "Yes" to any question on the checklist, it is recommended that you either (1) see your personal physician or (2) contact a Student Health Services physician by calling 919-513-2563. All students are required to sign this form at the bottom and return to CVM Student Services.

I, _____ (print name legibly);
_____ (signature)

have reviewed and understand the CVM Veterinary Student Medical Surveillance Checklist. If I answered 'Yes' to any question on this checklist, I understand that I am encouraged to either speak to my personal physician or a Student Health Services physician about my medical condition or concern.

Student (@ncsu.edu) E-mail Address: _____

Student ID#: _____

Phone Number: (____) ____ - ____.

Date: _____

❖ **Reminder:**

- ✓ ***Tetanus vaccinations are recommended every ten (10) years***
- ✓ ***Rabies Titers are recommended every two (2) years***

******Return the signed, completed, Student Attestation Form
(Do not include page 1- Medical Surveillance Checklist)******