

Student Wellness Service

DEPARTMENT OF STUDENT AFFAIRS

Medical Vulnerability Checklist

The purpose of this checklist is to assist students who are considering to make an informed decision on whether to accept or decline an invitation to return to campus or residence during the pandemic.

1. Students who have looked at the checklist and have none of the listed or any conditions can electronically complete the declaration and send to faculty as below with their acceptance of invitation to return.

2. Where a student opts to delay their return to campus for on medical grounds once invited to return students will not be required to provide the reasons for their decision to residences, faculties, lecturers or other third parties. All medical information discussed with clinicians at Student Wellness Service (SWS) remain confidential as is the case with all consultations.

Underlying Medical Conditions

The following is list of underlying medical conditions that put individuals at increased risk for severe illness from COVID-19. Students with these underlying conditions are advised to remain at home for self-care.

<ul style="list-style-type: none"> • Uncontrolled Diabetes Mellitus • On immunosuppressant therapy (e.g. chronic oral steroids) • Virally unsuppressed HIV • Pregnant women, post-delivery for 6 weeks, breast feeding women 	<ul style="list-style-type: none"> • Unstable or Complicated Cardiac Disease • Chronic lung disease (such as poorly controlled asthma or chronic bronchitis) • Chronic liver disease with impaired liver function • Chronic renal disease with impaired renal function 	<ul style="list-style-type: none"> • Cancer and receiving chemotherapy or radiation therapy • Bone marrow or organ transports • Morbid obesity (body mass index more 40) • Age more than 65 years
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When in doubt about any health-related matter, seek health advice from SWS or private Medical Practitioner prior to returning to res. Do not wait to arrive before obtaining health advice, SWS is providing telephonic and virtual/ video medical consultations. You can contact SWS and defer your return to a later stage.

To book your appointment, visit [SWS website](#).

I _____ declare that I have read the above *Medical Vulnerability Checklist* advice and hereby make an informed decision to return to campus or residence. I do not have any known medical conditions to declare to Student Wellness Service prior to my return to campus or residences.

Electronically Signed at _____ on _____
(City) (Date)

