

Central Clinic

Free health care for St. Louis Park youth infancy through high school

Services are free and include:

- Treatment for acute illness and injuries
- Well-baby checks
- Immunizations (now ONLY for uninsured and Medical Assistance/MNCARE)
- Camp and sports physicals
- Sexual health care
- Interpreters may be arranged by calling ahead of time.

Walk-In:

• Patients are seen in order of arrival.

Consent:

- Written consent by a parent or guardian required annually. (By Minnesota law, students can give permission for their sexual health services.)
- Consent forms are available at the clinic, in school offices, from school nurses or online at **www.slpschools.org/centralclinic**

The clinic is staffed by Park Nicollet physicians.

For more information regarding clinic services, please call 952-993-1100.

Location

Hours
Tuesday... 1:00-4:30 p.m
Wednesday... 1:00-4:30 p.m.
(School Year Only)

Central Community Center 6300 Walker Street Hwy. 7 and Wooddale St. Louis Park, MN 55416 (Enter on northwest side of the building) **952-993-1100**

Also at this location, for low-cost dental care, call Children's Dental Services: 612-746-1530







put

Central Clinic Consent Form For Junior and Senior High Students

Dear Parent or Guardian: If you have children who live or attend school in St. Louis Park or Hopkins, they are eligible to receive free medical care at Central Clinic, located at Central Community Center, 6300 Walker St, St Louis Park. For your son/daughter to receive services, you must complete this consent form and return it to the clinic. Young people without a signed consent form (in hand or on file at the clinic) cannot be treated by clinic staff.

	(Child's name)	(Date of Birth)
I will all	ow my son/daughter to receive ALL* clinic se	ervices, including, for example:
	Routine care: Treatment for colds, flu, infections, headaches, earaches, sore throats, sprains, skin problems, abdominal or back pain; physical exams for sports; shots; screenings	
	Counseling: Help dealing with stress and ar services; self esteem development; suicide p	xiety, depression, abuse and neglect; mental health revention
	Health Education: Weight management, die	t counseling, smoking prevention
	Lab services: Routine blood and urine tests,	throat cultures, diabetes tests.
*IMPORTANT: If there are services listed above you do not want your son or daughter to receive, cross them out. He or she will receive only those services that remain on the list. Please be aware that Minnesota Law does allow your son or daughter to receive treatment, without your permission or consent, for sexually transmitted infections, chemical dependency, pregnancy and conditions associated with pregnancy, including pregnancy prevention. Allergies—My son or daughter has the following allergies:		
Signat	ure:	Relationship to student:
Date:_		Daytime phone:

- This consent form will be on file at the clinic and is valid for one academic year.
- A written consent is required annually.

I give permission for

• Consent forms are available at the clinic and all St. Louis Park or Hopkins public and private schools.

Return this form to Central Clinic, 6300 Walker Ave., St. Louis Park, MN 55416.

Questions? Call 952-993-1100.

Central Clinic was developed through the efforts of Park Nicollet Foundation and St. Louis Park Public Schools.

to use Central Clinic.