Attachment V Regulation 757-2

> Place Student's

Prince William County Public Schools Severe Allergy Individual Health Care Plan

Student's Name:	Grade:		Picture Here
Teacher's Name:			
Classroom Any food given to student must be approved Emergency food provided by parent/guardian Parent/guardian should be advised of any pla Classroom projects involving food should be Middle school or high school student will be	n to be kept in the class nned parties as early a reviewed by the parer	s possible. nt/guardian and the	_
 Transportation will be alerted to student's all This student has a physician's order to carry Epinephrine can be found in: □ backpack Student will sit at front of bus: 	epinephrine on bus:	□YES □1 (specify) □YES □1	
 Field Trip Procedures Parent/guardian should be notified of field tried. Epinephrine should accompany student during. The elementary student should remain with the Middle school/high school student should remain. 	ng any off-campus scho	ool sponsored activientire field trip:	YES □ NO
 Cafeteria Food Service Manager and cafeteria hostesse Cafeteria tables where food allergic students Student will sit at a specified allergy table: Student will sit at the classroom table at a specified NO restrictions where student may sit in the 	eat will be cleaned to ecified location:		gens.
Students should use their account cards (at elementar school) to identify their allergy. The cafeteria menu is food choices from the menu. The complete list of me Nutrition Services website.	is available online. Par	ents/guardians are	encouraged to make
Parent's/Guardian's Signature	Date		
School Nurse's Signature	Date		

School