

### INDIVIDUALIZED HEALTHCARE PLAN (Elementary)

Student Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

**Plan effective from 2006 to 2007**

ASSESSMENT DATE/NURSE	FUNCTIONAL HEALTH CONCERN	STUDENT OBJECTIVE(S)	INTERVENTIONS	EVALUATION
	<p>Risk of anaphylactic reaction (life-threatening allergic response) related to the ingestion or inhalation of peanuts and/or tree nuts (protein component)</p> <p>Risk of severe allergic reaction to the ingestion or inhalation of [add other allergens here if applicable, or delete]</p> <p>Student has an Individualized Emergency Care Plan (IECP)</p>	<p>Student will cooperate with staff 100% of the time by following school, classroom and IHCP rules in order to remain free of allergic reactions while in school.</p> <p>If student suspects that he/she has ingested (fill in food allergens), student will immediately notify staff who will implement the IECP according to the allergen-specific plan.</p> <p>Student will cooperate with staff members 100% of the time if they need to implement the IECP.</p>	<p>Parents will:</p> <ul style="list-style-type: none"> <li>✧ inform school nurse and teacher of food allergy</li> <li>✧ provide a physician's order and medication for medical intervention</li> <li>✧ inform school nurse of any changes in health status as relates to food allergy and treatment</li> <li>✧ educate student in the self-management of his/her food allergies appropriate for his/her age level</li> <li>✧ provide emergency contact information</li> <li>✧ meet with school nurse to develop a prevention plan</li> <li>✧ provide safe snacks/treats for student to keep in school and, if desired, a list of appropriate foods for student to have at snack</li> </ul> <p>Nurse will:</p> <ul style="list-style-type: none"> <li>✧ meet with parents and teacher to develop a prevention plan</li> <li>✧ post "peanut/nut free" sign outside of classroom</li> <li>✧ work with teacher to eliminate the use of peanuts/tree nuts in classroom snacks, curriculum, educational tools, classroom parties, foreign language projects, and arts and crafts projects</li> <li>✧ educate school staff who interact with student regarding food allergy, allergic reaction symptoms, recognizing signs and symptoms of anaphylaxis, and prevention and treatment plans</li> <li>✧ train school staff in EpiPen administration, as appropriate</li> <li>✧ develop and disseminate emergency care plan for student</li> <li>✧ review cleaning/care of nut/peanut free table in cafeteria with maintenance and cafeteria staff</li> </ul>	<p>[Enter documentation method or date(s) accomplished for all applicable interventions]</p>

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			Teacher/classroom staff will: <ul style="list-style-type: none"><li>✧ eliminate the use of nuts/peanuts in classroom snacks, educational tools, and arts and crafts projects.</li><li>✧ be trained in the administratin of EpiPen, as appropriate</li><li>✧ consult in advance of field trips with the school nurse and parents</li><li>✧ [for food allergens other than peanut/nut] notify parents in advance regarding curriculum/projects that may contain [add these food allergens]</li><li>✧ follow the emergency care plan if student has a reaction</li></ul> Student will: <ul style="list-style-type: none"><li>✧ not eat any foods except those that come from home or have been approved by the parent</li><li>✧ inform teacher/staff if he/she is not feeling well, for any reason, but expecially if he/she thinks he/she may be having an allergic reaction</li></ul>	

School Nurse: \_\_\_\_\_ Date: \_\_\_\_\_

Review by: Parent: \_\_\_\_\_ Date: \_\_\_\_\_ Student: \_\_\_\_\_ Date: \_\_\_\_\_