

Medical Statement

PART A			
Student's Name		Age	
Name of School		Grade Level	Classroom
Does the child have a disability? If Yes, describe the major life activities affected by the disability.		Yes	No
Does the child have special nutritional or feeding needs? If Yes, complete Part B of this form and have it signed by a health care provider with prescriptive authority in the State of Indiana.		Yes	No
If the child is not disabled, does the child have special nutritional or feeding needs? If Yes, complete Part B of this form and have it signed by a recognized medical authority.		Yes	No
If the child does not require special meals, the parent can sign at the bottom and return the form to the school food service.			
PART B			
List any dietary restrictions or special diet.			
List any allergies or food intolerances to avoid.			
List foods to be substituted.			
List foods that need the following change in texture. If all foods need to be prepared in this manner, indicate "All." Cut up or chopped into bite size pieces: Finely ground: Pureed:			
List any special equipment or utensils that are needed.			
Indicate any other comments about the child's eating or feeding patterns.			
Parent's Signature			Date:
Signature of Health Care Provider who has Prescriptive Authority in the State of Indiana			Date:

Often, the substitutions can be made relatively easily. There are situations, however, which may require additional equipment or specific technical training and expertise. When these instances occur, it is important that food service staff and parent(s) be involved at the outset in preparations for the child's entrance into the school.

USDA has developed a guidance to describe some of the factors that must be considered in the early phases of planning and suggests ways in which School Nutrition Program (SNP) department staff can interact with other responsible parties in the school and the community at large to serve children with disabilities. This guidance, Accommodating Children with Special Dietary Needs can be found on the USDA Food and Nutrition Service (FNS) website at: <http://www.fns.usda.gov/cnd/guidance/default.htm>. The guidance is based on the USDA policy, *Meal Substitutions for Medical or Other Special Dietary Reasons*.

Serving children with disabilities presents child nutrition department staff with new challenges as well as rewards. This guidance presents information on how to handle situations that may arise and offers advice about such issues as funding and liability.

Definitions of Disability and of Other Special Dietary Needs

Under Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act (ADA) of 1990, a "person with a disability" is any person who has a physical or mental impairment that substantially limits one or more major life activities, has a record of such an impairment or is regarded as having such an impairment.

The term "physical or mental impairment" includes many diseases and conditions, a few of which may be orthopedic, visual, speech and hearing impairments; cerebral palsy; epilepsy; muscular dystrophy; multiple sclerosis; cancer; heart disease; ~~metabolic diseases~~, such as ~~diabetes~~ or phenylketonuria (PKU); ~~food anaphylaxis (severe food allergy)~~; mental retardation; emotional illness; drug addiction and alcoholism; specific learning disabilities; HIV disease and tuberculosis.

Major life activities covered by this definition include caring for one's self, eating, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning and working.

Individuals with Disabilities Education Act

The *Individuals with Disabilities Education Act* (IDEA) is a federal law that requires each state to ensure that a free appropriate public education (FAPE) is available to all eligible children with disabilities residing in that state. IDEA is designed to improve educational results for all children with disabilities. The *Provisions Related to Children with Disabilities Enrolled by Their Parents in Private Schools* section of IDEA establishes that the private school is obligated to locate, identify, evaluate and spend a proportionate share of IDEA funds for equitable services for children with disabilities enrolled by their parents in private, including religious, elementary and secondary

schools within the contracting entity (CE). IDEA defines a child with a “disability” as one who is evaluated in accordance with IDEA as having one or more of the recognized 13 disability categories and who, by reason thereof, needs special education and related services.

IDEA recognizes the following disability categories that establish a child’s need for special education and related services. These disabilities include: autism; deaf-blindness; deafness or other hearing impairments; mental retardation; orthopedic impairments; other health impairments due to chronic or acute health problems, such as asthma, diabetes, nephritis, sickle cell anemia, a heart condition, epilepsy, rheumatic fever, hemophilia, leukemia, lead poisoning, tuberculosis; emotional disturbance; specific learning disabilities; speech or language impairment; traumatic brain injury; and visual impairment, including blindness which adversely affects a child’s educational performance; and multiple disabilities.

Attention deficit disorder or attention deficit hyperactivity disorder may fall under one of the above categories. Classification depends upon the particular characteristics associated with the disorder and how the condition manifests itself in the student, which will determine the category.

The Individualized Education Program (IEP) is a written statement for a child with a disability that is developed, reviewed and revised in accordance with the IDEA and its implementing regulations. The IEP is the cornerstone of the student’s educational program that contains the program of special education and related services to be provided to a child with a disability covered under the IDEA.

Some states supplement the IEP with a written statement specifically designed to address a student’s nutritional needs. Other states employ a “Health Care Plan” to address the nutritional needs of their students. For ease of reference, the term “IEP” is used to reflect the IEP as well as any written statement designating the required nutrition services.

When nutrition services are required under a child’s IEP, school officials must ensure that child nutrition department staff are involved early in decisions regarding special meals.

Physician’s Statement for Children with Disabilities

USDA regulations require substitutions or modifications in school meals for children whose disabilities restrict their diets. A child with a disability must be provided substitutions in foods when that need is supported by a statement signed by a licensed physician.

The physician’s statement must identify:

- The child’s disability;
- An explanation of why the disability restricts the child’s diet;
- The major life activity affected by the disability;
- The food or foods to be omitted from the child’s diet and the food or choice of foods that must be substituted.

In Cases of Food Allergy

Generally, children with food allergies or intolerances do not have a disability as defined under either Section 504 of the Rehabilitation Act or Part B of IDEA. The SNP department may, but is not required to, make food substitutions for them.

However, when in the licensed physician's assessment food allergies may result in severe, life-threatening (anaphylactic) reactions, the child's condition would meet the definition of "disability," and the substitutions prescribed by the licensed physician must be made.

Other Special Dietary Needs

The SNP department may make food substitutions, at their discretion, for individual students who do not have a disability but who are medically certified as having a special medical or dietary need.

Such determinations are only made on a case-by-case basis. This provision covers those students who have food intolerances or allergies but do not have life-threatening reactions (anaphylactic reactions) when exposed to the food(s) to which they have problems.

For students with special dietary needs, schools must:

- Provide substitutions on a case-by-case basis;
- Maintain the required medical statement in their files;
- Provide the meal or substitution at no additional cost to the child; and
- Document substitutions made to meals.

Lactose Intolerance

"Lactose intolerance" describes a difficulty digesting the sugar found in milk and milk foods. Symptoms associated with lactose intolerance may be reduced or eliminated if:

- Small, frequent portions of milk are consumed rather than large portions;
- Milk or milk foods are consumed with other foods; or
- Whole or chocolate milk, yogurt with active cultures, ice cream and aged hard cheeses like cheddar and Swiss are consumed.

If a student requires lactose-reduced milk, the school may provide lactose-reduced/lactose-free milk as a creditable part of a reimbursable meal without additional documentation. If the school serves a meal without milk to a student, they cannot claim reimbursement.