

Wausau School District

Nutrition Services Department

2024-2025 Medical Statement for Dietary Needs Form

Students With A Special Dietary Needs are required to Complete this Form:

Wausau School District is committed to providing a safe and nurturing environment for students. The District's Nutrition Services Department understands the prevalence of food allergies as well as other special dietary needs among school populations. The Department is committed to reducing the risk of accidental exposure to the top eight allergens by working in cooperation with parents, students, and medical practitioners. Our collective focus of food allergy management includes: prevention, education, awareness, communication, and emergency response.

To ensure that individual food allergy plans for students with life-threatening food allergies are based on medically accurate information and evidence-based practices, the Nutrition Services Department will require families and medical practitioners to complete the Wisconsin Department of Public Instruction's, "Medical Statement for Special Dietary Need" form. This form, which is attached, must be signed by a Medical Practitioner and must <u>indicate how the physical or mental impairment restricts the student's diet</u>. Medical Practitioner must indicate what foods to eliminate and what to substitute with an explanation.

- To cancel a dietary request order that is already on file, a parent should sign and submit a dated letter indicating the type of diet that is no longer needed by the child. This letter may be turned in to the kitchen manager at the school.
- Students requiring a milk substitute due to Lactose Intolerance will be offered Lactose free milk at meal time. This request only requires a parent signature at the bottom of the "Medical Statement" Form. No medical practitioner signature is required for this request.

PLEASE RETURN COMPLETED FORM TO YOUR CHILD'S SCHOOL Kitchen Manager or Building Health Aide

If you have any questions, please contact Karen Fochs, MS,RD, Director of School Nutrition Services, at kfochs@wausauschools.org or 715-261-0805

Engish Version Form

https://dpi.wi.gov/sites/default/files/imce/school-nutrition/pdf/medical-statement.pdf

Spanish Version Form

file:///I:/24.25%20Start%20up/medical-statement-spanish24.25.pdf

Hmong Version Form

file:///I:/24.25%20Start%20up/medical-statement-hmong24.25.pdf