Deer Valley Unified School District No. 97

Parents of Children with peanut or nut allergies:

Please complete the attached care planning information with your physician before the start of the new school year so we may be prepared to respond should your child have an adverse reaction to an allergen.

The bright yellow care plan needs to be completed by your physician and yourself and brought back to the nurse with any prescribed medications for school. We will also need the attached consent form completed by you as well.

We can provide a "peanut and nut allergen-free table" in the cafeteria if it is indicated for any child. The purpose of a nut-free table would be to physically separate an allergic child from peanut or nut containing products while in the cafeteria. The table will be clearly marked as "nut free zone" and will be cleaned separately from other tables before and after lunch to prevent any cross contamination. Since we cannot oversee lunches brought from home by other students, these children will not be allowed to eat at the "nut-free table". Only those students who have purchased lunch from the cafeteria will be allowed to eat at the "peanut and nut-free table" as guests. Sharing of food is prohibited for all students. The lunchroom monitor will strictly enforce these activities. Keep in mind that we cannot guarantee 100% that the cafeteria is serving nut-free food items as vendors change throughout the year and it is possible that products may come in with nut exposure. The risk of this is greater at the snack bar, but even cooking oils change throughout the year.

Your child will play a crucial role in their safety by staying seated at the table provided and by alerting the monitor if they begin to experience any signs or symptoms of allergic reaction. Older students need to accept some responsibility for their compliance with seating plans. Please have your physician order any additional Epi-Pens for preferred locations in addition to the Health Center and School Nurse if needed. The School Nurse will help you get this set up, preferably prior to the start of school.

We ask that you review these procedures with your child and send the bottom portion back to the School Nurse before your child begins to attend school.

Thank you in advance for your cooperation,

School Nurse: **Jan Rey RN**
Health Center: **623-376-5010 Fax: 623-376-5080. Email: Jan.Rey@dvusd.org**
Attached: Food Allergy Action Plan (to be returned to school nurse when completed and signed by parent and physician).
School Guidelines for Managing Students with Food Allergies (may be kept by parent and student).
Medication Consent Form (to be returned to school nurse with medications prescribed by physician).

I have read and understand the above information: _____ (initial)
I have received, read, and understand the attached School Guidelines for Managing Students with Food Allergies (NASN, FAAN, etc.). Parents, please review this information with your child to ensure understanding. _____ (initial)
Please mark/initial one of the following 2 statements.

I **want** my child seated at the "peanut and nut-free table" during lunch. _____.

I **do not want** my child seated at the separate "peanut and nut-free table" during lunch _____.

Child's Name (Print) _____

Grade _____ Teacher _____

Parent signature _____ Date_____

Child signature _____ Date_____