

# **Bellbrook-Sugarcreek Schools**

## **Food Allergy Guidelines for Parents and Students**

### **Parent/guardian:**

1. Contact school principal during summer.
  2. Request meeting, if desired, with principal, school nurse, teachers, food service director, and transportation coordinator.
  3. Have the following forms completed prior to the first day of school:
    - a. Authorization for administration of Prescription or OTC Medication by School Personnel. (Epi-pen, inhaler, antihistamine) **OR**
    - b. Authorization for Student Possession and use of Medications in order to carry emergency medications such as an Epi-pen or inhaler on their person.
    - c. Authorization for administration of Non-Prescription/Over-the-Counter Medication for Benadryl (Diphenhydramine) only.
    - d. Epi-pen Self-Carry Agreement.
    - e. Food Allergy Action Plan (FAAP).
- \*\*\*Please note that Ohio law requires that a “back-up” epinephrine autoinjector is available at the designated school health clinic or office for emergencies for those students who have been determined to be responsible enough to carry their Epi-pen and/or rescue inhaler on their person.**
4. Work with the school nurse in completing the Food Allergy Plan checklist.
  5. All medications must have a pharmacy label.
  6. Note the expiration dates on all medications and let the school nurse know if they will expire during the current school year. Mark the date on your calendar.
  7. Provide three (3) recent pictures of your child prior to the start of school, if requested by the school nurse or food service director.
  8. Be sure to provide an alternate snack/treat “box” to be used in the classroom for parties and birthday treats, if specified in the EAP or checklist, especially for elementary students. Parents are also encouraged to send in a list of safe foods for the class.

9. Parents of highly allergic children are strongly encouraged to pack lunches for their child.
10. However, if a child is to participate in our food service program, parents need to contact the food service director at 848-5001, ext. 13112. Parents are also encouraged to contact the food service director on a monthly basis with a list of desired lunch menu items to enable the dietician to determine safe lunches based on current ingredient information from the vendors which can change throughout the school year.
11. Please consider volunteering to be the room parent and/or field trip chaperone. Talk with teachers about parties and their routines.
12. **We strongly recommend that parents of food allergic students go on field trips.** Review the emergency plans with your child and the do's and don'ts prior to the trip. Coordinate with the school nurse and teacher prior to field trip to ensure that the EAP and medications are accessible to the child.
13. Pay close attention to special events at the school involving food—read newsletter *carefully and be in contact with your child's teachers weekly, especially in the primary buildings.*
14. Provide accurate contact information for work, cells, home and update as changes occur.
15. **Get a Medic Alert bracelet for your child.**
16. Consider joining the Food Allergy Network (FAN): phone (703) 691-2713; e-mail address: [fan@worldweb.net](mailto:fan@worldweb.net).
17. Educate the child in the self-management of their food allergy including:
  - a. Safe and unsafe foods.
  - b. Strategies for avoiding exposure to unsafe foods.
  - c. Symptoms of allergic reactions
  - d. How and when to tell an adult they may be having an allergy-related concern.
  - e. How to read food labels
  - f. How to self-administer the EpiPen
  - g. Importance of never allowing another individual to use their Epi-pen or inhaler when they have been given permission to carry.

**B. Student:**

1. Will not trade food with others.
2. Will consume only food provided from home (if required on FAAP), including the safe treat box.
3. Will not eat anything with unknown ingredients, especially baked goods and foods without a label.
4. Notify an adult immediately, if he/she eats something they believe may contain an allergen and identify self as a student with a food allergy to \_\_\_\_\_.
5. Notify an adult immediately, if he/she begins to experience any symptoms of an allergic reaction AND identify self as a student with an allergy to \_\_\_\_\_.
6. Will be proactive in the care and management of their food allergies and reactions by excusing themselves from a medically threatening situation.
7. If determined to be responsible enough to carry the Epi-pen and/or inhaler, will maintain an Epi-pen at all times in the designated location such as locker, backpack or purse.
8. Will agree to use the Epi-pen in a responsible manner as ordered.
9. Will never allow any other person to use my Epi-pen and/or inhaler.

***Questions about these guidelines may be directed to the School Nurse in your child's building.***

1. ***Stephen Bell Elementary – Mrs. Laura Guess, 848-7831, ext. 15930***
2. ***Bell Creek Intermediate School – Mrs. Eileen Malas, 848-3777, ext. 18903***
3. ***Bellbrook Middle School and Bellbrook High School – Mrs. Jenny Kaffenberger, 848-2141, ext. 12930.***