



# **Arlington Heights School District 25**

## **Resource Guide for Supporting Students with Life-Threatening Allergies**

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Resources:	District 39 (Wilmette) Resource Guide
	District 67 (Lake Forest)
	District 64 (Park Ridge-Niles) Guidelines
	FARE Food Allergy Research & Education
	Christine Szychlinski, APN, CPNP Manager, Bunning Food Allergy Program at Children's Memorial Hospital
	Illinois State Board of Education, Nutrition Department
	AHSD25: Food Services in AHSD25 Schools
	District Policies
	USDA Food & Nutrition Services Regulations

# Introduction

The goal of Arlington Heights School District 25 is to provide a safe environment for all children, including those with life-threatening allergies. Although the risk to students with these allergies in the schools cannot be completely eliminated, it can be greatly reduced. This plan addresses the identification of individual needs, staff awareness, necessary curricular and procedural modifications, and emergency plans. Protecting students with life-threatening allergies is the shared responsibility of families, schools, and the community. Although the focus of this document is on life-threatening food allergies, other life-threatening allergies can include bee/insect stings, medications, and latex. Therefore, some of this document will also apply to these situations.

**Arlington Heights School District 25 cautions that it is necessary for staff, students, and parents to understand that an all allergen-free environment is impossible to achieve, and to expect it is to harbor a false sense of security.<sup>1</sup>**

The purpose of this manual is to reduce unintended allergic reactions by outlining the problem, providing education on allergen avoidance strategies, establishing emergency response procedures, and outlining the responsibilities for the student, families, and the school system. Arlington Heights School District 25 will continue to monitor and evaluate this issue to ensure the proper implementation of these guidelines across our jurisdiction.

<sup>1</sup> See Connecticut Policy on banning specific foods, "Guidelines for Managing Life-Threatening Allergies in Connecticut Schools." [http://www.sde.ct.gov/sde/lib/sde/PDF/deps/student/health/Food\\_Allergies.pdf](http://www.sde.ct.gov/sde/lib/sde/PDF/deps/student/health/Food_Allergies.pdf).

## General Information about Life-Threatening Allergies

As a result of the severe nature of some allergies, school districts and individual schools need to be prepared for students with food and other life-threatening allergies. Even in schools with comprehensive prevention plans, students may be subject to accidental exposure to the allergen due to the large number of students, accidental ingestion, cross-contamination of tables, desks, and other surfaces. Environments and activities that may result in increased risk for the student with food allergies include: the cafeteria, food sharing, hidden ingredients, craft, art and science projects, bus transportation, fundraisers, bake sales, parties and holiday celebrations, and field trips.

Allergic reactions vary among students and can range from mild to severe, life-threatening anaphylactic reactions. There are nine foods that cause the majority of reactions: peanut, tree nut (walnut, cashew, pecan, hazelnut, almond, etc.), milk, egg, fish, shellfish, soy, wheat, and sesame. Ingestion of the food allergen is the principal route of exposure; however, it is possible for a reaction due to tactile (touch) exposure or, in rare cases, inhalation exposure. The amount of food needed to trigger a reaction depends on multiple variables. The level of sensitivity of an allergy may fluctuate or diminish over time. The symptoms of an allergic reaction are specific to each individual and each individual should be medically evaluated.

### **Anaphylaxis**

Anaphylaxis is a potentially life threatening medical condition occurring after exposure to a specific allergen. Anaphylaxis refers to a collection of symptoms affecting multiple systems in the body. The most dangerous symptoms include breathing difficulties and a drop in blood pressure or shock that are potentially fatal.

Anaphylaxis typically occurs immediately or up to two hours following exposure to the allergen exposure. Anaphylaxis should be treated with the administration of epinephrine (EpiPen), a prescribed medication that immediately counteracts the life threatening symptoms. Treatment should take place immediately following exposure to a known allergen. Epinephrine may be ineffective if treatment is delayed. Epinephrine is an easily administered injection. Call 911 when an EpiPen is used.

In about one-third of anaphylactic reactions, the initial symptoms are followed by a late phase of symptoms two to four hours later. It is imperative that following the administration of epinephrine, the student be transported by emergency medical services to the nearest hospital emergency department even if the symptoms appear to have been resolved. When in doubt, medical advice indicates that it is better to administer the student's prescribed EpiPen and seek medical attention. Remember that in a crisis, a student may not be able to self-administer medication, even if they have been given permission to do so.

## General Information about Allergy Care Plans

Public Act 96-0349 requires school districts to annually inform parents of students with life-threatening allergies or life-threatening chronic illnesses of the applicable provisions of Section 504 of the Rehabilitation Act of 1973 and other applicable federal statutes, state statutes, federal regulations and state rules.

### Individual Health Care Plan

An Individual Health Care Plan is a written plan that is based on the physician's statement and outlines what the school can do to accommodate the individual needs of a child with a life-threatening allergy. Prior to enrollment in school or immediately after the diagnosis of a life-threatening allergic condition, the parent/guardian should meet with the certified school nurse and food service personnel, if needed, to develop an individualized health care plan.

### 504 Plan

Section 504 protects students from discrimination due to a disability that substantially limits a major life activity. If a student is suspected of having a qualifying disability under Section 504, the school will convene a Section 504 team to determine eligibility and as needed, appropriate support and services to address the student's individual needs. Under Section 504, a student with a physical impairment which substantially limits a major life activity, such as caring for oneself, may meet the definition of a student with a disability. If the student has a qualifying disability, the 504 team will determine how the disability limits access to school programs and whether the student is eligible for protection from discrimination under Section 504. If the student is protected under Section 504, an individualized Section 504 Plan will be developed and implemented to provide the needed support so that the student can access his or her education as effectively as students without disabilities.

Not all students with life-threatening allergies and life-threatening chronic illnesses may be eligible under Section 504. Our school district may be able to appropriately meet a student's needs through the Educational Support System with an Individualized Health Care Plan (IHCP).

## Guidelines for Students with Life-Threatening Allergies

The goal is for the students with life-threatening allergies to be independent in the prevention, care, and management of their food allergies and reactions based on their developmental level. To this end students with life-threatening allergies are asked to follow these guidelines:

- Do not trade or share foods or utensils.
- Wash hands or use hand wipes before and after eating.
- Learn to recognize symptoms of an allergic reaction or accidental exposure, and notify an adult immediately if a reaction is suspected.
- Develop a relationship with the school nurse and your teacher/team leader to assist in identifying issues related to the management of the allergy in school.
- Learn the difference between safe and unsafe foods. Do not eat anything with unknown ingredients or ingredients known to contain an allergen or its by-products.
- Develop a habit of always reading ingredients before eating food.
- Be responsible for carrying your medication(s), if medically necessary.
- Wear your Medic Alert bracelet if provided.
- Be responsible for the appropriate use of your medication if you are participating in extracurricular activities.
- Inform others (and friends) of your allergies and your specific needs.
- Self-advocate in situations that you might perceive as compromising your health.
- Do not board the bus if you are experiencing an allergic reaction.
- Report teasing, bullying and threats to an adult authority.

## Guidelines for Parents/Guardians

Parents are asked to assist the school in the prevention, care, and management of their child's food allergies and reactions. Additionally, parents are encouraged to foster independence on the part of their child, based on their developmental level.

To achieve this goal, parents are asked to follow these guidelines:

- Indicate your child's allergies on the annual school emergency form prior to the opening of school (or immediately after a diagnosis). (Form A)
- Provide the following completed documents:
  - The Annual Severe Allergy Survey
  - Parent Information. (Form B)
- Complete and have your physician sign:
  - Asthma Inhaler/EpiPen Self-Administration Form, if age-appropriate. (Form C)
  - Allergy Action Plan (Form B)
  - Annual Modified Meal Request Form (Form E) - this form only needs to be completed if you intend to have your child eat school meals.
- Review Arlington Heights School District 25 Medication Policy (Form F1)
- Complete the Parent Request for Medication to be Administered at School Form. (Form F2)
- Complete the Elementary School Lunchroom Table Preference Form. (Form D)
- Complete the Extracurricular Allergy/Asthma Permission Form, if appropriate. (Form H)
- Periodically check expiration dates and provide current medications, EpiPens or inhalers.
- Notify the School Nurse if your child experiences any changes in medical status.
- Notify the School Nurse if there are any changes in medications.
- Ensure your child knows how to self-administer medication before expecting self-administration at school, if age-appropriate.
- Provide your child with a Medic Alert bracelet if appropriate.
- Develop an Individual Health Care Plan with the School Nurse, if appropriate. (Form I)
- Notify supervisors/sponsors of any before/after school activities, events or clubs regarding your child's allergy and provide necessary medication.
- If you choose to have your child retrieve medication from the nurse's office for a middle school extracurricular activity, then your child must be responsible for picking it up and returning it.
- Consider attending your child's field trip, if requested. AHSD25 will not exclude a student with allergies from a field trip.
- Provide your child with a safe snack.
- Review the website for menus and ingredients of district-provided meals.
- Coordinate with school personnel if it is more appropriate for your child to eat lunch at home.
- Educate your child in the self-management of their food allergy.
- Arrange for your child to carry their own EpiPen or know the location of an EpiPen.
- Encourage your child to:
  - Recognize safe and unsafe foods and do not share snacks, lunches, utensils, or drinks.
  - Read ingredient labels before eating food.
  - Understand the importance of hand washing before and after eating.
  - Inform others of their allergy and specific needs.
  - Report teasing or threats regarding their allergy to an adult authority.
- Empower your child to self-advocate in situations that might compromise their health.
- Review the Guidelines for Students with Severe Allergies periodically with your child.

## Guidelines for School Administration

Arlington Heights School District 25 Administrators assist school faculty in the prevention, care, and management of activities on behalf of students with food allergies. Faculty are encouraged to foster independence on the part of students based on the student's developmental level.

It is the responsibility of Arlington Heights School District 25 Administrators to:

- Review the District 25 Resource Guide for Supporting Students with Life-Threatening Allergies.
- Participate in in-service training on the identification of anaphylaxis, risk-reduction and emergency response procedures.
- Be knowledgeable about and follow applicable federal laws including ADA, IDEA, Section 504, FERPA and any state laws or district policies that apply to food allergies.
- Include students with food allergies in school activities. Students should not be excluded from school activities because of a food allergy.
- Arrange for annual training and education for faculty and staff regarding:
  - Allergies, insect stings, medications, latex, etc.;
  - Emergency and Risk reduction procedures;
  - How to administer an EpiPen for an emergency;
  - Special training for food service personnel and lunch/recess monitors.
- Provide a location for medications and provide emergency communication devices for all school activities, including gym, lunch, recess, and transportation that involve a student with life-threatening allergies.
- Communicate in a timely manner with school health personnel regarding field trips.
- Arrange for an allergen-free table in the lunchroom.
- Ensure that a contingency plan is in place for substitute teachers or food service personnel.
- Ensure that emergency health information regarding specific high-risk students is provided to all staff, including substitutes.
- Inform staff members to include the following statement in their sub folder, "You have a child with a severe allergy. Call the building nurse for specific details of the student's Health Care Plan. Do not eat lunch in the classroom if a child has a food allergy. Do not distribute food items without express permission from the building principal. The Health Office Extension number is\_\_\_\_\_." Include a photo of the student.
- Provide district approved cleaning products to classroom teachers and other school personnel.
- Ensure that an administrator or school nurse accompany the child to the hospital and contact parents if necessary.
- Plan for student transitions to the next grade level each spring for the next school year.
- Direct faculty and staff to not provide candy or food as rewards to children unless instructionally appropriate with parent notification of ingredients.

## Guidelines for School Nurses

Nurses assist the school team in both prevention of allergic-reactions and emergency care of children with food allergies. Nurses are encouraged to foster independence on the part of children, based on their developmental level.

It is the responsibility of Certified School Nurses to:

- Review the Resource Guide for Supporting Students with Life-Threatening Allergies.
- Contact parents to obtain required allergy-related forms. (Letter A) (Follow-up Letter B)
- Review allergy survey provided by parent. (Form B)
- Meet with the student at the beginning of the year to familiarize the student with the Health Office and review procedures in the event of an emergency.
- Identify staff members to work with parents and the student to establish an Individualized Health Care Plan, if appropriate.
- Work with the building 504 Coordinator, parents and school staff to create a 504 Plan, if the allergy has a significantly adverse impact on several educational domains.
- Post and label location of Individual Health Care Plans and emergency medications, e.g. EpiPen in the Health Office. EpiPens should be in a secure location, but should **not** be locked.
- Maintain and periodically check the roster of expiration dates and check allergy-related medications stored in the Health Office.
- Ensure substitute nurses have completed an orientation and have access to the nurse sub folder.
- Include severe allergy information in annual health review for staff, substitute training, and new staff training. Collect sign-in sheets to verify attendance.
- Provide necessary information to building administration and staff who have regular, sustained contact with students with life-threatening allergies. Information should include student names, risk factors, and medications.
- Be available to staff who are outside the building via a communication device.
- Provide an Allergy Action Plan and Medications Plan for students with severe, life threatening allergies when on field trips.
- If necessary, the administrator or school nurse should accompany the child to the hospital and contact parents.
- If the student has a severe reaction, review the plans with parents to make any necessary revisions and notify appropriate staff.

## Guidelines for Teachers

Teachers are an essential part of the school team in the prevention of allergic-reactions, care, and management of activities on behalf of students with food allergies. Educators are encouraged to foster independence on the part of students, based on their developmental level.

It is the responsibility of Teachers to:

- Review the District 25 Resource Guide for Supporting Students with Life-Threatening Allergies.
- Participate in in-service training on the identification of anaphylaxis, risk-reduction and emergency response procedures.
- Be familiar with the Individual Health Care Plan or 504 Plan of any student(s) in the classroom with life-threatening allergies.
- Keep the student's plan in an identified, accessible location.
- Participate in any team meetings and in-service training for the student with life-threatening allergies.
- Inform student teachers and classroom assistant(s) of the student with food allergies.
- Leave information for substitute teachers in an organized, prominent, and accessible format.
  - Follow building guidelines for subfolders.
  - Include the following allergy statement in front of folder: "You have a child with a severe, life-threatening allergy. Call the building nurse for specific details of the student's Health Care Plan. Do not eat lunch in the room if a child has a food allergy. Do not distribute food items without express permission from the building principal. The number for the Health Office is \_\_\_\_\_."
- Inform parents of the student with allergies in advance of any in-class events where any food will be served or used as a class activity. Work with parents to provide a safe alternative, if appropriate.
- Never question or hesitate to immediately initiate intervention if a student reports signs of an allergic reaction.
- Contact the nurse and/ or front office immediately if a student exhibits signs and symptoms of a severe allergic reaction. Immediacy is necessary, do not wait.
- Include information regarding a specific food allergy in a letter to all families at the beginning of the year. (Example Letter C)
- Pick up and return necessary forms and medications from the Health Office for a field trip.
- Use only district-approved cleaning products in the classroom.
- Clean up your desk and wash your hands after eating at your desk if there is a student with a food allergy on your team or in your class.
- Reinforce school guidelines on bullying and teasing to avoid the harassment of students with allergies.
- Be willing to administer an EpiPen, if necessary. If unable or unwilling, designate an alternate staff member.
- Designate a separate area where students with allergies may place their lunches.
- Do not allow a child experiencing symptoms of allergic reaction to board the school bus.
- Communicate field trip dates and information in advance.
- Restrict use of foods as instructional tools.

## Guidelines for Teachers - continued

It is the responsibility of Teachers to:

### Snack/Lunch Time

- Promote and encourage healthy snacks.
- If you discover an unknown, homemade or restricted food (as defined in the Individual Health Care Plan) in the classroom, intercede on behalf of the student with severe, life-threatening allergies.
- When necessary, have the students wipe down their own individual desks with district-approved cleaning supplies.
- Reinforce hand washing before and after eating.
- Work with parents to provide alternate snacks for students with allergies, if necessary.
- Create alternate snack locations for students who may have brought a restricted food for snack.

### Classroom Activities and School Day Events

- Restrict the presence of foods or food containers in classroom activities (e.g. arts and crafts, science projects, celebrations, sensory bins or other projects).
- Modify class materials to provide a safe alternative to the use of food.
- Parties and birthdays are to be celebrated at school without food.
- Make appropriate accommodations for children with allergies. Do not isolate or exclude a child because of allergies.
- Encourage the use of stickers, pencils, or other non-food items as rewards.
- If an animal visits the classroom, be attentive to potential allergies (e.g. dander) and to the animal's food (e.g. peanuts, soy or milk).
- Notify parents at least 2 days in advance of a classroom activity or event using food or animals. Work with the parents to provide a safe alternative or plan.
- Read labels and give consideration to the possible presence of allergic substances.

### Field Trips

- Collaborate with the nurse as part of the planning process for a field trip.
- Consider the risk of potential allergens when planning a field trip.
- Plan for the prevention of exposure to the student's life-threatening food during eating situations.
- Ensure health care plans and medications (EpiPen) are taken on field trips.
- Assign one staff member to the student to monitor their welfare and handle any emergency.
- Invite parents of student(s) at risk for a severe allergic reaction to accompany their child on school trips, however, the parent's presence at a field trip can not be required.
- Consider ways to wash hands before and after eating (e.g. hand wipes)
- Plan for the availability of a communication device.
- Be willing to administer medications (EpiPen) or designate a trained alternate to do so.
- Call 911 if you administer the EpiPen.
- Know your location when dialing 911.

## Guidelines for Coaches and Supervisors of School Funded Activities

It is the responsibility of Coaches and Supervisors to:

- Review the District 25 Resource Guide for Supporting Students with Life-Threatening Allergies.
- Participate in in-service training on the identification of anaphylaxis, risk-reduction and emergency response procedures.
- Provide the school nurse with a list of students who will participate in the activity.
- Review the Individual Health Care Plan or 504 Plan with the nurse for any indicated students.
- Clearly identify who is responsible for keeping the EpiPen or other medication and where it will be kept.
- Collect necessary equipment and medications from the student prior to the activity and return the medications to the student after the activity.
- Restrict the presence of food in extra-curricular activities (e.g. arts and crafts, celebrations).
- Notify parents in advance (2 days) of an activity using food. Work with parents to provide a safe alternative, if appropriate.
- Ensure that a communication device (e.g. walkie-talkie, cell phone) is always present.
- Do not remove Medic Alert identifications, you may cover with tape if necessary.
- Be willing to administer medications (EpiPen) and be trained in first aid procedures.
- Call 911 if you suspect a life-threatening allergic reaction.
- Call 911 if you administer the EpiPen.
- Know your location when calling 911.

## Guidelines for the Director of Food and Nutrition Services

The Food and Nutrition Services Department will promote sound food handling practices to reduce the cross-contamination with potential food allergens. The food service department cannot guarantee that food served in the general lunch program is free of specific allergens. Parents and students have access to reading food labels to identify the ingredients in the products used in the meal programs. If medically necessary as stated on the Annual Physician's Statement for Children Requiring Menu Modifications. (Form E), the Director of Food & Nutrition Services/Registered Dietitian will write a menu specific to your child's dietary needs. **It is ultimately the responsibility of the parent to decide whether the child will bring lunch to school, purchase the modified lunch menu, or make arrangements for the child to go home for lunch.**

It is the responsibility of the Director of Food and Nutrition Services to:

- Create individualized menu options, as medically necessary, for students with life-threatening allergies
- Review the District 25 Resource Guide for Supporting Students with Life-Threatening Allergies.
- Participate in training on the identification of anaphylaxis, risk-reduction and emergency response procedures.
- Train food and nutrition services employees on standard operating procedures of safe food handling pertaining to food allergies, such as cross-contamination.
- Ensure menus and product food labels are available on the district website for parents and students.
- Collaborate with the Director of Facilities Management regarding training of custodians on proper cleaning and sanitation pertaining to food allergies.
- Meet with parents to discuss the student's allergy and be a part of a student's plan, if necessary.
- Ensure that building level food and nutrition services staff have a list of students that have a modified meal requests on file due to life-threatening allergies.
- Provide modified menus for field trips, if requested.
- Include allergy information (EpiPen) in annual staff first aid review and substitute training.
- Avoid the use of latex gloves by food and nutrition service staff
- Collaborate with school nurses to share appropriate allergy-related information.

## **Guidelines for Recess and Lunchroom Monitors**

Staff responsible for monitoring lunch and/or recess shall be trained to recognize and respond to a severe allergic reaction or anaphylaxis.

It is the responsibility of Recess and Lunchroom Monitors to:

- Review the District 25 Resource Guide for Supporting Students with Life-Threatening Allergies.
- Participate in in-service training on the identification of anaphylaxis, risk-reduction and emergency response procedures.
- Review your role in a severe allergy situation with your certified school nurse.
- Know the location of EpiPens and other medications.
- Be aware that a student having an allergic reaction may withdraw, run, go to the washroom.
- Immediately contact the nurse and/or front office if a student with a life-threatening allergy demonstrates any symptom or expresses a complaint or concern.
- Provide emergency treatment, dial 911, then inform the principal if the nurse is not available. Allow only students whose parents have requested the allergen-free table to sit at the allergen-free table.
- Only an adult should clean the allergen-free table using only district approved cleansing agents.
- Supervise the thorough cleaning of all tables after lunch with district-approved products.
- Exempt students with food allergies from cleaning lunch tables.
- Encourage hand washing or use of hand wipes for students before and after eating.

## **Guidelines for the Transportation Department**

Ensure that the school bus contractor provides training for all school bus drivers on managing life-threatening allergies which includes calling 911 in an emergency. District allergy guidelines for taxi or bus drivers will be shared annually.

It is the responsibility of the school bus or taxi drivers to:

- Call 911 when an allergic reaction is suspected.
- Maintain a policy of no food consumption allowed on school buses or taxis. Exceptions may include field trips, etc., with permission of the principal.



DEPARTMENT OF STUDENT SERVICES 1200 S. Dunton Ave, Arlington Heights, IL 60005 847.758.4875

Dear Parents or Guardians,

On the annual emergency form, you indicated that your child has a possible life-threatening allergy. Please review the enclosed Allergy Resource Guide including the Student and Parent Responsibilities.

Please complete and submit the following forms annually:

- Annual Severe Allergy Survey - Parent Information (Form A)
- Physician's Allergy Action Plan (Form B) **requires physician signature**
- Epinephrine or Benadryl Carry or Self-Administration Form (Form C) **requires physician signature**
- Elementary School Lunchroom Table Preference Form (Form D)
- Annual Modified Meal Request Form (Form E) **requires physician signature**. Note: This form is only required if you intend for your child to eat school meals.

It is our goal to ensure a safe and supportive environment for all of our students. Public Act 96-0349 addresses safe and supportive environments for students with life-threatening allergies or chronic illnesses. Public Act 96-0349 requires school districts to annually inform parents of students with life-threatening allergies or life-threatening chronic illnesses of the applicable provisions of Section 504 of the Rehabilitation Act of 1973 and other applicable federal statutes, state statutes, federal regulations and state rules. The intent of this notice is to inform you of your student's rights and protections that promote safe participation in school.

Section 504 protects students from discrimination due to a disability that substantially limits a major life activity. If a student is suspected of having a qualifying disability under Section 504, the school will convene a Section 504 team to determine eligibility and as needed, appropriate support and services to address the student's individual needs. Under Section 504, a student with a physical or mental impairment which substantially limits a major life activity, such as caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing and learning, may meet the definition of a student with a disability. If the student has a qualifying disability, the 504 team will look at how the disability limits access to school programs and whether the student is eligible for protection from discrimination under Section 504. If the student is protected under Section 504, an individualized Section 504 Plan will be developed and implemented to provide the needed supports so that the student can access his or her education as effectively as students without disabilities.

Not all students with life-threatening allergies and life-threatening chronic illnesses may be eligible under Section 504. Our school district also may be able to appropriately meet a student's needs through the Educational Support System with an Individualized Health Care Plan (IHCP).

Other students may not only be protected by Section 504, but may also be eligible for special education. The Section 504 coordinator or nurse can assist with a referral to the special education administrator.

Your prompt submission of the required annual forms is greatly appreciated. If you have any questions or concerns, please do not hesitate to contact me.

Sincerely,  
School Administrator  
cc: Certified School Nurse



THOMAS | GREENBRIER | IVY HILL | OLIVE | PATTON  
SOUTH | DRYDEN | WESTGATE | WINDSOR

DEPARTMENT OF STUDENT SERVICES 1200 S. Dunton Ave, Arlington Heights, IL 60005 847.758.4875

Dear Parents or Guardians,

This is the SECOND and FINAL notice regarding the annual emergency form indicating that your child has a possible life-threatening allergy. Review the enclosed Allergy Resource Guide including the Student and Parent Responsibilities.

Please complete and submit the following forms annually:

- Annual Severe Allergy Survey - Parent Information (Form A)
- Physician's Allergy Action Plan (Form B) **requires physician signature**
- Epinephrine or Benadryl Carry or Self-Administration Form (Form C) **requires physician signature**
- Elementary School Lunchroom Table Preference Form (Form D)
- Annual Modified Meal Request Form (Form E) **requires physician signature.** Note: This form is only required if you intend for your child to eat school meals.

It is our goal to ensure a safe and supportive environment for all of our students. Public Act 96-0349 addresses safe and supportive environments for students with life-threatening allergies or chronic illnesses. Public Act 96-0349 requires school districts to annually inform parents of students with life-threatening allergies or life-threatening chronic illnesses of the applicable provisions of Section 504 of the Rehabilitation Act of 1973 and other applicable federal statutes, state statutes, federal regulations and state rules. The intent of this notice is to inform you of your student's rights and protections that promote safe participation in school.

Section 504 protects students from discrimination due to a disability that substantially limits a major life activity. If a student is suspected of having a qualifying disability under Section 504, the school will convene a Section 504 team to determine eligibility and as needed, appropriate support and services to address the student's individual needs. Under Section 504, a student with a physical or mental impairment which substantially limits a major life activity, such as caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing and learning, may meet the definition of a student with a disability. If the student has a qualifying disability, the 504 team will look at how the disability limits access to school programs and whether the student is eligible for protection from discrimination under Section 504. If the student is protected under Section 504, an individualized Section 504 Plan will be developed and implemented to provide the needed supports so that the student can access his or her education as effectively as students without disabilities.

Not all students with life-threatening allergies and life-threatening chronic illnesses may be eligible under Section 504. Our school district also may be able to appropriately meet a student's needs through the Educational Support System with an Individualized Health Care Plan (IHCP).

Other students may not only be protected by Section 504, but may also be eligible for special education. The Section 504 coordinator or nurse can assist with a referral to the special education administrator.

Your prompt submission of the required annual forms is greatly appreciated. **Without your cooperation and information, we are not able to plan as effectively for your child's safety.**

Sincerely,  
School Administrator  
cc: Certified School Nurse



THOMAS | GREENBRIER | IVY HILL | OLIVE | PATTON  
SOUTH | DRYDEN | WESTGATE | WINDSOR

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DEPARTMENT OF STUDENT SERVICES 1200 S. Dunton Ave, Arlington Heights, IL 60005 847.758.4875

Dear Parents,

One of the students in our classroom has a life-threatening allergy to **[allergen]**.

We need your assistance to provide the safest environment for this student. All **[allergen]** and products containing them are prohibited in our classroom.

To provide the safest environment for the child with the allergy, please do your part by complying with the following procedures:

- Do not send any **[allergens]**, products containing **[allergens]** or items that may have been processed with **[allergen]** into the classroom. Please read food labels to familiarize yourself with the contents.
- Do not send containers that have contained **[allergen]** into the classroom even if these containers have been washed.
- After your child eats **[allergen]** products, please have your child thoroughly wash their hands with soap and water before coming to school. It is important that **[allergen]** residue is not on a child's hands when they handle common school books and equipment.
- If your child rides the bus, remind them that there is a "no eating on the bus" policy.
- Remind your child not to offer, share, or exchange any foods with other students at school.

Thank you for your help and cooperation.

Please contact me if you have any questions.

Sincerely,

Teacher



ANNUAL SEVERE ALLERGY PARENT SURVEY

TO BE COMPLETED BY PARENT OR GUARDIAN

Name of Student (Last, First): \_\_\_\_\_

School: \_\_\_\_\_ Grade : \_\_\_\_\_

**I understand it is my responsibility to renew this form before each school year and any time my child's medical needs change.**

Parent/Guardian Name: \_\_\_\_\_ Date: \_\_\_\_\_

ALLERGEN

My child is allergic to: \_\_\_\_\_

My child reacts to the allergen when they:  eat it  inhale it  touch it  other \_\_\_\_\_

My child had their first allergic reaction at age: \_\_\_\_\_

My child's most recent allergic reaction was on this date: \_\_\_\_\_

Describe the symptoms of an allergic reaction that your child had in the past:

- itching, tingling, or swelling of lips, tongue, mouth
- hives, itchy rash, swelling of the face or extremities
- nausea, abdominal cramps, vomiting, diarrhea
- tightening of throat, hoarseness, hacking cough
- shortness of breath, repetitive coughing, wheezing
- fainting, pale, blueness
- other \_\_\_\_\_

Allergic Reaction Treatment:

Has your child seen a physician for this allergy?  no  yes  
If yes, describe the medical treatment provided: \_\_\_\_\_

Physician Name: \_\_\_\_\_

Has your child received care in the emergency room for an allergic reaction?  no  yes  
If yes, describe the medical treatment provided: \_\_\_\_\_

How do you treat allergic reactions at home? \_\_\_\_\_

Does your child have an epinephrine auto-injector at home?  no  yes  
If yes, does your child know how to use the epinephrine auto-injector?  no  yes

Any other suggestions for school staff to do in response to your child having an allergic reaction? \_\_\_\_\_

May we share your child's allergy information with their classmates?  no  yes

# ILLINOIS FOOD ALLERGY EMERGENCY ACTION PLAN AND TREATMENT AUTHORIZATION

Child's  
Photograph

NAME: \_\_\_\_\_ D.O.B: \_\_\_\_/\_\_\_\_/\_\_\_\_

TEACHER: \_\_\_\_\_ GRADE: \_\_\_\_\_

ALLERGY TO: \_\_\_\_\_

Asthma:  Yes (higher risk for a severe reaction)  No

Weight: \_\_\_\_\_ lbs

## ANY SEVERE SYMPTOMS AFTER SUSPECTED INGESTION:

LUNG: Short of breath, wheeze, repetitive cough  
HEART: Pale, blue, faint, weak pulse, dizzy, confused  
THROAT: Tight, hoarse, trouble breathing/swallowing  
MOUTH: Obstructive swelling (tongue)  
SKIN: Many hives over body

Or Combination of symptoms from different body areas:

SKIN: Hives, itchy rashes, swelling  
GUT: Vomiting, crampy pain

## INJECT EPINEPHRINE IMMEDIATELY

- Call 911
- Begin Monitoring (see below)
- Additional medications:
- Antihistamine
- Inhaler (bronchodilator) if asthma

\*Inhalers/bronchodilators and antihistamines are not to be depended upon to treat a severe reaction (anaphylaxis) → Use Epinephrine.\*

\*\*When in doubt, use epinephrine. Symptoms can rapidly become more severe.\*\*

## MILD SYMPTOMS ONLY

Mouth: Itchy mouth  
Skin: A few hives around mouth/face, mild itch  
Gut: Mild nausea/discomfort

## GIVE ANTIHISTAMINE

- Stay with child, alert health care professionals and parent.

**IF SYMPTOMS PROGRESS (see above), INJECT EPINEPHRINE**

- If checked, give epinephrine for ANY symptoms if the allergen was likely eaten.
- If checked, give epinephrine before symptoms if the allergen was definitely eaten.

## MEDICATIONS/DOSES

EPINEPHRINE (BRAND AND DOSE): \_\_\_\_\_

ANTIHISTAMINE (BRAND AND DOSE): \_\_\_\_\_

Other (e.g., inhaler-bronchodilator if asthma): \_\_\_\_\_

**MONITORING: Stay with the child. Tell rescue squad epinephrine was given. A second dose of epinephrine can be given a few minutes or more after the first if symptoms persist or recur. For a severe reaction, consider keeping child lying on back with legs raised. Treat child even if parents cannot be reached.**

- Student may self-carry epinephrine
- Student may self-administer epinephrine

CONTACTS: Call 911 Rescue squad: (\_\_\_\_) \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Ph: (\_\_\_\_) \_\_\_\_\_

Name/Relationship: \_\_\_\_\_ Ph: (\_\_\_\_) \_\_\_\_\_

Name/Relationship: \_\_\_\_\_ Ph: (\_\_\_\_) \_\_\_\_\_

Licensed Healthcare Provider Signature: \_\_\_\_\_ Phone: \_\_\_\_\_ Date: \_\_\_\_\_  
(Required)

I hereby authorize the school district staff members to take whatever action in their judgment may be necessary in supplying emergency medical services consistent with this plan, including the administration of medication to my child. I understand that the Local Governmental and Governmental Employees Tort Immunity Act protects staff members from liability arising from actions consistent with this plan. I also hereby authorize the school district staff members to disclose my child's protected health information to chaperones and other non-employee volunteers at the school or at school events and field trips to the extent necessary for the protection, prevention of an allergic reaction, or emergency treatment of my child and for the implementation of this plan.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**DOCUMENTATION**

- Gather accurate information about the reaction, including who assisted in the medical intervention and who witnessed the event.
- Save food eaten before the reaction, place in a plastic zipper bag (e.g., Ziploc bag) and freeze for analysis.
- If food was provided by school cafeteria, review food labels with head cook.
- Follow-up:
  - Review facts about the reaction with the student and parents and provide the facts to those who witnessed the reaction or are involved with the student, on a need-to-know basis. Explanations will be age-appropriate.
  - Amend the Emergency Action Plan (EAP), Individual Health Care Plan (IHCP) and/or 504 Plan as needed.
  - Specify any changes to prevent another reaction.

**TRAINED STAFF MEMBERS**

Name: \_\_\_\_\_ Room: \_\_\_\_\_

Name: \_\_\_\_\_ Room: \_\_\_\_\_

Name: \_\_\_\_\_ Room: \_\_\_\_\_

**LOCATION OF MEDICATION**

Student to carry

Health Office/Designated Area for Medication

Other: \_\_\_\_\_

**ADDITIONAL RESOURCES**

**American Academy of Allergy, Asthma and Immunology (AAAAI)**  
 414.272.6071  
<http://www.aaaai.org>  
[http://www.aaaai.org/patients/resources/fact\\_sheets/food\\_allergy.pdf](http://www.aaaai.org/patients/resources/fact_sheets/food_allergy.pdf)  
[http://www.aaaai.org/members/allied\\_health/tool\\_kit/ppt/](http://www.aaaai.org/members/allied_health/tool_kit/ppt/)

**Children's Memorial Hospital**  
 800.543.7362 (800.KIDS DOC@)  
<http://www.childrensmemorial.org>

**Food Allergy Initiative (FAI)**  
 212.207.1974  
<http://www.falusa.org>

**Food Allergy and Anaphylaxis Network (FAAN)**  
 800.929.4040  
<http://www.foodallergy.org>

**This document is based on input from medical professionals including Physicians, APNs, RNs and certified school nurses. It is meant to be useful for anyone with any level of training in dealing with a food allergy reaction.**



**Epinephrine or Benadryl Carry and Self-Administration Permission Form**

**TO BE COMPLETED BY PARENT OR GUARDIAN**

Name of Student (Last, First): \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

**I understand it is my responsibility to renew this form before each school year and any time my child's medical needs change.**

**NOTE: It is beneficial to have a second Epinephrine Injector kept in the school nurse's office.**

**TO BE COMPLETED BY PARENT OR GUARDIAN**

I hereby request Arlington Heights School District 25 personnel allow my child to carry and/or potentially use an epinephrine injector or Benadryl.

My child knows how to self-administer the prescribed auto-injector or Benadryl, and when to tell an adult if they suspect the onset of an allergic reaction. Although my child knows how to self-administer the epinephrine auto-injector, they may be unable to do so in the event of an allergic reaction. In that situation, trained school staff will administer the medication and will immediately call 911.

I give permission for my child to:  carry  self-administer

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**TO BE COMPLETED BY PHYSICIAN**

I hereby request Arlington Heights School District 25 personnel allow my patient to carry and/or potentially use an epinephrine injector or Benadryl.

My patient knows how to self-administer the prescribed auto-injector or Benadryl, and when to tell an adult if they suspect the onset of an allergic reaction. Although my patient knows how to self-administer the epinephrine auto-injector, they may be unable to do so in the event of an allergic reaction. In that situation, trained school staff will administer the medication and will immediately call 911.

I give permission for my patient to:  carry  self-administer

Medication \_\_\_\_\_ Dosage: \_\_\_\_\_

Directions \_\_\_\_\_

Physician Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Physician Signature \_\_\_\_\_ Date \_\_\_\_\_



ELEMENTARY SCHOOL LUNCH ROOM TABLE PREFERENCE

TO BE COMPLETED BY PARENT OR GUARDIAN

Name of Student (Last, First): \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

**I understand it is my responsibility to renew this form before each school year and any time my child's medical needs change.**

TO BE COMPLETED BY PARENT OR GUARDIAN

For students who have a life-threatening allergy, Arlington Heights School District 25 will provide an allergen-aware table at lunch.

- If you request an allergen-aware table, staff will reserve a seat for your child at an allergen-aware table.
- If you wish to change your preference, submit a written notification.
- Please note that your child will sit at the allergen-aware table until this form is returned.

I give permission for my child to sit at the:  allergen-aware table  regular lunchroom table

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



ANNUAL MODIFIED MEAL REQUEST FORM

TO BE COMPLETED BY PARENT OR GUARDIAN

Name of Student (Last, First): \_\_\_\_\_

School: \_\_\_\_\_

Grade (22/23 SY): \_\_\_\_\_

Parent/Guardian Contact Name: \_\_\_\_\_

Contact(s) Phone: \_\_\_\_\_ Contact(s)Email: \_\_\_\_\_

My child will require a menu modification at the following meal services:  Lunch  Breakfast (only available at select schools)

**I understand it is my responsibility to renew this form before each school year and any time my child's medical or health needs change.**

Parent/Guardian Name PRINTED \_\_\_\_\_

Parent/Guardian SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

TO BE COMPLETED BY MEDICAL AUTHORITY

The Dietary Needs below are related to (ex: Celiac Disease, Lactose Intolerance)

Food To BE OMITTED from diet\* (check appropriate boxes below)

- Milk** – Fluid milk, cheese, yogurt, and other dairy ingredients such as casein and whey.
- Fluid Milk** – Milk to drink
- Peanuts** – Peanuts, Peanut Butter, Peanut oil.
- Tree Nuts** – Almonds, hazelnuts, and cashews.
- Wheat** – Wheat-based grains such as buns, crackers, pasta, and wheat as an ingredient.
- Gluten** – Wheat, rye, barley, and non-certified oats.
- Fish** – Fin-fish such as cod and tilapia
- Shellfish** – Shrimp and crab
- Egg** – Visible egg in a dish such as an omelet
- Egg Ingredients** – Visible egg in a dish and egg as an ingredient
- Soybean** – Food items such as Textured Soy Protein (TSP), Textured Vegetable Protein (TVP), tofu, whole soybeans (edamame).
- Soybean Ingredients** – TSP, TVP, soy protein concentrate, soy protein isolate, soy sauce, soy flour, unrefined soy bean oil, tofu.
- Sesame** – sesame as an ingredient.
- Other** - \_\_\_\_\_

*\*Examples of individual food allergens provided are not all-inclusive, other foods may apply.*

Food Management Plan

What are the student's possible reactions to the indicated allergen(s) or conditions?

**REQUIRED** List all acceptable safe food substitutes:

Additional Comments:

\_\_\_\_\_  
Prescribing Physician/Medical Authority Name Printed

\_\_\_\_\_  
Prescribing Physician/Medical Authority Signature

## GLOSSARY

Acute- Symptoms that occur suddenly and have a short and fairly severe course.

Adrenaline- Synonym for epinephrine.

Allergen- A substance that can cause an allergic reaction. For some students, milk is an allergen.

Allergic Reaction- An immune system response to a substance that itself is not harmful but that the body interprets as harmful. When an allergen is eaten, the food allergic student produces histamine. Once the histamine is released in the body it causes chemical reactions which trigger inflammatory reactions in the skin (itching, hives, rash), the respiratory system (cough, difficulty breathing, wheezing) the gastrointestinal tract (vomiting, diarrhea, stomach pain), and the cardiovascular system (lowered blood pressure, irregular heartbeat, shock). Each person with a food allergy reacts to the allergy differently. Each reaction by a food-allergic student may differ in symptoms.

Allergy Warning Label- A bright colored label placed on the substitute teacher's folder in the classroom alerting the substitute to look for information in the folder regarding the food allergic student.

Anaphylactic Reaction- Synonym for Anaphylaxis.

Anaphylaxis- An immediate potentially life-threatening allergic reaction. The most dangerous symptoms include breathing difficulties, and a drop in blood pressure or shock, which can be fatal. Asthmatic students are at an increased risk for anaphylaxis. Anaphylaxis often involves various areas of the body at once such as the skin (itching, hives, rash), the respirator system (cough, difficulty breathing, wheezing) the gastrointestinal tract (vomiting, diarrhea, stomach pain), and the cardiovascular system (lowered blood pressure, irregular heartbeat, shock). The drug to immediately use to abate anaphylaxis is Epinephrine (i.e. EpiPen or EpiPen Jr).

Antihistamine- A drug that stops histamine from being released in the body during an allergic reaction. Benadryl is an example of an antihistamine.

Asthma- A disease of the lungs in which there is widespread narrowing of airways. The airways become clogged with mucus. Students with asthma and food allergy appear to be at an increased risk for fatal anaphylaxis. Epinephrine is still the first-line of defense for an anaphylactic reaction.

Chronic- Symptoms that occur frequently or last a long time.

Consumer Hotline - Major food distributors toll-free numbers, found on packaging, can be used to check for additional information on ingredients in a food or the foods processing procedures (e.g. cross- contamination).

Cross Contamination- When a pan, utensil, or food that is a known allergen comes in contact with a food that is allergen free it contaminates it. The allergen free food is now unsafe for a student allergic to the food it was contaminated with.

Emergency Action Plan- Part of the 504 Plan. It is a specific protocol which explains exactly what steps are taken if a child has an allergic reaction. It usually has the student's recent photograph on the plan.

EpiPen- By prescription only. It is a device that, once activated, will automatically inject one measured dose of epinephrine when jabbed into the thigh. It looks like a black magic marker. The EpiPen is contained in an orange cylindrical container as the medicine is light sensitive. Once out of the container, the EpiPen's gray cap is removed and it is activated and ready to use. It is firmly jabbed, with black tip, on the allergic student's outer

thigh. After a 10 second hold, the EpiPen is removed and the area is massaged. If the needle is projecting from the thick black tip of the EpiPen, then the medicine has been injected. If no needle appears, then jab again. An EpiPen simply abates allergic symptoms for 15-20 minutes. Symptoms may reappear if prompt medical attention is not given to the allergic student. Always call for emergency personnel when epinephrine is given.

EpiPen Jr.- It operates the same as the EpiPen. It has the same medicine as in the EpiPen but at a lower dose for lighter weight children. Like the EpiPen, it delivers one dose only. The newer EpiPen Jr. has green packaging which distinguishes it from the yellow EpiPen. Always call for emergency personnel when epinephrine is given.

Epinephrine Auto-Injector- The medicine contained in the EpiPen, and EpiPen Jr. and Auvi-Q (most common brand name varieties). The drug of choice for anaphylaxis. It is the first medicine that should be used in the emergency management of a child having a potentially life-threatening allergic reaction. It is synonymous with adrenaline. There are no contraindications to the use of epinephrine for a life-threatening allergic reaction. Always call for emergency personnel when epinephrine is given.

FAAN- Acronym for the Food Allergy and Anaphylaxis Network that has educational material on food allergies. Each school nurse has FAAN's School Food Allergy Program.

504 Plan- Refers to a section in the Rehabilitation Act of 1973 which prohibits discrimination against a qualified handicapped individual by any program that receives federal funds. It is a legal document. It confers rights upon the parents by establishing a grievance procedure if the parents and school team do not agree on an issue in the Plan or if the Plan is violated. The parents are entitled to a due process hearing if the Plan is violated. The parents are entitled to a due process hearing if the grievance cannot be eliminated through the school channels. There are administrative and federal court procedures. A 504 Plan encompasses the student's Emergency Action Plan and Individual Health Care Plan, and any other documents the parents and school deem relevant.

Food Allergy- An immune system response to a certain food. Upon ingestion, the body creates antibodies to that food. When the antibodies react with the food, histamine and other chemicals are released from cells. The release of those chemicals may cause hives, difficulty breathing, or other symptoms of an allergic reaction.

Hand Wipes/Wipes- Wipes do not have the proper chemical composition to remove allergens from the skin.

Histamine- A chemical released by the body during an allergic reaction, causing allergic reaction symptoms.

Hives- Itchy, red, mosquito-like bumps that appear anywhere on the skin, a symptom of an allergic reaction.

Individual Health Care Plan- A detailed protocol developed between the school and the student's parents, which includes but is not limited to precautions and emergency procedures for the food allergic student.

Latex- A synthetic rubber. It is an allergen for some people. It is commonly found in rubber gloves and balloons.

Life-Threatening Food Allergy- Students with allergies have over-reactive immune systems. The immune system produces chemicals and histamine which cause the severe symptoms in the body (e.g., swelling, breathing difficulty or shock). See Allergic Reaction, above. Epinephrine found in an epinephrine auto-injector the EpiPen is the recommended treatment.

Medic Alert Bracelet/Necklace- A necklace or bracelet worn by an allergic student that states the allergens and gives a telephone number for additional information.

Periodic Anaphylaxis Drill- Practice in procedures that would be carried out if there were an anaphylactic emergency. The drill may include but is not limited to: who helps the student, who retrieves the epinephrine auto-injector EpiPen or administers it, who calls 9-1-1, and who directs the paramedics to the child.