

Holy Family Regional Catholic School

3265 Concord Road · Aston, Pennsylvania 19014 610-494-0147 · www. holyfamilyaston.org

Food/Allergy Fact Sheet

Please complete this form, and return it with your registration packet. This information will be shared with appropriate school staff to help minimize and manage a food allergy attack at school. If your child requires medication, please have your physician sign helps.

| CHILD'S NAME: G | | | ADE: | - | |
|------------------|--|-------------------------------|----------------------------|--------------|------|
| TAKEN MOUARDIAN: | | | CELL PHONE: | | |
| HEALT | TH CARE PROVIDER: | | | PHONE: | |
| | E INDICATE IF YOUR CHILD HAS | | | | NO |
| IF YOU | HAVE MARKED YES, PLEASE C | OMPLETE THE REST OF | THIS FORM: | | |
| 1, | Briefly describe what causes your ca | hild's food allergy symptom | s. My child is allergic to | : | |
| 2. | What sort of food allergy reaction h | as your child had in the past | ? | | |
| 3. | Has your child had allergy testing done by a physician specialist? | | | | |
| 4, | Has your child ever had an anaphyla Please describe in detail | | | | |
| 5. | Is your child's reaction triggered by | | | No | |
| 6, | Does your child have a reaction whe | n the food in question is tou | ched? Yes | _ No | |
| 7. | Do you have a food allergy plan from your Doctor? If yes, please give a copy to your school nurse as soon as possible. YesNo | | | | |
| 8. | If applicable, does your child know how to administer an epi-pen? YesNo | | | | |
| 9. | Does your child understand their food allergy and know enough to avoid obvious sources of the allergen? YesNo Please explain, | | | | |
| 10. | Does your child know of products with likely hidden sources of the allergen? | | | | |
| 11. | Will your child, most likely, avoid eating foods not provided by home, or labeled with the offending allergen? | | | | |
| MERG | ENCY MEDICATION PLAN: | | | | |
| | NAME OF MEDICATION | DÖSAGE | INSTRUCTIONS FOR | LUŞE | |
| | | | | · | |
| ŒĂLTI | H CARE PROVIDER SIGNATURE | DATE | PARENT/GUARDI | AN SIGNATURE | DATE |

Penn Delco School Nurses are experienced at identifying signs of anaphylaxis and fully understand the danger of hidden food allergen sources. Penn Delco School Nurses will follow your physician's orders regarding the medication protocol. In the event that epinephrine is administered, we will make every attempt to notify parents and the student will rapidly be transported via ambulance to the nearest hospital for further monitoring. To better help your child, please let the school nurse know of changes in your child's food allergy or medication schedules.