

WORKSHEET 15 INFORMATION FOR SCHOOL STAFF

With the help of members of your child's healthcare team, complete this worksheet and share it with your child's teacher, school nurse and/or school administration.

Disclaimer: This worksheet is intended to act as an informal guide for helping you communicate your child's needs to his or her teacher, school nurse, and/or school administration. This worksheet is not a formal Individualized Education Plan (IEP) or 504 Plan.

STUDENT INFORMATION

Name: _____

Grade: _____

Date of Birth: _____

Teacher: _____

PARENT(S)/GUARDIAN(S)

Name: _____

Name: _____

Phone: _____

Phone: _____

Phone: _____

Phone: _____

Email: _____

Email: _____

EMERGENCY CONTACT

Name: _____

Phone: _____

Relation: _____

Email: _____

Phone: _____

EMERGENCY CONTACT (Secondary)

Name: _____

Phone: _____

Relation: _____

Email: _____

Phone: _____

HEALTHCARE PROVIDER

Name: _____

Phone: _____

Hospital: _____

Email: _____

Requested Accommodations

- Permission to wear a hat, scarf or other head covering
- Snacks in classroom
- Water, sports drinks or other liquids in classroom
- Additional bathroom breaks
- Gel or liquid hand sanitizer at student's desk
- Space to rest, as needed
- Additional time for changing classes
- Extra set of books to keep at home
- Other _____
- Other _____

Restrictions for Physical Education (PE)/Recess

- YES (Explain) NO

Immediately Alert the Parent/Guardian to Any of the Following:

- A fever of 100.4°F or higher
- Exposure to illness at school (For example, chicken pox, flu, strep throat, pink eye, etc.)
- Active bleeding, including nosebleed, bruising, or blood in urine or stools
- Central line issues including swelling, puss, redness or pain
- New or worsening signs and/or symptoms (For example, nausea, vomiting, diarrhea, fatigue)
- Other: _____
- Other: _____

Tips to Reduce Risk of Illness and Infection in the Classroom

- Provide frequent opportunities for students to wash their hands.
 - Students should wash hands with warm soap and water for 20 seconds.
 - Students should always wash hands after using the restroom, before and after eating, after recess or PE, after being outside, and after coughing or sneezing.
- Teach students to cover their mouths or noses with tissue when coughing or sneezing. If no tissue is available, they should cough or sneeze into their elbow or upper arm, not into their hands.
- Make gel or liquid hand sanitizer available in the classroom.
- Use disinfecting wipes to wipe down desks and school supplies.

Medication Information

Student Name: _____ Date of Birth: _____

Grade: _____ Teacher: _____

Medication Name: _____

Start Date: _____ End Date: _____

Condition for which medication is being administered

Type (for example, pill, liquid, injection)

Pill/Tablet Liquid Injection Topical Inhaler

Required Dosage: _____

Time/Frequency of Administration: _____

If PRN (as needed), for what signs and/or symptoms: _____

If PRN, how soon can the dosage be repeated? _____

Side-effect information (For example, expected side effects and/or side effects that require emergency medical help)

Additional information (For example, take with food)

Prescribing Provider:

Phone: _____

Pharmacy: _____

Phone: _____