WISCONSIN DEPARTMENT OF PUBLIC INSTRUCTION

CHILDREN WITH DISABILITIES AND SPECIAL DIETARY RESTRICTIONS

A. *Rehabilitation Act of 1973* and the *Americans with Disabilities Act*

Under Section 504 of the *Rehabilitation Act of 1973* and the *Americans with Disabilities Act* Amendments Act (ADAAA) of 2008, "a person with a disability" means any person who has a physical or mental impairment which substantially limits one or more major life activities or major bodily functions, has a record of such an impairment, or is regarded as having such an impairment.

Major life activities include, but are not limited to, caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working. A major life activity also includes the operation of a major bodily function, including but not limited to, functions of the immune system, normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine, and reproductive functions.

Please refer to these Acts for more information at http://www.dol.gov/oasam/regs/statutes/sec504.htm and http://www.eeoc.gov/laws/statutes/adaaa.cfm, respectively.

B. Individuals with Disabilities Education Act

A child with a "disability" under Part B of the *Individuals with Disabilities Education Act* (IDEA) is described as a child evaluated in accordance with IDEA as having one or more of the recognized thirteen disability categories and who, by reason thereof, needs special education and related services. The IDEA can be found in its entirety at http://nichcy.org/wp-content/uploads/docs/IDEA2004regulations.pdf.

The Individualized Education Program (IEP) is a written statement for a child with a disability that is developed, reviewed, and revised in accordance with the IDEA and its implementing regulations. When nutrition services are required under a child's IEP, school officials need to make sure that school food service staff is involved early in decisions regarding special meals. If an IEP or 504 plan contain the same information that is required on a medical statement, then it is not necessary to get a separate medical statement from a licensed medical practitioner.

C. Licensed Medical Practitioner's Statement for Children with Disabilities

U.S. Department of Agriculture (USDA) regulations 7 CFR Part 15b require substitutions or modifications in school meals for children whose disabilities restrict their diets. School food authorities must provide modifications for children with disabilities on a case-by-case basis when requests are supported by a written statement from a state licensed medical practitioner.

The licensed medical practitioner's statement must identify:

- an explanation of how the child's physical or mental impairment restricts the child's diet;
- the food(s) to be avoided; and
- the food or choice of foods that must be substituted.

The second page of this document ("Medical Statement for Special Dietary Needs") may be used to obtain the required information from the licensed medical practitioner.

"Practitioner" is defined by Wisconsin State Statute 118.29(1) (e): "Practitioner" means any physician, dentist, optometrist, physician assistant, advanced practice nurse prescriber, or podiatrist licensed in any state. If the documentation to support a dietary accommodation has not been signed by one of these practitioners, the school is not required to accommodate the request (unless information about the dietary need is included within the IEP or 504 plan, as mentioned above in Section B.)

D. Other Special Dietary Needs

School food service staff may make food substitutions for individual children for whom they do not have a medical statement from a practitioner. It is strongly recommended, though not required, that schools have documentation on file from any medical authority for students with dietary needs for whom they are making menu modifications within the meal pattern. Such determinations are only made on a case-by-case basis and all accommodations must be made according to USDA's meal pattern requirements.

Updated 01/17

Medical Statement for Special Dietary Needs

Please read page 1 before completing this form.

Student's Name	Student's PIN/ID Number	Age*
Name of School*	**Grade Level***	**Classroom***

*Please include information that is accurate as of the time of this form's submission.

1. How does the child's physical or mental impairment restrict his or her diet?

2. Please complete all of the sections below that are applicable to the child.

Allergies and Celiac Disease	What food(s)/type(s) of food should be omitted? Please be specific.	
	List foods to be substituted. (Avoid specific brand names, if possible.)	
Diabetes Mellitus	Please describe any modifications necessary to accommodate the child's needs.	
Texture Modifications	The child requires that all foods be: ☐ Pureed ☐ Diced/finely ground ☐ Chopped/cut into bite-sized pieces	Liquids should be: ☐ Pudding thick ☐ Honey thick ☐ Nectar thick ☐ Thin/normal consistency
Other	What food(s)/type(s) of food should be omitted? Please be specific.	
	List foods to be substituted.	

3. Additional comments:

Parent's Signature	Date
Parent's Name (Please Print)	Phone Number

Signature Below Required (See section C, page 1) Please check the appropriate title:	□ Physician □ Physician Assistant	□ Nurse Practitioner □ Podiatrist	□ Dentist □ Optometrist
Medical Practitioner's Signature & Date			
Medical Practitioner's Name, Title, & Phone Number (Please Print)			