Special Dietary Needs – How to Request Accommodations

United States Department of Agriculture (USDA) Child Nutrition Programs support access to healthy meals to all children, including children with disabilities who have special dietary needs. Under the law, a disability is an impairment which substantially limits a major life activity. This can include allergies and digestive conditions but does not include personal diet preferences.

To request meal accommodations, follow these steps:

- Have the following "Request for Special Dietary Accommodation" form completed and signed by a State-recognized medical authority, a licensed health care professional authorized to write medical prescriptions in Washington, or a Registered Dietitian:
    - Medical Doctor (MD)
    - Doctor of Osteopathy (DO)
    - Physician's Assistant (PA) with prescriptive authority
    - Naturopathic Physician
    - Advanced Registered Nurse Practitioner (ARNP)
    - Registered Dietitian (RD or RDN)(not allowed for summer meals)
- The request for meal modifications must include:
    - Food(s) to be omitted/avoided from the child's diet
    - How the ingestion of the food impacts the child
    - Food(s) to be substituted
- Return the completed form to your child's school nurse.
- Contact your child's school nurse to request to receive accommodations while waiting for the completed documentation from your medical authority.

Request for Special Dietary Accommodations

Student / Participant Name	Date of Birth
Parent / Guardian Name	Phone
Mailing Address	City/State/Zip
School / Center / Site	Grade / Classroom
Signature of Parent/Guardian	Date

Diet Order

Federal law and USDA regulation require nutrition programs to make reasonable modifications to accommodate children with disabilities. Under the law, a disability is an impairment which substantially limits a major life activity or bodily function, which can include allergies and digestive conditions, but does not include personal diet preferences.

1. **Describe how the impairment affects the child** (i.e, how the ingestion/contact with the food impacts the child):

2. **Explain what must be done to accommodate the child's diet** (i.e, specific food(s) to be omitted/avoided from the child's diet):

3. **List food(s) and/or beverages to be substituted, provided, or modified:**

Signature of State-Recognized Medical Authority* or Registered Dietitian (RD/RDN) _____ Date _____

Clinic Name _____

**State-Recognized Medical Authority is a licensed health care professional authorized to write medical prescriptions in Washington: Medical Doctor (MD), Doctor of Osteopathy (DO), Physician's Assistant (PA) with prescriptive authority, Naturopathic Physician, or Advanced Registered Nurse Practitioner (ARNP).*

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Attachment A: Foods to be Omitted and Substituted

This page must be accompanied by Request for Special Dietary Accommodations form

Child's Name: _____ Date: _____ Grade Level: _____

Medical providers must specify foods to exclude and foods to include for children with special dietary needs. This information can be provided using this form or by writing a separate diet order. Foods are listed alphabetically by food category.

Dairy ☐ Milk Allergy ☐ Lactose Intolerant ☐ Other: _____

Foods to Exclude	Allowable substitutes
☐ Fluid Milk	☐ Lactose-free milk
☐ All ingredients containing milk*	☐ Plant-based milk alternates (e.g. soy, almond, and rice milk)
☐ Cheese	☐ Plant-based cheese alternates
☐ Yogurt	☐ Other, Specify:
☐ Butter	
☐ Cream/Ice Cream	
☐ Baked goods made with milk	
☐ Buttermilk	
☐ Other, Specify:	

*Ingredients that contain milk include: Artificial butter or cheese flavor, Casein or caseinates, Curd, Ghee, Hydrolysates, Lactalbumin, lactalbumin phosphate, Lactose, lactoglobulin, lactoferrin, lactulose, Rennet, Whey or whey products.

Eggs ☐ Egg Allergy ☐ Other: _____

Foods to Exclude	Allowable substitutes
☐ Eggs*	☐ Egg-free protein options
☐ Baked goods containing eggs	☐ Egg-free baked goods
☐ Other, Specify:	☐ Other, Specify:

*Ingredients that contain egg include: Albumin (also spelled albumen), Egg (dried, powdered, solids, white, yolk), Eggnog, Lysozyme, Mayonnaise, Meringue (meringue powder), Ovalbumin, Surimi

Grains ☐ Wheat Allergy ☐ Celiac Disease ☐ Gluten Intolerant ☐ Other: _____

Foods to Exclude	Allowable substitutes
☐ Wheat*	☐ Gluten-free alternative grains
☐ Condiments	☐ Wheat-free alternative grains
☐ Rye	☐ Rice
☐ Oats	☐ Corn products
☐ Barley	☐ Quinoa
☐ Other, Specify:	☐ Other, Specify:

*Ingredients that contain wheat include: Bread crumbs, Bulgur, Cereal extract, Club wheat, Couscous, Cracker meal, Durum, Einkorn, Emmer, Farina, Flour (all purpose, bread, cake, durum, enriched, graham, high gluten, high protein, instant, pastry, self-rising, soft wheat, steel ground, stone ground, whole wheat), Glucose syrup, Hydrolyzed wheat protein, Kamut®, Matzoh, matzoh meal (also spelled as matzo, matzah, or matza), Pasta, Seitan, Semolina, Soy sauce (may contain wheat, not all varieties), Spelt, Sprouted wheat, Starch (gelatinized, modfied, modified food, vegetable), Triticale, Vital wheat gluten, Wheat (bran, durum, germ, gluten, grass, malt, sprouts, starch), Wheat bran hydrolysate, Wheat germ oil, Wheat grass, Wheat protein isolate, Whole wheat berries.

Sesame

Foods to Exclude

- ☐ All Sesame Products*
- ☐ Sesame Seed
- ☐ Sesame Oil
- ☐ Sesame Flour
- ☐ Other, Specify:

Allowable substitutes

- ☐ Sesame free products
- ☐ Sesame free grains
- ☐ Other, Specify:

*Sesame includes: Benne, Gingelly, Gomasio, Halvah, Sesame flour, oil, paste, salt, Sesamol, Sesamum indicum, Sesemolina, Sim Sim, Tahini, Tahina, Til

Peanut/Tree Nuts ☐ Peanut Allergy ☐ Tree Nut Allergy ☐ Other: _____

Foods to Exclude

- ☐ Peanuts & Peanut Butter
- ☐ Peanut Oil
- ☐ All Tree Nuts* & Nut Butters
- ☐ Other, Specify:

Allowable substitutes

- ☐ Soy Butter
- ☐ Sunflower Seed Butter
- ☐ Almond Butter
- ☐ Nut-free protein options

*Tree Nuts Include: Almond, Beechnut, Brazil nut, Bush nut, Butternut, Cashew, Chestnut, Coconut, Filbert, Ginko nut, Hazelnut, Hickory nut, Lichee nut, Macadamia nut, Nangai nut, Pecan, Pine nut, Pistachio, Shea nut, Walnut.

Seafood ☐ Fish Allergy ☐ Shellfish Allergy ☐ Other: _____

Foods to Exclude

- ☐ Crustaceans (crab, shrimp, lobster)
- ☐ Mollusks (clam, mussel, oyster, scallop)
- ☐ Finned Fish*
- ☐ Caesar Dressing
- ☐ Imitation fish/crab
- ☐ Other, Specify:

Allowable substitutes

- ☐ Non-fish protein options
- ☐ Other, Specify:

*Finned Fish include: Anchovy, Bass, Catfish, Cod, Flounder, Grouper, Haddock, Hake, Halibut, Herring, Mahi mahi, Perch, Pike, Pollock, Salmon, Snapper, Sole, Swordfish, Tilapia, Trout, Tuna, Walleye.

Other Condition: _____

Foods to Exclude

- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

Allowable substitutes

- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

Signature of Preparer	Printed Name	Date
Signature of Medical Authority & Credentials	Printed Name	Date

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To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: https://www.usda.gov/sites/default/files/documents/ad-3027.pdf, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. mail:
U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or

2. fax:
(833) 256-1665 or (202) 690-7442; or

3. email:
Program.Intake@usda.gov

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