**Blanton Health Center**

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Dear Parents/Guardians Grades 1 through 12:

The start of the 2025-2026 School Year will be here before you know it. We have enclosed in this annual essential information packet the health forms that will need to be completed before your child comes to school in the fall.

Please read the contents of this packet carefully. Please also note that (a) some forms may not be necessary for your child, and (b) some forms require only your signature while others require the signature of your child’s primary care provider (referred to throughout as physician). We strongly encourage you to read through this entire packet as soon as you receive it so that you have ample time to call us with questions and schedule any necessary appointments with your medical providers.

**Changes to the annual essential information process this year include the following:**

* Several forms are involved in the Nutrition Order process. Please follow the instructions carefully to ensure you are providing the appropriate information required for your child.
* Annual physicals are required for residential/overnight students. The due date for physicals for overnight students ONLY is December 1, 2025. Sports physicals continue to be due with other annual essential information paperwork on July 14, 2025.
* A physician’s prescription is required for the use of protective and stabilizing devices, per COMAR 13A.08.04.02. If your child is currently using a device for this purpose, please complete the enclosed form. Instructions on a protective/stabilizing device are included. Have your child’s physician complete this form.
* If your child needs to be transported via an air-conditioned vehicle/school bus due to a medical condition, please have your child’s physician fill out and sign the form provided in the packet.

**Important information for you to consider when scheduling appointments:**

1. Completed forms are due to the Health Center by **July 14, 2025**. Please be sure to have all fields completed, including necessary signatures and dates, prior to submission. **Completed forms must be returned by mail, fax, or in person**.
2. All prescription and non-prescription medications, in pharmacist-labeled bottles/boxes that match the physician’s medication order, must be delivered to the Health Center by **August 18, 2025**.
3. If your child requires emergency medications, these medications must be available at school and not expired. Failure to provide these medications could result in your child’s inability to attend school until these emergency medications are available.
4. Failure to meet these deadlines may result in a delayed start to your child’s school year and may require you to schedule an appointment with one of our nurses after the forms and medications of those who have met the deadlines have been processed.

Thank you, in advance, for your understanding and assistance in ensuring your child’s safe return to school. Please contact us with any questions you may have regarding the contents of this memo or the specific forms required for your child.

I wish you a happy and healthy summer and look forward to a wonderful 2025-2026 school year.



Patti Bell, M.S., R.N., C.P.N.

Health Center Manager

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PB/cic:05/14/25

ESSENTIAL INFORMATION FORMS GUIDE

Early Learning Center

| Name of Form | Students for Whom Form is Required | Required Signatures |
| --- | --- | --- |
| Health Update Form | All Students | Parent/Guardian |
| Emergency 911 Transportation/ Insurance Form | All Students | Parent/Guardian |
| Air Condition Transport | Students with a medical condition that requires transport in an air-conditioned vehicle/bus. | Physician |
| Specialty Clinic Permission | All Students | Parent/Guardian |
| Over-the-Counter Medication Permission Form | All Students | Parent/Guardian |
| Physical Activity Form | All Students | Physician and Parent/Guardian |
| SY 2025-2026 Nutrition Order | All Students | Completed by Parent/Guardian; signature not required  **IMPORTANT**: Forms A, B, and C need to be completed for all students.  Form E to be completed only if your child receives g-tube feedings. |
| Form A – Special Diet/Food Allergy Information | Students with food allergies (If answered “Yes” to allergy question on SY 2025-2026 Nutrition Order)  Students with special diet needs due to religious/ cultural, lifestyle, nutritional or medical reasons (If answered “Yes” to special diet question on SY 2025-2026 Nutrition Order) | Physician and Parent/Guardian – If a special diet is due to nutritional needs or medical condition.  Parent/Guardian – If a special diet is for religious/cultural or lifestyle purposes. |
| Form B – Food Texture Modification | All Students | Physician – If answered “Yes” to food texture question on SY 2025-2026 Nutrition Order  Parent/Guardian – If student eats foods on level 7 or 7a on the IDDSI scale (See definition on Form B) |
| Form C – Liquid Thickness Modification | All Students | Physician – If answered “Yes” to liquid thickness modification question on SY 2025-2026 Nutrition Order  Parent/Guardian – If student drinks thin liquids (Level 0 on Form C)  **IMPORTANT**: Physician signature is not required for Level 0 only (see Form C for definition of Levels).  All other levels require a physician signature. |
| Form D – Safety Modifications/ Considerations for Mealtimes | Students who require special preparation or presentation to minimize safety risks during meals; e.g., limiting amount of food presented at one time; cutting food into smaller than typical sizes; presenting one sip at a time, etc. (If answered “Yes” to safety modifications question on SY 2025-2026 Nutrition Order) | Parent/Guardian |
| Form E – Gastrostomy Tube Feeding Order for School Feedings | Students who receive some or all of their nutritional intake by gastrostomy tube (If answered “Yes” on gastrostomy tube question on SY 2025-2026 Nutrition Order) | Physician  **IMPORTANT**:  A. Students who use a gastrostomy tube must have a complete unexpired replacement kit at school by **Aug 18, 2025**.  B. If a student with a g-tube is to receive any food by mouth while at MSB, Forms B, C and D must also be completed. |
| Medical History and Annual Physical (2 pages; Part 1 and Part II) | Encouraged for all students.  **Required** for those participating in MSB Athletics/Sports Teams **and all overnight students**. | Part I – Parent/Guardian  Part II – Physician  **IMPORTANT**: The due date for annual physicals for overnight students only is Dec. 1, 2025. Sports physicals continue to be due on July 14, 2025 along with other essential information paperwork. |
| Physician Letter to Prescribe a Protective/ Stabilizing Device | Required for those students who use protective and stabilizing devices, per COMAR 13A.06.04.02 B (13) | Physician  **IMPORTANT**: Please complete this form if your child uses a protective/stabilizing device.  The letter will include information regarding what is required as well as a form for you to take to your child’s physician. |
| Maryland State School Medication Administration Authorization Form | Students who receive medications while at MSB | Physician and Parent/Guardian  **IMPORTANT**: A separate School Medication Administration Authorization Form must be completed for each medication your child takes at school. **This includes prescription and over the counter medications**. Additional forms can be found on our website. **The medication order and the pharmacist-labeled bottle must match exactly**. Discrepancies may result in a delayed start to the school year. |

5/14/25 PB/cic