

Individual Health Plan (IHP)

According to Washington State Law (RCW 28A.210.320) the attendance of every child shall be conditioned upon the presentation before or on the child's first day of attendance a medication or treatment order addressing any life-threatening health condition that the child has that may require medical services to be performed at school. Once such an order has been presented, the child shall be allowed to attend school. Contact school if you have questions.



Student Name: _____
 DOB: _____ Grade: _____
 School: _____ Year: _____
 Teacher: _____

Other ID: _____ Walker Bus Rider Bus Number: _____
 Bus Driver: _____ Bus Route: _____
 Parent/Guardian: _____ Hm Phone: _____
 Address: _____
 Guardian 1: _____ Wk Phone: _____ Cell Phone: _____
 Guardian 2: _____ Wk Phone: _____ Cell Phone: _____
 Physician: _____ Phone: _____
 Preferred Hospital: _____ Allergies: _____
 Medication at Home: _____ Medication at School: _____

HEALTH CONCERN: (Enter Diagnosis)	
Relevant History (associated diagnoses, treatment, etc.)	
Special Precautions/Instructions	
SCHOOL INTERVENTION PLAN	
School Considerations	Student Plan
Related Health Concerns	

Parent: _____ Date: _____

School Nurse RN: _____ Date: _____

A copy of the health plan will be kept in the health room and will be available to current staff in Skyward.

It is the teacher's responsibility to communicate medical concerns to their subs by placing a copy of each health plan in their sub file.