



# Medical Statement

A state licensed healthcare professional who is authorized to write medical prescriptions under state law must complete Parts 2 and 3 and sign this form. In Florida, this includes a Physician, Physician's Assistant or Nurse Practitioner (ARNP). The parent or guardian must complete Part 1.

## PART 1: GENERAL INFORMATION - Completed by the parent/guardian

First and Last Name	Date of Birth
Name of Center/Care Provider	
Name of Parent/Guardian	Telephone Number

## PART 2: ACCOMODATIONS - Completed by a licensed medical professional

How does the participant's physical or mental impairment restrict their diet?

What food(s)/type(s) of food must be omitted? Please be specific.

List food(s) to be substituted for omitted food(s). (Avoid specific brand names, if possible)

Additional comments:

*Texture modification (Complete if needed):*

<input type="checkbox"/> Pureed	<input type="checkbox"/> Ground	<input type="checkbox"/> Bite-Size Pieces	<input type="checkbox"/> Other (specify)
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## PART 3: SIGNATURE - Completed by a licensed medical professional

Licensed medical professional's name	Title: <input type="checkbox"/> Physician <input type="checkbox"/> Nurse Practitioner (ARNP) <input type="checkbox"/> Physician Assistant
Signature of licensed medical professional	Date signed
Medical office name and address	Phone number



# Deklarasyon medikal

Yon pwofesyonèl swen sante ki gen lisans Leta ki gen otorizasyon pou ekri preskripsyon medikal anba lwa Leta a dwe ranpli 2yèm ak 3yèm pati fòm sa a epi siyen l. Nan Florida, sa konsène yon Doktè, yon Asistan Doktè (PA), oubyen yon Enfimyè Pratisyen (ARNP). Paran an oswa responsab legal la dwe ranpli pati 1 an:

## PATI 1: ENFÒMASYON JENERAL - Pou Paran an/responsab legal la ranpli

Non ak Siyati	Dat Nesans
Non Sant la/Moun k ap bay Swen an	
Non Paran an/Responsab Legal la:	Nimewo Telefòn

## PATI 2: ARANJMAN YO - Pou Pwofesyonèl Medikal ki gen lisans la ranpli

Kouman andikap fizik oubyen mantal limite sou fason patisipan an konn manje?

Ki manje/ki tip de manje ki pa dwe la? Silvouplè presize.

Bay lis manje ki dwe ranplase manje ki pa dwe la yo. (Evite presize non mak pwodui yo, si sa posib)

Kòmantè anplis:

### Modifikasyon prezantasyon an (Ranpli l si sa nesèsè):

<input type="checkbox"/> Pire:	<input type="checkbox"/> Teren	<input type="checkbox"/> Enfòmasyon detaye yo	<input type="checkbox"/> Lòt (presize)
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## PATI 3: Siyati - Pou Pwofesyonèl Medikal ki gen lisans la ranpli

Non pwofesyonèl medikal ki gen lisans la	Tit: <input type="checkbox"/> Doktè <input type="checkbox"/> Enfimyè Pratisyen (ARNP) <input type="checkbox"/> Asistan Doktè
Siyati pwofesyonèl medikal ki gen lisans la	Dat Siyati a
Non ak adrès biwo medikal la	Nimewo Telefòn