

# Healthcare plan for a child with PKU at school

## REASON FOR HEALTHCARE PLAN

Medically prescribed diet for the management of Phenylketonuria (PKU)

Review Date:

## PERSONAL INFORMATION

Child's name:

Date of birth:

Child's address:

Post code:

Medical diagnosis or condition: **Phenylketonuria (PKU)**

Known allergies:

NHS / CHI no:

Name of school:

Class:

## CONTACT INFORMATION

### FAMILY CONTACT

Name:

Relationship to child:

Home phone number:

Mobile number:

Work phone number:

Email:

### EMERGENCY CONTACT

Name:

Home phone number:

Mobile phone number:

Relationship to child:

**HOSPITAL/CLINIC CONTACT**

Dietitian name:	
Hospital/clinic name:	
Address:	
	Post code:
Phone number:	Email:

**GP CONTACT**

GP name:
Practice name:
Phone no:

**SUMMARY OF HEALTHCARE NEEDS**

was diagnosed with an inherited metabolic disorder – Phenylketonuria (PKU) from the newborn screening programme and is unable to metabolise the amino acid phenylalanine which is found in foods that contain protein. The treatment for PKU is a phenylalanine/protein-restricted diet which requires:

- The avoidance of high protein foods such as meat, fish and eggs to lower phenylalanine intake.
- A medically prescribed protein substitute which provides all the other amino acids necessary for growth and the daily requirements of vitamins and minerals. It is essential that every dose of the prescribed protein substitute is completed to help attain good metabolic control.
- A limited and measured amount of natural protein each day in the form of carefully weighed protein exchanges.
- Medically prescribed low protein foods such as bread; pasta; milk; rice; biscuits.
- Foods naturally low in protein such as fruit; vegetables and fats (exchange-free foods)
- Regular monitoring of blood phenylalanine levels. This is done at home by the parent/guardian.

**MEDICINE (protein substitute) – to be completed by parent/guardian in discussion with the designated teacher**

Name of protein substitute:
Storage instructions:
Preparation instructions:
Dose:
Time/s and method of administration:
Self-administration? (Yes/No):
Any other instructions:

## ADDITIONAL MANAGEMENT ARRANGEMENTS

1. All staff who are involved in the care of \_\_\_\_\_ while at school should have training and information about PKU provided by the metabolic dietitian.
2. Arrangements should be in place for suitable snacks and drinks for the restricted low protein diet when required. Regular milk should be replaced with the prescribed low protein milk supplied by the parent/guardian.
3. A suitable menu plan should be agreed between the parent/guardian, school catering team and dietitian. Meals provided should try to match the rest of the children in school.
4. The parent/guardian should be involved when any changes are made to the school menu.
5. A record of what is eaten should be recorded in a daily diary by a designated member of staff.
6. If \_\_\_\_\_ is given or eats any food that is not allowed in the special diet, the parent/guardian should be notified that day in order that the diet can be adjusted at home. Any food containing protein that is not included in their daily protein allowance will affect blood phenylalanine levels, which, in the long term, will affect brain development. Food eaten in error is not a medical emergency, but the parent/guardian must be notified by the end of the school day.
7. \_\_\_\_\_ will require their protein substitute to be given at school. This should be supervised and recorded in a daily diary by a designated member of staff and recorded as per school medicine policy.
8. The parent/guardian should supply the protein substitute and provide a written plan for the preparation, administration instructions and storage. The protein substitute administration should always be supervised. The plan should be reviewed if the dose or type of protein substitute changes.
9. The school staff should discuss with the parent/guardian if any difficulties arise with the administration of the protein substitute.
10. The dietitian should be made aware if there are any problems regarding the supply of the protein substitute.
11. The dietitian should be made aware if there are any problems experienced by the school in the supply of the low protein foods for the school catering staff.
12. It will be necessary to discuss any special menu days with the parent/guardian e.g. celebration days such as Easter, Christmas, Chinese New Year, Pancake Day, Diwali. The parent/guardian should be given sufficient notice to ensure appropriate low protein food alternatives can be provided.
13. The parent/guardian should be given sufficient notice of any school trips or activities, such as Forest School, so that they will be able to provide low protein alternatives that are suitable, which will allow inclusion in the planned session.
14. The parent/guardian should be given sufficient notice of any special cooking or food-related learning, so that they will be able to provide low protein alternatives that are suitable, which will allow inclusion in the activity.
15. \_\_\_\_\_ can play with ordinary play dough and pasta for artwork, but staff must ensure that these play items are not eaten.
16. If other children bring in treats or cakes to distribute for birthdays or special occasions, it is helpful to keep a supply of alternative low protein sweets in a labelled container to ensure is not left out at treat time.

## TRAINING

Initial training date:	Review date:
Name of person delivering training:	
Designation:	

Please list all members of staff who have been identified to administer medication or deliver specific additional care needs

	Name	Designation
1		
2		
3		
4		

Identified procedures and training required (please tick as appropriate)

1. Information on PKU	<input checked="" type="checkbox"/>	YES		
2. Information on dietary management of PKU	<input checked="" type="checkbox"/>	YES		
3. Administration of medically prescribed protein substitute			YES	NO
4. Training of catering staff		YES	NO	

## ANY ADDITIONAL INFORMATION

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Date completed:
Signed (parent/guardian):
Signed (designated teacher):
Signed (dietitian):

**This document and any other healthcare plans must accompany the child on all off-site activities**



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