

[Parent/Guardian Name]
[Address]
[Phone Number]
[Date]

To: [Principal Name] / [School Nurse Name]
[School Name]
[School Address]

Subject: Return to School Following Medical Absence - [Student Name]

Dear [Principal/Nurse Name],

This letter is to inform you that my child, [Student Name], will be returning to school on [Date] following an extended absence due to a severe allergic reaction (anaphylaxis).

Medical clearance from [Doctor Name] is attached to this letter. To ensure a safe return, please note the following updates to [Student Name]'s care:

- **Allergens:** The confirmed triggers for the reaction were [List Allergens].
- **Medication:** We are providing a new/updated [EpiPen/Auto-injector] and [Antihistamine] to be kept in the school clinic.
- **Emergency Plan:** An updated Individual Health Care Plan (IHCP) signed by the physician is enclosed.

I would like to request a brief meeting or phone call with the classroom teacher and school nurse to review allergen-avoidance strategies in the classroom and cafeteria to prevent a recurrence.

Thank you for your assistance in ensuring [Student Name]'s safety and successful reintegration into the classroom.

Sincerely,

[Parent/Guardian Signature]
[Printed Name]