Dear Family,

This letter is a follow-up to our clinic visit with you and your child, ______ earlier today. As you know, ______ has experienced significant gastrointestinal issues (GI) associated with daily pain for some time with a current diagnosis of ______

______'s GI issues have made full-time school attendance very challenging. It is important that we continue to encourage _______ to participate in school and attend classes as much as possible. To optimize _______ 's attendance and success within the school environment, as well as recovery more broadly, we recommend the following strategies for facilitating and supporting success, comfort, and attendance at school:

1. Given current GI symptoms, ______ will need unrestricted access to the bathroom when present at school. Many patients benefit from having a system of communication with the teacher(s) that allows the student to leave the classroom for the bathroom without obtaining teacher permission each time, but allows the teacher(s) to know where the student has gone. For example, some patients have been allowed to place a colored index card on their seat or desk when leaving the room for the bathroom; this alerts the teacher to the reason for the absence while allowing the student to get to the bathroom in a timely fashion. Further, some patients benefit from access to a private bathroom, when possible.

2. Sometimes it can be hard to tell whether a child is sick when they have frequent abdominal pain and other symptoms (e.g., vomiting). School staff may wonder when to send students home and/or have policies in place designed to stop the spread of contagious illness that are not appropriate in the context of chronic non-communicable GI issues. This can be frustrating for both families and school staff. To help you and school staff navigate this tricky issue, we recommend keeping your child home from school (or your child being sent home from school) only when he or she has one or more of the following:

- a. a fever (temperature of ____o or higher in the last 24 hours);
- b. repeated vomiting and/or diarrhea in the last 24 hours (i.e., above and beyond their typical symptom frequency);
- c. inability to keep down clear liquids; and/or
- d. evidence of contagious infection.

3. It should be noted that alternative educational options (e.g., e-school, homeschooling, alternative school placement) may not be in ______'s best interest at this time. Further removal from the school environment can be counterproductive, as it typically decreases physical demands and leads to further deconditioning, increases social isolation and associated depression, further disrupts education, and ultimately leads to a longer delay in both return to school and symptom resolution.

4. Please consider initiating a 504 plan (for health issues) for ______ if needed in order to provide the above accommodations per school policy. Formalizing these recommendations in a 504 plan also would help to ensure that the above recommendations are implemented consistently across all teachers in all subjects.

We appreciate your desire to work with the school in supporting ______''s academic success and encourage you to share the information provided in this letter with school staff. We hope that the principles outlined above will be helpful to your family and to school personnel in the process of planning for ______, and will promote both success and attendance in the school environment. Please remember that we are asking ______'s school to be very flexible for a period of time to support recovery. These recommendations will need to be tailored to your child's specific situation and school policies/resources through ongoing discussion with relevant school staff and administrators.

If you have any questions, or would like to discuss _____'s management with me, please call our

office at _____.

Sincerely,

Physician name and signature