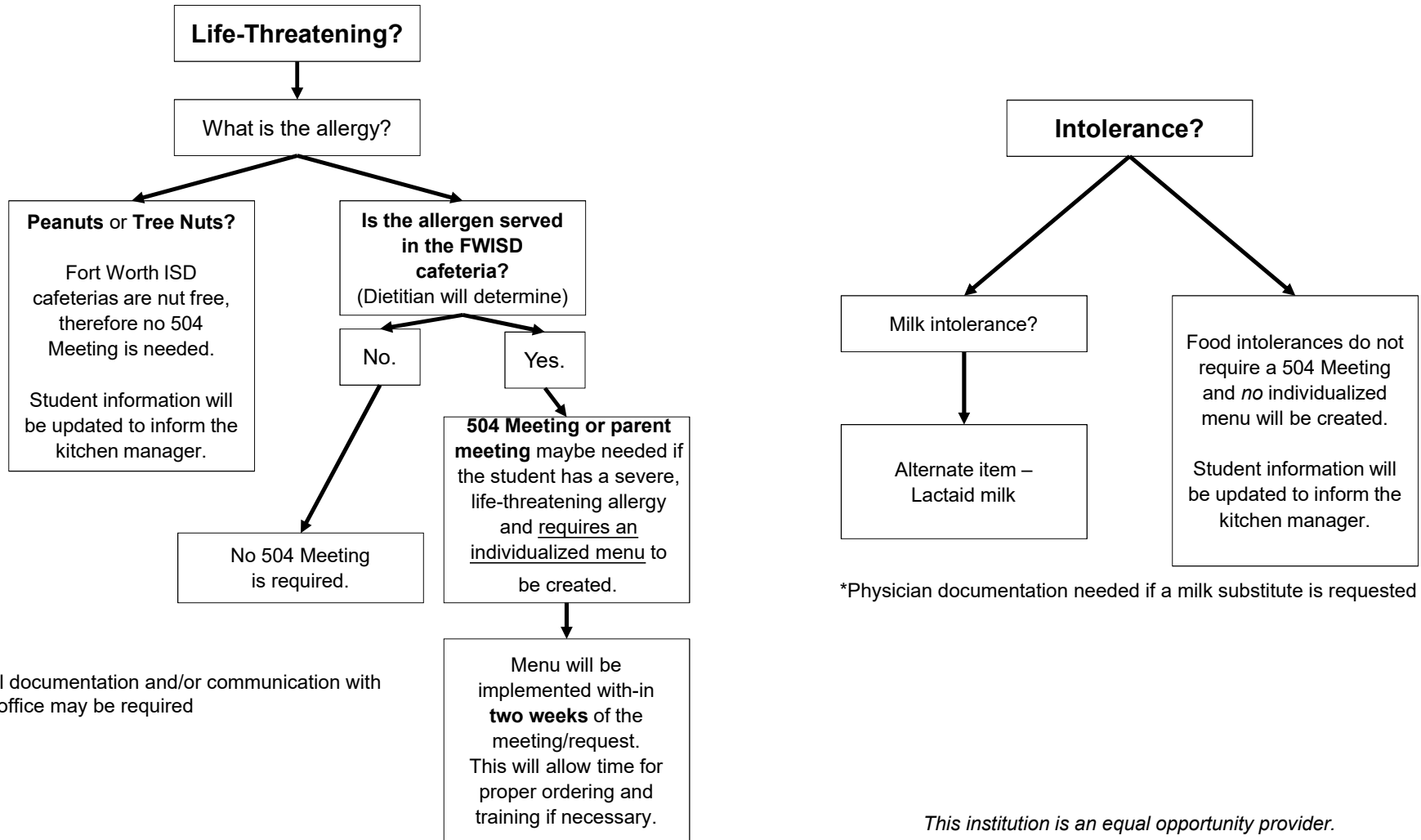


Allergy Request Form Flow Chart



*Additional documentation and/or communication with physician office may be required

*Physician documentation needed if a milk substitute is requested

This institution is an equal opportunity provider.