

## Sample Letter

Date	
Dear Parent(s) and Provider(s),	
The health support team of	(school/school district)
is dedicated to providing the best care for all our students with diab	etes.
With this letter, you will find the current Diabetes Medical Managem Association® (ADA). <b>This plan of care is to be used for all studer</b> the primary document used to provide care for your child and is developed. The DMMP can also be used to develop a 504 Plan, Indiv	nts with diabetes—both type 1 and type 2. The DMMP is veloped by you and your child's diabetes health care
accommodations plan as recommended by the ADA.	
The DMMP outlines the procedures and actions for school personn the accommodations required by law to be in place for these studer staff, administrators, coaches, teachers, and leaders of extracurricumonitoring, insulin dosing, student-specific self-management skills, diabetes management in the school setting.	nts. This plan can be shared with school nurses, trained ular activities. The DMMP provides instructions for glucose
Some school systems require a completed DMMP in order to provide the health care team to be prepared in the case of field trips (overnighted) emergencies. We ask that you complete all applicable portions of this care.	ight or extended) as well as lockdowns or other
(School nurse/ traine	ed staff)
(School division or in	ndividual school)

The American Diabetes Association's Safe at School Working Group has adapted this letter from the original version created by

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the Virginia Diabetes Council's School Group.