**Medical - Children Summary Register**

| **Child – First name, Surname** | **Room** | **Medical Management Plan (MMP)****yes/no** | **MMP displayed, and parents have authorised if displayed in public location** | **Risk Minimisation Plan (RMP)****yes/no** | **RMP displayed, and parents have authorised if displayed in public location** | **Medical Communication plan****yes/no** | **Condition/Allergy** | **Comments** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| *eg Stuart Wilson* | *Toddlers* | *yes* | *yes* | *yes* | *yes* | *yes* | *peanuts* | *severe reaction - anaphylaxis* |
| *Steph Nyguen* | *Preschool* | *yes* | *yes* | *yes* | *yes* | *yes* | *Cystic Fibrosis* | *difficulty with movement/eating* |
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