



Monsignor Donovan High School

711 HOOPER AVENUE, TOMS RIVER, NJ 08753-7796 732-349-8801 FAX 732-349-8956
<http://www.mondonhs.com>

PLEASE RETURN PERMISSION SLIP THE FIRST DAY OF SCHOOL

August 2009

Dear Parents:

Our school building is located within the ten-mile emergency-planning zone of the (*Oyster Creek-Artificial Island*) nuclear generating station. In January 2001, the federal Nuclear Regulatory Commission amended its policy on the availability and usage of the over-the-counter drug, potassium iodide (KI), during a radiological emergency. As a result, the State of New Jersey revised its policy regarding providing KI to the general population within ten miles of a nuclear generating station. Part of this revised policy allows for the storage and use of KI at schools located in the 10-mile emergency planning zone.

KI is an over-the-counter drug that protects the thyroid from exposure to radioactive iodine and can reduce the risk of thyroid cancer after a severe nuclear emergency event resulting in a release of radiation. It is a supplement to evacuation of sheltering. **Evacuation and sheltering** remains New Jersey's primary public protective actions in the event of an accident to any nuclear generating station. **If evacuation occurs, we will be transported to Toms River Intermediate East School.**

Please read the attached KI information sheets and mark the appropriate box of the attached KI permission slip. This form will remain in effect as long as your child is a student of Monsignor Donovan High School, unless you notify us.

Should the county and/or state health officials recommend the use of KI during an emergency, the school will have KI available on-site. Evacuation remains our primary protective radiological action. In the event that evacuation is not immediately possible, and KI is recommended by county and/or state health officials, an appropriate dose of KI will be available.

If you have any concerns regarding the emergency use of KI or questions please contact the Health Office.

Sincerely,

Edward G. Gere, Ed.D.
Principal

EKG:dw

Potassium Iodide (KI) Permission Slip

I have received and read, and understand the fact sheets on potassium iodide and understand that in an event of a nuclear release my child may be given KI, subject to my permission.

Please be advised that your child should not receive KI if he or she is allergic to iodine, or has a rare disorder of dermatitis herpetiformis or hypocomplementemic vasculitis. If you should have any concerns regarding the emergency use of KI or questions on your child's health and the use of KI, please discuss this with your child's doctor.

- I **do** want my child to be given potassium iodide (KI) in the event of a radiological emergency only when recommended by County and/or State Health officials.
- I do **not** want my child to be given potassium iodide (KI).
- Do not** give potassium iodide to my child because he/she is allergic to iodine or has a medical contraindication.

Child's Name: _____

Grade: _____

Parent/Guardian Signature: _____

Date: _____

Please return this form to the Medical Office or the Main Office.