

## **INFORMATION FOR FOOD SERVICE PERSONNEL**

### **Anaphylaxis**

Research has shown that children with asthma are at increased risk for severe allergic reactions to food. The most serious allergic reaction is called anaphylaxis. Symptoms of anaphylaxis can occur immediately after eating, or after several hours. It is important to consider that each episode of anaphylaxis is potentially life-threatening.

### **Symptoms of Anaphylaxis**

- Itching and swelling of the lips, tongue, or mouth.
- Itching with tightness in the throat, hoarseness, and hacking cough.
- Hives, itchy rash, and/or Swelling of the face/extremities.
- Nausea, abdominal cramping, vomiting, or diarrhea.
- Shortness of breath, repetitive coughing or wheezing.
- “Thready” pulse, “passing out”
- Sudden blood pressure drop

### **The Link Between Allergy and Asthma**

Research suggests that food allergies can bring on an asthma attack, but they are not the common cause of asthma attacks.

It is important for parents to communicate to staff members, so staff members understand what the child is allergic to, identify trigger foods, recognize symptoms, and initiate treatment when necessary.

Anyone with a previous reaction to food is at risk for a repeat reaction. The majority of all food allergy reactions are caused by: milk, soy, eggs, wheat, peanuts, tree nuts, fish and shellfish. In addition to food, the most common causes of severe allergic reactions include insect stings, latex, and medications.

## **NUTRITION TIPS**

### **School Faculty (Teachers, Coaches, etc.)**

- Inquire about each student's food allergies during parent/teacher conferences at the beginning of the year.

**NOTE:** *(a severe reaction could occur the first day of school-don't wait to get epinephrine and an action plan—death can occur in under 10 minutes!!)*

- Work with parents to protect students from life-threatening reactions to food.
- Keep students with food allergies away from foods known to cause allergies.
- Educate students in the classroom about food allergies.

### **School Nurse**

- Educate school personnel about the seriousness of food allergies and asthma, steps they can take to prevent allergy reactions from occurring.
- Maintain communication with parents, students, and health care providers to make sure the Action Plan in place is current, and reflects any food allergies or special dietary needs. Keep the students' Asthma Action Plans readily accessible.
- Educate all staff about administering injectable epinephrine and other emergency response procedures for food-induced anaphylaxis, or other life-threatening respiratory emergencies.

## **MANAGING STUDENTS WITH FOOD ALLERGIES**

*Food allergies can threaten your life. Accidental exposure to foods known to cause allergic reactions for some students can be reduced in the school setting when parents, students, physicians and all school staff members work together.*

### **Family Responsibility**

- Notify the school of the child's allergies.
- Work with the school team to develop a plan that accommodates the child's needs throughout the school.
- Provide written medical documentation, instructions, and medications as directed by a physician.
- Provide properly labeled medications and replace medications upon expiration.
- Educate the child in the self-management of the food allergy, including safe and unsafe foods, strategies for avoiding unsafe foods, symptoms of allergic reactions, how and when to notify an adult of an allergic reaction, and how to read food labels (age appropriate).
- Review policies/procedures with school staff, physician, and the child after a reaction has occurred.
- Provide emergency contact information.

***Keep in mind that anaphylaxis episodes have occurred without prior allergy diagnoses in both adults and children.***

### **School Responsibility**

- Be knowledgeable about federal laws, including ADA, IDEA, Section 504, and any state or district policies.
- Review health records submitted by parents/physicians.
- Students should not be excluded from school activities on the basis of food allergies.
- Identify a core team to respond to the student's needs.
- Assure all staff who interact with the student understand the nature of the food allergy. Eliminate the use of food allergens in meals, educational tools, craft projects, and incentives.
- Practice a Food/Allergy Action Plan before an allergic reaction occurs.
- Coordinate the storage of medications, emergency kit, and standing orders for epinephrine.
- Coordinate implementation of state self-carry laws if applicable.
- Designate school personnel who are properly trained to administer medication with state nursing laws.
- Review policies/prevention with core team members, parents/guardians, student, and physician after reaction has occurred.
- Recommend that all buses have communication devices in case of an emergency.
- Enforce a "no eating" policy on school buses
- Discuss field trips with the child's family
- Follow state/district privacy policies

*Source: American School Food Service Association, in cooperation with the National Association of Elementary School Principals, National Association of School Nurses, National School Boards Association, & the Food Allergy & Anaphylaxis Network (2003). Reviewed by Asthma Ready® Communities staff (2010)*

## MAJOR CAUSES OF FOOD ALLERGIES



### **Peanuts**

- Peanuts are the leading cause of severe allergic reactions related to food.



### **Milk**



### **Wheat**



### **Shellfish**



### **Fish**



### **Soy**



### **Tree Nuts (Walnuts, Peacans)**



### **Eggs**

*Source: The Food Allergy Network*



## HOW TO READ FOOD LABELS

<b>HOW TO READ A LABEL for a MILK-FREE DIET</b>	
Avoid foods that contain milk or any of these ingredients:	
artificial butter flavor	milk ( <i>in all forms including condensed, derivative, dry, evaporated, goat's milk and milk from other animals, lowfat, malted, milk fat, non-fat, powder, protein, skimmed, solids, whole</i> )
butter, butter fat, butter oil	
buttermilk	
casein ( <i>casein hydrolysate</i> )	
caseinates ( <i>in all forms</i> )	
cheese	nisin
cream	nougat
cottage cheese	pudding
curds	rennet casein
custard	sour cream, sour cream solids
ghee	sour milk solids
half & half	whey ( <i>in all forms</i> )
lactalbumin, lactalbumin phosphate	yogurt
lactoferrin	
lactulose	
May indicate the presence of milk protein:	
caramel candies	
chocolate	
flavorings ( <i>including natural and artificial</i> )	
high-protein flour	
lactic acid starter culture	
lactose	
luncheon meat, hot dogs, sausages	
margarine	
non-dairy products	
<b>HOW TO READ A LABEL for an EGG-FREE DIET</b>	
Avoid foods that contain eggs or any of these ingredients:	
albumin ( <i>also spelled as albumen</i> )	
egg ( <i>dried, powdered, solids, white, yolk</i> )	
eggnog	
lysozyme	
mayonnaise	
meringue ( <i>meringue powder</i> )	
surimi	
May indicate the presence of egg protein:	
flavoring ( <i>including natural and artificial</i> )	
lecithin	
macaroni	
marzipan	
marshmallows	
nougat	
pasta	

Source: *Guidelines for Allergy Prevention and Response (August 2010)*,  
Retrieved from [http://www.mo.gov/living/families/schoolhealth/pdf/mo\\_allergy\\_manual.pdf](http://www.mo.gov/living/families/schoolhealth/pdf/mo_allergy_manual.pdf)

## HOW TO READ FOOD LABELS

<b>HOW TO READ A LABEL for a WHEAT-FREE DIET</b>	
Avoid foods that contain wheat or any of these ingredients:	
bran	gluten
bread crumbs	kamut
bulgur	matzoh, matzoh meal ( <i>also spelled as matzo</i> )
couscous	pasta
cracker meal	seitán
durum	semolina
farina	spelt
flour ( <i>all purpose, bread, durum, cake, enriched, graham, high gluten, high protein, instant, pastry, self-rising, soft wheat, steel ground, stone ground, whole wheat</i> )	vital gluten
	wheat ( <i>bran, germ, gluten, malt, sprouts</i> )
	wheat grass
	whole-wheat berries
May indicate the presence of wheat protein:	
flavoring ( <i>including natural and artificial</i> )	
hydrolyzed protein	
soy sauce	
starch ( <i>gelatinized starch, modified starch, modified food starch, vegetable starch, wheat starch</i> )	
surimi	

<b>HOW TO READ A LABEL for a PEANUT-FREE DIET</b>	
Avoid foods that contain peanuts or any of these ingredients:	
artificial nuts	monkey nuts
beer nuts	nutmeat
cold pressed, expelled, extruded peanut oil	nut pieces
goobers	peanut
ground nuts	peanut butter
mixed nuts	peanut flour
May indicate the presence of peanut protein:	
African, Asian ( <i>especially Chinese, Indian, Indonesian, Thai, and Vietnamese</i> ), and Mexican dishes	Mandelonas are peanuts soaked in almond flavoring.
baked goods ( <i>pastries, cookies, etc.</i> )	Studies show that most allergic individuals can safely eat peanut oil ( <b>not</b> cold pressed, expelled, or extruded peanut oil).
candy ( <i>including chocolate candy</i> )	
chili	
egg rolls	Arachis oil is peanut oil.
enchilada sauce	
flavoring ( <i>including natural and artificial</i> )	Experts advise patients allergic to peanuts to avoid tree nuts as well.
marzipan	
mole sauce	A study showed that unlike other legumes, there is a strong possibility of cross-reaction between peanuts and lupine.
nougat	Sunflower seeds are often produced on equipment shared with peanuts.

Source: *Guidelines for Allergy Prevention and Response (August 2010)*,  
Retrieved from [http://health.mo.gov/living/families/schoolhealth/pdf/mo\\_allergy\\_manual.pdf](http://health.mo.gov/living/families/schoolhealth/pdf/mo_allergy_manual.pdf)

## HOW TO READ FOOD LABELS

<b>HOW TO READ A LABEL for a TREE-NUT-FREE DIET</b>	
Avoid foods that contain nuts or any of these ingredients:	
almonds artificial nuts Brazil nuts caponata cashews chestnuts filbert/hazelnuts gianduja ( <i>a nut mixture found in some chocolate</i> ) hickory nuts macadamia nuts marzipan/almond paste nan-gai nuts	natural nut extract ( <i>i.e., almond, walnut</i> ) nougat nut butters ( <i>i.e., cashew butter</i> ) nut meal nutmeat nut oil nut paste ( <i>i.e., almond paste</i> ) pecans ( <i>Mashuga Nuts®</i> ) pesto pine nuts ( <i>also referred to as Indian, piñon</i> ), pistachios pralines walnuts
<p>Mandelonas are peanuts soaked in almond flavoring.</p> <p>Mortadella may contain pistachios.</p> <p>Natural and artificial flavoring may contain tree nuts.</p> <p>Experts advise patients allergic to tree nut butters (<i>i.e., cashew butter</i>) to avoid peanuts as well.</p> <p>Talk to your doctor if you find other nuts not listed here.</p>	
<b>HOW TO READ A LABEL for a SOY-FREE DIET</b>	
Avoid foods that contain soy or any of these ingredients:	
hydrolyzed soy protein natto soy ( <i>soy albumin, soy fiber, soy flour, soy grits, soy milk, soy nuts, soy sprouts</i> ) soya soybean ( <i>curd, granules</i> )	soy protein ( <i>concentrate, isolate</i> ) soy sauce Tamari Tempeh textured vegetable protein (TVP) tofu
May indicate the presence of soy protein:	
Asian cuisine flavoring ( <i>including natural and artificial</i> ) vegetable broth vegetable gum vegetable starch	Studies show most individuals allergic to soy may safely eat soy lecithin and soybean oil.

Source: *Guidelines for Allergy Prevention and Response (August 2010)*,  
 Retrieved from [http://health.mo.gov/living/families/schoolhealth/pdf/mo\\_allergy\\_manual.pdf](http://health.mo.gov/living/families/schoolhealth/pdf/mo_allergy_manual.pdf)



## HOW TO READ FOOD LABELS

### HOW TO READ A LABEL for a SHELLFISH-FREE DIET

Avoid foods that contain shellfish or any of these ingredients:

abalone clams ( <i>cherrystone, littleneck, pismo, quahog</i> ) cockle ( <i>periwinkle, sea urchin</i> ) crab crawfish ( <i>crayfish, ecrevisse</i> ) lobster ( <i>langouste, langoustine, scampo, coral, tomalley</i> ) mollusks	mussels octopus oysters prawns scallops shrimp ( <i>crevette</i> ) snails ( <i>escargot</i> ) squid ( <i>calamari</i> )
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May indicate the presence of shellfish protein:

bouillabaisse cuttlefish ink fish stock flavoring ( <i>including natural and artificial</i> ) seafood flavoring ( <i>such as crab or clam extract</i> ) surimi	Keep the following in mind:  Any food served in a seafood restaurant may be cross-contaminated with fish or shellfish.  For some individuals, a reaction may occur from cooking odors or from handling fish or shellfish.  Always carry medications and use them as soon as symptoms develop.
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<b>Nutrition Facts</b>			
Serving Size 3 oz. (85g)			
Amount Per Serving		As Served	
<b>Calories 38</b>		<b>Calories from Fat 0</b>	
		% Daily Value	
<b>Total Fat</b> 0g			0%
<b>Saturated Fat</b> 0g			0%
<b>Cholesterol</b> 0g			0%
<b>Sodium</b> 0g			2%
<b>Total Carbohydrate</b> 0g			3%
<b>Dietary Fiber</b> 0g			8%
<b>Sugars</b> 0g			
<b>Protein</b> 0g			
<b>Vitamin A</b> 270%	¥	<b>Vitamin C</b> 10%	
<b>Calcium</b> 2%	¥	<b>Iron</b> 0%	
Percent Daily Values are based on a 2,000 calorie diet. Your daily values may be higher or lower depending on your calorie needs:			
	Calories	2,000	2,500
Total Fat	Less than	65g	80g
Sat Fat	Less than	20g	80g
Cholesterol	Less than	300mg	300mg
Sodium	Less than	2,400mg	2,400mg
Total Carbohydrate		300g	375g
Dietary Fiber		25g	30g

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