

# Child Care Training and Resource Kit

## Food Allergies

# Handouts

- 1 ☐ Child Care Training and Resource Kit
  - Allergy
  - Overheads
- 2 ☐ Food Allergy, Food Intolerance and Food Preferences
- 3 ☐ Food Allergy
  - An immune mediated reaction against a food protein.
  - In childhood, related to immaturity of immune function.
- 4 ☐ Food Intolerance
  - An adverse reaction to food, like lactose intolerance: a stomach ache 1 hour after a meal.
- 5 ☐ Food-borne Illness
  - This is a bacterial or viral disease that came to you via food that hasn't been prepared properly.
- 6 ☐ Food Allergy Prevalence
  - Children: 5%
  - Adults:
    - 35%-self report
    - 3% by challenge
- 7 ☐ Most Common Food Allergies
  - Milk
  - Eggs
  - Wheat
  - Soy
  - Peanuts
  - Tree Nuts
  - Shellfish and fish
- 8 ☐ Clinical Features
  - Skin Reaction: 89%
    - Hives
    - Swelling
  - Respiratory Reaction: 52%
    - Wheezing
    - Throat Tightness
    - Coughing
    - Shortness of breath
  - Gastrointestinal Reaction
- 9 ☐ Food Allergy
  - Is Very Serious

- Must be treated with AVOIDANCE
- Many true food allergies are life-threatening.

10 ☐ Food Allergies and Classroom Management

- Policies and Procedures in place.
- Information collecting system.
- Emergency plan with health care provider written instructions.
- Allergy inclusion plan.
- Staff training.

# EMERGENCY PLAN FOR KNOWN SEVERE ALLERGIC REACTION

THIS FORM IS TO BE COMPLETED FOR THE CHILD WHO HAS  
POTENTIALLY LIFE-THREATENING REACTIONS TO  
INSECT BITES/STINGS

Child's Name: \_\_\_\_\_ Child's Birthdate: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Health Care Provider Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Allergist Name: \_\_\_\_\_ Phone: \_\_\_\_\_

If our program suspects that \_\_\_\_\_ has been stung or bitten by  
(Child's name)

\_\_\_\_\_ OR develops early signs of severe allergic reaction such as:  
(Type of Insect)

**Respiratory:** cough, wheezing, difficulty breathing, watery discharge from nose or eyes

**Skin:** hives, itching, flushed face or skin, swelling of eyes, face, lips, mouth

**Digestive:** stomach cramps, vomiting, diarrhea

**Cardiac:** dizziness, confusion, weakness, fainting

**Verbal:** feeling an "impending sense of doom" or "not feeling right"

this facility will implement the following emergency plan

1. \_\_\_\_\_ Give prescribed epinephrine (Epi-Pen®) immediately

AND / OR

\_\_\_\_\_ give other prescribed medication

\_\_\_\_\_  
(medication and dosage)

\_\_\_\_\_  
(medication and dosage)

2. **CALL 9-1-1**

3. **CALL PARENT**

4. **CALL CHILD'S PHYSICIAN**

5. **STAY WITH CHILD AT ALL TIMES**

Health Care Provider Signature: \_\_\_\_\_

Parent/ Guardian Signature: \_\_\_\_\_

Child Care Director's Signature: \_\_\_\_\_

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**Children who have allergies to peanuts may have life threatening reactions to extremely small quantities of peanut products.**

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**Alternatives to Peanut Butter**

**Ideas for Children's Meals and Snacks When Peanut Products Need to be Avoided**



**Other Spreads:** Bean dip  
Hummus  
Refried beans Cheese  
Spreads

Sesame Tahini  
(Soybean Butter)  
(Cashew Butter)  
(Almond Butter)

**To Use in Baked Products or as Toppings:**

Seeds\* (sunflower, sesame)  
Raisins\*  
{Nuts\* and Nut Butters (almond, cashew, soy nuts, walnuts, pecans)}



**Protein Replacement:**

Chicken  
Turkey  
Beef  
{Tofu} (not USDA Credible)  
Beans

Tuna  
Hot Dogs\*  
Yogurt  
Cheese

**Caution**

Child care providers should have an emergency plan completed by parent and health care provider. Even "peanut free" centers need to have a plan as peanuts are sometimes hidden in other foods.

Parents of children with a peanut allergy should discuss substitute foods with their child's health care provider or dietitian.

{ }Some individuals with peanut allergies also need to avoid legumes (beans), tree nuts or other foods.

\*Nuts, seeds, raisins and hot dogs can cause choking. Serve only to children five years or older (with good chewing skills)

Avoid cross contamination. Wash and sanitize all cutting surfaces and knives after handling peanut butter. Wash hands thoroughly. Residual peanut butter on surfaces can transfer to "peanut free" foods and cause an allergic reaction.



**CHILD CARE HEALTH PROGRAM**  
A program of Seattle-King County Public Health

## Food Allergy/Intolerance Statement

Name of Child: \_\_\_\_\_

Name of Parent: \_\_\_\_\_ Phone: \_\_\_\_\_  
Day Number Evening Number

Please type or print:

List Each Food Separately	Brief Description of How the Child Reacts to the Food	List Appropriate substitute Food(s)
	Severe Reaction <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Severe Reaction <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Severe Reaction <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Severe Reaction <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Severe Reaction <input type="checkbox"/> Yes <input type="checkbox"/> No	

- **Severe Reaction: Complete Child Care Emergency Plan for Severe Allergic Reaction**

**Health Care Practitioner:** \_\_\_\_\_  
NAME PRINT OR TYPE TITLE

**Signature of Practitioner:** \_\_\_\_\_  
Signature Phone DATE

Mailing Address (PRINT OR TYPE)  
 \_\_\_\_\_  
 \_\_\_\_\_

Please Return to:

## MANAGING FOOD ALLERGIES IN CHILD CARE

- Have a written policy on parent and caregiver responsibilities regarding food allergies.
- Have a physician's statement on file describing: If the food or foods the child is allergic to
  - the food or foods the child is allergic to
  - the type of reaction expected
  - the type of response required
- If life-threatening reactions to foods are known:
  - develop an emergency plan
  - know the anticipated signs of the reaction
  - be ready to give appropriate medications
- Post a list of children and their allergies in the kitchen and food serving areas.
  - Make sure ANYONE preparing or serving food knows of individuals' allergies
  - Request ingredients of food brought in from outside
- Read labels on all food products, checking for possible allergens.
- Involve your Public Health Nutritionist to assure safe food allergy practices.

## **HOW TO USE AND EPI-PEN®**

- 1. PULL OFF THE GRAY SAFETY CAP.**
- 2. PLACE THE BLACK TIP ON OUTER THIGH AT A RIGHT ANGLE TO LEG. (Can administer through clothes.)**
- 3. PRESS HARD INTO THIGH UNTIL THE AUTO-INJECTOR FUNCTIONS.**
- 4. HOLD IN PLACE FOR 15 SECONDS—COUNT SLOWLY.**
- 5. RELEASE AUTO-INJECTOR AND REMOVE UNIT.**
- 6. MASSAGE INJECTION AREAS FOR 10 SECONDS.**
- 7. SEND EPI-PEN® TO HOSPITAL WITH MEDICS.**

**\*\*\*CARRY THE EPI-PEN® WITH YOU ON ALL FIELD TRIPS!!!\*\*\***

## **Some Source of Peanuts**

(Adapted from The Food Allergy Network)

### **Avoid food that contains these ingredients”**

Peanuts

Peanut oils

Ground nuts

Mixed nuts

Nu-Nuts flavored nuts

Peanut butter

### **Other Potential sources of peanuts:**

Peanut flour

African, Chinese and Thai dishes

Baked goods- cookies, pastries, brownies, etc. Candy

Chili

Spaghetti sauce

Chocolate candy or bars

Egg rolls

Hydrolysed plant protein

Hydrolysed vegetable protein

Marzipan

Nougat

Ice cream

Potato chips

French fries

More on the next page

Manufacturing processes can cause peanut contamination in foods that are supposedly peanut free:

- ◆ The FDA does not require that ingredients that comprise less than 2% of total be listed.
- ◆ Candies, cookies and ice cream may have been run on the same line as a peanut product.

Home or school sources of peanut contamination:

- ◆ Peanut butter residue in jelly jar
- ◆ Peanut butter smears on counter/table or toy
- ◆ Using same spatula to remove peanut and non-peanut cookies from pan.
- ◆ Craft projects using peanut butter such as bird feeders.

For more information contact: The Food Allergy Network 703-691-3179  
[www.foodallergy.org](http://www.foodallergy.org)

A Program of The Prevention Division Seattle-King County Department of Public Health

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CHILD CARE  
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