



NEWLY DIAGNOSED *with* Food Allergies?

FAACT's informative guide to help make living *with* food allergies safer and easier





Whether you are newly diagnosed or a long-time member of the allergy community, **FAACT** is your home for **education**, **advocacy**, and **connections** with other parents and adults affected by food allergies and life-threatening anaphylaxis.

FAACT's mission is to educate, advocate, and raise awareness for all individuals and families affected by food allergies and life-threatening anaphylaxis. Whether it's keeping children safe at school, responding to food allergy bullying, traveling, preparing for college, dealing with workplace issues, or simply taking the family out for dinner, **FAACT** has the facts you need to manage food allergies and stay healthy. **FAACT** is your voice for food allergy awareness.

Join us for educational training and support, summits across the country, and many program offerings. Connect with **FAACT** through social media for the latest food allergy and anaphylaxis research. Be sure to support our mission and **"SUBSCRIBE"** to receive our monthly e-newsletter with news and practical tips.

FAACT is here to support you in managing your food allergies - today, tomorrow, and into the future. We **#KnowTheFAACTs** about food allergies and anaphylaxis!



Follow FAACT Today!

Visit FoodAllergyAwareness.org for more information!

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Tips for the Newly Diagnosed



Were you or your child just diagnosed with a food allergy? Did you know as many as 32 million Americans live with food allergies?

The team at FAACT is here to support you as you learn to live a food-allergic lifestyle and manage your food allergy. You are not alone. Very few people are not directly or indirectly affected by food allergies. Having a food allergy does not have to be an overwhelming experience. We want you to view food allergy as a manageable obstacle that you can overcome.

We also want to provide you with some basic survival tips to help make living with food allergy as easy as possible. See below for tips, and download our free, *Newly Diagnosed Guide* here for more tips and resources.

Tips

1. Consult a board-certified allergist.

Finding an allergist is easy. [The American Academy of Allergy, Asthma, and Immunology](#) and the [American College of Allergy, Asthma, and Immunology](#) Web sites can help you find a local allergist. Allergists have specific training and expertise in food allergy and anaphylaxis diagnosis and management beyond pediatricians or family doctors. Work closely with your allergy provider to better understand food allergy, the diagnosis and testing process, and the long-term follow up. Experts recommended that you follow with your allergy provider annually to update your emergency action care plan and renew prescriptions for auto-injectable epinephrine and other medications. If your child is the one with food allergies, your allergist should also fill out school paperwork for emergency medication administration (if your state requires this) as well as facilitate dialogue with schools or childcare centers for section 504 plans or other individualized learning plans.

2. There is no way to prevent an allergic reaction other than avoiding the allergen.

Strict avoidance is the best way to prevent a reaction. This includes all products that definitely contain the allergen as well as those that “may contain,” “manufactured in a shared facility”, or “processed on the same equipment.” Experimenting or taking risks to determine if you can tolerate small exposures to the food allergen is dangerous and will likely result in an allergic reaction. Oral immunotherapy is an experimental research procedure with uncertain results. No one should attempt this therapy or other desensitization therapies by themselves at home - without the guidance of their board-certified allergist. Likewise, oral challenges to prove tolerance should not be performed at home; this should only be done under medical supervision in an allergist’s office.

3. Always have emergency medication (e.g., epinephrine and antihistamines) with you.

While we preach avoidance and vigilance, we also stress preparation. People with food allergies must always be prepared for the worst-case scenario. Every time you leave the house, you must take your emergency medical kit. All too often, food-allergic individuals simply do not comply with this recommendation – and they take a huge risk. Epinephrine is a life-saving medication that can rapidly reverse all symptoms of an allergic reaction. Food allergy fatality is associated with lack of available epinephrine. (Note: Epinephrine products should not be left in the car because extreme temperatures – hot or cold – can affect the effectiveness of the medication.)

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4. Become familiar with how to use your epinephrine product and the steps in your emergency care action plan. *It is essential to not only have your epinephrine product with you at all times but also to know how to use it.*

Make sure you have been trained by a medical professional to use the device. Even young children can and should learn to use these devices on themselves. If you or your child have not been trained, there are [instructional video demonstrations](#) you may access. It is essential to train others who will be in close contact with your or your child how to use the device as well. Similarly, people with food allergies, their caretakers, and close contacts must be intimately familiar with the treatment steps outlined in the emergency care action plan. There can be no hesitation in the moment of need. Baby sitters, nannies, school teachers and administrators, coaches, and other family members must all know how and when to administer epinephrine. There are no situations in which it would be wrong to use an epinephrine device to treat an allergic reaction, but there situations when it may be wrong not to use it.

5. Assume nothing is safe.

Verify all ingredients before declaring a food item safe to eat. Recipes at restaurants and in packaged goods change, so double check the ingredients every time. When dining out or purchasing food items from shops such as a bakery, ask lots of questions. Ask if common preparation surfaces, cooking utensils, or pots/pans/baking sheets are used, ask how these items are cleaned and if an allergen-free environment can be provided. It is essential to ask restaurant staff these questions as well. Use written allergen instruction cards whenever possible, and try to speak with the restaurant manager and/or chef in advance to determine if it will be possible for you or your child to safely eat at that establishment. If you ever are served a dish you suspect to be contaminated with your food allergen, hold onto that dish until a new one can be prepared and served (to ensure the staff don't simply "wipe off" the allergen). Above all else, if you cannot confirm that the food item is safe to eat, don't eat it!

6. Read labels on packaged goods.

Since 2006, federal law mandates all packaged goods containing milk, egg, wheat, soy, fish, crustacean shellfish (but not mollusks), peanut, or tree nut be labeled in plain English declaring the presence of these allergens. However, when the allergens are not main ingredients but could be included in the packaged goods through cross-contact, a product may be voluntarily labeled as "may contain," "manufactured in a shared facility", or "processed on the same equipment." The certainty of what these precautionary statements mean is not always clear. It may mean there is likely contamination, or it could be a legal declaration that the company cannot guarantee the total absence of an ingredient (even if they make nothing that contains that ingredient). Read all labels on packaged goods first. The labeling may not be perfect, but it is helpful. Most allergists recommend strict avoidance of products with precautionary statements if that product had not been safely consumed in the past, although this advice may shift as more research into threshold levels emerges.

7. Learn how to clean potentially cross-contaminated surfaces – including your hands!

Soap and water and commercial detergent wipes are your friends, but gel hand sanitizer is not. Do not use gel hand sanitizer to clean your hands after allergen contact. Use soap and water. If those are not available, use a hand wipe. For cleaning contaminated surfaces, do not use dish soap. (Studies show that dish soap is not effective in removing peanut allergens.) Instead, use a commercial detergent wipe (e.g., Clorox®, Lysol®, etc.) or a commercial spray detergent (e.g., Fantastic®, Formula 409®, Lysol®, Windex® Multi-surface, etc) and clean towel. For dishes, vigorous scrubbing with dish soap and water followed by cleaning in the dish washer is recommended. Allergic reactions can be triggered through ingestion of trace, residual amounts of protein on someone's hands, which can also contaminate common surfaces. This is particularly important among small children who may frequently put their hands – and everything else – in their mouths.

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8. Discourage food sharing.

Unless you can verify that all the ingredients are safe, do not accept food from others. If your child has food allergies, ensure he or she follows this practice at school, on field trips, at sporting events, and at friends' homes. Never assume the food being offered is safe or was safely prepared unless you can personally verify this.

9. Order a medical ID bracelet, necklace, or tag.

No one wants to think about that dreadful day when an emergency comes around. The fact is you must be prepared in every way to ensure you and/or your child are treated properly for anaphylaxis.

- **95% of first responders immediately look for a medical ID in an emergency.** They need to be able to treat your child effectively. Knowing if there are allergens to foods, medications or otherwise is pertinent to them doing so.
- You may not always be able to speak for your child if they are not in your care. The medical ID gives those helping your child the information needed regarding their medical conditions.
- Your child may be in a situation where they cannot speak for themselves!
- A Medical ID gives those in your child's life daily the information they will need, such as school nurses, teachers and caregivers.
- If you are considering using an iPhone or technical device, you may want to think again. A medical ID bracelet, necklace or tag is assurance that when your child needs help they will receive. It is reliable. Emergency responders are trained to look for medical ID's. Technology devices may not be as reliable, if they are not present at the time, and it can be very time consuming trying to figure out how to get into a technical device. During an emergency like anaphylaxis there is not a minute to waste.

10. Become empowered! Living with a food allergy is entirely manageable.

Yes, this requires attention to detail and vigilance, and it means that certain foods have to come out of the diet. But it does not mean that life as you know it will cease to exist. You should not be afraid to eat out, to send your child to school or on play dates, to travel, or to live a normal life. We want you to take proper precautions – not become a prisoner of your own home. Maintaining a normal life and routine is of the utmost importance for building your self-confidence or your child's confidence. Learn as much as you can about food allergy, what the risks are (and are not), and how to protect yourself and your family. Become a strong advocate. Try to teach those around you about the dangers of food allergy and how to treat a potential reaction. Use the FAACT Web site as your guide on how to navigate a food-allergic lifestyle.

Visit FAACT's Resource Centers for Food Allergy & Anaphylaxis and Living with Food Allergies for FREE and downloadable resources.



Newly Diagnosed *with* Food Allergies?

The team at **FAACT** is here to support you as you learn to live a food-allergic lifestyle and manage your food allergy.

A

Avoid the Allergen *Assume nothing!* Verify all ingredients before declaring a food item safe to eat. Read labels on packaged goods and if you have a question on the safety of a product, call the company directly. Learn how to clean potentially cross-contaminated surfaces... including your hands.

B

Be Prepared *Always have emergency medication!* (e.g., epinephrine and antihistamines) with you. Become familiar with how to use your epinephrine product and the steps in your Allergy & Anaphylaxis Emergency Plan.

C

Consult a board-certified allergist

Allergists have specific training and expertise in food allergy and anaphylaxis diagnosis and management. Work closely with your board-certified allergist to better understand food allergy, the testing process and diagnosis, and to develop an Allergy & Anaphylaxis Emergency Plan.

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FoodAllergyAwareness.org



Navigating *the* Psychological Aspects of a New Diagnosis

For many, receiving a food allergy diagnosis can feel very difficult. While some may navigate this transition with ease, please know that you're not alone if you experience the following thoughts and feelings:

- **Overwhelmed:** Feeling intimidated by the amount of information given, new safety protocols, and your own ability to navigate daily life with a food allergy
- **Anxiety:** Anxiety may increase, especially while adapting to new routines
- **Sadness:** Wondering if the initial sadness will pass, or if every experience will make you sad
- **Anger:** Feeling upset by the diagnosis and necessary lifestyle changes
- **Grief:** Grieving the loss of "normalcy" or being able to navigate situations without extra precautions

Helpful Reminders When Adjusting to A New Diagnosis:

- **Time:** Allow yourself time and space to acclimate to your new normal and to process your feelings. Seek support from a licensed clinical behavioral healthcare provider if you find these emotions are impacting daily life to a degree you're uncomfortable with.
- **Education:** Education is key, and knowledge is power, so focus on what you need to know now. Build a solid foundation by initially focusing on the key concepts that will help you navigate daily life with food allergies, such as: accurately managing your specific allergen(s), navigating anaphylaxis, label reading, preventing cross-contact, and educating loved ones. This basic education should come from your board-certified allergist and reputable resources such as [FAACTS's Newly Diagnosed Guide](#) or the American College of Allergy, Asthma and Immunology (ACAAI) [website](#).
- **Practice:** Your initial instinct may be to avoid situations that may be safe, but make you uncomfortable. Remind yourself that you'll gain confidence and learn from each experience you navigate with food allergies.
- **Tools:** Having the tools needed to manage food allergies safely can help decrease fear and increase confidence. Be sure to always carry two epinephrine products and your [Allergy & Anaphylaxis Emergency Plan](#) at all times, and consider wearing medical alert jewelry or tags, such as those from the [Medic Alert Foundation](#).
- **Support:** Peer support can be helpful during this transition phase. To locate a local support group near you, check out [FAACT-recognized support groups](#).



10 FAFACTs *about* Food Allergies

- 1** Food allergies affect **as many as 32 million** Americans, including 6 million children. Studies report that **1 in 13** children and up to **1 in 10** adults in the United States have a food allergy. For children, this averages to **two** children per classroom.
- 2** A food allergy is an **immune system response** to a food that the body mistakenly believes is harmful.
- 3** Nine foods account for 90% of all food allergy reactions: **Peanuts, Tree nuts, Milk, Egg, Wheat, Soy, Fish, Shellfish, and Sesame**. However, almost any food can cause a reaction.
- 4** There is **no cure** for food allergies and **strict avoidance** is the only way to prevent an allergic reaction.
Trace amounts of an allergen can trigger an allergic reaction in some individuals.
- 5** Past reactions to a food allergy **do not predict future reactions!** Someone can still have a life-threatening reaction to a food they are allergic to, even if they have never had a serious reaction before.
- 6** Symptoms can **develop rapidly** after exposure to an allergen, often within minutes and usually within 30 minutes. However, it can take up to 2 hours for symptoms to occur after exposure to a food allergen.
- 7** Anaphylaxis is a **serious allergic reaction** that comes on quickly and has the potential to become life-threatening. Anaphylaxis requires immediate medical treatment, including administration of epinephrine and a visit to the emergency room.
- 8** It is important to be deliberate and not hesitate when you have to use epinephrine. The device is **potentially life-saving**. A call to 9-1-1 and a trip to the emergency room should always follow epinephrine administration.
- 9** Individuals at risk should carry **two epinephrine products** with them at all times AND an **Allergy and Anaphylaxis Emergency Care Action Plan** signed by a board-certified allergist.
- 10** **Food allergies continue to rise** and are a safety and public health concern across the United States. You can get free resources and find out how to help keep those with food allergies safe at:

[FoodAllergyAwareness.org](https://www.FoodAllergyAwareness.org)

Anaphylaxis **FAACTs**

- 1** Is a **serious allergic reaction** that comes on quickly and has the potential to become life-threatening.
- 2** Epinephrine (adrenaline) is the **first line of treatment** for anaphylaxis. Prompt administration of epinephrine is crucial to surviving life-threatening reaction.
- 3** **Symptoms** can develop rapidly after exposure to an allergen, often within minutes and usually within 30 minutes. However, it can take up to 2 hours for symptoms to occur after exposure to a food allergen.
- 4** After epinephrine has been administered, have the person **lay down with his or her legs** raised, if possible, to help restore blood flow to vital organs (heart, lungs, brain).
- 5** **Call 9-1-1** and/or seek medical attention immediately. Monitoring or additional medications may be required. Repeated doses of epinephrine may be necessary if the symptoms are not going away.
- 6** Sometimes a second round (or “phase”) of allergic reactions can occur after the initial anaphylactic reaction. This is called **“biphasic anaphylaxis”**. A second reaction may happen as early as an hour after the first reaction or as long as 72 hours later and can be less severe, as severe, or even more severe than the initial reaction.

SIGNS AND SYMPTOMS OF ANAPHYLAXIS

Anaphylaxis (an-a-fi-LAK-sis) is a serious allergic reaction that comes on quickly and has the potential to become life-threatening. The most common anaphylactic reactions are to foods, venom, medications, and latex.

Anaphylaxis signs and symptoms that may occur alone (*) or in any combination after exposure to an allergen include:

MOUTH:

itching, tingling, swelling of the lips/tongue/palate (roof of the mouth)

* THROAT:

hoarseness, tightening of throat, difficulty swallowing, hacking cough, stridor (a loud, high-pitched sound when breathing in)

* LUNGS:

shortness of breath, wheezing, coughing, chest pain, tightness

GUT:

abdominal pain, nausea, vomiting, diarrhea

CNS/BRAIN:

anxiety, panic, sense of doom

EYES/NOSE:

runny nose, stuffy nose, sneezing, watery red eyes, itchy eyes, swollen eyes

SKIN:

hives or other rash, redness/flushing, itching, swelling

* CIRCULATION/HEART:

chest pain, low blood pressure, weak pulse, shock, pale blue color, dizziness or fainting, lethargy (lack of energy)

*** IMMEDIATE & POTENTIAL LIFE-THREATENING SYMPTOMS**

Consult with a board-certified allergist for an accurate diagnosis and management plan.

Although the majority of individuals experiencing anaphylaxis have skin symptoms, some of the most severe cases have no rash, hives, swelling

EPINEPHRINE is the first-line of treatment for anaphylaxis

Antihistamines, inhalers, & other treatments should only be used as secondary treatment

ALWAYS CARRY TWO (2) epinephrine products at all times

When you, or someone you know, begin to experience symptoms, CALL 9-1-1 IMMEDIATELY!



AWARENESS • ADVOCACY • EDUCATION

FoodAllergyAwareness.org

The Voice of Food Allergy Awareness

Do You Know Your Epinephrine Options? Available in the U.S. by prescription

Auvi-Q by Kaléo

Website: auvi-q.com/

Available through Home Delivery and At Walgreens:
auvi-q.com/get-auvi-q/

Dosage: 0.1mg/0.15mg/0.3mg

Hold time: 2 seconds

Needle: Retracts after injection

Trainer: Included

Support Program: auvi-q.com/support

Training Videos: auvi-q.com/training



Neffy by ARS Pharma

Website: neffy.com

Dosage: 2 mg

Weight: for individuals 66 pounds or more

How to Use: neffy.com/#how-to-use and ars-pharma.com/wp-content/uploads/pdf/Instructions_For_Use.pdf

How to Use in Adults: <https://youtu.be/DnJlyHs1-sw>

How to Use in Adolescents: https://youtu.be/vyTM_xRiJlk

Savings & Support: neffy.com/#savings-and-support

Neffy Action Plan: neffy.com/static/Action-Plan.pdf



Epi-Pen and Epi-Pen Jr by Mylan

Website: epipen.com/en/

Dosage: 0.15mg/0.3mg

Hold time: 3 seconds

Needle: Covered after injection

Trainer: Included

Savings Program: epipen.com/paying-for-epipen-and-generic#PatientAssistanceProgram

Administration Training Video: epipen.com/en/about-epipen-and-generic/how-to-use-epipen



The Authorized Generic to Epi-Pen and Epi-Pen Jr

Website: epipen.com/en/about-epipen-and-generic/what-is-an-authorized-generic

Dosage: 0.15mg/0.3mg

Hold time: 3 seconds

Needle: Covered after injection

Trainer: Included

Savings Program: activatethecard.com/mygenericai/?_ga=1.45028076.935859954.1485174656

Administration Training Video: epipen.com/en/about-epipen-and-generic/how-to-use-epipen



The Authorized Generic for Adrenaclick

by Impax **Available in CVS Pharmacy:**

cvs.com/content/epipen-alternative

Dosage: 0.15mg/0.3mg

Hold time: 10 seconds

Needle: Not covered after injection

Trainer: Not included

Savings Program: <https://services.trialcard.com/Coupon/Epinephrine>

Administration Training Video:
epinephrineautoinject.com/epinephrine-side-effects/how-to-use/



Teva Epinephrine by Teva

Website: tevaepinephrine.com

Dosage: 0.15mg/0.3mg

Hold time: 3 seconds

Needle: Covered after injection

Trainer: Included

Savings Program: tevaepinephrine.com/savings

Administration Training Video:
tevaepinephrine.com/howtouse



For more information on epinephrine & anaphylaxis, visit: FoodAllergyAwareness.org

Preventing Cross-Contact *and* Accidental Environmental Exposure

Cross-contact and environmental exposure are often cited as top concerns for families managing food allergies. Cross-contact can occur through incidental contact with utensils, pots and pans, and preparation surfaces.

Environmental exposure can occur through contamination of surfaces and are widely thought to occur through inhalation of allergen. This is a particular concern at school and on airplanes. The good news is that allergens can be readily cleaned from hands and body parts, cookware and utensils, and environmental surfaces.

Tips to prevent environmental contamination:



When cleaning surfaces (such as desks, counters, tables, airline seats or tray tables, etc.), use a wipe that contains a commercial detergent (e.g., Clorox®, Lysol®, etc), or apply a spray-on detergent (e.g. Formula 409®, Fantastic®, Windex® Multi-Surface, etc.) and vigorously wipe the area that has come into contact with the allergen. **In a 2004 study, dish soap did not remove peanut allergen.**

Run contaminated pots, pans, and utensils through a normal dishwasher cycle or wash them by hand with hot, soapy water and scrub the surfaces thoroughly. Use a sponge, scouring pad, or dish rag that has not come into contact with the allergen. Rinse and dry thoroughly with a clean towel. Avoid just wiping down a knife or common utensil with a rag after touching an allergen (a common practice at sandwich shops).



For washing hands or face, use warm/hot, soapy water or a commercial “tidy” wipe. Hand sanitizing gel is not sufficient to remove allergens. This is important in the healthcare setting, as most healthcare facilities have moved to near-exclusive use of hand sanitizing gels for infectious purposes.

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FoodAllergyAwareness.org

Reading Labels For Allergens



To ensure foods are safe for your needs, reading food labels is a requirement.

The Food Allergen Labeling and Consumer Protection Act of 2004 requires that foods containing major food allergens be listed in plain English **in the ingredient list, in parentheses within the ingredient list, or after the word “contains.”**

It **does not require** companies to declare that something “may” or “might” contain, or is “processed in a shared facility” with, any of the major food allergens.

If a product does not have a label, it should not be eaten.

Read labels **each and every time** before eating any food product. Ingredients can change over time, or may vary depending upon the size of the product (e.g. jumbo vs snack size).

Statements advising that products may/might contain or are made in shared facilities with a food allergen are purely voluntary. Most companies do try to be helpful and highlight where there may be a possible risk. However, **a product should not be considered “safe” just because it does not list these “maybe’s.”**

Call the company to inquire about how their products are processed, their cleaning methods, and how items are packaged.

Seeking out products produced in a **“dedicated” facility** can add an additional level of security to ensure that food is safe.

Do a search on **“allergy-friendly” products** to generate a list of allergy friendly food companies.

Be sure to read ALL labels, including: personal care items, craft supplies and pet foods too!

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Dining Out

Eating out at a restaurant, bakery, cafeteria, or fast food establishment can be an enjoyable and convenient experience. However, because you have food allergies, it's imperative that every precaution has been taken to ensure the food being served to you is safe. Even then, it should not be relied on as a guarantee. Families and adults who eat out should always carry two (2) auto-injectable epinephrine devices at all times and be prepared to act quickly in an emergency.

When dining out with food allergies, question everything, assume nothing!

Do not assume that a bakery promoting allergy-free foods is safe.

- **Question** the bakery about their policy and knowledge, specifically on "food allergies."

Do not assume that a restaurant has a good policy in place just because it promotes itself as "allergy aware."

- **Question** what type of food allergy policy is in place. Ask the manager to walk you through the entire meal preparation.

Do not assume an item is free from your allergen because it "sounds" free.

- **Question** whether the item contains allergens or not. For example, depending on the manufacturer, "imitation crab" can, in fact, contain real shellfish in addition to soy, wheat, and fish.

Do not assume your server knows the ingredients, even if he or she says they do.

- **Question** the ingredients in a dish with the chef and manager.

Do not assume your server will remember you on your next visit or your allergens, even if you frequent the restaurant often.

- **Question** food ingredients and inform the hostess and wait staff of your allergy each visit.

Do not assume because you had a dish once with no issues, the dish will be safe each visit.

- **Question** if the dish contains your allergen and if products have changed since your last visit.

Do not assume because you cannot see your allergen in a dish, that the dish does not contain it.

- **Question** what the item is made from and ask if it contains your allergen.

Do not assume the server, manager, or chef understands the severity of your allergy.

- **Question** whether they understand the difference between a true allergy, vegan, gluten, or other intolerances and dietary restrictions.

On the other hand, do assume the manager, server, or chef does not understand the severity of your allergy.

- **Question** yourself as to why they feel uneasy to confirm a particular dish can be created for you safely. If you sense any hesitation from the staff about any food item, don't chance it. Avoid it!

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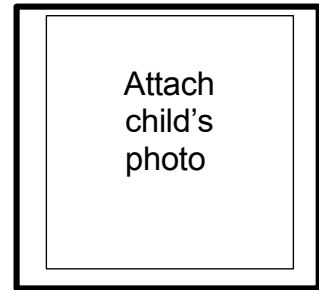




Child's name: _____ Date of plan: _____

Date of birth: ____ / ____ / ____ Age ____ Weight: _____ kg

Child has allergy to _____



- Child has asthma. Yes No (If yes, higher chance severe reaction)
 Child has had anaphylaxis. Yes No
 Child may carry medicine. Yes No
 Child may give him/herself medicine. Yes No (If child refuses/is unable to self-treat, an adult must give medicine)

IMPORTANT REMINDER

Anaphylaxis is a potentially life-threatening, severe allergic reaction. If in doubt, give epinephrine.

For Severe Allergy and Anaphylaxis What to look for



If child has ANY of these severe symptoms after eating the food or having a sting, **give epinephrine**.

- Shortness of breath, wheezing, or coughing
- Skin color is pale or has a bluish color
- Weak pulse
- Fainting or dizziness
- Tight or hoarse throat
- Trouble breathing or swallowing
- Swelling of lips or tongue that bother breathing
- Vomiting or diarrhea (if severe or combined with other symptoms)
- Many hives or redness over body
- Feeling of "doom," confusion, altered consciousness, or agitation

Give epinephrine! What to do

1. Give epinephrine right away! Note time when epinephrine was given.
2. Call 911.
 - Ask for ambulance with epinephrine.
 - Tell rescue squad when epinephrine was given.
3. Stay with child and:
 - Call parents and child's doctor.
 - Give a second dose of epinephrine, if symptoms get worse, continue, or do not get better in 5 minutes.
 - Keep child lying on back. If the child vomits or has trouble breathing, keep child lying on his or her side.
4. Give other medicine, if prescribed. Do not use other medicine in place of epinephrine.
 - Antihistamine
 - Inhaler/bronchodilator

SPECIAL SITUATION: If this box is checked, child has an extremely severe allergy to an insect sting or the following food(s): _____. Even if child has MILD symptoms after a sting or eating these foods, **give epinephrine**.

For Mild Allergic Reaction What to look for



If child has had any mild symptoms, **monitor child**.

Symptoms may include:

- Itchy nose, sneezing, itchy mouth
- A few hives
- Mild stomach nausea or discomfort

Monitor child What to do

Stay with child and:

- Watch child closely.
- Give antihistamine (if prescribed).
- Call parents and child's doctor.
- If more than 1 symptom or symptoms of severe allergy/anaphylaxis develop, use epinephrine. (See "For Severe Allergy and Anaphylaxis.")

Medicines/Doses

Epinephrine (list type): _____ Intramuscular: 0.10 mg (7.5 kg to less than 13 kg)*
 0.15 mg (13 kg to less than 25 kg)
 0.30 mg (25 kg or more)
 (*Use 0.15 mg, if 0.10 mg is not available)

Intranasal: 2 mg (30 kg or more)

**If more than one epinephrine is selected, then either one can be used

Antihistamine, by mouth (type and dose): _____

Other (for example, inhaler/bronchodilator if child has asthma): _____

Parent/Guardian Authorization Signature _____

Date _____

Physician/HCP Authorization Signature _____

Date _____

Allergy and Anaphylaxis Emergency Plan

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



Child's name: _____ Date of plan: _____

Additional Instructions:

Contacts

Call 911 / Rescue squad: _____

Doctor: _____ Phone: _____

Parent/Guardian: _____ Phone: _____

Parent/Guardian: _____ Phone: _____

Other Emergency Contacts

Name/Relationship: _____ Phone: _____

Name/Relationship: _____ Phone: _____

FAACT's Resources

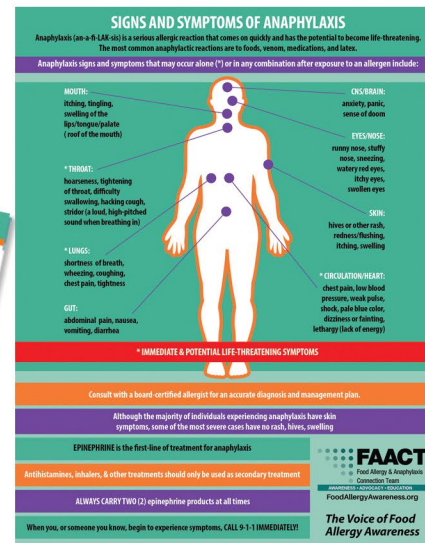
Events & Programs



FAACT's programs help provide a safe environment for families and individuals to learn about managing food allergies and connect with others who share similar experiences.

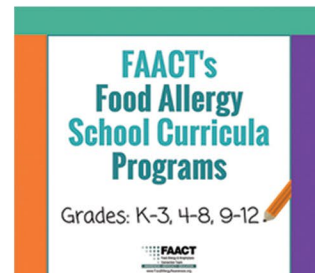
Educational Posters & Guides

FAACT has many ways you can share important information about food allergies and anaphylaxis with others.



Programs for Schools

FAACT has educational programs to help educate staff and classmates about food allergy safety. The programs and resources are simple to download and FREE to use!



FoodAllergyAwareness.org