FARE College Program

UPDATED

Best Practices for Food Allergy Management in Higher Education

FARE
Food Allergy Research & Education

This document is intended to serve as guidance to best practices and will undergo modifications as needed.

Colleges and universities are invited to use this document as a resource. Colleges and universities are also invited to share their experiences and feedback by emailing Collegeprogram@foodallergy.org.

Contents

Acknowledgments

FARE convened a group of food service experts to provide feedback on the original document, *Guidelines for Managing Food Allergy in Higher Education,* published in 2015. Key input for the initial guidelines published in 2015 came from two college summits bringing together representatives from over 50 universities, as well as committees consisting of key stakeholders from disability services, health services, dining services, and resident life, the Association on Higher Education And Disability (AHEAD), a U.S. Department of Education liaison, parents, and students with food allergies.

Food Allergy Food Service Advisory Council (FAFSAC) Members

The following individuals played a pivotal role in helping create and review the updated *Best Practices for Food Allergy Management in Higher Education* to make sure they are comprehensive, accurate, evidence-based, and practical.

- **Lisa Carlson, MS, RDN, LDN, Chartwells Higher Education**
- **Christina Keller, JD, M.Ed., Founder and CEO, SafeTable Solutions**
- **Beckee Moreland, Food Allergy and Gluten-Free Food Service Consultant**
- **Joel Schaefer, CCC, CDM, CFPP, Director of Culinary Education and Operations, Culinary Academy of Las Vegas**
- **Lesley Schatz, MPH, RD, LDN, Manager of Culinary Systems, Sodexo USA**
- **Allyson West, RD, LDN, Director of Health and Wellbeing, Harvest Table Culinary Group**

Organizations Formally Endorsing These Best Practices

The following organizations and their leadership or appointed representatives have reviewed the updated *Best Practices for Food Allergy Management in Higher Education*, provided comments, and chosen to formally endorse the recommendations.

AHEAD Association on Higher Education And Disability®

BEYOND CELIAC Together for a Cure

CELIAC DISEASE FOUNDATION®

nca National Celiac Association Education & Advocacy for the Gluten-Free Community

NEBRASKA EXTENSION

Introduction

Researchers estimate that up to 33 million people in the U.S., including one in 13 children and one in 10 adults, have food allergy. In fact, reports released by the Centers for Disease Control and Prevention found that the number of children with food allergies in the U.S. increased 50 percent between 1997 and 2011, and again up by 50 percent between 2007 and 2021.[1,2] Additionally, an estimated 1 in 133 people in the U.S., or 1% of the population, has the autoimmune disorder celiac disease.[3]

Food allergy reactions send someone to the emergency department every 10 seconds.[4] The increasing number of people with food allergy, coupled with the fact that teenagers and young adults are at the highest risk for fatal food-induced anaphylaxis, makes this a critical issue for colleges and universities.

Section 504 of the Rehabilitation Act of 1973 prohibits discrimination based on disability. The Americans with Disabilities Act of 1990 (ADA) defines a person with a disability as having a physical or mental impairment that "substantially limits" one or more major life activities, including eating and breathing, affecting digestive systems, respiratory systems and more. The ADA Amendments Act of 2008 (ADAA) further broadened the definition of a "disability" to include conditions that are episodic or intermittent, such as food allergy or celiac disease.

College students with food allergy and celiac disease are protected under both the ADA and Section 504 of the Rehabilitation Act of 1973. These laws apply to public entities (e.g., public colleges and universities) under Title II of the ADA, to places of public accommodations (e.g., restaurants, transportation, hotels, private colleges, etc.) under Title III of the ADA, and to all schools receiving federal funding under Section 504. Schools are prohibited from discriminating against students with disabilities and must provide reasonable accommodations tailored to the needs of individual students with disabilities that is necessary for these students to have equal access to the schools' programs, facilities, and services—including access to safe food and housing, and to classroom accommodations.

In addition, the settlement agreement between the U.S. Department of Justice and Lesley University in December 2012, and the Rider University settlement in February 2019, increased awareness among higher education administration, campus staff, and contractors. These cases are reminders that food allergy and celiac disease qualify as a disability, and the school is responsible for managing accommodations.[5]

Establishing a campus-wide approach, solid policies and procedures, and effective training are essential to providing a safe and inclusive environment. Because no two schools are the same, the plans that work best on one campus may not be the best solution for another. This guide is a resource to assist colleges and universities in best serving their campus communities' needs and was developed with the input of various campus stakeholders from disability services, dining services, health services, and residence life. For the purposes of this document, the term "food allergy" will extend to celiac disease and gluten intolerance/sensitivity. For additional information on celiac disease specifics, see *Recommendations for Colleges and Universities Managing Students with Celiac Disease* published by the Celiac Disease Foundation.

There are two parts to this document:

- The **Accessing Services Guide** is intended to assist in broader accommodations streamlined through central point of contact in disability services, and extending to residence life, health services, student affairs, and other departments in creating and implementing effective policies and services to meet the needs of students with food allergy and celiac disease throughout the college setting. Campus-wide collaboration is critical.
- The **Dining Services Guide** is intended to provide solutions and best practices for safely preparing food for students with food allergy and celiac disease.

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1 *Zablotsky B, Black LI, Akinbami LJ. Diagnosed Allergic Conditions in Children Aged 0-17 Years: United States, 2021. NCHS Data Brief. 2023 Jan;(459):1-8. PMID: 36700870. https://www.cdc.gov/nchs/products/databriefs/db459.htm*

2 *Jackson KD, Howie LD, Akinbami LJ. Trends in allergic conditions among children: United States, 1997-2011. NCHS data brief, no 121. Hyattsville, MD: National Center for Health Statistics. 2013. Retrieved from http://www.cdc.gov/nchs/products/databriefs/db121.htm.*

3 *Fasano A, Berti I, Gerarduzzi T, Not T, Colletti RB, Drago S, Elitsur Y, Green PH, Guandalini S, Hill ID, Pietzak M, Ventura A, Thorpe M, Kryszak D, Fornaroli F, Wasserman SS, Murray JA, Horvath K. Prevalence of celiac disease in at-risk and not-at-risk groups in the United States: a large multicenter study. Arch Intern Med. 2003 Feb 10;163(3):286-92. doi: 10.1001/archinte.163.3.286. PMID: 12578508.*

4 *Gupta RS, Warren CM, Smith BM, Jiang J, Blumenstock JA, Davis MM, Schleimer RP, Nadeau KC. Prevalence and Severity of Food Allergies Among US Adults. JAMA Network Open 2019; 2(1):e185630.doi:10.1001/jamanetworkopen.2018.5630.*

5 *U.S. Department of Justice Civil Rights Division. Questions and Answers About the Lesley University Agreement and Potential Implications for Individuals with Food Allergies. Available at www.ada.gov/q&a_lesley_university.htm. Accessed Nov. 5, 2014.*

Accessing Services Guide

The number of college students with food allergy and celiac disease is growing. Many of these students have received important support and services throughout their elementary and high school years that will only continue into college when they know to ask for them. When college students are connected to the appropriate services on campus, most dietary concerns can be successfully managed, and the risk of potentially life-threatening reactions can be greatly reduced.

A critical first step to ensuring successful management of food allergies on campus is helping students understand the process for disclosing their food allergies and requesting services.

Best Practices for Food Allergy Management on Campus

The following principles represent best practices for addressing the needs of students with food allergy. Schools should develop and maintain:

- A collaborative, campus-wide approach governed by one centralized point of contact at the school to manage accommodations, and communicate needs across departments (which may include Dining, Housing/Residence Life, Student Health, Academics, etc.).
- A process to educate students and their parents about how students over the age of 18 (not their caregiver) are legally responsible for having conversations with various departments. [See the **High Point University Accessibilty Flyer**]
- A transparent and flexible process capable of meeting student needs without being burdensome that includes:
  - A clearly documented policy to review the process with deadlines for requesting accommodations/modifications,
  - Documentation required to establish an individual's food allergy as a disability,
  - A process for determining appropriate, equitable accommodations/modifications,
  - Implementation plan for each stakeholder (Residence Life, Academics, etc.) of accommodations/modifications,
  - Outreach and marketing for services available and food allergy awareness,
  - Appeal and review process to determine if adjustments are necessary.
- Emergency response plans, access to treatment, and training on recognizing and responding to a reaction.
- Best practices around student confidentiality.
  - As with other medical information and student records, information about a student's food allergy or celiac disease should only be shared with those staff members directly involved in the implementation of accommodations/modifications or in the emergency plans for these students. Collection and storage of these documents should adhere to FERPA regulations.

Components of an Effective Food Allergy Policy

A policy that covers food allergy may be written as a separate policy or included within a disability policy for the campus. Ensure that policies and procedures (including appeals or grievance procedures) are clear, well documented, widely publicized, and regularly reviewed. Whether the policy stands on its own or is incorporated within your existing policies, the following are important areas it must cover.

A Clear Process for Requesting Accommodations/Modifications

Communicating with college students requires ensuring that the message is repeated in different campus venues and programs. Colleges should seek to make the food allergy accommodation process easy to find in a centralized resource online, as well as easy to understand and follow. Students will likely seek out the information in different places, which is why all food allergy information should funnel students toward a centralized resource.

- Include links to the school's food allergy policies on various university webpages or platforms. Work with your web development teams to include keywords so students can easily find policies with a simple search from the university's main homepage and on the admission page, prospective student page, and pages for housing services, disability services, dining services and health services.
  - Keywords: Food Allergy, Food Allergies, Celiac Disease, Celiac, Allergy, Allergies, Food Intolerance, Gluten, Eosinophilic Esophagitis, Anaphylaxis, Special Diets.
- All information should be consistent and direct the student back to a centralized department that provides them with all the information needed to disclose their medical condition (e.g., food allergy, celiac disease, etc.) and request accommodations. Information should include:
  - Current policies and procedures,
  - Key contact information,
  - Documentation requirements,
  - Timelines and deadlines,
  - Accommodation forms.

The school should consider confidential ways to share this information with contractors, should they be employed to conduct work on campus, such as, dining services. Knowing there are 500 students with food allergy in the incoming freshman class, even without specifics, can help the team plan better for the year ahead.

See Appendix page (37) for examples of policies.

Documentation Required to Establish an Individual's Food Allergy as a Disability

Colleges and universities should develop a comprehensive policy which outlines eligibility criteria and clear and reasonable documentation requirements. Each college or university may establish their own requirements, and it is suggested that they are developed in consultation with student health services and/or dining services.

Postsecondary institutions should use the following principles in establishing documentation guidelines and accommodations for students with disabilities:

- Accommodation requests should be reviewed on a case-by-case basis using an interactive process involving the university and the student.
- The student's self-report should be considered an important component of the accommodation decision.
- Documentation may be required in the decision-making process; however, specific documentation language should not be required.

Documentation requirement considerations:

- Documentation should come from a physician (MD, DO, or ER provider) confirming diagnosis of a dietary restriction (e.g., food allergy or celiac disease).
- Documentation should identify dietary restrictions and potential severe reactions (including whether allergies are airborne, contact-based, etc.).
- Documentation may include recommended accommodations (but this should not be required). The **Association on Higher Education And Disability (AHEAD)** provides additional resources and information about disability documentation.

Ideally, documentation should be recent (within the last two years) as the condition may change throughout someone's lifecycle. It is essential, as with other conditions, that the documentation support the need for accommodations/modification as defined by the Americans with Disabilities Act (ADA).

A determination of whether or not the information supplied adequately documents the existence of a current disability and need for accommodation/modification is critical. If the documentation does not meet the school's requirements, the student should be notified in a timely manner so that additional documentation may be gathered.

While not required for documentation, some students may also provide a more comprehensive medical evaluation from their physician. Additional information from the student's doctor can help guide the school and student on the most appropriate plan to meet the student's individual needs. A comprehensive medical evaluation can be reviewed in consultation with health services on campus and might include the following items:

- Date of onset and any ongoing treatment.
- Documentation of a past severe allergic reaction to a particular food(s).
- Records of allergy testing, which might include skin prick tests, blood tests, oral food challenges or elimination diets.
- Specific recommendations for appropriate accommodations through housing services, dining services, or other departments. This might include options for a single room accommodation, access to a kitchen with separate storage of food items and cooking equipment, avoiding food allergens in science labs, etc.

For celiac disease, a more comprehensive medical evaluation might include standard testing for celiac disease—such as blood tests, an endoscopy with biopsy, or a gluten challenge—as well as specific recommendations for appropriate accommodations.

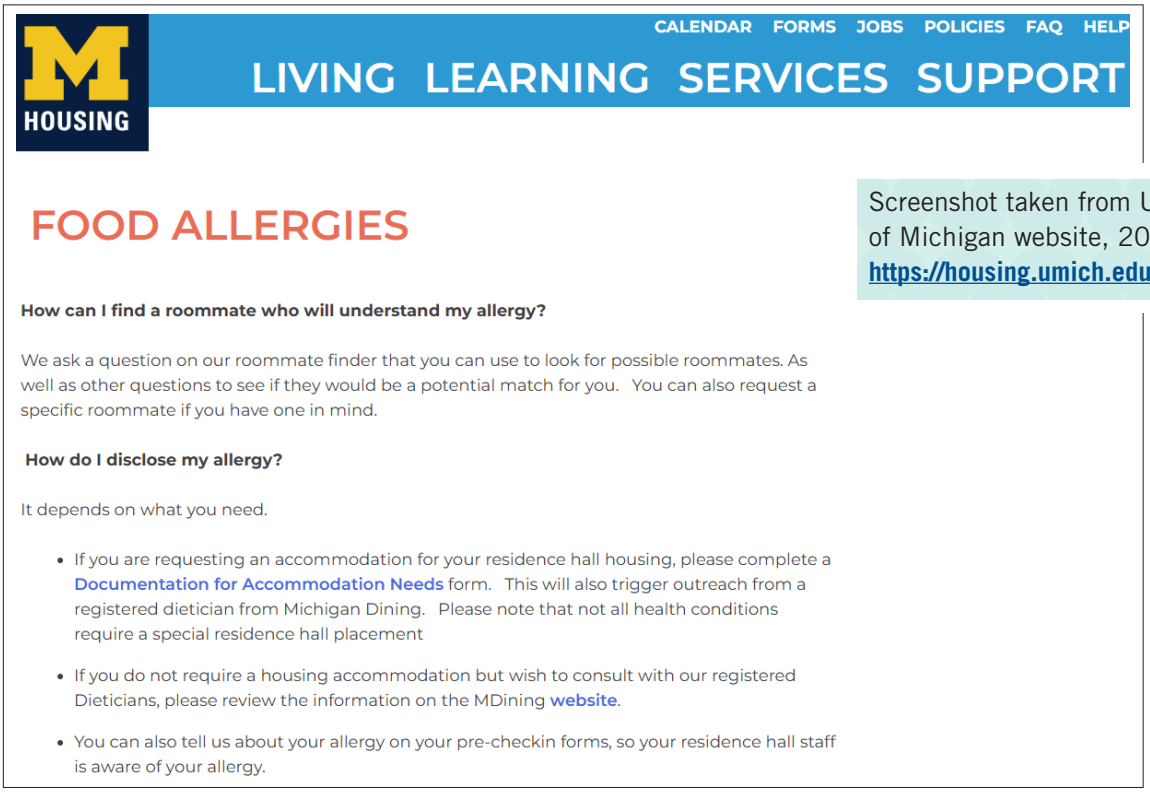
A Process for Determining Appropriate Accommodations/Modifications

It is vital that each school develop a process for determining accommodations/modifications that is interactive and clearly outlines who is responsible for implementing them. Managing dietary restrictions is very individualized and a one-size-fits-all approach is not appropriate. This process will involve coordinating accommodations/modifications with other offices on campus. Document the plan that has been established and provide a copy to the student, dining services, health services and residential life staff. Be sure to include the protocol for emergency response in the event the student has a reaction within the plan.

The following are examples of accommodations/modifications that schools may consider when addressing the needs of students with food allergies. All accommodations should be determined on a case-by-case basis and should involve communication with the student for determining barriers to access and ways in which these barriers can be addressed.

Residential Life Accommodations/Modifications

- Modifications to housing policies and activities such as offering a single room, a room with another student with food allergies, a room with a kitchen, or additional food storage or pre-approved cooking appliances (example: rice cooker, microwave, hot plate etc.) Regular safety inspections encouraged.
- Capture additional information on roommate lifestyle questionnaire to aid in finding a roommate who is open to avoiding certain foods in the room or may be managing similar restrictions.
- Access to a specific allergy-friendly food preparation area or access to a separate kitchen to prepare their own meals. Space should be maintained by dining services or facilities to help to ensure a safe space.
- Reserving a few floors of a dorm that is closest to the best dining hall for accommodating special diets for food allergy students.
- Train resident advisors during their orientation to their role on food allergy awareness, safety and inclusion during events, and how to recognize and respond to an allergic reaction.
  - Resident advisors could survey residents on dietary restrictions for event planning purposes.
  - Community events could be experience-based and avoid food. Some examples are going to a movie or a concert instead of hosting an ice cream social or pizza night.
  - Resident advisors could be an access point for additional nutrition resources on campus (example: food allergy clubs and organizations, food pantry, counseling services, etc.).



CALENDAR FORMS JOBS POLICIES FAQ HELP

HOUSING

LIVING LEARNING SERVICES SUPPORT

FOOD ALLERGIES

How can I find a roommate who will understand my allergy?

We ask a question on our roommate finder that you can use to look for possible roommates. As well as other questions to see if they would be a potential match for you. You can also request a specific roommate if you have one in mind.

How do I disclose my allergy?

It depends on what you need.

- If you are requesting an accommodation for your residence hall housing, please complete a Documentation for Accommodation Needs form. This will also trigger outreach from a registered dietician from Michigan Dining. Please note that not all health conditions require a special residence hall placement
- If you do not require a housing accommodation but wish to consult with our registered Dieticians, please review the information on the MDining website.
- You can also tell us about your allergy on your pre-checkin forms, so your residence hall staff is aware of your allergy.

Screenshot taken from University of Michigan website, 2025: https://housing.umich.edu/help_desk/food-allergies/

Academic + Extracurricular Accommodations

- Flexibility with attendance and/or deadlines when students experience a food allergy or celiac disease reaction.
- Class adjustments, if necessary and appropriate. For example, a culinary student may need to prepare only foods without their allergen(s) or a biology student may need to avoid handling their allergen(s) in a lab.
- Student should be able to request no food (or potential allergen) in classroom.
- School sponsored sports teams, clubs and organizations (example: Greek life, varsity soccer team) should provide accommodations if requested.

Examples of Dining Services Accommodations/Modifications

With food allergies, dining services may play a big role in accommodations if the student is dining on campus. Here are a few examples of accommodations but see Dining Services Guide beginning on page 16 for additional information.

- Ensure nutritionally balanced meals made without specific allergen(s), easily identifiable by students, are made available during all dining hours to prevent gaps in access.
- Implement procedures to avoid cross-contact throughout dining services.
- Share allergen information at the point of service and online, updated in real time.
- Offer consultation with a dietitian, chef and/or dining hall managers to establish point of contact within dining services and provide information on food production.
- Recognize that students with food allergies and celiac disease can request a release or modification of mandatory meal plans. If an exemption or modification is deemed appropriate, consider other accommodations that may be necessary to ensure the student has access to safe food (e.g. a dorm room with access to a private kitchen).
- Provide online pre-ordering service option for students with the option to share allergy information to alert staff.

Implementation of Accommodations/Modifications

The Rider University settlement agreement (https://archive.ada.gov/rider_sa.html) states the school is to appoint a centralized department to oversee food allergy accommodation requests, manage the implementation of a food allergy policy, and champion the needs of students with food allergies on campus. To have the greatest impact, the school should develop a

pathway to key stakeholders that share the responsibilities of engaging with students and brainstorming appropriate accommodations. At minimum, the team should consist of at least one representative from dining services, housing services, disability services, health services, and campus emergency responders. Departments to consider for inclusion:

- **Disability Services** - To manage the process that students must follow in order to qualify for accommodations.
- **Dining Services** - To review, provide feedback for and implement the dietary accommodations requests and emergency response plans for the dining halls.
- **Housing Services** - To implement housing accommodations and emergency response plans for the dorms. Supervise and offer food allergy training for Resident Advisors.
- **Health Services** - To address medical concerns and aid in medication management and emergency response should a reaction occur. Ensuring all staff are trained in these procedures is critical.
- **Campus Emergency Responders** - To assist with and implement emergency plans and training all staff on recognizing and responding to a life-threatening reaction. Responders should have access to stock epinephrine on their person and know the closest hospital for additional treatment.
- **Marketing/Communications Team -** To support communication of general dietary accommodations and offerings on campus in partnership with stakeholders (including contractors, if hired to provide services).
- **School's Legal Team -** To assist with policy creation/disclaimers as needed.

In addition, a group of liaisons should be developed to broaden outreach to students with food allergy to ensure they are able to fully participate in college events and programs. Those liaisons would be targeted for outreach efforts. The departments/offices in this liaison group could include, but are not limited to:

- **Office for Parent Programs**
- **Event Planning Staff/Catering**
- **Athletics**
- **Greek Life**
- **Alumni Groups**
- **Student Groups**
- **Student Affairs**
- **Incoming Student Orientation Staff**

Consider what programs and activities are held on your campus to determine which departments should be included in your outreach efforts.

In addition to helping with the implementation of food allergy accommodations/modifications, partnering with these departments will serve multiple functions. First, it will help educate key personnel on food allergy policies. Secondly, it will strengthen existing relationships between the departments, which ensures an effective flow of information during the implementation process. Lastly, including key department representatives will ensure the school's staff around campus are aware of the centralized channel for requesting and receiving food allergy accommodations, regardless of which department takes this role.

Screenshot taken from University of Massachusetts Amherst website, 2025: https://umassdining.com/nutrition/food-allergies-special-diets

Outreach and Marketing

It is important that students disclose their food allergy to the school, preferably before arriving on campus. But this does not always occur, and there may be some challenges in encouraging students to disclose their allergies. First, some students may be reluctant to self-identify because of perceived stigma or a desire to feel normal in a peer setting. Second, if students choose to seek accommodations/modifications, they may not understand the process for requesting assistance or know where to find important application materials.

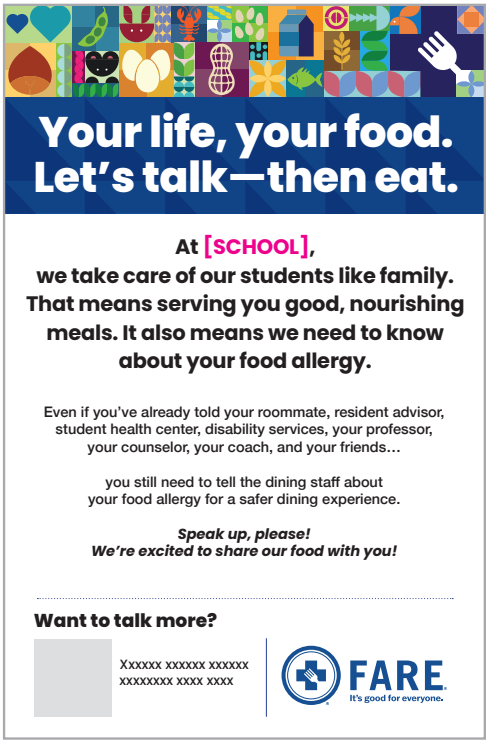
While it is ultimately the student's responsibility to disclose food allergy to the school, the school can remove barriers by providing food allergy accommodation information in various places and funneling the students to the single office managing accommodations across campus.

It is recommended that the school notify all incoming (first-year and transfer) students of the ways to contact disability services to request accommodations/modifications. In addition, provide as many ways as possible for students to disclose their dietary restrictions, and create a system so those disclosures are reported back to the primary department responsible for food allergy accommodations. Here are some places to include these opportunities:

- Housing applications and roommate questionnaires
  - **Note:** Also consider reaching out to providers of off-campus housing, such as Greek Life housing, and asking them to incorporate this into their processes.
- Meal plan purchase forms
- Student healthcare forms
- Invitations for campus events such as orientation and open houses where food is served
- Accepted Students Day
- On the college's website:
  - Disability services page
  - Dining services page
  - Housing services page
- Athletics forms

Note: no pre-admission inquiry about an applicant's disability status is allowed.

Having comprehensive food allergy policies is critical, but just as essential is ensuring that the campus community knows these policies exist. Spread the word around campus and signage in the dining and first year residential halls as well.



Self disclosure poster

- Use interactions with new students to promote the school's food allergy policies.
  - Orientation or Student Admittance Events
  - If dining services does a presentation during orientation, potential food allergy accommodations can be mentioned.
  - During orientation meals, food allergies should be discussed and accommodated. If allowed per school's policy, outreach to students ahead of planned events is key.
- Student tours
  - Tour guides can provide updated information about food allergy policies and examples of accommodations while giving tours to prospective students. Provide tour of dining facilities during prospective student visits.
- Include food allergy information and resources in printed materials or emails sent to prospective students.
  - Use social media to promote food allergy policies and appropriate campus dining locations with safe options.

Assessment of Services

A multidisciplinary team should be established to review the process, ensure compliance and remedy mistakes so that they can be avoided in the future.

The same multidisciplinary team, led by Disabilities Services, should meet to review the process, ensure compliance and remedy mistakes so that they can be avoided in the future. For the purposes of this document, this group will be deemed the Food Allergy Team. It's critical to talk with other departments to gauge how the accommodations/modifications process is working in different areas.

Each college may have its own idea about what success will look like. You will need to determine what your college will look for to determine if your food allergy policy has been successful, but here are some key success markers to consider:

- Reported (alleged) allergic reactions are minimal. It's important to note that reactions may be underreported, so asking students whether they've experienced reactions is helpful. Incident reports may be filed within dining services, and/or Student Health, but the school can determine the best pathway to gather information.
- Students with food allergy and celiac disease are able to fully participate and be included in on-campus dining and housing.
- You have a variety of quality allergy-friendly menu items that look and taste good and includes breakfast, snacks, and desserts. You will also need to create a process to measure whether you are meeting your goals.
- Systems and emergency protocols are in place in the event an allergic reaction occurs.
- Create ongoing student satisfaction surveys (or host student feedback groups) to measure the students' perceptions of safety, inclusion, enjoyment, etc. Sample questions include:
  - How long did it take for you to feel acclimated and comfortable with managing your food allergy or celiac disease on campus?
  - Do you feel safe eating on campus?
  - How often do you opt out of a meal because of safety concerns?
  - How often do you eat the same safe foods in the cafeteria instead of trying new foods?
  - Have you experienced any reactions in the dining facilities on campus?
  - Have you had any problems with your roommate(s) or living situation related to food allergies or celiac disease?
  - Have you experienced any reactions in your dorm room?
  - Do you feel your voice is heard?
  - How did you find out where to go for food allergy accommodations/modifications? How long did it take you to learn this information?
  - Over the last year, did you experience a food allergy reaction on campus? If so, how many times?
- Develop a one-on-one connection with students with food allergy and celiac disease that allows for open communication. Do this via whatever method the student is most comfortable with (text messages, email, in-person meetings, etc.). It'll allow you to customize your approach to each student and will help you gauge the success of your program.
- Review your school against other colleges and universities on **FARE College Search Tool**.

This multidisciplinary team review is done on a wide-scale, general basis; however individual accommodations plans may also require a deeper review and potential modifications.

Summary: Components of an Effective Food Allergy Policy

- ❑ Create a clear process for requesting food allergy accommodations, and make sure this information is easy to find online from multiple sources (dining services website, school's homepage, etc.).
- ❑ Determine what documentation is required to establish students' dietary restrictions as a disability.
- ❑ Create a process for determining what appropriate accommodations will be. **Note:** Accommodations will need to be determined on a case-by-case basis and in collaboration with the student.
- ❑ Develop partnerships with other departments to implement accommodations. Be considerate in setting deadlines.
- ❑ Leverage your partnerships with other departments to market and communicate food allergy policies and procedures to staff and students.
- ❑ Create a process to assess the services being offered and identify areas for improvement.

Emergency Response Plans and Training for Food Allergy

Most allergic reactions will occur where a student lives and eats, which includes dining halls, residence halls, sports arenas and even classrooms. While your school likely has emergency procedures already in place, it is important that a consistent emergency response plan for food allergy is created and distributed.

Creating an Emergency Response Plan

For severe allergic reactions known as anaphylaxis, administer epinephrine immediately. Remember "epi first, epi fast"! There is a needle-free option available now, in addition to the auto-injectors. Delay in administering epinephrine increases the risk of death, so ensuring rapid access to epinephrine needs to be a top priority. When creating an emergency response plan for food allergy reactions and anaphylaxis, consider the following questions:

1. If someone dials 911 from a campus phone, will they reach an outside emergency services provider or campus security? How quickly can emergency responders arrive?
2. Will campus or city emergency responders be sent when 911 is dialed? Will the emergency responders sent have epinephrine with them? Are they trained to use them? **Note:** In some jurisdictions, emergency responders do not automatically carry epinephrine, so the need must be indicated when calling.
3. If the emergency responders to your campus do not have epinephrine, how will you ensure students can access epinephrine quickly? Will you keep stock epinephrine (undesignated epinephrine that can be used for any person experiencing a severe allergic reaction) and allow key staff to be trained? Is there a medical center on campus, academic building or dining hall where stock epinephrine can be kept and quickly accessed?
4. If a student has epinephrine but is unable to administer themselves during a reaction, will campus staff—including resident advisors, student health center staff—be trained on how to administer it? If not, what will the plan be for getting the epinephrine administered in a timely manner? What are applicable Good Samaritan laws in your state?
    - For information on the different types of epinephrine administration and how to use them, please visit: **FoodAllergy.org/epinephrine**
5. Where is the nearest medical center that can treat an allergic reaction?
6. Who will undergo emergency response training? At minimum, this should be staff who work in the student health center, areas where students live and eat, and anywhere stock epinephrine is stored.

A student with a prescription for epinephrine should always carry their medication with them, but in case a student does not have their epinephrine, or a person with a previously undiagnosed allergy has a reaction, it is important to consider the timeliest way to access epinephrine.

Emergency Response Training

Staff who will be involved with food allergy accommodations should undergo proper training so that they can effectively serve students. Most people realize, for example, that dining services staff need to understand how to safely prepare foods for students with food allergy. However, it is also important that others working with students, particularly those who work where students consume food, receive emergency response training.

Consider, will a resident advisor know what to do if a student experiences an allergic reaction in a dorm room? Will a cashier in the dining hall know what to do if a student experiences an allergic reaction? Will the front desk staff of the student health center know how to respond?

Proper training can save lives. Food allergy training should include the following information:

1. Food allergy and celiac disease basics (including statistics and descriptions).
   - For food allergy basics visit: **FoodAllergy.org/facts-and-stats**
   - For celiac disease basics, visit: **https://celiac.org/about-celiac-disease/what-is-celiac-disease/**
   - Additional free food allergy resources can be found here: **FoodAllergy.org/downloadables**
2. The symptoms of a food allergy reaction and how to recognize anaphylaxis. Download a FARE poster on recognizing and responding to a reaction here: **FoodAllergy.org/resources/recognizing-and-responding-reaction** or see Appendix page 50.
   - **Note:** Anaphylaxis is a severe, life-threatening allergic reaction that can be caused by food. A person with celiac disease will not experience anaphylaxis from consuming gluten but may experience other serious health consequences. For more on celiac disease symptoms, visit **https://www.beyondceliac.org/celiac-disease/symptoms/**
3. How to properly respond to anaphylaxis. Download the FARE Food Allergy & Anaphylaxis Emergency Care Plan, which should be filled out by the student's physician, here: **FoodAllergy.org/ecp** or see Appendix pages 47-48.
   - Ensure the student having a life-threatening reaction receives epinephrine immediately. Any delay in administering epinephrine increases the risk of death.
   - Call 911 or local EMS depending on your school.
     - Clearly communicate the student's location on campus.
     - The dispatcher must be told that a student is having an allergic reaction and epinephrine is needed. Not all emergency responders carry epinephrine, so it is critical that this information is conveyed.
   - Lay the person flat and raise their legs. If breathing is difficult or they are vomiting, let them sit up or lie on their side. A person in anaphylaxis should NEVER be stood up.
   - If symptoms do not improve, a second dose of epinephrine can be given 5 minutes or more after the last dose.
   - Have emergency responders transport the student to the emergency department, even if symptoms resolve. The student should remain in the emergency department for at least four hours because symptoms may return. When symptoms return after a delay, this is called a biphasic reaction.
   - Students should never return to their dorm room or apartment alone if they think they may be having an allergic reaction. Remind students that they should remain with others until it is clear whether they are experiencing anaphylaxis.
4. Your school's specific policies and resources.
   - Where to direct students in need of accommodations/modifications.
   - Emergency response procedures.
   - Incident reports.
   - Investigation into cause and resolution, if appropriate.

Resident Advisor Additional Training

A resident advisor (RA) plays a unique and important role in students' lives and safety. In addition to the training discussed above, RAs should also receive training on how to mediate conflicts that may occur, particularly surrounding food in a dorm room, which can pose a safety risk to students with food allergy.

RAs are also in a good position to help students become their own best advocates when it comes to their safety and well-being. A few simple things RAs can do could save a life:

- Encourage students to have ongoing communication with disability services, dining services, and housing.
- Encourage students to disclose their allergies to friends and when dining out.
- Encourage students to report reactions immediately and never go to their dorm room alone if they think they may be having a reaction, even if they think it's mild. Reactions can go from mild to severe very quickly.
- Encourage safe behaviors and open communication with dating, because intimate contact like kissing can lead to an allergic reaction. While young adults may find it uncomfortable to discuss their food allergies and kissing with a date, if a date consumes a student's allergen, they should wait at least a four hours and consume a safe meal before kissing.
- Encourage students to ALWAYS carry their medications/epinephrine, show roommates and RAs where they keep their medication in their room, and have a FARE Food Allergy & Anaphlaxis Emergency Care Plan available in their room (e.g., on back of their door).
- Plan inclusive community events with a non-food activity at the center (e.g., movie, game night) or provide food appropriate for their resident's dietary restrictions (e.g., snow cones instead of ice cream).
- Be on alert for food allergy-related bullying.

Alcohol and food allergy is another topic RAs should be aware of. Alcohol presents multiple potential threats to someone with food allergy:

- Disclosure of major food allergens on alcoholic beverage labels is not required by law. Some alcoholic beverages may contain allergens such as milk, tree nuts, egg, and wheat that may not be listed on the label (see page 21).
- Consuming alcohol may impair judgment and increase risk-taking behaviors, not just of the student but of those around them. This could lead to eating something unsafe or deciding not to carry epinephrine.
- Alcohol may increase the rate at which a food allergen is absorbed, resulting in a quicker onset of symptoms.
- Alcohol can slow reaction times and inhibit a person's ability to recognize a reaction and administer epinephrine.

RAs should also know that anaphylaxis and intoxication share many of the same symptoms, including flushed skin, confusion, vomiting, and passing out. They should never assume a student with a food allergy is intoxicated, as the student may be in anaphylaxis and in immediate need of medical attention.

Dining Services Additional Training

In addition to the training mentioned above, dining services staff will need in-depth training on how to plan, prepare and serve food safe for students with food allergies and celiac disease. Additional information for dining services staff is provided in the Dining Services Guide beginning on page 16.

Summary: Emergency Response Plans and Training for Food Allergy

- ❑ Create an emergency plan that considers the quickest way to get epinephrine to a student experiencing anaphylaxis.
- ❑ Train staff involved in food allergy accommodations, particularly staff in dining services and housing services, on food allergy, symptoms, how to recognize and respond to a food allergy reaction, and on how to implement campus emergency plans for anaphylaxis.
- ❑ Provide additional training for resident advisors (RAs) on helping students become their own self-advocates, mediating conflicts surrounding food in dorm rooms, and recognizing the symptoms of anaphylaxis.

Dining Services Guide

As part of the Food Allergy Team (see page 12), dining services is required to have policies in place to serve those with food allergy and celiac disease. Having proper plans, procedures and training in place will help dining services provide consistency and safety. This guide is intended to offer solutions and suggestions to help dining services create and implement an effective policy based on the individual needs of each student and campus. If your dining provider is a contract company, ensure that their food allergy policy is in alignment with the school's food allergy policy.

While some information, such as proper cleaning procedures, must be followed in every situation to ensure students' safety, many of the solutions offered here are intended to be adaptable to each school's unique challenges and resources. Use the information provided here to create a plan and policy that can be implemented consistently and safely on your campus.

Training

Dining services staff is a critical component of the food allergy and celiac disease plan for students choosing to dine on campus. Creating a training plan is essential and can include on-demand or train-the-trainer formats to expand on standard curriculum, and languages offered.

Every employee should be trained as part of the new hire process, but ongoing training is also important. Implement a training schedule so employees are re-trained annually. Consider the level and type of training required for each type of employee. This may be dependent on the employee's position.

At a minimum, all managers, chefs, and cooks should know:

- Your institution's food allergy and celiac disease policies and procedures.
- Common food allergens and grains containing gluten, including common hidden sources.
- Proper hand hygiene to prevent cross-contact.
- Importance of following recipe exactly as written and process for substitutions.
- How to avoid cross-contact through preparation, proper cleaning, and isolation of allergy-friendly meals.
- How to recognize and respond to an allergic reaction (see page 50).

You may wish to provide certain employees additional training. For example, chefs may benefit from training on recipe development for allergy-friendly or gluten-free dishes. Employees responsible for checking labels may benefit from additional training on how to read ingredient labels. Consider each employee's responsibilities and provide more in-depth, targeted training as needed.

- Front of-house associates should be trained regarding their job responsibilities and should be able to answer basic questions on how to find information. This may mean directing students to a manager for further information.
- Daily huddles or pre-service meetings can reinforce food allergy and gluten-free training by highlighting where allergens and gluten can be found in menu options and ingredients during that meal period or full-day menu.
- Collateral materials on food allergies, such as posters, can help keep the issue fresh in the minds of staff. See Appendix (page 49) for a sample FARE food allergy poster.

Back-of-House Policy

Any effective food allergy plan for dining services must include a policy that addresses each step of the back-of-house food service. This needs to begin with understanding how to track allergens, include recipe development and ingredient lists, and must address every area from procurement to receiving to food preparation. A policy that fails to address even a single part of the food service process puts students with food allergy and celiac disease at increased danger of experiencing a reaction.

Allergen Mapping

A dining services food allergy plan should begin with an allergen map. Follow an allergen or an allergy-friendly item on its usual path through your operation from procurement to the receiving door to the dining floor. This will help you identify places in your operation at higher risk for cross-contact.

Note: Cross-contact is different than cross-contamination.

- Cross-contact is when food components are accidentally transferred to a dish, leaving traces of unintended ingredients. This can cause a serious allergic reaction
- Cross-contamination is when micro-organisms such as bacteria are introduced to a food. This can be a cause for foodborne illness.

Although nearly any food is capable of causing an allergic reaction, nine (9) foods or food groups account for the majority of food-allergic reactions in the United States. These foods are:

- Wheat
- Milk
- Soy
- Egg
- Sesame
- Peanut
- Tree nuts (example: almond, cashew, walnut)
- Fin fish (example: salmon, tilapia)
- Crustacean shellfish (example: shrimp, crab)

On January 6, 2025, FDA published the food allergen labeling-related final guidance document, *Questions and Answers Regarding Food Allergens*, Including the Food Allergen Labeling Requirements of the Federal Food, Drug, and Cosmetic Act (Edition 5). The questions and answers in the final guidance inform the legal requirements of the Food Allergen Labeling and Consumer Protection Act of 2004 (FALCPA).

The FDA has reduced its list of tree nuts requiring food allergen labeling to 12 types of tree nuts (previously 23 types). These are the tree nuts that continue to require food allergen labeling:

- Almond
- Black walnut
- Brazil nut
- California walnut
- Cashew
- Filbert (also known as hazelnut)
- Heartnut (also known as Japanese walnut)
- Macadamia nut (also known as Bush nut)
- Pecan
- Pine nut (also known as pinon nut)
- Pistachio
- English and Persian walnut

Coconut will no longer be recognized as a tree nut requiring food allergen labeling under the law. You will no longer see coconut listed in a "Contains: tree nuts (coconut)" statement on food labels. But you will continue to see coconut listed individually in the ingredient list when used in a food.

Update to FDA Guidance for Food Allergen Labeling - FoodAllergy.org

This is an example of federal legislation that affects food allergy labels. It is important to stay on top of labeling changes to ensure menu accuracy and transparency for students.

Depending on the Allergen Mapping solution used at your school, you have the choice to map either products WITH allergens or those WITHOUT. For example, you may choose to designate certain starchy dry goods such as plain rice and quinoa as gluten- and Top-9 free foods, and map their progress throughout the department, rather than mapping the progress of every gluten/wheat-containing starchy food such as pasta, stuffing mix, rice pilaf, etc. If you choose to map products with allergens, review products with the Top 9 allergens and gluten to trace their existence throughout your dining facility.

Allergen mapping begins with procurement and should continue through delivery, storage, preparation and service. The allergen map should be regularly reviewed for cross-contact dangers. The goal of allergen-mapping is to minimize the possibility of an allergen encountering an otherwise safe food.

Below is an example of a gluten allergen map based on a chart created by University of Chicago.

Photo credit: Best Practices for Avoiding Gluten (AG) courtesy of Chartwells Higher Education | University of Chicago

Build a Recipe and Ingredient Database

The only way for people with food allergies to avoid potentially fatal allergic reactions is to avoid exposure to their allergens. This means people with food allergies need to know every ingredient contained in an item—as well as how the dish is prepared—before consuming it so standardized recipes are critically important. Standardized recipes provide a consistent accountability of ingredients and menu transparency.

In order to accurately provide ingredient lists, add every recipe and each one of its ingredients into a searchable database and provide the information online in real time. Designate 1-2 staff members to manage database, update items, and confirm accuracy of the database on a daily basis. While creating this database is time-intensive on the front end, it can save you and your students a lot of time on a daily basis. Providing a student with incorrect information could be fatal.

Once the database containing every item is created, there are several ways to communicate that information to students:

- Because students often prefer to access information online, having a searchable database accessible from the dining services website is ideal. If menus including full ingredient lists are posted on the dining services website, students with food allergies will be able to go online and choose a location serving an item that is "allergy friendly" for them. As an added bonus, students without food allergy can access the menu and ingredient lists for nutritional purposes.

Note: NEVER label anything as allergen-free or include the allergen information on an item unless you are 100% certain of the ingredients, since dining facilities are typically open kitchens and manufacturers can change their formulation without notice.

- Other solutions allowing students easy access to full ingredient lists are on-site kiosks at the dining facility that contain the searchable database.

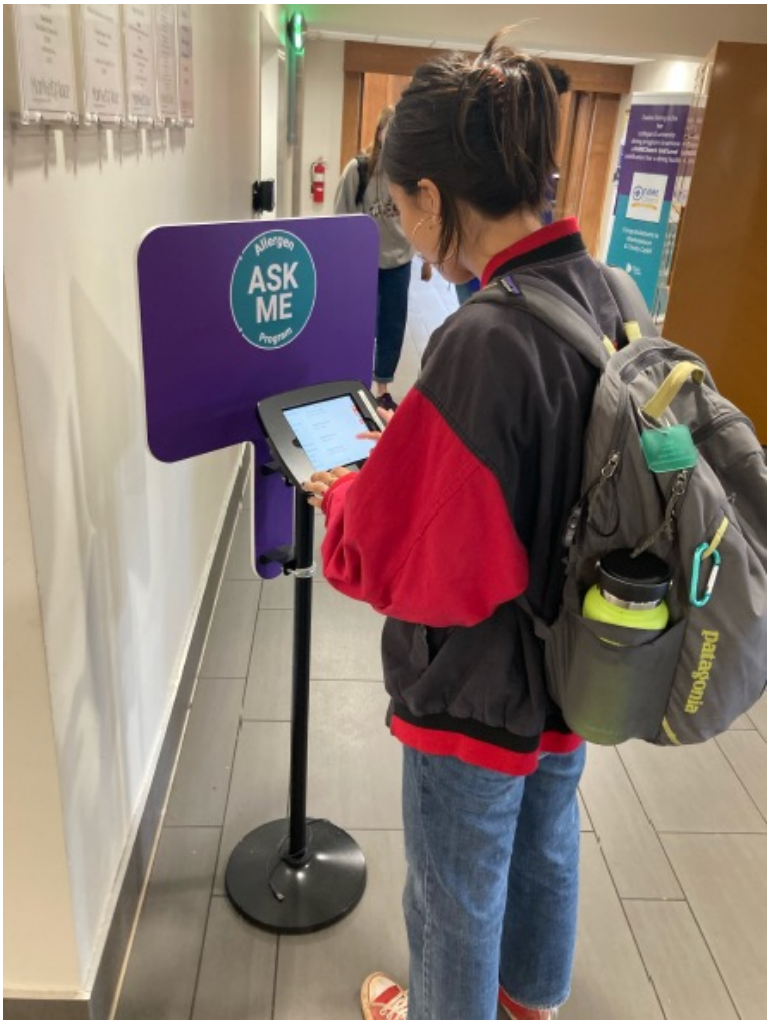


Photo from Duke University Dining Hall, 2024

- On-site digital menu screens can also display menu items and ingredient lists. Due to limited space on digital boards, some dining facilities may opt to only include statements about the top allergens contained in an item. Students should be informed on where to access additional information if needed.

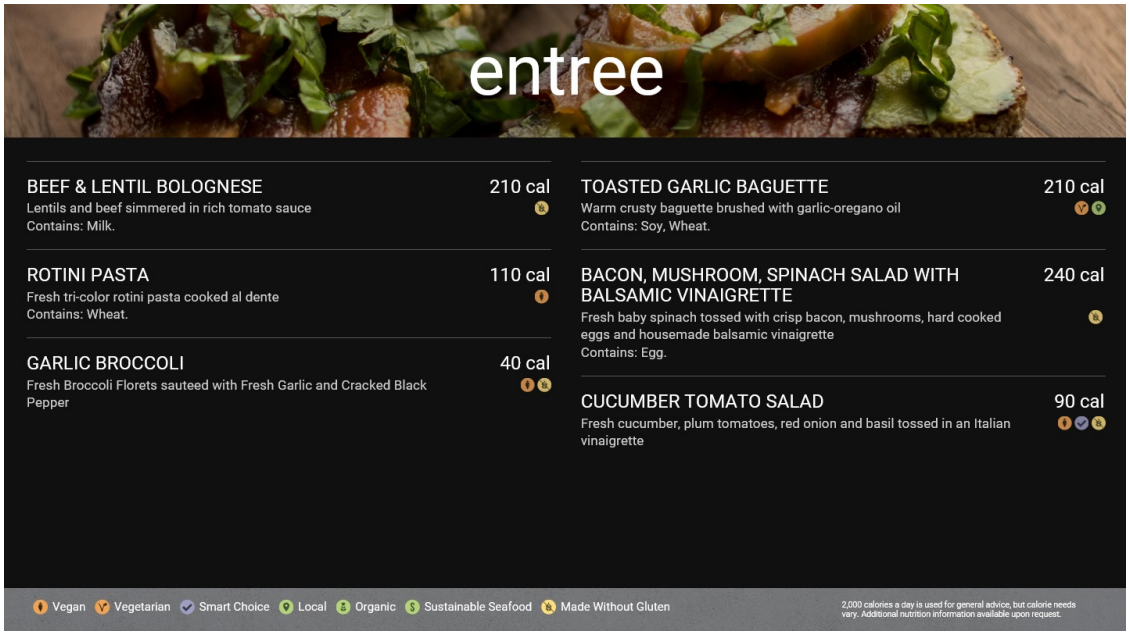


Photo courtesy of Harvest Table Culinary Group

- Printed ingredient lists next to menu items or available upon request are another option. It is a good idea to date these lists so students can see when the lists were updated.
- A phone app that contains the searchable database is a current technology that many students find helpful.

Some dining locations may opt to alert the students only when the Top 9 allergens in the U.S. and/or gluten are contained in a menu item. This can be done by listing which items are present (e.g. "Contains: wheat, eggs, milk") or when they are not present (e.g. "Does not contain: wheat, eggs, milk"). However, this labeling may be insufficient because:

- More than 170 foods have been identified as causing food allergy reactions.
- 40 percent of people with food allergy are allergic to multiple foods.
- Schools with a high population of international students will be hosting students from countries that have different top allergens.

As such, this type of signage may not prove helpful to people with allergies outside of the Top 9, and gluten. Whenever possible, list all ingredients and encourage students to speak up to disclose the allergens they are managing and ask questions about ingredients.

In order to make sure your ingredient lists are accurate, staff must follow the recipes exactly. Establish a policy including a plan and procedure for when you are missing ingredients needed for recipes. If substitutions are made, it is no longer the same dish—allergens present may be different and the change must be clearly communicated.

Manufacturers can change ingredients without warning, so it is important to check packaged items coming into your facility to ensure you are aware of any changes to the ingredients. Check all ingredient labels each time a food is purchased and received. When changes have been made, update your recipe and ingredient database.

Procurement

Allergen control begins with procurement. It's critical to train procurement and receiving staff on food allergy. They are the first line of defense when it comes to products brought into facility. Create a written policy for all vendors that carries over to their contracts and addresses the following issues:

- Distributors and manufacturers must provide full ingredient lists for every item they ship to the campus.
- Distributors cannot send substitute items without school's approval.
- Distributors will send alerts if an item is no longer available.
- Manufacturers will send alerts if an item's recipe is changing.

- If there are ingredients you never want served in your dining hall, create a list and include that in your distributor and manufacturer contracts.
- Every person involved in procurement can serve as an extra checker. Check the ingredients as items are ordered, check the labels of items as they are received and put into storage, and check the invoices for product substitutions as they are being entered for payment.

Receiving

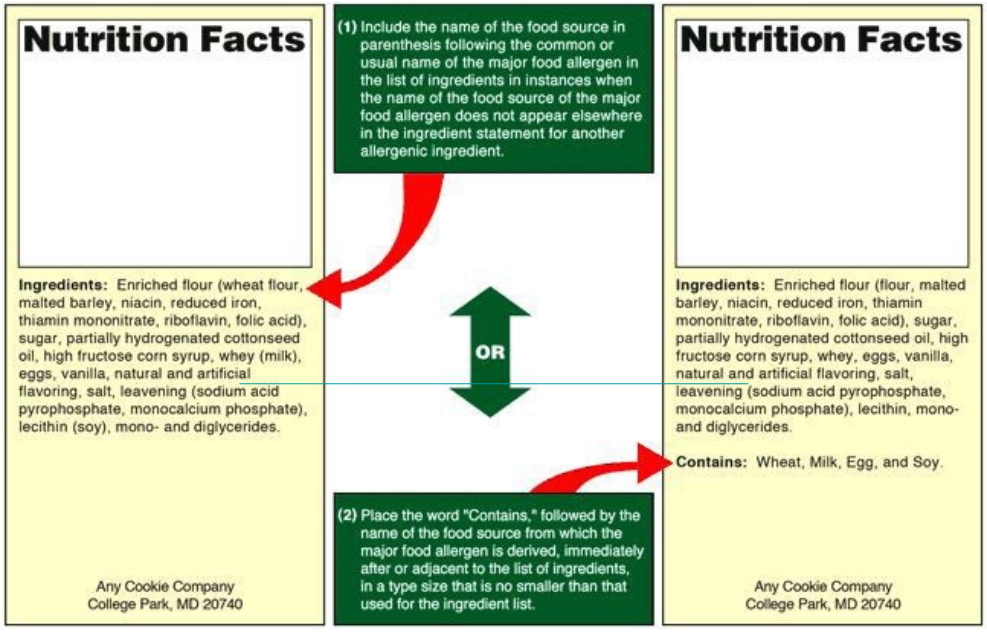
Create a policy and train employees on how to handle and receive products. The policy needs to address how employees should handle allergens as they unload them, as well as what to do if a substitution has been made by the vendor. Here are some things to consider when creating your policy:

- Segregate foods that are Top 9 allergy-friendly or gluten-free as much as possible.
- How to handle damaged items. Reject items that are broken or damaged. For example, if a bag of flour has broken open in the truck, the employee should check all the other products to ensure they have not experienced cross-contact. In the event of a spill or leak, a thorough cleaning should also be done to remove allergens from environment and packaging before storage.
- If new or replacement items are arriving in a shipment, verify the ingredients on the label and update the database as appropriate.
- Receiving staff should double-check and flag any substitute items that come in.
- Decide what you will do if packaged products arrive without ingredient labels. Will you reject the product or contact the seller for ingredient information? If you plan to contact the seller for ingredient information, develop a standard form to send them.
- Items ordered exclusively for Top 9 stations can be marked (purple sticker, purple marker, etc.) to ensure clean passage to the station for storage.

Note: When considering your receiving policies, remember that the handling of allergens and gluten should not interfere or conflict with standard practices for the prevention of foodborne illness.

Label Reading

Label reading is critical in providing accurate information to students. The Food Allergen Labeling and Consumer Protection Act (FALCPA) and the FASTER Act of 2021 requires that foods containing the most common 9 Allergens list the allergen in plain language on the label. This applies to both domestic packaged foods and imported packaged foods. Below is an example of two ways packages can call out allergens on their labels.



FDA Label Example

However, foods regulated by the USDA or the Alcohol Tobacco Tax and Trade Bureau instead of the U.S. Food and Drug Administration are exempted from FALCPA requirements. This includes meat, some egg products and nearly all alcoholic beverages (some hard ciders under 7 percent alcohol content include allergen information on their labels).

For more information about FALCPA and FASTER Act, visit: **https://www.fda.gov/regulatory-information/search-fda-guidance-documents/guidance-industry-questions-and-answers-regarding-food-allergen-labeling-edition-5**

Dining services staff should know that advisory labeling is completely voluntary for manufacturers. Advisory labeling refers to statements like "may contain," "processed in a facility that also processes," and "made on shared equipment with." However, clearly communicating how you handle advisory labeling should be part of your policy.

It is important to check every label because allergens sometimes appear in unexpected places. For example, canned tuna sometimes contains soy or milk protein, which could cause allergic reactions in individuals with soy or milk allergies.

FARE's "Tips for Avoiding Your Allergen" guide, which demonstrates how to read labels, can be found here: **FoodAllergy.org/tips-avoiding-allergen**

Gluten-Free Labeling

Unlike FALCPA and the FASTER Act of 2021, FDA gluten-free labeling is a voluntary claim. However, if products are labeled "gluten-free" they must meet the FDA guidance. **https://www.fda.gov/food/nutrition-food-labeling-and-critical-foods/gluten-free-labeling-foods**

In addition, there is FDA guidance for gluten-free labeling for fermented or hydrolyzed foods. **https://www.federalregister.gov/documents/2020/08/13/2020-17088/food-labeling-gluten-free-labeling-of-fermented-or-hydrolyzed-foods**

These guidelines emphasize that one of the three major gluten containing grains (wheat) is a Top 9 allergen and must be called out on a label. Rye and especially barley can be hidden in ingredients such as malt, malt vinegar, yeast extract, etc., and do not have to be labeled as such. Careful label reading is required.

Food Storage

Cross-contact is a potential danger in storage, just as it is in receiving and production. To avoid cross-contact, it is important to create a smart layout that minimizes the risk. The best layout will vary by facility but following are some options that could help.

- Create allergen zones using planograms to identify product placement. If there is room, this could mean a separate storage room that is designated Top 9- and gluten-free. For smaller storage areas, this could mean having a shelving unit dedicated to Top 9- and gluten-free alternative products.
- Use separate containers for Top 9- and gluten-free items. For example, store gluten-free items in a rubber storage tub with a lid. Consider using purple containers for Top 9-free storage. Clearly label and keep products organized.
- Store items that easily spill or spread (e.g., flour) in lidded containers on lower shelves.
- Designate and color code or label specific locations. For example, designate and label a shelf for Top 9-free baked goods.
- Designated shelves for Top 9- and gluten-free foods should be above other shelves, not underneath where allergenic foods could potentially spill or fall onto them.
- Consider the possibility for cross-contact in the way items are stored. For example, do not store milk directly above fresh produce.
- Consider using individually wrapped items whenever possible as sealed items have fewer chances for cross-contact.

Note: When considering your layout, remember that the handling of allergens and gluten should not interfere or conflict with standard practices for the prevention of foodborne illness.

Separate Equipment

Having separate equipment to prepare and store allergy-friendly meals can be helpful in avoiding cross-contact. The easiest way to show which equipment is designated for allergy-friendly foods is to use a different color. In the food service and restaurant industries, purple is widely recognized as a color to help designate food allergy, so utilizing purple utensils, storage containers, knives, cookware, cutting boards and others can help ensure your equipment is being kept separate and be a visual reminder to staff to avoid cross-contact. If purple equipment isn't an option at your facility, find other ways to visually identify separate equipment. For example, you could put labels on the allergy-friendly equipment and keep it in a separate storage container. Stony Brook University created its own special equipment allergen kit and stores it in a labeled plastic tub.

Remember that with the large number of foods people can be allergic to, even separate equipment must be washed with warm, soapy water and friction; rinsed with clean water; sanitized; and air-dried every time it is used.

Photo courtesy of Laura Martorano, MS, RD, CDN; taken at Stony Brook University: **Food Allergies & Avoiding Gluten I SBU Eats (Campus Dining**

Food Preparation and Production

Food preparation and production also entail great risk for cross-contact, but there are steps that can be taken to minimize this risk.

Before making an allergy-friendly or gluten-free meal:

- **Have dedicated personnel with enhanced training to handle the preparation and production of items for students with food allergy.**
- **Have separate utensils and cooking supplies that are clearly identifiable for allergy-friendly and gluten-free meals.** For example, use purple spatulas, pots with purple handles, knives with purple handles, separate baking sheets, etc. Remember that separate equipment must still be washed with warm, soapy water and friction; rinsed with clean water; and sanitized between preparing each meal.
- **Put labels on dedicated equipment to prevent confusion or mix-ups.**
- **Wash hands and change your apron and gloves.** Hand sanitizer does not remove food allergens or gluten. Before touching any equipment or food used for an allergy-friendly or gluten-free item, staff should thoroughly wash their hands with hot, soapy water; rinse them with clean water; dry with a fresh disposable cloth; and change their gloves.
- **Use non-latex gloves.** Since some students may be allergic to latex, using non-latex gloves is best.
- **Put up a caution or warning sign when an allergy-friendly or gluten-free meal is being prepared.** This will warn other staff not to approach and reduce the possibility for cross-contact. Example of language for the sign: "Allergy-friendly meal in progress."

During production of an allergy-friendly or gluten-free meal:

- **Whenever possible, prepare allergy-friendly and gluten-free items first.** At the beginning of the day or a shift, the kitchen will be cleaner and there will be less chance for cross-contact. For example, if you bake milk- and egg-free cookies, you should prepare and bake those before making desserts that contain milk and egg. If you offer a gluten-free pasta dish, prepare it before the gluten-containing dish.
- **Change gloves and wash hands frequently between tasks, especially when making an allergy-friendly dish.**
- **Use a separate, dedicated preparation and cooking area for allergy-friendly and gluten-free orders.** This can be a section of the kitchen, a portion of a countertop, a rolling cart, etc. based on your kitchen size and needs. It is important that this space be completely washed with warm, soapy water and friction; rinsed with clean water; dried with a fresh disposable cloth; and sanitized before preparing each meal, since students will be avoiding different allergens.
- **Use separate kitchen utensils and equipment when making an allergy-friendly or gluten-free meal.**
- **Prepare specific types of allergy-friendly foods together.** For example, prepare wheat-free items at the same time and in the same area of the kitchen.
- **Do not cook or prepare an allergy-friendly meal next to an allergen-containing item.** Steam, splatter and crumbs from dishes can cause cross-contact and an allergic reaction.
  - For example, the steam from cooking shellfish, fish or milk can transfer food protein to a meal being prepared on the same stove.
  - Preparing a meal with peanuts next to a meal for a student with a peanut allergy is risky because particles from peanuts could inadvertently be transferred via spills or a staff member's gloves to the other dish and have the potential to cause an allergic reaction.
- **Do not pass or carry any utensils that were used on an allergen-containing dish over an allergy-friendly meal.** Just a tiny drop from the utensil can cause cross-contact and lead to an allergic reaction.
- **Whenever possible, use separate cooking equipment for allergy-friendly and gluten-free needs.** For example, have a separate wheat-free, gluten-free toaster because gluten-free bread placed in a toaster used for gluten-containing bread will have cross contact with gluten. Consider a separate station, table, and/or cover for the toaster in addition to signage to alert students. When separate equipment is not possible, ensure the equipment is thoroughly washed with warm, soapy water and friction; rinsed with clean water; dried with a fresh disposable cloth; and sanitized before preparing an allergy-friendly or gluten-free meal.
- **For shared equipment like ovens or grills, take additional precautions to avoid cross-contact.** For example, when baking an allergy-friendly dish, use a covered baking dish. If using the grill, opt for a a grill mat or separate pan. Consider the type of equipment and what risks it presents. For instance, a convection oven rapidly circulates air, increasing the possibility that allergen cross-contact will occur.
- **Never refill serving containers with new items until they have been thoroughly washed with warm, soapy water and friction; rinsed with clean water; dried with a fresh disposable towel; and sanitized.** If pretzels are placed in a container that held peanuts and hasn't been thoroughly cleaned, cross-contact has happened and the pretzels are not safe for someone with a peanut allergy.
- **Do not reuse materials for allergy-friendly or gluten-free meals that cannot be cleaned with hot, soapy water and friction; rinsed with clean water; dried with a disposable cloth; and then sanitized.** This includes, but is not limited to: water, frying oil, parchment paper, baking paper and tin foil. The only exception to this would be if the material is devoted to a particular allergen. For example, you may have a dedicated gluten-free fryer. Dedicated fryers must also use dedicated filters.
- **Do not make a safe dish unsafe by adding a garnish.** Never garnish an allergy-friendly meal after it has been plated by the chef.

- **Cover allergy-friendly and gluten-free dishes or deliver them separately from other orders.** Placing a clean cover over a dish or having a chef, sous chef, kitchen supervisor or staff member specially trained on food allergies and celiac disease deliver a dish separately can help ensure cross-contact doesn't ruin an otherwise safely prepared dish. If the meal is prepared in advance, cover, label with name of student and special diet preparation, and store at proper temperature. Temperature-controlled food lockers are another option.
- **Use a different plate to serve people with food allergies and special diets their food.** Either a different shape or color so it is easily identifiable by the staff as a special dish.

When a mistake is made on an allergy-friendly or gluten-free order, it is absolutely *critical* to start over and make the order from scratch. If an allergen is added to a dish or cross-contact may have occurred during the preparation process, it is not enough to simply remove the allergen. A new dish must be started. To avoid waste, some kitchens may consider serving the dish that has experienced cross-contact to a student without food allergy or celiac disease, provided the dish hasn't already been served to a student.

Note: When considering your preparation and production policies, remember that the handling of allergens and gluten should not interfere or conflict with standard practices for the prevention of foodborne illness.

Lockers on Duke University campus to maintain proper food temperature during storage

Cleaning and Sanitizing

Thorough cleaning and sanitizing are essential in avoiding cross-contact, particularly for shared equipment. Creating and documenting a clean-up procedure for the back-of-house staff will help ensure everyone is taking the proper steps. It is important to note that simply sanitizing surfaces is not enough to prevent cross-contact. Any cleaning procedure must require thorough washing with warm, soapy water and friction; rinsing with clean water; drying with a fresh disposable towel; and then using a sanitizer. Sanitizers alone are not enough, but the combination of soap, water and friction can remove the allergens.

When creating a clean-up procedure, keep the following items in mind:

- Have dedicated, disposable cleaning materials (such as disposable towels and dish cloths) for allergy-friendly areas and items. Avoid reusable sponges as they can spread allergens and gluten.
- Ensure that all equipment is carefully cleaned with warm, soapy water, then rinsed, dried with a fresh disposable cloth and sanitized before using it for an allergy-friendly or gluten-free meal. A grill that is simply wiped down after fish is cooked on it may transfer enough protein to cause an allergic reaction from foods cooked on it afterward. If a frying pan is used to cook pancakes containing milk and then later used to cook a milk-free item without being thoroughly cleaned first, the milk-free meal could still cause an allergic reaction in a person with a milk allergy.
- Unlike microorganisms like *Salmonella*, high temperatures cannot "kill" gluten or allergens on cooking equipment.
- Dishwashers are considered a good cleaning method but be mindful that there isn't food residue left over after dishes have gone through. If there is, you need to rewash them.
- Staff need to thoroughly wash their hands with warm, soapy water and friction; rinse with clean water; dry with a fresh disposable towel; and apply new non-latex gloves before preparing a meal for someone with a food allergy or celiac disease. Hand-sanitizing gels do NOT remove allergens or gluten. Using purple gloves when preparing allergy-friendly or gluten-free meals can also be a good visual reminder about the need for extra care, and provides reassurance and confidence to the student.

- Staff should discard used gloves every time they move to another area of the kitchen to avoid cross-contact. Once a clean-up procedure is established, staff should be trained and regularly re-trained on it.

Note: When considering your cleaning policies, remember that the handling of allergens and gluten should not interfere or conflict with standard practices for the prevention of foodborne illness.

Summary: Back-of-House Policy

- ❑ Create an allergen map to identify areas at higher risk for cross-contact.
- ❑ Build a recipe and ingredient database so accurate allergen information is readily available.
- ❑ Create a written allergen policy for your vendors.
- ❑ Create a policy and train employees on proper receiving procedures to minimize opportunities for cross-contact.
- ❑ Train employees on label reading procedures.
- ❑ Create storage solutions to segregate Top 9 allergy-friendly and gluten-free foods and minimize opportunities for cross-contact.
- ❑ Keep separate equipment for preparing allergy-friendly meals.
- ❑ Follow proper steps in food preparation and production to produce safe meals and minimize the chances of cross-contact.
- ❑ Follow proper cleaning and sanitizing procedures for cooking surfaces, utensils, and hands to minimize the chances of cross-contact.

Front-of-House Policy

A well-planned and executed back-of-house policy can be thwarted if a front-of-house policy isn't also created and implemented effectively. A front-of-house policy should address everything from how you will communicate your allergen policies to students to how you will keep an allergy-friendly meal safe from cross-contact as it enters the front-of-house service area. Addressing these issues with clear policies and training will help keep dining safe and inclusive for students with food allergy and celiac disease.

Labeling and Signage

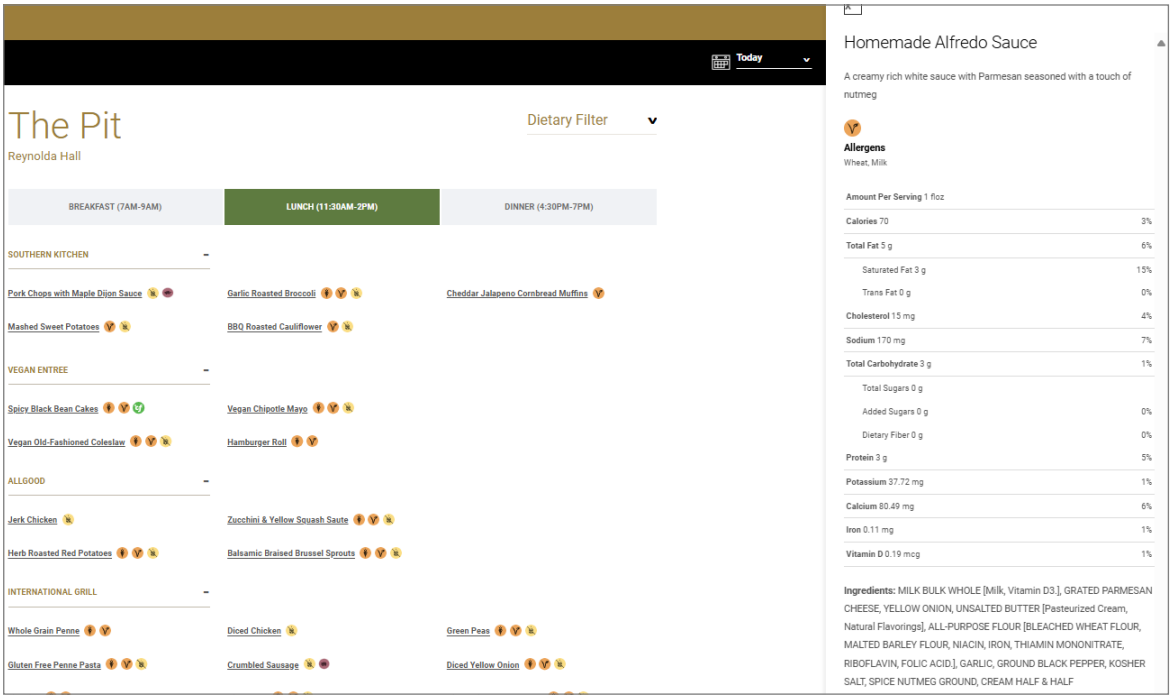
Labels and signage are an important part of any front-of-house policy. Clear and thorough labeling leads to student confidence, better service and increased safety for students with food allergies and celiac disease.

Ideally, labels should include a full list of ingredients used in a dish. Because of space constraints, schools may instead opt to identify menu items containing the Top 9 allergens and/or gluten. If labels do not include the full ingredient list, it is important that the full ingredient list be available to the student either through online access, a mobile app, or by request in the dining hall.

Once a university decides on a method for labeling and signage, it is important that the signage is easy to understand and consistent across campus.

Keep in mind that incorrect labeling or signage is far worse than no labeling or signage. If you are uncertain of ingredients or cannot fully and accurately produce an ingredient list, you should make it clear to students with food allergies or celiac disease that they should avoid the dish completely.

There are also times when ingredient lists may be unavailable for certain items. An example of this might be if a chef prepares an unplanned item using leftovers. In cases like this, it is a good idea to have a general sign that can be placed by the items.



Screenshot taken from Wake Forest University website, 2025: **https://dining.wfu.edu/menu-hours/**

Example: "Menu item NOT REVIEWED. Please ask to see the chef for ingredient and allergen information or obtain a different item."

Work with your university's legal department to create a "student-friendly" disclaimer for dining services that complies with requirements in your area.

Example: "Dining services serves and uses the following products in meal preparation: tree nuts, peanuts, soy, eggs, milk, fish, shellfish, wheat, sesame, and other products containing gluten. For food allergies or special diet concerns, please contact the unit manager or dining services. Please inform the dining services staff if you have a food allergy or celiac disease to decrease your risk of a reaction."

Schools should have access to a registered dietitian well versed in the menu to provide tailored options to students. To acclimate students to the system, record a video tutorial.

Screenshot taken from Virginia Tech website, 2025: **Nutrition | Dining Services | Virginia Tech**

Service in the Dining Hall

To ensure smooth interactions with students with food allergies and celiac disease, have assigned roles and dedicated service personnel who are trained in food allergies. Designate go-to people for food allergy or celiac disease questions from students. It is helpful if those trained to answer these questions have some visual identifier so they are easy to find. This could include wearing a different color shirt or hat, wearing a pin, or having their names and pictures posted in the dining halls.

Multiple people should be cross-trained so there is always a backup in case of sickness, employee turnover, or days off. Staff designated to answer food allergy or celiac disease questions need to be educated daily about ingredients, particularly if regular menu items change.

Not all staff should provide answers to food allergy or celiac disease questions. Teach temporary staff and staff not trained on food allergies that they should always direct questions to designated personnel, such as a manager, chef, or ingredient expert. Even staff who have been trained must be willing to say "I don't know. Let me find someone who does" when asked a question they don't know the answer to with 100% certainty. Staff should never guess at an answer. To help servers feel comfortable with this, make sure they know who to go when they don't know an answer.

Front-of-House Cleaning and Sanitizing

Just like with back-of-house, cleaning and sanitizing are essential to avoiding cross-contact in your front-of-house. Like other staff, front-of-house staff should thoroughly wash their hands with warm, soapy water; rinse with clean water; dry with a fresh disposable towel; and put on fresh latex-free gloves before serving an allergy-friendly meal. Gloves should be changed before touching the allergy-friendly meal.

Tables, utensils and serving trays should also be thoroughly washed with warm, soapy water; rinsed with clean water; dried with a fresh disposable towel; and sanitized before coming into contact with an allergy-friendly or gluten-free meal. Sanitizing gels do not remove allergens, so only using sanitizing gels is not enough to prevent cross-contact.

Tip: Provide disposable wipes and disposable non-latex gloves for students to wipe down their tables and chairs if they wish. This is NOT a replacement for staff thoroughly washing and sanitizing, but is a great additional step to help protect the safety and confidence of your students.

Summary: Front-of-House Policy

- ❑ Create labels and signage educating students about your food allergy policies and identifying allergens present in food.
- ❑ Train designated staff to answer food allergy questions from students.
- ❑ Follow proper steps to minimize the chances of cross-contact during service.
- ❑ Follow proper steps for front-of-house cleaning and sanitizing to minimize the chances of cross- contact.

Serving Solution Options

There are four commonly used serving solutions for accommodating individuals with food allergy:

- A dedicated hot preparation and service station, with separate storage areas;
- Pre-ordered meals through dining services;
- A dedicated key-card access pantry; or,
- A combination of these.

In each of these situations, all proper back-of-house policy needs to be followed to ensure safety.

For all of these solutions, there are many logistical decisions that will need to be considered, decided upon, communicated to students and staff, and consistently delivered. Solutions should be located in a convenient location on campus and near mandatory housing, and not on the edge of campus.

Regardless of the serving solution you choose, determining which allergens will be eliminated is an important first step to choosing ingredients, recipes and a menu. Simple recipes with fewer ingredients make it more likely that the recipe will work for most students. Some considerations:

- Restricting the Top 9 allergens and gluten will work for the majority, but not all, of your students, and it will overly-restrict many.
- Eliminating some ingredients or products may lead to additional concerns for others. For example, making a station gluten-free may increase the proportion of recipes including corn, which will affect students with corn allergy. Storing almond milk for a student with a milk allergy may be problematic for a student with a tree nut allergy.
- If entrees are the main focus of your serving solution, consider other areas the student may need to utilize as well.
  - For example, can the student have a fresh salad prepared from ingredients kept separately in the kitchen rather than using the salad bar?
  - How will desserts be handled? Will you use a nut-free bakery, gluten-free desserts prepared in a different kitchen, or individually packaged desserts? What Top 9-free dessert options will you offer as part of your food allergy solution?
  - What about breakfast options? Are there options at each meal of the day, including sides?
  - Are there pre-packaged or grab and go options?

Decisions made about ingredients must be clearly communicated and consistent with every meal. In a perfect world, the solution would look like this:

- Delicious and transparent recipes with ingredients that can be viewed ahead of time.
- Consistent chef-server who is also responsible for ingredients and meal preparation and knows students by name.
- Each student can eat everything that they are allowed, without having to eliminate extra items. No "least common denominator" restriction (i.e., vegan + gluten-free + nut-free + milk-free). For example, a student with a milk allergy wouldn't also have to eliminate the rest of the Top 9 allergens and gluten.
- Solution that keeps social meal experience intact and allows student a choice as to whether to disclose their allergies to friends.
- Choice and the ability to be somewhat spontaneous.
- Safe meals accessible where and when needed.

No solution is perfect, but each has its own strengths and weaknesses. To get started, consider best practices for each food service solution.

Dedicated Hot Preparation and Service Station Best Practices

For larger locations or schools serving a larger number of students with food allergy, a dedicated hot preparation and service station may be a good option.

- Decide if the station will be open access or closed access.
  - An advantage to the closed-access station, which is open only to allergic or celiac students, is that the opportunities for cross-contact are greatly limited. However, because of the limited number of students with access and students' often hectic schedules, a closed-access station may be poorly utilized or a barrier to inclusion. Staffing such a low-traffic station may be uneconomical and foods left in a steam table may not be appetizing after a short period of time.

- The ideal hot service station is a completely self-contained station, with "scratch" ingredients stored in closed containers or coolers, and dedicated cooking equipment and food prepared by a cook/server in view of the customer, who can make decisions about their meal.
  - For example, a stir-fry station may be designated as free from tree nuts, peanuts, soy, sesame, and gluten, so students can create a made-to-order stir fry.
  - If space does not allow for a completely self-contained preparation and service station, a simple unit with steam tables and a designated server may be a safe alternative, as long as the food is prepared safely and separately from allergen-containing items in the kitchen.
- If "allergy-friendly" stations are located near other stations, there must be as many barriers as possible to prevent cross-contact. For example, utilize vertical "sneeze-guard" type barriers, physical separation, and behind-counter barriers to remind staff not to assist at a neighboring station.
- Signage about cross-contact and ingredients is important, but having a staff member at the station is key. Whether the service station is open access or closed access, it must be staffed at all times. The server must enforce policies prohibiting students from bringing other foods into the area and be well-informed about the ingredients and preparation of each item. Placing a recipe binder containing complete ingredient lists at the station is also helpful.
- Servers staffing the station must be regularly trained on food allergy, cross-contact, and your policies and procedures, including changing gloves, getting fresh pans from the back of house, using a clean plate from behind the station.

Pre-Ordered Meals Best Practices

For smaller locations, ordering each meal can be safe and convenient for students. The pre-order system works well unless the number of students requiring allergy-friendly or gluten-free meals overwhelms the system.

An ideal pre-order solution will include several components:

- A consistent chef with time planned for the responsibility of preparing allergy-friendly meals.
- Designated ingredients and designated back-of-house preparation space.
- The chef will have a written reference of each student's restrictions, preferences and contact information. Ongoing contact with the student about their food needs is ideal and helps eliminate wasted food.
- A communication plan will be in place, with both the student and chef knowing and adhering to it. Since dining operations may span multiples meals, there should be one key contact person per shift.
  - Example: Each week the chef and student communicate to plan the weekly menu. The student calls/texts/emails the chef an agreed-upon amount of time before arriving in the dining hall so the chef can prepare the meal.
  - Example: An order form is available online where the student can request a meal and specify a time for picking it up.

Mobile Ordering Best Practices here

- Identify Top 9 allergens plus gluten on menu items that can be ordered.
- Have back-of-house procedures in place to safely to accommodate allergen-free or gluten-free request.
- Include "Comments or Allergens" box for specific instructions when placing the order.
- Include allergen alert on ticket/receipt with prepared meal.
- Staff highlights allergen notification on ticket to confirm the request and prepared the meal per request.
- One potential downside of the pre-order system is with students who do not self-disclose their food allergy or celiac disease or who are unable or unwilling to pre-order their meals. For those students, short-ordering upon arrival in the dining hall could still provide a good solution, but it can lead to longer wait times for their meals and cause confusion or backups in the kitchen.

Dedicated Pantry Best Practices

A segregated pantry or a room where students can pick up allergy-friendly items at their convenience can be a quick and convenient option for students with food allergies or celiac disease or to subsidize their meal options while dining in. Whether a pantry is closed access or open access, there are some best practices that should be followed.

- Instructions need to be provided on how to properly use the products within the pantry and elsewhere in the dining room. For example, a gluten-free toaster should be clearly labeled and covered, reminders that outside foods aren't allowed in the pantry should be posted, and cleaning instructions should be posted.
- All food products contained in the pantry, whether pre-packaged or house-prepared, need to be clearly labeled with all ingredients and expiration dates.
- Open at every meal period, including weekends, holidays, and campus events.
- The question of what foods are and are not allowed must be carefully considered. For example, a student with a milk allergy might request soy milk, which could pose a problem for a student with a soy allergy. Weigh your options and the allergies you are accommodating, and once decisions have been made, clearly communicate those. Staff training, talking with students and signage listing prohibited items are all methods that should be used to communicate what is and is not allowed in the pantry.
- Any house-made items included in the pantry will need to be separately prepared from other meals following the guidelines to avoid cross-contact. If separate space not available, only pre-packaged items should be provided.
- Pantries should have materials available for students to clean the space, including:
  - Disposable cloths
  - Soap
  - Hand-washing sink
  - Non-latex gloves
- Pantries should have the following equipment:
  - Counters for food preparation
  - Refrigerator
  - Microwave
  - Gluten-free toaster
  - Cabinet space

Additional optional equipment might include a freezer and other cooking materials (pans, stove, panini press, etc.).

Check your local health department restrictions to determine if students can be allowed to cook their own meals in this space.

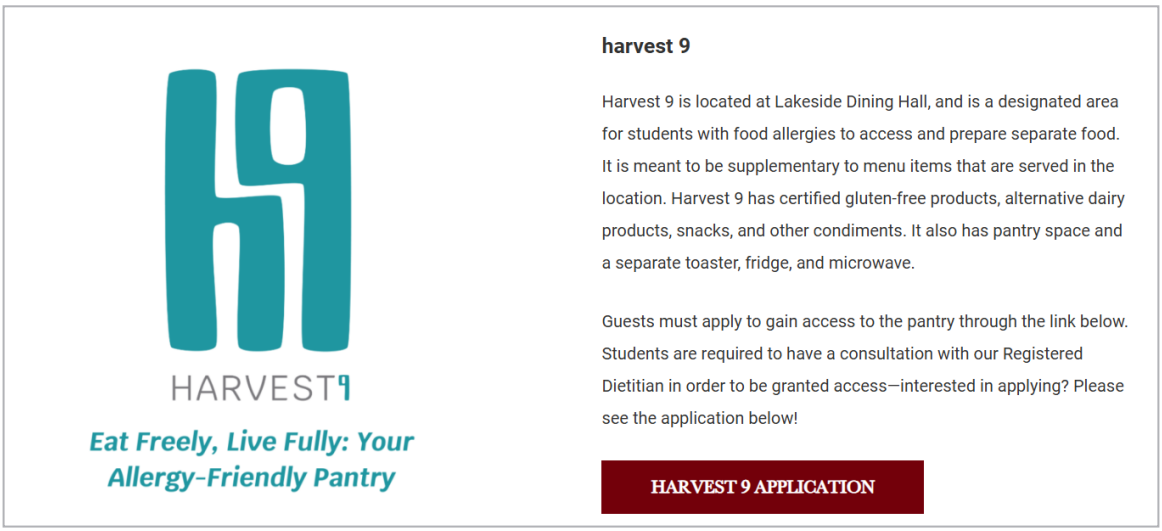
Additional best practices for secured pantries:

- A secured pantry should be an area shared only by students requiring it.
- There needs to be a means of access, such as the student's dining "swipe card," combination keypad, other campus key card, or a physical key if need be (although not preferred).
- There must also be a process to determine which students are allowed access. This will generally be those with a medical need, which will exclude those students who have a gluten-free lifestyle preference and others who wish to access the area but do not have a medical need to do so. Coordinate with Food Allergy Team to determine access.
- Students granted access to the area must be trained in their responsibilities to other students using the pantry, and sign a waiver of understanding. For example, celiac students must not use gluten-free bread from the pantry and make a peanut-butter sandwich on the counter. No foods from other areas may enter the pantry.

The benefit of a secured pantry is that with fewer students and only those with medically necessary dietary restrictions using the space, the chances for cross-contact are reduced. In addition, because fewer students are allowed access, options for more expensive and individualized food items might be more feasible. However, a secured pantry is also a barrier for students unwilling to disclose their food allergy to their peers.

The benefit of an open-access pantry is that it eliminates the issues surrounding requiring medical documentation for access and allows non-disclosing students to utilize it. However, it is also at a higher risk for cross-contact. Another concern for an open-access pantry is the cost associated with additional students accessing it. Operators may need to devise strategies to continue providing access to needed foods while discouraging pilferage. These strategies could include stocking items in closed cabinets, putting out only small quantities at a time, staffing the room at busy times, and posting signage to discourage students without medically required special diets from entering the area.

Elon University offers a separate area for students with food allergies to access and prepare separate food.



Screenshot taken from Elon University website, 2025:
https://www.elondining.com/health-and-wellbeing/menu-information/

Summary: Serving Solution Options

- ❑ Decide which serving solution(s) will work best and can be safely implemented on your campus.
- ❑ Once a solution is chosen, create written policies and procedures to ensure it is effectively implemented.
- ❑ Train staff on best practices for your chosen solution.
- ❑ If a closed access pantry is implemented, educate students about their responsibilities when using it.

Student Responsibilities

In the real world, there will continue to be a tradeoff between the student's ability and willingness to self-identify, plan and communicate ahead of time, and the variety and convenience of their meals. Depending on the food service solutions in place at your university, students may also need to use multiple strategies to eat safely. For instance, when an allergy-friendly station is in place, the student might have the following responsibilities:

- Review the week's meals at the allergy-friendly station and identify days when the meal does not work for their restrictions or preferences.
- For days when the allergy-friendly station will not work, determine if there are other meals that do not include their allergens. Reach out to dining services to have those meals made separately to ensure the meal is safe from cross-contact.
- If there are no foods available on the menu that meet their restrictions and preferences without modification, they should review the protein foods on the menu. Work with dining services to determine what could be made specifically for them with minimal changes. For example, baked fish without stuffing or breadcrumb topping is an easy modification. Beef stew without onions is less realistic to have a single portion prepared. Reach out to dining services to make alternative meal plans.

Determine what your expectations of the students are and make sure those responsibilities are clearly communicated to them. Having a list of the student's responsibilities for them to review and sign is one possible way to ensure they receive the information (**https://www.highpoint.edu/oars/files/2023/08/OARS-Parent-Flyer.pdf**)

Measuring Success

Decide what outcomes you will look for to determine if your dining services food allergy and celiac disease plan is successful. Some key markers for success might be:

- At least a portion of the dining services staff undergo ongoing food allergy training and are able to address food allergy questions from students.
- A policy addressing each step of back-of-house food service has been established.
- A policy addressing each step of front-of-house food service, as well as labeling and signage, has been established.
- Students with food allergy and celiac disease are able to fully participate and be included in on-campus dining.
- You have established at least one safe, equitable serving solution allowing you to serve an assortment of quality allergy-friendly menu items that look and taste good.
- Students aren't having reactions to the food they're being served.

Ask, what return are you getting on your investment? Some ways to think about this might include:

  - What costs have you incurred with your food allergy and celiac disease program (e.g. new equipment, training)?
  - Have your site-specific targets been met?
  - Was your financial budget met?
  - Is the number of students requesting meal plan waivers dropping?
  - Are students with food allergy or celiac disease purchasing voluntary meal plans as upperclassmen?
  - Do students accepted to multiple schools choose you? If so, do your food options play a role in that?
  - How are your sales on allergy-friendly and gluten-free items?

Once you have determined what success means to you, create a process to measure whether you are meeting those goals. Some steps in this process might be:

- Create student satisfaction surveys to measure the students' perceptions of safety, inclusion, variety, menu rotation, enjoyment, etc. Sample questions for students are included below:
  - "How long did it take for you to feel acclimated and comfortable with managing your food allergy or celiac disease in the dining halls?"
  - "Do you feel safe eating on campus?"
  - "How often did you opt out of a meal because of safety concerns?"
  - "How often do you eat the same safe foods in the cafeteria?"
  - "Do you feel your voice is heard?"
  - "Are you enjoying your meal options?"
  - "Does the timing of your meal preparation allow you to eat with your friends?"
  - "Have you experienced a reaction to food prepared by dining services?"
- Develop a one-on-one connection with students with food allergy and celiac disease that allows for open communication. Do this via whatever method the student is most comfortable with (text messages, email, in-person meetings, etc.). It'll allow you to customize your approach to each student and will help you gauge the success of your program.
- Review your process in practice. Create a self-inspection form to evaluate how you're doing.
- Conduct on-site audits monthly or bring in a third party to audit your dining facility and your process.
- Create student focus groups or dining committees to gain student input. These can include students without food allergy or celiac disease, but should absolutely include students with them.
- Include students with food allergy or celiac disease in "secret shopper" programs with a focus on dining service operations.

Glossary

Accommodations/Modification: The modification of policies, practices, and procedures; the provision of auxiliary aids and services; academic adjustments and modifications to the environment intended to remove barriers to equivalent access.

Allergen Mapping: The process of identifying allergens and tracking their path throughout dining services, from procurement to receiving to serving. For an example of an allergen map, see page 18.

Anaphylaxis: A serious allergic reaction that comes on quickly and may cause death.

Biphasic Reaction: An allergic reaction that has two stages. After the first wave of symptoms goes away, a second wave of symptoms comes back later. Because of the risk of biphasic reactions, individuals experiencing anaphylaxis should stay at a hospital for at least four hours after the initial reaction for observation.

Back of House: Portion of the food service location from the loading dock to the commercial kitchen door.

Celiac Disease: An autoimmune digestive disease that damages the villi of the small intestine and interferes with absorption of nutrients from food. There is no known cure for celiac disease and the only effective treatment is the total avoidance and elimination of gluten (a protein found in wheat, barley, rye and triticale) from the diet. Unlike a food allergy, celiac disease does not require epinephrine but can cause a multitude of symptoms.

Cross-contamination: Microorganisms (bacteria and viruses) from different sources can contaminate foods during preparation and storage, resulting in foodborne illness. Cross-contamination occurs when microorganisms are unintentionally transferred from a food, person or surface to another food during preparation and storage. Proper cooking (time and temperature) of contaminated foods in most cases will reduce or eliminate the risk of a person getting foodborne illness. Examples of cross-contamination include:

- Cutting raw meat on a cutting board, then preparing vegetables for the salad bar on the same cutting board.
- Not changing gloves and washing hands in between handling raw meat and fresh produce.
- Not properly cleaning (wash, rinse, sanitize) a container that held raw meat then storing leftovers in it.

Cross-contact: When one food comes into contact with another food and their proteins mix. As a result, each food then contains small amounts of the other food. These amounts are so small that they usually can't be seen. Even this tiny amount of food protein has caused reactions in people with food allergy.

Cross-contact is sometimes referred to as cross-contamination; however, unlike with cross-contamination, proper cooking (time and temperature) does not reduce or eliminate the risk of a person with food allergy having a reaction. Proper cleaning and sanitizing are necessary to remove allergens. The terms cross-contact and cross-contamination are often used interchangeably when they should not be because they have different meanings.

Potential sources of cross-contact	Example
Food preparation	Splatter from a pasta dish gets onto a wheat-free meal.
Hands	A person handled pecans and didn't wash and rinse their hands before making a salad.
Insufficient cleaning	After cutting cheese on a cutting board or counter, the food preparer rinses the board instead of properly cleaning and sanitizing it and begins cutting carrots.
Cooking surfaces	After cooking fish on a grill, the food preparer wipes off the surface instead of properly cleaning and sanitizing it and begins cooking a hamburger.
Utensils	After spreading peanut butter on bread, the food preparer wipes the knife off and uses it for a supposedly peanut-free sandwich.
Salad bars and buffets	A piece of shredded cheese drops into the bin containing lettuce.

Dedicated Pantry: A separate room where allergy-friendly items are stocked for students to pick up at will.

Epinephrine: Also called adrenaline, epinephrine is the first-line treatment for a severe or life-threatening allergic reaction, also known as anaphylaxis. Epinephrine is a highly effective medicine that can reverse severe symptoms.

It must be administered quickly when anaphylaxis occurs to be most effective. Delayed use of epinephrine during an anaphylactic reaction has been associated with deaths. You can view examples of epinephrine devices and information **about how to administer them here: www.foodallergy.org/treating-an-allergic-reaction/epinephrine.**

Food Allergy: When the immune system mistakes a food protein as a threat and creates an antibody to that food protein. When the food is eaten again, the immune system releases histamine and other chemicals that cause an allergic reaction.

Food Allergy Team: Designated personnel who will create and manage the food allergy policy and implementation.

Front of House: The portion of the food service location from the customer entrance to the kitchen door.

Top 9: Refers to the nine allergens that are responsible for most food allergy reactions in the United States. Those are:

- Peanut
- Tree Nuts
- Milk
- Egg
- Wheat
- Soy
- Sesame
- Fish
- Crustacean Shellfish

Appendix

Sample Access Services Policies

Here are two examples of policies addressing food allergy accommodations. The first from Boston College's policy, is specifically written to address roles and responsibilities for student and school. The second, from University of Massachusetts Amherst's policy, is specifically written to address accommodations for students with food allergy.

Policy for Meal Accommodations:

This protocol describes the process for the University's accommodation of a medically restrictive diet. The process for initiating these accommodations is the responsibility of the student and is an interactive collaboration between the student and Dining Services. Students are encouraged to begin this process before arriving on campus for the semester or as soon as a new diagnosis is made during the school year.

Students seeking dietary accommodations are required to register with the Disabilities Services Office and provide the appropriate documentation to receive meal accommodations.

The Assistant Dean for Students with Disabilities will refer any students seeking meal plan or dining facility accommodations to the Administrative Dietitian. The Administrative Dietitian serves as the point of contact in Dining Services for students seeking accommodations or who have questions or concerns regarding nutrition or dietary needs. To make an appointment with the Administrative Dietitian, Christina Karalolos, email her at:christina.karalolos@bc.edu.

The manager-on-duty in any dining hall can assist the student in arranging appropriate meals pending an appointment with the Administrative Dietitian.

Responsibility of Dining Services:

- Actively engage with students in a collaborative process to establish a plan for safely meeting a student's needs for a medically restrictive diet in the form of reasonable accommodations. Steps to begin this collaborative process are initiated by the student registering with the Disability Services Office as outlined in this protocol.
- Introduce any student actively engaged in this process to key culinary staff who will assist the student in the day-to-day management of the medically restricted diet. These students will be apprised of Dining Services' staff culinary process for handling special dietary requests, communications strategies, arrangements for special meal orders, and procurement of special dietary products as available. Designate specific staff to answer customer questions regarding medically restricted diets or food ingredients. At Boston College, the manager of the dining hall or the Administrative Dietitian may answer these questions. Servers and other culinary staff are directed to refer any dietary questions to the manager-on-duty.

Policy_for_Meal_Accommodation.pdf

- Provide appropriate signage as mandated by the State of Massachusetts that advises customers to self-identify their food allergies at the point-of-service to the server. The server will refer questions to the manager-on-duty per this protocol.
- Train appropriate staff in allergy awareness as mandated by the State of Massachusetts.

Responsibility of the Student:

- Initiate the request for accommodations for a medically restricted diet by registering with the Disabilities Services Office and then scheduling and attending an appointment with the Administrative Dietitian as outlined in this protocol under the heading 'Arranging accommodations for a medically restricted diet.'
- Provide appropriate documentation regarding medically restricted diets when requested.
- Be knowledgeable and proficient in the management of their medical nutrition needs. The Administrative Dietitian is available to provide nutrition education to students who have newly diagnosed conditions with prescribed dietary treatment. Proficiency includes the following, with additional specifics presented for those with food allergies:
- Avoidance of foods to which the student is allergic, intolerant, or are otherwise unsafe for the condition.
- Recognition of symptoms of dietary nonadherence or, in the case of a food allergy, an allergic reaction.
- Knowledge of how and when to tell someone that the student may be having an allergy-related problem, including how to access emergency services.
- Knowledge of proper use of medications to treat a food allergy, if appropriate.
- Carrying epinephrine in the form of an EpiPen if prescribed for treatment of an allergic reaction.
- Considering providing education to the student's Resident Assistant, roommates, and friends about a food allergy, including how to seek help for an allergic reaction and any information on medications used to treat an allergic reaction.
- Read the menus and ingredient information that is made available.
- When in the dining hall, direct specific questions about ingredients or dietary needs to the manager only.
- Avoid areas/foods known to be high risk for cross-contact if food allergies or gluten intolerance has been diagnosed. Examples including self-serve and made-to-order menu items, fried food, and items prepared in the campus bakery. Packaged bakery items are available and students may use their judgment in deciding whether to consume these items after reviewing the label.
- Maintain communication with the Administrative Dietitian or dining hall manager to keep Dining Services apprised of the student's needs so that modifications or adjustments can be made as needed.

Reviewed 2023

Policy_for_Meal_Accommodation.pdf

UMassAmherst	Food Allergy Policy for Diners	Document Number: 1
		Effective Date: May 2019
		Revision Date: Jan 2023

1.0. Purpose and Applicability

1.1. The purpose of this standard of practice (SOP) is to understand UMass Dining's policies and procedures when handling safe foods for a diner with a medically restrictive diet.

1.2. The intended audience for this food allergy SOP is all staff of UMass Dining Services on the University of Massachusetts, Amherst campus.

1.3. To prevent any future allergic reactions on campus, staff will be retrained, emphasizing the importance of food safety and prevention of cross contact.

2.0. Background of Food Allergies

2.1. Food Allergy Research & Education (FARE) states: "A food allergy is a medical condition in which exposure to a food triggers a harmful immune response. The immune response, called an allergic reaction, occurs because the immune system attacks proteins in the food that are normally harmless. The proteins that trigger the reaction are called allergens. The symptoms of an allergic reaction to food can range from mild (itchy mouth, a few hives) to severe (throat tightening, difficulty breathing). Anaphylaxis is a serious allergic reaction that is sudden in onset and can cause death. Anaphylaxis is a severe and potentially life-threatening allergic reaction affecting more than one body system such as the airways, heart, circulation, gut and skin. Symptoms can start within seconds or minutes of exposure to the food or substance that a person is allergic to and usually will progress rapidly. On rare occasions there may be a delay in the onset of a few hours."

2.2. Specific symptoms are listed below.

SYMPTOMS

- Tingling sensation in mouth
- Swelling of body parts (lips, hands, face, tongue)
- Difficulty breathing/asthma symptoms
- Hives or rash
- Vomiting and/or diarrhea
- Abdominal cramps
- Drop in blood pressure

IN SEVERE CASES, SYMPTOMS CAN INCLUDE:

- Anaphylaxis (closing of the throat to prevent air flow)
- Loss of consciousness
- Death

If a food allergy reaction occurred from UMass Dining food, a formal investigation will take place at the location where the food was consumed. The investigation will determine how the suspected food was prepared and if proper labeling was present at the time of the incident. Practices to prevent cross contact will be investigated and policies and procedures will be reviewed or developed to prevent future allergic reactions from occurring.

2.3 Diners' Rights: Food allergies are considered a disability according to the American Disability Association. Therefore, colleges and universities are required to meet the standard of "reasonable accommodations." At UMass, that means:

- Access to meet with one of UMass Dining's Registered Dietitians to seek further accommodations, especially if a diner has challenges finding safe foods on a regular basis.

Food Allergy Policy 2023.pdf

- To provide “nutritionally comparable” hot and cold allergen-free meals to diners with celiac disease and food allergies
- UMass Dining staff takes responsible steps to avoid cross-contact of allergen-free food, including preparing such meals in a dedicated space in its main dining commons
- Allow diners with celiac disease and/or food allergies to pre-order meals made without gluten or specific allergens and serve them in one of our operating dining commons (must work with the Registered Dietitians- refer to the contact sheet on page 6)

3.0 Training

3.1. UMass Dining and Retail Staff receive training annually to prevent the cross contact of allergens to keep all diners safe.

1. The UMass Dining Director of Training and/or the Registered and Licensed Dietitians train UMass Dining staff annually with AllerTrain Menu Trinfo’s food allergy curriculum and receive a certificate if they successfully passed the quiz.
2. Environmental Health and Safety provides a food allergy training and certificate through MA Restaurant Association along with ServSafe (Certificate requires watching a video but no quiz tests the staff’s knowledge).

4.0 Diners’ Responsibilities

4.1. Diner should carry all medications on them at all times while on campus in case of an allergic reaction. UMass Dining staff are unable to store any medications for diners.
4.2. Diner needs to speak up if they feel uncomfortable navigating the dining commons or retail operations. If the diner cannot find a manager, they can go to the cashier station and ask them to contact the manager on duty.
4.3. Please notify a dining manager or supervisor on duty so they can assist in filling out pertinent information as well as initiate a formal investigation (refer to contact information on the last page for email addresses/phone numbers).

5.0 Policy if a diner has a food allergy reaction

5.1. Procedure if a diner has a **SEVERE ANAPHYLACTIC REACTION:**

1. If a diner is having an anaphylactic reaction in a UMass Dining location, a UMass Dining staff must help the diner locate their medication immediately. UMass Dining staff cannot administer medications per University policy.
2. If a diner is having an allergic reaction, the staff member must call 911 and say “Anaphylaxis” and “Food Allergy Reaction.” The Amherst EMT has epinephrine in vehicles for emergencies as it is required by law.
3. Staff must stay with the diner and will ask someone else to get a manager on duty (MOD) until the EMT/Police arrive.
4. Staff will NOT move the diner as moving diner can cause symptoms to worsen, which can result in a fatality.
5. Staff needs to inform the diner that a full investigation will be conducted to determine the cause of the food allergy reaction.
6. MOD must fill out the Food Allergy Reaction Form with contact information and any information available (attached) and forward to the UMass Health Inspector, UMass Dining Dietitians and the Director of the Dining location as soon as possible. If possible, MOD will ask the diner for an emergency contact to notify them of the incident.
7. MOD must email the UMass Dining Dietitians, EH&S Health Inspector, and UMass Dining/Retail Director the Food Allergy Reaction Form.
8. If a reaction occurs outside the dining location with food from UMass dining, diner must email the Registered Dietitians within 24 hours after the incident to report it so a full investigation can be conducted.

5.2. Procedure if a diner has a **NON-ANAPHYLACTIC REACTION:**

1. If staff is made aware of the situation, staff can assist diner in locating their medication. Staff must stay with the diner during this period.
2. Staff must call the manager on duty (MOD) immediately.
3. MOD must ask for diners' name, UMass ID and phone number and fill out the Food Allergy Reaction Form.
4. If the diner needs to go to University Health Services, someone should go with them in case symptoms worsen. Medical assistance may be required immediately.
5. MOD must email the UMass Dining Dietitians, EH&S Health Inspector, and UMass Dining/Retail Director the Food Allergy Reaction Form.
6. If a reaction occurs outside the dining location, diner must contact the Registered Dietitians within 24 hours after the incident to report it so a full investigation can be conducted.

6.0 Investigation of Food Allergy Reaction

EH&S and UMass Dining must conduct a full investigation to determine the cause of the reaction. Policies and procedures are adjusted to ensure the same sort of reaction does not occur in the future. The EH&S and/or UMass Dining Dietitians will contact the diner once it is reported to assist in the investigation. Results will be shared with the diner once the cause has been discovered.

7.0 Hospital Information: If a diner needs further medical care other than the University Health Services, the diner will be transported to:

- Cooley Dickinson Hospital, 30 Locust Street, Northampton, MA 01060
  - Phone: 413.582.2000 x2108 (ER extension) and press 3 (for patient in ER)
  - The Amherst EMTs do have epinephrine in the vehicles

8.0 Key References

- FARE
- FAAN
- ServSafe Coursebook 6th Edition

9.0. Contact Information

UMass Environmental Health & Safety Inspector — (508) 479-5861; arusiecki@umass.edu
Dining Services Dietitians — dietitian@umass.edu
UMass Dining and Retail Director — (508) 494-3519

Food Allergy Policy 2023.pdf

UMassAmherst | Dining Nutrition

UMass Dining Food Allergy/Intolerance Reaction Form

Name: _____ DOB: _____

UMass ID number: _____ Year of Graduation: _____

Home address: _____

E-mail: _____

Cell Phone Number: _____ **Circle**: Student Staff Guest

Allergy/Intolerance to (please circle all that apply): Peanuts Tree Nuts Wheat Soy Dairy Eggs Fish Shellfish Sesame Corn

List other allergens

If allergy, did customer have the Epi-Pen® when reaction occurred?

Incident Information

Date and location		
Food Eaten		
Time Eaten		
Time of Allergic Reaction and symptoms		
Time UMass Staff Notified		
Transported to hospital? Yes No	Epi-pen Self Med Staff Antihistamine Steroids IV Other	**Where treated:** Dorm/Apt UHS Hospital or ambulance Other: No treatment needed
	If so, where picked up?	**Length of Treatment:**
Chef/Cook making food and location prepared.		**Time prepared:**
Location food held		**Who gave food to diner?**

4

Food Allergy Policy 2023.pdf

Reason of Reaction

- Standardized recipe not followed
- Signage not followed
- No signage
- Signage incorrectly displayed
- Cross contact in kitchen
- Cross contact on line
- Cross contamination on equipment
- Menu change

Comments from Investigators:

Name	Date, Comments, Corrective Action

Form should be filled out immediately following an allergic reaction
Collect as much information regarding the incident—Dining Administration will continue the investigation, you do not need to fill in the entire form. The most important information is Contact Information and Incident Information.

BDP:

- Managers/ Asst. manager, supervisors, head cooks and chefs should always have a note pad and pen on their person.
- Question to ask at the time of incident:
  - What is your name?
  - What is UMass ID?
  - What is your cell phone number?
  - What did you eat?
  - What are you allergic to?
  - Do you have medication on you?
  - Do you need help finding medication?
  - Is there someone we should call?
- Call 911/5-2121 (UMass Police) if need takes epinephrine.
- Stay with customer until help arrives (police/ambulance)
- Fill form out and e-mail to Director, Dietitian and health Inspector.
- Text Director and Dietitian after customer in hands of medical staff

Follow up protocol: After the incident, the UMass Dining Dietitian will contact the customer regarding her/ his well-being. She will make at least three connections following the allergic reaction; if a student opts out of the connections, it will be noted.

# Days after incident	Date	Person	Notes
1			
14			
30			

5

Food Allergy Policy 2023.pdf

Contacts

Department	Name	Email	Phone Number	Fax Number
University Health Services	Jody Asselin Pam Zaranek-Kuhn Ashley Gagne Cindy Hildebrand UHS Triage Nurse	jkasseli@uhs.umass.edu pamaranekkuhn@umass.edu ashleygagne@umass.edu cindydugan@uhs.umass.com	413-577-5169 413-577-1348 413.577-5217 413-577-5124 413-577-5000	413-577-5440
UMass Dining Dietitians	Dianne Sutherland Sabrina Hafner Julie Jensen	dietitian@umass.edu	413-992.8770 413-545-9431	413-545-9431
Worcester Managers	Luanne Wu Steph Stacey Betse Curtis Amy Cuff Tenzin Jamyang Caleb Pham – Chef	lwu@umass.edu sstacey@umass.edu ecurtis@umass.edu acuff@umass.edu tenzinjamyang@umas.edu trangpham@umass.edu	413-559-7069 413-262-1838 413-335-3637 413.207.5009 413.695.3304 808-729-0456	413-577-0012
Berkshire Managers	Heather Scoble Carl Ketchen Mike Kacprzyk Adrienne Kaio Hendro Kusumo - Chef	hscoble@umass.edu cketchen@umass.edu mkacprzyk@umass.edu akaio@umass.edu hkusumo@umass.edu	413-522-1300 413-387-5044 508-340-8280 508-274-7219 413-657-3099	413-545-0251
Franklin Managers	Marc Morrissette Paul MacGregor Christopher Fisher Don Sabola - Chef	mhmorris@umass.edu macgrego@umass.edu cmfisher0@umass.edu dsabola@umass.edu	413-687-3365 413-530-2793 413.446.6966 413-545-1588	413-577-0031
Hampshire Managers	Selina Fournier Mike Hardy Peter Allard Tim Lane Kim Williams-Chef	smfournier@umass.edu mjhardy@umass.edu pallard@umass.edu tlane@umas.edu kfwilliams@umas.edu	860-716-4044 413-563-7044 413-658-8295 413.687.1979 413-237-1847	413-577-0011
UMass Bakery	Pamela Adams	padams@umass.edu	413-687-7380	413-577-2868
Dean of Students		deans@stuaf.umass.edu	413-545-2684	413-545-9704
Health Inspector	Alyssa Rusiecki	arusiecki@umass.edu	508-479-5861	413-545-2600
Commonwealth Restaurant	Valerie Maurer	vmaurer@umass.edu	413-328-0805	413-577-0196
Bluewall, Harvest, POC, Peet's ILC, Catering	Lynn Pelkey Erin Breveleri Emily Boudreau	lpelkey@umass.edu ebreveleri@umass.edu eboudrea@umass.edu	413-270-4492 413.209.0115 978-821-3584	413-577-0015
Quad Café, Furcoclo, ISB, Progress Bar, Snack Overflow, Worcester Café	Luanne Wu	lwu@umass.edu	413-559-7069	413-577-0012
Carne Café, Morrill, Newman, Posta & Bean, Food Trucks	Marc Morrissette	mhmorris@umass.edu	413-687-3365	413-577-0031
Hampshire Café	Selina Fournier	smfournier@umass.edu	860-716-4044	413-577-0011
Argo Tea, Courtside Café, Procrastination Station, Roots, Southwest Café, Whitmore Café	Heather Scoble	hscoble@umass.edu	413-522-1300	413-545-0251
Catering	Cynthia Nardulli	cnardulli@umass.edu	413-658-8988	413-577-0014

Food Allergy Policy 2023.pdf

Lesley University

Reasonable Modifications of Policies, Practices, and Procedures for Students with Disabilities[6]

Lesley University is committed to the full participation of its students in all of its programs. In addition to this longstanding Lesley philosophy, students with disabilities have specific legal rights guaranteed by the Americans with Disabilities Act (ADA), a civil rights law enacted to protect individuals from discrimination on the basis of disability. Title III of the ADA prohibits discrimination on the basis of disability in the full and equal enjoyment of goods, services, facilities, privileges, advantages, and accommodations of public accommodations, such as universities. The following is a summary of Lesley University's policies and procedures for students with disabilities seeking reasonable modifications under the ADA (sometimes colloquially termed and referred to by Lesley as "reasonable accommodations").

An essential component of Title III of the ADA is the right of a qualified individual with a disability to a reasonable modification of policies where necessary to afford such individual an equal benefit. The process for obtaining a reasonable modification is an interactive one that begins with the student's request for a change in the usual manner in which things are done. In the context of reasonable modifications, Disability Services may ask for documentation concerning an individual's disability and/or the need for modifications, if such documentation is necessary (e.g., manifestation of an individual's disability is not readily apparent), is reasonable, and limited to the need for the modification requested. While not always necessary, documentation may come from a physician, clinician, or other provider and may set forth recommended modifications.

Further, in accordance with Title III of the ADA, Lesley University will make reasonable modifications to our rules, policies, practices, and procedures, when such modifications are necessary to afford goods, services, facilities, privileges, advantages, or accommodations to individuals with disabilities. Lesley University does not charge individuals with disabilities for reasonable modifications or other actions required by the ADA.

> Example: Lesley University makes reasonable modifications to its rules, policies, practices, and procedures in a variety of ways. For example, Lesley provides testing modifications for students with learning disabilities, which may include, but are not limited to, allowing students extended time to take tests, allowing for untimed tests, or providing students with a distraction-free test taking environment. Other students residing on campus may have a food-related disability that limits their ability to fully and equally participate in our meal program, such as an autoimmune disease like celiac disease or allergies to products like wheat, milk, peanuts, eggs, etc. These individuals may need a modification or exception to our rule requiring that students residing on campus participate in the University's mandatory meal plan. One possibility is to provide food made without allergens, and a specific allergen-free food preparation and heating area for students. Another possible reasonable modification, depending on the specific circumstances, may be to exempt the student from the mandatory meal program. Lesley University offers its students both of these options.

Note: The obligation to make reasonable modifications extends broadly to all programs and services offered by the University. It includes the right to classroom modifications, use of service animals and a host of other issues. Furthermore, rights afforded by Title III of the ADA extend well beyond reasonable modifications alone, such as ensuring effective communication through the use of auxiliary aids and services, the provision of testing accommodations, and the obligation to remove architectural barriers when readily achievable, among others.

Who is eligible to receive disability support services?

All qualified students with disabilities are eligible for modifications and support services. It is the student's responsibility to initiate the modification process with Disability Services.

What are the responsibilities of students for obtaining disability support services and reasonable modifications?

1. To initiate the process with Disability Services.
2. To provide documentation of the disability or disabilities if necessary, and to provide other relevant information, e.g., as to food allergies or dietary needs, or as to specific classroom modifications.

6 Lesley University. Reasonable Modifications of Policies, Practices, and Procedures for Students with Disabilities. Available at: **www.ada.gov/lesley_university_sa.htm.** Accessed November 5, 2014.

3. To deliver modification letters, or arrange for their delivery through Disability Services, to course instructors, if relevant and necessary for the modification.

4. To notify Disability Services of any changes each semester.

5. To work cooperatively with the University.

It is not necessary to say the words "reasonable modification" when making a reasonable modification request. Any request for an exception, modification, or adjustment to a rule, policy, practice, or procedure because of a disability will be treated as a reasonable modification request. Reasonable modification requests can be submitted orally or in writing and can be made by a student with a disability or by someone acting on the student's behalf if the student also wants the requested modification and works cooperatively with the University.

What type of services can students with disabilities expect to receive?

While some modifications to policies are made generally, support services and reasonable modifications are determined in most circumstances on an individual basis by the Disability Services administrators in consultation with you and, when necessary, medical professionals or others with helpful information.

Policies

- *Confidentiality*
- *Denial & Grievance*
- *Pets, Service Animals, and Assistance Animals for Resident Students*
- *Publications*

Confidentiality

Lesley University is committed to ensuring that all student disability information is maintained confidentially. Disability related information should be treated as medical information and handled under strict rules of confidentiality. A student's documentation is filed securely with Disability Services. It is not kept with any other student records on campus. As such, the information can only be shared on a limited "need to know" basis within the institutional community. Modification letters contain only the modification information, and not specifics of the disability.

Denial and Grievance

Based on individual circumstances, Disability Services may not approve a request for modification(s) or may discontinue an existing modification. See Procedures for Requesting Accommodations [pdf].

Grievance

If you disagree with the determination made by Disability Services to deny or discontinue a modification, you can have the decision reviewed by the Executive Director of Academic Support Services (Lesley's ADA/Section 504 Coordinator). Appeals of this review are heard by the Dean of Student Life and Academic Achievement. For details, please see the Accommodation Appeal Review Form [pdf].

In general, students may also file complaints of discrimination with the University's Office of Equal Opportunity and Inclusion. For details regarding the formal grievance policy, please see the Lesley University Discrimination, Harassment, Sexual Harassment, and Sexual Violence Policy for details.

www.lesley.edu/policies/university/discrimination-harassment.html

FARE Food Allergy Research & Education — FOOD ALLERGY & ANAPHYLAXIS EMERGENCY CARE PLAN

Name: _____ D.O.B.: _____

Allergic to: _____

Weight: _____ lbs. Asthma: ☐ **Yes (higher risk for a severe reaction)** ☐ **No**

History of anaphylaxis: ☐ **Yes** ☐ **No**

PLACE PICTURE HERE

NOTE: Do not depend on antihistamines or inhalers (bronchodilators) to treat a severe reaction. USE EPINEPHRINE.

FOR **ANY** OF THE FOLLOWING:

SEVERE SYMPTOMS

LUNG
Shortness of breath, wheezing, repetitive cough

HEART
Pale or bluish skin, faintness, weak pulse, dizziness

THROAT
Tight or hoarse throat, trouble breathing or swallowing

MOUTH
Significant swelling of the tongue or lips

SKIN
Many hives over body, widespread redness

GUT
Repetitive vomiting, severe diarrhea

OTHER
Feeling something bad is about to happen, anxiety, confusion

OR A COMBINATION of symptoms from different body areas.

1. **ADMINISTER EPINEPHRINE IMMEDIATELY.**
2. **Call 911.** Tell emergency dispatcher the person is having anaphylaxis and may need epinephrine when emergency responders arrive.

- Consider giving additional medications following epinephrine:
  - » Antihistamine
  - » Inhaler (bronchodilator) if wheezing
- Lay the person flat, raise legs and keep warm. If breathing is difficult or they are vomiting, let them sit up or lie on their side.
- If symptoms do not improve, or symptoms return, more doses of epinephrine can be given about 5 minutes or more after the last dose.
- Alert emergency contacts.
- Transport patient to ER, even if symptoms resolve.

ADDITIONAL PHYSICIAN COMMENTS

MILD SYMPTOMS

NOSE
Itchy or runny nose, sneezing

MOUTH
Itchy mouth

SKIN
A few hives, mild itch

GUT
Mild nausea or discomfort

FOR **MILD SYMPTOMS** FROM **MORE THAN ONE** SYSTEM AREA, GIVE EPINEPHRINE AND **CALL 911.**

FOR **MILD SYMPTOMS** FROM **A SINGLE SYSTEM** AREA, FOLLOW THE DIRECTIONS BELOW:

1. Antihistamines may be given, if ordered by a healthcare provider.
2. Stay with the person; alert emergency contacts.
3. Watch closely for changes. If symptoms worsen, give epinephrine and call 911.

☐ **If this box is checked by the child's physician, the child has an extremely severe allergy to _____ and should be given epinephrine at the first sign of any symptoms, even if mild.**

MEDICATIONS/DOSES

Epinephrine Brand or Generic: _____

Epinephrine Dose: ☐ 0.1 mg IM (intramuscular) ☐ 0.15 mg IM ☐ 0.3 mg IM ☐ 1 mg IN (intranasal) ☐ 2 mg IN

Antihistamine Brand or Generic: _____

Antihistamine Dose: _____

Other (e.g., inhaler-bronchodilator if wheezing): _____

_____

☐ Patient may self-carry ☐ Patient may self-administer

PATIENT OR PARENT/GUARDIAN AUTHORIZATION SIGNATURE DATE PHYSICIAN/HCP AUTHORIZATION SIGNATURE DATE

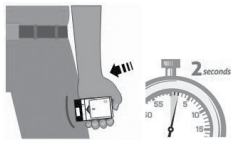
FORM PROVIDED COURTESY OF FOOD ALLERGY RESEARCH & EDUCATION (FARE) (FOODALLERGY.ORG) 8/2025

To download latest version for free, visit: FoodAllergy.org/ecp

FOOD ALLERGY & ANAPHYLAXIS EMERGENCY CARE PLAN

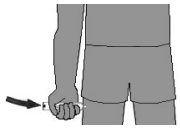
FARE
Food Allergy Research & Education

HOW TO USE AUVI-Q® (EPINEPHRINE INJECTION, USP), KALEO



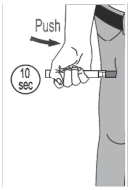
1. Remove Auvi-Q from the outer case. Pull off red safety guard.
2. Place black end of Auvi-Q against the middle of the outer thigh.
3. Press firmly until you hear a click and hiss sound, and hold in place for 2 seconds.
4. Call 911 and get emergency medical help right away.

HOW TO USE EPIPEN®, EPIPEN JR® (EPINEPHRINE) AUTO-INJECTOR AND EPINEPHRINE INJECTION (AUTHORIZED GENERIC OF EPIPEN®), USP AUTO-INJECTOR, VIATRIS AUTO-INJECTOR, VIATRIS



1. Remove the EpiPen® or EpiPen Jr® Auto-Injector from the clear carrier tube.
2. Grasp the auto-injector in your fist with the orange tip (needle end) pointing downward. With your other hand, remove the blue safety release by pulling straight up.
3. Swing and push the auto-injector firmly into the middle of the outer thigh until it 'clicks'. Hold firmly in place for 3 seconds (count slowly 1, 2, 3).
4. Remove and massage the injection area for 10 seconds. Call 911 and get emergency medical help right away.

HOW TO USE IMPAX EPINEPHRINE INJECTION (AUTHORIZED GENERIC OF ADRENACLICK®), USP AUTO-INJECTOR, AMNEAL PHARMACEUTICALS



1. Remove epinephrine auto-injector from its protective carrying case.
2. Pull off both blue end caps: you will now see a red tip. Grasp the auto-injector in your fist with the red tip pointing downward.
3. Put the red tip against the middle of the outer thigh at a 90-degree angle, perpendicular to the thigh. Press down hard and hold firmly against the thigh for approximately 10 seconds.
4. Remove and massage the area for 10 seconds. Call 911 and get emergency medical help right away.

HOW TO USE TEVA'S GENERIC EPIPEN® (EPINEPHRINE INJECTION, USP) AUTO-INJECTOR, TEVA PHARMACEUTICAL INDUSTRIES

1. Quickly twist the yellow or green cap off of the auto-injector in the direction of the "twist arrow" to remove it.
2. Grasp the auto-injector in your fist with the orange tip (needle end) pointing downward. With your other hand, pull off the blue safety release.
3. Place the orange tip against the middle of the outer thigh at a right angle to the thigh.
4. Swing and push the auto-injector firmly into the middle of the outer thigh until it 'clicks'. Hold firmly in place for 3 seconds (count slowly 1, 2, 3).
5. Remove and massage the injection area for 10 seconds. Call 911 and get emergency medical help right away.

ADMINISTRATION AND SAFETY INFORMATION FOR ALL AUTO-INJECTORS:

1. Do not put your thumb, fingers or hand over the tip of the auto-injector or inject into any body part other than mid-outer thigh. In case of accidental injection, go immediately to the nearest emergency room.
2. If administering to a young child, hold their leg firmly in place before and during injection to prevent injuries.
3. Epinephrine can be injected through clothing if needed.
4. Call 911 immediately after injection.

HOW TO USE NEFFY® (EPINEPHRINE NASAL SPRAY)

1. Remove neffy from packaging. Pull open the packaging to remove the neffy nasal spray device.
2. Hold device as shown. Hold the device with your thumb on the bottom of the plunger and a finger on either side of the nozzle. Do not pull or push on the plunger. Do not test or prime (pre-spray). Each device has only 1 spray.
3. Insert the nozzle into a nostril until your fingers touch your nose. Keep the nozzle straight into the nose pointed toward your forehead. Do not point (angle) the nozzle to the nasal septum (wall between your 2 nostrils) or outer wall of the nose.
4. Press plunger up firmly until it snaps up and sprays liquid into the nostril. Do not sniff during or after the dose is given. If any liquid drips out of the nose, you may need to give a second dose of neffy after checking for symptoms. Call 911 immediately after first use.
5. If symptoms don't improve or worsen within 5 minutes of initial dose, administer a second dose into the same nostril with a new neffy device.

Treat the person before calling emergency contacts. The first signs of a reaction can be mild, but symptoms can worsen quickly.

EMERGENCY CONTACTS — CALL 911

RESCUE SQUAD: _____

DOCTOR: _____ PHONE: _____

PARENT/GUARDIAN: _____ PHONE: _____

OTHER EMERGENCY CONTACTS

NAME/RELATIONSHIP:_____ PHONE: _____

NAME/RELATIONSHIP:_____ PHONE: _____

NAME/RELATIONSHIP:_____ PHONE: _____

FARE (FOOD ALLERGY RESEARCH AND EDUCATION), 8/2025 | FOODALLERGY.ORG

How to Keep Guests Safe

FOOD ALLERGIES

HOW TO KEEP GUESTS SAFE AND INCLUDED!

EVERY 10 SECONDS, A FOOD ALLERGY REACTION SENDS A PATIENT TO THE EMERGENCY ROOM.

THE TOP 9 COMMON FOOD ALLERGENS

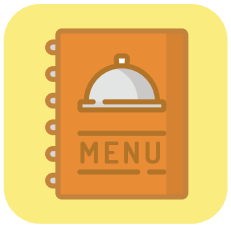
Food allergies are serious. AN ALLERGIC REACTION TO FOOD CAN CAUSE DEATH. When you are serving a person with a food allergy:

BE KIND TO GUESTS WHO HAVE FOOD ALLERGIES. They may feel uneasy about dining outside their home.

GIVE OPEN, HONEST ANSWERS WHEN GUESTS ASK YOU QUESTIONS. This can help them make safe decisions.

CREATE A SAFE SPACE FOR FOOD HANDLING SO THAT SAFE FOODS AND ALLERGENS DO NOT TOUCH. All food equipment that is used in the production of allergy-safe foods must be properly cleaned and sanitized before use.

GIVE YOUR GUESTS MANY CHANCES TO TELL YOU ABOUT THEIR ALLERGIES.



MAKE SURE THE INFORMATION YOU SHARE WITH GUESTS IS SIMPLE AND ACCURATE. Menus, signs, and labels must be up to date.

KEEP YOUR FOOD ALLERGY TRAINING UP TO DATE. Knowing how to recognize and respond to a food allergy reaction can save a life!

CALL 911 AT THE FIRST SIGN OF A REACTION!

FARE
Food Allergy Research & Education
foodallergy.org

To download latest version for free, visit: FoodAllergy.org/crosscontact

Recognize and Respond to Anaphylaxis

For a suspected or active food allergy reaction

FOR **ANY** OF THE FOLLOWING **SEVERE** SYMPTOMS

- **LUNG:** Short of breath, wheezing, repetitive cough
- **HEART:** Pale or bluish skin, faintness, weak pulse, dizziness
- **THROAT:** Tight or hoarse throat, trouble breathing or swallowing
- **MOUTH:** Significant swelling of the tongue or lips
- **SKIN:** Many hives over body, widespread redness
- **GUT:** Repetitive vomiting, severe diarrhea
- **OTHER:** Feeling something bad is about to happen, anxiety, confusion

OR **MORE THAN ONE** **MILD** SYMPTOM

- **NOSE:** Itchy or runny nose, sneezing
- **MOUTH:** Itchy mouth
- **SKIN:** A few hives, mild itch
- **GUT:** Mild nausea or discomfort

1 ADMINISTER EPINEPHRINE IMMEDIATELY

2 Call 911

Request ambulance with epinephrine.

Consider Additional Meds

(After epinephrine):

» Antihistamine
» Inhaler (bronchodilator) if asthma

Positioning

Lay the person flat and raise legs. If breathing is difficult or they are vomiting, let them sit up or lie on their side.

Next Steps

» If symptoms do not improve, or symptoms return, more doses of epinephrine can be given about 5 minutes or more after the last dose.
» Transport to and remain in ER for at least 4 hours because symptoms may return.

Do not depend on antihistamines. When in doubt, give epinephrine and call 911.

FARE Food Allergy Research & Education

foodallergy.org

To download latest version for free, visit: FoodAllergy.org/downloadables

FARE®

Food Allergy Research & Education

FARE (Food Allergy Research & Education)
7901 Jones Branch Drive, Suite 240, McLean, VA 22102

www.foodallergy.org