Pilot Guidelines For Managing Food Allergies In Higher Education

www.foodallergy.org
This document is intended to serve as pilot guidelines and will undergo modifications pending the completion of the FARE College Food Allergy Pilot Phase.

Colleges and universities are invited to use this document as a resource, with the understanding that this is not the final version. Colleges and universities are also invited to share their experiences and feedback by emailing Collegeprogram@foodallergy.org.
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Introduction

Researchers estimate that up to 15 million Americans, including one in 13 children, have food allergies. In fact, a 2013 report 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.

Food allergy reactions send someone to the emergency department every three minutes, resulting in more than 200,000 emergency department visits in the U.S. per year. The increasing number of people with food allergies, 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.

In addition, the settlement agreement between the U.S. Department of Justice and Lesley University in December 2012 increased awareness among higher education professionals that food allergies and celiac disease may qualify as a disability under the Americans with Disabilities Act (ADA).

A disability as defined by the ADA is a mental or physical impairment that substantially limits a major life activity, such as eating. Major life activities also include major bodily functions, such as the functions of the gastrointestinal system. Some individuals with food allergies have a disability as defined by ADA, particularly those with more significant or severe responses to certain foods. This would include individuals with celiac disease and others who have autoimmune responses to certain foods, the symptoms of which may include difficulty swallowing or breathing, asthma, or anaphylactic shock.¹

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 on 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 resident life.

The Access Services Guidance for Students with Disabilities is intended to assist disability services, resident life, health services, student affairs and other departments in creating and implementing effective policies and services to meet the needs of students with food allergies and celiac disease throughout the college setting. The Dining Services Guide is intended to provide solutions and best practices for safely preparing food for diners with food allergies and celiac disease.

Access Services Guidance for Students with Disabilities

The number of college students with food allergies and celiac disease is growing. Many of these students have received important supports 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 allergies. Schools should develop and maintain:

- A collaborative, campus-wide approach.
- A transparent and flexible process capable of meeting student needs without being burdensome.
- A comprehensive food allergy policy that includes:
  - A clear process for requesting accommodations/modifications,
  - Documentation required to establish an individual’s food allergy as a disability,
  - A process for determining appropriate accommodations/modifications,
  - Implementation of accommodations/modifications,
  - Outreach and marketing, and
  - Assessment of services.
- Emergency response plans and training.
- Confidentiality.
  - As with other medical information, 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.

See Appendix page 42 for examples of policies.

Components of an Effective Food Allergy Policy

A policy that covers food allergies may be written as a separate policy or included within a disability policy for the campus. Ensure that policies and procedures (including 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, 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 food allergy policies on various university websites. 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 housing services, disability services, dining services and health services pages.

  ▪ Keywords: Food Allergy, Food Allergies, Celiac Disease, Celiac, Allergy, Allergies, Food Intolerance, Gluten, Eosinophilic Esophagitis, Anaphylaxis.

• No matter which website students search from, they should be directed back to a centralized department that provides them with all the information needed to disclose a food allergy and request accommodations. Information should include:

  ▪ Current policies and procedures,
  ▪ Contact information,
  ▪ Documentation requirements, and
  ▪ Accommodation forms.

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

A comprehensive policy should cover eligibility based on documentation and in consultation with student health services. Documentation guidelines should be clearly stated and documentation requirements should be reasonable.

The Association on Higher Education and Disability (AHEAD) includes the following principles as the foundation for policies and best practices used by postsecondary institutions as they establish documentation guidelines and determine accommodations for students with disabilities.

• All documentation should be reviewed on an individual, case-by-case basis.

• Determination of a disability doesn’t require the use of any specific language.

• Determination of accommodations is an interactive process.

• Documentation of a specific disability does not translate directly into specific accommodations.

• Disability documentation should be treated in a confidential manner and shared only on a need-to-know basis.

• Information on the individual’s disability is only one component of providing access.

According to AHEAD, documentation serves two primary purposes in postsecondary education:

1. To establish protection from discrimination. Non-discrimination is an assurance that individuals with disabilities will not be excluded or provided lesser access to programs and activities based on assumptions rooted in stereotype or perception of ability that are not based in fact. Non-discrimination also provides freedom from harassment based on perceptions of disability.

2. To determine the accommodations to which the individual may be entitled. Reasonable accommodations include modifications to policy, procedure or practice and the provision of auxiliary aids and services that are designed to provide equal access to programs and services for qualified individuals with disabilities.

Documentation should be a current statement from a physician noting the student has a food allergy and whether the potential exists for a severe or life-threatening reaction, as well as identifying the student’s allergens. Ideally, documentation should be recent (within the last two years) as children can outgrow some allergies and new allergies can develop. It is essential, as with other conditions, that the documentation support the need for accommodation/modification as defined by the Americans with Disabilities Act (ADA).

For students with celiac disease, similar protocol can be followed. However, celiac disease cannot be outgrown, so documentation may not need to be recent.
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 institution’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 institution 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:

- 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 of Appropriate Accommodations/Modifications**

It is vital that each institution develop a process for determining accommodations/modifications that is interactive and clearly outlines who is responsible for implementing them. 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 within the plan.

The following are examples of accommodations/modifications that institutions 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.

**Dining Services Accommodations/Modifications**

- Food free of allergen(s) identified by students made available at every meal (see Dining Services Guide beginning on page 20 for additional information).
- Implement procedures to avoid cross-contact throughout dining services (see Dining Services Guide section on page 20 and “Potential sources of cross-contact” on page 40).
- Information about ingredients and food preparation available through consultation with a dietitian, chef and/or dining hall managers.
- Access to a specific allergy-friendly food preparation area or access to a separate kitchen to prepare their own meals.
- 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).

**Residential Life Accommodations/Modifications**

- Modifications to housing policies and activities such as offering a single room, a room with another student with the same allergy, a room with a kitchen, or additional food storage or preparation space.
- Training of resident advisors (see page 17).
Academic Accommodations

- Flexibility with attendance and/or deadlines when students experience a food allergy or celiac 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.

Implementation of Accommodations/Modifications

Initial research shows that the most effective food allergy strategy for a college or university 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. However, it must be noted that no single department can effectively reach all students on campus. Instead, a college should develop a Food Allergy Team of key stakeholders that share the responsibilities of reaching students and ensuring accommodations are effectively implemented. 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 implement the food accommodations and emergency response plans for the dining halls.
- **Housing Services** - to implement housing accommodations and emergency response plans for the dorms.
- **Health Services** - to address medical concerns, documentation and training laypeople as needed.
- **Campus emergency responders** - to assist with and implement emergency plans.
- **Marketing/communications team** - to help with communication of food allergy policy/plan to students.
- **University attorney** - to assist with policy creation/disclaimers as needed.

In addition, a group of liaisons should be developed to broaden outreach to students with food allergies and celiac disease to ensure they are able to fully participate in university 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**
- **ROTC**
- **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 university staff around campus
are aware of the centralized channel for requesting and receiving food allergy accommodations, regardless of which department takes this role.

**Outreach and Marketing**

It is important that students disclose their food allergies or celiac disease to the institution, 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 a food allergy or celiac disease to the institution, the institution can remove barriers by providing multiple channels for students to request food allergy accommodations.

It is recommended that the institution 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 allergies, 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
  - Note: Also consider reaching out to providers of non-university 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 like orientation and open houses where food is served
- New student orientation
- On the college’s web pages
  - 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.

- Use interactions with new students to promote the institution’s food allergy policies.
  - Orientation
    - If dining services does a presentation during orientation, food allergies can be mentioned.
    - During orientation meals, food allergies should be discussed and accommodated.
  - Student tours
    - Tour guides can provide information about food allergy policies while giving tours to prospective students.
- Include food allergy information in printed materials or emails sent to prospective students.
- Use social media to promote food allergy policies.
Work with other departments, and particularly dining services, to incorporate food allergy information into their marketing. For example, the University of Kansas implemented a marketing campaign featuring posters with their registered dietitian’s picture and directing students with food allergies to contact her. They also offer rack cards explaining their food allergy accommodations process (see appendix page 48).

The University of Kansas uses posters with the Registered Dietitian’s face to educate students with food allergies about who to contact for assistance. Photo courtesy of the University of Kansas.

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.

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

- Students aren’t having reactions to the food they’re being served. It’s important to note that reactions may be underreported, so asking students whether they’ve experienced reactions is helpful.
- Students with food allergies and celiac disease are able to fully participate and be included in on-campus dining and housing.
- You have an assortment of quality allergy-friendly menu items that look and taste good.

You will also need to create a process to measure whether you are meeting your goals.

- Create student satisfaction surveys to measure the students’ perceptions of safety, inclusion, enjoyment, etc. Sample questions are included below:
  - 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 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?
• Develop a one-on-one connection with students with food allergies 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.

• Talk with other departments to gauge how the accommodations/modifications process is working in different areas.

In addition, create an incident report system for students and staff to report any food allergy or celiac reactions. When mistakes happen, follow up on them to see where the process broke down. Develop plans to avoid the same mistakes in the future.
Components of an Effective Food Allergy Policy Section Checklist

☐ 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, university 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 that 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.

☐ 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 Allergies

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

Creating an Emergency Response Plan

For severe allergic reactions known as anaphylaxis, administering epinephrine promptly is the best way to save lives. Any 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 university 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? Note: In some jurisdictions, emergency responders do not automatically carry epinephrine.

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 where stock epinephrine can be kept and quickly accessed?

4. If a student has an epinephrine auto-injector, but is unable to inject themselves during a reaction, will university staff—including resident advisors—be trained on how to administer it? If not, what will the plan be for getting the epinephrine administered in a timely manner?

   For information on the different types of epinephrine auto-injectors and how to use them, please visit: www.foodallergy.org/treating-an-allergic-reaction/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 areas where students live and eat.

A student with a prescription for epinephrine should always carry their auto-injector 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.

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 diners with food allergies and celiac disease. However, it is also important that others working with students, particularly those who work where students consume food, receive 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? 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 www.foodallergy.org/facts-and-stats and download FARE's Food Allergy FAQ here: www.foodallergy.org/fafaq.
   - For celiac disease basics, visit: www.celiaccentral.org/celiac-disease/facts-and-figures/.
   - Additional free food allergy resources can be found here: www.foodallergy.org/most-popular-resources.
2. The symptoms of a food allergy reaction and how to recognize anaphylaxis. Download the FARE symptoms poster here: www.foodallergy.org_commonsymptoms.

- 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: www.celiaccentral.org/newlydiagnosed/Celiac-Symptoms/32/.

![FARE Symptoms Poster]

**For a suspected or active food allergy reaction**

**FOR ANY OF THE FOLLOWING SEVERE SYMPTOMS**

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

**1. INJECT 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 in ER for at least 4 hours because symptoms may return.

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

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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: [www.foodallergy.org/faap](http://www.foodallergy.org/faap) or see appendix page 50.

- Ensure the student receives epinephrine promptly. Any delay in administering epinephrine increases the risk of death.
- Call 911.
  - 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, 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.

**Resident Advisor Additional Training**

Resident advisors (RAs) play 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 allergies.

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 services.
- 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 one, 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 few hours and consume a safe meal before kissing.

Alcohol and food allergies are another topic RAs should be aware of. Alcohol presents multiple potential threats to someone with a 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 and wheat that may not be listed on the label (see page 22).
- 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 an epinephrine auto-injector.
- 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 diners with food allergies and celiac disease. Additional information for dining services staff is provided in the Dining Services Guide beginning on page 20.
Emergency Response and Training Section Checklist

☐ 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 allergies, how to recognize and respond to a food allergy reaction, and on 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 10), dining services needs to develop plans to serve those with food allergies 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.

While some information, such as proper cleaning procedures, must be followed in every situation to ensure diners’ safety, many of the solutions offered here are intended to be adaptable to each university’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. Every staff member should undergo ongoing, institutionalized food allergy training. Creating a training plan is essential.

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 regularly re-trained. Re-training employees each year is recommended. 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, every employee should know:

- Your food allergy and celiac disease policies and procedures.
- How to avoid cross-contact through proper cleaning and isolation of allergy-friendly meals.
- How to recognize and respond to an allergic reaction (see page 15).

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.

Collateral materials on food allergies, such as posters, can help keep the issue fresh in the minds of staff.

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, 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 diners with food allergies and celiac disease in 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.

Although nearly any food is capable of causing an allergic reaction, only eight foods account for the majority of food-allergic reactions in the United States. These foods are:

- Peanut
- Tree nuts
- Milk
- Egg
- Wheat
- Soy
- Fish
- Shellfish
Depending on the 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-8 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 8 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 coming into contact with an otherwise safe food.

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

**GLUTEN-FREE PROCESS CHART**

![Gluten-free flow chart courtesy of UChicago Dining/ARAMARK The University of Chicago](image)

**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. At least some portion of each menu should be dedicated to using only standardized recipes.

In order to accurately provide ingredient lists, add every recipe and each one of its ingredients into a searchable database. 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. As an added bonus, students without food allergies can access the menu and ingredient lists for nutritional purposes.

Virginia Tech is one example of a university currently providing an online, searchable database.

<table>
<thead>
<tr>
<th>Nutrition Facts</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Serving Size</strong>: 1 EA</td>
</tr>
<tr>
<td><strong>Calories from Fat</strong>: 227</td>
</tr>
</tbody>
</table>

**Alfredo Sauce/Pasta**

- **Total Fat**: 25.2g (39%)
- **Tot. Carb**: 60.7g (47%)
- **Sat. Fat**: 8.5g (42%)
- **Dietary Fiber**: 3.1g (8%)
- **Trans Fat**: 0.5g
- **Sugars**: 5.5g
- **Cholesterol**: 31.8mg (11%)
- **Protein**: 14.4g
- **Sodium**: 573.2mg (23%)

**Calcium**: 15%  
**Iron**: 12%  
**Vitamin A**: 4%  
**Vitamin C**: 0%

**Contents**: PASTA (durum semolina, ferrous sulfate, niacin, thiamin mononitrate, riboflavin, folic acid.), ALFREDO SAUCE (cream, skim milk, soybean oil, canola oil, parmesan cheese (cultured milk, salt, enzymes), water, 2% or less of modified cornstarch, asafoetida (cultured milk, salt, enzymes), salt, romano cheese (made from cow's milk), pasteurized milk, cheese culture, salt, enzymes), cream (cream, non-fat milk), enzyme modified parmesan cheese (cultured milk, water, salt, enzymes), whey protein concentrate, lactose (contains milk), datem, spice, xanthan gum, seasoning (wheat starch, extracts of anethole and turmeric color, natural flavor), seasoning (maltodextrin, flavor, enzyme modified butterfat), contains milk, wheat ingredients.

**ALLERGENS**: Milk, Wheat, Soybeans, Gluten

To review Virginia Tech’s ingredient lists, visit: [www.dining.vt.edu/menu_nutrition/special_diets/special_diets.html](http://www.dining.vt.edu/menu_nutrition/special_diets/special_diets.html)

**Note**: NEVER label anything as allergen-free or include the allergen information on an item unless you are 100 percent certain of the ingredients.

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

- On-site video menu screens can also display menu items and ingredients lists. Due to limited space on video menu screens, some dining facilities may opt to only include statements about the top allergens contained in an item. Video menu screens at Liberty College use contains statements for the Top-8, Gluten and Mustard.

**Curried Vegetable Salad**

- Broccoli, Carrots, Peppers and Scallions Tossed with Roasted Parsnips and Zucchini Coated with Cumin and Coriander

**Mixed Greens with Red Leaf Lettuce**

- Romaine, Iceberg and Red Leaf Lettuce

**Cider Dijon Vinaigrette**

- Served with dresses (313 grams), Total Fat: 38g, Sat Fat: 5g, Sodium: 300mg, Total Carb: 2g, Sugar: 1g, Fiber: 2g, Protein: 1g

Photo courtesy of Sodexo Campus Dietitian Robin Quay, MS, RD.

- 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 nice add-on that many students find helpful.
Some dining locations may opt to alert the diner only when the Top 8 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,
- 30 percent of people with food allergies are allergic to multiple foods, and
- 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 8, and gluten and it may give your diners less confidence than full ingredient lists.

In order to make sure your ingredient lists are accurate, staff must avoid substituting ingredients in recipes. 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 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. 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 university.
- Distributors cannot send substitute items without university 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 allergy-friendly or gluten-free as much as possible.
- How to handle damaged items. 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.
- 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.

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 diners. The Food Allergen Labeling and Consumer Protection
Act (FALCPA) requires that foods containing the Top 8 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, visit www.fda.gov/food/guidanceregulation/guidancedocumentsregulatoryinformation/
allergens/ucm106890.htm.

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 any advisory labeling on any products you serve 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: www.foodallergy.org/document.doc?id=133.

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. If there is room, this could mean a separate storage room that is designated Top-8- and gluten-free. For smaller storage areas, this could mean having a shelving unit dedicated to Top-8- and gluten-free.

- Use separate containers for Top-8- and gluten-free items. For example, store gluten-free items in a rubber storage tub with a lid. Consider using purple containers for Top-8-free storage. Clearly label and keep products organized.

- Store items that easily spill or spread (e.g., flour) in lidded containers.

- Designate and label specific locations. For example, designate and label a shelf for Top-8-free baked goods. Designated shelves for Top-8- and gluten-free foods should be over 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.

Photo courtesy of Tina Tiernan, RD, LD.
Remember that with the large number of foods people can be allergic to, even separate equipment must be washed with warm, soapy water; rinsed with clean water; and dried with a fresh disposable towel every time it is used.

**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 diners with food allergies.**
- **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; rinsed with clean water; dried with a fresh disposable cloth; 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 diners 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.
- **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; rinsed with clean water; dried with a fresh disposable cloth; and sanitized before preparing each meal since diners 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 diner with a peanut allergy is risky because particles from the peanut could inadvertently be transferred via spills or a staff members’ 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 be contaminated.

• When separate equipment is not possible, ensure the equipment is thoroughly washed with warm, soapy water; rinsed with clean water; dried with a fresh disposable cloth; and sanitized before preparing an allergy-friendly or gluten-free meal. For example, a kitchen preparing fried rice may not have space for a separate grill surface, but the grill surface should be thoroughly cleaned, rinsed and sanitized before cooking an allergy-friendly or gluten-free meal. If it is not possible to thoroughly clean the grill surface during service hours, consider alternative ways to prepare the food (for example, using a clean pan rather than the grill surface).

• For shared equipment like ovens, take additional precautions to avoid cross-contact. For example, when baking an allergy-friendly dish, use a covered baking dish. 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; 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; 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.

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 diner without food allergies 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.

**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; rinsing with clean water; drying with a fresh disposable towel; and then using a sanitizer.

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.

• 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.

- Staff need to thoroughly wash their hands with warm, soapy water; 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.

- 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.
Back-of-house Section Checklist

- 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 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 diners 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 diners with food allergies 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 diner 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 8 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 diner 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 diners 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.

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 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.”

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. Even servers who have been trained must be willing to say “I don’t know. Let me check,” when asked a question they don’t know the answer to with 100 percent certainty. Servers 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.
In serving meals, there are several steps that can help prevent cross-contact:

- Utilize the rule of two. Have the server repeat the diner’s allergens back when taking the order and when serving the meal.
- Identify allergy-friendly or gluten-free orders for servers so they know to take proper steps to avoid cross-contact. They can be identified with double plates, colored toothpicks or plates, a different serving tray, parchment on the plate, a cover over the plate, etc.
- Carry out and serve allergy-friendly or gluten-free items separately from other meals.
- Cover allergy-friendly and gluten-free plates with a clean warming cover to keep the food protected from potential splatter and cross-contact.
- Remind servers repeatedly that if cross-contact may have occurred during the service process, the meal must be remade to avoid a potential reaction.
- Having a chef, sous chef or manager handle and deliver allergy-friendly and gluten-free items can help avoid accidental cross-contact from a server.
- Offer individually packaged items for condiments. This can help avoid cross-contact that could be caused by all students using shared bottles of soy sauce, ketchup, mustard, etc.
- Avoid using the Top 8 allergens as condiments or toppings as much as possible. When they are offered, use covered containers. For example, use covered containers for cheese and nuts.
- Store plates and dishes face down.

**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 diners.
Front-of-house Section Checklist

☐ Create labels and signage educating diners 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 allergies:

- A dedicated hot preparation and service station,
- Pre-ordered meals,
- A dedicated pantry, or
- A combination of these.

In each of these situations, all proper back-of-house procedures need 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.

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 diners. Some considerations:

- Restricting the Top 8 allergens and gluten will work for the majority, but not all, of your diners, 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? Will you offer Top-8-free dessert options as part of your food allergy solution?

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 8 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 allergies, 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. 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.
  - An open-access station that is available to all students may have higher traffic, but may also create more potential for cross-contact. The station may appeal to a wide-range of students, including picky eaters and students with diabetes. The wider variety of students using an open-access station can keep the food turnover high and the food fresh, while also allowing students more flexibility on how and when to disclose their food allergies. It also eliminates the need for a process to determine who can access the station. However, there must be clear communication to the diners using the station regarding their responsibility to prevent cross-contact.

- The ideal hot service station is a completely self-contained station, with “scratch” ingredients stored in closed containers or coolers, designated 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, peanut, soy, sesame and gluten, and students can build their own 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 diners 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 allergies, cross-contact, and your policies and procedures.

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.
  - 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.
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 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. 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, 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.
- 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 diners 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.
- 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 would 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.
• Students granted access to the area must be trained in their responsibilities to the other students using the pantry. 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 allergies 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.
Serving Solutions Checklist

- Decide which serving solution(s) will work best and can be safely implemented at your institution.
- 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 foodservice 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:

1. Review the week’s meals at the allergy-friendly station, and identify days when the meal does not work for your restrictions or preferences.

2. For days when the allergy-friendly station will not work, determine if there are other meals that do not include your allergens. Reach out to dining services to have those meals made separately to ensure the meal is safe from cross-contact.

3. If there are no foods available on the menu that meet your restrictions and preferences without modification, review the protein foods on the menu. Work with dining services to determine what could be made specifically for you 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 (see appendix page 47).

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 diners.

- 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 allergies and celiac disease are able to fully participate and be included in on-campus dining.

- You have established at least one 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.

- What return are you getting on your investment?
  - 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 allergies 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.

- Create student satisfaction surveys to measure the students’ perceptions of safety, inclusion, enjoyment, etc. Sample questions 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 allergies 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.

- 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 allergies or celiac disease, but should absolutely include students with them.

- Include students with allergies or celiac disease in “secret shopper” programs with a focus on allergy-safe operations.
**Glossary**

**Accommodation/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 21.

**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 comes back one to four hours 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 avoidance and elimination of gluten (which is found in wheat, barley, rye and triticale) from the diet. Unlike a food allergy, celiac disease does not require epinephrine.

**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 allergies.

This 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 a 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.

<table>
<thead>
<tr>
<th>Potential sources of cross-contact</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food preparation</td>
<td>Splatter from a pasta dish gets onto a wheat-free meal.</td>
</tr>
<tr>
<td>Hands</td>
<td>A person handled pecans and didn’t wash and rinse their hands before making a salad.</td>
</tr>
<tr>
<td>Insufficient cleaning</td>
<td>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.</td>
</tr>
<tr>
<td>Cooking surfaces</td>
<td>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.</td>
</tr>
<tr>
<td>Utensils</td>
<td>After spreading peanut butter on bread, the food preparer wipes the knife off and uses it for a peanut-free sandwich.</td>
</tr>
<tr>
<td>Salad bars and buffets</td>
<td>A piece of shredded cheese drops into the bin containing lettuce.</td>
</tr>
</tbody>
</table>

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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, self-injectable medicine that can reverse severe symptoms. It must be given quickly when anaphylaxis occurs to be most effective. Delayed use of epinephrine during an anaphylactic reaction has been associated with deaths. Also called adrenaline. It is a self-injectable medicine and is the first-line treatment for a severe or life-threatening allergic reaction (anaphylaxis). Epinephrine is a highly effective medicine that can reverse severe symptoms. It must be given 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 auto-injectors and information about how to administer them here: [www.foodallergy.org/treating-an-allergic-reaction/epinephrine](http://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 8: Refers to the eight allergens that are responsible for most food allergy reactions in the United States. Those are:

- Peanut
- Tree nuts
- Milk
- Egg
- Wheat
- Soy
- Fish
- Shellfish
Appendix

Sample Access Services Policies

Here are two examples of policies addressing food allergy accommodations. The first, adapted from Siena College’s policy, is specifically written to address accommodations for students with food allergies.

Siena College

Policy on Food Allergy Accommodations for Students

Introduction

Siena College recognizes that mealtimes provide a social opportunity to enjoy conversation, relaxation and good food. We offer a variety of foods that promote a healthy lifestyle. We also recognize that some individuals have one or more food allergies that require them more time and effort in managing their diet. We make every effort to provide helpful information to members of our campus community who have to manage their food allergies when eating on campus.

If an individual has been diagnosed by a physician with a life threatening food allergy, this may constitute a disability under the Americans with Disability Act. Siena College complies with Title III of the Americans with Disabilities Act. We acknowledge that we have an obligation to make reasonable modifications in policies, practices and procedures when necessary to accommodate students with disabilities, including food allergies.

Purpose

The purpose of this policy is to: (1) alert the Siena College Community to the existence of food allergies and the importance of keeping students with food allergies safe; (2) notify students of the measures available to accommodate food allergies; and make students with food allergies aware of their personal responsibility to keep themselves safe.

At Siena College, we work together to provide reasonable arrangements so that each member of our campus community may participate in the Siena College dining experience.

Siena College has developed a standardized process to assist individuals with food allergies. The process takes into account each individual’s particular dietary requirements. Our goal is to provide individuals with food allergies the tools they need to be active in the management of their allergy.

Sodexo’s Accommodations for Students with Food Allergies

Sodexo can accommodate many special diets within the dining hall during the academic year. Sodexo can also accommodate special diets during breaks, summer and holidays. Sodexo offers a wide variety of items from which students may select. The dining hall also offers a gluten-free and nut-free area. This allergy-free zone is referred to as MYZone. Signs are posted to inform individuals with special diets. We also serve soy- and lactose-free milk. In addition, there is a hot gluten- and nut-free entree available, including breads and desserts. Dining hall staff will familiarize individuals with the many alternatives provided on our regular menus. We will also provide nutritional and product information individuals need to be able to make informed and safe choices. Students may pre-order their meals by giving dining services 24 hours advanced notice before the meal so staff can obtain the necessary ingredients to prepare the specific meal requested.

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4 Title II of the Americans with Disabilities Act and Section 504 of The Rehabilitation Act of 1973 also apply to universities that receive federal funding. To read Title II, visit: www.ada.govregs2010/titleii_2010/titleii_2010_regulations.htm#a35101. To read Section 504, visit: www2.ed.gov/about/offices/list/ocr/docs/edlite-FAPE504.html
Dining Services provides the following:

1. Individual counseling
2. Nutrition facts on their website
3. A trained staff to answer questions and help with selections who wear badges to inform the public of their status
4. Precautions to prevent cross-contact, including a freezer for gluten free foods and one for nut free foods
5. Special foods available on a daily basis, including many gluten-free foods, soy milk, lactose free milk, and foods cooked to order
6. Signs posted at point-of-sale alerting students to foods containing the eight major food allergens (shellfish, fish, peanuts, tree nuts, soy, wheat, milk, eggs)
7. Use of canola or corn oil

We train our food staff on the severity of food allergies. This training includes instruction on food allergies, including food products that contain allergens, cross-contact and proper food storage and preparation, how to answer inquiries regarding food allergies and Siena's policy for requesting an accommodation for a food allergy.

We label items with possible allergen-containing ingredients. We understand that there is always a risk of cross-contact. We ask that students with food allergies be aware of this risk.

We also recognize that students with food allergies may wish to not eat at the dining hall but want to visit with friends. Students may go through meal plan/dining services accommodation procedures to access the dining hall; they will not be charged for any meals however.

Nutrition counseling is available to Siena students on a year-round basis. The services of a Licensed, Registered Dietitian are available to students wanting information on general nutrition, weight management, food allergies, or specific therapeutic diets. The nutrition office is located in the Lower Serra Hall and appointments can be made by calling XXXXXXX XXXXXXXXX, Sodexo.

Procedures

Students with special requests due to a food allergy are strongly encouraged to make the College aware of these needs as early as possible when they begin their studies. The following procedure must be followed.

1. Students must contact the Director of Health Services to request the following form: Meal Plan Modification Due to Medical Circumstances.

2. Students must provide current and appropriate medical documentation to support their request for a meal plan accommodation that is completed by the student’s physician.

3. Students will be asked to sign a general release so information related to their food allergies can be shared with others, including, but limited to: the Director of Services for Students with Disabilities, Director of Dining Services, Sodexo’s Regional Dietitian Nutritionist, faculty, coaches, Dean of Students, ADA & 504 Coordinator, Residence Life Staff and Public Safety personnel.

4. Upon receipt of the signed release, the Director of Health Services will inform the Director of Services for Students with Disabilities, Director of Dining Services and ADA & 504 Coordinator about the request.

   - Students will be required to meet with the Director of Dining Services and Sodexo’s Regional Dietician Nutritionist to discuss their needs and learn of the food options available to them.

   - At this meeting the following will be discussed:
     - Diet history of foods that can and cannot be tolerated
     - All of the food options and allergy-alternative food products available at Siena College
     - Introduction to the dining hall staff that will be working with students

   - The Director of Health Services, in conjunction with the Director of Services for Students with Disabilities, will be informed of the outcome of this meeting with the Director of Dining Services and Sodexo’s Regional Dietician Nutritionist. They will develop an individualized plan for each student. This plan will outline the College’s
responsibility and student's responsibility for safely managing food allergies while attending classes or functions or residing on campus. Items on these plans will include ways to notify individuals about allergic reactions and access emergency responders at the College. The student, Director of Health Services and Director of Services for Students with Disabilities will sign the individualized plan. Copies of the plan will be provided to the Director of Dining Services and to the Dean of Students.

5. Students with food allergies must review any changes in their medical condition with the Director of Health Services in a timely manner. The Director of Health Services will also notify the Director of Services for Students with Disabilities, Director of Dining Services and ADA & 504 Coordinator of the modifications in medical conditions.

6. Violations of the policy must be reported to the ADA/504 Coordinator. All complaints will be taken seriously and followed through to resolution. All complaints will be prompt, impartial, confidential and retaliatory-free. Siena will not discriminate against any individual because of exercising his or her right to come forth with a complaint or against individuals who participated in an investigation.

Staff Procedures for Allergic Reactions

When a student is suspected to have such an allergic reaction, a staff member shall call 911. The Public Safety emergency number is 911 from any campus phone or XXX-XXX-XXXX (from a cellular phone). The staff member should provide information relating to the allergic reaction and location of the student. A staff member will stay with the individual until medical help arrives. If the situation is deemed to be a medical emergency a staff member will meet the student at the hospital.

Responsibilities of Siena College

The College will:

1. Follow this policy at all times.
2. Provide students with food allergies the tools they need to be active in the management of their allergy.
3. Provide individual counseling with a registered dietitian nutritionist and the director of dining services.
4. Facilitate training for food services and students on food allergies in general and Siena's policy specifically.
5. Take precautions to prevent cross-contamination.
6. Post signs at point-of-sale alerting students to foods containing major food allergens.
7. Permit students who cannot eat at the dining hall due to food allergies to access the dining hall without being charged for their meals.
8. Offer special foods available on a daily basis.
9. Permit students to pre-order their meals by giving dining services 24 hours advanced notice.
10. Offer special foods for catered events at the College.
11. Respond promptly, confidentially and impartially to all complaints of violations of this policy.

Responsibilities of Students with Food Allergies

Students will:

1. Carry with them and use an epinephrine auto-injector in an event of an allergic reaction. Students are responsible for ensuring their epinephrine auto-injector have not expired.
2. Notify roommates about their food allergies.
3. Familiarize themselves with this policy and procedure.
4. Adhere to the procedures outlined in this policy regarding notification to the College, including meeting with the Director of Dining Services and the Registered Dietitian Nutritionist.
5. Ask managers rather than servers of dining facilities about nutrition facts, precautions to prevent cross-contact and special foods available on a daily basis.
6. Familiarize themselves with the daily menus and signs posted regarding allergens.
Rather than creating a separate policy for food allergies and celiac disease, Lesley University incorporated food allergies and celiac disease into its existing disability policy.

Lesley University

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

Lesley University is committed to the full participation of its students in all of its programs. In addition to this long-standing 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.

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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.

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](http://www.lesley.edu/policies/university/discrimination-harassment.html).
Sample Forms From Universities

College of the Holy Cross, Dining
Statement of Student Responsibility

Allergy Kitchen Usage Agreement

By accepting access to the Kimball Main “Allergy Pantry” I am acknowledging my responsibility to:

☐ Maintain proper allergy precautions to prevent cross-contact.
☐ Never bring any foods into the allergy kitchen.
☐ Never bring another person into the allergy kitchen.
☐ Abide by the honor system you may consume as much food as you like while in Kimball, only take out of Kimball “one snack” per meal.
☐ Acknowledge that I may be monitored by closed circuit camera while in the Allergy Pantry.
☐ Protect myself by reading labels, sanitizing counters before use and/or put down protective paper on counter.
☐ Use protective gloves when appropriate.
☐ Keep food packages tightly closed to prevent spoilage.
☐ Keep the area neat at all times.
☐ Report any unsafe conditions in the allergy kitchen to a Kimball manager.
☐ Communicate with Holy Cross Dining immediately when there is a concern, so that it can be addressed.

Signature:___________________________________

Print Name:__________________________________

Student Cell:_________________________________
A Jayhawk’s Guide To
SPECIAL DIETARY NEEDS

We have a well-established program to assist students requiring special dietary accommodations for food allergies, or medical or religious purposes.

HOW WE WORK WITH STUDENTS WHO REQUIRE SPECIAL DIETS

1. GO ONLINE
   union.ku.edu/dining/wellness/special-diets/

2. DOWNLOAD FORM
   Have your doctor complete and sign the form.

   BRING THE COMPLETED FORM WITH YOU WHEN YOU COME TO CAMPUS.

3. CONTACT US
   Mary Rondon, R.D.
   Campus Student Coordinator
   mrondon@ku.edu
   785.864.2424
   785.423.0872
   Set up an appointment to discuss specific dietary needs. KU Dining is here to help!

4. NET NUTRITION®
   Any time you like, you can learn more about the dining options on campus with our Net Nutrition online tool. Be sure to use the allergy and preference filters to help select menu items that best meet your dietary needs.

   union.ku.edu/dining/wellness/net-nutrition/

A Jayhawk’s Guide To
MANAGING YOUR FOOD ALLERGIES

Together, we can develop a plan that provides you with delicious dining options.

WE ARE COMMITTED TO PROVIDING STUDENTS WITH FOOD ALLERGIES THE NECESSARY INFORMATION AND INDIVIDUALIZED SERVICES TO AID IN THEIR TRANSITION TO CAMPUS LIVING.

In order to work effectively together as a team, please review our DIETARY ACCOMMODATIONS PROCEDURE:

union.ku.edu/dining/wellness/special-diets/

PLEASE RECOGNIZE...

KU Dining Services is committed to providing an allergy-friendly dining experience. However, the ingredients and nutritional content of food items served in the campus dining locations may vary. In addition, manufacturers may change their product formulation or consistency of ingredients without our knowledge, and product availability may fluctuate. While we make every effort to identify ingredients, we cannot assure against these contingencies. It is ultimately YOUR responsibility to determine whether to question ingredients or eat selected foods. KU Dining Services cannot guarantee the safety of students with life-threatening allergies.
## Medical Statement for Students Requesting Dietary Accommodations for Medical Reasons

<table>
<thead>
<tr>
<th>Student Name</th>
<th>Student DOB</th>
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<table>
<thead>
<tr>
<th>Campus Address and Phone Number</th>
<th>E-Mail</th>
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<table>
<thead>
<tr>
<th>Permanent Address</th>
<th>Emergency Contact Information</th>
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<table>
<thead>
<tr>
<th>Medical Doctor Name</th>
<th>Medical Doctor Address and Phone Number</th>
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</table>

### For Medical Doctor Use Only

#### Food Allergies and Medical Conditions

- [ ] Dairy
- [ ] Egg
- [ ] Fish
- [ ] Peanut
- [ ] Shellfish
- [ ] Soy
- [ ] Tree Nut
- [ ] Wheat
- [ ] Other (Please specify):

#### Gluten Intolerance

- [ ]

#### Other Medical Conditions requiring Dietary Accommodations (Please Specify):

- [ ]

### Diet Prescription: Foods Omitted and Substitutions

Please list specific food(s) to be omitted and food(s) that may be substituted. You may attach an additional sheet if necessary.

<table>
<thead>
<tr>
<th>Omitted Foods</th>
<th>Substitutions</th>
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</tbody>
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### Indicate Length of Time Special Dietary Accommodations will be required

- [ ] Ongoing
- [ ] Temporary

Start Date: ______________  End Date: ______________

I certify that the above named student needs special dietary accommodations as described above, due to the student’s food allergies and/or medical conditions.

Medical Doctor Signature ______________________ Date ______________

__

Courtesy of University of Kansas
FARE Food Allergy & Anaphylaxis Emergency Care Plan

Name: _______________________________ D.O.B.: ____________________

Allergy to: __________________________________________________________________________________________________

Weight: __________________ lbs.  Asthma: [ ] Yes (higher risk for a severe reaction) [ ] No

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

Extremely reactive to the following foods: _______________________________________________________________________________________

THEFORE:
[ ] If checked, give epinephrine immediately for ANY symptoms if the allergen was likely eaten.
[ ] If checked, give epinephrine immediately if the allergen was definitely eaten, even if no symptoms are noted.

FOR ANY OF THE FOLLOWING:

SEVERE SYMPTOMS

LUNG
Short of breath, wheezing, repetitive cough

HEART
Pale, blue, faint, weak pulse, dizzy

THROAT
Tight, hoarse, trouble breathing/swallowing

MOUTH
Significant swelling of the tongue and/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.

FOR SEVERE SYMPTOMS FROM MORE THAN ONE SYSTEM AREA, GIVE EPINEPHRINE.

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

1. INJECT EPINEPHRINE IMMEDIATELY.
2. Call 911. Tell them the child is having anaphylaxis and may need epinephrine when they 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 them to ER even if symptoms resolve. Person should remain in ER for at least 4 hours because symptoms may return.

MILD SYMPTOMS

NOSE
Itchy/runny nose, sneezing

MOUTH
Itchy mouth

SKIN
A few hives, mild itch

GUT
Mild nausea/discomfort

FOR MILD SYMPTOMS FROM MORE THAN ONE SYSTEM AREA, GIVE EPINEPHRINE.

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.

MEDICATIONS/DOSES

Epinephrine Brand: _______________________________

Epinephrine Dose: [ ] 0.15 mg IM [ ] 0.3 mg IM

Antihistamine Brand or Generic: _______________________________

Antihistamine Dose: _______________________________

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

FORM PROVIDED COURTESY OF FOOD ALLERGY RESEARCH & EDUCATION (FARE) (WWW.FOODALLERGY.ORG) 5/2014

Download for free at www.foodallergy.org/faap
FOOD Allergy & ANAPHYLAXIS EMERGENCY CARE PLAN

EPIPEN® (EPINEPHRINE) AUTO-INJECTOR DIRECTIONS
1. Remove the EpiPen Auto-Injector from the plastic carrying case.
2. Pull off the blue safety release cap.
3. Swing and firmly push orange tip against mid-outer thigh.
4. Hold for approximately 10 seconds.
5. Remove and massage the area for 10 seconds.

AUVI-Q™ (EPINEPHRINE INJECTION, USP) DIRECTIONS
1. Remove the outer case of Auvi-Q. This will automatically activate the voice instructions.
2. Pull off red safety guard.
3. Place black end against mid-outer thigh.
4. Press firmly and hold for 5 seconds.
5. Remove from thigh.

ADRENACLICK®/ADRENACLICK® GENERIC DIRECTIONS
1. Remove the outer case.
2. Remove grey caps labeled “1” and “2”.
3. Place red rounded tip against mid-outer thigh.
4. Press down hard until needle penetrates.
5. Hold for 10 seconds. Remove from thigh.

OTHER DIRECTIONS/INFORMATION (may self-carry epinephrine, may self-administer epinephrine, etc.):

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

EMERGENCY CONTACTS — CALL 911

RESCUE SQUAD: ____________________________

DOCTOR: ____________________________ PHONE: ____________________________

PARENT/GUARDIAN: ____________________________ PHONE: ____________________________

OTHER EMERGENCY CONTACTS
NAME/RELATIONSHIP: ____________________________ PHONE: ____________________________

NAME/RELATIONSHIP: ____________________________ PHONE: ____________________________

PARENT/GUARDIAN AUTHORIZATION SIGNATURE: ____________________________ DATE: ____________________________

FORM PROVIDED COURTESY OF FOOD ALLERGY RESEARCH & EDUCATION (FARE) (WWW.FOODALLERGY.ORG) 5/2014

Download for free at www.foodallergy.org/faap
FARE Common Symptoms of Anaphylaxis Poster

For a suspected or active food allergy reaction

FOR ANY OF THE FOLLOWING SEVERE SYMPTOMS

1. INJECT 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 in ER for at least 4 hours because symptoms may return.

Or more than one MILD SYMPTOM

1. LUNG: Short of breath, wheezing, repetitive cough
2. HEART: Pale, blue, faint, weak pulse, dizzy
3. THROAT: Tight, hoarse, trouble breathing/swallowing
4. MOUTH: Significant swelling of the tongue, lips
5. SKIN: Many hives over body, widespread redness
6. GUT: Repetitive vomiting, severe diarrhea
7. OTHER: Feeling something bad is about to happen, anxiety, confusion

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

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

Download for free at www.foodallergy.org/commonsymptoms.