Allergy Prevention & Response
Intolerance versus Allergy

Intolerance

- Adverse reaction to a food, irritating the stomach or your body cannot properly digest it. Does NOT involve the immune system and is NOT life-threatening. (ex: lactose intolerance)

Common Symptoms:
* Acne
* Inflammation, redness
* Dry Skin
* Gas, cramps, bloating
* Heartburn
* Headaches
* Irritability and mood swings

Allergy

- Immune system thinks a substance is harmful to the body and tries to protect it by creating antibodies and releasing histamines to attack it.

Common Symptoms:
* Rash, hives, itchy skin
* Runny nose
* Cough
* Eczema, dermatitis
* Redness, inflammation
* Tingling sensation in the mouth
* Abdominal pain

Allergic reactions can happen within minutes or up to several hours after exposure to the allergen.
Anaphylaxis is a serious allergic response that often involves swelling, hives, lowered blood pressure and in severe cases, shock. If anaphylactic shock isn’t treated immediately, it can be fatal.

A major difference between anaphylaxis and other allergic reactions is that anaphylaxis typically involves more than one system of the body.

Symptoms usually start within 5 to 30 minutes of coming into contact with an allergen to which an individual is allergic. In some cases, however, it may take more than an hour to notice anaphylactic symptoms. Warning signs may include:

- Red rash (usually itchy and may have welts/hives)
- Swollen throat or swollen areas of the body
- Wheezing
- Passing out
- Chest tightness
- Trouble breathing
- Hoarse voice
- Trouble swallowing
- Vomiting
- Diarrhea
- Stomach cramping
- Pale or red color to the face and body

Anaphylaxis may occur when there is an allergy to

- foods (most common allergy)
- insect stings
- medications
- latex
HOW A CHILD MIGHT DESCRIBE A REACTION TO A FOOD ALLERGEN

- This food is too spicy.
- My tongue is hot (or burning).
- It feels like something is poking my tongue.
- My tongue (or mouth) is tingling (or burning).
- My tongue (or mouth) itches.
- My tongue feels like there is a hair on it.
- My mouth feels funny.
- There's a frog in my throat.
- There's something stuck in my throat.
- My tongue feels full (or heavy).
- My lips feel tight.
- It feels like there are bugs in my ears.
- My throat feels thick.
- It feels like there is a bump on the back of my tongue (throat).
When to Use EpiPen

Signs & Symptoms of a Severe Allergic Reaction (Anaphylaxis)

https://www.youtube.com/watch?v=KzHebySkD6c
How to Use the EpiPen

Click Link Below

https://youtu.be/uBvdO9a9NTQ

Blue to the Sky. Orange to the Thigh.
Prevent Exposure

Take caution:

- Planning meals and snacks
- Read food labels
- Remind parents of “no outside food’s”
- Identify other possible exposure sources
- Handwashing procedures
- Follow disinfecting and sanitizing procedures
- Sharing of utensils and dishes
The program will obtain documentation of any known allergy from the child’s parent, legal guardian or source of medical care before the child is enrolled. If the child has a known allergy, current information will be maintained about the allergy in the child’s file and an Allergy Plan will be developed as required under Minnesota Statutes, section 245A.41, subdivision 1.

The Allergy Plan will include but not limited to a description of the allergy, specific triggers, avoidance techniques, symptoms of an allergic reaction, and procedures for responding to an allergic reaction, including medication, dosages, and a doctor’s contact information as specified in Minnesota Rules, part 9503.0065, subpart 3.

Staff responsible for the Allergy Plan will review and follow the plan. Documentation of the staff’s review will be kept onsite.

The Allergy Plan will be reviewed annually or if any changes are made to the plan. The Allergy Plan will be updated and staff responsible for following the plan will be notified. Documentation that the staff were notified of any changes will be kept onsite.

Child’s allergy information will be available at all times including on site, field trips, and/or during transportation. Child’s food allergy information must be available in the area where food is prepared and served to the child.

The program will contact the child’s parent or legal guardian as soon as possible in any instance of exposure or allergic reaction that requires medication or medical intervention. The program will call emergency medical services when epinephrine is administered to a child in the program’s care.

Staff will be trained on allergy prevention and response at orientation and at least once each calendar year. Training will be documented in staff’s personnel records.
Complete Knowledge Check