A Checklist for Getting Started

Your Food Allergy Field Guide is a resource created and provided by Food Allergy Research & Education (FARE). FARE is a national non-profit organization, whose mission is to improve the quality of life and the health of individuals with food allergies, and to provide them hope through the promise of new treatments. More general resources on food allergies, including articles, support groups, and webinars, can be found on our website at foodallergy.org. For questions related to your specific food allergy care plan, please consult your doctor.

A food allergy diagnosis is life-altering. There is a lot to learn, and it can be tough to know where to start. This field guide checklist can help point you toward important information and resources that will help you learn more about managing food allergies.

Educate Yourself

☐ FIRST STEP: Read all of the information in this Food Allergy Field Guide, starting with the Managing Food Allergies section.

☐ Carry the Tips for Avoiding Your Allergen sheet with you to help with reading labels or asking about ingredients.

☐ Visit the FARE website at foodallergy.org to learn more about food allergies and strategies for staying safe.

☐ FOR PARENTS: Know your child's food allergies inside and out so you can communicate their needs to caregivers.

Be Prepared

☐ FIRST STEP: Fill your prescription for epinephrine auto-injectors. Learn how to use an epinephrine auto-injector and practice by using a trainer. Teach family members and friends how to use the auto-injector.

☐ Put a reminder on your calendar about refilling your prescription before the epinephrine auto-injector's expiration date.

☐ FOR PARENTS: Help your child understand their allergies and teach them to ask questions about ingredients and any food being served.

Have a Plan

☐ FIRST STEP: Fill out the enclosed Food Allergy & Anaphylaxis Emergency Care Plan with your doctor.

☐ Order medical identification to make emergency responders aware of your or your child’s food allergies.

☐ FOR PARENTS: Make sure your child has a food allergy management plan in place at their school or child care facility.

Get Connected and Stay Informed at foodallergy.org

☐ Sign up for FARE’s regular email updates and alerts for food-allergy-related product recalls.

☐ Search for a local support group on the FARE website.

☐ Keep up-to-date by attending FARE’s free webinars or attending conferences.

☐ Join our social media communities on Facebook, Twitter, Pinterest and more. You can find links to these groups at foodallergy.org.

☐ Sign up for FARE’s Advocacy Action Center to help us pass critical legislation. Join at foodallergy.org/advocacy.

☐ FOR PARENTS: Encourage your teen to check out FARE’s resources just for teenagers at foodallergy.org/teens.
Food allergies are serious, but you can manage them with help from your allergist and others. This packet will help you learn more about the disease so that you can be prepared, stay safe and live well with food allergies.

**What Is a Food Allergy?**
A food allergy is when your body’s immune system reacts to a food protein because it has mistaken that food protein as a threat.

The food you are allergic to is called a “food allergen.” The response your body has to the food is called an “allergic reaction.”

People can be allergic to any food, but eight foods cause most food allergy reactions in the U.S. They are: milk, egg, peanuts, tree nuts (such as walnuts or pecans), wheat, soy, fish, and shellfish (such as lobster, shrimp or crab).

**What Is the Difference Between a Food Allergy and a Food Intolerance?**
Unlike a food intolerance, food allergies involve the immune system and can be life-threatening. With a food allergy, your immune system makes too much of an antibody called immunoglobulin E (IgE). IgE antibodies fight the “threatening” food allergens by releasing histamine and other chemicals. This chemical release causes the symptoms of an allergic reaction.

A food intolerance is when your body has trouble digesting a food. It can make you feel badly, usually with an upset stomach or gassiness, but it is not life-threatening. The most common intolerance is to lactose, which is a natural sugar found in milk.

**Are Allergic Reactions Serious?**
Yes. Allergic reactions can range from mild to very serious. The most dangerous reaction is called anaphylaxis (pronounced an-uh-fil-LAX-is). Anaphylaxis is a severe allergic reaction that may happen quickly and may cause death.

Anaphylaxis can affect several areas of the body. It can make it hard to breathe and make it hard for your body to circulate blood. The first-line treatment for anaphylaxis is a medicine called epinephrine.

**Not All Reactions Are the Same!**
You can still have a life-threatening reaction to your problem food, even if you have never had a serious reaction before. Past reactions do not predict future reactions!
Carefully avoiding problem foods is the only way to prevent allergic reactions.

**Avoid Problem Foods**

Even a trace amount of a problem food can cause a serious reaction. Learn how to find your problem foods in both obvious and unexpected places.

- **Read every label, every time.** Ingredients in packaged foods may change without warning. Check ingredient statements every time you shop. Even the same product from the same company can have different warning labels. If you have questions, call the manufacturer.

  Federal law requires packaged food labels to list when one of the top eight food allergens is an intended ingredient. The top eight food allergens are: milk, egg, peanuts, tree nuts, wheat, soy, fish, and shellfish. Read more about this law and tips for avoiding unintended ingredients at [foodallergy.org/foodlabels](http://foodallergy.org/foodlabels).

- **Be mindful of cross-contact.** Cross-contact happens when a food that is an allergen comes into contact with a safe food and their proteins mix. As a result, each food contains small amounts of the other food. These amounts are so small that they usually can’t be seen. One example of cross-contact is when the same utensil is used to serve a food that contains an allergen and a safe food.

  Cross-contact can happen in restaurants, school cafeterias, home kitchens or anywhere that an allergen may be present. Get more tips for avoiding cross-contact at [foodallergy.org/crosscontact](http://foodallergy.org/crosscontact).

**Plan Ahead**

No matter how hard you try to avoid food allergens, accidents will happen. These simple steps go a long way in being prepared for an allergic reaction.

1. **Always carry your epinephrine auto-injector.** Epinephrine is the only medicine that can stop life-threatening reactions. Carry your epinephrine auto-injector with you at all times and check to make sure it has not expired, is kept at a safe temperature, and that it has not been damaged.

2. **Fill out a Food Allergy & Anaphylaxis Emergency Care Plan with your allergist.** These plans tell you and/or those who care for your child how to recognize and respond to an allergic reaction. Sample plans can be downloaded from FARE’s website in both English and Spanish ([foodallergy.org/faap](http://foodallergy.org/faap)).

3. **Know your plan and share it with others.** Make sure everyone who knows you understands what to do in case of an emergency. Keep your Food Allergy & Anaphylaxis Emergency Care Plan in a place where others can find it. For parents, give your child’s plan and medicines to their school or preschool as soon as possible.

4. **Wear medical identification.** Medical IDs will help protect you or your loved one—at home or wherever you may be during an emergency.

**Safety First!**

Never take a chance by trying “just a bite” of a food that may contain your allergen. Even a tiny amount can put your life at risk.
Recognize & Treat a Reaction

Seconds matter! It is important to be able to quickly recognize and treat an allergic reaction. Work with your allergist to know what to look for and how to respond. Have them fill out a Food Allergy & Anaphylaxis Emergency Care Plan for you.

What will a reaction look like?

Food allergy reactions are hard to predict. The last reaction a person had could look nothing like the next one.

The first symptoms usually appear between a few minutes and two hours after exposure to a food allergen, but they can also begin later.

Symptoms can affect many different parts of the body. The symptoms can be mild (itchy nose or a few hives), but they can also be severe (trouble breathing, repetitive vomiting, weak pulse, etc.). Find a complete list of symptoms at foodallergy.org/symptoms.

In some food allergy reactions, after the first symptoms go away, a second wave of symptoms can start one to four hours later. This is called a biphasic reaction.

How do I treat an allergic reaction to food?

Anaphylaxis should always be treated with an injection of epinephrine (see pages 6-7 for more information). Antihistamines can be used to relieve mild allergy symptoms, but they cannot control anaphylaxis, and they should never be given as a substitute for epinephrine. Mild symptoms can quickly turn into a life-threatening reaction. Anyone having a reaction to a food allergen should be monitored closely.

Give Epinephrine for a Serious Reaction

Epinephrine is a type of adrenaline. It helps reverse the symptoms of a severe reaction. It is considered a very safe medicine. There are currently three types of epinephrine auto-injectors available in the U.S. Have your doctor train you to use the device you want and practice with a trainer (a device that does not have a needle or medicine in it). Instructions for using each auto-injector and more information is available at foodallergy.org/epinephrine.
Managing Food Allergies: What You Need to Know

After Using Epinephrine

After you use an epinephrine auto-injector:

1. **Call 911 immediately!** An epinephrine auto-injector buys time, but it is important to receive follow-up treatment as soon as possible. An ambulance can provide treatment on the way to the hospital.

2. Tell the 911 operator:
   - Epinephrine has been given for a suspected food allergy reaction.
   - Send an ambulance that has epinephrine on board.

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

4. If symptoms do not get better, or symptoms return, more doses of epinephrine can be given about 5 minutes or more after the last dose.

5. Have the ambulance take the person to the Emergency Room. They should stay there for at least 4 hours to make sure symptoms do not return.

You will also need to make a follow-up appointment with an allergist as soon as possible. Be sure to:

   - Bring the used epinephrine auto-injector(s) to be safely thrown away.
   - Describe how the reaction happened.
   - Get a prescription to replace your used auto-injector(s).

Three Important Things You Should Know

1) Allergic reactions are unpredictable. How severe the reaction is, and which symptoms you get, can change from one reaction to the next.

2) It’s vital to always carry your epinephrine auto-injector with you. In the case of a severe reaction, minutes can make a difference.

3) Know the possible symptoms of an allergic reaction, and know how and when to use your epinephrine auto-injector.
Understanding Food Labels

The only way to prevent a serious allergic reaction is to avoid the food allergen.

Reading every food label, every time is one of the best ways to keep you or your loved one safe. Many people who are managing food allergies use the “Rule of 3” for reading ingredient labels—read the label at the store, when unloading your groceries, and before serving the food—to triple-check that a food is safe. Others use a system of colored stickers on foods in the pantry or refrigerator to indicate that an adult has read the ingredient label and determined whether the food is safe or contains the allergen.

There are a variety of approaches that can work, and laws like the Food Allergy Labeling and Consumer Protection Act (FALCPA) help make it easier to understand food labels so that you can safely manage your or your child’s food allergies.

What is FALCPA?
This law requires that food labels show in plain English when a “major food allergen” or any ingredient that contains protein from a major food allergen is added as an ingredient in that product.

What foods have to be labeled?
Imported (when sold in the United States) or domestic (made in the United States) pre-packaged foods are required to have a label that lists the major food allergens when they are intentionally added as an ingredient, or when any ingredient contains protein from one of the major food allergens.

Which foods are considered major food allergens under FALCPA?
The U.S. Food and Drug Administration (FDA) considers the following foods major food allergens: milk, wheat, egg, peanuts, tree nuts, fish, crustacean shellfish, and soy. These foods account for 90 percent of food allergy reactions in the United States.

How do the labels show the major food allergens?
Manufacturers have two options to indicate a major food allergen on product labels. The first option is to list the allergen in parentheses after the ingredient. The second option is to list the allergen at the end of the ingredient list. Often this “Contains” statement is bolded. See the box below for examples of these two options.

Example 1: Ingredients: Whey protein (milk), lecithin (soy), cherry, sugar, natural flavors (almond), salt.
Example 2: Ingredients: Whey protein, lecithin, cherry, sugar, natural flavors, salt.
Contains: Milk, soy, and almond.

Does the label have to include the “Contains” statement at the end with the major allergens bolded?
No. The “Contains” statement is one of two options that food manufacturers have for listing the presence of major food allergens.
Understanding Food Labels

Does the label have to declare “traces” of peanut, milk or other allergen that have come about through processing?
No. FALCPA applies to ingredients that are intentionally added to processed food products. Precautionary warnings or advisory statements (e.g., “May contain…”, “Processed in a facility with…” are voluntary. A manufacturer does not have to warn you that there may be unintentional traces of an allergen due to cross-contact during processing.

Should we avoid products with precautionary warnings (e.g., May contain…)?
Most allergists recommend avoiding these products. Studies have shown that some of the products actually do contain allergens in amounts significant enough to cause an allergic reaction.

If a product does not have a precautionary warning, does that mean the product is safe to consume?
Not necessarily. Manufacturers are not required to warn you if the product is processed on lines or in a facility with any other food.

What foods are not covered by FALCPA?
FALCPA does not apply to fresh meats, fresh fruits and vegetables. Restaurant foods that are placed in a wrapper or carry out box for an individual customer order are exempt. Highly refined oils (even if they are derived from a major allergen, such as peanut or tree nut) are also exempt.

Is shellfish considered a major allergen?
Only crustacean shellfish (e.g. shrimp, crab, lobster) is considered a major allergen. The FDA does not consider molluscan shellfish (scallops, clams, mussels, and oysters) to be a major allergen, so these types of shellfish do not have to be declared on food labels.

Do the specific types of nuts, fish or shellfish have to be indicated on the label?
Yes. The specific type of fish (e.g., tuna, salmon), crustacean shellfish (e.g., shrimp, crab) or tree nut (e.g., cashew, walnut) must be declared.

Do all foods need to be declared on food labels?
No. The only foods that have to be declared are those the FDA considers major food allergens: milk, wheat, egg, peanuts, tree nuts, fish, crustacean shellfish, and soy, or ingredients that contain proteins from these foods.

Do major food allergens contained in dyes (food coloring), spices, flavorings, additives and processing aids have to be listed on labels?
Yes. If these ingredients contain a major food allergen, the allergen must be indicated on the label.

What about food from bakeries, delis, etc.?
FALCPA does not apply to foods placed in a container or wrapper for a customer’s individual order, such as food from a bakery or a sandwich from a restaurant.

How can consumers find out about other allergens such as sesame, kiwi, mustard and others?
Other food ingredients may or may not be declared on the label. Consumers can call the manufacturer and ask if a product contains their allergen(s). In some cases, food manufactures may prefer not to disclose their ingredients or recipes.

For more information, visit: foodallergy.org/foodlabels
Tips for Avoiding Your Allergen

- All FDA-regulated manufactured food products that contain a “major food allergen” (milk, wheat, egg, peanuts, tree nuts, fish, crustacean shellfish, and soy) as an ingredient are required by U.S. law to list that allergen on the product label. For tree nuts, fish and crustacean shellfish, the specific type of nut or fish must be listed.
- Read all product labels carefully before purchasing and consuming any item.
- Be aware of unexpected sources of allergens, such as the ingredients listed below.
- *Note: This list does not imply that the allergen is always present in these foods; it is intended to serve as a reminder to always read the label and ask questions about ingredients.

### For a Milk-Free Diet

**Avoid foods that contain milk or any of these ingredients:**
- butter, butter fat, butter oil, butter acid, butter ester(s)
- buttermilk
- casein
- casein hydrolysate
- caseinates (in all forms)
- cheese
- cottage cheese
- cream
- curds
- custard
- diacetyl
- ghee
- half-and-half

**Milk is sometimes found in the following:**
- artificial butter flavor
- baked goods
- caramel candies
- chocolate
- lactic acid starter

**Keep the following in mind:**
- Individuals who are allergic to cow’s milk are often advised to also avoid milk from other domestic animals. For example, goat’s milk protein is similar to cow’s milk protein and may, therefore, cause a reaction in individuals who have a milk allergy.

### For a Soy-Free Diet

**Avoid foods that contain soy or any of these ingredients:**
- edamame
- miso
- natto
- soy (soy albumin, soy cheese, soy fiber, soy flour, soy grits, soy ice cream, soy milk, soy nuts, soy sprouts, soy yogurt)
- soya
- soybean (curd, granules)

**Soy is sometimes found in the following:**
- Asian cuisine
- vegetable broth

**Keep the following in mind:**
- The FDA exempts highly refined soybean oil from being labeled as an allergen. Studies show most allergic individuals can safely eat soy oil that has been highly refined (not cold pressed, expeller pressed, or extruded soybean oil).
- Most individuals allergic to soy can safely eat lecithin.
- Follow your doctor’s advice regarding these ingredients.
Tips for Avoiding Your Allergen

For a Shellfish-Free Diet
Avoid foods that contain shellfish or any of these ingredients:
- barnacle
- crab
- crawfish (crawdad, crayfish, ecrevisse)
- krill
- limpet (lapas, ophi)
- mussels
- octopus
- oysters
- periwinkle
- scallops
- surimi
- fish stock
- seafood flavoring (e.g., crab or clam extract)

Shellfish are sometimes found in the following:
- bouillabaisse
- cuttlefish ink
- glucosamine
- nuoc mam

Keep the following in mind:
- Any food served in a seafood restaurant may contain shellfish protein due to cross-contact.
- For some individuals, a reaction may occur from inhaling cooking vapors or from handling fish or shellfish.

For a Peanut-Free Diet
Avoid foods that contain peanuts or any of these ingredients:
- artificial nuts
- goobers
- nut meat
- peanut butter
- peanut flour
- peanut protein
- hydrolysate
- baked goods (e.g., pastries, cookies)
- candy (including chocolate candy)
- enchilada sauce
- mole sauce
- nout
- chili
- egg rolls

Peanut is sometimes found in the following:
- African, Asian (especially Chinese, Indian, Indonesian, Thai, and Vietnamese), and Mexican dishes

Keep the following in mind:
- Mandelonas are peanuts soaked in almond flavoring.
- The FDA exempts highly refined peanut oil from being labeled as an allergen. Studies show that most allergenic individuals can safely eat peanut oil that has been highly refined (not cold pressed, expeller pressed, or extruded peanut oil). Follow your doctor’s advice.
- A study showed that unlike other legumes, there is a strong possibility of cross-reaction between peanuts and lupine (or lupin). Flour derived from lupine is becoming a common substitute for gluten-containing flours. The law requires that a food product’s ingredients must be listed on the label, such as “lupin” or “lupine”.
- Arachis oil is peanut oil.
- Many experts advise patients allergic to peanuts to avoid tree nuts as well.
- Sunflower seeds are often produced on equipment shared with peanuts.
- Some alternative nut butters, such as soy nut butter or sunflower seed butter, are produced on equipment shared with other tree nuts and, in some cases, peanuts. Contact the manufacturer before eating these products.

For a Tree-Nut-Free Diet
Avoid foods that contain nuts or any of these ingredients:
- almond
- artificial nuts
- beechnut
- Brazil nut
- butternut
- cashew
- chestnut
- chinquapin nut
- filbert/hazelnut
- gianduja (a chocolate-nut mixture)
- ginkgo nut
- hickory nut
- litchi/lychee/lychee nut
- macadamia nut
- marzipan/albumin paste
- Nangai nut
- natural nut extract (e.g., almond, walnut)
- nut butters (e.g., cashew butter)
- nut meal
- nut paste (e.g., almond paste)
- pecan
- pesto
- pine nut
- pine nut (also referred to as Indian, pignoli, pigfolia, pignon, pignol, and pinyon nut)
- pistachio
- praline
- shea nut
- walnut

Tree nuts are sometimes found in the following:
- black walnut hull
- nut distillates/ alcoholic
- extracts
- nut oils (e.g., walnut oil, almond oil)
- walnut hull extract (flavoring)

Keep the following in mind:
- Mortadella may contain pistiachos.
- There is no evidence that coconut oil and shea nut oil/butter are allergenic.
- Many experts advise patients allergic to tree nuts to avoid peanuts as well.
- Talk to your doctor if you find other nuts not listed here.
- Coconut, the seed of a drupeaceous fruit, has typically not been restricted in the diets of people with tree nut allergy. However, in October of 2006, the FDA began identifying coconut as a tree nut. Medical literature documents a small number of allergic reactions to coconut; most occurred in people who were not allergic to other tree nuts. Ask your doctor if you need to avoid coconut.

For a Fish-Free Diet
Fish is sometimes found in the following:
- barbecue sauce
- bouillabaisse
- Caesar salad
- cavier
- deep fried items
- fish flavoring
- fish flour
- fish fume
- fish gelatin (kosher gelatin, marine gelatin)
- fish oil
- fish sauce imitation fish or shellfish isinglass
- lutefisk maw, maws (fish maw)
- fish stock
- fish meal
- nuoc mam (Vietnamese name for fish sauce; beware of other ethnic names)
- pizza (anchovy topping)
- roe
- salad dressing
- seafood flavoring
- shark cartilage
- shark fin
- surimi
- sushi, sashimi
- Worcestershire sauce

Keep the following in mind:
- If you have fish allergy, avoid seafood restaurants. Even if you order a non-fish item off of the menu, cross-contact of fish protein is possible.
- Asian cookery often uses fish sauce as a flavoring base. Exercise caution when eating this type of cuisine.
- Fish protein can become airborne in the steam released during cooking and may cause an allergic reaction. Stay away from cooking areas when fish is being prepared.
How to Avoid Cross-Contact

What is cross-contact?
Cross-contact happens 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!

The term “cross-contact” is fairly new. Some people may call this “cross-contamination.”

Why don’t we use the term cross-contamination?
Cross-contamination usually refers to bacteria or viruses that get on food and make it unsafe to eat. In cross-contamination, cooking the food will lower the chance of a person getting sick.

This is not the same with food allergies and cross-contact. Cooking does not remove an allergen from a food!

The only way to stop you from having a reaction is to avoid the food and carefully clean anything that came in contact with it using soap and water.

Examples of cross-contact

<table>
<thead>
<tr>
<th>Direct Cross-Contact</th>
<th>Indirect Cross-Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peeling cheese off a cheeseburger to make it a hamburger</td>
<td>Using the same spatula that flipped a cheeseburger to flip a hamburger</td>
</tr>
<tr>
<td>Removing shrimp from a salad</td>
<td>Not washing hands after handling shrimp before making the next salad</td>
</tr>
<tr>
<td>Scraping peanut butter off a piece of bread and using it to make a different sandwich</td>
<td>Wiping off—not properly cleaning—a knife used to spread peanut butter before using it to spread jelly</td>
</tr>
</tbody>
</table>

Tips to avoid cross-contact

• Use utensils, cutting boards and pans that have been thoroughly washed with soap and water. Consider using separate utensils and dishes for making and serving safe foods. Some families choose a different color to identify the safe kitchen tools.
• If you are making several foods, cook the allergy-safe foods first.
• Keep the safe foods covered and away from other foods that may splatter.
• If you make a mistake, you can’t just remove an allergen from a meal. Even a small amount of cross-contact makes a food unsafe.
• Wash your hands with soap and water before touching anything else if you have handled a food allergen. Soap and water or commercial wipes will remove a food allergen. Sanitizing gels or water alone will not remove an allergen.
• Scrub down counters and tables with soap and water after making meals.
• Do not share food, drinks or utensils. Teach children not to share these when they are at school or with friends.
When you are dining out with food allergies, planning ahead is important. Follow these tips on what to do before you go out and when you are at the restaurant to have a better dining experience.

Before You Go

Restaurant Selection

- **Ask around.** Your Allergist and other individuals and families who manage food allergies may have recommendations. To see if a particular restaurant may be a good choice, check out the website and review the menu in advance.

- **Pick a restaurant that best fits what you can eat.** Avoid riskier choices, which could include:
  - **Buffets.** With a wide variety of foods so close to one another, the risk for accidental exposure and cross-contact is high.
  - **Bakeries.** There is a high risk of cross-contact, since many items are made with common allergens and many are not packaged.
  - **Restaurants that serve pre-made foods.** The staff may not have an accurate list of the ingredients in a pre-made item. Since the dishes are not prepared from scratch, you can’t ask the chef to remove the problem ingredient from an item that would otherwise be safe to eat.
  - **Restaurants that are known to use allergens in many dishes.** For instance, peanuts and other nuts are used frequently in Asian cuisines. In ice cream shops, shared scoops increase the risk of cross-contact. If you have a fish or shellfish allergy, it’s a good idea to avoid seafood restaurants.

- **Consider chain restaurants,** especially when you’re traveling. Each restaurant is likely to use the same ingredients and prepare foods the same way, and a growing number are allergy-aware.

- **Know your options.** If you plan to attend a catered event where the food will be prepared in advance, ask if it’s possible to provide an allergy-friendly option.

Prepare for Your Dining Out Experience

- **Call ahead and ask to speak to a manager.** You can find tips and sample questions to use when calling restaurants on our website at foodallergy.org/diningout.

- **Timing is everything.** Choose a day and time when restaurant kitchens are not as busy. The best time to dine at any restaurant is during the first hour of a service period. The staff is more alert and attentive, and the kitchen is much cleaner. If possible, plan for an early meal.

- **Bring a chef card.** This wallet-sized card lists your food allergies and states that your food must be cooked in a clean and safe area to avoid cross-contact. You can find online sources for cards in multiple languages, make your own, or download a template on our website.

- **Be prepared.** No matter how carefully you’ve planned or how safe you feel at a particular restaurant, never leave home without your epinephrine auto-injector and any additional medications, and be sure to wear your medical identification (e.g., bracelet, other jewelry).
At the Restaurant

Communicating with Restaurant Employees

Communication between restaurants and customers with food allergies is essential to a safe dining experience.

• **Talk to everyone.** The restaurant manager and wait staff should know about your food allergy. Remind a manager or the head waiter about your allergies before you are seated. Present your chef card and ask that it be shown to the chef.

• **Ask what is in your dish and how it is prepared.** Make sure your server understands what you are allergic to, and explain that cross-contact must be avoided. Consider speaking to the manager and the chef, just to be sure. Know what procedures a restaurant should follow to keep your food safe.

• **Never be embarrassed if you feel you’re not communicating well.** If the wait staff doesn’t seem to understand your situation, always trust your gut and seek out another staff member or manager. Sometimes, the safest choice is to avoid eating, enjoy the company of your friends, and find a safe meal somewhere else afterwards.

• **Reward excellent service and build a relationship.** If you have a good experience at a restaurant, tell the staff about it and go back.

Meal Selection

• **Keep it simple.** If you have to ask a lot of complicated questions about the items on a menu, ordering more simple fare—like a baked potato, broiled chicken or steamed vegetables—may be the safest way to go.

• **Avoid fried foods.** Both the grill and the frying oil are ripe for cross-contact; it’s best to avoid fried foods unless you know for sure that they are prepared safely.

• **Be very careful when ordering desserts.** Desserts are often a source of unexpected allergens. Since many restaurants order their desserts from specialty shops, the staff may not be able to provide a complete list of ingredients. If in doubt, wait and have a safe dessert at home.

More information on dining out with food allergies is available on the FARE website at [foodallergy.org/diningout](http://foodallergy.org/diningout).