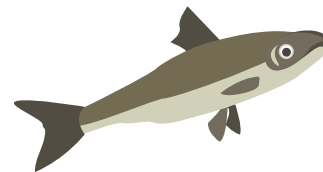


# Child Care Center Food Allergy Fact Sheet

## FISH ALLERGY

### What Is Fish Allergy?

Fish allergy is a potentially life-threatening immune system reaction to finned fish proteins. Generally, an allergic reaction occurs when fish is eaten. In some cases, a reaction occurs when fish is touched or its proteins are inhaled through steam when it is being cooked. Fish allergy can develop at any age and is usually lifelong.



### Avoiding Fish

A child allergic to one type of fish is often allergic to other types and is advised to avoid all fish. If you have a child with a fish allergy in your care, you need to be aware of foods and products that may contain fish to prevent a reaction. This includes foods in your menu as well as foods and products that staff and children may bring into the center. The following tables list the most common finned fish, fish foods, products, and dishes, and other products that may contain fish. It is important to read all food labels to check for fish or fish ingredients when a child has a fish allergy.

#### Finned Fish

- |             |             |           |             |
|-------------|-------------|-----------|-------------|
| • Anchovies | • Haddock   | • Pike    | • Swordfish |
| • Bass      | • Hake      | • Pollock | • Tilapia   |
| • Catfish   | • Halibut   | • Salmon  | • Trout     |
| • Cod       | • Herring   | • Scrod   | • Tuna      |
| • Flounder  | • Mahi-mahi | • Snapper |             |
| • Grouper   | • Perch     | • Sole    |             |

#### Fish Foods, Products, and Dishes

- |                                   |                          |   |  |
|-----------------------------------|--------------------------|---|--|
| • Bouillabaisse                   | • Fish fillets           | • Fish stir-fry                                 | • Paella   |
| • Ceviche (made with finned fish) | • Fish fried rice        | • Fumet (fish stock)                            | • Surimi seafood<br>(restructured seafood;<br>usually made from pollock) |
| • Cioppino                        | • Fish gelatin           | • Gelfite fish                                  | • Sushi / sashimi  |
| • Egg rolls                       | • Fish oil               | • Gumbo   |  |
| • Fish curry                      | • Fish sauce             | • Imitation crab (usually<br>made from pollock) |  |
| • Fish eggs (caviar)              | • Fish sticks or nuggets |   |  |

#### Other Products That May Contain Fish

- |  |  |   |  |
|--|--|---|--|
| • Barbecue sauce (may contain<br>Worcestershire sauce) | • Caesar salad<br>dressing (contains<br>anchovies) | • Items fortified with EPA or<br>DHA (omega-3 fatty acids<br>derived from fish/fish-oil products) | • Worcestershire sauce<br>(contains anchovies) |
|--|--|---|--|

## Reading Food Labels

Foods regulated by the U.S. Food and Drug Administration (FDA) are required to follow the *Food Allergen Labeling and Consumer Protection Act of 2004 (FALCPA)*. FALCPA requires food manufacturers to list the nine major allergens and ingredients containing those allergens on the ingredient list of a food label in one of three ways:

- 1) Using their common or usual name **“Anchovy Extract”**
- 2) Providing the common or usual name of an allergen in parentheses after a lesser-known name of an allergenic ingredient **“Fish Sauce (Anchovy Extract, Salt, Sugar)”**
- 3) Using a “Contains” statement following or next to the ingredient list **“Contains Fish (Anchovy)”**

Food labels often contain an *advisory statement* following the ingredients list. This statement is NOT mandatory nor regulated in terms of the wording that should be used. Examples include:

**“May contain fish.”**

**“Manufactured on equipment that also processes fish.”**

Foods with an advisory statement should be avoided as the product may contain a trace amount of a particular allergen due to *cross-contact*. Cross-contact is when one food allergen comes into contact with another food, transferring the allergens to the new food. The absence of an advisory statement does not mean that the product has had no cross-contact with a particular allergen.



Food labels may also claim the product is free from a particular allergen. These claims are not regulated, and the product may be made in a facility where the allergen is present.

### Food Label Example

The following ingredient list is for fish sticks. Notice how pollock and wheat are listed. Many, but not all, food manufacturers will include a “Contains” statement to be extra clear about the allergens present in their foods. However, this is not required if the allergens are listed with their usual, common names. Always read the ingredients list!

**Ingredients: Alaska Pollock (Fish, Sodium Tripolyphosphate To Retain Fish Moisture), Bread Crumbs (Wheat Flour, Sugar, Salt, Yeast),** Water, Vegetable Oil (Cottonseed and/or Canola, and/or Sunflower, and/or Soybean with TBHQ and Citric Acid as Preservatives), **Wheat Flour.** Contains 2% or less of: **Wheat Flour (Enriched with Niacin, Ferrous Sulfate, Thiamine Mononitrate, Riboflavin, Folic Acid),** Salt, Soybean Oil, Modified Food Starch, Salt, Sugar, **Wheat Flour,** Extractives of Paprika (Color), Dextrose, Leavening (Sodium Acid Pyrophosphate, Sodium Bicarbonate, Monocalcium Phosphate), Garlic Powder, Onion Powder, Spice.

**Contains: Fish (Pollock) and Wheat.**

All child care staff should be trained to read food labels and recognize food allergens. Ingredients and manufacturing processes change over time, so staff should carefully read labels for potential allergens every time a product is purchased. If there is uncertainty about whether a food product contains a specific allergen, contact the manufacturer for clarification.

The Centers for Disease Control and Prevention (2013) recommends keeping labels of every product served to a child with food allergies for a minimum of 24 hours or as required by your State or local authority. If a product is kept as leftovers, be sure to keep the label for 24 hours after it is completely used or discarded.

\*The *FASTER Act of 2021* declared sesame as the 9th major allergen. Food manufacturers are not required to list sesame and ingredients containing sesame on the ingredient list of a food label until January 1, 2023.

## Menu Modifications

A medical statement from a state-licensed healthcare professional is required when substitutions or modifications for a child with a food allergy are outside the meal pattern. Refer to the *Modifications to Accommodate Disabilities in the Child and Adult Care Food Program and Summer Food Service Program* memo on the USDA website (<https://www.fns.usda.gov/cn/modifications-accommodate-disabilities-cacfp-and-sfsp>) for more information on using medical statements.

When planning a menu for a child with a fish allergy, consider your current menu items to determine if you can create a reimbursable meal or snack free of fish. Meals and snacks that meet meal pattern requirements do not require a medical statement. This approach minimizes the need to make menu substitutions or prepare special recipes and reduces the burden on both providers and participants.

The following table lists safe alternatives to common menu items that contain fish:

Menu Items & Condiments That May Contain Fish*	Possible Substitutes*†
Caesar salad dressing (contains anchovies), Worcestershire sauce (contains anchovies), fish sauce	Dressings and sauces that do not contain fish
Curry, fried rice, or stir-fried dishes with fish or fish sauce	Curry, fried rice, or stir-fried dishes without fish or fish sauce
Fish fillet	Beef, pork, poultry, or shellfish; beans, peas, or legumes
Fish sticks or nuggets	Chicken nuggets or patties
Tuna salad	Chicken, turkey, or egg salad

\*All meals claimed for reimbursement must meet the CACFP meal pattern requirements. Please visit <https://www.fns.usda.gov/cacfp/meals-and-snacks> for more information. †Always review the food label to verify ingredients. Contact the manufacturer if there is uncertainty about whether a food product contains fish.

Follow your center's policies for handling food allergies. It is recommended to have a written care plan developed by the parents and the child's health care provider if the child has a known food allergy. The written care plan should include the steps to follow if the child has a reaction. Consider posting lists of allergens around the center, particularly in food preparation areas. Staff who deal directly with food preparation, meal service, and/or children need to be informed of whom in the center has allergic concerns. This communication should be handled with discretion to protect the privacy of affected children.

## Food Allergy Symptoms

An allergic reaction can be mild or severe. Symptoms of an allergic reaction can occur within minutes or a few hours of exposure to a food allergen. A child may experience different symptoms each time they have an allergic reaction. A history of mild reactions does not predict the severity of future reactions.

It may be difficult to determine when an infant or very young child is having an allergic reaction. They most likely do not understand what they are experiencing and may not have the language skills to tell you. Recognizing personality changes or when a child is looking unwell can offer important clues. Verbal children may say things like, "my mouth feels funny" or "my tongue is itchy."

## Common Symptoms of an Allergic Reaction

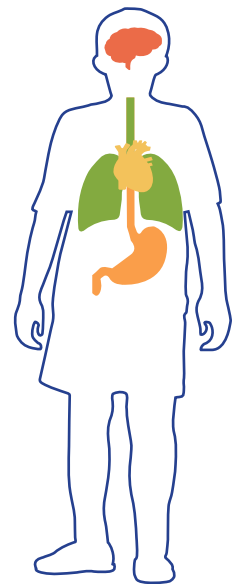
Body System	Symptoms
Skin	Hives, swelling (face, lips, tongue), itching, warmth, redness
Respiratory (breathing)	Coughing, wheezing, shortness of breath, chest pain or tightness, throat tightness, trouble swallowing, hoarse voice, nasal congestion, or hay fever-like symptoms (sneezing; runny or itchy nose; red, itchy, or watery eyes)
Gastrointestinal (stomach)	Nausea, stomach pain or cramps, vomiting, diarrhea
Cardiovascular (heart)	Dizziness/light-headedness, pale/blue color, weak pulse, fainting, shock, loss of consciousness
Neurological (brain)	Anxiety, sense of "impending doom" (feeling that something really bad is about to happen), confusion, headache

A *mild reaction* is generally considered one bodily response to an allergen that does not impact breathing or blood pressure, such as localized hives, hay fever, or mild nausea.

A *severe reaction* is called **anaphylaxis**. It is potentially life-threatening and generally includes severe symptoms affecting two or more body systems. The most dangerous symptoms of anaphylaxis include **trouble breathing** (caused by swelling of the airways) and a **drop in blood pressure** (causing dizziness, light-headedness, feeling faint or weak, or passing out). A drop in blood pressure without other symptoms may also indicate anaphylaxis. Anaphylaxis can occur without hives.

Follow your center's emergency medical plans for responding to allergic reactions and your state's specific rules and regulations for child care providers when administering medications. Anaphylaxis **MUST** be treated promptly with **an injection of epinephrine** followed by **calling 911**.

Once an allergic reaction begins, there is no way to predict if it will remain a mild, isolated response or if it will become severe. Document and communicate with the necessary staff and the child's parents or guardians about their symptoms. Closely monitor the child for the next few hours in case the reaction intensifies. Be prepared to seek emergency care if needed.



## Common Symptoms of an Allergic Reaction in Children Under 2 Years of Age

- Noticeable change in the sound of their cry
- Drooling
- Spitting up food or drink after feeding
- Uncontrolled passing of stool or urine
- Behavioral changes
  - Irritability
  - Unexpectedly becoming very sleepy or difficult to wake up
  - Suddenly appearing very frightened
  - Emotionally upset
  - Wanting to be held or comforted

## References

- Centers for Disease Control and Prevention. (2013). *Voluntary guidelines for managing food allergies in schools and early care and education programs*. [https://www.cdc.gov/healthyschools/foodallergies/pdf/20\\_316712-A\\_FA\\_guide\\_508tag.pdf](https://www.cdc.gov/healthyschools/foodallergies/pdf/20_316712-A_FA_guide_508tag.pdf)
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- U.S. Food and Drug Administration. (2018). *Food allergen labeling and consumer protection act of 2004 (FALCPA)*. <https://www.fda.gov/food/food-allergens/gluten-free-guidance-documents-regulatory-information/food-allergen-labeling-and-consumer-protection-act-2004-falcpa>

## For More Information

- Centers for Disease Control and Prevention  
<https://www.cdc.gov/healthyschools/foodallergies/index.htm>
- Food Allergy Research & Education  
<https://www.foodallergy.org>
- Institute of Child Nutrition  
<https://www.theicn.org/foodsafety>
- U.S. Food and Drug Administration  
<https://www.fda.gov/food/food-labeling-nutrition/food-allergies>

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<https://www.fns.usda.gov/cr/fns-nondiscrimination-statement>

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