

Child Care Center Food Allergy Fact Sheet

TREE NUT ALLERGY

What Is Tree Nut Allergy?

Tree nut allergy is a potentially life-threatening immune system reaction to the proteins in tree nuts, such as almonds, pistachios, and walnuts. A child with an allergy to one type of tree nut is often allergic to other types. They are also more likely to be allergic to peanuts because their proteins are similar. Tree nut allergy is usually lifelong.



Avoiding Tree Nuts

A child with a tree nut allergy cannot eat tree nuts. Tree nuts are often processed in the same facility as other food products. As a result, *cross-contact* can occur. Cross-contact is when one food allergen comes into contact with another food, transferring the allergens to the new food. A product that is labeled as being produced in a facility with tree nuts should not be consumed by an individual with a tree nut allergy. Tree nuts can also be found in household products, such as lotions and soaps.

If you have a child with a tree nut allergy in your care, you need to be aware of foods and products that may contain tree nuts 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 tree nuts, tree nut-based products, and dishes, foods, and products that may contain tree nuts. It is important to read all food labels to check for tree nuts and products produced in a facility with tree nuts.

Tree Nuts

- Almonds
- Beechnuts
- Brazil nuts
- Butternuts
- Candlenuts (kukui)
- Cashews
- Chestnuts
- Chinquapin (chinkapin)
- Coconut*
- Ginkgo nuts
- Hazelnuts (filberts/cobnuts)
- Hickory nuts
- Lychee (lichee/litchi nuts)
- Macadamia nuts
- Nangai nuts
- Nut pieces
- Pecans
- Pili nuts
- Pine nuts (pignolia/piñon/pinyon nuts)
- Pistachios
- Shea nuts
- Walnuts

*Coconut is a botanical fruit that can be tolerated by many people with tree nut allergies.

Tree Nut-Based Products

- Artificial nuts and flavoring
- Gianduja (a chocolate-hazelnut spread)
- Mandelonas (peanuts soaked in almond flavoring)
- Marzipan (an almond confection)
- Natural nut extracts and flavorings
- Nougat (a roasted nut confection)
- Nut butters (such as cashew butter)
- Nut distillates/alcoholic extracts
- Nut meal/flour
- Nut meat
- Nut milk (such as almond milk, cashew milk)
- Nut oils (such as walnut oil)
- Nut paste (such as almond paste)
- Praline (a boiled nut confection)
- Walnut/black walnut hull extract (flavoring)

Dishes, Foods, And Products That May Contain Tree Nuts

- Baked goods
- Breading
- Breakfast cereals
- Candies, candy bars, chocolates
- Cereal bars
- Chili/hot sauce
- Energy bars
- Flavored coffees and creamers
- Flavoring syrups
- Gluten-free products
- Granola bars
- Honey
- Marinades
- Mole sauce
- Mortadella
- Nut-based milks
- Pancakes
- Pasta
- Pesto
- Pie crust
- Recipes that replace all-purpose flour
- Salads and salad dressings
- Spaghetti sauce
- Trail mix
- Vegan cheeses
- Vegan meats
- Vegan spreads
- Veggie burgers
- Waffles

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 **“Almonds”**
- 2) Providing the common or usual name of an allergen in parentheses after a lesser-known name of an allergenic ingredient **“Almond Milk (Filtered Water, Almonds)”**
- 3) Using a “Contains” statement following or next to the ingredient list **“Contains Almonds”**

FALCPA also requires that when fish, crustacean shellfish, or tree nut(s) are present in a product, the specific species of fish or crustacean shellfish or type of nut must be declared. In regards to tree nuts, this means that name of the specific type of tree nut (for example, almond, walnut, pecan) is used on the label.

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 tree nuts.”

“Manufactured on equipment that also processes tree nuts.”



Foods with an advisory statement should be avoided as the product may contain a trace amount of a particular allergen due to cross-contact. However, 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 a breakfast cereal. Notice how tree nut and wheat allergens 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: Corn, Whole Grain Wheat, Sugar, Whole Grain Rolled Oats, **Almonds**, Rice, Canola Oil, **Wheat Flour**, Malted Barley Flour, Corn Syrup, Salt, Molasses, Honey, Caramel Color, Barley Malt Extract, Cinnamon, Natural and Artificial Flavor, Annatto Extract (color). BHT added to preserve freshness.

Contains: Wheat and Almonds.

*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.

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.

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.

When planning a menu for a child with a tree nut allergy, consider your current menu items to determine if you can create a reimbursable meal or snack free of tree nuts. 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 tree nuts:

| Menu Items & Condiments That May Contain Tree Nuts* | Possible Substitutes*† |
|--|--|
| Bread, bagels, biscuits, muffins, and other bread products | Bread products without tree nuts |
| Breakfast cereals | Breakfast cereals without tree nuts |
| Mixed dishes containing tree nuts | Mixed dishes without tree nuts |
| Tree nut butters (such as almond butter and cashew nut butter) | Peanut butter, sesame seed butter, soy nut butter, sunflower seed butter |

*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 tree nut.

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

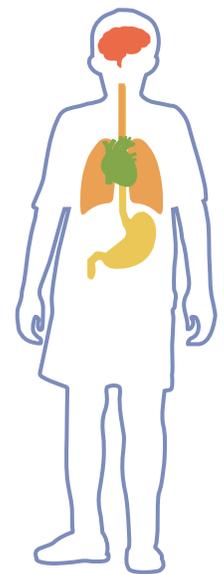
| Body System | Symptoms |
|----------------------------|--|
| Skin | Hives, swelling (face, lips, tongue), itching, warmth, redness |
| Respiratory (breathing) | Coughing, wheezing, shortness of breath, chest pain or tightness, throat tightness, trouble swallowing, hoarse voice, nasal congestion, or 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 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
- Food Allergy Canada. (n.d.). *Reaction signs and symptoms*. <https://foodallergycanada.ca/food-allergy-basics/preventing-and-treating-allergic-reactions/reaction-signs-and-symptoms/>
- Food Allergy Research & Education. (n.d.). *Tree nut allergy*. <https://www.foodallergy.org/living-food-allergies/food-allergy-essentials/common-allergens/tree-nut>
- Food Allergy Research & Education. (2021, April 23). *With the stroke of President Biden's pen, FASTER Act for sesame labeling becomes law*. <https://www.foodallergy.org/media-room/stroke-president-bidens-pen-faster-act-sesame-labeling-becomes-law>
- Kids With Food Allergies. (n.d.). *Tree nut allergy*. <https://www.kidswithfoodallergies.org/tree-nut-allergy.aspx>
- Simons, F. E. R., & Sampson, H. A. (2015). Anaphylaxis: Unique aspects of clinical diagnosis and management in infants (birth to age 2 years). *Journal of Allergy and Clinical Immunology*, 135(5), 1125–1131. <https://doi.org/10.1016/j.jaci.2014.09.014>
- U.S. Department of Agriculture, Food and Nutrition Service. (2017, June 22). *Modifications to accommodate disabilities in CACFP and SFSP*. <https://www.fns.usda.gov/modifications-accommodate-disabilities-cacfp-and-sfsp>
- U.S. Food and Drug Administration. (2018). *Food allergen labeling and consumer protection act of 2004 (FALCPA)*. <https://www.fda.gov/food/food-allergensgluten-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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