

Food allergies can be life threatening. Every day about 10,000 students come through our doors, and most will eat at least one meal while at school. We pay a lot of attention to reducing the risk of accidental exposure to foods that might harm some of them, and also to being prepared if a student does have an allergic reaction while at school.

These allergies are very common. The U.S. Food & Drug Administration says up to 6 percent of young children have food allergies, with the most common ones being eggs, milk, peanuts, soy and wheat. According to the Mayo Clinic, peanut allergies alone affect about 1.5 million people and cause 80 percent of the fatal or near-fatal allergic reactions every year. And with the peanut butter and jelly sandwich still a common item in many lunch boxes, the potential for unintended exposure is always present.

Our school nurses work closely with families to make sure we know about a child's allergies. Then we include administrators, teachers and our kitchen managers in developing a prevention plan that accommodates the child's needs not only in the cafeteria, but also the classroom, on the school bus, in a latch-key program, on field trips...all the places where a child might consume or be exposed to foods that are potentially harmful.

Much of this information is contained in a Food Allergy Action Plan document that is prepared for each child with food allergies. It includes that child's specific allergies, symptoms, medications, related medical conditions, emergency phone numbers, physicians' phone numbers...and for our youngest students, it often includes their current picture.

We ask parents to be proactive in educating their child about self-managing his or her food allergy. Most, of course, are already doing this. That includes teaching children which foods are safe and unsafe for them, strategies for avoiding exposure to unsafe foods, symptoms of allergic reactions, and maybe most important, how to tell an adult that they may be having an allergy-related problem.

It's important that all of our employees who interact with the student on a regular basis understand the child's food allergy, can recognize symptoms, know what to do in an emergency, and work with other school staff to eliminate the use of food allergens in the student's meals, arts and crafts projects, and incentives, for example, a pizza party given to a class for having the best behavior.

We make sure that medicines are appropriately stored, which means they have to be both secure and still be easily accessible to designated school personnel. We also ensure that there is always a staff member available who is trained to administer medications during the school day, regardless of the time or location. Epinephrine is a common medication used to treat an allergic reaction, and many of our older students are permitted to carry with them their own EpiPens.

As you can see, a lot of time and attention goes into this area of concern. We have to be especially careful during what we call transition periods, like the beginning of the school

year when students have moved on to a new school. We've put in place procedures to make sure we have information about each student with food allergies before they even begin attending school. Helping students with food allergies is just one part of keeping our children safe, and their safety will always be our highest priority.

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