

If your child has had a severe allergic reaction, contact the Allergy Clinic as soon as possible for more advice.

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Visit our website www.royalberkshire.nhs.uk

This document can be made available in other languages and formats upon request.

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Royal Berkshire
NHS Foundation Trust

Patient's hospital label

Allergy to: _____

Strict avoidance of: _____

Doctor's name: _____

Doctor's signature: _____

Food allergy action plan for children at low risk of severe allergic reactions

Important information for
families and health workers

Emergency contact details:

Parent or guardian: _____

Telephone no: _____

Parent's signature: _____

A mild allergic reaction – what to look out for:

Eyes:	itchy, runny, swollen
Nose:	itchy, runny, congested, sneezing
Mouth:	itchy or swollen lips or mouth
Skin:	hives/nettle rash, itchy rash, redness, swelling of the face or other parts of the body
Gut:	nausea, stomach cramps, vomiting or diarrhoea

Action

Give **antihistamine** _____ syrup/tablet.

Then follow the next steps....

Rest

- **No** strenuous exercise of any kind, e.g. football, swimming.
- **No** heavy meals.
- **No** fizzy drinks.

Contact the parent or guardian (see front page).

If the symptoms get worse, follow the steps for severe reaction (on next page).

The severity of symptoms can change quickly so

Do not leave the child alone.

A severe allergic reaction – what to look out for:

Airway:	tightness/lump in the throat, hoarse voice, hacking cough
Breathing:	short of breath, cough, unable to speak full sentences, noisy breathing, wheezing
Circulation:	feeling faint, weakness or floppiness, glazed expression, unconscious
Deterioration:	things getting steadily worse

Action

If the child is conscious and having breathing difficulties, help them to sit up.

If they are faint or floppy, they are better off lying flat with their legs raised up.

Dial 999 for the ambulance.

The caller should tell the emergency helpline operator:

- where to find the child having the allergic reaction
- that the child is having a severe allergic reaction known as “anaphylaxis”
- the name and age of the child.

If there are problems with breathing and the child uses an inhaler, give up to 10 puffs of salbutamol (Ventolin®) or terbutaline (Bricanyl®) with a spacer.

Contact the parent or guardian (see front page).

On arrival, the paramedics may consider giving intramuscular adrenaline and the ambulance should take the child to the nearest Emergency Department (ED) for at least 4 hours observation. ED staff may consider corticosteroids to prevent a late phase reaction.