

## PERSONAL INFORMATION FOR A CHILD

|                   |             |
|-------------------|-------------|
| Child's Full Name | Child's Age |
|-------------------|-------------|

### Parents Contact Information

|        |                      |                        |                      |
|--------|----------------------|------------------------|----------------------|
| Father | Home Phone<br>(    ) | Office Phone<br>(    ) | Cell Phone<br>(    ) |
|--------|----------------------|------------------------|----------------------|

|         |
|---------|
| Address |
|---------|

|        |                      |                        |                      |
|--------|----------------------|------------------------|----------------------|
| Mother | Home Phone<br>(    ) | Office Phone<br>(    ) | Cell Phone<br>(    ) |
|--------|----------------------|------------------------|----------------------|

|         |
|---------|
| Address |
|---------|

### Care Providers

|      |              |
|------|--------------|
| Name | Relationship |
|------|--------------|

|                      |                        |                      |
|----------------------|------------------------|----------------------|
| Home Phone<br>(    ) | Office Phone<br>(    ) | Cell Phone<br>(    ) |
|----------------------|------------------------|----------------------|

|         |
|---------|
| Address |
|---------|

|      |              |
|------|--------------|
| Name | Relationship |
|------|--------------|

|                      |                        |                      |
|----------------------|------------------------|----------------------|
| Home Phone<br>(    ) | Office Phone<br>(    ) | Cell Phone<br>(    ) |
|----------------------|------------------------|----------------------|

|         |
|---------|
| Address |
|---------|

|      |              |
|------|--------------|
| Name | Relationship |
|------|--------------|

|                      |                        |                      |
|----------------------|------------------------|----------------------|
| Home Phone<br>(    ) | Office Phone<br>(    ) | Cell Phone<br>(    ) |
|----------------------|------------------------|----------------------|

|         |
|---------|
| Address |
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|      |              |
|------|--------------|
| Name | Relationship |
|------|--------------|

|                      |                        |                      |
|----------------------|------------------------|----------------------|
| Home Phone<br>(    ) | Office Phone<br>(    ) | Cell Phone<br>(    ) |
|----------------------|------------------------|----------------------|

|         |
|---------|
| Address |
|---------|

### Additional Notes

|  |
|--|
|  |
|  |
|  |
|  |

| Current Medical Information for a Child |                          |             |                         |
|---|--------------------------|-------------|-------------------------|
| Child's Name                            |                          | Middle Name |                         |
| Social Insurance Number                 | Date of Birth            | DD MM YYYY  | Sex<br>M F              |
| Health Card Number                      | Birth Certificate Number |             |                         |
| MedicAlert File Number                  | Hospital Patient Number  |             |                         |
| Health Care Provider Contacts           |                          |             |                         |
| Pediatrician                            | Office Phone<br>( )      |             |                         |
| Allergist                               | Office Phone<br>( )      |             |                         |
| Pharmacist                              | Office Phone<br>( )      |             |                         |
| Medical Conditions                      |                          |             |                         |
| 1.                                      | 2.                       | 3.          |                         |
| 4.                                      | 5.                       | 6.          |                         |
| ALLERGIES                               |                          |             |                         |
| 1.                                      | 2.                       | 3.          |                         |
| 4.                                      | 5.                       | 6.          |                         |
| 7.                                      | 8.                       | 9.          |                         |
| 10.                                     | 11.                      | 12.         |                         |
| Current Medication Regimen              |                          |             |                         |
| Medication                              | Dosage                   | Frequency   | Condition/Special Notes |
|   |                          |             |                         |
|   |                          |             |                         |
|   |                          |             |                         |
|   |                          |             |                         |
|   |                          |             |                         |
|   |                          |             |                         |
|   |                          |             |                         |

## ANAPHYLAXIS

### What is Anaphylaxis?

Anaphylaxis is a severe life threatening allergic reaction. Usual triggers are foods, insect stings, medications, or latex. More than one body system is affected. Exercise is a rare trigger.

### Symptoms may include:

|                | <i>Outside the Body</i>  | <i>Inside the Body</i>   |
|----------------|--|--|
| <b>Face</b>    | Redness, itchy eyes/nose, swelling of eyes, runny nose, sneezing | Swelling of lips and tongue, itchy mouth/tongue  |
| <b>Skin</b>    | Itching, redness, hives, swelling                                |  |
| <b>Throat</b>  |  | Itching, tightness, hoarse voice, hacking cough, trouble swallowing, trouble speaking, choking |
| <b>Lungs</b>   |  | Trouble breathing, shortness of breath, repeating cough, wheezing                              |
| <b>Stomach</b> |  | Vomiting, nausea, stomach pain, diarrhea   |
| <b>General</b> |  | Dizzy, unsteady, drowsy, sense of doom, feeling faint or fainting                              |

### If you are at risk for Anaphylaxis:

1. Avoid your triggers.
2. Carry an epinephrine auto-injector all the time (Epi-pen or Twinject)
3. Wear a MedicAlert bracelet at all times.

### When to give Epinephrine?

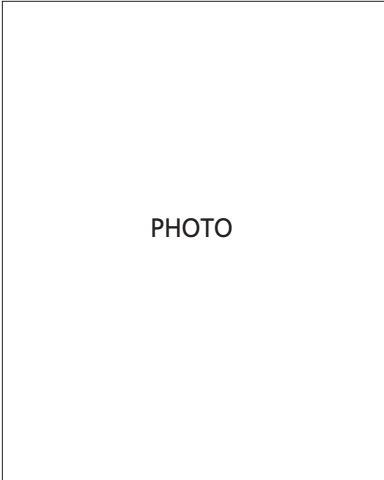
- General symptoms
- Severe outside symptoms
- **Any inside symptoms**
- If in doubt, give epinephrine

### What to do:

- Give epinephrine (adrenaline injection immediately).
- Lie person on his/her side.
- Call 911 and tell them someone is having a life-threatening allergic reaction.
- Go to the nearest hospital immediately even if symptoms subside.
- If reaction continues or worsens, give a second dose in 10-15 minutes.

# Anaphylaxis Emergency Plan: \_\_\_\_\_ (name)

## This person has a potentially life-threatening allergy (anaphylaxis) to:



(Check the appropriate boxes.)

- |                                    |  |
|------------------------------------|--|
| <input type="checkbox"/> Peanut    | <input type="checkbox"/> Other: _____      |
| <input type="checkbox"/> Tree nuts | <input type="checkbox"/> Insect stings     |
| <input type="checkbox"/> Egg       | <input type="checkbox"/> Latex             |
| <input type="checkbox"/> Milk      | <input type="checkbox"/> Medication: _____ |

**Food:** The key to preventing an anaphylactic emergency is absolute avoidance of the allergen. People with food allergies should not share food or eat unmarked / bulk foods or products with a "may contain" warning.

**Epinephrine Auto-Injector:** Expiry Date: \_\_\_\_\_ / \_\_\_\_\_

- Dosage:**  EpiPen® Jr 0.15 mg     EpiPen® 0.30 mg  
 Twinject™ 0.15 mg     Twinject™ 0.30 mg

**Location of Auto-Injector(s):** \_\_\_\_\_

- Asthmatic:** Person is at greater risk. If person is having a reaction and has difficulty breathing, give epinephrine auto-injector before asthma medication.

## A person having an anaphylactic reaction might have ANY of these signs and symptoms:

- **Skin:** hives, swelling, itching, warmth, redness, rash
- **Respiratory (breathing):** wheezing, shortness of breath, throat tightness, cough, hoarse voice, chest pain/tightness, nasal congestion or hay fever-like symptoms (runny itchy nose and watery eyes, sneezing), trouble swallowing
- **Gastrointestinal (stomach):** nausea, pain/cramps, vomiting, diarrhea
- **Cardiovascular (heart):** pale/blue colour, weak pulse, passing out, dizzy/lightheaded, shock
- **Other:** anxiety, feeling of "impending doom", headache

**Early recognition of symptoms and immediate treatment could save a person's life.**

## Act quickly. The first signs of a reaction can be mild, but symptoms can get worse very quickly.

1. **Give epinephrine auto-injector** (e.g. EpiPen® or Twinject™) at the first sign of a reaction occurring in conjunction with a known or suspected contact with allergen. Give a second dose in 10 to 15 minutes or sooner **IF** the reaction continues or worsens. (See second page for instructions.)
2. **Call 911.** Tell them someone is having a life-threatening allergic reaction. Ask them to send an ambulance immediately.
3. **Go to the nearest hospital,** even if symptoms are mild or have stopped. Stay in the hospital for an appropriate period of observation, generally 4 hours, but at the discretion of the ER physician. The reaction could come back.
4. **Call contact person.**

### Emergency Contact Information

| Name | Relationship | Home Phone | Work Phone | Cell Phone |
|------|--------------|------------|------------|------------|
|      |              |            |            |            |
|      |              |            |            |            |
|      |              |            |            |            |

The undersigned patient, parent, or guardian authorizes any adult to administer epinephrine to the above-named person in the event of an anaphylactic reaction, as described above. This protocol has been recommended by the patient's physician.

\_\_\_\_\_  
Patient/Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Physician Signature

\_\_\_\_\_  
Date



# How to use the EpiPen® Epinephrine Auto-Injector

# Comment utiliser l'auto-injecteur d'adrénaline EpiPen®



1.



Grasp unit with black tip pointing downward and pull off grey activator cap.

---

Tenir l'unité avec le bout noir pointant vers le bas et enlever le bouchon activateur gris.

---

2.



Jab black tip firmly into outer thigh so it "clicks" AND HOLD on thigh approximately 10 seconds.

---

Enfoncer brusquement le bout noir dans la cuisse jusqu'à un « déclic » ET MAINTENIR l'unité dans cette position pendant environ 10 secondes.

---

3.



Seek medical attention.

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Obtenir des soins médicaux.

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AVAILABLE THROUGH YOUR PHARMACIST  
DISPONIBLE CHEZ VOTRE PHARMACIEN

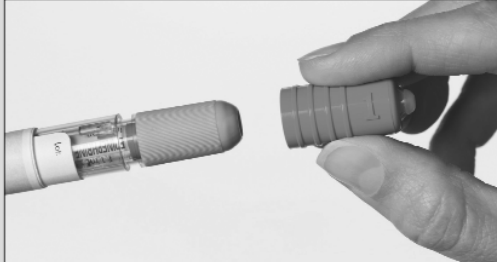


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[www.epipen.ca](http://www.epipen.ca)

Twinject: Easy to use, easy to carry your back-up dose.



### FIRST DOSE: AUTO-INJECTED



**ONE**  
PULL off GREEN end cap to see a GREY cap.  
**Never put thumb, finger or hand over the GREY cap.**

**TWO**  
PULL off RED end cap.

Numbered caps are for memory purposes only, and order is not important.



**INJECT**  
Place GREY cap against mid-outer thigh. Press down firmly. Hold against thigh while slowly counting to ten. Injects through clothes. Remove auto-injector.

**PREPARE FOR SECOND DOSE.**

**SEEK EMERGENCY MEDICAL HELP IMMEDIATELY.**

### SECOND DOSE, IF NEEDED: MANUAL



Unscrew and remove GREY cap. **Beware of exposed needle.** Holding BLUE hub at needle base, remove syringe from barrel.



Slide collar off plunger. **PAUSE. If symptoms have not improved in about 10 minutes since first dose, inject second dose.**



Insert needle into mid-thigh (at least 5 cm/2 in from first injection site) and push plunger down completely.

**SEEK EMERGENCY MEDICAL HELP IMMEDIATELY.**

Twinject 0.3 mg Auto-Injector (0.3 mL Epinephrine Injection, USP, 1:1000) and Twinject 0.15 mg Auto-Injector (0.15 mL Epinephrine Injection, USP, 1:1000) are indicated for emergency treatment of severe allergic reactions (Type 1) including anaphylaxis to: stinging insects, biting insects, allergen immunotherapy, foods, latex, other allergens, and drugs. (Please see Product Monograph for full indication.) Epinephrine can also be used in the treatment of anaphylaxis of unknown cause, exercise-induced anaphylaxis, or anaphylactoid reactions.

Epinephrine should be used with caution in patients with cardiac arrhythmias, coronary artery or organic heart disease, hypertension, or in patients who are on medications that may sensitize the heart to arrhythmias. In patients with coronary insufficiency or ischemic heart disease, epinephrine may precipitate or aggravate angina pectoris as well as produce potentially fatal ventricular arrhythmias. Epinephrine use should be avoided in patients with organic brain damage. Administer with caution to elderly or hyperthyroid individuals, pregnant women, individuals with cardiovascular disease or diabetes.

Adverse reactions include transient, moderate anxiety; feelings of over stimulation; apprehensiveness; restlessness; tremor; weakness; shakiness; dizziness; sweating; an increase in pulse rate; the sensation of a more forceful heartbeat; palpitations; pallor; nausea and vomiting; headache, and/or respiratory difficulties.

**More than 2 sequential doses of epinephrine should only be administered under direct medical supervision.**



P0508032E



Printed in Canada

**Twinject**<sup>TM</sup>  
auto-injector  
(epinephrine Injection USP 1:1000)

Twice the confidence.



## How a Child Might Describe a Reaction

Children have unique ways of describing their experiences and perceptions, and allergic reactions are no exception. Precious time is lost when adults do not immediately recognize that a reaction is occurring or don't understand what a child is telling them.

Some children, especially very young ones, put their hands in their mouths or pull or scratch at their tongues in response to a reaction. Also, children's voices may change (e.g., become hoarse or squeaky), and they may slur their words.

The following are examples of the words a child might use to describe a reaction:

- "This food's too spicy."
- "My tongue is hot [or burning]."
- "It feels like something's poking my tongue."
- "My tongue [or mouth] is tingling [or burning]."
- "My tongue [or mouth] itches."
- "It [my tongue] feels like there is hair on it."
- "My mouth feels funny."
- "There's a frog in my throat."
- "There's something stuck in my throat."
- "My tongue feels full [or heavy]."
- "My lips feel tight."
- "It feels like there are bugs in there." (to describe itchy ears)
- "It [my throat] feels thick."
- "It feels like a bump is on the back of my tongue [throat]."

If you suspect that your child is having an allergic reaction, follow your doctor's instructions.

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# What to do when your child is having an allergic reaction

## STEP 1

Check to see if there are any outside symptoms on the body such as hives on the face, chest, and neck area, itchy eyes/nose, sneezing, or a runny nose.

- If **ONLY** outside symptoms are present, give 1 teaspoon Reactine and monitor child closely for the next ten minutes.
- If there are any inside symptoms in addition to the outside symptoms **give epi-pen and call 911.**

Symptoms inside the body may include:

*Swelling of face, lips, tongue, or eyelids*  
*Blue lips (sudden drop in blood pressure)*  
*Difficulty breathing/wheezing*  
*Fainting, drowsy, unsteady*  
*Vomiting, stomach pain, diarrhea*  
*Coughing, hoarse voice*  
*Trouble speaking/swallowing*

## STEP 2

If outside symptoms are not getting any worse, continue to monitor until symptoms disappear.

## STEP 3

If outside symptoms are spreading, becoming more intense, or child develops any other symptoms **give epi-pen and call 911.** If the child has no inside symptoms continue to monitor.

## STEP 4

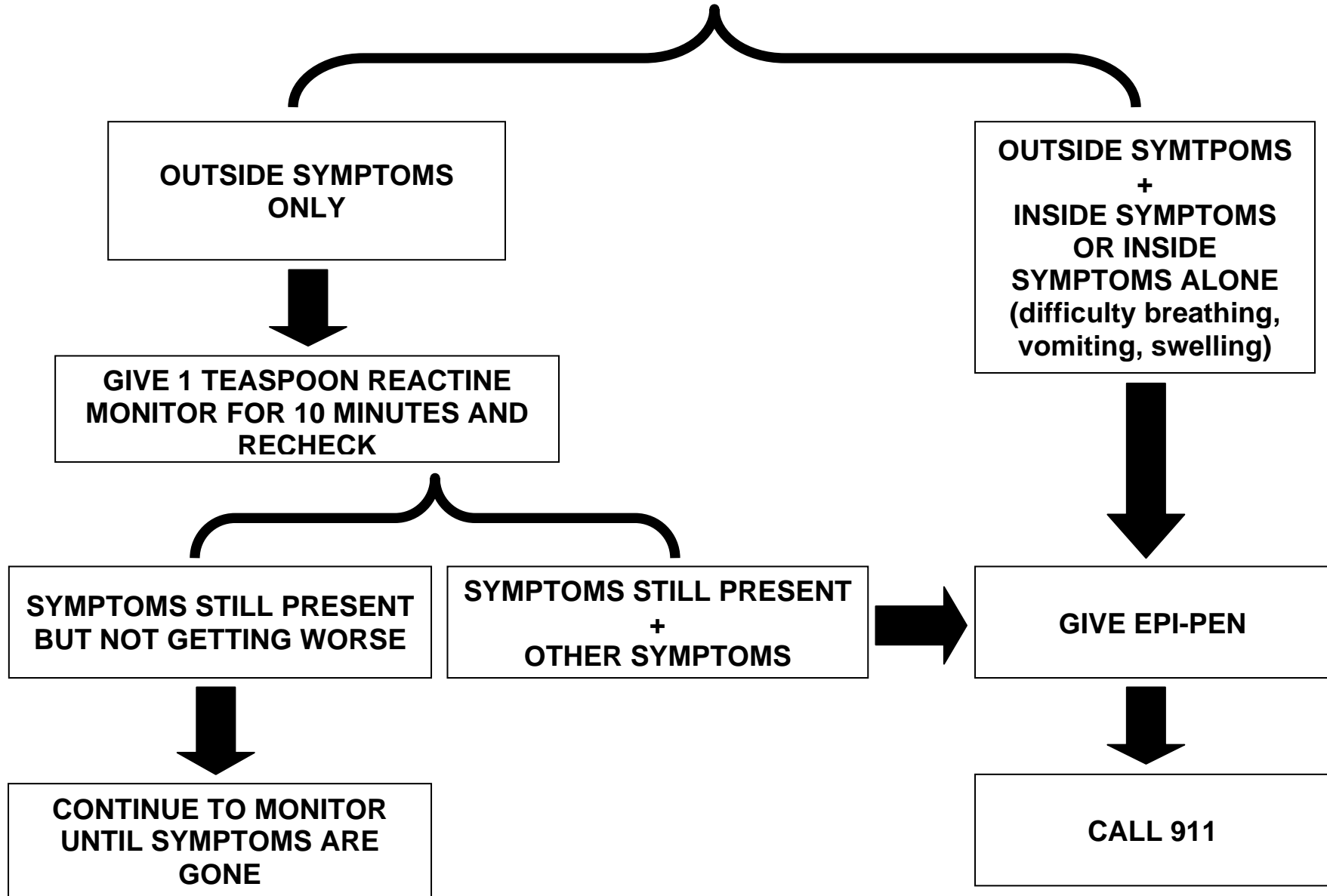
If child starts to cry or complain of pain by touching the affected area, typically the stomach or face, or if child vomits and symptoms are still present, **give epi-pen and call 911.**

## STEP 5

Upon administering the epi-pen, child must be taken to the emergency for proper medical evaluation or call 911.

**WARNING: Not all children react in the same way. In fact, some children may have a different reaction each time they are exposed to the same allergen. This guide is not meant to replace your physician's advice. Feel free to adjust it so that it is more in line with how your child reacts to the food he/she is allergic to.**

# ALLERGIC REACTION SYMPTOMS FLOWCHART



**WARNING:** Not all children react in the same way. In fact, some children may have a different reaction each time they are exposed to the same allergen. This guide is not meant to replace your physician's advice. Feel free to adjust it so that it is more in line with how your child reacts to the food he/she is allergic to.

## WHAT TO SAY WHEN YOU CALL 911

1. Act as quickly as possible at the first sign of symptoms of a reaction.
2. Give child a shot of epinephrine and a dose of liquid antihistamine (Benadryl or Reactine).
3. Call 911 and say the following:

*Hello, this is a medical emergency.*

*My name is \_\_\_\_\_, at (address). I have a (age of child) year old child with severe food allergies who's experiencing an anaphylactic allergic reaction to (type of food). I have already given her a shot of epinephrine and some liquid antihistamine. Please send your people as quickly as possible, and **tell them to bring more epinephrine with them**. The child may require an additional dose of epinephrine.*

4. Stay as calm as possible for the child's sake. If the child has a special toy, doll, or stuffed animal, make sure it's available for comfort.
5. When the paramedics arrive let them know if the child is wearing a MedicAlert bracelet and have all the information that they may require close by, including notes on any other symptoms you may have noticed while they were on their way.

# Allergic Reaction Review

CHILD'S NAME \_\_\_\_\_

CAREPROVIDER'S NAME \_\_\_\_\_

Date & Time when you first noticed symptoms? \_\_\_\_\_

What was the first symptom you noticed? \_\_\_\_\_

\_\_\_\_\_

What other symptoms, if any, did you notice? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What was the child doing when he/she first experienced symptoms? \_\_\_\_\_

\_\_\_\_\_

What had the child eaten just prior to experiencing symptoms? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Did the child come in contact with any food that may have contained allergens? YES  NO

If yes, what food item do you think the child was exposed to? \_\_\_\_\_

Was epinephrine administered? YES  NO

What other medication, if any, did you administer and what was the dosage? \_\_\_\_\_

Other notes that might be helpful to the physician or allergist? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## **MILK AND MILK DERIVATIVES**

Ammonium/calcium/magnesium/potassium/sodium caseinate

Casein/caseinate/rennet casein

Curds

Delactosed/demineralized whey

Dry milk/milk/sour cream/sour milk solids

Hydrolyzed casein, hydrolyzed milk protein

Lactalbumin/lactalbumin phosphate

Lactate/lactose

Lactoferrin

Lactoglobulin

Milk derivative/fat/protein

Modified milk ingredients

Opta™, Simplesse® (fat replacers)

Whey, whey protein concentrate

### **Possible sources of milk**

Artificial butter, butter fat/flavour/oil, ghee, margarine

Baked goods and baking mixes e.g., breads, cakes, doughnuts

Brown sugar, high-protein flour

Buttermilk, cream, dips, salad dressings, sour cream, spreads

Caramel colouring/flavouring

Casein in wax, e.g., fresh fruits and vegetables

Casseroles, frozen prepared foods

Cereals, cookies, crackers

Cheese, cheese curds, cottage/soy cheese

Chocolate

Desserts, e.g., custard, frozen yogurt, ice cream, pudding, sherbet, yogurt

Egg/fat substitutes

Flavoured coffee, coffee whitener, non-dairy creamer

Glazes, nougat

Gravy, sauces

Kefir (milk drink), kumiss (fermented milk drink), malt drink mixes

Meats, e.g., canned tuna, deli/processed meats, hot dogs, pâtés, sausages

Pizza

Potatoes, e.g., instant/mashed/scalloped potatoes, seasoned french fries/potato chips

Seasonings

Snack foods, e.g., candy, fruit bars, granola bars

Soups, soup mixes

Tofu

Wax coated fruits and vegetables

### **Non-food sources of milk**

Cosmetics

Medications

Pet food

### **Ingredients that do not contain milk protein**

Calcium/sodium lactate

Calcium/sodium stearoyl lactylate

Cocoa butter

Cream of tartar

Oleoresin

## EGG AND EGG DERIVATIVES

Note: Avoid all food and products that contain egg in the ingredient list, e.g., powdered egg. The terms "ovo" and "albumin" mean the product contains egg.

Albumin/Albumen  
Conalbumin  
Egg substitutes, e.g., Egg Beaters®  
Globulin  
Livetin  
Lysozyme  
Meringue  
Ovalbumin  
Ovoglobulin  
Ovolactohydrolyze proteins  
Ovomacroglobulin  
Ovomucin, ovomucoid  
Ovotransferrin  
Ovovitellin  
Silico-albuminate  
Simplese®  
Vitellin

### Possible sources of eggs

Alcoholic cocktails/drinks  
Baby food  
Baked goods and baking mixes, e.g., breads, cakes, cookies, doughnuts, muffins, pancakes, pastries, pretzels  
Battered/fried foods  
Confectionary, e.g., candy, chocolate  
Cream-filled pies, e.g. banana, chocolate, coconut  
Creamy dressings, salad dressings, spreads, e.g., mayonnaise, Caesar salad dressing, tartar sauce  
Desserts, e.g., custard, dessert mixes, ice cream, meringue, pudding, sorbet  
Egg/fat substitutes  
Fish mixtures, e.g., surimi (used to make imitation crab/lobster meat)  
Foam/milk topping on coffee  
Homemade root beer, malt drink mixes  
Icing, glazes, e.g., egg wash on baked goods, nougat  
Lecithin  
Meat mixtures, e.g., hamburger, hot dogs, meatballs, meatloaf, salami, etc.  
Orange Julep®, Orange Julius® (orange juice beverages)  
Pasta, e.g., egg noodles  
Quiche, soufflé  
Sauces, e.g., béarnaise, hollandaise, Newburg  
Soups, broths, bouillons

### Non-food sources of eggs

Anesthetic, e.g., Diprivan® (propofol)  
Certain vaccines, e.g., MMR (Measles, Mumps and Rubella)  
Craft materials  
Hair care products  
Medications

## **PEANUT AND PEANUT DERIVATIVES**

Arachide  
Arachis oil  
Beer nuts  
Cacahouète/cacahouette/cacahuète  
Goober nuts, goober peas  
Ground nuts  
Kernels  
Mandelonas, Nu-Nuts™  
Nut meats  
Valencias

### **Possible sources of peanuts**

Almond & hazelnut paste, icing, glazes, marzipan, nougat  
Nut substitutes e.g., re flavoured and reformed peanuts that look like other nuts  
Baked goods, e.g., cakes, cookies, doughnuts, pastries  
Cereals  
Chili  
Desserts, e.g., frozen desserts, frozen yogurts, ice cream, sundae toppings  
Dried salad dressing, soup mix  
Ethnic foods (including sauces and soups), e.g., chili, curries, egg rolls, satays, Szechwan sauce, Thai food  
Gravy  
Hydrolyzed plant protein/vegetable protein (source may be peanut)  
Peanut oil  
Snack foods, e.g., candy, chocolate, dried fruits, energy/granola bars, mixed nuts, popcorn, potato chips, trail mixes  
Vegetarian meat substitutes

### **Non-food sources of peanuts**

Ant baits, bird feed, mouse traps, pet food  
Cosmetics, sun screens  
Craft materials  
Medications, vitamins  
Mushroom growing medium  
Stuffing in toys

## SEAFOOD AND SEAFOOD DERIVATIVES

### *Fish:*

Anchovy, basa, bass, bluefish, bream, carp, catfish (channel cat, mudcat), char, chub, cisco, cod, eel, flounder, grouper, haddock, hake, halibut, herring, mackerel, mahi-mahi, marlin, monkfish (angler fish, lotte), orange roughy, perch, pickerel (dore, walleye), pike, plaice, pollock, pompano, porgy, rockfish, salmon, sardine, shark, smelt, snapper, sole, sturgeon, swordfish, tilapia (St. Peter's fish), trout, tuna (albacore, bonito), turbot, white fish, whiting.

### *Crustaceans:*

Crab, crayfish (crawfish, écrevisse), lobster (langouste, langoustine, coral, tomalley), prawns, shrimp (crevette).

### *Shellfish:*

Abalone, clam, cockle, conch, limpets, mussels, octopus, oysters, periwinkle, quahaugs, scallops, snails (escargot), squid (calamari), whelks.

### **Possible sources of fish, crustaceans and shellfish**

Deli meats, for example, bologna, ham

Dips, spreads, kamaboko (imitation crab/lobster meat)

Ethnic foods, for example, fried rice, paella, spring rolls

Fish mixtures, for example, surimi (used to make imitation crab/lobster meat)

Garnishes, for example, antipasto, caponata (Sicilian relish), caviar, roe (unfertilized fish eggs)

Gelatin, marshmallows

Hot dogs

Pizza toppings

Salad dressings

Sauces, for example, fish, marinara, Nuoc Mâm, steak, Worcestershire

Soups

Spreads, for example, taramasalata (contains salted carp roe)

Sushi

Tarama (salted carp roe)

Wine

### **Non-food sources of fish, crustaceans and shellfish**

Fish food

Lip balm/lip gloss

Pet food

## **SESAME SEEDS AND SESAME DERIVATIVES**

Benne/benne seed/benniseed  
Gingelly/gingelly oil  
Seeds  
Sesamol/sesamolina  
Sesamum indicum  
Sim sim  
Tahina  
Tahini  
Til  
Vegetable oil

### **Possible sources of sesame seeds**

Aqua Libra® (herbal drink)  
Baked goods, e.g., breads, cookies, pastries, bagels, buns  
Bread crumbs, bread sticks, cereals, crackers, melba toast, muesli  
Dips, pâtés, spreads, e.g., hummus, chutney  
Dressings, gravies, marinades, salads, sauces, soups  
Ethnic foods, e.g., flavoured rice, noodles, shish kebabs, stews, stir fry  
Flavour(ing)  
Herbs, seasoning, spice  
Margarine  
Processed meats, sausages  
Risotto (rice dish)  
Sesame oil, sesame salt (gomasio)  
Snack foods, e.g., bagel/pita chips, candy, granola bars, halvah, pretzels, rice cakes, sesame snap bars  
Tahini  
Tempeh  
Vegetarian burgers

### **Non-food sources of sesame seeds**

Adhesive bandages  
Cosmetics, hair care products, perfumes, soaps, sun screens  
Drugs  
Fungicides, insecticides  
Lubricants, ointments, topical oils  
Pet food  
Sesame meal, e.g., poultry and livestock feed

## SOY AND SOY DERIVATIVES

Edamame  
Kinako  
Kouridofu  
Miso  
Mono-diglyceride  
Natto  
Nimame  
Okara  
Soya, soja, soybean, soybeans  
Soy protein (isolate/concentrate), vegetable protein  
Tempeh  
Textured soy flour (TSF), textured soy protein (TSP), textured vegetable protein (TVP)  
Tofu (soybean curds)  
Yuba

### **Possible sources of soy**

Baby formulas  
Baked goods and baking mixes, e.g., breads, cookies, cake mixes, doughnuts, pancakes  
Bean sprouts  
Beverage mixes, e.g., hot chocolate, lemonade  
Bread crumbs, cereals, crackers  
Breaded foods, chili, pastas, stews, taco filling, tamales  
Canned tuna/minced hams  
Chewing gum  
Cooking spray, margarine, vegetable shortening, vegetable oil  
Diet drinks, imitation milk  
Dressings, gravies, marinades  
Frozen desserts  
Hydrolyzed plant protein (HPP), hydrolyzed soy protein (HSP), hydrolyzed vegetable protein (HVP)  
Lecithin  
Monosodium glutamate (MSG) (may contain hydrolyzed protein)  
Processed and prepared meats, e.g., beef, deli, pork, poultry  
Sauces, e.g., soy, shoyu, tamari, teriyaki, Worcestershire  
Seafood-based products, fish  
Seasoning, spices  
Simulated fish and meat products, e.g., surimi (imitation crab/lobster meat), simulated bacon bits  
Snack foods, e.g., candy, chocolate, energy bars, fudge, popcorn, potato chips  
Soups, broths, soup mixes/stock  
Spreads, dips, mayonnaise, peanut butter  
Thickening agents  
Vegetarian dishes

### **Non-food sources of soy**

Cosmetics, soaps  
Craft materials  
Glycerine  
Milk substitutes for young animals  
Pet food  
Vitamins

## **SULPHITES AND SULPHITE DERIVATIVES**

E 220, E 221, E 222, E 223, E 224, E 225, E 226, E 227, E 228 (European names)

Potassium bisulphite/metabisulphite

Sodium bisulphite/dithionite/metabisulphite/sulphite

Sulfur dioxide

Sulphiting agents

Sulphurous acid

### **Possible sources of sulphites**

Alcoholic/non-alcoholic beer, cider, wine

Baked goods, e.g., breads, cookies, pastries, waffles

Bottled lemon and lime juice/concentrate

Canned/frozen fruits and vegetables, e.g., mushrooms, sliced apples, olives, peas, peppers, pickles, pickled onions, tomatoes

Cereal, cornmeal, cornstarch, crackers, muesli

Condiments, e.g., coleslaw, horseradish, ketchup, mustard, pickles, relish, sauerkraut

Deli meat, hot dogs, sausages

Dressings, gravies, guacamole, sauces, soups, soup mixes

Dried fruits/vegetables, e.g., apples, apricots, coconut, mincemeat, papaya, peaches, pears, pineapple, raisins, sun dried tomatoes

Dried herbs, spices, tea

Fish, including crustaceans and shellfish, e.g., shrimp (fresh/frozen)

Fresh grapes, lettuce

Fruit filling, fruit syrup, gelatin, jams, jellies, marmalade, molasses, pectin

Fruit/vegetable juices, e.g., coconut, grape, sparkling grape, white grape

Glazed/glacéed fruits, e.g., apples, grapes, maraschino cherries

Potatoes, e.g., frozen french fries, dehydrated, mashed, peeled, pre-cut

Snack foods, e.g., candy, chocolate/fruit bars, tortilla/potato chips, soft drinks, trail mix

Soy products

Starches, e.g., corn, potato, sugar beet; noodles, rice mixes

Sugar syrups, e.g., glucose, glucose solids, syrup dextrose

Tomato paste/pulp/puree

Vinegar, wine vinegar

### **Non-food sources of sulphites**

Bottle sanitizing solution for home brewing

## TREE NUTS AND TREE NUT DERIVATIVES

Anacardium nuts

Calisson (a marzipan-like candy made from almonds)

Marzipan (almond paste)

Nut meats

Pinon

Queensland nut (macadamia)

### Possible sources of tree nuts

Baked goods, e.g., cakes, cereal bars, cookies, doughnuts, energy/granola bars, muffins, pastries

Baking mixes, cereals, crackers, muesli

Dressings, gravies

Gianduja, e.g., chocolate and chopped nuts mixture found in premium or imported chocolate and ice cream

Ice cream, frozen desserts, frozen yogurts, sundae toppings, pralines

Main course dishes, e.g., almond chicken, Asian food such as pad thai and satay, chili, trout amandine

Natural flavourings and extracts, e.g., pure almond extract

Nut butter, nut/peanut oil

Nut-flavoured coffee/liqueurs, e.g., amaretto, Frangelico®

Salads, e.g., Waldorf salad

Sauces, e.g., barbeque, pesto

Snack foods, e.g., candy, chips, chocolate, popcorn, snack/trail mixes

Spreads, e.g., almond paste, cheese, chocolate nut, nougat, Nutella®, nut paste

Vegetarian dishes

### Non-food sources of tree nuts

Bean bags, kick sacks/hacky sacks

Bird seed

Cosmetics, hair care products, sun screens

Massage oils

Pet food

## WHEAT AND WHEAT DERIVATIVES

Atta  
Bulgur  
Couscous  
Durum  
Einkorn  
Emmer  
Enriched/white/whole wheat flour  
Farina  
Gluten  
Graham flour, high gluten/protein flour  
Kamut  
Seitan  
Semolina  
Spelt (dinkel, farro)  
Triticale (a cross between wheat and rye)  
Triticum aestivum  
Wheat bran/flour/germ/starch

### Possible sources of wheat

Baking powder, flour  
Beer  
Coffee substitutes made from cereal  
Chicken and beef broth (canned/cubed)  
Falafel  
Gelatinized starch, modified starch, modified food starch  
Host (communion/altar bread/wafers)  
Hydrolyzed plant protein  
Ice cream  
Imitation bacon  
Meat, fish and poultry binders and fillers, e.g., deli meats, hot dogs, surimi  
(used to make imitation crab/lobster meat)  
Pie fillings, puddings  
Prepared ketchup, mustard  
Salad dressings  
Sauces, e.g., chutney, soy sauce, tamari sauce  
Seasonings  
Snack foods, e.g., pretzels, candy, chocolate bars

### Non-food sources of wheat

Cosmetics, hair care products  
Medications, vitamins  
Modeling compound e.g., PLAY-DOH®  
Pet food  
Wreath decorations

**Note: These lists are not complete and may change. Food and food products purchased from other countries, through mail-order or the Internet, are not always produced using the same manufacturing and labelling standards as in Canada.**

**The above lists only include the top 8 allergens in Canada. For more information or if you require a list for an allergy that is not listed here please contact Health Canada or visit them at <http://www.hc-sc.gc.ca/fn-an/securit/allerg/fa-aa/index-eng.php>**