National Defence | Défense nationale

National Defence Headquarters
Ottawa, Ontario
K1A 0K2

Quartier général de la Défense nationale
Ottawa, (Ontario)
K1A 0K2

1085-2 (J1)

29 May 2017

CADETS WITH FOOD SENSITIVITIES
OR NON-FOOD RELATED ANAPHYLAXIS

1. Recent events and experience indicate that the previously used parental waiver form "Participation by a Cadet with Food Allergies" regarding cadets with food sensitivities, does not fully meet the medical and legal realities of today's society. Regarding cadets with food sensitivities and other life-threatening allergies, the Canadian Cadet Organizations have adopted the following new forms:

a. Participation of Cadets with Food Sensitivities;

b. Participation of Cadets with Non-Food Related Anaphylaxis;

c. Anaphylaxis Consent Form for the Canadian Cadet Organizations; and

d. Anaphylaxis Emergency Plan.

2. The aim of the new forms is to provide parents and guardians with the necessary information to allow an informed decision to be made about participation in cadet training and activities where exposure to allergens can occur. In addition, these new forms will ensure that Staff member who supervise these cadets are aware of cadets with life-threatening allergies allowing them to react effectively in the event of an emergency.

3. If a cadet has a severe allergic reaction, decisions regarding the cadet's continued participation in any cadet activity are scrupulously made by our medical staff. A cadet who has a severe allergic reaction will be carefully examined by our medical staff and could be returned home if the cadet has been evaluated as unfit to continue their training or activity.

4. Regardless of any previous forms you may have completed, the enclosed new forms, must be completed for a cadet with food-related sensitivities or non-food related anaphylaxis to attend a Cadet Training Centre this summer. Commanding Officers will ensure that the previous forms are destroyed and replaced with these new forms.

5. Our goal is to ensure that as many cadets as possible are able to attend summer training and profit from the activities offered in a safe manner. We have first and foremost, the health and safety of all cadets in mind; it is of prime importance when conducting cadet training and activities.

K.L. Woiden
Brigadier-General
Commander – National Cadet and
Junior Canadian Rangers Support Group

Canada

PARTICIPATION BY A CADET WITH NON-FOOD RELATED ANAPHYLAXIS

INSTRUCTIONS

DEFINITIONS

In this document, the word "parent" refers to all individuals who hold parental authority over the cadet.

COMPLETING THIS FORM

If the cadet has not reached the legal age of consent, this form must be completed by his/her parents.

This form may be completed electronically and then printed or printed and then completed by hand, clearly, in block letters.

Until this form is fully completed and provided to the cadet's supervisor at the cadet's corps/squadron, the cadet may not be authorized to participate in cadet training and activities during which meals are consumed.

IMPORTANT NOTICE

CADETS WITH NON-FOOD RELATED ANAPHYLAXIS

Anaphylaxis is defined as a serious allergic reaction that can be rapid in onset and may cause death. Results of a recent medical condition review conducted by Canadian Armed Forces medical personnel have revealed that the below-named cadet suffers from non-food related anaphylaxis. Non-food related anaphylaxis is referring to anaphylaxis triggered by an allergen other than food. For simplicity purposes, this document will refer to **non-food related anaphylaxis** as **anaphylaxis** from here on. The purpose of this document is to provide the cadet and his/her parents with information regarding anaphylaxis. This information allows an informed decision to be made about participation in cadet training and activities where exposure to allergens can occur. If the named cadet or his/her parent is unsure of the type of allergic reaction the cadet may have, the cadet's physician must be consulted before signing this form. If the cadet also suffers from food-related anaphylaxis, please read and sign the "Participation by Cadet with Food-Related Anaphylaxis" document as well.

Please read the following carefully:

Anaphylactic reactions are caused by a severe response of the body's immune system to certain allergens found in the environment. Non-food related allergens can include insect stings, medications, latex, and exercise in some rare cases. All cadets with anaphylaxis should know to watch for any of the following signs and symptoms of a severe allergic reaction and to seek help immediately if any are encountered: Trouble breathing, speaking or swallowing; rapid heartbeat or loss of consciousness; flushed face, hives, rash, or red and itchy skin; swelling of the eyes, face, lips, throat and/or tongue; anxiousness, distress, faintness, paleness, weakness; or cramps, diarrhea or vomiting.

There are certain factors that increase the risk of having a very severe anaphylactic reaction such as: having both asthma and an anaphylactic allergy, under-utilization and delay in the use of epinephrine auto-injectors, underlying cardiac disease, previous history of an anaphylactic episode, or age (years 0-19).

For those at risk of anaphylaxis, Canadian guidelines recommend that you reduce your risk of having **a severe allergic reaction** by: avoiding the allergic substance, wearing medical identification such as a Medic-Alert bracelet, carrying an epinephrine auto-injector at all times, receiving instruction on a regular basis from your usual health care provider on when and how to use the epinephrine auto-injector, and having an anaphylaxis emergency plan.

It is important for the cadet and his/her parents to be aware that exposure to certain allergens, such as insect stings or latex, can occur during cadet training and activities. The Canadian Armed Forces (CAF) is not equipped nor staffed to offer an allergen-free environment. These limitations apply to exposure during cadet training and activities conducted throughout the year, whether conducted locally or away. The CAF is concerned that for those cadets with anaphylaxis, it may not always be safe to participate in cadet training and activities during which exposure is a risk.

At Section 2, parents of a cadet with anaphylaxis are required to indicate if they consent to their child participating in cadet training and activities during which exposure may occur. If the cadet has an anaphylactic allergy, and consent is given for him/her to participate in cadet training and activities, the attached Anaphylaxis Consent form and Anaphylaxis Emergency Plan must be fully completed and signed. Please note that the Anaphylaxis Emergency Plan must be completed and signed by the cadet's physician. In addition, cadets with anaphylaxis must come equipped with at least 2 epinephrine auto-injectors, and they must know when and how to use them. We also recommend that the cadet wear a medical identification such as a Medic-Alert bracelet.

We are aware that medication-related anaphylactic allergies are easier to avoid than those related to insect stings for instance; As a result, cadets who only have medication-related anaphylaxis do not need to bring 2 epinephrine auto-injectors. However, they do need to sign parts 1 and 3 of the "Anaphylaxis Consent Form for the Cadet Organization" and the "Anaphylaxis Emergency Plan" must be completed and signed by the cadet's physician. We also recommend that the cadet wear a medical identification such as a Medic-Alert bracelet.

We take cadets safety seriously. If a cadet experiences an anaphylactic reaction as a result of exposure to an allergen during a cadet activity, the cadet will be returned to his/her parents' care after their medical needs have been addressed.

If the cadet or his/her parents have any questions related to the participation by a cadet with anaphylaxis, the cadet corps or squadron commanding officer should be contacted.

PROTECTED A (When completed) – PROTÉGÉ A (une fois rempli)

SECTION 1: CADET PERSONAL INFORMATION / SECTION 1 : RENSEIGNEMENTS PERSONNELS SUR LE CADET

Surname – Nom de famille	Given name(s) – Prénom(s)

Rank – Grade	Gender – Sexe	Date of Birth (yyyy-mm-dd) – Date de naissance (aaaa-mm-jj)
	☐ Male – Masculin ☐ Female – Féminin	

Civic Address (No and Street Name) – Adresse municipale (n° et nom de rue)		
City or Town – Ville ou village	Prov / Terr	Postal Code – Code postal

SECTION 2: CONSENT / SECTION 2 : CONSENTEMENT

	Yes / Oui	No / Non
Do you consent to the above-named cadet participating in training and activities during which he/she will have a meal under the conditions described under the heading "Cadets with Non-Food Related Anaphylaxis" / Consentez-vous à ce que le cadet susnommé participe aux cours et activités au cours desquels il/elle prendra un repas dans les conditions décrites à la rubrique « Cadets ayant un risque d'anaphylaxie non alimentaire »	☐	☐

Parent's Name – Nom du parent _____ Signature – Signature _____ Date – Date _____

FOR CADET CORPS/SQUADRON USE ONLY / RÉSERVÉE AU CORPS OU À L'ESCADRON DE CADETS

SECTION 3: FORM VALIDATION / SECTION 3 : VALIDATION DU FORMULAIRE

√ Form completed / Formulaire rempli

√ information entered in Fortress / Information saisie dans Forteresse

Admin O signature – Signature de l'O admin _____ Date – Date _____

PARTICIPATION BY A CADET WITH A FOOD SENSITIVITY

INSTRUCTIONS

DEFINITIONS

In this document, the word "**parent**" refers to all individuals who hold parental authority over the cadet.

COMPLETING THIS FORM

If the cadet has not reached the legal age of consent, this form must be completed by his/her parents.

This form may be completed electronically and then printed or printed and then completed by hand, clearly, in block letters.

Until this form is fully completed and provided to the cadet's supervisor at the cadet's corps/squadron, the cadet may not be authorized to participate in cadet training and activities during which meals are consumed.

IMPORTANT NOTICE

CADETS WITH FOOD SENSITIVITIES

Health Canada's definition of food sensitivities includes food intolerances, food-related chemical sensitivities, and food allergies.

Results of a recent medical condition review conducted by Canadian Armed Forces medical personnel have revealed that the below-named cadet suffers from a food sensitivity. The purpose of this document is to provide the cadet and his/her parents with information regarding food sensitivities and meal conditions during cadet training and activities. This information allows an informed decision to be made about participation in cadet training and activities where meals are provided. If the named cadet and/or his/her parent is unsure of the type of food sensitivity the cadet may have, the cadet's physician must be consulted before signing this form.

Please read the following carefully:

Food intolerances tend to originate in the gastrointestinal system and can present with symptoms such as intestinal gas, abdominal pain or diarrhea. However, they do not involve the immune system like food allergies do. Instead, they are usually caused by an inability to digest or absorb certain components of foods. For example, individuals who are lactose intolerant lack an enzyme called lactase, which is needed to digest lactose (a naturally occurring sugar in milk.) It is important to note that this is very different from a milk allergy, which is a food allergy involving the immune system as a result of the protein in cow's milk.

Chemical sensitivities vary in presentation and happen when a person has an adverse reaction to a chemical that naturally occurs in food or is added to it. For instance, caffeine in coffee, or the popular flavor enhancer monosodium glutamate (MSG) can cause an adverse reaction in some individuals.

Food allergies are caused by a reaction of the body's immune system to certain foods, and can range in severity and presentation. These types of allergies can behave unpredictably at times, and the individual may have a mild reaction one time and a severe one the next or vice versa. Despite the severity of the allergy, all cadets with food allergies should know to watch for any of the following signs and symptoms of an allergic reaction and to seek help immediately if any are encountered: Trouble breathing, speaking or swallowing; rapid heartbeat or loss of consciousness; flushed face, hives, rash, or red and itchy skin; swelling of the eyes, face, lips, throat and/or tongue; anxiousness, distress, faintness, paleness, weakness; or cramps, diarrhea or vomiting.

Life-threatening food allergies, also known as anaphylactic food allergies, are the most dangerous form of food allergy given they can be rapid in onset, and may cause death. There are certain factors that increase the risk of having a very severe anaphylactic reaction such as: having both asthma and an anaphylactic allergy, under-utilization and delay in the use of epinephrine auto-injectors, underlying cardiac disease, previous history of an anaphylactic episode, or age (years 0-19).

In general, avoidance of the food allergen is the first step in reducing your risk of a reaction regardless of the severity of the food intolerance, sensitivity, or allergy.

In addition, Canadian guidelines recommend that you reduce your risk of having a **severe food-related allergic reaction** by: avoiding the allergic food substance, wearing medical identification such as a Medic-Alert bracelet, carrying an epinephrine auto-injector at all times, receiving instruction on a regular basis from your usual health care provider on when and how to use the epinephrine auto-injector, and having an anaphylaxis emergency plan.

It is important for the cadet and his/her parents to be aware that the Canadian Armed Forces (CAF) is not equipped nor staffed to offer allergen-free foods or food preparation conditions for those with food sensitives. These limitations apply to meals and snacks prepared just as much by the CAF as by a caterer, civilian volunteers or parents, and for all types of cadet training and activities conducted throughout the year, whether conducted locally or away. The CAF is concerned that for those cadets with food sensitivities, it may not always be safe to participate in cadet training and activities during which meals are consumed.

At Section 2, parents of a cadet with a food sensitivity are required to indicate if they consent to their child participating in cadet training and activities during which meals are consumed. If the cadet has an anaphylactic food allergy and consent is given for him/her to participate in cadet training and activities, the attached Anaphylaxis Consent form and Anaphylaxis Emergency Plan must be fully completed and signed. Please note that the Anaphylaxis Emergency Plan must be completed and signed by the cadet's physician. In addition, cadets with anaphylactic food allergies must come equipped with at least 2 epinephrine auto-injectors, and they must know when and how to use them. We also recommend that cadets with a food allergy wear medical identification such as a Medic-Alert bracelet.

We take cadets safety seriously. If a cadet experiences an allergic food reaction as a result of food exposure during a cadet activity, the cadet will be returned to his/her parents' care after their medical needs have been addressed.

If the cadet or his/her parents have any questions related to the participation by a cadet with a food sensitivities, the cadet corps or squadron commanding officer should be contacted.

SECTION 1: CADET PERSONAL INFORMATION		SECTION 1 : RENSEIGNEMENTS PERSONNELS SUR LE CADET
Official Surname – Nom de famille officiel		Official Given name(s) – Prénom(s) officiel(s)
Rank – Grade	Gender – Sexe ☐ Male – Masculin ☐ Female – Féminin	Date of Birth (yyyy-mm-dd) – Date de naissance (aaaa-mm-jj)
Civic Address (No and Street Name) – Adresse municipale (n° et nom de rue)		
City or Town – Ville ou village	Prov / Terr	Postal Code – Code postal

SECTION 2: CONSENT			SECTION 2 : CONSENTEMENT
	Yes Oui	No Non	
Do you consent to the above-named cadet participating in training and activities during which he/she will have a meal under the conditions described under the heading "Cadets with Food **Sensitivities** ~~Allergies~~"?	☐	☐	Consentez-vous à ce que le cadet susnommé participe à l'entraînement et aux activités durant lesquels il/elle prendra un repas dans les conditions décrites à la rubrique « Le cadet atteint sensibilisation alimentaires »?

Parent's Name – Nom du parent | Signature – Signature | Date – Date

FOR CADET CORPS/SQUADRON USE ONLY | **RÉSERVÉE AU CORPS OU À L'ESCADRON DE CADETS**

SECTION 3: FORM VALIDATION	SECTION 3 : VALIDATION DU FORMULAIRE
√ Form properly completed Formulaire rempli en bonne et due forme	√ Answer entered in Fortress Réponse saisie dans Forteresse

Admin O signature – Signature de l'O admin | Date – Date

ANAPHYLAXIS CONSENT FORM
for the Canadian Cadet Organizations

Cadet's Name: _____

Cadet's Date of Birth (year/month/day): _____

1. Administration of Medication

In the event that _____ experiences an anaphylactic medical emergency
(Name of cadet)
and is unable to self-administer his/her epinephrine, I consent to the administration of an epinephrine auto-injector, as per the attached *Anaphylaxis Emergency Plan,* by members of the Canadian Armed Forces (CAF) or persons engaged to support Canadian Cadet Organizations (CCO) authorized activities.

Name of Parent / Guardian _____
Signature of Parent / Guardian _____ Date: _____
Signature of Cadet _____ Date: _____
(if legal age of consent has been reached)

2. Maintenance of epinephrine auto-injector

I understand it is the responsibility of _____ to bring at least 2
(Name of cadet)
epinephrine auto-injectors to all authorized activities and must know when and how to use them. One epinephrine auto-injector is to be carried on his/her person at all times. The second will serve as a back-up, and is to be kept by the cadet's supervisor during the authorized activity. At the end of the activity the epinephrine auto-injector will be returned to the cadet.

Name of Parent / Guardian _____
Signature of Parent / Guardian _____ Date: _____
Signature of Cadet _____ Date: _____
(if legal age of consent has been reached)

3. Collection, Use and Disclosure Personal Information

The personal information in this consent form and the related Anaphylaxis Emergency Plan is collected in accordance with the *Privacy Act* (PA), under the authority of the *National Defence Act* and the *Queen's Regulations and Orders for the Cadet Organizations*. The information you provide will be used by members of the CAF or persons engaged to support CCO authorized activities, only for the purpose of using and administering an epinephrine auto-injector if required by the cadet named herein during any CCO authorized activity. The information you provide is protected under the PA and is described in the Personal Information Bank DND PPU 839. Be assured that your personal information will not be used for any unauthorized purposes. To obtain more information, please consult Info Source at www.infosource.gc.ca.

I hereby consent to the disclosure and use of the personal information contained herein and the *Anaphylaxis Emergency Plan* by members of the CAF or persons engaged to support CCO authorized activities who may need the information in the performance of their duties to ensure the cadet's safety.

Name of Parent / Guardian _____

Signature of Parent / Guardian _____ Date: _____
Signature of Cadet _____ Date: _____
(if legal age of consent has been reached)

Anaphylaxis Emergency Plan: _____ *(name)*

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

PHOTO

(Check the appropriate boxes.)

☐ Food(s): _____

_____

_____

☐ Insect stings

☐ Other: _____

Epinephrine Auto-Injector: Expiry Date: _____ / _____

Dosage:

☐ EpiPen® Jr. 0.15 mg ☐ EpiPen® 0.30 mg

Location of Auto-Injector(s): _____

☐ **Previous anaphylactic reaction:** Person is at greater risk.

☐ **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 system:** hives, swelling (face, lips, tongue), itching, warmth, redness
- **Respiratory system (breathing):** coughing, wheezing, shortness of breath, chest pain or tightness, throat tightness, hoarse voice, nasal congestion or hay fever-like symptoms (runny, itchy nose and watery eyes, sneezing), trouble swallowing
- **Gastrointestinal system (stomach):** nausea, pain or cramps, vomiting, diarrhea
- **Cardiovascular system (heart):** paler than normal skin colour/blue colour, weak pulse, passing out, dizziness or lightheadedness, shock
- **Other:** anxiety, sense of doom (the feeling that something bad is about to happen), headache, uterine cramps, metallic taste

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®) at the first sign of a known or suspected anaphylactic reaction. (See attached instruction sheet.)
2. **Call 9-1-1** or local emergency medical services. Tell them someone is having a life-threatening allergic reaction.
3. **Give a second dose of epinephrine** as early as 5 minutes after the first dose if there is no improvement in symptoms.
4. **Go to the nearest hospital immediately (ideally by ambulance),** even if symptoms are mild or have stopped. The reaction could worsen or come back, even after proper treatment. Stay in the hospital for an appropriate period of observation as decided by the emergency department physician (generally about 4-6 hours).
5. **Call emergency contact person (e.g. parent, guardian).**

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 ☐ On file

_____ Date

Allergy Quebec

Canadian Allergy, Asthma and Immunology Foundation

Food Allergy Canada

Canadian Society of Allergy and Clinical Immunology

Allergy Asthma Information Association

ASSOCIATION OF ALLERGISTS AND IMMUNOLOGISTS OF QUEBEC

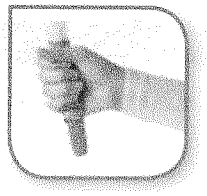
Blue to the sky. Orange to the thigh.

How to use EpiPen® and EpiPen® Jr (epinephrine) Auto-injectors.

Remove the EpiPen® Auto-Injector from the carrier tube and follow these 2 simple steps:

- Hold firmly with orange tip pointing downward.
- **Remove blue safety cap by pulling straight up. Do not bend or twist.**

- **Swing and push orange tip firmly into mid-outer thigh until you hear a 'click'.**
- Hold on thigh for several seconds.



Built-in needle protection

- After injection, the orange cover automatically extends to ensure the needle is never exposed.

After using EpiPen®, you must seek immediate medical attention or go to the emergency room. For the next 48 hours, you must stay close to a healthcare facility or be able to call 911.

For more information visit the consumer site EpiPen.ca.

EpiPen® and EpiPen® Jr (epinephrine) Auto-Injectors are indicated for the emergency treatment of anaphylactic reactions in patients who are determined to be at increased risk for anaphylaxis, including individuals with a history of anaphylactic reactions. Selection of the appropriate dosage strength is determined according to patient body weight.

EpiPen® and EpiPen® Jr Auto-Injectors are designed as emergency supportive therapy only. They are not a replacement for subsequent medical or hospital care. After administration, patients should seek medical attention immediately or go to the emergency room. For the next 48 hours, patients must stay within close proximity to a healthcare facility or where they can call 911. To ensure this product is right for you, always read and follow the label. Please consult the Consumer Information leaflet in your product package for complete dosage and administration instructions.

Pfizer

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D000050559

Member R&D PAAB

EPIPEN®
(Epinephrine) Auto-Injectors 0.3/0.15mg

Trusted for over 25 years.