# MY FIRST FOODS



A simple record of new flavours, textures and foods your child explores.

Child's name: _____ Started solids: _____ Age when started: _____

| FOOD | DATE TRIED | HOW SERVED / TEXTURE | CHILD'S RESPONSE | AGAIN? | NOTES |
|---|---|---|---|---|---|
| | | | E N R ! | Y N | |
| | | | E N R ! | Y N | |
| | | | E N R ! | Y N | |
| | | | E N R ! | Y N | |
| | | | E N R ! | Y N | |
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| | | | E N R ! | Y N | |
| | | | E N R ! | Y N | |
| | | | E N R ! | Y N | |
| | | | E N R ! | Y N | |

Circle one: E enjoyed N neutral R refused or not ready ! possible reaction*

## VARIETY CHECK

Prompts for variety, not quotas. Tick off the groups your child has explored.

- ☐ Vegetables
- ☐ Fruit
- ☐ Grains and starchy foods
- ☐ Protein foods
- ☐ Dairy
- ☐ Herbs, spices and flavours
- ☐ Other family foods

**Food refused today may be enjoyed another time.**
Babies often need foods offered repeatedly while they become familiar with new tastes and textures.

** If you suspect an allergic reaction, stop using this general tracker and record the details on the Food Reaction and Symptom Record on page 4.*

Parent or carer record only. This printable does not diagnose food allergy or replace advice from a GP, health visitor, dietitian or allergy specialist.
Guidance based on UK NHS and Food Standards Agency allergen information.

# ALLERGEN INTRODUCTION TRACKER



Keep a clear record of when commonly recognised food allergens are introduced.

When introducing foods that may cause an allergic reaction, current NHS advice recommends introducing them one at a time, and initially in small amounts, so that any reaction is easier to identify. Once introduced and tolerated, continue including them as part of your child's usual varied diet.

**If your baby has significant eczema, an existing food allergy, or you have been advised that they may be at increased risk of allergy, speak to a healthcare professional before introducing allergens.**

## THE UK 14 ALLERGENS

★ marks those commonly considered during early allergen introduction. The others still matter.

| ALLERGEN | FORM OFFERED | 1ST DATE | 2ND DATE | 3RD DATE | REACTION? | NOTES |
|---|---|---|---|---|---|---|
| Milk ★ | | | | | No reaction observed ☐ See page 4 | |
| Egg ★ | | | | | No reaction observed ☐ See page 4 | |
| Peanut ★ | | | | | No reaction observed ☐ See page 4 | |
| Tree nuts ★<br>state which nut was offered | | | | | No reaction observed ☐ See page 4 | |
| Sesame ★ | | | | | No reaction observed ☐ See page 4 | |
| Soya ★ | | | | | No reaction observed ☐ See page 4 | |
| Cereals containing gluten ★<br>wheat, rye, barley, oats | | | | | No reaction observed ☐ See page 4 | |
| Fish ★ | | | | | No reaction observed ☐ See page 4 | |
| Crustaceans ★<br>e.g. prawns, crab, lobster | | | | | No reaction observed ☐ See page 4 | |
| Molluscs ★<br>e.g. mussels, clams, squid | | | | | No reaction observed ☐ See page 4 | |
| Celery | | | | | No reaction observed ☐ See page 4 | |
| Mustard | | | | | No reaction observed ☐ See page 4 | |
| Lupin | | | | | No reaction observed ☐ See page 4 | |
| Sulphur dioxide / sulphites | | | | | No reaction observed ☐ See page 4 | |

These are the 14 allergens which UK food law requires to be declared when used as ingredients. Other foods can also cause allergic reactions.

**PREPARATION REMINDER**

Never give whole nuts to children under 5, because of the choking risk.
Offer nuts and peanuts in an age-appropriate form, such as finely ground or a smooth nut butter thinned down.
Follow normal age-appropriate food safety and choking guidance for everything else.

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# KEEPING ALLERGENS IN THE DIET



Once an allergenic food has been introduced without an observed reaction, NHS guidance recommends continuing to offer it as part of your child's usual diet.

**This page is a record of ongoing exposure, not a schedule.**
Follow NHS guidance, or individual advice from your health visitor, GP, dietitian or allergy specialist, about your own child.

## DATES OFFERED

| ALLERGEN | DATES OFFERED | NOTES |
|---|---|---|
| Milk | | |
| Egg | | |
| Peanut | | |
| Tree nut: _____ | | |
| Tree nut: _____ | | |
| Sesame | | |
| Soya | | |
| Gluten-containing cereals | | |
| Fish | | |
| Crustaceans | | |
| Molluscs | | |
| Other: _____ | | |
| Other: _____ | | |

Write a short date in each box rather than a tick, so you can see the pattern over time as well as the fact it happened.

## NOTES AND ANYTHING TO RAISE AT AN APPOINTMENT

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# FOOD REACTION & SYMPTOM RECORD



If you notice symptoms following a food, recording exactly what happened may be useful when discussing the event with a healthcare professional.

Child's name: _____ Age: _____ Date: _____

Time food was eaten: _____ Food: _____

Brand or product, if relevant: _____ Ingredients, if relevant: _____

How was it prepared or served? _____ Approximate amount eaten: ____ **First exposure? YES / NO / UNSURE**

## SYMPTOMS OBSERVED

Tick everything that applies.

### SKIN

- ☐ redness
- ☐ itchy skin
- ☐ hives or raised rash
- ☐ worsening eczema
- ☐ swelling of face or lips
- ☐ other: _____

### MOUTH / THROAT

- ☐ itching or discomfort
- ☐ swollen lips
- ☐ swollen tongue
- ☐ throat symptoms
- ☐ other: _____

### STOMACH / DIGESTION

- ☐ vomiting
- ☐ diarrhoea
- ☐ tummy pain or discomfort
- ☐ constipation
- ☐ other: _____

### BREATHING / NOSE

- ☐ coughing
- ☐ wheezing
- ☐ shortness of breath
- ☐ sneezing
- ☐ runny or blocked nose
- ☐ other: _____

### BEHAVIOUR / GENERAL

- ☐ unusually sleepy
- ☐ pale
- ☐ floppy or less responsive
- ☐ distressed
- ☐ other: _____

### TIMING

Symptoms first noticed: _____ minutes / hours after eating

How long did they last? _____

Did they worsen, improve or stay the same? _____

Medication or treatment given, if any: _____

### ACTION TAKEN

- ☐ Food stopped
- ☐ Healthcare advice sought
- ☐ NHS 111 contacted
- ☐ GP or health professional contacted
- ☐ Emergency assistance required
- ☐ Other: _____

What happened afterwards? _____

**Photograph taken of visible symptoms? YES / NO**

### ADDITIONAL NOTES

## SEVERE ALLERGIC REACTION: CALL 999

Call 999 immediately if a child develops signs of a serious allergic reaction such as sudden swelling of the mouth, throat or tongue; difficulty breathing; difficulty swallowing; becoming very pale, blue or grey; collapse; or becoming limp, floppy or unusually unresponsive. **Deal with the emergency first. Complete this record afterwards.**

**If you think your child has a food allergy, seek advice from a healthcare professional before deliberately offering the suspected food again.**

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