

**Conference for Food Protection  
2018 Issue Form**

**Issue: 2018 II-008**

<b>Council Recommendation:</b>	Accepted as Submitted _____	Accepted as Amended _____	No Action _____
<b>Delegate Action:</b>	Accepted _____	Rejected _____	

*All information above the line is for conference use only.*

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**Issue History:**

This is a brand new Issue.

**Title:**

Amend Food Code - Demonstration of Knowledge of Food Allergens in RTE Foods

**Issue you would like the Conference to consider:**

Adding an amendment to the most current edition of the FDA Food Code section 2-102.11(C)(9) to include describing whether any major food allergens are ingredients in food that is prepared for immediate consumption after purchase. This would apply to allergens that are regulated by the Food Allergy Labeling and Consumer Protection Act and be relevant in places where ready to eat (RTE) food is sold for immediate consumption and not already labeled. This could include bakeries, deli counters, ice cream parlors and similar.

**Public Health Significance:**

In 2011, the prevalence of food allergy within the U.S. was estimated to be 15 million Americans, nearly 6 million children[1]. The Centers for Disease Control & Prevention has reported that the prevalence of food allergy in children increased by 50 percent between 1997 and 2011. Every three minutes, a food allergy reaction sends someone to the emergency room and 200,000 people require emergency medical care for allergic reactions to food each year. A recent study by FAIR Health, which analyzed 24 billion health care claims records showed that treatment of severe food allergy reactions increased by nearly 400 percent between 2007 and 2016, and laboratory services costs for diagnosing those reactions also surged during that 10-year period, growing by more than 5,000 percent.

The food industry has made great strides in addressing the transparency and accuracy that food allergic patients need to make informed choices about purchasing and consuming food. Labels of manufactured foods now contain information about the "top eight" allergens as well as ingredient information, and manufacturer web sites also offer insight into allergen management practices. But some foods, those available for immediate consumption and not pre-packaged, don't provide this level of disclosure, even though it is required by the Food Code. As such, food allergic consumers often ask on site staff to share information about ingredients and allergens. They must rely on questions to staff - sometimes

minimally trained, seasonal workers, teenagers, etc. who may not have an answer or worse, give inaccurate information. Staff error has yielded catastrophic results, including fatalities.

[j] Gupta, Ruchi S, et al The Prevalence, Severity, and Distribution of Childhood Food Allergy in the United States, *Pediatrics* June 2011

**Recommended Solution: The Conference recommends...:**

that a letter be sent to the FDA requesting that Subparagraph 2-102.11(C)(9) of the most current edition of Food Code be amended as follows (new language is underlined):

2-102.11 Demonstration.

(C) Responding correctly to the inspector's questions as they relate to the specific FOOD operation. The areas of knowledge include:

(9) Describing which FOODS identified as MAJOR FOOD ALLERGENS and the symptoms that a MAJOR FOOD ALLERGEN could cause in a sensitive individual who has an allergic reaction. Describing whether any foods that are regularly prepared for immediate consumption by this establishment contain any of the MAJOR FOOD ALLERGENS.

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