

The FPIES Foundation

www.thefpiesfoundation.org contact@thefpiesfoundation.org



Educate. Support. Empower.

	FPIES Emergency	Action Plan	
Child's name:	"Nickn	ame":	DOB://
Primary language spoken:	Address		
Guardian.	Phone. Gua	ardian.	Phone:
Emergency Contact.	Phor	ne:	Alt. Phone:
Physician.	Phone:	Office /hospital	
Physician,		Office /hospital	
Instructions when contacting physician.			
Primary Physician's Requests.			
		Signed	
Child's Allergens/Trigger Foods.			 ☆ indicates history of shock + indicates history of additional non-FPIES symptoms

FPIES (K52.21), Food Protein-Induced Enterocolitis Syndrome, is a type of food allergy affecting the gastrointestinal (GI) tract. Unlike typical food allergies, symptoms may not be immediate and do not show up on standard allergy tests. The symptoms of this type of allergic reaction include repetitive vomiting that may not start for a few hours (e.g., 2) following ingestion of the food to which the child is allergic. Even trace amounts can trigger a reaction. There is often diarrhea that starts later (after 6 hours). In some cases (about 20%), the reaction includes lethargy, hypotension, acidemia, and/or methemoglobinemia. The treatment is symptomatic and can include intravenous fluids (e.g. normal saline bolus, hydration) and steroids for significant symptoms. The latter is given because the pathophysiology is that of a T cell response. This information is being given so that this could be considered in the differential diagnosis for this child in the event of symptoms.

Alternately, some children affected by FPIES experience chronic reaction patterns independent of the acute reaction patterns. Though this reaction pattern does not typically require immediate emergency intervention, it can lead to serious consequences if left untreated and therefore must be appropriately reported to the provider if symptoms are observed. These may include.

Additional Diagnostic Information/Need for Testing.

Current Status (What's Happening NOW?).