CMPA BABY

FREE PRINTABLE GUIDE · US + UK LABELS

Milk's Other Names

A Parent's Label-Reading Checklist

A practical guide to spotting cow's milk ingredients on US and UK food labels.

INGREDIENTS:
Wheat flour, sugar, palm oil, **whey (milk)**, cocoa powder, **sodium caseinate**, salt, raising agents (sodium bicarbonate), natural flavouring.

Contains: milk, wheat. May contain: soy.

Illustrative label. Milk is not always written as simply "milk": here it appears as whey (milk), sodium caseinate, and in the "Contains" statement.

WHAT IS INSIDE

- The names on a label that mean milk protein may be present
- A 30-second check for US and UK packages
- The difference between milk allergy and lactose intolerance
- How to handle "may contain," "vegan," and "non-dairy" wording
- A one-page shopping and caregiver checklist
- Questions for your pediatrician, allergist, or pediatric dietitian

Written by the CMPA Baby editorial team · Source-checked September 2026 · Not a substitute for medical advice.
cmpa.app/guides/hidden-milk-ingredients-label-checklist

START HERE

One label. Four checks. Thirty seconds.

Label reading becomes easier when you use the same order every time.

1 Read every ingredient

Do not rely only on the front of the package. Look for obvious dairy foods and the less familiar protein names on the next page.

2 Find the allergen declaration

In the United States: milk may appear in parentheses after an ingredient—such as *whey (milk)*—or in a nearby statement such as *Contains: milk*. A separate "Contains" box is not compulsory when the ingredient list already identifies milk, so read both areas.[2]

In the United Kingdom: milk must be emphasized each time it appears in the ingredient list, commonly with **bold**, CAPITALS, underlining, or contrasting text. Food that is prepacked for direct sale must also carry a full ingredient list with regulated allergens emphasized.[3]

3 Read the precautionary warning

Look for wording such as:

- May contain milk
- Made on shared equipment with milk
- Produced in a facility that also handles milk
- Not suitable for people with a milk allergy

These warnings refer to possible unintended cross-contact. In the US and UK they are voluntary, and different phrases should not be used to rank the level of risk.[2][4]

Your family's rule belongs in the box below:

Our clinician's advice about "may contain milk":

_____

_____

If your child has an IgE-mediated milk allergy or could have a severe reaction, food-allergy guidance generally advises avoiding products with milk precautionary warnings. A clinician may give individualized advice for some delayed non-IgE CMPA situations. If you have not agreed on a rule, do not guess—ask before serving the food.[4]

4 Check it again next time

Manufacturers can change ingredients, production lines, and recipes. Read the package you are holding—even if the same brand was safe before. Different flavors or pack sizes may also be made differently.[5]

QUICK RULE **No complete label + no reliable ingredient answer = do not serve it yet.**

THE NAMES THAT MEAN "STOP AND CHECK FOR MILK"

Milk's other names

For a child who has been told to avoid cow's milk protein, these words require attention. In regulated US and UK packaged foods, the label should also make the milk source clear, but knowing the terms helps you spot it quickly. [2][3][5]

Everyday dairy names

- Milk: whole, skim, low-fat, dried, powdered, evaporated, condensed, UHT, cultured, malted
- Butter, butterfat, butter oil, buttermilk
- Cheese, cheese powder, cottage cheese, curds
- Cream, sour cream, crème fraîche
- Yogurt or yoghurt, fromage frais, kefir
- Ghee
- Ice cream, custard, milk chocolate
- Milk powder, skimmed milk powder
- Milk solids, nonfat milk solids, dry milk solids
- Milk protein, milk protein concentrate, milk protein isolate

Other milk-protein names

- Lactalbumin or alpha-lactalbumin
- Lactalbumin phosphate
- Lactoglobulin or beta-lactoglobulin
- Lactoferrin

Casein family

- Casein or rennet casein
- Hydrolyzed casein
- Caseinate
- Calcium caseinate
- Sodium caseinate
- Potassium, magnesium, or ammonium caseinate

Whey family

- Whey
- Whey powder or whey solids
- Whey protein or whey protein concentrate
- Hydrolyzed whey protein
- Demineralized or delactosed whey
- Whey syrup or whey syrup sweetener

Mammal milk is not an automatic substitute

Goat's, sheep's, buffalo's, and other ruminant milks have proteins similar to cow's milk and can cross-react. Do not use them as substitutes unless your child's allergy specialist specifically says they are appropriate. [1][5]

What about lactose?

CMPA is a reaction to milk protein. Lactose intolerance is difficulty digesting the milk sugar lactose; it is not an allergy. "Lactose-free" cow's milk and ordinary lactose-free infant formula can still contain cow's milk protein, so *lactose-free does not mean milk-protein-free.* [5][6]

On food labels, treat **lactose** or **milk sugar** as a prompt to stop and check the milk declaration and your child's plan. Pharmaceutical-grade lactose is highly refined and reactions are considered very unlikely for most people with milk allergy; do not stop a prescribed medicine. Ask the prescriber or pharmacist if you are concerned. [6]

SIMILAR-SOUNDING WORDS AND FRONT-LABEL TRAPS

Sounds milky. Is it milk?

These ingredients do **not themselves contain milk protein**, unless the package says otherwise:

- Cocoa butter
- Cream of tartar
- Calcium lactate or sodium lactate
- Calcium stearoyl lactylate or sodium stearoyl lactylate
- Oleoresin
- Lactic acid (but a *lactic acid starter culture* may use milk, so check the full label)

The similar names are confusing; the ingredient and allergen declarations—not the sound of the word—are what matter.[5][7]

Do not let a front-of-pack claim make the decision

Lactose-free

Removes or breaks down milk sugar. It does not necessarily remove milk protein.

Non-dairy

Do not treat this wording alone as an allergy guarantee. Some products, especially creamers or cheese alternatives, may still list caseinate or another milk-derived ingredient. Read the full label.

Vegan

Describes how a product is formulated; it is not the same as an allergen-controlled "milk-free" claim. A vegan product can still carry a "may contain milk" warning because of cross-contact.[3][4]

Milk-free or dairy-free

These are intended as absence claims, but still read the ingredients and precautionary statement. If the package says both "milk-free" and "may contain milk," or the wording conflicts with the ingredients, do not serve it until the manufacturer clarifies.[2][4]

Plant "milk"

Oat, soy, pea, almond, coconut, and other plant drinks are not cow's milk by definition, but each product has its own ingredients and allergens. They are not interchangeable with infant formula, and their nutrition varies.[8]

Baked milk

Some children can tolerate milk protein after extensive heating, but others cannot. Do not test baked milk or start a milk ladder from a label-reading guide. Reintroduction must follow an individualized plan; an at-home milk ladder is not appropriate without specialist advice for IgE-mediated allergy, previous anaphylaxis, FPIES, or other severe disease.[1][9]

FOODS WORTH A CLOSER LOOK

Milk can turn up where you do not expect it

These foods do not always contain milk. They simply deserve a full label check:

- Bread, rolls, crackers, biscuits, cakes, and baking mixes
- Breakfast cereal and instant oatmeal
- Chocolate, caramel, candy, and nougat
- Margarine and spreads
- “Non-dairy” creamer and whipped toppings
- Plant-based cheese, yogurt, or desserts
- Mashed or scalloped potatoes
- Soups, stock, gravy, sauces, and salad dressings
- Breaded, battered, or fried foods
- Seasoning blends and flavored chips
- Processed meat, deli meat, sausages, and pâté
- Protein powders, nutrition drinks, and supplements
- Infant cereals, snacks, and prepared baby foods

Away from home

At a restaurant, bakery, deli, daycare, or family gathering, ask about both ingredients and cross-contact. A useful sentence is:

> *“My child has a cow’s milk protein allergy. Does this contain milk, butter, cream, cheese, whey, casein, or milk powder? Could it have touched milk during preparation?”*

If the person answering is unsure, choose something else. A “small amount” is not automatically safe for a food allergy.[10]

Formula requires its own clinical plan

Words such as *gentle*, *comfort*, *sensitive*, *HA*, *partially hydrolyzed*, *goat milk*, or *lactose-free* do not by themselves mean a formula is suitable for CMPA. ESPGHAN does not recommend partially hydrolyzed cow’s-milk formula to treat CMPA. Use the exact formula type recommended for your baby; do not switch based on package marketing alone.[1]

THE TEAR-OUT SHOPPING CHECKLIST

Save this page to your phone—or print it

Before buying

- [ ] I am checking the exact flavor, size, and package I will use.
- [ ] I read the complete ingredient list.
- [ ] I checked for **milk**, **casein/caseinate**, **whey**, **milk solids/protein**, **butter/ghee**, **cream**, **cheese**, and **yogurt**.
- [ ] I found the US allergen source declaration or the UK emphasized allergen wording.
- [ ] I checked every "may contain" or shared-equipment warning.
- [ ] The package matches the "may contain" rule agreed with our clinician.
- [ ] I did not rely only on "vegan," "non-dairy," or "lactose-free."
- [ ] If the label changed, conflicted, or was incomplete, I paused and asked.

Before someone else feeds my child

- [ ] They know the difference between milk allergy and lactose intolerance.
- [ ] They have the current safe-food instructions—never an old product list.
- [ ] They know how to prevent cross-contact: clean hands, surfaces, and utensils; no shared spoon, cup, or food.
- [ ] They have the child's written emergency action plan.
- [ ] If prescribed, the child's in-date epinephrine auto-injectors are immediately accessible and the caregiver knows how to use them.
- [ ] They know who to call and the local emergency number.

Product notes

Product / flavor / size: _____

Date label checked: _____

Manufacturer answer or case number: _____

Safe according to: _____

TAKE THIS TO THE APPOINTMENT

Questions that turn uncertainty into a plan

Bring this page to your pediatrician, allergist, or pediatric dietitian.

Diagnosis and avoidance

- [ ] Is CMPA confirmed, suspected, or being evaluated?
- [ ] Does the history suggest an immediate IgE-mediated allergy, a delayed non-IgE condition, FPIES, or something else?
- [ ] Exactly which milk forms must we avoid right now?
- [ ] What is our rule for “may contain milk” and shared-facility wording?
- [ ] Are medicines, probiotics, supplements, cosmetics, or nipple creams relevant for this child?

Feeding and nutrition

- [ ] If formula is needed, what exact type should we use? What should we avoid?
- [ ] If breastfeeding, is any change to the breastfeeding parent’s diet actually indicated?
- [ ] How will we protect energy, protein, calcium, vitamin D, and other nutrient intake?
- [ ] How often should weight, length/height, and growth be reviewed?
- [ ] Should we see a pediatric dietitian?

Reintroduction and emergencies

- [ ] When and where should tolerance be reassessed?
- [ ] Is a home milk ladder appropriate, or must reintroduction happen under medical supervision?
- [ ] What symptoms mean “use epinephrine now” for this child?
- [ ] Do we have a current written allergy/anaphylaxis action plan?
- [ ] Who needs a copy—daycare, school, relatives, babysitters?

Our current plan:

_____

_____

_____

Next review date: _____

EMERGENCY ACTION

Suspect anaphylaxis? Act now.

Anaphylaxis is a sudden, severe allergic reaction. Warning signs can include trouble breathing, wheeze or persistent cough; throat or tongue swelling; difficulty swallowing or a hoarse voice; becoming pale, floppy, confused, or collapsing; or rapidly worsening symptoms involving more than one body system.

1. **Use the child's epinephrine (adrenaline) auto-injector immediately, if prescribed, following the device instructions and the child's written action plan.**
2. **Call emergency services: 911 in the US, 999 in the UK, or your local emergency number. Say "anaphylaxis."**
3. Follow the emergency dispatcher's instructions and the child's action plan. A further dose may be needed if the plan says so and symptoms continue while help is on the way.
4. The child still needs urgent medical assessment after epinephrine.

Do not wait to see if the reaction improves, and do not use an antihistamine instead of epinephrine for suspected anaphylaxis. Epinephrine is first-line treatment. [11][12]

If symptoms are new but do not look like anaphylaxis, follow the child's plan and contact their healthcare professional. If you are unsure and symptoms are severe or progressing, call emergency services.

Final disclaimer

This guide provides general educational information and cannot diagnose cow's milk protein allergy or replace individualized medical or nutritional advice. Symptoms, thresholds, cross-contact risk, formula needs, and reintroduction plans differ between children. Work with a pediatrician, allergist, or pediatric dietitian before changing an infant's feeding, starting an elimination diet, or reintroducing milk. In an emergency, contact local emergency services.

Track feeds, symptoms and questions for your next appointment with CMPA Baby — apps.apple.com/app/id6756455735

REFERENCES (SOURCE-CHECKED 3 SEPTEMBER 2026)

1. **ESPGHAN position paper (2024): diagnosis, formula, nutrition, reintroduction, and cross-reactivity.** Vandenplas Y, et al. An ESPGHAN Position Paper on the Diagnosis, Management, and Prevention of Cow's Milk Allergy. J Pediatr Gastroenterol Nutr. 2024;78(2):386–413. https://doi.org/10.1097/MPG.0000000000003897
2. **US packaged-food allergen labeling and advisory statements.** US Food and Drug Administration. Food Allergies: https://www.fda.gov/food/nutrition-food-labeling-and-critical-foods/food-allergies · Food Allergen Labeling Q&A, Edition 5: https://www.fda.gov/media/117410/download?attachment=
3. **UK allergen labeling.** UK Food Standards Agency. Allergen guidance for food businesses: https://www.food.gov.uk/business-guidance/allergen-guidance-for-food-businesses · Allergen information and labelling for consumers: https://www.food.gov.uk/safety-hygiene/allergen-information-and-labelling-for-consumers
4. **Precautionary allergen labeling and vegan/free-from distinctions.** US FDA. The Current Food Allergen Landscape: https://www.fda.gov/food/conversations-experts-food-topics/current-food-allergen-landscape · UK FSA. Precautionary allergen labelling: https://www.food.gov.uk/business-guidance/precautionary-allergen-labelling · Vegan food and allergens: https://www.food.gov.uk/safety-hygiene/vegan-food-and-allergens
5. **Milk terms, cross-reactive mammal milks, recipe changes, and practical label checks.** Health Canada. Milk — a priority food allergen: https://www.canada.ca/en/health-canada/services/food-nutrition/reports-publications/food-safety/milk-priority-food-allergen.html · Cambridge University Hospitals NHS Foundation Trust. Milk allergy: https://www.cuh.nhs.uk/patient-information/milk-allergy/
6. **CMPA versus lactose intolerance and lactose in medicines.** Cambridge University Hospitals NHS Foundation Trust. Milk allergy: https://www.cuh.nhs.uk/patient-information/milk-allergy/ · NHS. Dairy and alternatives in your diet: https://www.nhs.uk/live-well/eat-well/food-types/milk-and-dairy-nutrition/
7. **Similar-sounding ingredients that do not contain milk protein.** Health Canada. Milk — a priority food allergen: https://www.canada.ca/en/health-canada/services/food-nutrition/reports-publications/food-safety/milk-priority-food-allergen.html · Australasian Society of Clinical Immunology and Allergy. Cow's Milk Protein (Dairy) Allergy Dietary Guide: https://www.allergy.org.au/patients/food-allergy/ascia-dietary-avoidance-for-food-allergy/cows-milk-dairy
8. **Plant-based drink composition and nutrition.** US FDA. Plant-Based Milk and Animal Food Alternatives: https://www.fda.gov/food/nutrition-food-labeling-and-critical-foods/plant-based-milk-alternatives-pbma
9. **Milk-ladder safety.** Allergy UK. Cow's Milk Ladder: https://www.allergyuk.org/resources/cows-milk-ladder/ · World Allergy Organization DRACMA Guideline Group. Milk elimination and reintroduction in the diagnostic process: https://www.worldallergyorganizationjournal.org/article/S1939-4551(23)00045-5/fulltext
10. **Cross-contact and restaurant communication.** US CDC. Food Allergy Reactions: https://www.cdc.gov/restaurant-food-safety/php/practices/food-allergy-reactions.html · UK FSA. Ordering allergy-safe food: https://www.food.gov.uk/safety-hygiene/ordering-allergy-safe-food
11. **Anaphylaxis: epinephrine first, then emergency care.** National Institute of Allergy and Infectious Diseases. Food Allergy Guidelines — Summary for Patients, Families, and Caregivers: https://www.niaid.nih.gov/sites/default/files/faguidelinespatient.pdf
12. **Current UK first-aid guidance for anaphylaxis.** Resuscitation Council UK. 2025 First Aid Guidelines: https://www.resus.org.uk/professional-library/2025-resuscitation-guidelines/first-aid-guidelines