

# Food and Nutrition

What your child eats each day is an important part of keeping her or him healthy. Ask your child's nurse or nutritionist to fill out this section for your child.

Child's Current Diet:

Formula: \_\_\_\_\_ Amount: \_\_\_\_\_ Every \_\_\_\_\_ hours \_\_\_\_\_

Add: \_\_\_\_\_

Introduce Solid Foods: \_\_\_\_\_

Nutrition Supplement: \_\_\_\_\_ How Much: \_\_\_\_\_

How Often: \_\_\_\_\_

Date to Begin: \_\_\_\_\_ Date to End: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

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Special Instructions: \_\_\_\_\_

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Nutritionist's Phone Number: \_\_\_\_\_