

Sample Diet Request Form

Name: _____ Room/Suite #: _____ Date: _____

Update: Yes No Reason for update: _____

Food Allergies, Intolerances or Restrictions: (List if any)

Requests and preferences:

Main Diet:

- | | | |
|--|---|---|
| <input type="checkbox"/> Regular (Diet as Tolerated) | <input type="checkbox"/> Gluten-free | <input type="checkbox"/> Vegetarian |
| <input type="checkbox"/> Diabetic | <input type="checkbox"/> Heart Healthy | <input type="checkbox"/> Low Sodium |
| <input type="checkbox"/> Renal | <input type="checkbox"/> Fluid Restricted | <input type="checkbox"/> High Protein, High Calorie |
| <input type="checkbox"/> Other: _____ | | |

Primary Textures:

- | | | |
|---|---------------------------------------|---------------------------------|
| <input type="checkbox"/> Regular | <input type="checkbox"/> Easy to Chew | <input type="checkbox"/> Minced |
| <input type="checkbox"/> Dysphagia Soft | <input type="checkbox"/> Pureed | |

Additional Texture Modifications:

- | | | |
|------------------------------------|--|---|
| <input type="checkbox"/> Cut/Diced | <input type="checkbox"/> Pureed Bread Products | <input type="checkbox"/> No Mixed Consistencies |
|------------------------------------|--|---|

Fluid Consistency:

- | | | |
|--|---|--|
| <input type="checkbox"/> Regular (Thin) | | |
| <input type="checkbox"/> Mildly Thick (Nectar) | <input type="checkbox"/> Moderately Thick (Honey) | <input type="checkbox"/> Extremely Thick (Pudding) |

Approved by: Signature: _____ Date: _____