

Special Diet List

Program: _____ Site/Center: _____ Lead Teacher(s): _____ DATE _____

Menu Contact Name: _____ Menu Contact Email/Phone _____

- List each child who has a special dietary need/preference for each classroom.
- Complete all documentation necessary for managing special dietary needs.
- Update as needed and send with menus to PSES before the 5th of each month.
- Include **only** HS, EHS and ECEAP children.
- Post in kitchen and classroom where it is readily accessible by all staff.
- Send a copy to the Food Service Manager or kitchen staff.

No special diets or preferences in my classroom

Child's Name	Session AM PM FD (Full Day) EFD (Extended FD)	Type of Special Dietary Need (from <i>Child Health Plan and Provider Orders-Dietary Accommodations</i>) <ul style="list-style-type: none"> • Food Allergy (FA) • Food Intolerance (FI) • Medical Condition (MC) • Preference-<i>Provider Orders</i> not necessary (P) 	Dr. Note (Y/N)	Foods to Avoid List foods the child cannot eat (from <i>Child Health Plan and Provider Orders-Dietary Accommodations</i>)	Foods to Substitute List foods the child can eat as a substitute (from <i>Child Health Plan and Provider Orders-Dietary Accommodations</i>)	Medications for Emergency (from <i>Child Health Plan</i>) <ul style="list-style-type: none"> • Epi-pen • Benadryl • Inhaler • Other

What milk substitutes are being offered in the classroom? (*Parent/Guardian Request for Milk Substitute form* must be completed.)

- Pacific Ultra Soy (Original)
 8th Continent (Original)
 Kirkland Organic Plain
 Great Value Original (red top)
 Silk (Original)
 1% or NF Lactose Free
 Other milk substitutes: _____

See reverse for instructions

Before sending menus please make sure to:

- Use the menu developed by the school food service or other nutrition service staff OR use the *Menu Templates* to develop menus that comply with the PSESd USDA contract. Menus can be hand written if legible – Use a dark colored pen.
- Record individual components of combination foods: (casseroles, salads, breaded meats.)
- Record any classroom substitutions on the main menu by writing foods served, adding vegetarian options, or crossing out foods not served by date
- Create individual menus documenting dietary accommodations when an individual receives a specific food not listed on the main menu.
- Create menu ‘tag lines’ such as: “1% milk served with all meals and snacks”, “All cereals contain less than 6 grams of sugar per dry ounce”, “WG= whole grain-rich serving”, “Only 100% fruit or vegetable juice is offered”, “GF=gluten free option also served”, or “No pork or peanut products served”.
- “Meals requiring milk cannot be claimed for reimbursement if a child cannot have milk or an approved milk substitute, and has not been diagnosed with a disability that restricts the consumption of both milk and the approved milk substitutes.” OSPI

Upload documents - Scan menus/cover sheets and upload directly into monthly menu folders: www.classes.earlylearningwa.org – Data Collection – *Current Year*, Choose correct Month, click on Month’s Menu Upload, Follow instructions to “Add Entry”.

OR

Fax documents - Include number of pages and confirm “successfully sent”
Attn: Menu Processing, use pen and white paper only to: 888-311-1842

OR

Email documents –
menus@psed.org