**Resident’s name...................................................................... Date started recording \_\_\_/\_\_\_/\_\_\_**

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| **Time of Day** | **Week 1** | **Describe how the food is fortified, or what high calorie snack and/or drink is given** | | | | | | |
| ***Example*** | **Mon** | **Tue** | **Wed** | **Thu** | **Fri** | **Sat** | **Sun** |
| Breakfast | *Cream and honey added to porridge* |  |  |  |  |  |  |  |
| Mid morning | *Cracker with cheese & butter* |  |  |  |  |  |  |  |
| Lunch | *Cream in soup.*  *Extra butter & cheese on vegetables* |  |  |  |  |  |  |  |
| Mid afternoon | *Fortified milkshake* |  |  |  |  |  |  |  |
| Dinner | *Mayonnaise on potato.*  *Jam in rice pudding* |  |  |  |  |  |  |  |
| Evening | *Horlicks made with fortified milk* |  |  |  |  |  |  |  |

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| **Time of Day** | **Week 2** | **Describe how the food is fortified, or what high calorie snack and/or drink is given** | | | | | | |
| ***Example*** | **Mon** | **Tue** | **Wed** | **Thu** | **Fri** | **Sat** | **Sun** |
| Breakfast | *Cream and honey added to porridge* |  |  |  |  |  |  |  |
| Mid morning | *Cracker with cheese & butter* |  |  |  |  |  |  |  |
| Lunch | *Cream in soup.*  *Extra butter & cheese on vegetables* |  |  |  |  |  |  |  |
| Mid afternoon | *Fortified milkshake* |  |  |  |  |  |  |  |
| Dinner | *Mayonnaise on potato.*  *Jam in rice pudding* |  |  |  |  |  |  |  |
| Evening | *Horlicks made with fortified milk* |  |  |  |  |  |  |  |

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| **Time of Day** | **Week 3** | **Describe how the food is fortified, or what high calorie snack and/or drink is given** | | | | | | |
| ***Example*** | **Mon** | **Tue** | **Wed** | **Thu** | **Fri** | **Sat** | **Sun** |
| Breakfast | *Cream and honey added to porridge* |  |  |  |  |  |  |  |
| Mid morning | *Cracker with cheese & butter* |  |  |  |  |  |  |  |
| Lunch | *Cream in soup.*  *Extra butter & cheese on vegetables* |  |  |  |  |  |  |  |
| Mid afternoon | *Fortified milkshake* |  |  |  |  |  |  |  |
| Dinner | *Mayonnaise on potato.*  *Jam in rice pudding* |  |  |  |  |  |  |  |
| Evening | *Horlicks made with fortified milk* |  |  |  |  |  |  |  |

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| **Time of Day** | **Week 4** | **Describe how the food is fortified, or what high calorie snack and/or drink is given** | | | | | | |
| ***Example*** | **Mon** | **Tue** | **Wed** | **Thu** | **Fri** | **Sat** | **Sun** |
| Breakfast | *Cream and honey added to porridge* |  |  |  |  |  |  |  |
| Mid morning | *Cracker with cheese & butter* |  |  |  |  |  |  |  |
| Lunch | *Cream in soup.*  *Extra butter & cheese on vegetables* |  |  |  |  |  |  |  |
| Mid afternoon | *Fortified milkshake* |  |  |  |  |  |  |  |
| Dinner | *Mayonnaise on potato.*  *Jam in rice pudding* |  |  |  |  |  |  |  |
| Evening | *Horlicks made with fortified milk* |  |  |  |  |  |  |  |

**Please send this completed record along with the Dietetics Care Home Referral Form to the dietitians**