## Mealtime Preferences Profile

Client's name		
Assisted by staff member	Date	
General Information  1. Ethnic/religious/cultural foods preferred:		
2. Current diet recommendations: □ Diabetic □ Lower sodium □ Modified textures □ Gluten-free □ Food allergies Explain:	□ Other	
3. What do you need help with when eating? ☐ None ☐ Cutti ☐ Gripping utensils ☐ Other Explain:	, , , , ,	
4. Are you concerned about choking? ☐ Yes ☐ No 5. ☐	o you wear dentures? □ Yes □ No	
6. Do you use special silverware, plates or cups? ☐ Yes ☐ No	Explain:	
7. What size of portions do you prefer? ☐ Small ☐ Average ☐	□ Large	
8. Are you willing to try new foods or recipes? ☐ Yes ☐ No		
Dining Preferences  9. Dining style preferred: □plated (food placed on plate) □ far	nily style <i>(food passed at table)</i>	
10. Where do you like to eat meals? ☐ kitchen ☐ dining room	□ TV/living room □ other	
11. Are disposable dishes/cups/silverware acceptable? ☐ Yes ☐	□No	
BREAKFAST		
12. Do you usually eat breakfast? ☐ Yes ☐ No	If yes, what time?	
13. Preferred breakfast foods:	What do you like to drink?	
LUNCH		
	If yes, what time?	
15. Preferred lunch foods:	What do you like to drink?	
DINNER/SUPPER		
16. Do you usually eat dinner? ☐ Yes ☐ No	If yes, what time?	
17. Preferred dinner foods:	What do you like to drink?	
CNACVC		
SNACKS  18. Do you usually eat snacks? □ Yes □ No	If yes, what time(s)?	
19. What are your favorite snacks?		
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Food Preferences: CHECK the foods you enjoy, CROSS OUT the foods you do not care for or should not eat. WRITE IN foods not on the list.

VEGETABLES	FRUIT	GRAINS (cont.)	PROTEIN	SNACKS/DESSERTS
□ asparagus	□ apples	□ hot cereals	□ beef / hamburger	□ candy
□ avocado	□ applesauce	□ donuts/pastries	□ beans (kidney,	□ chocolates
□ bell pepper	□ bananas	☐ French toast	black, pinto)	□ cake / coffeecake
□ broccoli	□ blueberries	□ grits	□ casseroles	□ cookies
☐ Brussels sprouts	□ cherries	□ gnts □ oatmeal	□ cheese	□ dried fruit
□ cabbage	☐ fruit cocktail	□ pasta/noodles	□ chicken	☐ fresh fruit/veggies
□ carrots		□ pancakes	□ cottage cheese	□ gelatin
□ carrots □ cauliflower	<ul><li>□ grapes</li><li>□ mandarin oranges</li></ul>	□ rice/brown rice	_	□ gelatili □ ice cream
	_	□ white bread	□ eggs □ fish	
□ greens (collards)	□ melon			□ nuts
□ corn	□ oranges	□ wheat bread	□ frozen meals	□ popcorn
□ cucumbers	□ peaches		□ ham	□ potato chips
□ green beans	□ pears		□ lunch meat	□ pretzels
□ lettuce/salad	□ pineapple		□ nuts	□ smoothie
□ mushrooms	□ plums / prunes	BEVERAGES	□ peanut butter	□ snack mix
□ mixed vegetables	□ raisins	□ coffee (reg/decaf)	□ pork	□ snack crackers
□ onions	□ raspberries	□ fruit/veg. juice	□ sausage / bacon	
□ peas	□ strawberries	□ juice drinks	□ seafood / shellfish	
□ potatoes	□ watermelon	□ milk	□ soups / stews	
□ refried beans		□ milk alternatives	□ turkey	
□ spinach/kale		(soy, almond, rice)	□ tofu	
□ sweet potatoes		□ lactose-free milk	□ vegetable proteins	
□ tomatoes	GRAINS	□ soda (reg/diet)	□ wraps	
□ zucchini	□ biscuits	□ tea - hot	□ yogurt	
	□ cold cereals	□ tea - iced		
	□ corn bread	□ water		
	□ crackers			

Special considerations or additional information:	
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MPP v3- 01.10.19