

# SAMPLE FEEDING PROTOCOLS

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**CONFIDENTIAL**

## FEEDING PROTOCOL

Student: Sample Student  
DOB:  
School:

Date:

Developed by Candice McBeth, R.N. (257-1744), Bonnie Jacks, SLP (916-5840, x398), and Marieke Miller. OT (916-4300, #8474).

All questions regarding this protocol or feeding issues related to this student are to be directed to a member of the Feeding Team.

ALLERGIES: No known allergies related to food.

POSITIONING: Wheelchair at 90 degrees with tray on and all supports fastened. Hips, knees and ankles at 90 degrees. Criss-cross shoulder straps into clips on back of wheelchair.

UTENSILS/  
EQUIPMENT: Feeder is required to wear vinyl or latex gloves.  
Adapted built-up curved spoon and fork.  
Scoop plate with a suction base or dycem.  
Cup with attached hard straw.

DO NOT FEED: Raw vegetables, raw fruits/dried fruits( except bananas), seed, nuts, raisins, popcorn or dry crumbly foods.

CONSISTENCY &  
TEXTURE OF  
FOOD/FLUIDS: Soft cooked or canned table foods. He can manage mixed textures the size of orzo noodles and cooked rice foods. Finger foods to be soft, moist and dissolve with two or three chews.  
All fluid to be natural consistency and consumed through a straw.

FEEDING  
PROCEDURE:

1. \_\_\_\_ requires 1 to 1 supervision.
2. Feeder to sit at eye level.
3. Head position to be aligned with body in midline.
4. Present food in midline in dime size bites.
5. Monitor all bites to dime size.
6. Verbal cues to move food to back molars.
6. Monitor self feeding of finger foods to 2 or 3 dime size bites per meal. (Examples; gold fish, cheese puffs, ritz bits.)
7. Utensil use, hand over hand as to maintain midline position.
8. Make sure mouth is empty before next bite.
8. Prepare finger foods into half inch julienne strips and monitor bite to dime size. Guide food strip to back molars.
9. Allow liquids throughout the meal.
10. If coughing-wait until \_\_\_\_ answers before feeding is resumed.







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\_\_\_\_\_ is tactilly defensive regarding oral intake of food. He receives all his nutrition and hydration via the gastrostomy tube. \_\_\_\_\_ is beginning to show interest by tasting a limited number of foods.

ALLERGIES: No known allergies related to food

POSITIONING: Appropriate size table and chair.

UTENSILS/  
EQUIPMENT: Feeder is required to wear vinyl or latex gloves.  
Small mother care spoon.  
Spouted cup (provided by parent)  
Grinder

CONSISTENCY &  
TEXTURE OF  
FOOD/FLUIDS: All foods to be canned fruits or soft cooked table foods ground or mashed to applesauce consistency, moistness and texture.  
All fluid - natural consistency.

<b>Caution:</b>	<ol style="list-style-type: none"><li>1. Do not force eating or drinking.</li><li>2. Do not force new tastes/foods or textures.</li><li>3. Do not force food play.</li></ol>
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FOOD LIKES: Pudding, ice cream, sauces, yogurt, applesauce, catsup, suckers, apple juice, tropical punch, cheese puffs, popsicles, cold and sweet foods.

FEEDING  
PROCEDURE:

1. 1-1 Adult supervision required for all food activities.
2. Prepare all foods to applesauce consistency, moistness and texture.
3. Encourage self feeding/tasting with mother care spoon or fingers.
4. Allow fluids through out the meal.
5. Make eating and drinking a fun positive experience.

MEDICATIONS: As per ODE Guidelines, anyone administering medication is required to complete the PPS medication administration training. This includes prescription and non-prescription medication. Medication to be administered in a form consistent with feeding protocol.







## DAILY FEEDING PROTOCOL

Name Sample Student Teacher Janice Kim

Date Protocol Developed 11-02-99 Specialist Jill Bird, OTR

Cognition/Attention/Pacing Leanna is easily distracted by peers and activity around her in the lunchroom. She needs reminders to slow down and use her protected feeding techniques.

Positioning Encourage use of right hand to hold plate, right elbow resting on table.

Child's Communication Methods Leanna augments her spoken language with a combination of limited signs plus gestures. Good receptive language.

Precautions Food cut to bite-sized. Reminders to eat slowly, prevent "stuffing", use good judgement to select safe textures (avoid crunchy textures, ie carrots, taco shells).

Utensils/Equipment Curved spoon with built-up handle, kept in lunchroom kitchen. Uses cut-away cup but drinks directly from milk carton at lunch.

Foods-Dysphagia, Diet I NA II \_\_\_\_\_ III \_\_\_\_\_ (see attached list) \_\_\_\_\_

Temperature Any

Amount/Spoonful Pre-cut food into safe small bites for Leanna to maximize time for eating.

Liquids: Thin OK Thickened \_\_\_\_\_ What consistency? Drinks milk with lunch, water okay.

Food Likes/Dislikes Personal preference, good judge of what foods she can safely manage.

Food Allergies None identified, eats all foods except hard vegetables ie carrots, celery

Feeding Procedures Leanna wears bandanna shirt-protector to lunchroom. Leanna self-selects lunch, lunchroom staff cuts into safe-sized bites as needed and monitors unsafe food choices. Peer partner opens milk carton at table. Lunchroom assistant gives reminders to eat slowly and use right hand to stabilize plate.

Oral Care and Positioning after Feeding Leanna checks with lunchroom assistant before going to recess to be sure she has wiped her face clean. Leanna brushes teeth in classroom with class mates.

**I have- been trained in the specific feeding needs of this student. I understand this feeding plan can only be modified by the specialist.**

Richard Ralston, Parent

Joan Hicks, Lunchroom Staff

Gary Hill, Lunchroom Assistant

Arlis Thompson, Lunchroom Staff

Lois Lopez, Lunchroom Assistant

**JACKSON ESD FEEDING TEAM**