

**Subject's Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Protocol:** \_\_\_\_\_

**Estimated Time Served:** \_\_\_\_\_

***Please provide an approximate time your subject will need their post-meal.***

Please mark your meal selection A or B:

## **Menu A**

### **Yogurt:**

*Fruit flavored*

### **Cold Cereal:**

*Raisin Bran      Cheerios  
Complete Wheat Bran Flakes      Shredded Wheat*

### **Hot Cereal - Oatmeal:**

*Apple Cinnamon      Banana Nut Barley      Maple Raisin Three Grain*

### **Fresh Fruit:**

*Apple      Banana      Orange      Raisins*

### **Beverage Selection:**

*Bottled Water      Gatorade*

*2% Milk      Skim Milk*

*Slim\*Fast: Milk Chocolate      French Vanilla*

*Orange Juice      Apple Juice      Grape Juice*

*Coffee (cream, sugar or sugar sub)      Herbal Tea      Hot Chocolate*

**-OVER-**

## Menu B

### Entree:

*Sante Fe Style Beans & Rice*      *Thai-Style Chicken*  
*Lorraine Quiche*      *Florentine Quiche*  
*Bean Masala*

### Soup

*Chicken Noodle Soup*

### Fresh Fruit:

*Apple*      *Banana*      *Orange*

### Dessert:

*Chips Ahoy*      *Granola Bar*  
*Fig Newton Cookie*      *Vanilla Ice Cream*

### Beverage Selection:

*Bottled Water*      *Gatorade*  
*2% Milk*      *Skim Milk*  
*Diet Coke*    *Coke*    *Diet Sprite*    *Sprite*  
*Hansen's Raspberry*    *Hansen's Mandarin Lime*  
*Orange Juice*    *Apple Juice*      *Grape Juice*  
*Slim\*Fast: Milk Chocolate*    *French Vanilla*  
*Coffee (cream, sugar or sugar sub)*    *Herbal Tea*    *Hot Chocolate*