

Pediatric Clinical Feeding-Swallowing Evaluation Information Sheet

Welcome to the Spaulding Center for Children's Feeding-Nutrition Program!

In order to address your child's unique feeding-swallowing needs at this assessment please **BRING** the following items to the initial feeding-swallowing evaluation:

- 1. Foods or formulas (breast milk, formula, drinks, feeding tube formula) that your child comfortably consumes with bottles or cups that they use.**
- 2. Drinks that you would like your child to learn how drink.**
- 3. Foods that the child CAN EAT comfortably. (3 foods would be ideal)**
- 4. Foods that you would like your child to learn how to eat. (3 foods)**
- 5. Any medical reports that may help us understand your child's needs.**
- 6. Please complete the Food Intake Record.** The food record is intended to give us a better understanding of your child's eating habits. Record all meals, snacks, drinks, and nutrition supplements your child consumes over a 3-day period. (Please try to include at least one weekday and one weekend day). Record the amount of the item in household measurements (quarts, cups, tablespoons, teaspoons, pounds, ounces). Record the type of food (for example sweetened, lean, sugarless, low sodium, etc.) and how it was prepared (baked, broiled, fried, etc.) in the Description column.

Feel free to bring comfort toys, or preferred feeding utensils.

We look forward to working with you and your family!

Please call 508-833-1060 if you have questions or concerns.

Sincerely,

The Spaulding Center for Children's Feeding-Nutrition Team

Find
your
strength.

