

DIETARY RESTRICTIONS

of Children on Table Food (to reduce amount put on cart):

Blue 1	-	5	Orange 1	-	2
Purple 1	-	4	Green 1	-	3

<u>CLASSROOM NAME</u>	<u>CHILD'S INITIALS</u>	<u>FOOD RESTRICTIONS</u>
Blue 2	KW	No Pork
Blue 4	LR	2% Milk
Blue 5	BG	Must Have Lactaid Milk.
Blue 5	KS	No Fish/Shellfish (Shrimp)
Green 2	SA	Acid Reflux
Green 2	XM	No Eggs, Milk, Peanut Butter or Fish
Green 3A	JL	Lactose Intolerant
Green 3A	AM	Lactose Intolerant, No Peaches or Strawberries
Green 4	MH	No 2% Milk
Green 4	DB	NO EGGS OR TREENUTS
Green 5	TC	Peanut Allergy with Anaphylactic Allergy
Green 5	DJ	No Whole Milk
Green 5	TP	Portagen Powder Formula
Green 5	MW	No citrus fruits
Orange 3A	SA	No Pork
Orange 4	AA	No Pork
Orange 4	DD	Lactose Intolerant, No Apples, Carrots, Bananas, Milk, Starches, or Grain
Orange 5	KA	No Pork
Orange 5	CJ	No Raw Tomatoes
Orange 5	RL	No Pineapple
Orange 5	TT	No carrots
Orange 5	TW	No bactrimp
Orange 5	GW	No Sulfa Products
Purple 1	DM	Amoxicillian
Purple 2	TS	Enfamil Lipil With Iron
Purple 3B	AW	Lactose Intolerant
Purple 4	JM	No Cashews
Purple 4	DU	Peanut Allergy, No Shrimp or Eggs
Purple 5	AM	Will not drink milk – allowed substitutes V-8 and 100% juice (Mom will provide)
Yellow 1	AA	Lactose Intolerant
Yellow 1	RR	No [unclear]
Yellow 2	AD	NO MILK PRODUCTS, Soy Milk Only (in room)
Yellow 2	JM	No Pineapple. Must have Lactose Free WHOLE Milk