## South Carolina Department of Social Services Child and Adult Care Food Program MEAL RECORD FOR INFANTS

Facility/Provider:	Date (MMDDYYYY):

Requirements for Infant Meal Pattern – All serving sizes are minimum quantities of the food components that are required to be served.									
Ages	Breakfast	Lunch or Supper	Snack						
0-5 mos.	4-6 fl. oz. breastmilk or formula	4-6 fl. oz. breastmilk or formula	4-6 fl. oz. breastmilk or formula						
6-11 mos.	6-8 fl. oz. breastmilk or formula; and	6-8 fl. oz. breastmilk or formula; and	2-4 fl. oz. breastmilk or formula; and						
	0-4 tbsp. infant cereal, meat, fish, poultry, whole eggs, cooked dry beans or peas; or 0-2 oz cheese; or 0-4 oz (volume) cottage cheese; or 0-4 oz yogurt; or a combination*; and	0-4 tbsp. infant cereal, meat, fish, poultry, whole eggs, cooked dry beans or peas; or 0-2 oz cheese; or 0-4 oz (volume) cottage cheese; or 0-4 oz yogurt; or a combination*; and	0-1/2 bread slice; or 0-2 crackers; or 0-4 tbsp infant cereal or ready-to-eat cereal*; and 0-2 tbsp vegetable, fruit or both*						
	0-2 tbsp. vegetable, fruit or both*	0-2 tbsp. vegetable, fruit or both*							

**<sup>★</sup>** Required when infant is developmentally ready.

**REMINDER:** Medical statement is required for all exempt formulas, refer to the list of exempt formulas on the FDA website. A completed infant statement must be on file for all infants.

		Child's Name:  Date of Birth:	Meal Count				
BREAKFAST	Breastmilk or Formula						
	Infant Cereal / Meat / Meat Alternate						
	Fruit / Vegetable						
LUNCH	Breastmilk or Formula						
	Infant Cereal / Meat / Meat Alternate						
	Fruit / Vegetable						
SNACK	Breastmilk or Formula						
	Bread Slice / Crackers / Infant Cereal / Ready-to-Eat Cereal						
	Fruit / Vegetable						

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**INSTRUCTIONS:** This form is to be used for recording meals offered to 5 or fewer infants on a daily basis. For this form to be properly documented it must include the following:

- The facility/provider name.
- The current month, date and year for which the meal is served.
- Infant's name and date of birth.
- For each meal service, list the CACFP meal offered or will be offered to the infant. If menus are planned in advance, any substitutions to the planned item must be recorded on the menu. You must identify the kind of formula each infant is using.
- Place a check  $\square$  in the box when the meal is provided to the infant.
- At the end of each day total the checks for each meal service and indicate the total in the Meal Count box.
- At the end of each month staple all daily infant meal records together. For each meal type total the meal counts in the Meal Count box for the month being reported and include the totals on the claim for reimbursement in the applicable meal type (breakfast, lunch, snack).

## **NOTE:**

- 1. An infant statement (DSS Form 3354) must be on file for each enrolled infant.
- 2. A medical statement is required if the infant being served an "Exempt Infant Formula", such as but not limited to Alimentum, Nutramigen, etc. Refer to the FDA website for a list of exempt formulas.
- 3. Infant formula and dry infant cereal must be iron-fortified.
- 4. Breastmilk or formula, or portions of both, may be served; however, it is recommended that breastmilk be served in place of formula from birth through 11 months.
- 5. For infants 6-11 months, a serving of iron fortified infant cereal / meat or meat alternate, fruit or vegetable, bread and crackers is required when the infant is developmentally ready to accept it.
- 6. All servings of bread, crackers and ready-to-eat cereal must be made from whole-grain or enriched meal or flour.

## **RESOURCES:**

- 1. USDA Team Nutrition Feeding Infant, A guide for Use in the Child Nutrition Programs
- 2. Exempt Infant Formulas Marketed in the United States by Manufacturer and Category (http://www.fda.gov/Food/GuidanceRegulation/GuidanceDocumentsRegulatoryInformation/InfantFormula/ucm106456.htm)