

SUGGESTED FEEDING PLAN

State Form 46682 (R2 / 7-00) / BCD 0053

BUREAU OF CHILD DEVELOPMENT
CHILD CARE HEALTH SECTION
402 W. WASHINGTON ST., RM W386
INDIANAPOLIS, IN 46204

INSTRUCTIONS:

Prior to admission, a feeding plan shall be established and written for each infant (age 6 weeks - 12 months) in consultation with the parents and based on the written recommendation of the child's pediatrician or family physician. Feeding plans must be continually updated by physician or parent. (470 IAC 3-4.2-8(b))

The following feeding plan has been recommended for this child.

Name of child	Date of birth (month, day, year)
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Age in Months	Time to Feed	Formula / Food Item and Amount	Special Instructions	Signature and Date of Parent or Physician

Signature of physician	Date signed (month, day, year)
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