

Instructions for Completing the Daily Infant Menu Records

Infants develop at different rates and have different nutritional needs. Due to this, all infants served under the Child and Adult Care Food Program (CACFP) must have separate daily menus for all infant meals and snacks claimed. CACFP Sponsors are required to use the **Oregon Department of Education Child Nutrition Programs (ODE CNP)-developed Daily Infant Menu Forms** unless a Sponsor-developed form has been reviewed and approved by ODE CNP. Use this checklist to see if Daily Infant Menu Records are being completed accurately. A sample Daily Infant Menu Record for the 6-11 month age group is available on the second page.

Daily Infant Menu Checklist: Forms must be complete with the following information.

- Infant's Full Name
- Infant's Date of Birth
- Menu Date (Month/Day/Year)
- Type of Meal – write in Breakfast, Lunch, Supper, AM/PM Snack
- Actual food items served (ex. Infant oat cereal, pureed carrots)
- Name of the formula (F) served or indicate breast milk (B) served
- Whether a formula/breast milk or solid food item was supplied by the parent/guardian – Indicate with 'PS' - *Note that parents/guardians can only supply **one component** of each reimbursable meal/snack
- The box under the 'Complete Meal/Snack?' column is checked when a complete infant meal or snack has been served
- All reimbursable meals and snacks are totaled and the 'Complete (Reimbursable) Meals' box at the bottom is filled in

The ODE CNP-developed Daily Infant Menu Records include space to document all required [Infant Meal Pattern Components](#).

- If using the ODE CNP-developed form, portion sizes do not need to be written on the menu record.
- In the **Daily Infant Menu Record for 0-5 Months**, there are additional spaces for optional solid foods that may be served for infants who are developmentally ready for solid foods prior to 6 months.
- In the **Daily Infant Menu Record for 6-11 Months**, infants who are **developmentally ready** for solid foods must be provided with all required components listed on the form. More information on developmental readiness can be found in the [USDA Feeding Infants in the CACFP Guide](#).
- Infant Formulas must be **iron-fortified**. Infants requiring [FDA Exempt Formulas](#) must have a [Medical Statement](#) on file.
- **Iron-fortified infant cereal (IFIC)** is the only grain item allowed at meals (breakfast, lunch, or supper) for infants 6-11 months. If iron-fortified infant cereal is not desired, a Meat/Meat Alternate (M/MA) may be served for a complete meal. A mix of iron-fortified infant cereal and M/MA for infant meals may also be provided.
- **Breads, crackers, and breakfast cereals** meeting sugar limit requirements may be served at snack only for infants 6-11 months in addition to iron-fortified infant cereal. For a list of allowable grain items and the **ounce equivalent serving sizes**, review the [USDA Feeding Infants Using Ounce Equivalents for Grains Worksheet](#).

Completing a Daily Infant Menu Record: 6-11 Month Sample

Write in the **Meal or Snack that is served** (Breakfast, Lunch, Supper, AM Snack, PM Snack)

Include the **full date** Month/Day/Year

Date: 10/1/202X
(month/day/year)

Infant Menu Record for 6 - 11 Month Old Infants

Meal 1: Breakfast **Meal 2: Lunch** **Snack: PM Snack**

Infant Information	Meal 1: Breakfast				Meal 2: Lunch				Snack: PM Snack			
	Breast Milk or Formula 6-8 fl oz	Infant Cereal or M/MA* 0-4 Tbsp	Veg. or Fruit 0-2 Tbsp	Complete Meal?	Breast Milk or Formula 6-8 fl oz	Infant Cereal or M/MA* 0-4 Tbsp	Veg. or Fruit 0-2 Tbsp	Complete Meal?	Breast Milk or Formula 2-4 fl oz	Crackers, Cereal** 0-½ oz eq	Veg. or Fruit 0-2 Tbsp	Complete Snack?
Name: Baby A Birthdate: 3/1/202X Formula: Kirkland	B <input type="checkbox"/> F <input checked="" type="checkbox"/>	Infant Oat Cereal	Banana	<input checked="" type="checkbox"/>	B <input type="checkbox"/> F <input checked="" type="checkbox"/>	Infant Rice Cereal	Sweet Potato	<input checked="" type="checkbox"/>	B <input type="checkbox"/> F <input checked="" type="checkbox"/>	Cheerios	Peaches	<input checked="" type="checkbox"/>
Name: Baby B Birthdate: 1/21/202X Formula: Similac Advance	B <input type="checkbox"/> PS <input type="checkbox"/> F <input checked="" type="checkbox"/>	Infant Oat Cereal	Banana	<input checked="" type="checkbox"/>	B <input type="checkbox"/> PS <input type="checkbox"/> F <input checked="" type="checkbox"/>	Chicken Dinner PS	Sweet Potato	<input type="checkbox"/>	B <input type="checkbox"/> PS <input type="checkbox"/> F <input checked="" type="checkbox"/>	Cheerios	Peaches	<input checked="" type="checkbox"/>
Name: Baby C Birthdate: 2/8/202X Formula: Breastmilk	B <input checked="" type="checkbox"/> PS <input type="checkbox"/> F <input type="checkbox"/>	Infant Cereal	Banana	<input checked="" type="checkbox"/>	B <input checked="" type="checkbox"/> PS <input type="checkbox"/> F <input type="checkbox"/>	Infant Rice Cereal	Sweet Potato	<input checked="" type="checkbox"/>	B <input type="checkbox"/> PS <input type="checkbox"/> F <input type="checkbox"/>			<input type="checkbox"/>

Write in the **full name** for each infant, along with **birthdate** and **formula name** or **breast milk** received

This is an example of a **reimbursable meal**. Note that 'PS' is written by the formula checkbox indicating a parent/guardian supplied item was served. Actual food items are listed. Because all required components were served, the 'Complete Meal?' box can be checked off.

This is an example of a **non-reimbursable meal**. Note that both the formula and meat/meat alternate (M/MA) were parent/guardian supplied and listed with 'PS.' This exceeded the limit of one parent/guardian supplied item, making the meal non-reimbursable. The checkbox for 'Complete Meal?' is left blank since no meal can be claimed.

Fill out the **number of reimbursable meals and snacks** that were served by counting the number of checkmarks in the 'Complete Meal/ Snack?' columns

Complete (Reimbursable) Meals:
#Breakfast: 3 #Lunch: 2 #Supper: #AM Snack: #PM Snack: 2

**Crackers, Cereal, and Cereal can only be served at snack. To determine a ¼ oz eq serving, check out the Grains Measuring Chart for Infants.

This institution is an equal opportunity provider.