INFANTS
0-12 months

CACFP Sponsor: ________________________________
Beginning Date: ___________________________
Kitchen Name or Location: ____________________________

June 2017
USDA Nondiscrimination Statement

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

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To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

(1) mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;

(2) fax: (202) 690-7442; or

(3) email: program.intake@usda.gov.

This institution is an equal opportunity provider.

(October 14, 2015)
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**Feeding Infants – A Guide for Use in the Child Nutrition Programs**  . . . Available on line:

INTRODUCTION

The Menu Record Book (MRB) has been developed for your use to record breakfast, lunch, supper and snack menus and the quantities of foods used daily. The MRB serves as a basic record for auditing purposes.

The Menu Record Book is the ONLY form of documentation required by the State Agency to ensure child care centers serve meals that meet the USDA meal pattern requirements.

The purpose of the Menu Record Book is to provide you with useful information to:

a. Plan and record menus and portion sizes which meet the USDA meal pattern requirement,

b. Plan and record food items which are creditable following Federal and State guidelines,

c. Record the calculated amounts of food needed for the number of persons planned,

d. Record the actual number of meals served, and

e. Maintain a daily, permanent record.

The MRB MUST be filled out accurately and completely on a daily basis. This book must be available at any time for review by the Children, Youth & Families Department, Child & Adult Care Food Program or any other Federal Program Audit Unit staff. Meals cannot be reimbursed unless they are recorded in the MRB.

Please read the instructions and other important information on the next few pages carefully. This Menu Record Book should be used with the USDA Food Buying Guide for Child Nutrition Programs. If you have any questions about this Menu Record Book or about the Child and Adult Care Food Program, please contact:

Family Nutrition Bureau
3401 Pan American Freeway, N.E. OR Family Nutrition Bureau
Albuquerque, NM 87110 PO Drawer 5160 / PERA Building
(505) 841-4856 OR 1-800-328-2665 Santa Fe, NM 87502-5160
(505) 827-9954 OR 827-9961
Letter to Child and Adult Care Food Program (CACFP) Sponsors:

We are pleased to provide you with our NM CACFP Menu Record Book for Infants.

Feeding infants well is so important in setting the stage for a lifetime of healthy eating habits. Babies need to be talked to, played with, nurtured, held, and fed appropriately. Brain development is affected by the care-giving babies receive and the foods they eat. The nutrients in breast milk (and infant formula), and the tactile sensations of sucking help to stimulate pathways in the brain that control distress. This is one good reason to feed babies when they are hungry. Babies need to develop a sense of trust in the world to meet their needs, both physically and mentally.

Babies also need many nutrients to grow well, but they especially need:

- **Iron** – There is no substitute for iron-fortified infant formula or breast milk and iron-fortified infant cereal during the first year of life. Babies grow quickly, and iron is needed for blood, tissue, and brain development. Iron is an important micronutrient, which is required for many brain processes that help infants and children to concentrate, to think and to learn.

- **Dietary fat** – In infancy, fat supplies the energy for growth, carries fat-soluble vitamins and provides essential fatty acids. Breast milk contains the fatty acids docosahexaenoic acid (DHA) and arachidonic acid (AA). These fatty acids are found in high proportions in the structural lipids of cell membranes, particularly those of the central nervous system. Since babies are growing so rapidly, their brain cells are increasing, which means they need more of these essential fatty acids. Most infant formulas contain linoleic and linolenic acids, which the baby’s body can convert to DHA and AA. Infant formulas and many foods are also now supplemented with DHA; these are creditable in CACFP.

In addition to our NM CACFP Menu Record Book for Infants, USDA has published Feeding Infants – A Guide for use in the Child Nutrition Programs. This guide has up-to-date information on best practices for feeding babies foods which are safe and developmentally appropriate. You can download a copy at http://www.fns.usda.gov/tn/Resources/contents.pdf. Please use this guide and share it with all providers who work with infants. Also keep in mind that it is appropriate to share this information with parents.
Other important reminders about feeding infants and CACFP requirements:

- Meals containing breast milk only are reimbursable.
- Centers may be reimbursed for a meal when a mother directly breastfeeds her infant at the center.
- Child care providers who are on CACFP and who care for infants must provide foods to meet the meal pattern requirements for infants and record the meals in the Menu Record Book for Infants.
- Child care providers must offer at least one creditable infant formula (a “house formula”).
- A parent or guardian may elect to decline the offered infant formula and supply another infant formula or breast milk. In order to document the preference of the parent, every parent or guardian should fill out and sign the form entitled “NM CACFP Infant Feeding Plan/Parent Preference Form,” contained in this manual.
- Starting at 6 months, if an infant is developmentally ready, solid foods are offered in order to serve a reimbursable meal. For snack, bread, crackers, iron-fortified infant cereal or ready-to-eat breakfast cereals, and fruit or vegetable become a required component.
- For infants with special dietary needs / medical conditions or disabilities, parents/guardians should have a recognized medical authority who is a State licensed health care professional authorized to write medical prescriptions complete the form entitled ”NM CACFP Medical Statement to Request Special Meals and/or Accomodations,” contained in this manual.
- Communication with parents, and parent consultation with a pediatrician, are very important when deciding on the timing of introducing new foods to infants.

The NM CACFP Menu Record Book for Infants and the USDA Feeding Infants Guide together contain the tools you need and a wealth of information to help you to feed infants well and successfully on the Child & Adult Care Food Program. If you have concerns, or need further information, please contact the Bureau Nutritionists in Albuquerque at (505) 841-4856.

Nutrition Education and Training Section
Family Nutrition Bureau
3401 Pan American Freeway, NE
Albuquerque, NM 87107
(505) 841-4856
DEFINITIONS

The Children, Youth and Families Department (CYFD) reimburses sponsors participating in the Child and Adult Care Food Program (CACFP) for meals served that meet specific regulations from USDA for reimbursable meals. The regulations that must be followed in order to serve a reimbursable meal include guidelines for how the meals are served and what foods are served. The following definitions are used in the CACFP and it is important that sponsors become familiar with them.

Menu Record Book

The Menu Record Book (MRB) is the official record in which the food served and quantities used to meet the meal requirements for USDA CACFP Meal Pattern are documented.

Creditable Foods

These are foods used to meet the requirements for a reimbursable meal. Foods are creditable based on the following: 1) nutrient content; 2) customary function in a meal; 3) USDA regulations; 4) the Food and Drug Administration's (FDA) Standards of Identity; and 5) Federal and State Agency policies.

Non-Creditable Foods

These are foods that do not meet one or more of the five criteria described above under creditable foods. They are also called "Other Foods" or "Extras". A meal may contain both creditable and some non-creditable foods. Non-creditable foods are allowed, for example, to supply calories to meet the energy needs of growing children, or to improve acceptability of the rest of the meal. However, non-creditable foods may not be used to meet the meal pattern requirements. Some non-creditable foods are also not reimbursable.

Reimbursable Meals

Those meals that are served and meet the following requirements:

1) USDA meal pattern requirements;
2) Federal regulations; and,
3) State Agency policies.

Non-Reimbursable Meals

Those meals that do not meet the criteria for reimbursement.

Non-Reimbursable Foods

These are foods which are both non-creditable (i.e., do not meet the meal pattern guidelines) and non-reimbursable as part of total food costs. Most of these foods are very low in nutritional value and high in cost.

Component

One of five food categories of the USDA Meal Pattern Requirements, including:

1) Milk (only breastmilk or formula, for infants)
2) Meat/Meat Alternates
3) Grains/Breads
4) Vegetables
5) Fruits
Disallowance  A meal or meals that are not approved for reimbursement by the State Agency because:

1) Meals are *not recorded* in the menu record book,

2) Meals are missing one or more of the required components. *All of these meals will be disallowed*; and/or,

3) Documentation in the menu record book and/or food receipts indicates that not enough food was served and/or purchased to give each participant the required minimum amount. In this case, the State Agency uses the USDA Food Buying Guide to determine how many servings of each component were available. *If the number of servings available is less than the number of participants listed on the menu record book, the difference will be the number of meals disallowed.*
Guidance for Feeding Infants on CACFP

Infants change a great deal during the first year of life and their food needs also change a great deal. Always ask the infant’s parents or health care provider for written instructions about what the infant should eat, especially if food allergies are a concern.

Younger infants (0-5 months)

Breast milk or iron fortified infant formula is the best, and only, source of nutrition needed for infants this age. Centers that participate in CACFP must provide a creditable formula – or if a mother is breastfeeding, let her know that you are willing and able to care for breastfed babies. Make sure to discuss the mother’s wishes about supplementing with formula in case the breast fed infant needs an additional amount.

Older infants (6-11 months)

When an infant is about 6 months of age, talk with the parents about introducing solid foods. The introduction of solid foods should be done when the infant shows signs of developmental readiness, including:

- Infant sits with support
- Infant holds head steady and opens mouth when spoon approaches
- Infant’s tongue does not thrust out when the spoon is placed in his mouth.
- Infant swallows easily without choking or gagging.

Caregivers should feed infants baby foods by spoon only. This helps the infant learn to control the solid foods in their mouth. Never use an infant feeder for solid foods or a bottle with a larger hole cut in the nipple. This might cause the infant to choke. When feeding from a spoon, pay attention to signs that the infant is hungry or full. Feed the infant when she/he opens his/her mouth and leans forward. When the infant turns away or does not open his/her mouth, do not force him/her to eat. When the infant is able to sit and hold his/her head up, encourage him/her to begin to take sips from a small plastic cup. The American Academy of Pediatrics recommends feeding iron-fortified infant formula or breast milk as the primary source of nutrition for the first twelve months of life.

Finger feeding helps infants learn many things - textures, eye-hand and hand-to-mouth coordination, and how to grasp and release objects. Being able to pick up small pieces of soft-textured foods and put it in his/her mouth is developmentally appropriate. Advance the texture of foods from pureed to mashed then to finely ground, ground and chopped as the infant shows the ability to handle the different textures. Never let an infant eat or feed themselves alone – the risk of choking at this age is great.

Transitional Feeding on the CACFP Program (12-13 months)

Transitional feeding begins when the eleven month old infant is developmentally ready to try more and different foods – foods that are included on the child CACFP meal pattern such as whole cow’s milk. The child care provider begins introducing small amounts of whole milk, usually mixed with breast milk or iron-fortified infant formula (IFIF), and gradually increases the amount of whole milk while decreasing the amount of breast milk or IFIF until the infant is exclusively taking whole milk. This process can take 4-6 weeks. Breast milk also continues to be creditable as a fluid milk beyond 13 months, while IFIF should be discontinued in the 13th month (unless special medical / nutritional needs exist, with documentation from an authorized medical authority). To be in compliance with CACFP regulations, the child care provider should record breast milk or IFIF on the infant menu before the first birthday. After the first birthday, whole or breast milk should be recorded in the child menu record book. Always remember to ask the parent for instruction on what foods to give, food textures, and developmental readiness for their infant.
# CACFP Infant Meal Pattern

<table>
<thead>
<tr>
<th></th>
<th>Birth to 5 months</th>
<th>6 to 11 months</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Breakfast</strong></td>
<td>4-6 fl. oz. Formula(^1) or Breast milk(^2,3)</td>
<td>6-8 fl. oz. Formula(^1) or Breast milk(^2,3) and 0-4 Tablespoons infant cereal(^1,4,5) meat, fish, poultry, whole eggs, cooked dry beans or peas; or 0-2 oz. cheese; or 0-4 oz. (volume) cottage cheese; 0-4 oz. yogurt(^6), or a combination(^4) and 0-2 Tablespoons fruits or vegetables or both(^4)</td>
</tr>
<tr>
<td><strong>Lunch or Dinner</strong></td>
<td>4-6 fl. oz. Formula(^1) or Breast milk(^2,3)</td>
<td>6-8 fl. oz. Formula(^1) or Breast milk(^2,3) and 0-4 Tablespoons infant cereal(^1,4,5) meat, fish, poultry, whole eggs, cooked dry beans or peas; or 0-2 oz. cheese; or 0-4 oz. (volume) cottage cheese; 0-4 oz. yogurt(^6), or a combination(^4) and 0-2 Tablespoons fruits or vegetables or both(^4)</td>
</tr>
<tr>
<td><strong>Supplement (Snack)</strong></td>
<td>4-6 fl. oz. Formula(^1) or Breast milk(^2,3)</td>
<td>2-4 fl. oz. Formula(^1) or Breast milk(^2,3) and 0-½ slice bread(^4,5) or 0-2 crackers(^4,5) or 0-4 tablespoons infant cereal(^1) or ready to eat cereal(^4,5,7) and 0-2 Tablespoons fruits or vegetables or both(^4)</td>
</tr>
</tbody>
</table>

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1. Infant formula and dry infant cereal must be iron-fortified.
2. Breast milk or formula, or portions of both, may be served; however, it is recommended that breast milk be served in place of formula from birth through 11 months.
3. For some breastfed infants who regularly consume less than the minimum amount of breast milk per feeding, a serving of less than the minimum amount of breast milk may be offered, with additional breast milk offered if the infant is still hungry.
4. A serving of this component is required when the infant is developmentally ready to accept it.
5. A serving of this component must be made from whole-grain or enriched meal or flour.
6. Yogurt must contain no more than 23 grams of total sugars per 6 ounces.
7. Ready to eat breakfast cereals must contain no more than 6 grams of sugar per dry ounce.
Guidance on Creditable Components for Infants
In the NM Child & Adult Care Food Program

<table>
<thead>
<tr>
<th>Component</th>
<th>Description</th>
</tr>
</thead>
</table>
| Iron Fortified Infant Formula or Breastmilk | This component can only be met by serving:  
- Breast milk or  
- Iron-fortified infant Formula |

| Iron Fortified Infant Cereal | Iron-fortified infant cereals in a box or can:  
- Barley cereal  
- High protein cereal  
- Mixed cereal  
- Oatmeal cereal  
- Rice cereal  
- Jarred “wet” infant cereals or cereal/fruit mixtures are not reimbursable!  
- Cereals designed for older children and adults are not reimbursable – such as Cream of Wheat, Malt o Meal |

| Vegetables and Fruits | ✓ Commercially-prepared vegetable or fruit baby food:  
- “Jarred” baby foods, where the first ingredient is a fruit or vegetable and the food item is not a pudding or dessert.  
- Mixtures of more than one fruit for the fruit component or more than one vegetable is creditable, as long as water is NOT listed first on the ingredient statement.  
- Home-prepared vegetable or fruit baby food:  
- Fruits or vegetables for infants can be fresh, frozen, canned, or jarred. Home-prepared fruits/vegetables should be soft-cooked and strained, mashed, chopped, or diced to meet the texture needs of the infant.  
- Mixtures of meats and/or grains with vegetables and/or fruits are NOT creditable.  
- Baby food “dinners” are NOT creditable. |

| Meat & Meat Alternates | This component includes USDA-inspected meats such as lean beef, pork, lamb, veal, chicken, turkey and liver, or boneless fin fish, whole eggs, natural cheese, cottage cheese, and dried beans or peas.  
- Commercially-prepared meats made for baby:  
- “Jarred” baby foods, containing only plain, strained meat is creditable.  
- Mixtures of meats and/or grains with vegetables and/or fruits are not creditable.  
- Baby food “dinners” are not creditable.  
- Home-prepared meat baby food:  
- Meats should be well-cooked and lean, then pureed, strained, mashed, chopped or diced to meet the texture needs of the infant.  
- Do not feed shellfish (shrimp, crab, lobster, crawfish, scallops, oysters, or clams) to babies less than one year of age. These types of seafood can cause severe allergic reactions in some babies.  
- Parents may want to limit the amount of tuna fed to their infant to once per week due to the methyl-mercury content. See http://www.fda.gov for more information.  
- Fresh water-sport fish caught in New Mexico may not be safe to feed to babies less than one year of age. Visit http://www.nmenv.state.nm or contact the NM Environment Dept. for more information. |

| Grains/Breads | ✓ Iron Fortified Infant Cereals, or  
- Ready to Eat low-sugar cereal (i.e., Cheerios), or  
- Whole-grain breads (without nuts, seeds, or hard pieces of whole grain kernels), or  
- Whole-grain crackers - low in salt, plain snack crackers made without nuts, seeds or hard pieces of whole grain kernels; served in a form to be eaten as a finger foods. |
### Not Creditable Foods for Infants in the New Mexico CACFP

**Not Creditable for Infants of Any Age**

| Iron Fortified Formula or Breastmilk | Cow’s milk of any kind: whole, low-fat, or skim  
Evaporated Cow’s Milk, or home-prepared cow’s milk formula  
Goat’s Milk  
Nonfat Dry Milk  
Rice Milk  
Soy Milk, usually called soy beverage,  
Sweetened Condensed Milk  
Imitation Milks, including those made from rice, nuts, or non-dairy ingredients |
| Iron Fortified Infant Cereal | Cereal and fruit mixtures in a box, can or jar:  
(for example: Rice Cereal with Bananas or Infant Oatmeal with Apples)  
Hot cereals designed for older children and adults:  
(for example: Cream of Wheat, Malt O Meal, Quick Cooking/Rolled Oats, Cream of Rice, etc.) |
| Fruit/Vegetable | All fruit desserts, homemade or in a jar or can (for example: Dutch Apple Dessert, Vanilla Custard)  
Fruits in a jar which list water as the first ingredient  
Vegetables in a jar which list water as the first ingredient  
Combinations of grains with veggies and/or fruit that is baked or “puffed” and designed to be finger foods for babies.  
Fruit or vegetable juice |
| Meats/Meat Alternates | Infant, junior or toddler dinners or combination foods in a jar or can  
Fish sticks or commercially breaded fish products  
Fish, canned with bones (such as sardines),  
Home canned meats  
Hot dogs; sausages or meat sticks, any type  
Peanut butter, other nut butters  
Yogurt with more than 23 grams of sugar per 6 oz.  
Processed or imitation cheeses, cheese foods, cheese spreads |
| Grains/Breads | Hot cereals intended for children or adults, such as Malt-O-Meal or Cream of Wheat  
Infant Puffed Cereal  
Bread or Cracker-type products made for infants that pose a choking risk or are sweetened, such as: Sweet crackers, such as: Graham, Animal, Nilla Wafers, etc.  
Bread or crackers of any type that are made with honey  
Cookies, such as: Animal, Arrowroot, Teething Cookies, or Toddler Cookies, etc.  
Crackers or breads with seeds, nut pieces or whole-grain kernels such as wheat berries  
Granola bars  
Ready-to-eat cereals with more than 6 grams of sugar per dry ounce  
Snack potato or corn chips, pretzels, or cheese twists |
April 10, 2015

Infant Feeding in the CACFP: DHA Enriched Foods

To: Regional Director
   Child Nutrition Programs
   All Regions

Docosahexaenoic acid, known as DHA, is an omega-3 fatty acid that may be added to infant formulas and infant foods. While the science is mixed on the benefits of DHA and ARA (arachidonic acid, another omega-3 fatty acid), some studies suggest they may have positive effects on visual function and neural development. For these reasons, manufacturers and consumers are interested in adding DHA and ARA to infant formula and food products.

Previously, the service of any infant foods containing DHA was prohibited due to the concern that the source of DHA in infant foods, such as egg yolk, and other ingredients, additives, or extenders in those foods may result in a food sensitivity or a food allergy (Baby Foods and Vegetables with DHA, December 19, 2002). However, DHA itself cannot cause allergic reactions and, according to the American Academy of Pediatrics, there is no current convincing evidence to delay the introduction of foods considered to be highly allergenic, including eggs. Based on this, FNS is now allowing single-ingredient infant foods containing DHA to be creditable in the CACFP infant meal pattern. Child care centers and day care home providers may now serve infant foods containing DHA, as long as they meet all other crediting requirements.

State agencies are reminded to distribute this information to Program operators immediately. Program operators should direct any questions regarding this memorandum to the appropriate State agency. State agency contact information is available at http://www.fns.usda.gov/cnd/Contacts/StateDirectory.htm. State agencies should direct questions to the appropriate FNS Regional Office.

ANGELA KLINE
Director
Policy and Program Development Division
Child and Adult Care Food Program
May 17, 2002

Obligations of Child Care Centers and Day Care Homes to Offer Infant Meals in the Child and Adult Care Food Program (CACFP)

To: Regional Director
   Child Nutrition Programs
   All Regions

This memorandum clarifies that child care centers and family day care homes participating in CACFP must offer program meals to all eligible children who are enrolled for care in their facilities. We are providing this explanation to ensure that all children, including infants, who are enrolled for child care, have access to CACFP meals.

A facility may not avoid this obligation by stating that the infants are not “enrolled” in CACFP, or by citing some logistical or cost barrier to offering an infant meal. Decisions on offering program meals must be based on whether the child is enrolled for care, not whether the child is enrolled for CACFP. Section 226.2 of the CACFP regulations defines an enrolled child as “a child whose parent or guardian has submitted to an institution a signed document which indicates that the child is enrolled for child care.”

As long as the infant is in care during the meal service period, the facility must offer the infant a meal that complies with program requirements. As with all children in CACFP facilities, an infant’s parent or guardian may decline what is offered, and supply the infant’s meals instead. The key factor is that the infant must be provided access to CACFP meals.

We are aware that there are States that are not currently following this policy. Please advise State agencies to ensure that their CACFP institutions and facilities come into compliance within a reasonable amount of time. If you have additional questions about this issue, please contact Melissa Rothstein or Susan Ponemon.

STANLEY C. GARNETT
Director
Child Nutrition Division
NM CACFP Infant Feeding Plan / Parent Preference Form

Name of Infant ___________________________ Date of Birth ____________

As part of our participation in the Child and Adult Care Food Program (CACFP), the __________________________ child care center will work with you to provide your child the healthiest start in life! Babies only need mom's milk or formula for the first six months of life. From zero to 6 months, we will feed your baby breast milk or formula provided by you, or we will provide __________________________ iron-fortified formula. At 6 months, if your baby shows s/he is developmentally ready (see chart on back) we will start feeding infant foods with your permission – unless you bring a note requesting otherwise, after consultation with your baby’s doctor. We will increase textures as your baby develops skills. If you provide breast milk, formula or baby foods, please bring it in clean containers labeled with name and date. This child care center feeds babies on demand – not by the clock, but by watching their hunger & fullness cues. **NOTE: You can update this feeding plan at any time.**

Please mark your preference (choose all that apply by initialing in the appropriate space)

<table>
<thead>
<tr>
<th>Today's Date: Birth – 5 months</th>
<th>Today's Date: 6-11 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>I will bring expressed breast milk for my infant.</td>
<td></td>
</tr>
<tr>
<td>I will come to the center to breastfeed my infant.</td>
<td></td>
</tr>
<tr>
<td>I want the center to provide formula for my infant.</td>
<td></td>
</tr>
<tr>
<td>I will bring formula for my infant. The formula is:</td>
<td></td>
</tr>
<tr>
<td>My baby has special dietary/medical needs. Please follow the instructions on the doctor’s note I will bring.</td>
<td></td>
</tr>
<tr>
<td>Answer at 6 months:</td>
<td></td>
</tr>
<tr>
<td>I authorize you to feed infant cereals and pureed foods starting at 6 months.</td>
<td></td>
</tr>
<tr>
<td>I prefer to bring baby foods myself (homemade, organic, vegan, kosher, halal, special dietary needs, etc.)</td>
<td></td>
</tr>
</tbody>
</table>

Please tell us more about how your baby eats now.

<table>
<thead>
<tr>
<th>Today's date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. What does your baby eat most of the time (breast milk, formula)?</td>
</tr>
<tr>
<td>2. Do you give any other liquid(s)? YES NO</td>
</tr>
<tr>
<td>Explain:</td>
</tr>
<tr>
<td>3. Does your baby take any solid foods now? YES NO</td>
</tr>
<tr>
<td>Explain:</td>
</tr>
<tr>
<td>4. About how much and how often does your baby usually eat?</td>
</tr>
<tr>
<td>5. If you plan to nurse your baby at the center, please describe when so we can plan feeding times accordingly:</td>
</tr>
<tr>
<td>Explain:</td>
</tr>
<tr>
<td>6. If your child is taking breast milk, what would you like us to do if we run out of pumped milk?</td>
</tr>
<tr>
<td>Explain:</td>
</tr>
<tr>
<td>7. Does your baby have any food allergies or sensitivities? YES NO</td>
</tr>
<tr>
<td>Explain:</td>
</tr>
<tr>
<td>8. Does your baby have any problems with feedings like choking or spitting up a lot? YES NO</td>
</tr>
<tr>
<td>Explain:</td>
</tr>
<tr>
<td>9. Is there anything else we should know about your baby’s eating habits? YES NO</td>
</tr>
<tr>
<td>Explain:</td>
</tr>
<tr>
<td>10. Would you like us to give your baby a full feeding before pick up? YES NO</td>
</tr>
<tr>
<td>Explain:</td>
</tr>
</tbody>
</table>

Signature of Parent/Guardian ___________________________ Date ____________

NM CACFP - June 2016
# Feeding the Baby for the First Year

Babies grow quickly during the first year of life and make many changes in the types of foods and textures of foods they are able to eat. As babies grow and develop, watch for the following signs which will tell you when they are ready for a new food.

<table>
<thead>
<tr>
<th>BABY’S AGE:</th>
<th>WHEN BABIES CAN:</th>
<th>SERVE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birth through 5 Months</td>
<td>• Only suck and swallow</td>
<td>LIQUIDS ONLY</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Breastmilk</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Infant formula with iron</td>
</tr>
<tr>
<td>6 months</td>
<td>• Draw in upper or lower lip as spoon is removed from mouth</td>
<td>ADD SEMISOLID FOODS</td>
</tr>
<tr>
<td></td>
<td>• Move tongue up and down</td>
<td>• Infant cereal with iron</td>
</tr>
<tr>
<td></td>
<td>• Sit up with support</td>
<td>• Strained vegetables*</td>
</tr>
<tr>
<td></td>
<td>• Swallow semisolid foods without choking</td>
<td>• Strained fruit*</td>
</tr>
<tr>
<td></td>
<td>• Open the mouth when they see food</td>
<td>*may be started later in the age range</td>
</tr>
<tr>
<td></td>
<td>• Drink from a cup with help, with spilling</td>
<td></td>
</tr>
<tr>
<td>8 months through 11 months</td>
<td>• Move tongue from side to side</td>
<td>ADD MODIFIED TABLE FOODS</td>
</tr>
<tr>
<td></td>
<td>• Begin spoon feeding themselves with help</td>
<td>• Mashed or diced soft fruit</td>
</tr>
<tr>
<td></td>
<td>• Begin to chew and have some teeth</td>
<td>• Mashed or soft vegetables</td>
</tr>
<tr>
<td></td>
<td>• Begin to hold food and use their fingers to feed themselves</td>
<td>• Mashed or whole cooked egg</td>
</tr>
<tr>
<td></td>
<td>• Drink from a cup with help, with less spilling</td>
<td>• Strained meat/poultry</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Mashed cooked beans or peas</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Cheese, cottage cheese, yogurt</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Pieces of soft bread</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Crackers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Breastmilk or iron-fortified formula in a cup (<em>no juice</em>)</td>
</tr>
</tbody>
</table>

Adapted from Feeding Infants: A Guide for Use in the Child Nutrition Programs, p. 13

NM CACFP – June 2016
Formulario del CACFP de NM:

Plan de Alimentación Infantil / Preferencia de Padres

Nombre del bebé _________________________________________ Fecha de nacimiento:______________________

Como parte de nuestra participación en el Programa de Alimentación de Niños y Adultos (CACFP, por sus siglas en inglés), el centro de guardería __________________________ trabajará con usted para fomentar el empiezo más saludable a la vida. Los bebés necesitan apenas la leche materna o fórmula durante los primeros 6 meses de vida. De cero a 6 meses, nuestro centro alimentará a su bebé con solo leche materna o la fórmula que traiga usted, o si no la traiga, proveeremos la fórmula __________, fortificada con hierro. A los 6 meses, si su bebé muestra señales de estar listo por sus hitos de desarrollo (véase la gráfica detrás), empezaremos a alimentarle comidas infantiles con su permiso – a menos que traiga usted una carta pidiendo otra cosa, después de consultarle al pediatra de su bebé. Aumentaremos las texturas de comidas según su bebé desarrolla habilidades. Si usted provee leche materna, fórmula, o comidas infantiles, favor de traerlas en recipientes limpios y marcados con nombre y fecha. Nuestro centro alimenta a los bebés a libre demanda – no por el reloj, sino por mirar sus señales de hambre y satisfacción.

Nótese: Usted puede actualizar este plan en cualquier momento.

<table>
<thead>
<tr>
<th>Favor de indicar su preferencia</th>
<th>Fecha actual:</th>
<th>Fecha actual:</th>
</tr>
</thead>
<tbody>
<tr>
<td>De nacimiento a 5 meses</td>
<td>De 6 a 11 meses</td>
<td></td>
</tr>
</tbody>
</table>

- Yo traeré leche materna exprimida para mi bebé.
- Yo vendré al centro para amamantar a mi bebé.
- Quisiera que el centro provea fórmula a mi bebé.
- Yo traeré fórmula para mi bebé. La fórmula es: __________________________
- Mi bebé tiene necesidades dietéticas/médicas especiales. Por favor, sigan las instrucciones en la receta del doctor que yo traeré.

<table>
<thead>
<tr>
<th>Responder a los 6 meses:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yo les autorizo a alimentarle a mi bebé con cereales infantiles y comidas en puré, a partir de los 6 meses.</td>
</tr>
<tr>
<td>Yo prefiero traer comidas infantiles (caseras, orgánicas, veganas, kosher, halal, necesidades dietéticas especiales, etc.)</td>
</tr>
</tbody>
</table>

Favor de comentarnos más acerca de los hábitos actuales de comer de su bebé. Fecha actual:

1. ¿Qué toma su bebé la mayoría del tiempo (leche materna, fórmula)?

2. ¿Le da algunos líquidos más? Sí NO
   Explicar:

3. ¿Toma su bebé algunas comidas infantiles ahora? Sí NO
   Explicar:

4. ¿Qué tanto y cada cuánto come su bebé por lo general?

5. Si piensa amamantar a su bebé al centro, favor de contamos cuando para que podamos programar sus tomos conforme a sus planes:
   Explicar:

6. Si su bebé toma leche materna, ¿qué quiere que hagamos si se nos acaba la leche exprimida?
   Explicar:

7. ¿Tiene su bebé alguna alergia o intolerancia a comida? Sí NO
   Explicar:

8. ¿Tiene su bebé algún problema para comer, como atragantarse o vómitos seguidos? Sí NO
   Explicar:

9. ¿Hay algo más que debiéramos saber acerca de los hábitos de comer de su bebé? Sí NO
   Explicar:

10. ¿Le gustaría que le diéramos una toma completa a su bebé antes de que le recoge? Sí NO
    Explicar:

______________________________    ____________________
Firma de Padre/Madre o Tutor       Fecha

NM CACFP – Junio 2016
**Alimentar al bebé durante el primer año**

Los bebés crecen muy rápido durante el primer año de vida y experimentan muchos cambios del tipo y textura de las comidas que pueden comer. Según crezcan y desarrollen los bebés, nótense las siguientes señales, que le indicarán que están listos para una comida nueva.

<table>
<thead>
<tr>
<th>EDAD DEL BEBÉ:</th>
<th>CUANDO PUEDAN:</th>
<th>SIRVA:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nacimiento a 6 meses</td>
<td>• Sólo chupar y tragar</td>
<td>SÓLO LIQUIDOS</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Leche materna</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Fórmula infantil fortificada con hierro</td>
</tr>
<tr>
<td>6 meses</td>
<td>• Chuparse adentro el labio superior o inferior en cuanto se le quita una cuchara de la boca</td>
<td>AÑADE COMIDAS EN PURÉ</td>
</tr>
<tr>
<td></td>
<td>• Mover la lengua desde arriba hacia abajo</td>
<td>• Cereal infantil fortificada con hierro</td>
</tr>
<tr>
<td></td>
<td>• Sentarse con apoyo</td>
<td>• Vegetales en papilla*</td>
</tr>
<tr>
<td></td>
<td>• Tragar comidas blanditas/molidas sin atragantarse</td>
<td>• Frutas en papilla*</td>
</tr>
<tr>
<td></td>
<td>• Abrir la boca cuando vea comida</td>
<td>*pueden introducirse más tarde en el rango de edad</td>
</tr>
<tr>
<td></td>
<td>• Tomar de un vasito con ayuda, derramando</td>
<td></td>
</tr>
<tr>
<td>8 a 11 meses</td>
<td>• Mover la lengua de un lado al otro</td>
<td>AÑADE COMIDAS SOLIDAS MODIFICADAS</td>
</tr>
<tr>
<td></td>
<td>• Empezar a alimentarse si mismo con una cuchara, con ayuda</td>
<td>• Fruta blandita machucada o picada</td>
</tr>
<tr>
<td></td>
<td>• Empezar a masticar y a tener algunos dientes</td>
<td>• Vegetales machucados o blanditos</td>
</tr>
<tr>
<td></td>
<td>• Empezar a coger comida con los dedos y alimentarse a sí mismo con los dedos</td>
<td>• Huevo entero, cocido</td>
</tr>
<tr>
<td></td>
<td>• Tomar de un vasito con ayuda, derramando menos</td>
<td>• Carnes, pescado o aves en puré o bien molidos</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Frijoles o chicharos machucados o cocidos</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Queso, requesón, yogurt</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Pedacitos blanditos de pan</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Galletas sin azúcar o cereales listos para comer</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Leche materna o fórmula en vaso (no sirva jugo)</td>
</tr>
</tbody>
</table>
**CACFP MEDICAL STATEMENT TO REQUEST SPECIAL MEALS AND/OR ACCOMMODATIONS**

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Sponsor Name</td>
<td>2. Center Name and Location</td>
<td>3. Telephone Number</td>
</tr>
<tr>
<td>4. Name of Child or Adult Participant</td>
<td>5. Date of Birth</td>
<td></td>
</tr>
<tr>
<td>6. Name of Parent or Guardian</td>
<td>7. Telephone Number</td>
<td></td>
</tr>
<tr>
<td>8. Check One:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Participant has a disability or a medical condition that requires a special meal and/or accommodation. Sponsors participating in CACFP must comply with requests for special meals and any adaptive equipment. Parents or guardians may supply only one of the required meal components which meets the meal pattern requirements for children with disabilities. Centers/home sponsors must supply all the remaining meal components. <strong>Licensed physicians or state-recognized medical authorities who are authorized to write medical prescriptions must sign form.</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Participant does not have a disability, but is requesting a special meal or accommodation due to a food intolerance or other medical reason. Food preferences are not an appropriate use of this form. Schools and agencies participating in federal nutrition programs are encouraged to accommodate reasonable requests. <strong>Licensed physicians and state-recognized medical authorities who authorized to write medical prescriptions must sign form.</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Participant does not have a disability, but is requesting a special accommodation for a fluid milk substitute that meets the nutrient standards for non-dairy beverages offered as milk substitutes. Sponsors are encouraged to accommodate reasonable request. Please complete the back of this form.</td>
<td></td>
</tr>
<tr>
<td>9. Disability or medical condition requiring a special meal or accommodation:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. If participant has a disability, provide a brief description of his/her major life activity affected by the disability:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Diet prescription and/or accommodation (please describe in detail to ensure proper implementation-use extra pages as needed):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Indicate food texture for above participant:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Regular</td>
<td>□ Chopped</td>
</tr>
<tr>
<td>13. Foods (components) to be omitted and substitutions foods (components) meeting the CACFP meal pattern requirements. For example, omit cheese and substitute egg to meet the meal pattern requirement. You may attach a sheet with additional information as needed:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A. Food (Component) To Be Omitted</td>
<td>B. Food (Component) Substitutions</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Signature of Parent</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. Signature of Recognized Medical Authority*</td>
<td>16. Printed Name</td>
<td>17. Telephone Number</td>
</tr>
</tbody>
</table>

*A signature by a recognized medical authority (individual who can write a medical prescription) is required for participants with a disability. Parent/legal guardian signature is acceptable for fluid milk substitution for a child with special medical or dietary needs other than a disability (see back of form). The information on this form should be updated to reflect the current medical and/or nutritional needs of the participants.

June 2017
DAILY INFANT MEAL RECORD
Instructions for Completing Daily Infant Meal Record for Infants

The following information must be recorded on the CACFP Meal Form:

1. **Date**
   Record the date menu was served.

2. **Completed By**
   Record the name of the person completing the form.

3. **Name(s) of Infant(s)**
   Record the names of infants eating meals in appropriate age table.

4. **Completion of Columns**
   - Using a (√), indicate iron-fortified formula/breast milk or iron-fortified cereal was served.
   - Record the kind of vegetable/fruit, grain/bread, or meat/meat alternate served starting around 6 months, when infants are developmentally ready (this includes substitutions due to special dietary needs, with a doctor's note).
   - All formula and infant cereal served must be iron-fortified (not low-iron).

5. **Daily Infant Totals**
   Complete daily infant totals for each meal, each day in the box provided.

Please refer to the sample page opposite for the following:

**Birth through 5 months**
Scott is 2 months old, Dante is 3 months, and Hannah is 4 months. At this age, all three infants only need to be fed breast milk or iron fortified formula. Note that mom comes to the center on her lunch break to breastfeed Dante; this meal is creditable even though staff did not provide the feeding.

**6 through 11 months**
As you'll see in this age range, there can be a lot of difference in the textures and types of foods each infant can be served. For example, Maxine has just turned 6 months old and takes breast milk; she is also being introduced to iron fortified infant cereal (IFIC). Marcus is almost 7 months old and has already moved on from IFIC to pureed, mashed and soft foods. Tomas and Nadia are 10-11 month old babies, and are starting to self-feed. So, in addition to iron fortified formula or breast milk at each meal, they are able to safely eat a wider variety of solid foods prepared by the center cook from the meals for older kids, like shredded meats and whole soft fruits and vegetables cut up into small pieces, as well as ready-to-eat cereals and breads or crackers. It's great that each baby can eat and enjoy the foods they are ready for, according to their own development!
### NM CACFP DAILY INFANT MEAL RECORD

**Date:** __________    **January 24, 2018**

**Completed by:** _______ **Melina Goodsitter**

**INSTRUCTIONS:**

- Record the names of the infant(s) eating the meal.
- Use a (✓) where indicated for formula or breast milk.
- Record (IFIC) the kind of fruit/vegetable, grain/bread or meat/meat alternate served (start when 6–11 mo. olds are developmentally ready, with parent's ok).
- All formula & infant cereal served must be iron fortified.
- Record Daily Infant Totals each day.
- For special dietary needs with doctor's note, record alternative food items in the space for the component they substitute.

### NAMES

#### Birth—5 months

<table>
<thead>
<tr>
<th>NAMES</th>
<th>Breakfast</th>
<th>A.M. Snack</th>
<th>Lunch</th>
<th>P.M. Snack</th>
<th>Supper</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scott (2 mo.)</td>
<td>1. Formula or Breast Milk - 4 – 6 oz (✓)</td>
<td>1. Formula or Breast Milk - 2 – 4 oz (✓)</td>
<td>1. Formula or Breast Milk - 6 – 8 oz (✓)</td>
<td>1. Formula or Breast Milk - 2 – 4 oz (✓)</td>
<td>1. Formula or Breast Milk - 6 – 8 oz (✓)</td>
</tr>
<tr>
<td>Dante (3 mo.)</td>
<td>1. Infant Cereal - 0 – 4 T AND/OR Meat/Meat Alternate: Meat, Fish, Poultry, Whole Egg, or Cooked Dry Beans/Peas - 0 – 4 T; or Cheese - 0 – 2 oz; or Cottage Cheese - 0 – 4 oz; or Yogurt - 0 – 4 oz</td>
<td>1. Infant Cereal - 0 – 4 T; or whole grain bread - 0 – 1/2 slice; or whole grain / enriched crackers - 0 – 2 crackers; or ready-to-eat breakfast cereal - 0 – 4 T</td>
<td>1. Infant Cereal - 0 – 4 T AND/OR Meat/Meat Alternate: Meat, Fish, Poultry, Whole Egg, or Cooked Dry Beans/Peas - 0 – 4 T; or Cheese - 0 – 2 oz; or Cottage Cheese - 0 – 4 oz; or Yogurt - 0 – 4 oz</td>
<td>1. Infant Cereal - 0 – 4 T AND/OR Meat/Meat Alternate: Meat, Fish, Poultry, Whole Egg, or Cooked Dry Beans/Peas - 0 – 4 T; or Cheese - 0 – 2 oz; or Cottage Cheese - 0 – 4 oz; or Yogurt - 0 – 4 oz</td>
<td>1. Fruit and/or Vegetable - 0 – 2 T</td>
</tr>
<tr>
<td>Hannah (3 mo.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 6—11 months

<table>
<thead>
<tr>
<th>NAMES</th>
<th>Breakfast</th>
<th>A.M. Snack</th>
<th>Lunch</th>
<th>P.M. Snack</th>
<th>Supper</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maxine (6 mo.)</td>
<td>1. Formula or Breast Milk - 4 – 6 oz (✓)</td>
<td>1. Fruit and/or Vegetable - 0 – 2 T</td>
<td>1. Fruit and/or Vegetable - 0 – 2 T</td>
<td>1. Fruit and/or Vegetable - 0 – 2 T</td>
<td>1. Fruit and/or Vegetable - 0 – 2 T</td>
</tr>
<tr>
<td>Marcus (7 mo.)</td>
<td>1. WW bread</td>
<td>1. WW bread</td>
<td>1. WW bread</td>
<td>1. WW bread</td>
<td>1. WW bread</td>
</tr>
</tbody>
</table>

### Daily Infant Totals:

<table>
<thead>
<tr>
<th></th>
<th>Breakfast</th>
<th>A.M. Snack</th>
<th>Lunch</th>
<th>P.M. Snack</th>
<th>Supper</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maxine (6 mo.)</td>
<td>3</td>
<td>5</td>
<td>7</td>
<td>5</td>
<td>2</td>
</tr>
<tr>
<td>Marcus (7 mo.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tomas (10 mo.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nadia (11 mo.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
# NM CACFP DAILY INFANT MEAL RECORD

**Date:** _________________________________________________  
**Completed by:** ________________________________________

**INSTRUCTIONS:**

- Record the names of the infant(s) eating the meal.
- Use a (√) where indicated for formula or breast milk.
- Record ( ) the kind of fruit/vegetable, grain/bread or meat/meat alternate served (start when 6–11 mo. olds are developmentally ready, with parent’s ok).
- All formula & infant cereal served must be iron fortified.
- Record Daily Infant Totals each day.
- For special dietary needs with doctor’s note, record alternative food items in the space for the component they substitute.

### NAMES

#### 6—11 months

<table>
<thead>
<tr>
<th>Breakfast</th>
<th>A.M. Snack</th>
<th>Lunch</th>
<th>P.M. Snack</th>
<th>Supper</th>
</tr>
</thead>
</table>
| 1. Formula or Breast Milk - 4 – 6 oz (√)  
2. Infant Cereal - 0-4 T AND/OR  
Meat/Meat Alternate: Meat, Fish, Poultry, Whole Egg, or Cooked Dry Beans/Peas - 0-4 T; or Cheese - 0-2 oz; or Cottage Cheese - 0-4 oz; or Yogurt - 0-4 oz  
3. Fruit and/or Vegetable - 0-2 T | 1. Formula or Breast Milk - 2-4 oz  
2. Infant Cereal - 0-4 T; or whole grain bread - 0-1/2 slice; or whole grain / enriched crackers - 0-2 crackers; or ready-to-eat breakfast cereal - 0-4 T  
3. Fruit and/or Vegetable - 0-2 T | 1. Formula or Breast Milk - 6-8 oz  
2. Infant Cereal - 0-4 T AND/OR  
Meat/Meat Alternate: Meat, Fish, Poultry, Whole Egg, or Cooked Dry Beans/Peas - 0-4 T; or Cheese - 0-2 oz; or Cottage Cheese - 0-4 oz; or Yogurt - 0-4 oz  
3. Fruit and/or Vegetable - 0-2 T | 1. Formula or Breast Milk - 2-4 oz  
2. Infant Cereal - 0-4 T; or whole grain bread - 0-1/2 slice; or whole grain / enriched crackers - 0-2 crackers; or ready-to-eat breakfast cereal - 0-4 T  
3. Fruit and/or Vegetable - 0-2 T |

### NAMES

#### Birth—5 months

<table>
<thead>
<tr>
<th>Breakfast</th>
<th>A.M. Snack</th>
<th>Lunch</th>
<th>P.M. Snack</th>
<th>Supper</th>
</tr>
</thead>
</table>
| 1. Formula or Breast Milk - 4 – 6 oz (√)  
2. Infant Cereal - 0-4 T AND/OR  
Meat/Meat Alternate: Meat, Fish, Poultry, Whole Egg, or Cooked Dry Beans/Peas - 0-4 T; or Cheese - 0-2 oz; or Cottage Cheese - 0-4 oz; or Yogurt - 0-4 oz  
3. Fruit and/or Vegetable - 0-2 T | 1. Formula or Breast Milk - 2-4 oz  
2. Infant Cereal - 0-4 T; or whole grain bread - 0-1/2 slice; or whole grain / enriched crackers - 0-2 crackers; or ready-to-eat breakfast cereal - 0-4 T  
3. Fruit and/or Vegetable - 0-2 T | 1. Formula or Breast Milk - 6-8 oz  
2. Infant Cereal - 0-4 T AND/OR  
Meat/Meat Alternate: Meat, Fish, Poultry, Whole Egg, or Cooked Dry Beans/Peas - 0-4 T; or Cheese - 0-2 oz; or Cottage Cheese - 0-4 oz; or Yogurt - 0-4 oz  
3. Fruit and/or Vegetable - 0-2 T | 1. Formula or Breast Milk - 2-4 oz  
2. Infant Cereal - 0-4 T; or whole grain bread - 0-1/2 slice; or whole grain / enriched crackers - 0-2 crackers; or ready-to-eat breakfast cereal - 0-4 T  
3. Fruit and/or Vegetable - 0-2 T |

### Daily Infant Totals:

NM CACFP DAILY INFANT MEAL RECORD

Date: _________________________________________________
Completed by: ________________________________________

INSTRUCTIONS:
- Record the names of the infant(s) eating the meal.
- Use a (√) where indicated for formula or breast milk.
- Record (  ) the kind of fruit/vegetable, grain/bread or meat/meat alternate served (start when 6–11 mo. olds are developmentally ready, with parent’s ok).
- All formula & infant cereal served must be iron fortified.
- Record Daily Infant Totals each day.
- For special dietary needs with doctor’s note, record alternative food items in the space for the component they substitute.

### NAMES

#### 6—11 months

<table>
<thead>
<tr>
<th>Breakfast</th>
<th>A.M. Snack</th>
<th>Lunch</th>
<th>P.M. Snack</th>
<th>Supper</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Formula or Breast Milk - 4 – 6 oz (√)</td>
<td>1. Formula or Breast Milk - 4 – 6 oz (√)</td>
<td>1. Formula or Breast Milk - 4 – 6 oz (√)</td>
<td>1. Formula or Breast Milk - 4 – 6 oz (√)</td>
<td>1. Formula or Breast Milk - 4 – 6 oz (√)</td>
</tr>
<tr>
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### NAMES

#### Birth—5 months

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<tr>
<th>Breakfast</th>
<th>A.M. Snack</th>
<th>Lunch</th>
<th>P.M. Snack</th>
<th>Supper</th>
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<tbody>
<tr>
<td>1. Formula or Breast Milk - 4 – 6 oz (√)</td>
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**Daily Infant Totals:**

- **Breakfast:**
- **A.M. Snack:**
- **Lunch:**
- **P.M. Snack:**
- **Supper:**

August 2016
**NM CACFP DAILY INFANT MEAL RECORD**

**Date:** ________________________________

**Completed by:** ________________________________

**INSTRUCTIONS:**

- Record the names of the infant(s) eating the meal.
- Use a (√) where indicated for formula or breast milk.
- Record ( ) the kind of fruit/vegetable, grain/bread or meat/meat alternate served (start when 6–11 mo. olds are developmentally ready, with parent’s ok).
- All formula & infant cereal served must be iron fortified.
- Record Daily Infant Totals each day.
- For special dietary needs with doctor’s note, record alternative food items in the space for the component they substitute.

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