

SPECIAL DIET REQUEST FORM (D1)

Special Meals and Snacks: This form should only be used to request special dietary items which are not available on the current menus.
Dietitians / Nursing staff should e-mail this form **DAILY** to Patient Catering at RADU, Seacroft (leedsth-tr.patientcateringordersradu@nhs.net)
 Any queries: contact the RADU admin team 8am-4pm Monday to Sunday on Ext 63365

Please ensure all sections of this form are completed fully, including ward location & requestor details in case clarification is required

WARD:

Date of Form Submission:

PATIENT NAME (+ bed number)	DIETITIAN NAME (if under a dietitian)	Today's EVENING MEAL	Today's EVENING SNACK	Tomorrow's BREAKFAST	Tomorrow's MID MORNING SNACK	Tomorrow's LUNCH	Tomorrow's MID AFTERNOON SNACK
<u>EXAMPLE:</u> Joe Bloggs (21)	Theresa Green	Sugar free jelly Mashed carrots	Soya Yoghurt	Soya Milk	-	Plain and Simple Mash	-

This form should be e-mailed to **RADU (leedsth-tr.patientcateringordersradu@nhs.net)** by **11.30am** for Evening meal that day and for Breakfast and Lunch the following day. If dietary prescription is advised and started for Lunch the same day or after 11.30am for the Evening meal, the Ward Housekeeper should source suitable items locally from the RTP (SJUH Ext 64183, LGI Ext 23799) for the first meal. Thereafter, the Dietitian / Nurse should order on this form from RADU to ensure provision is made.

Requested by..... Position..... Contact / bleep number.....Date.....