

**Breakfast**

Juice…………………………………………… ½ cup
Refined cooked cereal……………………………… ½ cup
Eggs or lean meat………………………………………… 2 or 2 OZ
White toast………………………………………. 2 slices
Butter or margarine……………………………………….2 pats
Jelly………………………………………….…. As Desired
Milk…………………………………………………………… 8 OZ
Decaffeinated coffee…………………………… if tolerated.

**Lunch or Supper**

Cream soup…………………………. ….. 3/4th cup
Bland vegetables………….…………. ½ cup
Salad………………………………………………………. 1 portion
White bread or Roll…………. 1
Bland dessert or fruit………………………….……… 1 portion
Milk………………………………………………...……………. 8 OZ

Menu

**Restaurant Name**