



Contact: Frangelica Leo  
158-01 Crossbay Blvd.  
Howard Beach, NY 11414  
347-593-TALK (8255)  
Fax: 855-592-6874

[TheLanguageLoungeNY@gmail.com](mailto:TheLanguageLoungeNY@gmail.com)

## Mealtime Questionnaire

### Eating and Drinking Skills

Child's Name: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Age: \_\_\_\_\_

Parent Name: \_\_\_\_\_

### **History and Concerns About Eating and Drinking**

What are the feeding concerns you have for your child?

Has your child had any surgical procedures? If so what are they?

Is your child on any medications? If yes what are they?

What previous feeding assessments or studies have your child had?

Is your child receiving therapy? If yes, with what kind? How often?

Does your child attend a school program? If yes, where?

Does your child have any allergies? If so, please list:



Contact: Frangelica Leo  
158-01 Crossbay Blvd.  
Howard Beach, NY 11414  
347-593-TALK (8255)  
Fax: 855-592-6874

[TheLanguageLoungeNY@gmail.com](mailto:TheLanguageLoungeNY@gmail.com)

Describe your child's feeding history:

- |                                      |           |           |
|--------------------------------------|-----------|-----------|
| <input type="checkbox"/> Breast fed? | How long? | Problems? |
| <input type="checkbox"/> Bottle fed? | Problems? |           |

What formula was your baby on?

How did he/she tolerate formula?

When did you introduce pureed foods (e.g. first foods or homemade)?

How did your child do with pureed food?

How did your child do with the transition to lumpy and solid foods?

When did feeding problems begin?

**Current feeding Routine**



Contact: Frangelica Leo  
158-01 Crossbay Blvd.  
Howard Beach, NY 11414  
347-593-TALK (8255)  
Fax: 855-592-6874

[TheLanguageLoungeNY@gmail.com](mailto:TheLanguageLoungeNY@gmail.com)

How often does your child eat and drink? What are your child's usual meal and snack times?

What food/liquids does your child usually eat for: (Please mention quantity (e.g. 2 waffles))

Breakfast:

Lunch:

Snacks:

How is the food prepared?

- Regular liquid
- Thick liquid
- commercial pureed baby first or second foods
- Prepared in blender
- Ground or commercial stage 3 foods
- Mashed soft table foods
- Regular table foods (easy)
- Regular table foods (hard)



Contact: Frangelica Leo  
158-01 Crossbay Blvd.  
Howard Beach, NY 11414  
347-593-TALK (8255)  
Fax: 855-592-6874

[TheLanguageLoungeNY@gmail.com](mailto:TheLanguageLoungeNY@gmail.com)

other (please specify)

Which types of these foods are the easiest for your child?

Which types of food are hardest for your child?

What do you usually use when feeding your child?

breast

Fork

Bottle

fingers

cup

Straw

spoon

Does your child have favorite tastes? What are they (e.g. sweet/salty/strong flavors like BBQ sauce)?

Does your child have favorite food textures (e.g. soft/hard/chewy)?

Does your child prefer food at certain temperatures (e.g. hot/cold/warm ?



Contact: Frangelica Leo  
158-01 Crossbay Blvd.  
Howard Beach, NY 11414  
347-593-TALK (8255)  
Fax: 855-592-6874

[TheLanguageLoungeNY@gmail.com](mailto:TheLanguageLoungeNY@gmail.com)

Does your child resist at feeding times? If so what are his/her behaviors like? How do you respond to his/her behaviors?

Does your child gag on foods? Explain

Where does your child eat (e.g. at table with family; in front of TV by himself; grazes and eats while running around)?

Does your child show interest in foods? With adults? Peers? Both?

Please provide a list of ALL preferred foods and consistency in which the child eats it (e.g. bananas Gerber jarred ONLY or carrots if mashed etc.)