



**California Division North  
Nutritional Services  
Diet - Menu**

**Subject/Title: FULL LIQUID DIET  
Order As: FULLIQ**

**GOALS OF DIETARY MANAGEMENT:**

To provide nourishment in a form which requires no mastication. This diet may be used as a transitional diet from Clear Liquid to Regular or for the patient who is unable to chew or swallow solid food. If on full liquid dysphagia see dysphagia diet for thickening instructions.

**DIET PRINCIPLES:**

The diet provides foods that are liquid or semi-liquid at body temperature. The hospital diet is heavily based in dairy products.

**ADEQUACY:**

If the full liquid diet is used for more than 3 days, nutritional supplements should be used to improve nutritional adequacy since the diet is inadequate in all nutrients except protein, calcium and ascorbic acid. Supplements may be added to improve the adequacy of the prescribed diet.

**GUIDELINES:**

FOOD GROUP	FOODS ALLOWED	FOODS TO AVOID
SOUP	Broth, Bouillon, Blenderized Soups, Cream Soups, Cream of Rice	Soups with Noodles or unblenderized pieces
BEVERAGES	Coffee, Tea, Decaffeinated Coffee And Tea, Herbal Tea, Cereal Beverages, Carbonated Beverages, Fruit Flavored Drinks. All Supplements, Juices, Nectars.	
MEAT	None	

FAT	Butter, Margarine, Cream
MILK	Milk And Milk Beverages, Yogurt Without Seeds, Nuts Or Fruit, Cocoa.
STARCH	Cooked Cereal , Such As Oatmeal & Cream Of Wheat, Cream Of Rice, Grits
VEGETABLES	Juices
FRUIT	Juices
DESSERT	Gelatin, Sherbet, Custard, Pudding, Fruit Ice, Ice Cream, Popsicles
MISCELLANEOUS	Sugar, Honey, Hard Candy, Salt, Mild Seasonings

ADA Full Liquid Diet to include:

(Need regular full and clear liquid  
product to meet calorie requirements)  
Sugar Free Pudding, Jell-O  
Sugar Free Shakes, Supplements  
No Sugar Packets  
No Nectar, other Juices OK

Low Lactose Full Liquid Diet to include:

No Cream Soup, Substitute Broth  
No Milk, Mocha Mix OK  
No Supplements with lactose  
No pudding, Substitute Jell-O  
Add Resource Fruit Beverage

T & A for tonsillectomy

No red Jell-O or other products that would make tissue stain red  
No straws will be sent from Nutritional Services for these patients

## SAMPLE MENU

### Breakfast

Fruit Juice	4 oz.
Refined cereal	3/4 cup
Liquid supplement	8 oz.
Milk, lowfat	1 cup
Coffee	6 oz.
Cream	1 oz.
Sugar	1 tsp.
Salt	

### Lunch and Dinner

Juice	4 oz.
Strained cream soup	6 oz.
Dessert	1/2 cup
Milk, lowfat	1 cup
Tea	6 oz.
Cream	1 oz.
Sugar	1 tsp.
Salt	