



Dear Parent:

Thank you for choosing Ivy Rehab for Kids for your child's feeding therapy. We are honored to be able to help your child and family achieve your goals.

In order to best help us prepare for your child's evaluation, we would like you to fill out the following:

1. Developmental/ Medical History Form
2. Feeding History Form
3. Food Inventory Form
4. Three Day Diet History

Please complete the forms in as much detail as possible. Many items on the forms can be simply answered by checking YES or NO in the appropriate space. If you give a YES response, please explain this answer in the space provided or on the back of the page. If you cannot, or wish to not answer a question, leave it blank. If a question does not apply to your child, you may write NA for "not applicable".

To provide the most comprehensive evaluation please return your completed forms at least 3 days in advance of your scheduled appointment. Enclosed forms can be dropped off at the office, faxed to 810-750-6361 or emailed to [FentonMIKids@ivyrehab.com](mailto:FentonMIKids@ivyrehab.com).

### **What to bring to the evaluation**

1. 2-3 foods of different textures that your child likes (Example 1 puree, 1 meltable hard, 1 soft mechanical).
2. 1-2 food(s) of different textures your child will most likely refuse.
3. 1 drink that your child likes.
4. Preferred utensils, cup, bottles and dishes to make the assessment as "home like" as possible.

If your child only accepts one texture, please bring 2-3 options of that texture. We want to be able to evaluate your child's current skill level with foods that they do well with, as well as determining how they handle more challenging food.

Examples of foods with different textures:

1. Purees: baby food stages 1 and 2, thin baby food cereals, soft mashed table foods, applesauce, yogurt.
2. Hard Munchables: raw carrot sticks, celery sticks, hard dried fruit sticks, Dutch pretzels, bell pepper strips, bagel strips.
3. Meltable Hard (foods which will dissolve with spit only; no or minimal pressure needed): Crackers, biter biscuits, graham crackers, Gerber's cereal squares, thin pretzel sticks, Cheerios.
4. Soft Cubes: overcooked vegetables, Gerber Graduates fruits, boiled potatoes, bananas.
5. Soft Mechanical (foods that break apart in the mouth very easily): muffins, soft small pastas, lunch meats, soft pretzels, scrambled eggs, macaroni and cheese, soft chicken nuggets, spaghetti.

## What to expect

### First appointment

- You bring a variety of foods so the therapist can perform a feeding assessment of your child.
- The therapist will complete an oral motor assessment to determine any underlying causes contributing to feeding concerns.
- The therapist will be observing your child, and possibly yourself having a snack together depending on the age of the child.
- The goal of this first session is for the therapist to get to know your child and begin building a trusting relationship.

### Second appointment:

- Therapist will go over the evaluation and outline the assessment findings.
- A plan for the next stage of the process will be discussed.
- The therapists will answer any questions you may have.
- You will bring food requested by the therapist.

Future sessions: The therapist will instruct you weekly on what foods to bring based on evaluation of the child's skill level and/or currently accepted foods.

We find it helpful to explain to older children that you are packing a "picnic" to eat with their therapist. Please do not feed your child for at least 1 ½ hours before their scheduled appointment time so they will be hungry during their session.

We frequently get messy during the meals; we ask that you dress your child in casual clothes that are easily washable. If you would like to provide a bib, we will be happy to help your child put this on when we sit down to eat.

Children can "learn to not eat" for a variety of reasons, and can require the same amount of time, if not longer, to correctly learn to eat and explore new foods. Feeding therapy is a process of several stages that can take several weeks/ months to master each stage. Collaboration and consistency between all members of the team (parents, child and therapist) can aid in our child's progress.

We are very much looking forward to working with you and your child. Please let us know if you have any questions, or how else we can be of assistance to you.