

**Nutrition Prescription**



For: \_\_\_\_\_



**Increase fruits during the following meals:**

Breakfast      AM Snack      Lunch      PM Snack      Dinner      Eve. Snack

**Increase vegetables during the following meals:**

Breakfast      AM Snack      Lunch      PM Snack      Dinner      Eve. Snack

**Additional suggestions for improving health:**

\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



*✂* \_\_\_\_\_

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**Additional suggestions for improving health:**

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\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

