

Clear Liquids

Juice: Apple | Cranberry

Broth: Beef | Chicken | Vegetable

Gelatin: (Regular or Sugar-Free) Strawberry | Orange

Italian Ice: Cherry | Orange | Lemon | No Sugar Added Lemon

Coffee: Regular | Decaffeinated

Tea: Regular | Decaffeinated | Chamomile

Fresh-Brewed Unsweetened Iced Tea

Soft Drinks: Ginger Ale | Diet Ginger Ale | Seltzer

Condiments

Honey | Lemon Juice | Sugar | Equal | Splenda | Sweet & Low

Full Liquids

All items on the Clear Liquid selection

plus those listed below:

Juice: Orange | Prune | Tomato

Yogurt: Vanilla (Regular or Lite) or Plain

Cereal: Cream of Wheat

Soup: Cream of Tomato

(available from 11:00 am -7:00pm only)

Pudding: (Regular or No Sugar Added)

Vanilla | Chocolate

Dessert: Low-Fat Chocolate Mousse

Ice Cream: Vanilla | Chocolate | No Sugar Added Vanilla
No Sugar Added Chocolate

During your stay at Stony Brook Hospital, your diet is ordered by your doctor and may change a few times due to tests, treatment or surgery.

DIET:

Clear / Full Liquids

1. Dial 8 -DINE (extension 8-3463) between the hours of 7 am and 7 pm.
2. Identify yourself to the Room Service Associate, who will verify your name, room number, and the diet ordered by your physician.
3. Place your order. Your specially prepared meal will be served to you within 60 minutes of your request.

The Department of Food and Nutrition is here to provide you with excellent service. Feel free to let your Room Service Associate know how we can help meet your food service needs.

SPECIAL / RESTRICTED DIETS

Please note that not all menu items are appropriate for all diets. If you are on a special or restricted diet, our Room Service Associate will assist you with your meal selections.

For your safety, we will accept your menu selections only after your physician has entered your diet order.

We Need Your Feedback!

If you receive a patient satisfaction survey in the mail, please fill it out and return it. Your opinion counts!

9/23

NAME: _____

ROOM #: _____

DATE: _____

