



## SOUTH CAROLINA MENU CHECKLIST

### Meal Pattern – Salad Bar/Hot Bar Choice

#### Menu Components to be Offered

Menu development should be based on participant preferences and how you plan to use your salad bar:

**Full Bar:** Includes protein (e.g. chicken, fish, and egg), vegetables, fruit, and grains. These items create the full meal excluding beverages. Dairy items may be provided on the bar (shredded cheese, cottage cheese, yogurt, etc.) or it could be provided separately (example: 8 oz carton of milk)

**Fruit and Vegetable Bar:** Participants choose their own options for a side salad or a fruit plate. These items are selected as an addition to the rest of their meal.

A food item in one or more food group can only be classified once as meeting the requirement for a meal. For example: shredded cheese can be counted as a Dairy *or* a Protein source, not both.

Choice Daily Offerings		
Bar Type	FOOD GROUP OR SUBGROUP	Criteria Met
<input type="checkbox"/> Full Bar		<input checked="" type="checkbox"/>
<input type="checkbox"/> Fruit and Vegetable Bar		<input checked="" type="checkbox"/>
<b>Vegetables</b>	At least one leafy green provided (applies to salad bars)	<input type="checkbox"/>
(subgroups)	Dark-Green	
	Red & Orange	<input type="checkbox"/>
	Beans, Peas, Lentils	<input type="checkbox"/>
	Starchy Vegetable	<input type="checkbox"/>
	Other Vegetables	<input type="checkbox"/>
<b>Fruits</b>	Minimum of one fruit choice	<input type="checkbox"/>
<b>Grains</b>	Minimum of one grain choice	<input type="checkbox"/>
<b>Dairy and Alternates</b>	At least one serving	<input type="checkbox"/>
<b>Protein Foods</b>	At least two protein choices	<input type="checkbox"/>
<b>Vitamin A- good sources</b> ♦	At least one high Vitamin A source provided (can be from fruits and/or vegetables)	<input type="checkbox"/>
<b>Vitamin C- good sources</b> ♦	At least one high Vitamin C source provided (can be from fruits and/or vegetables)	<input type="checkbox"/>
<b>Fat/Oils</b>	At least one salad dressing	<input type="checkbox"/>
<b>Dessert</b>	Optional	<input type="checkbox"/>
<b>Beverage</b>	Optional	<input type="checkbox"/>

Prepared by: \_\_\_\_\_

I certify that these menus meet the nutrition requirements as specified in the SCDOA Meal Specifications for compliance with the *DGA-1/3 DRIs*.

\_\_\_\_\_  
Registered Dietitian Nutritionist

\_\_\_\_\_  
RDN License Number

Date(s) of service: \_\_\_\_\_

Food Group or Subgroup	Serving Size	Menu: Salad Bar/Hot Bar Choice
Protein Foods		
Vegetables		
Fruits		
Grains		
Milk or Alternate		
Fats/Oils		
Dessert (optional)		
Beverage (optional)		

Prepared by: \_\_\_\_\_

Effective date: \_\_\_\_\_ to \_\_\_\_\_

I certify that these menus meet the nutrition requirements as specified in the SCDOA Meal Specifications for compliance with the *DGA-1/3 DRIs*.

\_\_\_\_\_  
Registered Dietitian Nutritionist

\_\_\_\_\_  
RDN License Number