

# Clear-Liquid Diet

<b><i>Type of Food</i></b>	<b><i>Allowed Items</i></b>	<b><i>Excluded Items</i></b>
<b>Beverages</b>	Water, carbonated beverages, coffee, tea, Fruit-flavored drinks, strain lemonade, limeade	Milk, milk drinks, Orange Juice
<b>Breads</b>	None	All
<b>Cereal</b>		
<b>Flours</b>		
<b>Cheeses</b>	None	All
<b>Desserts</b>	Plain gelatin desserts, fruit ices without Milk or pieces of fruit, popsicles	All others
<b>Eggs</b>	None	All
<b>Fats</b>	None	All
<b>Fruits</b>	Apple, cranberry, and grape juices	All others
<b>Fruit Juices</b>	strained citrus juices if tolerated.	
<b>Meat</b>	None	All
<b>Poultry</b>		
<b>Fish</b>		
<b>Legumes</b>		

<b><i>Milk</i></b>	None	All
<b><i>Milk Products</i></b>		
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<b><i>Potatoes</i></b>	None	All
<b><i>Rice</i></b>		
<b><i>Pasta</i></b>		
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<b><i>Soup</i></b>	Bouillon, clear fat-free Broths, consommé	All others
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<b><i>Sweets</i></b>	Honey, syrups, plain sugar Candy in small amounts.	All others
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<b><i>Vegetables</i></b>	Strained vegetables broth	All others
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<b><i>Miscellaneous</i></b>	Salt	All others
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## SUGGESTED MEAL PLAN

**Breakfast:**

	<b>Serving</b>
Clear juice	½ C
Gelatin, flavored	½ C
Coffee or Tea (no milk or cream)	1 C
Sugar	1 Tbsp

**Mid-morning Snack:**

Gelatin, flavored	½ C
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**Lunch:**

Broth or Bouillon	1 C
Clear juice	½ C
Gelatin, flavored	½ C
Coffee or Tea (no milk or cream)	1 C
Sugar	1 Tbsp

**Mid-afternoon Snack:**

Carbonated beverage	1 C
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**Dinner:**

Broth or Bouillon	1 C
Clear juice	½ C
Gelatin, flavored	½ C
Coffee or Tea (no milk or cream)	1 C
Sugar	1 Tbsp

**Evening Snack:**

Gelatin, flavored	½ C
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