Healthy Cafeteria
ASSESSMENT TOOL

BEVERAGES

Use this form to help assess the beverage options in your hospital's cafeteria. Fill in each item, its location and check yes or no if that item meets the Good4You nutrition criteria. Additional assessment tools are available for download at **www.ohiohospitals.org/good4you**.

GOOD4YOU Eat Healthy NUTRITION CRITERIA

Healthy BEVERAGES

Water sparkling, seltzer or flavored water	**Fat-Free or Low-Fat (1%) Milk**
100% Fruit Juice ≤ 180 calories per 12 ounce serving, no added sweeteners	**Flavored Milk or Milk Alt.** ≤ 150 calories per 8 ounce serving
No or Low-Calorie Beverages ≤ 10 calories per 8 ounce serving	**Unsweetened Teas** regular or herbal, hot or cold
Mid-Calorie Beverages ≤ 66 calories per 8 ounce serving	**Coffee** with 1% or lower fat milk or creamers, soy alternatives

*   excluding nuts, seeds, cheese and products containing nuts or nut butters

** excluding fruits and vegetables that do not contain added sweeteners or fats

Based on the American Heart Association – Recommended Standards for Procurement of Foods and Beverages Offered in the Workplace

DATE

Item	Location	YES	NO

Item	Location	YES	NO

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Total number of items

Number of items meeting criteria

Percentage of items meeting criteria

SNACKS, DESSERTS AND SIDE DISHES

Use this form to help assess the snack and dessert options in your hospital's cafeteria. Snacks and desserts include side items such as pre-packaged chips, granola bars, cookies and other side dishes (hot or cold).

Fill in each item, its location and check yes or no if that item meets the Good4You nutrition criteria. Additional assessment tools are available for download at **www.ohiohospitals.org/good4you.**

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GOOD4YOU *Eat Healthy* NUTRITION CRITERIA

Healthy SNACKS, DESSERTS AND SIDE DISHES

Calories	No more than 200 calories
Total Fat	No more than 7 grams*
Saturated Fat	No more than 10% calories from saturated fat* (ex: 2 grams per 200 cal.)
Trans Fat	0 grams
Sodium	No more than 230 milligrams
Sugar	No more than 10 grams**
Fiber	At least 2 grams (if product is grain/potato-based such as granola bars, crackers, pretzels, cookies, chips, etc.)

*   *excluding nuts, seeds, cheese and products containing nuts or nut butters*

** *excluding fruits and vegetables that do not contain added sweeteners or fats*

Based on the American Heart Association – Recommended Standards for Procurement of Foods and Beverages Offered in the Workplace

Item	Location	YES	NO

Item	Location	YES	NO

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Total number of items [   ]

Number of items meeting criteria [   ]

Percentage of items meeting criteria [   ]

Healthy Cafeteria
ASSESSMENT TOOL

ENTRÉES

Use this form to help assess the entrée options in your hospital's cafeteria. Entrées include items such as wraps, sandwiches, soups* and other main course items served a la carte (without sides).

Fill in each item, its location and check yes or no if that item meets the Good4You nutrition criteria. Additional assessment tools are available for download at **www.ohiohospitals.org/good4you**.

DATE	

* Soups should be considered per 8 oz. serving.

GOOD4YOU Eat Healthy NUTRITION CRITERIA
Healthy ENTRÉES†

Calories	No more than 500 calories
Total Fat	No more than 15 grams*
Saturated Fat	No more than 10% calories from saturated fat* (ex: 4 grams per 400 cal.)
Trans Fat	0 grams
Sodium	No more than 480 milligrams
Sugar	No more than 15 grams**
Fiber	At least 2 grams (if product is grain/potato-based such as granola bars, crackers, pretzels, cookies, chips, etc.)
Produce	Refrigerated machines should stock fruit and vegetable items.

† *Entrées include items such as wraps, sandwiches, soups and other main course items served a la carte.*

* *excluding nuts, seeds, cheese and products containing nuts or nut butters*

** *excluding fruits and vegetables that do not contain added sweeteners or fats*

Based on the American Heart Association – Recommended Standards for Procurement of Foods and Beverages Offered in the Workplace

Item	Location	YES	NO

Item	Location	YES	NO

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Total number of items		Number of items meeting criteria		Percentage of items meeting criteria	

Healthy Cafeteria
ASSESSMENT TOOL

MEALS

Use this form to help assess the meal options in your hospital's cafeteria. Meals include boxed lunches and other complete meals meant to be served together (main course + side dishes).

Fill in each item, its location and check yes or no if that item meets the Good4You nutrition criteria. Additional assessment tools are available for download at **www.ohiohospitals.org/good4you**.

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GOOD4YOU Eat Healthy NUTRITION CRITERIA

Healthy MEALS

Calories	No more than 750 calories
Total Fat	No more than 25 grams*
Saturated Fat	No more than 10% calories from saturated fat* (ex: 7.5 grams fat per 750 calories)
Trans Fat	0 grams
Sodium	No more than 900 milligrams
Sugar	No more than 25 grams**
Fiber	At least 2 grams fiber (if product is grain/potato-based, such as granola bars, crackers, pretzels, cookies, chips, etc.)

* excluding nuts, seeds, cheese and products containing nuts or nut butters

** excluding fruits and vegetables that do not contain added sweeteners or fats

Based on the American Heart Association – Recommended Standards for Procurement of Foods and Beverages Offered in the Workplace

Item	Location	YES	NO

Item	Location	YES	NO

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Total number of items [ ]

Number of items meeting criteria [ ]

Percentage of items meeting criteria [ ]