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Online™

# Study of Osteoporotic Fractures (SOF)

## Study Collection Forms

### **Visit 2**

#### **Lifestyle**

Diet

Form Type: Self-Administered Questionnaire

#### **LEGEND:**

**Raw form variable** names are located next to the question they represent and do not have a border around the variable name.

**Calculated variable** names are derived from other variables and have a border around the variable name. The calculated variables names are located in close proximity to the questions from which they were derived.

Some of the questions and measurements on these forms are not being released, and therefore no variable name is provided for them.

## DIET (BONELOSS)

**36.** These questions are about your usual eating habits for certain foods during the past 12 months. Please mark your usual serving size and write down how often you eat each food on the lines next to the type of food. For example:

- If you drink a medium glass of apple juice about two times a day, you would answer:

Apple Juice       S    M    L      \_\_\_\_\_ time(s) per \_\_\_\_\_

- If you drink a small glass of apple juice about three times a week, you would answer:

Apple Juice       S    M    L      \_\_\_\_\_ time(s) per \_\_\_\_\_

- If you drink a small glass of apple juice about two times a month, you would answer:

Apple Juice       S    M    L      \_\_\_\_\_ time(s) per \_\_\_\_\_

- If you drink a large glass of apple juice about once every other month, you would answer:

Apple Juice       S    M    L      \_\_\_\_\_ time(s) per \_\_\_\_\_

- If you rarely or never drink apple juice, you would answer:

Apple Juice       S    M    L      \_\_\_\_\_ time(s) per \_\_\_\_\_

A small serving is about one half or less of the medium serving. A large serving is about one and a half times as much, or more, of the medium serving.

V2CALWKB

V2PHSWKB

V2PRTWKB

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## MEAT/MIXED DISHES/LUNCH ITEMS

	<u>Medium Serving</u>	<u>Serving Size</u>	<u>How often do you eat.....?</u>
Hamburgers, cheese burgers, meat loaf	3 oz. patty	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Beef-steaks, roast beef	4 oz.	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Chicken or turkey	2 small or 1 large piece.	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Pork, including chops and roast	1 chops (4 oz.).	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Hot dogs	2 dogs	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Ham, lunch meats	2 slices (2 oz.)	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Mixed dishes with cheese (such as macaroni and cheese)	1 cup	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____

## BREADS

Breads, rolls, crackers (including sandwiches)	2 slices or 3 crackers 1 bagel	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Corn bread, corn muffins, corn tortillas	1 med. piece	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____

## BREAKFAST FOODS

Hot or cold cereals, with milk	1 med. bowl 3/4 cup	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Eggs	2 eggs	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____

<u>SWEETS</u>	<u>Medium Serving</u>	<u>Serving Size</u>	<u>How often do you eat.....?</u>
Ice cream	1 scoop	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Doughnuts, cookies, cake, pastry	1 piece or 3 cookies	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____

### FRUITS & VEGETABLES

Orange juice	6 oz. glass	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Green salad	1 med. bowl 2/3 cup	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____

### DAIRY PRODUCTS

Cottage cheese	1/2 cup	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Other cheeses and cheese spreads	2 slices (2 oz.)	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Milk, including skim milk	8 oz. glass	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Milk or cream in coffee or tea	1 Tblsp.	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Yogurt	1 cup	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____

### ALCOHOLIC BEVERAGES

Beer	12 oz. can or bottle	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Wine	4-5 oz. glass	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Liquor	1 shot (1 1/2 oz.)	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____

## DIET (PRE-BONELOSS)

**36.** These questions are about your usual eating habits for certain foods during the past 12 months. Please mark your usual serving size and write down how often you eat each food on the lines next to the type of food. For example:

- If you drink a medium glass of apple juice about two times a day, you would answer:

Apple Juice       S  M  L      \_\_\_\_\_ time(s) per \_\_\_\_\_

- If you drink a small glass of apple juice about three times a week, you would answer:

Apple Juice       S  M  L      \_\_\_\_\_ time(s) per \_\_\_\_\_

- If you drink a small glass of apple juice about two times a month, you would answer:

Apple Juice       S  M  L      \_\_\_\_\_ time(s) per \_\_\_\_\_

- If you drink a large glass of apple juice about once every other month, you would answer:

Apple Juice       S  M  L      \_\_\_\_\_ time(s) per \_\_\_\_\_

- If you rarely or never drink apple juice, you would answer:

Apple Juice       S  M  L      \_\_\_\_\_ time(s) per \_\_\_\_\_

A small serving is about one half or less of the medium serving. A large serving is about one and a half times as much, or more, of the medium serving.

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MEAT/MIXED DISHES/LUNCH ITEMS

	<u>Medium Serving</u>	<u>Serving Size</u>	<u>How often do you eat....?</u>
Hamburgers, cheese burgers, meat loaf	3 oz. patty	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Beef-steaks, roast beef	4 oz.	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Beef stew, or pot pie, with vegetables	1 cup	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Liver, including chicken livers	4 oz.	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Fried chicken	2 small or 1 large piece	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Chicken or turkey, roasted, stewed, broiled	2 small or 1 large piece	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Pork, including chops and roast	2 chops (4 oz.)	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Fried fish, fish sandwich	1 sandwich (4 oz.)	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Other fish, broiled or baked	4 oz.	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Spaghetti, lasagne, other pasta with tomato sauce	1 cup	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Hot dogs	2 dogs	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Ham, lunch meats	2 slices	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Vegetable, vegetable beef, minestrone, or tomato soup	1 med. bowl	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Mixed dishes with cheese (such as macaroni and cheese)	1 cup	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____

<u>BREADS</u>	<u>Medium Serving</u>	<u>Serving Size</u>	<u>How often do you eat....?</u>
White bread (including sandwiches), rolls, crackers	2 slices or 3 crackers	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Dark bread, including whole wheat, rye, pumpernickel	2 slices	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Corn bread, corn muffins, corn tortillas	1 med. piece	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Salty snacks (such as chips, popcorn)	2 hand-fuls	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Peanuts, peanut butter	2 Tblsp.	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Margarine on bread and rolls	2 pats	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Butter on bread and rolls	2 pats	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____

### BREAKFAST FOODS

High fiber, bran or granola cereals, shredded wheat	1 med. bowl	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Highly fortified cereals, such as Product 19, Total, or Most	1 med. bowl	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Other cold cereals, such as Corn Flakes, Rice Krispies with milk	1 med. bowl	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Cooked cereals	1 med. bowl	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Eggs	2 eggs	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Bacon	2 slices	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Sausage	2 pieces	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
French toast, pancakes, waffles	2 pieces	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____

<u>SWEETS</u>	<u>Medium Serving</u>	<u>Serving Size</u>	<u>How often do you eat.....?</u>
Ice cream	1 scoop	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Doughnuts, cookies, cake, pastry	1 piece or 3 cookies	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Pies	1 med. slice	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Chocolate candy	small bar (1 oz.)	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____

## FRUITS & VEGETABLES

Apples, applesauce, pears	1 piece (1/2 cup)	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Cantaloupe (in season)	1/4 melon	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Oranges	1 medium	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Orange juice, or grapefruit juice	6 oz. glass	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Grapefruit	1/2 grapefruit	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Other fruit juices, fortified fruit drinks	6 oz. glass	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Beans such as baked beans, pintos, kidney, limas, or in chili	3/4 cup	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Tomatoes, tomato juice	1 tomato, or 6 oz. glass	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Broccoli	1/2 cup	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Spinach	1/2 cup	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Mustard greens, turnip greens, collards	1/2 cup	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Cole slaw	1/2 cup	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Carrots, or mixed vegetables containing carrots	1/2 cup of carrots	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____



## FRUITS & VEGETABLES

	<u>Medium Serving</u>	<u>Serving Size</u>	<u>How often do you eat.....?</u>
Green salad	1 med. bowl	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Salad dressing, mayonnaise (including on sandwiches)	2 Tblsp.	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
French fries and fried potatoes	3/4 cup	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Sweet potatoes, yams	1/2 cup	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Other potatoes, including boiled, baked, potato salad, mashed	1 piece (1/2 cup)	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Rice	3/4 cup cooked	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____

## DAIRY PRODUCTS

Cottage cheese	1/2 cup	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Other cheeses and cheese spreads	2 slices (2 oz.)	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Whole milk, and milk drinks	8 oz. glass	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Lowfat milk, milk drinks	8 oz. glass	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Skim milk (or 1% milk)	8 oz. glass	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
<u>Milk or cream</u> in coffee or tea	1 Tblsp.	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Yogurt	1 cup	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
<u>Sugar</u> in coffee, tea, or on cereal	2 tspn.	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____

## ALCOHOLIC BEVERAGES

Beer	12 oz. can or bottle	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Wine	4-5 oz. glass	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____
Liquor	1 shot (1 1/2 oz.)	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L	_____ time(s) per _____