

Study of Osteoporotic Fractures (SOF)

Study Collection Forms

Visit 6

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.



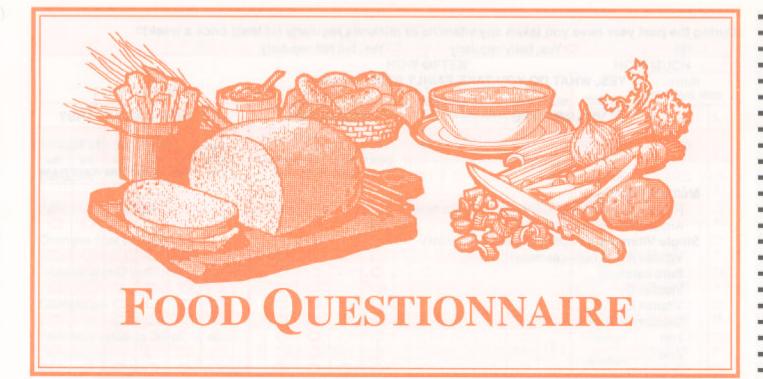
V6CASUP



Visit 6 Diet

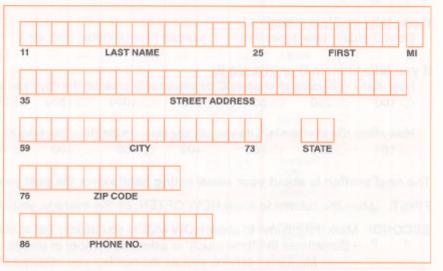
At Visit 6, participants completed the Block Food Frequency Questionnaire, and the forms were sent to Block for scoring. Block then provided SOF with summary variables for daily intake of fat, protein, carbohydrates, nutrients, vitamins, etc. Because the data were compiled by Block, you will not find forms that link to the specific variables that have been provided here. For your reference, the food frequency questionnaire has been provided.

The version of the analysis file (Block95 BDDS Output Version 03) used to create these variables takes into account the Pyramid assumptions about serving size (e.g., $\frac{1}{2}$ cup vegetables = 1 serving). This is more accurate in terms of numbers of servings than were previous versions, which just counted the number of times the person ate the food, not the appropriate gram amounts. In addition, this version puts out four additional nutrients: genistein, daidzein, coumestrol and Vitamin D.



This form asks about your usual food intake over the past year. It takes about 30 minutes to complete. Please follow these instructions:

- Answer each question as best you can estimate if you aren't sure.
- · Use only a #2, ordinary pencil.
- Be certain to completely blacken in each of your answers, and erase completely if you make any changes.
- · Do not make any other marks on this form.
- If you wish to make comments, please use a separate piece of paper.



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ID NUMBER	SOCIAL SECURITY NUMBER	SEX Male Female	AGE	WEIGHT pounds	ft. in.
		If female, are you pregnant or breast feeding?			
	HHHQ.BLOCK.95 Phone or fax: (51 PLEASE DO NO	OT WRITE IN THIS AREA			2807

O Yes, fairly regularly -

O No

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○ Yes, but not regularly

IF YES, WHAT DO YOU TAKE FAIRLY REGULARLY?

	IN TYPE				OFTE			FOR HOW MANY YEARS						
				1-3 DAYS PER WEEK		EVER		LESS THAN 1 YR.	1 YEAR	2 YEARS	3-4 YEARS	5-9 YEARS	1 YE	
Multiple Vitamins														
Regular Once-A-Da	y, Centrum, or TI	hera type	0	0	0	0		0	0	0	0	0	0	
Antioxidant combina			0	0	0	0		0	0	0	0	0	0	
Single Vitamins (not)	part of multiple vi	itamins)												
Vitamin A (not beta-	carotene)		0	0	0	0		0	0	0	0	0	9	
Beta-carotene			0	0	0	0		0	0	0	0	0	(
Vitamin C			0	0	0	0		0	0	0	0	0	0	
Vitamin E			0	0	0	0		0	0	0	0	0	<	
Calcium or Tums			0	0	0	0		0	0	0	0	0	0	
Iron			0	0	0	0		0	0	0	0	0	9	
Zinc			0	0	0	0		0	0	0	0	0	0	
Selenium			0	0	0	0		0	0	0	0	0	0	
w many milligrams of vita 100 250 50 w many IUs of vitamin E 100 200 30	00	<u> </u>	e days yo	ou take D C	e it? ⊃ 100	0	□ 30□ 20							
100 250 50 w many IUs of vitamin E 100 200 30 next section is about your T: Mark the column to OND: Mark the column • Sometimes the Mark your • Sometimes the A "medium be used in people. Mark	do you usually ta do you usually ta 00 0 400 our usual eating show HOW OFT to show HOW M "how much" is as serving size as t	the numb sked as s n for each is larger f think you	e days yo 800 800 800 800 800 800 800 80	e past ge, you eat of f piec sually dium- ut only nan fo eat a s	e it? > 100 year. ou ate f each es, su eat C large v as a r wom malle	the f food ich a N TH (S-M guide ien, a r port	ood o d. s 1 e HE D. -L). and la ion o	during t gg, 2 e AYS YC The "m irger foi f that fo	ggs c OU E nediur r your pod th	or 3 eg AT IT. m" por ng peg an oth	ggs. rtion tl ople th her pe	han fo	ro	
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		_	HO	WOF	TEN		-	_	HO	WM	UCH	
TYPE OF FOOD	NEVER OR LESS THAN ONCE	1 PER MON.	2-3 PER MON.	1 PER	2 PER	3-4 PER WEEK		EVERY	MEDIUM	-	YOUR	
EXAMPLE: Bananas	PER MONTH	0	0		O	O	O	DAY	1 medium	S	M	L
Bananas	0	0	0	0	0	0	0	0	1 medium	1/2	1	2
Apples, applesauce	0	0	0	0	0	0	0	0	1 medium	1/2	1	2
Oranges (not including juice)	0	0	0	0	0	0	0	0	1 medium	1/2	1	2
Grapefruit (not including juice)	0	0	0	0	0	0	0	0	1/2 medium	1/2	1	2
Cantaloupe	0	0	0	0	0	0	0	0	1/4 medium	1/4	1/2	1
Peaches, apricots (fresh, in season)	0	0	0	0	0	0	0	0	1 medium	1/8	1/4	1/2
Peaches, apricots (canned or dried)	0	0	0	0	0	0	0	0	1 medium or 1/2 cup	1/2	1	2
Prunes, or prune juice	0	0	0	0	0	0	0	0	1/2 cup	s	M	L
Watermelon (in season)	0	0	0	0	0	0	0	0	1 slice	S	M	L
Strawberries, other berries (in season)	0	0	0	0	0	0	0	0	1/2 cup	5	M	L
Any other fruit, including kiwi, fruit cocktail, grapes, raisins, mangoes	0	0	0	0	0	0	0	0	1/2 cup	s O s	M	L
	122.1540			WEEK		3-4/ WEEK			WHERE THE REAL	3	M	L
Fiber cereals like raisin bran, granola or shredded wheat	0	0	0	0	0	0	0	0	1 medium bowl	O S	OM	0
Sweetened cereals like frosted lakes	0	0	0	0	0	0	0	0	1 medium .bowl	0 9	O M	0
Other cold cereals like corn lakes or cheerios	0	0	0	0	0	0	0	0	1 medium bowl	0 s		L
Cooked cereal like oatmeal, oat oran or grits	0	0	0	0	0	0	0	0	1 medium bowl	0		0
Milk on cereal	0	0	0	0	0	0	0	0	1/2 cup	э () s		
Breakfast bars, granola bars, bower bars	0	0	0	0	0	0	0	0	1 serving	O s	O M	0
Breakfast shakes, diet shakes	0	0	0	0	0	0	0	0	1 serving	o s		0
Pancakes or waffles	0	0	0	0	0	0	0	0	2 med.	0	0	0
Eggs	0	0	0	0	0	0	0	0	1 egg=sml. 2 eggs=med.	() egg	(2) eggs	() eggs
Egg substitutes, Egg Beaters, egg whites	0	0	0	0	0	0	0	0	2 eggs	(D) egg	(2) eggs	(J) eggs
Sausage or bacon	0	0	0	0	0	0	0	0	2 patties or pieces	(1) piece	(2) pieces	(3) piece
Cottage cheese	0	0	0	0	0	0	0	0	1/2 oup	O s	OM	OL
Other cheeses and cheese spreads	0	0	0	0	0	0	0	0	2 slices or 2 ounces	0	2	03
regular or lowfat)		and the second se										9

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ACRE DIVATING DECEMENTS	NEVER OR LESS	1 PER	2-3 PER	1 PER	2 PER	3-4 PER	5-6 PER	EVERY	MEDIUM		YOUR VING S	
	THAN ONCE PER MONTH	MON.	MON.	WEEK	WEEK	WEEK	WEEK	DAY	SERVING	S	М	L
VEGETABLES (fresh, frozen or canned	d, or in res	taura	nts)									
String beans, green beans	0	0	0	0	0	0	0	0	1/2 cup	0	0	0
Peas	0	0	0	0	0	0	0	0	1/2 cup	0	0	0
Chili with beans (with or without meat)	0	0	0	0	0	0	0	0	1 cup	0	0	0
Other beans such as baked beans, pintos, kidney (not including soup)	0	0	0	0	0	0	0	0	3/4 cup	0	0	0
Corn	0	0	0	0	0	0	0	0	1/2 cup	0	0	0
Alfalfa sprouts, including on sandwiches	0	0	0	0	0	0	0	0	1/2 cup	0	0	0
Tomatoes, tomato juice	0	0	0	0	0	0	0	+O	1 medium or 6 oz. glass	0	0	0
Salsa, ketchup, taco sauce	0	0	0	0	0	0	0	0	2 tablesp.	0	0	0
Broccoli	0	0	0	0	0	0	0	0	1/2 cup	0	0	C
Cauliflower or brussels sprouts	0	0	0	0	0	0	0	0	1/2 cup	0	0	C
Spinach (cooked or raw)	0	0	0	0	0	0	0	0	1/2 cup	0	0	C
Mustard greens, turnip greens, collards	0	0	0	0	0	0	0	0	1/2 cup	0	0	0
Cole slaw, cabbage	0	0	0	0	0	0	0	0	1/2 cup	0	0	C
Carrots, or mixed vegetables containing carrots	0	0	0	0	0	0	0	0	1/2 cup	0	0	C
Green salad	0	0	0	0	0	0	0	0	1 medium bowl	0	0	C
Salad dressing & mayonnaise (regular or lowfat)	0	0	0	0	0	0	0	0	2 tablesp.	0	0	C
French fries and fried potatoes	0	0	0	0	0	0	0	0	3/4 cup	0	0	C
White potatoes not fried, including boiled, baked, mashed and in potato salad	0	0	0	0	0	0	0	0	1 medium or 1/2 cup	0	0	C
Sweet potatoes, yams	0	0	0	0	0	0	0	0	1/2 cup	0	0	C
Any other vegetable, such as cooked onions, summer squash	0	0	0	0	0	0	0	0	1/2 cup	0	0	C
Butter, margarine or other fat added to veg., potatoes, etc.	0	0	0	0	0	0	0	0	2 pats	0	0	C
Tofu, bean curd	0	0	0	0	0	0	0	0	1/2 cup	0	0	C
Meat substitutes made from soy	0	0	0	0	0	0	0	0	1 cup or patty	0	0	C
	NEVER OR LESS THAN ONCE PER MONTH	LION	2-3 PER MON	1 PER WEEK	2 PER	3-4 PER		EVERY	in the part			

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TYPE OF FOOD	NEVER OR LESS THAN ONCE	1 PER	2-3 PER	1 PER	2 PER	3-4 PER		EVERY	MEDIUM	0.0000	YOUR	a la contra
	PER MONTH	MON.	MON.	WEEK	WEEK	WEEK	WEEK	DAY	SERVING	S	м	L
MEATS, SOUPS, PASTA	Ball California						5.2.3					
Hamburgers, cheeseburgers	0	0	0	0	0	0	0	0	1 medium or 4 oz.	0	0	C
Burritos or tacos with meat or beans	0	0	0	0	0	0	0	0	1 medium or 2 small	0	0	C
Beef roasts, steaks, sandwiches	0	0	0	0	0	0	0	0	4 ounces	0	0	C
Liver, including chicken livers	0	0	0	0	0	0	0	0	4 ounces	0	0	C
Pork, including chops, roasts	0	0	0	0	0	0	0	0	2 chops or 4 ounces	0	0	C
Fried chicken	0	0	0	0	0	0	0	0	2 small or 1 large pce.	0	0	C
Chicken or turkey (roasted or brolled, including on sandwiches)	0	0	0	0	0	0	0	0	2 small or 1 large pce.	0	0	C
Chicken stew or mixed dish with chicken	0	0	0	0	0	0	0	0	1 cup	0	0	C
Fried fish or fish sandwich	0	0	0	0	0	0	0	0	4 ounces or 1 sandwich	0	0	C
Tuna, tuna salad, tuna casserole	0	0	0	0	0	0	0	0	1/2 cup	0	0	C
Dysters	0	0	0	0	0	0	0	0	5 pieces, 1/4 cup or 3 oz.	0	0	С
Shell fish, (shrimp, crab, obster, etc.)	0	0	0	0	0	0	0	0	5 pieces, 1/4 cup or 3 oz.	0	0	C
Other fish (broiled or baked)	0	0	0	0	0	0	0	0	2 pieces or 4 ounces	0	0	C
Beef or vegetable stew or pot pie with carrots and other vegetables	0	0	0	0	0	0	0	0	1 cup	0	0	C
Spaghetti, lasagna, other pasta with tomato sauce	0	0	0	0	0	0	0	0	1 1/2 cups	0	0	C
Cheese dishes without tomato sauce, ike macaroni and cheese	0	0	0	0	0	0	0	0	1 cup	0	0	C
Pasta salad, other pasta without comato sauce	0	0	0	0	0	0	0	0	3/4 cup	0	0	C
Pizza	0	0	0	0	0	0	0	0	2 slices	(D) slice	(2) slices	3 slice
Hot dogs	0	0	0	0	0	0	0	0	2 hot dogs		(2) dogs	dog
Ham, bologna, other lunch meats (regular or made with turkey)	0	0	0	0	0	0	0	0	2 slices or 2 ounces	() slice	(2) slices	(3) slice
legetable soups with carrots or tomatoes, such as vegetable beef or tomato soup	0	0	0	0	0	0	0	0	1 medium bowl	S	M	CL
entil, pea and bean soups	0	0	0	0	0	0	0	0	1 medium bowl	0	OM	C
Other soups, like chicken noodle, nushroom, cup-a-soup, ramen	0	0	0	0	0	0	0	0	1 medium bowl	0	0	C
and the second framework	NEVER OR LESS THAN ONCE PER MONTH	1 PER MON.	2-3 PER MON	1 PER WEEK	2 PER WEEK	3-4 PER WEEK		EVERY		S	М	L

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TYPE OF FOOD	NEVER OR LESS	1 PER	2-3 PER	1 PER	2 PER	3-4 PER	5-6	EVERY	2+ PER	MEDIUM		YO	UR IG SIZ	E
	THAN ONCE PER MONTH	MON.	10.0	WEEK				100 C 100	DAY	SERVING	s	м	L	XL
BREADS, SNACKS, SP	READS (I	Pleas	e not	e that	t the	categ	ories	for th	nese	columns a	re di	fferer	nt.)	
Biscuits, muffins, (including fast foods)	0	0	0	0	0	0	0	0	0	1 medium piece	O s	OM	0	
Bagels, English muffins, hamburger buns	0	0	0	0	0	0	0	0	0	1 medium piece	0	0	0	
White bread, French or Italian bread, including sandwiches	0	0	0	0	0	0	0	0	0	# slices each time	(1) slice	2 slices	3 slices	
Dark bread, such as whole wheat, rye, pumpernickel	0	0	0	0	0	0	,0	0	0	# slices each time	(1) slice	(2) slices	() slices	
Corn bread, corn muffins	0	0	0	0	0	0	0	0	0	# pieces each time	(1) piece	(2) pieces	(1) pieces	
Tortillas	0	0	0	0	0	0	0	0	0	# slices each time	1 tort.	2 tort.	3 tort.	4 tort.
Snacks like nachos with cheese potato skins with topping	0	0	0	0	0	0	0	0	0	1 medium serving	O s	O M	0	O XL
Salty snacks, like potato chips, corn chips, popcorn, crackers	0	0	0	0	0	0	0	0	0	2 handfuls or 1 cup	O s	O M	0	O XL
Peanuts, peanut butter	0	0	0	0	0	0	0	0	0	2 tablesp.	O s	O M	0	
Margarine on bread or rolls	0	0	0	0	0	0	0	0	0	2 pats	O s	O M	O L	
Butter on bread or rolls	0	0	0	0	0	0	0	0	0	2 pats	0 5	O M	0	
Rice, or dishes made with rice	0	0	0	0	0	0	0	0	0	3/4 cup	O S	OM	0	O XL
SWEETS		1/ MON.		1/ WEEK				1/ DAY						
Ice cream (regular or lowfat)	0	0	0	0	0	0	0	0	0	1 scoop or 1/2 cup	O s	O M	0	O XL
Doughnuts, pastry	0	0	0	0	0	0	0	0	0	1 piece	O s	OM	0	O XL
Cookies or cake (regular or lowfat)	0	0	0	0	0	0	0	0	0	3-5 cookies	0	0 3-5	0 6-7	0 8+
Pumpkin pie, sweet potato pie	0	0	0	0	0	0	0	0	0	1 medium slice	O s	O M	0	
Other pies	0	0	0	0	0	0	0	0	0	1 medium slice	O S	O M	0	
Chocolate candy, candy bars	0	0	0	0	0	0	0	0	0	1 small bar or 1 oz.	O s	O M	O L	
Other candy or jelly	0	0	0	0	0	0	0	0	0	3 pieces or 1 tblsp.	O S	O M	0	

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			H	IOW (OFTE	N				HO	W ML	JCH	
TYPE OF FOOD	NEVER OR LESS THAN ONCE PER	1-3 PER	1 PER	2-4 PER	5-6 PER	1 PER	2-3 PER	4 PER	5+ PER	MEDIUM	SEF	YOUR	
	MONTH	MON	WEEK	WEEK	WEEK	DAY	DAY	DAY	DAY	SERVING	S	м	L
BEVERAGES (Please note	e that the	cat	egor	ies f	or th	nese	colu	umn	s are	differen	t.)		
Orange juice or grapefruit juice	0	0	0	0	0	0	0			6 oz. glass	0 4 oz.	0 6 oz.	80
Apple juice, grape juice	0	0	0	0	0	0	Q			6 oz. glass	0 4 oz.	0 6 oz.	0
Whole milk (or chocolate whole milk), not including on cereal	0	0	0	0	0	0	0	0		8 oz. glass	О Б оz.	0 8 oz.	10 0
2% milk (or chocolate 2% milk), not including on cereal	0	0	0	0	0	0	0	0		8 oz. glass	0 5 oz.	0 8 oz.	10
Skim milk, 1% milk, not including on cereal	0	0	0	0	0	0	0	0		8 oz. glass	5 oz.	8 oz.	
Kool-Aid, Hi-C, or other drinks with added vitamin C	0	0	0	0	0	0	0	0		8 oz. glass	0 5 oz.	8 oz.	10
Snapple, Calistoga, sweetened bottled waters or iced teas	0	0	0	0	0	0	0	0		1 bottle	5 oz.	B 02.	10 10
Regular soft drinks (not diet soda)	0	0	0	0	0	0	0	0	0	12 oz. can or bottle	0 8 oz.	0	15 0
Beer	0	0	0	0	0	0	0	0	0	12 oz. can or bottle	0 8 oz.	0	15
Wine or wine coolers	O	0	0	0	0	0	0	0	0	1 medium glass	O S	OM	C
Liquor	0	0	0	0	0	0	0	0	0	1 shot	0	0	C
Coffee or tea	0	0	0	0	0	0	0	0	0	1 medium cup	Os	OM	C
Non-dairy creamer n coffee or tea	0	0	0	0	0	0	0	0	0	1 tablesp.	o S		C
Cream (real) or Half-and-Half in coffee or tea	0	0	0	0	0	0	0	0	0	1 tablesp.	0	OM	C
Milk in coffee or tea	0	0	0	0	0	0	0	0	0	1 tablesp.	Os	0	C
Sugar or honey in coffee or tea or on cereal	0	0	0	0	0	0	0	0	0	2 teaspoons	o s	OM	

About how often do you eat the following foods from restaurants or carry-outs? Remember to think about all meals (breakfast, lunch, dinner or snacks).

			NUMBER (OF VISITS	LAST YEA	R	
RESTAURANT FOOD	NEVER IN PAST YEAR	1-4 TIMES PAST YEAR	5-11 TIMES PAST YEAR	1-3 TIMES A MONTH	ONCE A WEEK	2-4 TIMES A WEEK	ALMOST EVERY DAY
Fried chicken	0	0	0	0	0	0	0
Burgers	0	0	0	0	0	0	0
Pizza	0	0	0	0	0	0	0
Chinese food, Thai or other Asian food	0	0	0	0	0	0	0
Mexican food	0	0	0	0	0	0	0
Fried fish	0	0	0	0	0	0	0

DO NOT WRITE IN THIS SHADED AREA

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		LESS			/ERAGE					
SUMMARY QUES	STIONS	THAN ONCE PER WEEK	1-2 PER WEEK	3-4 PER WEEK	5-6 PER WEEK	1 PER DAY	1 1/2 PER DAY	2 PER DAY	3 PER DAY	4 PE DA
a. How often do you use f in cooking?	at or oil	0	0	0	0	0	0	0	0	C
b. About how many servin vegetables do you eat, counting salad or potation	not	0	0	0	0	0	0	0	0	c
c. About how many servin do you eat, not counting	igs of fruit g juices?	0	0	0	0	0	0	0	0	
d. About how many servin cold cereal do you eat?		0	0	0	0	0	0	0	0	0
e. About how many glasse chocolate milk) do you	es of milk (or drink?	0	0	0	0	0	0	0	0	c
 Don't know Stick margarine Butter What kinds of fat do you	 Pam or no oi Soft tub man Olive oil or control usually add to 	garine anola oil	O Lo O Co	w calorie orn oil, ve	ck, bacor a margari agetable (tc.? Mar	ne pil		hortenin o you u		
Don't add fat Stick margarine Butter	 Lard, fatback Soft tub marg Whipped but 	k, baconfa garine	t O Cr	isco sho w calorie				Tenge		
When you eat the following Cheese Ice cream or yogurt Salad dressing Cake or cookies When you drink orange j	 Always low-fi Always low-fi Always low-fi Always low-fi Always low-fi 	at at at at do you (O So O So O So O So drink a (metimes metimes metimes metimes	-fortified	0 0 0 0	Rarely lo Rarely lo Rarely lo Rarely lo ?	ow-fat ow-fat ow-fat	bd?	
How often do you add sa How often do you eat the How often do you eat the How do you like your me	It to your food? skin on chicke fat on meat?	? en?	 Seldo Seldo Seldo Rare 	m m m	 Some Some Some Mediu 	times times times	Parely Off Off Off	ten		
About how many times h	average, about 6 - 14 0 19 ave you gone o - 2 0 3 - 5 Very Good 0	5 - 24 on a diet (Good (25 to lose v 6 - 8	- 34 weight?	○ 35 ○ 9 - 11	or more	oke now			
What language do you us	Spanish C hite, not Hispanic <i>IUCH FOR T</i> Please take a more	Somethir	can Ame THE TI In any que	ME TO	FILL	OUTT	HIS OI			RE

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