

How to fill out the Food Questionnaire

- It will take you about 30 - 45 minutes to complete this food questionnaire. You can get help if you need it. Completeness is very important for obtaining accurate results so please be sure to fill in all appropriate dots. Please use the #2 pencil we provided and fill in the dots as completely as you can.
- Cover Page: You do not need complete any boxes on this page.
- The questions on the Food Questionnaire ask about the foods you ate over the past year.
- Remember to think about: The foods YOU ate. NOT what you THINK you should eat.
- Remember to include the foods that you eat at home, at restaurants, and from fast food places.
- If you rarely or never eat a food, mark that box or if there is no appropriate box, leave it blank.
- Study the pictures on the back of this sheet to find out what small, medium and large servings look like on a plate. Don't be afraid to mark "large" servings. Almost everyone eats large servings of their favorite foods!
- Seasonal foods: Answer the # of times and amount you eat of these items when they are in season.
- If you don't take any vitamins or minerals regularly, answer "no" to the first question and skip the rest of the vitamin questions. Proceed to the middle of page 2, the section on your usual eating habits.
- If you have trouble completing the vitamin section, leave it blank and the clinic staff will help you fill it out. Please bring all vitamin containers with you to your visit.
- Feedback: You will receive a summary of your diet based on your answers so please be complete and as accurate as you can.

Example: Every Sunday, Susan eats spaghetti with meat sauce for dinner. On Monday and Tuesday, she eats the leftovers for lunch. Each time she eats 1 1/2 cups of spaghetti.

Susan marks the form to show that she eats spaghetti with meat sauce 3 times a week, and she eats a large serving.

Type of food	How often did you eat the food (mark one)									Amount			
	Never or less than once per month	1 per month	2 per month	1 per week	2 per week	3-4 per week	5-6 per week	1 per day	2+ per day	Medium Serving Size	Your Serving size		
											S	M	L
Spaghetti or other noodles with meat sauce	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1 Cup	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

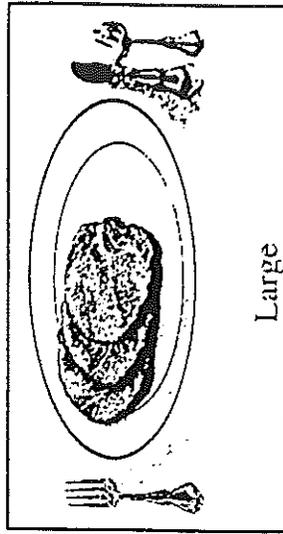
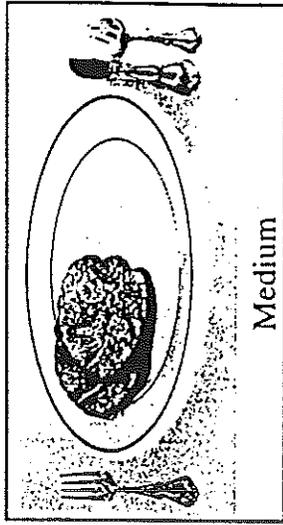
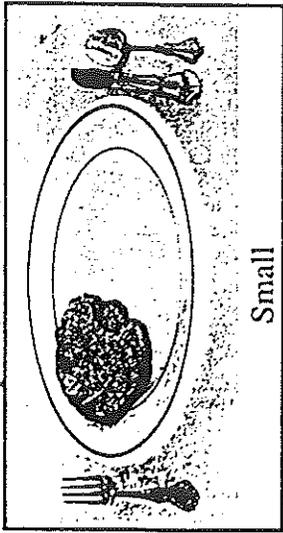
(Please read the instructions on the Food Questionnaire as you complete the form.)

Thank you. The Study of Osteoporotic Fractures staff.

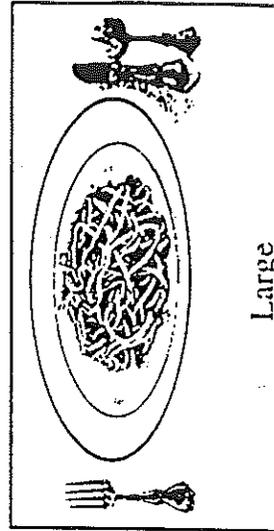
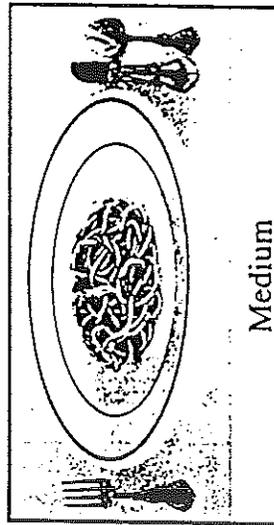
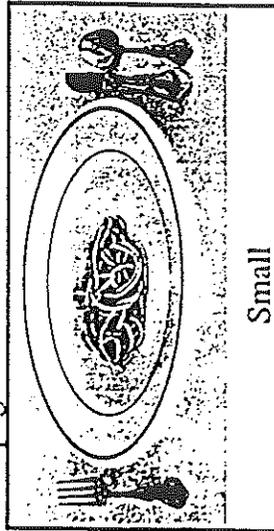
Serving Size Pictures

Look at the pictures below. Decide which pictures show the amounts of food that you usually eat. As you fill out the Food Questionnaire, use these examples to help you complete the serving size column.

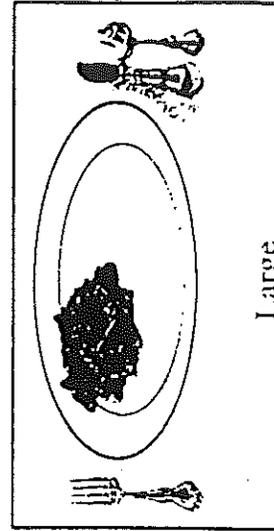
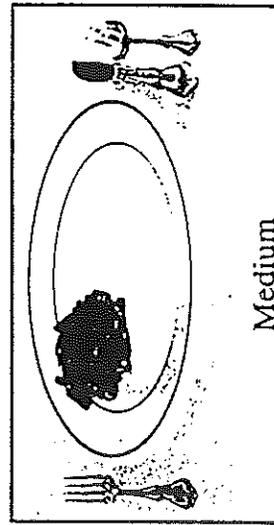
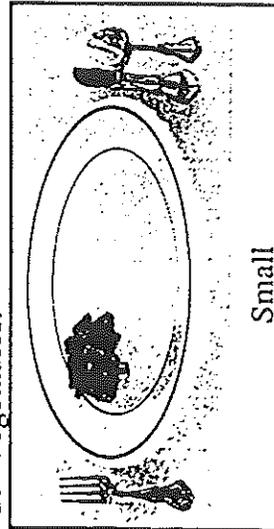
1. Beef, pork, chicken, and fish.



2. Spaghetti and casseroles.



3. Vegetables.



Please note: A small serving is about one-half (1/2) the medium serving size or less.

A large serving is about one-and-one-half (1 1/2) times the medium serving size or more.