



Dietary Intake Form

ID NUMBER:

FORM CODE:

DATE: 7/10/2017
Version 1.0

ADMINISTRATIVE INFORMATION

0a. Completion Date: / /
Month Day Year

0b. Staff ID:

“In this part of the visit we want to obtain information on your usual eating habits. We will go over specific foods by groups. I’ll name a food and portion size and you tell me how often, on average, you ate that during the past year.”

“If your portion was much different from the amount I say, please tell me if it was at least twice as much, or half as much. We have a few sizes of cups and glasses here for reference. [Explain 4 oz. glass, 8 oz. glass, cup and ½ cup measures, TBSP, Tsp and Bowl.] Here are the choices for ‘how often.’ [Show RC 1.] The choices are number of times a day or week or month. Please respond with the appropriate letter. For example, ‘once a day’ would be ‘D.’ If you ate or drank something less than twelve times a year, that would be the same as ‘almost never,’ which is ‘I.’”

“It is important that your answer be short in order to save time, but we want you to be as accurate as possible. Feel free to ask questions or have me repeat instructions if I am not being clear.”

A. [RC1] DAIRY FOODS

Response Categories:

- | | | |
|-----------------|------------------|-------------------|
| >6 per day (A) | 1 per day (D) | 1 per week (G) |
| 4-6 per day (B) | 5-6 per week (E) | 1-3 per month (H) |
| 2-3 per day (C) | 2-4 per week (F) | Almost Never (I) |

1. Skim or low fat milk; 8 oz. glass

[item includes ½%, 1%, 2% milk; reconstituted nonfat dry milk; buttermilk – low fat or unknown; cold or hot chocolate milk made with skim or lowfat milk]

2. Whole milk; 8 oz. glass.....

[item includes whole; “homogenized”; jersey milk; whole buttermilk; unknown milk; cold or hot chocolate milk made with whole milk]

* New item or item modified from ARIC Visit 3 Dietary Intake Questionnaire

3. Yogurt; 1 c.
[item includes whole milk yogurts, regular or frozen, 2% or low fat yogurts, regular or frozen]
4. Ice cream; ½ c.
[item includes all brands, not ice milk]
5. Cottage cheese or ricotta cheese; ½ c.
[item includes any cottage or ricotta cheese including any in recipes; farmer's cheese]
6. Other cheeses, plain or as part of a dish; 1 slice or serving
[item includes processed, cheddar and all hard natural cheeses]
7. Margarine or a margarine/butter blend; pats added to food or bread
[at table]
8. Butter; pats added to food or bread
[at table]

B. [RC1] FRUITS

Response Categories:

- | | | |
|-----------------|------------------|-------------------|
| >6 per day (A) | 1 per day (D) | 1 per week (G) |
| 4-6 per day (B) | 5-6 per week (E) | 1-3 per month (H) |
| 2-3 per day (C) | 2-4 per week (F) | Almost Never (I) |

9. Fresh apples or pears; 1
10. Oranges; 1
11. Orange or grapefruit juice; small glass
[item includes 4 to 6 oz. glass]
- 12.* Peaches, apricots or plums; 1 fresh or ½ c. canned or dried
*[item includes *dried prunes*]*
13. Bananas; 1

* New item or item modified from ARIC Visit 3 Dietary Intake Questionnaire

14. Other fruits; 1 fresh or ½ c. canned, including fruit cocktail.....
[item includes cantaloupe; grapefruit; strawberries; papaya; raspberries; raisins; grapes; pineapple; kiwi]

C. [RC1] VEGETABLES

Response Categories:

>6 per day (A) 1 per day (D) 1 per week (G)
4-6 per day (B) 5-6 per week (E) 1-3 per month (H)
2-3 per day (C) 2-4 per week (F) Almost Never (I)
[do not include small amounts in mixed dishes]

15. String beans or green beans; ½ c.
[item includes frozen or fresh; wax beans; fava beans]

16. Broccoli; ½ c.
[item includes raw or cooked]

17. Cabbage, cauliflower, brussel sprouts; ½ c.
[item includes raw or cooked; coleslaw; sauerkraut]

18. Carrots; 1 whole or ½ c. raw or cooked.....
[item includes raw or cooked]

19. Corn; 1 ear or ½ c. cooked.....
[item includes raw or cooked]

20. Spinach, collards or other greens, but do not include lettuce; ½ c.
[item includes raw or cooked; beet greens, chard, kale, mustard greens, turnip greens; romaine]

21. *Salads, including all types of lettuce

a) Do you usually eat salads with tomatoes, cucumbers, and/or carrots? Y N

22. Peas or lima beans; ½ c. fresh, frozen or canned.....
[item includes mixed vegetables – peas, carrots, corn and limas – frozen or canned butter beans; not dried limas]

* New item or item modified from ARIC Visit 3 Dietary Intake Questionnaire

23. Dark yellow, winter squash such as acorn, butternut; ½ c.
[item includes hubbard, danish, buttercup, delicious, crookneck]

24. Sweet potatoes; ½ c.
[item includes pumpkin, yams, fresh or canned]

25.* Beans or lentils, dried, cooked or canned, such as pinto, black-eyed, baked beans, ½ c.
[item includes red; brown; navy; northern; kidney; black-eyed; garbanzo;
split peas; refried beans; dried limas; *bean or lentil soup*]

26.* Tomatoes; 1 or tomato juice, 4 oz.
[item includes fresh or canned tomatoes; V-8 juice; *tomato soup*]

D. [RC1] MEATS

Response Categories:

>6 per day (A)	1 per day (D)	1 per week (G)
4-6 per day (B)	5-6 per week (E)	1-3 per month (H)
2-3 per day (C)	2-4 per week (F)	Almost Never (I)

27. Chicken or turkey, without skin.
[item includes Cornish hen; pheasant]

28. Chicken or turkey, with skin.
[item includes Cornish hen; turkey roll; pheasant]

29. Hamburgers; 1
[item includes any ground beef in patty form]

30. Hot dogs; 1
[not chicken type]

31. Processed meats: sausage, salami, bologna, etc.; piece or slice
[item includes cold cuts; luncheon meats, packaged or canned;
tongue; liver spread goes with liver]

32. Bacon; 2 slices
[not Canadian style: Canadian bacon is coded in next category]

* New item or item modified from ARIC Visit 3 Dietary Intake Questionnaire

33. Beef, pork or lamb as a sandwich or mixed dish, stew, chili, or casserole, lasagna
or in spaghetti sauce, etc.....
[item includes hot dish; meat pies; pizza; meatloaf; meatball;
barbeque; chitterlings; Canadian bacon; souse meat; pigs feet]
34. Beef, pork or lamb as a main dish, steak, roast, ham, etc.
[includes chops, corned beef]
35. Canned tuna fish; 3-4 oz.
[item includes all kinds, about 1/2 - 2/3 can]
36. Dark meat fish, such as salmon, mackerel, swordfish, sardines, bluefish; 3-5 oz.....
[item includes canned salmon; lake trout; shad; herring; fresh tuna;
capelin; dogfish; eel; halibut; sablefish; Atlantic sturgeon; Arctic char;
lake whitefish]
37. Other fish, such as cod, perch, catfish, etc.; 3-5 oz.
[item includes orange roughy; grouper; walleye; crappie; whiting; unknown]
38. Shrimp, lobster, scallops as a main dish
[item includes clams; oysters; crab]
39. Eggs; 1
[item includes boiled; poached; fried; scrambled; omelettes; egg salad;
quiche; not egg substitutes such as Egg Beaters]

E. [RC1] SWEETS, BAKED GOODS, CEREALS

Response Categories:

>6 per day (A)	1 per day (D)	1 per week (G)
4-6 per day (B)	5-6 per week (E)	1-3 per month (H)
2-3 per day (C)	2-4 per week (F)	Almost Never (I)

40. Chocolate bars or pieces, such as Hershey's, plain M&Ms, Snickers,
Reese's; 1 oz.
[average bar = about 1 oz. chocolate cream = 1/2 oz.
chocolate fudge; chocolate chips; peanut M&Ms go with nuts, group F]
41. Candy without chocolate; 1 oz.
[about 3-4 = 1 oz. hard candies; gum drops; 1 pkg. life savers;
not dietetic]

* New item or item modified from ARIC Visit 3 Dietary Intake Questionnaire

42. Pie, homemade or ready-made or from a mix; 1 slice.....
[item includes any kind or tarts, bakery, mix or frozen dough or restaurant; cheese cake; cream puff; pound cake]
43. Donut; 1
[item includes all kinds]
- 44.* Biscuits, cornbread, *pancakes or waffles*; 1
45. Danish pastry, sweet roll, coffee cake, muffins, croissant; 1
46. Cake or brownie; 1 piece.....
[item includes cupcake; all cakes and bars]
47. Cookies (2) or granola bar (1)
[2 cookies = 1 medium serving; 1 granola bar = 1 medium serving]
48. Cold breakfast cereal; ½ c.....
[item includes all ready to eat; wheat germ]
49. Cooked cereals such as oatmeal, grits, cream of wheat; ½ c.
[item includes all cooked cereals]
50. White bread; 1 slice.....
[item includes French; Italian; raisin; ½ bagel; ½ white English muffin; average dinner roll; ½ frankfurter roll; ½ hamburger bun; pita bread; matzo 4" x 6"]
51. Dark or whole grain bread; 1 slice.....
[item includes whole wheat; mixed grain; rye or pumpernickel; 2 graham cracker squares (2 ½"); 3 rye wafers (2" x 3")]

F. [RC1] MISCELLANEOUS

Response Categories:

- | | | |
|-----------------|------------------|-------------------|
| >6 per day (A) | 1 per day (D) | 1 per week (G) |
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52. Peanut butter; 1 tbsp
[item includes any kind]
53. Potato chips or corn chips; small bag or 1 oz.
[item includes cheese puffs, popcorn, other salty snacks, nachos; 1 oz. = about 1 c.]
- 54.* Crackers; 4.....
[item includes saltines, pretzels, Wheat Thins®, Triscuits®, Ritz®]
55. French fried potatoes; 1 serving, 4 oz.
[4 oz. = about 1 c.]
56. Nuts; 1 oz.
[item includes all nuts, peanuts; mixed; M&M peanut; 1 oz. = about 3 tbsp]
57. Potatoes, mashed; 1 c. or baked; 1.....
[item includes boiled]
58. Rice; ½ c.
[item includes white rice; brown rice; wild rice; Rice-a-Roni]
59. Spaghetti, noodles or other pasta; ½ c.....
[item includes macaroni; fettuccine; noodles in lasagna]
60. Home-fried food, such as any meats, poultry, fish, shrimp, eggs, vegetables, etc.;;
 1 serving
[item includes any food fried at home except French fries; include sautéed foods]
61. Food fried away from home, such as any fish, chicken, chicken nuggets, etc.....
[item includes any deep fried foods; fish sticks; fish patties; McNuggets; do not include French fries]

G. [RC1] BEVERAGES

Response Categories:

- | | | |
|-----------------|------------------|-------------------|
| >6 per day (A) | 1 per day (D) | 1 per week (G) |
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62. Coffee, regular (caffeinated or decaf); 1 c.
[item includes brewed or instant]

63. Tea, iced or hot, regular (caffeinated or decaf), herbal; 1 cup

64.* Hot chocolate or cocoa beverage made with water; 1 cup
[made with **packaged hot chocolate mix and water**]

65. Low calorie or diet soft drinks or fruit punch, such as diet colas, diet 7-Up, diet orange or grape, diet lemonade or other diet fruit drinks;
1 glass
[item includes all low calorie or diet beverages or sodas]

66. Sugar-sweetened soft drinks or fruit punch, such as colas, 7-Up, orange or grape soda, lemonade or other sugar-sweetened fruit drinks.
1 glass
[item includes all sugar-sweetened beverages or sodas]

H. [RC2] SOUPS

67.* How often do you eat chicken-noodle or broth-based soups; 8 oz. serving?.....
1/week A
2-3/month..... B
1/month or less C
Never D

68.* How often do you eat cream soups including chowders; 8 oz. serving?.....
1/week A
2-3/month..... B
1/month or less C
Never D

I. OTHER DIETARY ITEMS

69. [RC2] How often do you eat liver; 3-4 oz. serving?.....
1/week A
2-3/month..... B
1/month or less C
Never D

* New item or item modified from ARIC Visit 3 Dietary Intake Questionnaire

70. **[RC3]** What kind of fat do you usually use for frying and sautéing foods at home, excluding "Pam"-type spray?

- I don't use fat for frying or sautéing.... A → **Go to Item 72**
- Real butter B → **Go to Item 72**
- Margarine..... C
- Vegetable oil D
- Vegetable shortening..... E
- Olive oil..... F → **Go to Item 72**
- Extra virgin olive oil..... G → **Go to Item 72**
- Lard..... H → **Go to Item 72**
- Bacon grease..... I → **Go to Item 72**
- Not Applicable..... J → **Go to Item 72**
- Unknown..... K → **Go to Item 72**

71. Enter code and specify brand and form below

a. Brand/form _____

72. **[RC4]** What kind of fat do you usually use at the table?

- I don't put fat on my food at the table A → **Go to Item 75**
- Real butter B → **Go to Item 75**
- Margarine..... C
- Olive oil..... D → **Go to Item 75**
- Extra virgin olive oil..... E → **Go to Item 75**
- Not Applicable..... F → **Go to Item 75**
- Unknown..... G → **Go to Item 75**

73. **[RC5]** What brand and form of margarine do you usually use at the table?

a. Form:

- None A → **Go to Item 75**
- Stick B
- Tub..... C
- Diet (low calorie)..... D
- Other..... E

74. Enter code and specify brand name below.

a. Brand: _____

* New item or item modified from ARIC Visit 3 Dietary Intake Questionnaire

75. Do you eat cold breakfast cereal? Y N → **Go to Item 76**

a. What kind of cold breakfast cereal do you most often use?

[Enter code and specify brand name below.]

b. Brand: _____

76.* **[RC6]** How often do you drink water, tap or bottled, unsweetened?

Every day A

Occasionally B

Never C

77.* **[RC6]** How often do you consume meal replacement, energy, or high-protein beverages or bars?

such as Instant Breakfast, Ensure, Slimfast, Sustacal?

Every day A

Occasionally B

Never C

78. Are you currently on a special diet? Y N → **Go to Item 80**

79. **[RC7]** What type of diet is it?

Weight loss A

Low salt B

Low cholesterol C

Weight gain D

Diabetic E

Other F

80. How many teaspoons of sugar do you add to your beverages and food daily? Include sugar

added to coffee, tea, cereal, etc.

81. **[RC6]** How often do you use artificial sweeteners, such as Equal, Splenda, Sweet n' Low?

Every day A

Occasionally B

Never C

* New item or item modified from ARIC Visit 3 Dietary Intake Questionnaire

82. Do you add salt or salt-containing seasoning such as garlic salt, onion salt, soy sauce or Accent to your food in cooking or at the table? Y N

83. Do you eat low salt foods such as low salt chips, nuts, cheese, soups, or other foods? Y N

J. ADMINISTRATIVE INFORMATION

84. Interviewer's opinion of information:

Reliable.....A

Questionable.....B

Participant uncooperativeC

Participant unable to estimate frequencies.....D

[Evaluate the quality of the interview, emphasizing the dietary portion.]