

Please use #2 pencil only.

ID:

0	1	2	3	4	5	6	7	8	9
0	1	2	3	4	5	6	7	8	9
0	1	2	3	4	5	6	7	8	9
0	1	2	3	4	5	6	7	8	9

1. Do you currently take multivitamins? (Please report other individual vitamins in the next section.)

No Yes a) How many do you take per week? 2 or less 3-5 6-9 10 or more

b) Is this usually a gummy vitamin? No Yes

c) Is the type you most often take labeled for: Men Women Both

d) What specific brand (or equivalency) do you most often take? (Select ONE ONLY)

- Centrum silver or Senior Vit.
- One-A-Day Teens or equiv.
- Eye Health
- Other Multivitamins (with minerals)
- Centrum or generic equiv.
- Flintstones or Kids Multi equiv.
- Whole Foods/Vegetarian/Fruit Bites
- Other Multivitamins (without minerals)
- One-A-Day or equiv.
- Prenatal
- Other

Not counting multivitamins, do you take any of the following vitamin preparations?

a) Vitamin A No Yes, seasonal only Yes, most months If Yes, Dose per day: Less than 3,000 mcg 3,000 to 4,500 mcg 4,800 to 6,600 mcg 6,900 mcg or more Don't know

b) Potassium No Yes If Yes, Dose per day: Less than 2.5 mEq (100 mg) 3 to 9 mEq 10 to 19 mEq 20 mEq or more Don't know

c) Vitamin C No Yes, seasonal only Yes, most months If Yes, Dose per day: Less than 400mg 400 to 700 mg 750 to 1250 mg 1300 mg or more Don't know

d) Vitamin B6 No Yes If Yes, Dose per day: Less than 50 mg 50 to 99 mg 100 to 149 mg 150 mg or more Don't know

e) Vitamin E No Yes If Yes, Dose per day: Less than 100 mg 100 to 300 mg 301 to 400 mg 401 mg or more Don't know

f) Calcium No Yes If Yes, Dose per day: Less than 600 mg 600 to 900 mg 901 to 1500 mg 1501 mg or more Don't know

g) Vitamin D No Yes, seasonal only Yes, most months If Yes, Dose per day: < 1000 IU's (< 25 mcg) 1000-1999 IU's (25-49 mcg) 2000-4999 IU's (50-124 mcg) 5000+ IU's (125+ mcg) Don't know

h) Zinc No Yes If Yes, Dose per day: Less than 31 mg 31 to 74 mg 75 to 100 mg 101 mg or more Don't know

2. Are there other supplements that you take on a regular basis?

- Metamucil/Citrucel
- Iron
- Folic Acid
- Coenzyme Q10
- Probiotics
- Turmeric/Curcumin
- B-Complex
- Vitamin B12
- Fish Oil
- Cod Liver Oil
- Biotin
- Flax Seed Oil
- Magnesium
- Lycopene
- Selenium
- Beta-carotene
- Niacin
- Glucosamine/Chondroitin
- Other

3. How many teaspoons of sugar do you add to your beverages or food each day?

Zero 1 tsp. 2 tsp. 3 tsp. 4 tsp. 5 tsp. 6 tsp. 7 tsp. 8 tsp. 9 tsp. 10 tsp.

More than 10? Write number here tsp.

4. What brand and type of cold breakfast cereal do you most often eat?

Specify cereal brand & type (e.g., Kellogg's Raisin Bran)

0	1	2	3	4	5	6	7	8	9
0	1	2	3	4	5	6	7	8	9
0	1	2	3	4	5	6	7	8	9

5. For each food listed, fill in the circle indicating how often on average you have used the amount specified during the past year.

AVERAGE USE LAST YEAR

DAIRY FOODS		Never, or less than once per month	1-3 per month	1 per week	2-4 per week	5-6 per week	1 per day	2-3 per day	4-5 per day	6+ per day
Milk (8 oz. glass)	Skim milk	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	1 or 2 % milk	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Whole milk	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Almond milk	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Soy milk	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Other plant-based milk	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cream, e.g., coffee, sour (exclude fat free) (1 Tbs)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Non-dairy coffee whitener (exclude fat free) (1 Tbs)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Frozen yogurt, sherbet, or low-fat ice cream (1 cup)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Regular ice cream (1 cup)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Spreads added to food or bread; exclude use in cooking	Pure butter or ghee	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Margarine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Butter with added oil (e.g., Land O Lakes Butter with Canola Oil)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Yogurt (4-6 oz.) Include drinkable	Plain	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Artificially sweetened (e.g., light peach)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Sweetened (e.g., strawberry, vanilla)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
What type of yogurt do you most often eat? (Mark all that apply.)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Greek	<input type="radio"/> Regular	<input type="radio"/>	<input type="radio"/> Full Fat	<input type="radio"/>	<input type="radio"/> Reduced Fat	<input type="radio"/>
Cottage or ricotta cheese (1/2 cup)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cream cheese (1 oz.)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other cheese, e.g., American, cheddar, etc., plain or as part of a dish (1 slice or 1 oz. serving)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/> W	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> D	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
What type of cheese do you most often eat?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Regular	<input type="radio"/> Low-fat or Lite	<input type="radio"/>	<input type="radio"/> Fat Free	<input type="radio"/>	<input type="radio"/> None	<input type="radio"/>

CENTER

PERF

5. (continued) For each food listed, fill in the circle indicating how often on average you have used the amount specified during the past year.

1	1	1	1
2	2	2	2
4	4	4	4
8	8	8	8
P	P	P	P

1	1	1	1
2	2	2	2
4	4	4	4
8	8	8	8
P	P	P	P

SWEETS, BAKED GOODS, MISCELLANEOUS	Never, or less than once per month	1-3 per month	1 per week	2-4 per week	5-6 per week	1 per day	2-3 per day	4-5 per day	6+ per day		
Milk chocolate (bar or pack), e.g., Hershey's, M&M's	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	P
Dark chocolate, e.g., Hershey's Dark or Dove Dark	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	a
Candy bars, e.g., Snickers, Milky Way, Reese's	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	b
Candy without chocolate (1 oz.)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	c
Cookies (1) or Ready made or from mix or dough	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Brownies (1) Home-baked, from scratch	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Doughnuts (1)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Cake, homemade or ready made (slice)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Pie, homemade or ready made (slice)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Jams, jellies, preserves, syrup, or honey (1 Tbs)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Peanut butter or other nut butter (1 Tbs)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Popcorn, regular, fat free or light (2-3 cups)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Sweet roll, coffee cake or other pastry (1)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Snack bars, e.g., Kind, Kashi, granola (1)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Energy bars or high protein bars, e.g., Clif, Quest, RXbar	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Diet nutrition drinks, e.g. Slimfast (1)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Ensure, Boost or other meal replacement drinks (1)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Pretzels (1 small bag or serving)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Peanuts (small packet or 1 oz.)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Walnuts (1 oz.)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Other nuts (small packet or 1 oz.)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Dried cranberries (1/4 cup)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Mixed dried fruit (1/4 cup)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Oat bran, other bran (wheat, etc.), added to food (1 Tbs)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Chowder or cream soup (1 cup)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Tomato soup (1 cup)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Ketchup or red chili sauce (1 Tbs)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Flaxseed (1 Tbs)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Seeds, e.g., pumpkin, sunflower, etc. (1/4 cup)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Garlic, fresh or powdered (1 clove or 4 shakes)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Olives, any type (3)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Olive oil added to food or bread (1 Tbs)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Low-fat or olive oil mayonnaise (1 Tbs)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Regular mayonnaise (1 Tbs)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Salad dressing (1-2 Tbs) How often? <input checked="" type="radio"/> Daily	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Type(s): <input type="radio"/> Nonfat <input type="radio"/> Low-fat <input type="radio"/> Olive oil <input type="radio"/> Regular (e.g., Italian, Ranch)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Artificial sweeteners (1 packet) How often? <input checked="" type="radio"/> Daily	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Type(s): <input type="radio"/> Splenda <input type="radio"/> Equal <input type="radio"/> NutraSweet <input type="radio"/> Sweet'N Low <input type="radio"/> Truvia <input type="radio"/> Stevia	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

PAM

6. Liver: beef, calf or pork (4 oz.) Never Less than 1/mo 1/mo 2-3/mo 1/week or more
- Liver: chicken or turkey (4 oz.) Never Less than 1/mo 1/mo 2-3/mo 1/week or more
7. How often do you eat pan-fried or sautéed food at home? (Exclude "Pam"-type spray)
- Less than once a week 1-3 times per week 4-6 times per week Daily
8. What kind of fat is most often used for pan-frying and sautéing at home? (Exclude "Pam"-type spray)
- Real butter Margarine Olive oil Vegetable oil Veg. shortening Lard N/A
9. What kind of fat is most often used for baking COOKIES at home?
- Real butter Margarine Olive oil Vegetable oil Veg. shortening Lard N/A
10. What type of cooking oil is most often used at home? (e.g., Mazola Corn Oil) Specify brand and type
11. How often do you eat deep fried chicken, fish, shrimp, clams or onion rings away from home?
- Less than once a week 1-3 times per week 4-6 times per week Daily
12. How often do you eat toasted breads, bagel or English muffin (slice or 1 half bagel)?
- Less than once a week 1-3 times per week 4-6 times per week Daily 2+ times/day
13. Are you following any of these diets? (Mark all that apply.)
- Low carb (Atkins, Paleo, etc.) Vegetarian Low sodium Diabetic Mediterranean
- KETO Gluten free Low calorie Intermittent fasting Other
- Vegan Low fat Weight Watchers DASH None

				0	0
				1	1
			1	2	2
AVO OLV			2	3	3
BLE PEA				4	4
CAN SAF				5	5
COC SES				6	6
CORSUN				7	7
GRSWAL				8	8
VEG				9	9