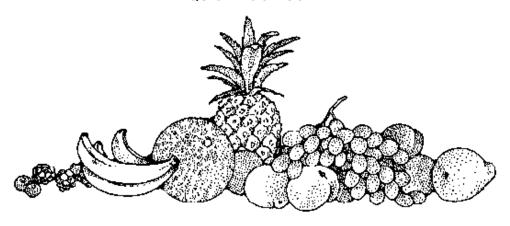
NATIONAL INSTITUTES OF HEALTH EATING AT AMERICA'S TABLE STUDY QUICK FOOD SCAN



- The person who completed the telephone interviews for the Eating at America's Table Study should fill out this questionnaire.
- Use only a No. 2 pencil.
- Be certain to completely blacken in each of the answers, and erase completely if you make any changes.
- Do not make any stray marks on this form.
- When you complete this questionnaire, please return it in the postage-paid envelope to:

National Cancer Institute EPN, Room 313 6130 Executive Blvd., MSC 7344 Bethesda, MD 20892-7344 BAR

CODE

LABEL

HERE

NOTIFICATION TO RESPONDENT OF ESTIMATED BURDEN

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Office, 6701 Rockledge Drive, MSC 7730, Bethesda, MD 20892-7730, ATTN: PRA (0925-0450). Do not return the completed form to this address.

INSTRUCTIONS

- Think about what you usually ate last month.
- Please think about <u>all</u> the fruits and vegetables that you ate <u>last month</u>. Include those that were:
 - raw and cooked,

 \bigcirc

About ½ cup

- eaten as snacks and at meals,
- eaten at home and away from home (restaurants, friends, take-out), and
- eaten alone and mixed with other foods.
- Report how many times per month, week, or day you ate each food, and if you ate it, how much you usually had.
- If you mark "Never" for a question, follow the "Go to" instruction.

 \bigcirc

About 1 cup

• Choose the best answer for each question. Mark only one response for each question.

oran	the last mont ge, apple, gra perry juice drir	pe, or gra	pefruit juic	e? Do no	t count fr	uit drinks	like Kool-/	Aid, lemor	nade, Hi-C,	
Never (Go to Question 2	1-3 times 2) last month	1-2 times per week	3-4 times per week	5-6 times per week	1 time per day	2 times per day	3 times per day	4 times per day	5 or more times per day	
1a. Each	time you dra	nk 100% j	uice, how	much did	you usua	lly drink?				
Lose than 3/ our			0 3/4 to 11/4 cup		11⁄4 to 2 cups			More than 2 cups		
Less than 3/4 cup (less than 6 ounces)			(6 to 10 ounces)		(10 to 16 ounces)			(more than 16 ounces)		
2. Over	the last mont	h, how oft	en did you	ı eat lettu	ce salad (with or w	rithout otl	ner veget	ables)?	
\circ	\circ	\bigcirc	\circ	\bigcirc	\circ	\bigcirc	\circ	\circ	\circ	
Never (Go to	1-3 times	1-2 times	3-4 times	5-6 times	1 time	2 times	3 times	4 times	5 or more times	
Question 3		per week	per week	per week	per day	per day	per day	per day	per day	
2a. Each time you ate lettuce salad , how much did you usually eat?										

More than 2 cups

About 2 cups

3.	Over the last month, how often did you eat French fries or fried potatoes?										
Q	Never (Go to uestion 4)	1-3 times last month	1-2 times per week	3-4 times per week	5-6 times per week	1 time per day	2 times per day	3 times per day	4 times per day	5 or more times per day	
3a.	. Each tir	ne you ate	French fi	ries or frie	ed potatoe	s, how m	uch did yo	ou usually	eat?		
	Small order or less Medium order (About 1 cup or less) (About 1½ cups)				•				Super Size order or more (About 3 cups or more)		
4.	4. Over the last month, how often did you eat other white potatoes? Count baked, boiled, and mashe potatoes, potato salad, and white potatoes that were not fried.										
Q	Never (Go to uestion 5)	1-3 times last month	1-2 times per week	3-4 times per week	5-6 times per week	1 time per day	2 times per day	3 times per day	4 times per day	5 or more times per day	
4a.	. Each tin	me you ate	these po	tatoes , ho	w much d	id you usı	ually eat?				
	1 small potato or less 1 medium potato (½ cup or less) (½ to 1 cup)				1 large potato (1 to 1½ cups)			2 medium potatoes or more (1½ cups or more)			
5.		e last mont beans, po i					beans?(Count bal	ked beans	, bean soup,	
Q	Never (Go to uestion 6)	1-3 times last month	1-2 times per week	3-4 times per week	5-6 times per week	1 time per day	2 times per day	3 times per day	4 times per day	5 or more times per day	
5a.	. Each tir	ne you ate	these be	ans, how	much did y	ou usuall/	y eat?				
	Less th	<mark>○</mark> an ½ cup		⁄ ₂ to 1 c	cup	1	to 1½ cup	S	More t	O han 1½ cups	

Now, div	vide your	waking	hours	into	three	time	periods:
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- MORNING
- LUNCHTIME AND AFTERNOON
- SUPPERTIME AND EVENING

leas	se think about the fo	ods you ate d	uring each of th	ose time periods	over the last m	onth.			
			MORNI	NG					
6.	Think about all the fodays did you eat frui canned, and frozen.	t for your morn	ning meal or more						
	Never (Go to Question 7)	1-3 days last month	1-2 days per week	3-4 days per week	5-6 days per week	Every day			
6a.	When you ate fruit in	n the <u>morning</u> ,	what is the total	amount of fruit tha	t you usually ate	e <u>in a mornin</u> g?			
Le	ess than 1 medium fruit	1 med	ium fruit	O 2 medium fruits	More tha	n 2 medium fruits			
	Cless than ½ cup	Abou	OR t ½ cup	About 1 cup	More	More than 1 cup			
7.	Think about all the fo				acks. On how r	nany days did			
	 Lettuce salads White potatoes Cooked dried beans Vegetables in mixtures, such as in sandwiches, omelets, casseroles, Mexican dishes, stews, stir-fry, soups, etc. Rice 								
	COUNT:	All other ve	egetables—raw,	cooked, canned, ar	nd frozen				
	Never (Go to Question 8)	1-3 days last month	1-2 days per week	3-4 days per week	5-6 days per week	Every day			
7a.	When you ate veget ate in a morning?	ables in the <u>m</u>	orning, what is th	ne total amount of v	regetables that	you usually			
	C Less than ½ cup	½ to	O 1 cup	O 1 to 2 cups	More	than 2 cups			

	LUNCHTIME AND AFTERNOON									
8.	3. Think about all the foods you ate at <u>lunchtime</u> and for your <u>afternoon</u> snacks <u>last month</u> . On how many days did you eat fruit at <u>lunchtime</u> or for your <u>afternoon</u> snacks? Count any kind of fruit—fresh, canned, and frozen. Do not count juices.									
	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc				
	Never	1-3 days	1-2 days	3-4 days	5-6 days	Every day				
	(Go to Question 9)	last month	per week	per week	per week					
8a.	8a. When you ate fruit at <u>lunchtime</u> or for your <u>afternoon snacks</u> , what is the total amount of fruit that you usually ate then?									
	\bigcirc	C)	\bigcirc		\circ				
Les	s than 1 medium fruit	1 mediu	m fruit	2 medium fruits	More tha	n 2 medium fruits				
			OR							
	1 1/	Λ In) /	()	N.4	Mana than 1 aug				
Less than ½ cup About ½ cup			∕₂ cup	About 1 cup More than 1 cup						
9.	 9. Think about all the foods you ate at <u>lunchtime</u> and for your <u>afternoon</u> snacks. On how many days did you eat vegetables at <u>lunchtime</u> or for your <u>afternoon</u> snacks? DO NOT COUNT: Lettuce salads White potatoes Cooked dried beans Vegetables in mixtures, such as in sandwiches, omelets, casseroles, Mexican dishes, stews, stir-fry, soups, etc. Rice 									
	COUNT:	All other veg	getables—raw,	cooked, canned, ar	nd frozen					
	Never (Go to Question 10)	1-3 days last month	1-2 days per week	3-4 days per week	5-6 days per week	Every day				
9a.	When you ate veg vegetables that yo			r <u>afternoon</u> snacks,	what is the tot	al amount of				
	\circ)	\bigcirc		\bigcirc				
	Less than ½ cup	½ to 1	cup	1 to 2 cups	More	e than 2 cups				
			•	·		·				

		SUPPERTIME	AND EVENING						
10. Think about all the many days did you canned, and froze	ı eat fruit at <u>sı</u>	uppertime or for y	nd for your <u>evening</u> our <u>evening</u> snacks						
Never (Go to Question 11)	1-3 days last month	1-2 days per week	3-4 days per week	5-6 days per week	Every day				
10a. When you ate frui usually ate then?	t at <u>suppertim</u>	e or for your <u>ever</u>	<u>iing</u> snacks, what is	the total amou	ınt of fruit that you				
ess than 1 medium fruit 1 medium fruit OR			2 medium fruits	More than 2 medium fruits					
Cless than ½ cup	Abou	ot ½ cup	About 1 cup	More than 1 cup					
11. Think about all the you eat vegetable				snacks. On ho	w many days did				
DO NOT COUNT:	 Lettuce salads White potatoes Cooked dried beans Vegetables in mixtures, such as in sandwiches, omelets, casseroles, Mexican dishes, stews, stir-fry, soups, etc. Rice 								
COUNT:	All other v	egetables—raw,	cooked, canned, ar	nd frozen					
Never (Go to Question 12)	1-3 days last month	1-2 days per week	3-4 days per week	5-6 days per week	Every day				
11a. When you ate veg vegetables that yo			ur <u>evening</u> snacks,	what is the tot a	al amount of				
Less than 1/2 cup	1/4 to	O 1 cup	1 to 2 cups	More	than 2 cups				

These last few questions ask about how often you ate particular foods at any time of the day.

	 Over the last month, how often did you eat tomato sauce? Include tomato sauce on pasta or macaroni, rice, pizza and other dishes. 										
Never (Go to Question	times	1-2 times	3-4 times per week	5-6 times per week	1 time per day	2 times per day	3 times per day	4 times per day	5 or more times per day		
12a. Eac	ch time you at	e tomato s	sauce, ho	w much die	d you usu	ally eat?					
Abo	out ¼ cup		O About ½ cup			About 1 cup			More than 1 cup		
13. Ove	13. Over the last month, how often did you eat vegetable soups ? Include tomato soup, gazpacho, beef w										
Never (Go to Question	times	1-2 times	3-4 times per week	5-6 times per week	1 time per day	2 times per day	3 times per day	4 times per day	5 or more times per day		
13a. Wh	en you ate ve	egetable so	oup, how	much did y	ou usual	ly eat?					
Less	Less than 1 cup 1 to 2 cups				2 to 3 cups Mo			More t	O han 3 cups		
14. Ove	er the last mo dwiches, cas	nth, how of seroles, ste	ten did yo ews, stir-fr	u eat mixt y, omelets	ures tha	t include os.	d vegetab	oles? Cou	nt such food	as at	
Never	1-3 times last month	1-2 times per week	3-4 times per week	5-6 times per week	1 time per day	2 times per day	3 times per day	4 times per day	5 or more times per day		

Thank you very much for completing this form. Please return it in the enclosed, postage-paid envelope or to the address on the front cover.

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