

24-Hour Dietary Recall and Assessment for Children 5 Through 9 Years

Name _____

DOB _____ Age _____

SSN/Record No. _____

Required for Child Health

Medical Risks

*Is child underweight or overweight, or does child have poor growth? _____ Yes No
If yes, list: _____

*Does child have anemia? _____ Yes No

*Does child have lead poisoning? _____ Yes No

*Does child have chronic vomiting, diarrhea, or constipation? _____ Yes No
If yes, list: _____

Resources

Working stove and refrigerator? _____ Yes No

School breakfast

Food Stamps

School lunch

Food pantry or soup kitchen

Summer food program

Do you need help in obtaining food? _____ Yes No

Dietary Practices

*Is child on a therapeutic or special diet? _____ Yes No

If yes, describe: _____ Prescribed by: _____

GI problems with milk products? _____ Yes No

*Any major food allergies? _____ Yes No

If yes, list: _____ Symptoms: _____

*Any food groups refused? _____ Yes No

If yes, list: _____

Does child or family eat or avoid any special foods for religious or health reasons? _____ Yes No

If yes, describe: _____

Health Habits

Hours of TV per day: _____

How many minutes per day is child physically active? _____

What type of activity? _____

How many meals given daily? _____

Are meals eaten with family? _____ Yes No

Are snacks given? _____ Yes No

If yes, list: _____

How many snacks per day? _____

How often are the child's teeth brushed and flossed? _____

Encouraged to clean plate? _____ Yes No

Vitamin/mineral pills? _____ Yes No

If yes, list brand or type: _____

*If yes to any of these questions, complete a 24-hour dietary recall.

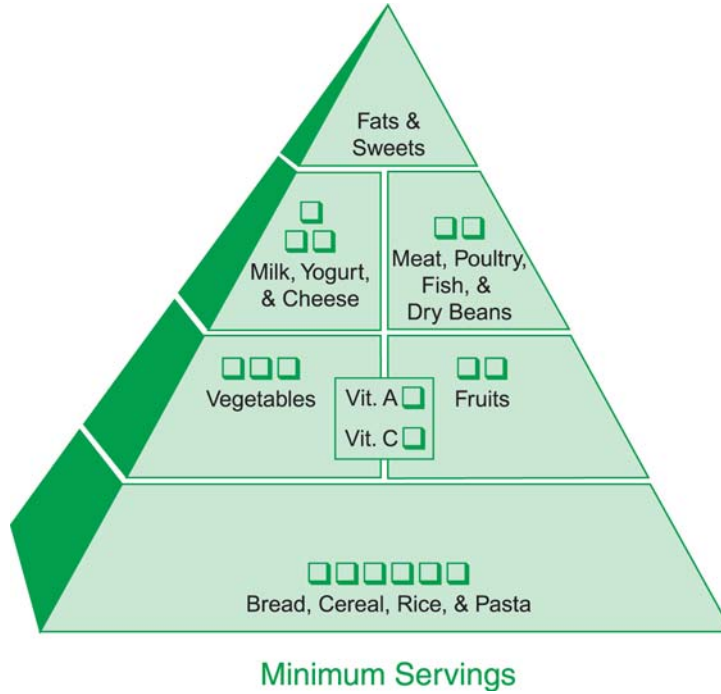
Recall taken by: _____

Recall assessed by: _____

Date: _____

- physical activity
- iron-rich foods
- GI disturbances or problems with milk
- weight management
- healthy diet
- other: _____
- healthy snacks
- dental health
- low-fat eating for heart health
- inadequate/excessive intake of: _____

Date: _____ Counseled by: _____



List all foods and beverages consumed in the past 24 hours or previous day.	Amount Consumed