

FOOD FREQUENCY QUESTIONNAIRE

This questionnaire asks for some background information about you, especially about what you eat.

Please answer every question. If you are uncertain about how to answer a question then do the best you can, but please do not leave a question blank.

1. YOUR DIET LAST YEAR

For each food there is an amount shown, either a "medium serving" or a common household unit such as a slice or teaspoon. Please put a tick (✓) in the box to indicate how often, **on average**, you have eaten the specified amount of each food **during the past year**.

EXAMPLES:

For white bread the amount is one slice, so if you ate 4 or 5 slices a day, you should put a tick in the column headed "4-5 per day".

FOODS AND AMOUNTS	AVERAGE USE LAST YEAR									
	Never or less than once/month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day	
BREAD AND SAVOURY BISCUITS (one slice or biscuit)										
White bread and rolls								✓		

For chips, the amount is a "medium serving", so if you had a helping of chips twice a week you should put a tick in the column headed "2-4 per week".

FOODS AND AMOUNTS	AVERAGE USE LAST YEAR									
	Never or less than once/month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day	
POTATOES, RICE AND PASTA (medium serving)										
Chips				✓						

For very seasonal fruits such as strawberries and raspberries you should estimate your average use when the fruits are in season, so if you ate strawberries or raspberries about once a week when they were in season you should put a tick in the column headed "once a week".

FOODS AND AMOUNTS	AVERAGE USE LAST YEAR									
	Never or less than once/month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day	
FRUIT (1 fruit or medium serving)										
Strawberries, raspberries, kiwi fruit			✓							

Please estimate your average food use as best you can, and please answer every question - do not leave ANY lines blank. PLEASE PUT A TICK (✓) ON EVERY LINE

FOODS AND AMOUNTS	AVERAGE USE LAST YEAR								
	Never or less than once/month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
MEAT AND FISH (medium serving)									
Beef: roast, steak, mince, stew or casserole									
Beefburgers									
Pork: roast, chops, stew or slices									
Lamb: roast, chops or stew									
Chicken or other poultry eg. turkey									
Bacon									
Ham									
Corned beef, Spam, luncheon meats									
Sausages									
Savoury pies, eg. meat pie, pork pie, pasties, steak & kidney pie, sausage rolls									
Liver, liver paté, liver sausage									
Fried fish in batter, as in fish and chips									
Fish fingers, fish cakes									
Other white fish, fresh or frozen, eg. cod, haddock, plaice, sole, halibut									
Oily fish, fresh or canned, eg. mackerel, kippers, tuna, salmon, sardines, herring									
Shellfish, eg. crab, prawns, mussels									
Fish roe, taramasalata									
	Never or less than once/month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day

Please check that you have a tick (✓) on EVERY line

PLEASE PUT A TICK (✓) ON EVERY LINE

FOODS AND AMOUNTS	AVERAGE USE LAST YEAR								
	Never or less than once/month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
BREAD AND SAVOURY BISCUITS (one slice or biscuit)									
White bread and rolls									
Brown bread and rolls									
Wholemeal bread and rolls									
Cream crackers, cheese biscuits									
Crispbread, eg. Ryvita									
CEREALS (one bowl)									
Porridge, Readybrek									
Breakfast cereal such as cornflakes, muesli etc.									
POTATOES, RICE AND PASTA (medium serving)									
Boiled, mashed, instant or jacket potatoes									
Chips									
Roast potatoes									
Potato salad									
White rice									
Brown rice									
White or green pasta, eg. spaghetti, macaroni, noodles									
Wholemeal pasta									
Lasagne, moussaka									
Pizza									
	Never or less than once/month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day

Please check that you have a tick (✓) on EVERY line

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FOODS AND AMOUNTS	AVERAGE USE LAST YEAR								
	Never or less than once/month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
DAIRY PRODUCTS AND FATS									
Single or sour cream (tablespoon)									
Double or clotted cream (tablespoon)									
Low fat yogurt, fromage frais (125g carton)									
Full fat or Greek yogurt (125g carton)									
Dairy desserts (125g carton)									
Cheese, eg. Cheddar, Brie, Edam (medium serving)									
Cottage cheese, low fat soft cheese (medium serving)									
Eggs as boiled, fried, scrambled, etc. (one)									
Quiche (medium serving)									
Low calorie, low fat salad cream (tablespoon)									
Salad cream, mayonnaise (tablespoon)									
French dressing (tablespoon)									
Other salad dressing (tablespoon)									
The following on bread or vegetables									
Butter (teaspoon)									
Block margarine, eg. Stork, Krona (teaspoon)									
Polyunsaturated margarine (tub), eg. Flora, sunflower (teaspoon)									
Other soft margarine, dairy spreads (tub), eg. Blue Band, Clover (teaspoon)									
Low fat spread (tub), eg. Outline, Gold (teaspoon)									
Very low fat spread (tub) (teaspoon)									
	Never or less than once/month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day

Please check that you have a tick (✓) on EVERY line

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FOODS AND AMOUNTS	AVERAGE USE LAST YEAR									
	Never or less than once/month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day	
SWEETS AND SNACKS (medium serving)										
Sweet biscuits, chocolate , eg. digestive (one)										
Sweet biscuits, plain, eg. Nice, ginger (one)										
Cakes eg. fruit, sponge, home baked										
Cakes eg. fruit, sponge, ready made										
Buns, pastries eg. scones, flapjacks, home baked										
Buns, pastries eg. croissants, doughnuts, ready made										
Fruit pies, tarts, crumbles, home baked										
Fruit pies, tarts, crumbles, ready made										
Sponge puddings, home baked										
Sponge puddings, ready made										
Milk puddings, eg. rice, custard, trifle										
Ice cream, choc ices										
Chocolates, single or squares										
Chocolate snack bars eg. Mars, Crunchie										
Sweets, toffees, mints										
Sugar added to tea, coffee, cereal (teaspoon)										
Crisps or other packet snacks, eg. Wotsits										
Peanuts or other nuts										
SOUPS, SAUCES, AND SPREADS										
Vegetable soups (bowl)										
Meat soups (bowl)										
Sauces, eg. white sauce, cheese sauce, gravy (tablespoon)										
Tomato ketchup (tablespoon)										
Pickles, chutney (tablespoon)										
Marmite, Bovril (teaspoon)										
Jam, marmalade, honey (teaspoon)										
Peanut butter (teaspoon)										
	Never or less than once/month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day	

Please check that you have a tick (✓) on EVERY line

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FOODS AND AMOUNTS	AVERAGE USE LAST YEAR								
	Never or less than once/month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
DRINKS									
Tea (cup)									
Coffee, instant or ground (cup)									
Coffee, decaffeinated (cup)									
Coffee whitener, eg. Coffee-mate (teaspoon)									
Cocoa, hot chocolate (cup)									
Horlicks, Ovaltine (cup)									
Wine (glass)									
Beer, lager or cider (half pint)									
Port, sherry, vermouth, liqueurs (glass)									
Spirits, eg. gin, brandy, whisky, vodka (single)									
Low calorie or diet fizzy soft drinks (glass)									
Fizzy soft drinks, eg. Coca cola, lemonade (glass)									
Pure fruit juice (100%) eg. orange, apple juice (glass)									
Fruit squash or cordial (glass)									
FRUIT									
For seasonal fruits marked *, please estimate your average use when the fruit is in season									
Apples (1 fruit)									
Pears (1 fruit)									
Oranges, satsumas, mandarins (1 fruit)									
Grapefruit (half)									
Bananas (1 fruit)									
Grapes (medium serving)									
Melon (1 slice)									
* Peaches, plums, apricots (1 fruit)									
* Strawberries, raspberries, kiwi fruit (medium serving)									
Tinned fruit (medium serving)									
Dried fruit, eg. raisins, prunes (medium serving)									
	Never or less than once/month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day

Please check that you have a tick (✓) on EVERY line

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FOODS AND AMOUNTS	AVERAGE USE LAST YEAR									
	Never or less than once/month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day	
VEGETABLES Fresh, frozen or tinned (medium serving)										
Carrots										
Spinach										
Broccoli, spring greens, kale										
Brussels sprouts										
Cabbage										
Peas										
Green beans, broad beans, runner beans										
Marrow, courgettes										
Cauliflower										
Parsnips, turnips, swedes										
Leeks										
Onions										
Garlic										
Mushrooms										
Sweet peppers										
Beansprouts										
Green salad, lettuce, cucumber, celery										
Watercress										
Tomatoes										
Sweetcorn										
Beetroot										
Coleslaw										
Avocado										
Baked beans										
Dried lentils, beans, peas										
Tofu , soya meat, TVP, Vegeburger										
	Never or less than once/month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day	

Please check that you have a tick (✓) on EVERY line

YOUR DIET LAST YEAR, continued

2. Are there any **OTHER** foods which you ate more than once a week? Yes No

If yes, please list below

Food	Usual serving size	Number of times eaten each week
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

3. What type of milk did you most often use?

Select one only

Full cream, silver <input type="checkbox"/>	Semi-skimmed, red/white <input type="checkbox"/>
Skimmed/blue <input type="checkbox"/>	Channel Islands, gold <input type="checkbox"/>
Dried milk <input type="checkbox"/>	Soya <input type="checkbox"/>
Other, specify <input type="text"/>	None <input type="checkbox"/>

4. How much milk did you drink each day, including milk with tea, coffee, cereals etc?

None <input type="checkbox"/>	Three quarters of a pint <input type="checkbox"/>
Quarter of a pint <input type="checkbox"/>	One pint <input type="checkbox"/>
Half a pint <input type="checkbox"/>	More than one pint <input type="checkbox"/>

5. Did you usually eat breakfast cereal (excluding porridge and Ready Brek mentioned earlier)?

Yes No

If yes, which brand and type of breakfast cereal, including muesli, did you usually eat?

List the one or two types most often used

Brand e.g. Kellogg's

Type e.g. cornflakes

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

6. What kind of fat did you most often use for frying, roasting, grilling etc?

Select one only

Butter <input type="checkbox"/>	Solid vegetable fat <input type="checkbox"/>
Lard/dripping <input type="checkbox"/>	Margarine <input type="checkbox"/>
Vegetable oil <input type="checkbox"/>	None <input type="checkbox"/>

If you used vegetable oil, please give type eg. corn, sunflower

7. What kind of fat did you most often use for baking cakes etc?

Select one only

Butter <input type="checkbox"/>	Solid vegetable fat <input type="checkbox"/>
Lard/dripping <input type="checkbox"/>	Margarine <input type="checkbox"/>
Vegetable oil <input type="checkbox"/>	None <input type="checkbox"/>

If you used margarine, please give name or type eg. Flora, Stork

8. How often did you eat food that was fried at home?
 Daily 1-3 times a week 4-6 times a week
 Less than once a week Never
9. How often did you eat fried food away from home?
 Daily 1-3 times a week 4-6 times a week
 Less than once a week Never
10. What did you do with the visible fat on your meat?
 Ate most of the fat Ate as little as possible
 Ate some of the fat Did not eat meat
11. How often did you eat grilled or roast meat? times a week
12. How well cooked did you usually have grilled or roast meat?
 Well done /dark brown Lightly cooked/rare
 Medium Did not eat meat
13. How often did you add salt to food while cooking?
 Always Rarely
 Usually Never
 Sometimes
14. How often did you add salt to any food at the table?
 Always Rarely
 Usually Never
 Sometimes
15. Did you regularly use a salt substitute (eg LoSalt)? Yes No
 If yes, which brand?
16. During the course of last year, on average, how many times a week did you eat the following foods?
- | Food type | Times/week | Portion size |
|--|---|---------------------------|
| Vegetables (not including potatoes) | <input type="checkbox"/> <input type="checkbox"/> | medium serving |
| Salads | <input type="checkbox"/> <input type="checkbox"/> | medium serving |
| Fruit and fruit products (not including fruit juice) | <input type="checkbox"/> <input type="checkbox"/> | medium serving or 1 fruit |
| Fish and fish products | <input type="checkbox"/> <input type="checkbox"/> | medium serving |
| Meat, meat products and meat dishes (including bacon, ham and chicken) | <input type="checkbox"/> <input type="checkbox"/> | medium serving |

17. Have you taken any vitamins, minerals, fish oils, fibre or other food supplements during the past year? Yes No Don't know

If **yes**, please complete the table below. If you have taken more than 5 types of supplement please put the most frequently consumed brands first.

Vitamin supplements	Average frequency Tick one box per line to show how often on average you consumed supplements									
Name and brand Please list full name, brand and strength	Dose Please state number of pills, capsules or teaspoons consumed	Never or less than once a month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
_____ _____										
_____ _____										
_____ _____										
_____ _____										
_____ _____										
_____ _____										

Thank you for your help