

Nutrition History Form

1. How many meals and snacks do you typically eat each day?

Meals _____ Snacks _____

2. How many times a week do you typically eat the following meals away from home?

Breakfast _____ Lunch _____ Dinner _____

What types of eating places do you frequently visit? (Check all that apply)

Fast-food _____ Diner/Cafeteria _____ Restaurant _____ Other _____

3. Do you follow any specific dietary pattern? Yes / No If yes, name or describe it:

4. On average, how many servings of fruit (eg. apple, bowl of strawberries) do you eat each day?

Fresh fruit _____ Frozen fruit (eg. in smoothie) _____ Cooked fruit _____

5. On average, how many servings of vegetables/green salad do you eat each day? _____

6. On average, how many servings of grains do you eat each day? _____

(includes cereals, baked goods, bread, pasta, rice, oats, other grains)

What percentage of these are whole grain (eg. whole wheat, brown rice) _____

7. At how many meals each week do you eat red meat (beef, lamb, veal) or pork? _____

8. At how many meals each week do you eat processed meat (eg. bacon, salami) _____

9. At how many meals each week do you eat chicken or turkey? _____

10. At how many meals each week do you eat fish or shellfish? _____

11. At how many meals each week do you eat meat or fish substitute products? _____

12. At how many meals each week do you eat beans, lentils, tofu or tempeh? _____

13. What types of beverages do you usually drink? List how many cups of each you drink in a day?

Water _____

Juice _____

Soda _____

Diet Soda _____

Sports drinks _____

Tea or iced tea _____

Coffee _____

Other drinks _____

Milk:

Whole milk _____

1 or 2% _____

Nonfat milk _____

Soy milk _____

Nut milk _____

Alcohol:

Beer _____

Wine _____

Hard Liquor _____

14. Full Name: _____

Today's date: _____