

**This is a sample form. Do not use for scanning.**

NATIONAL INSTITUTES OF HEALTH

## Diet History Questionnaire II



### GENERAL INSTRUCTIONS

- Answer each question as best you can. Estimate if you are not sure. A guess is better than leaving a blank.
- Use only a black ball-point pen. Do not use a pencil or felt-tip pen. Do not fold, staple, or tear the pages.
- Put an X in the box next to your answer.
- If you make any changes, cross out the incorrect answer and put an X in the box next to the correct answer. Also draw a circle around the correct answer.
- If you mark NEVER, NO, or DON'T KNOW for a question, please follow any arrows or instructions that direct you to the next question.

**BEFORE TURNING THE PAGE, PLEASE COMPLETE THE FOLLOWING QUESTIONS.**

Today's date:

MONTH	DAY	YEAR
<input type="checkbox"/> Jan	<input type="text"/>	<input type="checkbox"/> 2010
<input type="checkbox"/> Feb	<input type="text"/>	<input type="checkbox"/> 2011
<input type="checkbox"/> Mar	<input type="checkbox"/> 0	<input type="checkbox"/> 2012
<input type="checkbox"/> Apr	<input type="checkbox"/> 1	<input type="checkbox"/> 2013
<input type="checkbox"/> May	<input type="checkbox"/> 2	<input type="checkbox"/> 2014
<input type="checkbox"/> Jun	<input type="checkbox"/> 3	<input type="checkbox"/> 2015
<input type="checkbox"/> Jul	<input type="checkbox"/> 4	<input type="checkbox"/> 2016
<input type="checkbox"/> Aug	<input type="checkbox"/> 5	<input type="checkbox"/> 2017
<input type="checkbox"/> Sep	<input type="checkbox"/> 6	<input type="checkbox"/> 2018
<input type="checkbox"/> Oct	<input type="checkbox"/> 7	<input type="checkbox"/> 2019
<input type="checkbox"/> Nov	<input type="checkbox"/> 8	<input type="checkbox"/> 2020
<input type="checkbox"/> Dec	<input type="checkbox"/> 9	

In what month were you born?

<input type="checkbox"/> Jan
<input type="checkbox"/> Feb
<input type="checkbox"/> Mar
<input type="checkbox"/> Apr
<input type="checkbox"/> May
<input type="checkbox"/> Jun
<input type="checkbox"/> Jul
<input type="checkbox"/> Aug
<input type="checkbox"/> Sep
<input type="checkbox"/> Oct
<input type="checkbox"/> Nov
<input type="checkbox"/> Dec

In what year were you born?

19	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> 0	<input type="checkbox"/> 0	
<input type="checkbox"/> 1	<input type="checkbox"/> 1	
<input type="checkbox"/> 2	<input type="checkbox"/> 2	
<input type="checkbox"/> 3	<input type="checkbox"/> 3	
<input type="checkbox"/> 4	<input type="checkbox"/> 4	
<input type="checkbox"/> 5	<input type="checkbox"/> 5	
<input type="checkbox"/> 6	<input type="checkbox"/> 6	
<input type="checkbox"/> 7	<input type="checkbox"/> 7	
<input type="checkbox"/> 8	<input type="checkbox"/> 8	
<input type="checkbox"/> 9	<input type="checkbox"/> 9	

Are you male or female?

Male  
 Female

BAR CODE LABEL OR SUBJECT ID  
HERE

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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**This is a sample form. Do not use for scanning.**

1. Over the past 12 months, how often did you drink **carrot juice**?

- NEVER
- 1 time per month or less     1 time per day
- 2–3 times per month         2–3 times per day
- 1–2 times per week          4–5 times per day
- 3–4 times per week          6 or more times per day
- 5–6 times per week

2. Over the past 12 months, how often did you drink **tomato juice** or **other vegetable juice**?  
(Please do not include carrot juice.)

- NEVER
- 1 time per month or less     1 time per day
- 2–3 times per month         2–3 times per day
- 1–2 times per week          4–5 times per day
- 3–4 times per week          6 or more times per day
- 5–6 times per week

3. Over the past 12 months, how often did you drink **orange juice** or **grapefruit juice**?

- NEVER (GO TO QUESTION 4)
- 1 time per month or less     1 time per day
- 2–3 times per month         2–3 times per day
- 1–2 times per week          4–5 times per day
- 3–4 times per week          6 or more times per day
- 5–6 times per week

3a. How often was the orange juice or grapefruit juice you drank **calcium-fortified**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

4. Over the past 12 months, how often did you drink **other 100% fruit juice** or **100% fruit juice mixtures** (such as apple, grape, pineapple, or others)?

- NEVER (GO TO QUESTION 5)
- 1 time per month or less     1 time per day
- 2–3 times per month         2–3 times per day
- 1–2 times per week          4–5 times per day
- 3–4 times per week          6 or more times per day
- 5–6 times per week

4a. How often were the other 100% fruit juice or 100% fruit juice mixtures you drank **calcium-fortified**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

5. How often did you drink **other fruit drinks** (such as cranberry cocktail, Hi-C, lemonade, or Kool-Aid, diet or regular)?

- NEVER (GO TO QUESTION 6)
- 1 time per month or less     1 time per day
- 2–3 times per month         2–3 times per day
- 1–2 times per week          4–5 times per day
- 3–4 times per week          6 or more times per day
- 5–6 times per week

5a. How often were your fruit drinks **diet** or **sugar-free**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

6. How often did you drink **milk as a beverage** (NOT in coffee, NOT in cereal)? (Please do not include chocolate milk and hot chocolate.)

- NEVER (GO TO QUESTION 7)
- 1 time per month or less     1 time per day
- 2–3 times per month         2–3 times per day
- 1–2 times per week          4–5 times per day
- 3–4 times per week          6 or more times per day
- 5–6 times per week

6a. What kind of **milk** did you usually drink?

- Whole milk
- 2% fat milk
- 1 % fat milk
- Skim, nonfat, or ½% fat milk
- Soy milk
- Rice milk
- Other

**This is a sample form. Do not use for scanning.**

Over the past 12 months...

7. How often did you drink **chocolate milk** (including hot chocolate)?

- NEVER (GO TO QUESTION 8)
- 1 time per month or less       1 time per day
- 2-3 times per month             2-3 times per day
- 1-2 times per week               4-5 times per day
- 3-4 times per week               6 or more times per day
- 5-6 times per week

7a. How often was the chocolate milk **reduced-fat** or **fat-free**?

- Almost never or never
- About 1/4 of the time
- About 1/2 of the time
- About 3/4 of the time
- Almost always or always

8. How often did you drink **meal replacement** or **high-protein beverages** (such as Instant Breakfast, Ensure, Slimfast, Sustacal or others)?

- NEVER
- 1 time per month or less       1 time per day
- 2-3 times per month             2-3 times per day
- 1-2 times per week               4-5 times per day
- 3-4 times per week               6 or more times per day
- 5-6 times per week

9. Over the past 12 months, did you drink **soda** or **pop**?

NO (GO TO QUESTION 10)

YES

9a. How often did you drink **soda** or **pop** **IN THE SUMMER**?

- NEVER
- 1 time per month or less       1 time per day
- 2-3 times per month             2-3 times per day
- 1-2 times per week               4-5 times per day
- 3-4 times per week               6 or more times per day
- 5-6 times per week

9b. How often did you drink **soda** or **pop** **DURING THE REST OF THE YEAR**?

- NEVER
- 1 time per month or less       1 time per day
- 2-3 times per month             2-3 times per day
- 1-2 times per week               4-5 times per day
- 3-4 times per week               6 or more times per day
- 5-6 times per week

9c. How often were these sodas or pop **diet** or **sugar-free**?

- Almost never or never
- About 1/4 of the time
- About 1/2 of the time
- About 3/4 of the time
- Almost always or always

9d. How often were these sodas or pop **caffeine-free**?

- Almost never or never
- About 1/4 of the time
- About 1/2 of the time
- About 3/4 of the time
- Almost always or always

10. Over the past 12 months, did you drink **sports drinks** (such as Propel, PowerAde, or Gatorade)?

NO (GO TO QUESTION 11)

YES

10a. How often did you drink **sports drinks** **IN THE SUMMER**?

- NEVER
- 1 time per month or less       1 time per day
- 2-3 times per month             2-3 times per day
- 1-2 times per week               4-5 times per day
- 3-4 times per week               6 or more times per day
- 5-6 times per week

10b. How often did you drink **sports drinks** **DURING THE REST OF THE YEAR**?

- NEVER
- 1 time per month or less       1 time per day
- 2-3 times per month             2-3 times per day
- 1-2 times per week               4-5 times per day
- 3-4 times per week               6 or more times per day
- 5-6 times per week

**This is a sample form. Do not use for scanning.**

Over the past 12 months...

11. Over the past 12 months, did you drink **energy drinks** (such as Red Bull or Jolt)?

NO (GO TO QUESTION 12)

YES

11a. How often did you drink **energy drinks IN THE SUMMER?**

NEVER

- |   |  |
|---|--|
| <input type="checkbox"/> 1 time per month or less | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 2-3 times per month      | <input type="checkbox"/> 2-3 times per day       |
| <input type="checkbox"/> 1-2 times per week       | <input type="checkbox"/> 4-5 times per day       |
| <input type="checkbox"/> 3-4 times per week       | <input type="checkbox"/> 6 or more times per day |
| <input type="checkbox"/> 5-6 times per week       |  |

11b. How often did you drink **energy drinks DURING THE REST OF THE YEAR?**

NEVER

- |   |  |
|---|--|
| <input type="checkbox"/> 1 time per month or less | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 2-3 times per month      | <input type="checkbox"/> 2-3 times per day       |
| <input type="checkbox"/> 1-2 times per week       | <input type="checkbox"/> 4-5 times per day       |
| <input type="checkbox"/> 3-4 times per week       | <input type="checkbox"/> 6 or more times per day |
| <input type="checkbox"/> 5-6 times per week       |  |

12. Over the past 12 months, did you drink **beer**?

NO (GO TO QUESTION 13)

YES

12a. How often did you drink **beer IN THE SUMMER?**

NEVER

- |   |  |
|---|--|
| <input type="checkbox"/> 1 time per month or less | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 2-3 times per month      | <input type="checkbox"/> 2-3 times per day       |
| <input type="checkbox"/> 1-2 times per week       | <input type="checkbox"/> 4-5 times per day       |
| <input type="checkbox"/> 3-4 times per week       | <input type="checkbox"/> 6 or more times per day |
| <input type="checkbox"/> 5-6 times per week       |  |



Question 13 appears in the next column

12b. How often did you drink **beer DURING THE REST OF THE YEAR?**

NEVER

- |   |  |
|---|--|
| <input type="checkbox"/> 1 time per month or less | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 2-3 times per month      | <input type="checkbox"/> 2-3 times per day       |
| <input type="checkbox"/> 1-2 times per week       | <input type="checkbox"/> 4-5 times per day       |
| <input type="checkbox"/> 3-4 times per week       | <input type="checkbox"/> 6 or more times per day |
| <input type="checkbox"/> 5-6 times per week       |  |

13. Over the past 12 months, did you drink **water** (including tap, bottled, and carbonated water)?

NO (GO TO QUESTION 14)

YES

13a. How often did you drink **water** (including tap, bottled, and carbonated water) **IN THE SUMMER?**

NEVER

- |   |  |
|---|--|
| <input type="checkbox"/> 1 time per month or less | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 2-3 times per month      | <input type="checkbox"/> 2-3 times per day       |
| <input type="checkbox"/> 1-2 times per week       | <input type="checkbox"/> 4-5 times per day       |
| <input type="checkbox"/> 3-4 times per week       | <input type="checkbox"/> 6 or more times per day |
| <input type="checkbox"/> 5-6 times per week       |  |

13b. How often did you drink **water** (including tap, bottled, and carbonated water) **DURING THE REST OF THE YEAR?**

NEVER

- |   |  |
|---|--|
| <input type="checkbox"/> 1 time per month or less | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 2-3 times per month      | <input type="checkbox"/> 2-3 times per day       |
| <input type="checkbox"/> 1-2 times per week       | <input type="checkbox"/> 4-5 times per day       |
| <input type="checkbox"/> 3-4 times per week       | <input type="checkbox"/> 6 or more times per day |
| <input type="checkbox"/> 5-6 times per week       |  |

13c. How often was the water you drank **tap water?**

- Almost never or never  
 About 1/4 of the time  
 About 1/2 of the time  
 About 3/4 of the time  
 Almost always or always

13d. How often was the water you drank **bottled, sweetened water** (with low or no-calorie sweetener, including carbonated water)?

- Almost never or never  
 About 1/4 of the time  
 About 1/2 of the time  
 About 3/4 of the time  
 Almost always or always

Question 14 appears on the next page

**This is a sample form. Do not use for scanning.**

**Over the past 12 months...**

13e. How often was the water you drank **bottled, unsweetened water** (including carbonated water)?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

14. How often did you drink **wine** or **wine coolers**?

- NEVER
- 1 time per month or less
- 2–3 times per month
- 1–2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2–3 times per day
- 4–5 times per day
- 6 or more times per day

15. How often did you drink **liquor** or **mixed drinks**?

- NEVER
- 1 time per month or less
- 2–3 times per month
- 1–2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2–3 times per day
- 4–5 times per day
- 6 or more times per day

16. Over the past 12 months, did you eat **oatmeal, grits, or other cooked cereal**?

NO (GO TO QUESTION 17)

YES

16a. How often did you eat **oatmeal, grits, or other cooked cereal IN THE WINTER**?

- NEVER
- 1–6 times per winter
- 7–11 times per winter
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

16b. How often did you eat **oatmeal, grits, or other cooked cereal DURING THE REST OF THE YEAR**?

- NEVER
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

16c. How often was **butter** or **margarine** added to your oatmeal, grits or other cooked cereal?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

17. How often did you eat **cold cereal**?

NEVER (GO TO QUESTION 18)

- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

17a. How often was the cold cereal you ate **Total Raisin Bran, Total Cereal, or Product 19**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

17b. How often was the cold cereal you ate **All Bran, Fiber One, 100% Bran, or All-Bran Bran Buds**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

**This is a sample form. Do not use for scanning.**

Over the past 12 months...

17c. How often was the cold cereal you ate **some other bran or fiber cereal** (such as Cheerios, Shredded Wheat, Raisin Bran, Bran Flakes, Grape-Nuts, Granola, Wheaties, or Healthy Choice)?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

17d. How often was the cold cereal you ate any **other type of cold cereal** (such as Corn Flakes, Rice Krispies, Frosted Flakes, Special K, Froot Loops, Cap'n Crunch, or others)?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

17e. Was **milk** added to your cold cereal?

- NO (GO TO QUESTION 18)
- YES

17f. What kind of **milk** was usually added?

- Whole milk
- 2% fat milk
- 1% fat milk
- Skim, nonfat, or ½% fat milk
- Soy milk
- Rice milk
- Other

18. How often did you eat **applesauce**?

- NEVER
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

19. How often did you eat **apples**?

- NEVER
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

20. How often did you eat **pears** (fresh, canned, or frozen)?

- NEVER
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

21. How often did you eat **bananas**?

- NEVER
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day



22. How often did you eat **dried fruit** (such as prunes or raisins)? (*Please do not include dried apricots.*)

- NEVER
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

23. Over the past 12 months, did you eat **peaches, nectarines, or plums**?

- NO (GO TO QUESTION 24)
- YES

23a. How often did you eat **fresh peaches, nectarines, or plums WHEN IN SEASON**?

- NEVER
- 1–6 times per season
- 7–11 times per season
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

Question 24 appears on the next page

**This is a sample form. Do not use for scanning.**

Over the past 12 months...

23b. How often did you eat **peaches, nectarines, or plums** (fresh, canned, or frozen) **DURING THE REST OF THE YEAR?**

- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

24. How often did you eat **grapes?**

- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

25. Over the past 12 months, did you eat **cantaloupe?**

NO (GO TO QUESTION 26)

YES

25a. How often did you eat **fresh cantaloupe WHEN IN SEASON?**

- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per season  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per season | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month      | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month   | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week       | <input type="checkbox"/> 2 or more times per day |

25b. How often did you eat **cantaloupe** (fresh or frozen) **DURING THE REST OF THE YEAR?**

- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

Question 26 appears in the next column

26. Over the past 12 months, did you eat **melon, other than cantaloupe** (such as watermelon or honeydew)?

NO (GO TO QUESTION 27)

YES

26a. How often did you eat **fresh melon, other than cantaloupe, WHEN IN SEASON?**

- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per season  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per season | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month      | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month   | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week       | <input type="checkbox"/> 2 or more times per day |

26b. How often did you eat **melon other than cantaloupe** (fresh or frozen) **DURING THE REST OF THE YEAR?**

- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |



27. Over the past 12 months, did you eat **strawberries?**

NO (GO TO QUESTION 28)

YES

27a. How often did you eat **fresh strawberries WHEN IN SEASON?**

- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per season  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per season | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month      | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month   | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week       | <input type="checkbox"/> 2 or more times per day |

Question 28 appears on the next page

**This is a sample form. Do not use for scanning.**

Over the past 12 months...

27b. How often did you eat **strawberries** (fresh or frozen) **DURING THE REST OF THE YEAR?**

- NEVER
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

28. Over the past 12 months, did you eat **oranges, tangerines, or clementines?**

NO (GO TO QUESTION 29)

YES

28a. How often did you eat **fresh oranges, tangerines, or clementines WHEN IN SEASON?**

- NEVER
- 1–6 times per season
- 7–11 times per season
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

28b. How often did you eat **oranges, tangerines, or clementines** (fresh or canned) **DURING THE REST OF THE YEAR?**

- NEVER
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

29. Over the past 12 months, did you eat **grapefruit?**

NO (GO TO QUESTION 30)

YES

29a. How often did you eat **fresh grapefruit WHEN IN SEASON?**

- NEVER
- 1–6 times per season
- 7–11 times per season
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

29b. How often did you eat **grapefruit** (fresh or canned) **DURING THE REST OF THE YEAR?**

- NEVER
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

30. How often did you eat **pineapple?**

- NEVER
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

31. How often did you eat **other kinds of fruit?**

- NEVER
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

Question 29 appears in the next column

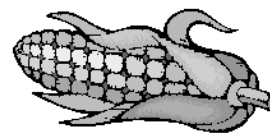


**This is a sample form. Do not use for scanning.**

**Over the past 12 months...**

32. How often did you eat **COOKED greens** (such as spinach, turnip, collard, mustard, chard, or kale)?
- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |
33. How often did you eat **RAW greens** (such as spinach, turnip, collard, mustard, chard, or kale)? (*We will ask about lettuce later.*)
- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |
34. How often did you eat **coleslaw**?
- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |
35. How often did you eat **sauerkraut or cabbage** (other than coleslaw)?
- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |
36. How often did you eat **carrots** (fresh, canned, or frozen)?
- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

37. How often did you eat **string beans or green beans** (fresh, canned, or frozen)?
- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |
38. How often did you eat **peas** (fresh, canned, or frozen)?
- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |
39. Over the past 12 months, did you eat **corn**?
- NO (GO TO QUESTION 40)
- YES
- 39a. How often did you eat **fresh corn WHEN IN SEASON**?
- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per season  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per season | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month      | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month   | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week       | <input type="checkbox"/> 2 or more times per day |
- 39b. How often did you eat **corn** (fresh, canned, or frozen) **DURING THE REST OF THE YEAR**?
- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |



Question 40 appears on the next page

**This is a sample form. Do not use for scanning.**

**Over the past 12 months...**

40. How often did you eat **broccoli** (fresh or frozen)?
- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

41. How often did you eat **cauliflower** or **Brussels sprouts** (fresh or frozen)?
- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

42. How often did you eat **asparagus** (fresh or frozen)?
- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

43. How often did you eat **winter squash** (such as pumpkin, butternut, or acorn)?
- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

44. How often did you eat **mixed vegetables**?
- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

45. How often did you eat **onions**?
- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

46. Now think about all the **cooked vegetables** you ate in the past 12 months and how they were prepared. How often were your vegetables **COOKED WITH** some sort of **fat**, including oil spray? (*Please do not include potatoes.*)
- NEVER (GO TO QUESTION 47)
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |



- 46a. Which fats were usually added to your vegetables **DURING COOKING**? (*Please do not include potatoes. Mark all that apply.*)
- |  |   |
|--|---|
| <input type="checkbox"/> Margarine (including low-fat) | <input type="checkbox"/> Corn oil                         |
| <input type="checkbox"/> Butter (including low-fat)    | <input type="checkbox"/> Canola or rapeseed oil           |
| <input type="checkbox"/> Lard, fatback, or bacon fat   | <input type="checkbox"/> Oil spray, such as Pam or others |
| <input type="checkbox"/> Olive oil                     | <input type="checkbox"/> Other kinds of oils              |
|  | <input type="checkbox"/> None of the above                |

Question 47 appears on the next page

**This is a sample form. Do not use for scanning.**

Over the past 12 months...

47. Now, thinking again about all the **cooked vegetables** you ate in the past 12 months, how often was some sort of fat, sauce, or dressing added **AFTER COOKING OR AT THE TABLE?** (Please do not include potatoes.)

- NEVER (GO TO QUESTION 48)
- |  |  |
|--|--|
| <input type="checkbox"/> 1-6 times per year  | <input type="checkbox"/> 3-4 times per week      |
| <input type="checkbox"/> 7-11 times per year | <input type="checkbox"/> 5-6 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 2-3 times per month | <input type="checkbox"/> 2 times per day         |
| <input type="checkbox"/> 1-2 times per week  | <input type="checkbox"/> 3 or more times per day |

47a. Which fats, sauces, or dressings were usually added **AFTER COOKING OR AT THE TABLE?** (Please do not include potatoes. **Mark all that apply.**)

- |  |   |
|--|---|
| <input type="checkbox"/> Margarine (including low-fat) | <input type="checkbox"/> Salad dressing |
| <input type="checkbox"/> Butter (including low-fat)    | <input type="checkbox"/> Cheese sauce   |
| <input type="checkbox"/> Lard, fatback, or bacon fat   | <input type="checkbox"/> White sauce    |
|  | <input type="checkbox"/> Other          |

48. How often did you eat **sweet peppers** (green, red, or yellow)?

- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1-6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7-11 times per year | <input type="checkbox"/> 3-4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5-6 times per week      |
| <input type="checkbox"/> 2-3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

49. Over the past 12 months, did you eat **fresh tomatoes** (including those in salads)?

- NO (GO TO QUESTION 50)
- YES

49a. How often did you eat **fresh tomatoes** (including those in salads) **WHEN IN SEASON?**

- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1-6 times per season  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7-11 times per season | <input type="checkbox"/> 3-4 times per week      |
| <input type="checkbox"/> 1 time per month      | <input type="checkbox"/> 5-6 times per week      |
| <input type="checkbox"/> 2-3 times per month   | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week       | <input type="checkbox"/> 2 or more times per day |

49b. How often did you eat **fresh tomatoes** (including those in salads) **DURING THE REST OF THE YEAR?**

- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1-6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7-11 times per year | <input type="checkbox"/> 3-4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5-6 times per week      |
| <input type="checkbox"/> 2-3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

50. How often did you eat **lettuce salads** (with or without other vegetables)?

- NEVER (GO TO QUESTION 51)
- |  |  |
|--|--|
| <input type="checkbox"/> 1-6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7-11 times per year | <input type="checkbox"/> 3-4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5-6 times per week      |
| <input type="checkbox"/> 2-3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

50a. How often did the lettuce salads you ate include **dark green lettuce?**

- Almost never or never
- About 1/4 of the time
- About 1/2 of the time
- About 3/4 of the time
- Almost always or always

51. How often did you eat **salad dressing** (including low-fat) **on salads?**

- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1-6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7-11 times per year | <input type="checkbox"/> 3-4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5-6 times per week      |
| <input type="checkbox"/> 2-3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

52. How often did you eat **sweet potatoes** or **yams?**

- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1-6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7-11 times per year | <input type="checkbox"/> 3-4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5-6 times per week      |
| <input type="checkbox"/> 2-3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

Question 50 appears in the next column

**This is a sample form. Do not use for scanning.**

Over the past 12 months...

53. How often did you eat **French fries, home fries, hash browned potatoes, or tater tots**?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

54. How often did you eat **potato salad**?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

55. How often did you eat **baked, boiled, or mashed potatoes**?

- NEVER (GO TO QUESTION 56)
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

55a. How often was **sour cream** (including low-fat) added to your potatoes, **EITHER IN COOKING OR AT THE TABLE**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

55b. How often was **margarine** (including low-fat) added to your potatoes, **EITHER IN COOKING OR AT THE TABLE**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

55c. How often was **butter** (including low-fat) added to your potatoes, **EITHER IN COOKING OR AT THE TABLE**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

55d. How often was **cheese** or **cheese sauce** added to your potatoes, **EITHER IN COOKING OR AT THE TABLE**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

56. How often did you eat **salsa**?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

57. How often did you eat **catsup**?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

58. How often did you eat **stuffing, dressing, or dumplings**?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

59. How often did you eat **chili**?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

Question 56 appears in the next column

**This is a sample form. Do not use for scanning.**

**Over the past 12 months...**

60. How often did you eat **Mexican foods** (such as tacos, tostados, burritos, tamales, fajitas, enchiladas, quesadillas, and chimichangas)?
- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

61. How often did you eat **cooked dried beans** (such as baked beans, pintos, kidney, blackeyed peas, lima, lentils, soybeans, or refried beans)?  
*(Please do not include bean soups or chili.)*

- NEVER (GO TO QUESTION 62)
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

- 61a. How often were the beans you ate **refried beans, beans prepared with any type of fat, or with meat added?**

- Almost never or never  
 About ¼ of the time  
 About ½ of the time  
 About ¾ of the time  
 Almost always or always

62. How often did you eat **other kinds of vegetables?**

- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

63. How often did you eat **rice or other cooked grains** (such as bulgur, cracked wheat, or millet)?

- NEVER (GO TO QUESTION 64)
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

- 63a. How often was **butter, margarine, or oil** added to your rice or other cooked grains **IN COOKING OR AT THE TABLE?**

- Almost never or never  
 About ¼ of the time  
 About ½ of the time  
 About ¾ of the time  
 Almost always or always

64. How often did you eat **pancakes, waffles, or French toast?**

- NEVER (GO TO QUESTION 65)
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

- 64a. How often was **margarine** (including low-fat) added to your pancakes, waffles, or French toast **AFTER COOKING OR AT THE TABLE?**

- Almost never or never  
 About ¼ of the time  
 About ½ of the time  
 About ¾ of the time  
 Almost always or always

- 64b. How often was **butter** (including low-fat) added to your pancakes, waffles, or French toast **AFTER COOKING OR AT THE TABLE?**

- Almost never or never  
 About ¼ of the time  
 About ½ of the time  
 About ¾ of the time  
 Almost always or always

- 64c. How often was **syrup** added to your pancakes, waffles, or French toast?

- Almost never or never  
 About ¼ of the time  
 About ½ of the time  
 About ¾ of the time  
 Almost always or always

65. How often did you eat **lasagna, stuffed shells, stuffed manicotti, ravioli, or tortellini?**  
*(Please do not include spaghetti or other pasta.)*

- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

Question 64 appears in the next column

**This is a sample form. Do not use for scanning.**

**Over the past 12 months...**

66. How often did you eat **macaroni and cheese**?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

67. How often did you eat **pasta salad** or **macaroni salad**?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

68. Other than the pastas listed in Questions 65, 66, and 67, how often did you eat **pasta, spaghetti, or other noodles**?

- NEVER (GO TO QUESTION 69)
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

68a. How often did you eat your pasta, spaghetti, or other noodles with **tomato sauce** or **spaghetti sauce made WITH meat**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

68b. How often did you eat your pasta, spaghetti, or other noodles with **tomato sauce** or **spaghetti sauce made WITHOUT meat**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

68c. How often did you eat your pasta, spaghetti, or other noodles with **margarine, butter, oil, or cream sauce**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

69. How often did you eat **bagels** or **English muffins**?

- NEVER (GO TO INTRODUCTION TO QUESTION 70)
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

69a. How often were the bagels or English muffins you ate **whole wheat**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

69b. How often was **margarine** (including low-fat) added to your bagels or English muffins?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

69c. How often was **butter** (including low-fat) added to your bagels or English muffins?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

69d. How often was **cream cheese** (including low-fat) spread on your bagels or English muffins?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

**This is a sample form. Do not use for scanning.**

Over the past 12 months...

The next questions ask about your intake of breads other than bagels or English muffins. First, we will ask about bread you ate as part of sandwiches only. Then we will ask about all other bread you ate.

70. How often did you eat **breads** or **rolls AS PART OF SANDWICHES** (including burger and hot dog rolls)?  
(Please do not include fast food sandwiches.)

- NEVER (GO TO QUESTION 71)
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

70a. How often were the breads or rolls that you used for your sandwiches **white bread** (including burger and hot dog rolls)?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

70b. How often was **mayonnaise** or **mayonnaise-type dressing** (including low-fat) added to the breads or rolls used for your sandwiches?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

70c. How often was **margarine** (including low-fat) added to the breads or rolls used for your sandwiches?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

70d. How often was **butter** (including low-fat) added to the breads or rolls used for your sandwiches?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

71. How often did you eat **breads** or **dinner rolls, NOT AS PART OF SANDWICHES**?

- NEVER (GO TO QUESTION 72)
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

71a. How often were the breads or rolls you ate **white bread**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

71b. How often was **margarine** (including low-fat) added to your breads or rolls?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

71c. How often was **butter** (including low-fat) added to your breads or rolls?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

71d. How often was **cream cheese** (including low-fat) added to your breads or rolls?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

72. How often did you eat **jam, jelly, or honey** on bagels, muffins, bread, rolls, or crackers?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

Question 71 appears in the next column

**This is a sample form. Do not use for scanning.**

Over the past 12 months...

73. How often did you eat **peanut butter** or **other nut butter**?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

74. How often did you eat **roast beef** or **steak IN SANDWICHES**?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

75. How often did you eat **turkey** or **chicken COLD CUTS** (such as loaf, luncheon meat, turkey ham, turkey salami, or turkey pastrami)? *(We will ask about other turkey or chicken later.)*

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

76. How often did you eat **luncheon** or **deli-style ham**? *(We will ask about other ham later.)*

- NEVER (GO TO QUESTION 77)
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

76a. How often was the luncheon or deli-style ham you ate **light, low-fat, or fat-free**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

77. How often did you eat **other cold cuts** or **luncheon meats** (such as bologna, salami, corned beef, pastrami, or others, including low-fat)? *(Please do not include ham, turkey, or chicken cold cuts.)*

- NEVER (GO TO QUESTION 78)
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

77a. How often were the other cold cuts or luncheon meats you ate **light, low-fat, or fat-free**? *(Please do not include ham, turkey, or chicken cold cuts.)*

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

78. How often did you eat **canned tuna** (including in salads, sandwiches, or casseroles)?

- NEVER (GO TO QUESTION 79)
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

78a. How often was the canned tuna you ate **water-packed**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

78b. How often was the canned tuna you ate **prepared with mayonnaise** or **other dressing** (including low-fat)?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

Question 77 appears in the next column

Question 79 appears on the next page



**This is a sample form. Do not use for scanning.**

Over the past 12 months...

79. How often did you eat **GROUND chicken** or **turkey**? (We will ask about other chicken and turkey later.)

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

80. How often did you eat **beef hamburgers** or **cheeseburgers** from a **FAST FOOD** or **OTHER RESTAURANT**?

- NEVER (GO TO QUESTION 81)
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

80a. How often did you have **cheeseburgers** rather than **hamburgers**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

81. How often did you eat **beef hamburgers** or **cheeseburgers** that were **NOT FROM A FAST FOOD** or **OTHER RESTAURANT**?

- NEVER (GO TO QUESTION 82)
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

81a. How often were these beef hamburgers or cheeseburgers made with **lean ground beef**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

82. How often did you eat **ground beef in mixtures** (such as meatballs, casseroles, chili, or meatloaf)?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

83. How often did you eat **hot dogs** or **frankfurters**? (Please do not include sausages or vegetarian hot dogs.)

- NEVER (GO TO QUESTION 84)
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

83a. How often were the hot dogs or frankfurters you ate **light** or **low-fat**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

84. How often did you eat **beef mixtures** (such as beef stew, beef pot pie, beef and noodles, or beef and vegetables)?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

**This is a sample form. Do not use for scanning.**

**Over the past 12 months...**

85. How often did you eat **roast beef** or **pot roast**?  
(Please do not include roast beef or pot roast in sandwiches.)

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

86. How often did you eat **steak** (beef)?  
(Please do not include steak in sandwiches)

- NEVER (GO TO QUESTION 87)
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

86a. How often was the steak you ate **lean steak**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

87. How often did you eat **pork** or **beef spareribs**?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

88. How often did you eat **roast turkey, turkey cutlets, or turkey nuggets** (including in sandwiches)?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

89. How often did you eat **chicken mixtures** (such as salads, sandwiches, casseroles, stews, or other mixtures)?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

90. How often did you eat **baked, broiled, roasted, stewed, or fried chicken** (including nuggets)?  
(Please do not include chicken in mixtures.)

- NEVER (GO TO QUESTION 91)
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

90a. How often was the chicken you ate **fried chicken** (including deep fried) or **chicken nuggets**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

90b. How often was the chicken you ate **WHITE meat**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

90c. How often did you eat chicken **WITH skin**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

91. How often did you eat **baked ham or ham steak**?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

**This is a sample form. Do not use for scanning.**

**Over the past 12 months...**

92. How often did you eat **pork** (including chops, roasts, and in mixed dishes)? *(Please do not include ham, ham steak, or sausage.)*
- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

93. How often did you eat **gravy** on meat, chicken, potatoes, rice, etc.?
- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

94. How often did you eat **liver** (all kinds) or **liverwurst**?
- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

95. How often did you eat **bacon** (including low-fat)?
- NEVER (GO TO QUESTION 96)
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

- 95a. How often was the bacon you ate **light, low-fat, or lean**?
- Almost never or never  
 About ¼ of the time  
 About ½ of the time  
 About ¾ of the time  
 Almost always or always

96. How often did you eat **sausage** (including low-fat)?

- NEVER (GO TO QUESTION 97)
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

- 96a. How often was the sausage you ate **light, low-fat, or lean**?

- Almost never or never  
 About ¼ of the time  
 About ½ of the time  
 About ¾ of the time  
 Almost always or always

97. How often did you eat **fried shellfish** (such as crab, lobster, shrimp)?

- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

98. How often did you eat **shellfish** (such as crab, lobster, shrimp) **that was NOT FRIED**?

- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

99. How often did you eat **salmon, fresh tuna or trout**?

- NEVER
- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

Question 96 appears in the next column

**This is a sample form. Do not use for scanning.**

**Over the past 12 months...**

100. How often did you eat **fish sticks** or other **fried fish** (not including shellfish)?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

101. How often did you eat **other fish that was NOT FRIED** (not including shellfish)?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

**Now think about all the meat, poultry, and fish you ate in the past 12 months and how they were prepared.**

102. How often was **oil, butter, margarine, or other fat** used to **FRY, SAUTE, BASTE, OR MARINATE** any meat, poultry, or fish you ate? (*Please do not include deep frying.*)

- NEVER (GO TO QUESTION 103)
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

102a. Which of the following **fats** were regularly used to prepare your meat, poultry, or fish? (**Mark all that apply.**)

- Margarine (including low-fat)
- Butter (including low-fat)
- Lard, fatback, or bacon fat
- Olive oil
- Corn oil
- Canola or rapeseed oil
- Oil spray (such as Pam or others)
- Other kinds of oils
- None of the above

103. How often did you eat **tofu, soy burgers, or soy meat-substitutes**?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

104. Over the past 12 months, did you eat **soups**?

NO (GO TO QUESTION 105)

YES

104a. How often did you eat **soup IN THE WINTER**?

- NEVER
- 1–6 times per winter     2 times per week
- 7–11 times per winter    3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

104b. How often did you eat **soup DURING THE REST OF THE YEAR**?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

104c. How often were the soups you ate **bean soups**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

104d. How often were the soups you ate **cream soups** (including chowders)?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

**This is a sample form. Do not use for scanning.**

Over the **past 12 months...**

104e. How often were the soups you ate **tomato** or **vegetable soups**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

104f. How often were the soups you ate **broth soups** (including chicken) **with** or **without noodles** or **rice**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

105. How often did you eat **pizza**?

- NEVER (GO TO QUESTION 106)
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

105a. How often did you eat pizza with **pepperoni, sausage, or other meat**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

106. How often did you eat **crackers**?

- NEVER
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

107. How often did you eat **corn bread** or **corn muffins**?

- NEVER
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

108. How often did you eat **biscuits**?

- NEVER
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

109. How often did you eat **potato chips** (including low-fat, fat-free, or low-salt)?

- NEVER (GO TO QUESTION 110)
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

109a. How often were the potato chips you ate **fat-free**? (*Please do not include reduced-fat chips.*)

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

110. How often did you eat **corn chips or tortilla chips** (including low-fat, fat-free, or low-salt)?

- NEVER (GO TO QUESTION 111)
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

**This is a sample form. Do not use for scanning.**

**Over the past 12 months...**

110a. How often were the corn chips or tortilla chips you ate **fat-free**? (*Please do not include reduced-fat chips.*)

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

111. How often did you eat **popcorn** (including low-fat)?

- NEVER
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

112. How often did you eat **pretzels**?

- NEVER
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

113. How often did you eat **peanuts, walnuts, seeds, or other nuts**?

- NEVER
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

114. How often did you eat **energy, high-protein, or breakfast bars** (such as Power Bars, Balance, Clif, or others)?

- NEVER
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

115. How often did you eat **yogurt** (NOT including frozen yogurt)?

- NEVER (GO TO QUESTION 116)
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

115a. How often was the **yogurt** you ate **low-fat or fat-free**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

116. How often did you eat **cottage cheese** (including low-fat)?

- NEVER
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

117. How often did you eat **cheese** (including low-fat; including on cheeseburgers or in sandwiches or subs)?

- NEVER (GO TO QUESTION 118)
- 1–6 times per year
- 7–11 times per year
- 1 time per month
- 2–3 times per month
- 1 time per week
- 2 times per week
- 3–4 times per week
- 5–6 times per week
- 1 time per day
- 2 or more times per day

117a. How often was the cheese you ate **low-fat or fat-free**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

Question 118 appears on the next page

**This is a sample form. Do not use for scanning.**

Over the past 12 months...

118. How often did you eat **frozen yogurt, sorbet, or ices** (including low-fat or fat-free)?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

119. How often did you eat **ice cream, ice cream bars, or sherbet** (including low-fat or fat-free)?

- NEVER (GO TO QUESTION 120)
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

119a. How often was the ice cream you ate **light, low-fat, or fat-free ice cream** or **sherbet**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

120. How often did you eat **cake** (including low-fat or fat-free)?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

121. How often did you eat **cookies or brownies** (including low-fat or fat-free)?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

122. How often did you eat **doughnuts, sweet rolls, Danish, or pop-tarts**?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

123. How often did you eat **sweet muffins or dessert breads** (including low-fat or fat-free)?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

124. How often did you eat **fruit crisp, cobbler, or strudel**?

- NEVER
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

125. How often did you eat **pie**?

- NEVER (GO TO QUESTION 126)
- 1–6 times per year       2 times per week
- 7–11 times per year     3–4 times per week
- 1 time per month         5–6 times per week
- 2–3 times per month     1 time per day
- 1 time per week          2 or more times per day

**The next four questions ask about the kinds of pie you ate. Please read all four questions before answering.**

125a. How often were the pies you ate **fruit pie** (such as apple, blueberry, others)?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

**This is a sample form. Do not use for scanning.**

Over the past 12 months...

125b. How often were the pies you ate **cream, pudding, custard, or meringue pie**?

- Almost never or never
- About 1/4 of the time
- About 1/2 of the time
- About 3/4 of the time
- Almost always or always

125c. How often were the pies you ate **pumpkin or sweet potato pie**?

- Almost never or never
- About 1/4 of the time
- About 1/2 of the time
- About 3/4 of the time
- Almost always or always

125d. How often were the pies you ate **pecan pie**?

- Almost never or never
- About 1/4 of the time
- About 1/2 of the time
- About 3/4 of the time
- Almost always or always

126. How often did you eat **chocolate candy**?

- NEVER
- 1-6 times per year
- 7-11 times per year
- 1 time per month
- 2-3 times per month
- 1 time per week
- 2 times per week
- 3-4 times per week
- 5-6 times per week
- 1 time per day
- 2 or more times per day

127. How often did you eat **other candy**?

- NEVER
- 1-6 times per year
- 7-11 times per year
- 1 time per month
- 2-3 times per month
- 1 time per week
- 2 times per week
- 3-4 times per week
- 5-6 times per week
- 1 time per day
- 2 or more times per day

128. How often did you eat **eggs, egg whites, or egg substitutes** (NOT counting eggs in baked goods and desserts)? *(Please include eggs in salads, quiche, and soufflés.)*

- NEVER (GO TO QUESTION 129)
- 1-6 times per year
- 7-11 times per year
- 1 time per month
- 2-3 times per month
- 1 time per week
- 2 times per week
- 3-4 times per week
- 5-6 times per week
- 1 time per day
- 2 or more times per day

Question 128 appears in the next column

128a. How often were the eggs you ate **egg substitutes or egg whites only**?

- Almost never or never
- About 1/4 of the time
- About 1/2 of the time
- About 3/4 of the time
- Almost always or always

128b. How often were the eggs you ate **regular whole eggs**?

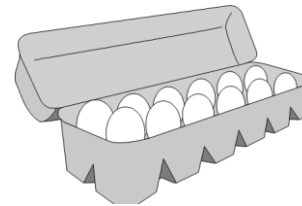
- Almost never or never
- About 1/4 of the time
- About 1/2 of the time
- About 3/4 of the time
- Almost always or always

128c. How often were the eggs you ate **cooked in oil, butter, or margarine**?

- Almost never or never
- About 1/4 of the time
- About 1/2 of the time
- About 3/4 of the time
- Almost always or always

128d. How often were the eggs you ate part of **egg salad**?

- Almost never or never
- About 1/4 of the time
- About 1/2 of the time
- About 3/4 of the time
- Almost always or always



129. How many cups of **coffee**, caffeinated or decaffeinated, did you drink (including coffee drinks such as Latte, Mocha, Frappuccino, etc.)?

- NONE (GO TO QUESTION 130)
- Less than 1 cup per month
- 1-3 cups per month
- 1 cup per week
- 2-4 cups per week
- 5-6 cups per week
- 1 cup per day
- 2-3 cups per day
- 4-5 cups per day
- 6 or more cups per day

Question 130 appears on the next page



**This is a sample form. Do not use for scanning.**

Over the past 12 months...

129a. How often was the coffee you drank **decaffeinated**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

130. How many glasses, cans, or bottles of **COLD** or **ICED tea**, caffeinated or decaffeinated, did you drink?

- NONE (GO TO QUESTION 131)
- Less than 1 glass, can or bottle per month
- 1–3 glasses, cans or bottles per month
- 1 glass, can or bottle per week
- 2–4 glasses, cans or bottles per week
- 5–6 glasses, cans or bottles per week
- 1 glass, can or bottle per day
- 2–3 glasses, cans or bottles per day
- 4–5 glasses, cans or bottles per day
- 6 or more glasses, cans or bottles per day

130a. How often was the cold or iced tea you drank **decaffeinated** or **herbal**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

130b. How often was the cold or iced tea you drank **presweetened with either sugar or artificial sweeteners** (such as Splenda, Equal, Sweet n Low or others)?

- Almost never or never (GO TO QUESTION 131)
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

130c. What kind of **sweetener** was added to your presweetened cold or iced tea most of the time?

- Sugar or honey
- Artificial sweeteners (such as Splenda, Equal, Sweet n Low or others)

131. How many cups of **HOT tea**, caffeinated or decaffeinated, did you drink?

- NONE (GO TO QUESTION 132)
- Less than 1 cup per month
- 1–3 cups per month
- 1 cup per week
- 2–4 cups per week
- 5–6 cups per week
- 1 cup per day
- 2–3 cups per day
- 4–5 cups per day
- 6 or more cups per day

131a. How often was the hot tea you drank **decaffeinated** or **herbal**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

132. Over the past 12 months, did you add **sugar, honey or other sweeteners** to your tea or coffee (hot or iced)?

- NO (GO TO QUESTION 133)
- YES

132a. How often did you add **sugar** or **honey** to your coffee or tea (hot or iced)?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

132b. How often did you add **artificial sweetener** (such as Splenda, Equal, Sweet n Low or others) to your coffee or tea?

- Almost never or never (GO TO QUESTION 133)
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

132c. What kind of **artificial sweetener** did you usually use?

- Equal or aspartame
- Sweet N Low or saccharin
- Splenda or sucralose
- Herbal extracts or other kind

**This is a sample form. Do not use for scanning.**

**Over the past 12 months...**

133. Over the past 12 months, did you add **whiteners** (such as cream, milk, or non-dairy creamer) to your tea or coffee?

NO (GO TO QUESTION 134)

YES

133a. How often was **non-dairy creamer** added to your coffee or tea?

- Almost never or never (GO TO QUESTION 133c)
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

133b. What kind of **non-dairy creamer** did you usually use?

- Regular powdered
- Low-fat or fat-free powdered
- Regular liquid
- Low-fat or fat-free liquid

133c. How often was **cream** or **half and half** added to your coffee or tea?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

133d. How often was **milk** added to your coffee or tea?

- Almost never or never (GO TO QUESTION 134)
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

133e. What kind of **milk** was usually added to your coffee or tea?

- Whole milk
- 2% milk
- 1% milk
- Skim, nonfat, or ½% milk
- Evaporated or condensed (canned) milk
- Soy milk
- Rice milk
- Other

134. How often was **sugar** or **honey** added to foods you ate? (*Please do not include sugar in coffee, tea, other beverages, or baked goods.*)

NEVER

- |  |  |
|--|--|
| <input type="checkbox"/> 1–6 times per year  | <input type="checkbox"/> 2 times per week        |
| <input type="checkbox"/> 7–11 times per year | <input type="checkbox"/> 3–4 times per week      |
| <input type="checkbox"/> 1 time per month    | <input type="checkbox"/> 5–6 times per week      |
| <input type="checkbox"/> 2–3 times per month | <input type="checkbox"/> 1 time per day          |
| <input type="checkbox"/> 1 time per week     | <input type="checkbox"/> 2 or more times per day |

**The following questions are about the kinds of margarine, mayonnaise, sour cream, cream cheese, and salad dressing that you ate. If possible, please check the labels of these foods to help you answer.**

135. Over the past 12 months, did you eat **margarine**?

NO (GO TO QUESTION 136)

YES

135a. How often was the margarine you ate **light**, **low-fat**, or **fat-free** (stick or tub)?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

136. Over the past 12 months, did you eat **butter**?

NO (GO TO QUESTION 137)

YES

136a. How often was the butter you ate **light** or **low-fat**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

**This is a sample form. Do not use for scanning.**

Over the past 12 months...

137. Over the past 12 months, did you eat **mayonnaise** or **mayonnaise-type dressing**?

NO (GO TO QUESTION 138)

YES

137a. How often was the mayonnaise you ate **light, low-fat or fat-free**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

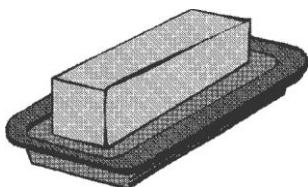
138. Over the past 12 months, did you eat **sour cream**?

NO (GO TO QUESTION 139)

YES

138a. How often was the sour cream you ate **light, low-fat, or fat-free**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always



139. Over the past 12 months, did you eat **cream cheese**?

NO (GO TO QUESTION 140)

YES

139a. How often was the cream cheese you ate **light, low-fat, or fat-free**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

140. Over the past 12 months, did you eat **salad dressing**?

NO (GO TO INTRODUCTION TO QUESTION 141)

YES

140a. How often was the salad dressing you ate **light, low-fat or fat-free**?

- Almost never or never
- About ¼ of the time
- About ½ of the time
- About ¾ of the time
- Almost always or always

**The following two questions ask you to summarize your usual intake of vegetables and fruits. Please do not include salads, potatoes, or juices.**

141. Over the past 12 months, how many servings of **vegetables** (not including salad or potatoes) did you eat per week or per day?

- |   |  |
|---|--|
| <input type="checkbox"/> Less than 1 per week | <input type="checkbox"/> 2 per day         |
| <input type="checkbox"/> 1–2 per week         | <input type="checkbox"/> 3 per day         |
| <input type="checkbox"/> 3–4 per week         | <input type="checkbox"/> 4 per day         |
| <input type="checkbox"/> 5–6 per week         | <input type="checkbox"/> 5 or more per day |
| <input type="checkbox"/> 1 per day            |  |

142. Over the past 12 months, how many servings of **fruit** (not including juices) did you eat per week or per day?

- |   |  |
|---|--|
| <input type="checkbox"/> Less than 1 per week | <input type="checkbox"/> 2 per day         |
| <input type="checkbox"/> 1–2 per week         | <input type="checkbox"/> 3 per day         |
| <input type="checkbox"/> 3–4 per week         | <input type="checkbox"/> 4 per day         |
| <input type="checkbox"/> 5–6 per week         | <input type="checkbox"/> 5 or more per day |
| <input type="checkbox"/> 1 per day            |  |

143. Over the past month, which of the following foods did you eat **AT LEAST THREE TIMES?** (*Mark all that apply.*)

- |   |   |
|---|---|
| <input type="checkbox"/> Avocado, guacamole                                   | <input type="checkbox"/> Olives                                 |
| <input type="checkbox"/> Cheesecake   | <input type="checkbox"/> Oysters                                |
| <input type="checkbox"/> Chocolate, fudge, or butterscotch toppings or syrups | <input type="checkbox"/> Pickles or pickled vegetables or fruit |
| <input type="checkbox"/> Chow mein noodles                                    | <input type="checkbox"/> Plantains                              |
| <input type="checkbox"/> Croissants   | <input type="checkbox"/> Pork neck bones, hock, head, feet      |
| <input type="checkbox"/> Dried apricots                                       | <input type="checkbox"/> Pudding or custard                     |
| <input type="checkbox"/> Egg rolls  | <input type="checkbox"/> Veal, venison, lamb                    |
| <input type="checkbox"/> Granola bars   | <input type="checkbox"/> Whipped cream, regular                 |
| <input type="checkbox"/> Hot peppers  | <input type="checkbox"/> Whipped cream, substitute              |
| <input type="checkbox"/> Jell-O, gelatin                                      |   |
| <input type="checkbox"/> Mangoes  |   |
| <input type="checkbox"/> Milkshakes or ice-cream sodas                        | <input type="checkbox"/> NONE                                   |

**This is a sample form. Do not use for scanning.**

Over the past 12 months...

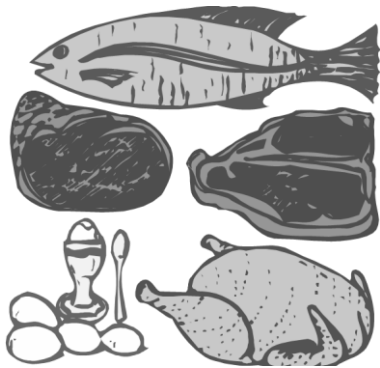
144. For **ALL** of the past 12 months, have you followed any type of **vegetarian diet**?

NO (GO TO INTRODUCTION TO QUESTION 145)

YES

144a. Which of the following foods did you **TOTALLY EXCLUDE** from your diet? **(Mark all that apply.)**

- Meat (beef, pork, lamb, etc.)
- Poultry (chicken, turkey, duck)
- Fish and seafood
- Eggs
- Dairy products (milk, cheese, etc.)



The next questions are about your use of vitamin pills or other supplements.

145. Over the past 12 months, did you take any **multivitamins**, such as One-a-Day-, Theragran-, Centrum-, or Prenatal-type multivitamins (as pills, liquids, or packets)?

NO (GO TO INTRODUCTION TO QUESTION 147)

YES

146. How often did you take **One-a-day-, Theragran-, or Centrum-type** multivitamins?

- Less than 1 day per month
- 1-3 days per month
- 1-3 days per week
- 4-6 days per week
- Every day

146a. Did your **multivitamin** usually contain **minerals** (such as iron, zinc, etc.)?

- NO
- YES
- Don't know

146b. Over the past 12 months, did you take any **vitamins, minerals, or other herbal supplements** other than your multivitamin?

NO

**Thank you *very much* for completing this questionnaire! Because we want to be able to use all the information you have provided, we would greatly appreciate it if you would please take a moment to review each page making sure that you:**

- Did not skip any pages and
- Crossed out the incorrect answer and circled the correct answer if you made any changes.

YES

These last questions are about the vitamins, minerals, or herbal supplements you took that are **NOT** part of a One-a-day-, Theragran-, or Centrum-type of multivitamin.

Please include vitamins taken as part of an antioxidant supplement.

Over the past 12 months...

147. How often did you take **Antacids such as Tums or Rolaids**?

NEVER (GO TO QUESTION 148)

- Less than 1 day per month
- 1-3 days per month
- 1-3 days per week
- 4-6 days per week
- Every day

147a. Was your antacid usually "extra strength"?

- NO
- YES
- Don't know

**This is a sample form. Do not use for scanning.**

**Over the past 12 months...**

148. How often did you take **Calcium** (with or without Vitamin D) (**NOT** as part of a multivitamin in Question 146 or antacid in Question 147)?

- NEVER (GO TO QUESTION 149)
- Less than 1 day per month
- 1–3 days per month
- 1–3 days per week
- 4–6 days per week
- Every day

148a. Did your **Calcium** usually contain **Vitamin D**?

- NO
- YES
- Don't know

148b. Did your **Calcium** usually contain **Magnesium**?

- NO
- YES
- Don't know

148c. Did your **Calcium** usually contain **Zinc**?

- NO
- YES
- Don't know

149. How often did you take **Iron** (**NOT** as part of a multivitamin in Question 146)?

- NEVER
- Less than 1 day per month
- 1–3 days per month
- 1–3 days per week
- 4–6 days per week
- Every day

150. How often did you take **Vitamin C** (**NOT** as part of a multivitamin in Question 146)?

- NEVER
- Less than 1 day per month
- 1–3 days per month
- 1–3 days per week
- 4–6 days per week
- Every day

151. How often did you take **Vitamin E** (**NOT** as part of a multivitamin in Question 146)?

- NEVER
- Less than 1 day per month
- 1–3 days per month
- 1–3 days per week
- 4–6 days per week
- Every day

**The last two questions ask you about other supplements you took more than once per week.**

152. Please mark any of the following **single supplements** you took more than once per week (**NOT** as part of a multivitamin in Question 147):

- |  |   |
|--|---|
| <input type="checkbox"/> B-6               | <input type="checkbox"/> Occu-vite/Eye health |
| <input type="checkbox"/> B-complex         | <input type="checkbox"/> Potassium            |
| <input type="checkbox"/> B-12              | <input type="checkbox"/> Selenium             |
| <input type="checkbox"/> Beta-carotene     | <input type="checkbox"/> Vitamin A            |
| <input type="checkbox"/> Folic acid/folate | <input type="checkbox"/> Vitamin D            |
| <input type="checkbox"/> Magnesium         | <input type="checkbox"/> Zinc                 |

153. Please mark any of the following **herbal, botanical, or other supplements** you took more than once per week.

- |   |  |
|---|--|
| <input type="checkbox"/> Chondroitin        | <input type="checkbox"/> Ginseng                     |
| <input type="checkbox"/> Coenzyme Q-10      | <input type="checkbox"/> Glucosamine/<br>chondroitin |
| <input type="checkbox"/> Echinacea          | <input type="checkbox"/> Peppermint                  |
| <input type="checkbox"/> Energy supplements | <input type="checkbox"/> Probiotics                  |
| <input type="checkbox"/> Fish oil/omega 3's | <input type="checkbox"/> Saw palmetto                |
| <input type="checkbox"/> Flaxseed/oil       | <input type="checkbox"/> Soy supplement              |
| <input type="checkbox"/> Garlic             | <input type="checkbox"/> Sports supplements          |
| <input type="checkbox"/> Ginger             | <input type="checkbox"/> St. John's wort             |
| <input type="checkbox"/> Ginkgo biloba      | <input type="checkbox"/> Other                       |

**Thank you very much for completing this questionnaire! Because we want to be able to use all the information you have provided, we would greatly appreciate it if you would please take a moment to review each page making sure that you:**

- **Did not skip any pages and**
- **Crossed out the incorrect answer and circled the correct answer if you made any changes.**