Supplemental Figure 1. Dietary questionnaire

Preliminary Dietary Assessment

e. How long have you been taking the supplements?

(Focusing on consumption of DHA and EPA)

a. Do you currently follow a special diet?						
b. How long have you been following the diet you mentioned above?						
c. Do you currently take any dietary supplements? Please list them all and the frequency.						
Section 1. Consumption of fish oil supplements.						
Question 1. Fish oil supplements (pills)						
a. Which kind (including brand)?						
b. Dose of each pill?						
c. How often do you take the pills (how many times per week)?						
d. How many pills each time?						
e. How long have you been taking fish oil supplements?						
Question 2. How often do you take fish oil (liquid)?						
a. Which kind (including brand)?						
b. Dose per serving (from the label)?						
c. How often do you take oil (how many times per week?)?						
d. How much do you take fish oil each time?						

Comments:

Section 2. Consumption of fish and shellfish.

Example: Tuna, canned, 3 times a week, 2 tablespoon.

Question 1. Have you been taking any of the following items on a <u>WEEKLY</u> basis in the past 6 month? Please include all ocean fish/shellfish that you eat regularly (at least on a weekly basis) in the past 6 month in this section. Use your best estimation for serving size.

Food item Kind Cooking method Frequency Serving size How long Anchovy Bass Bluefish Cisco Cod Drum Halibut Herring Mackerel Food item Kind Cooking method Frequency Serving size How long Pollock Sablefish Salmon Sardine Shark Shad Smelt Swordfish Tuna Trout Whitefish Wolfish Caviar

Food item	Kind	Cooking method	Frequency	Serving size	How long
Roe					
Crab					
Lobster					
Mussel					
Oyster					
Shrimp					
Squid					_
Section 3: C	onsumption of	omega-3 fortified foods.			
Question 1:		taking any omega-3 for		EKLY basis in the	past 6 months? Please
Food item	type of o	o-3 FA Frequ	ency	Serving size	How long
Comments:					