Patient identification number

Food diary version 1.0

Food Diary

Why a food diary?
This food diary can be used to write down what you eat and drink daily. This way, the researcher can know what food u normally consume and how much. We want to use this information to determine your mean food intake. You are supposed to fill out this food diary on 1 weekend-day and 2 regular weekdays (3 days in total). Please write everything down you eat and/or drink during the day as precisely as possible, also the in-between snacks. Filling out the diary needs to be done as precisely as possible. Therefore, we advise you to first read all guidelines before you start.

Patient identification number

Food diary version 1.0

Guidelines for filling out the food diary:

- Write down your food intake for 3 days, with one of the 3 days being a Saturday or a Sunday. The days may not follow each other, so e.g. not Mon-Tue or Wed-Thu in the same week.
- On the next page you will find a schedule to keep track of which days you recorded your food intake.
- Note down exactly what you eat and drink, every little bit counts. Also note small snacks such as liquorice/sweets. Write down exactly what you eat, not the amount you prepare or have served.
- It is best to weigh everything. The quantities can also be given in household measurements, such as cups, mugs, slices, bowls. Sometimes the weight can also be derived from the packaging. Since one bowl is not the same as another, you can see examples on the next page and fill in your measurements in the provided table. Indicate the quantity and type of food with the brand name for everything you eat and drink.
- Describe (if applicable) the specific recipe for a prepared meal with the quantities. If you only eat a portion, mention this.
- All details count:
    - Do you have sugar/milk in your tea or coffee?
    - What kind of frying fat or butter do you use?
    - Have you written down everything you drink? Lean or semi-skimmed?
    - Have you used extra salt in your meal?
- Some people like to keep the booklet with them. That way they don't forget to write anything down. If necessary, use a small notepad so that you can add to the food diary at a later time.
- For hot meals, weigh the quantities as much as possible, or copy the weight from the packaging. For meat, rice and pasta, note the weight before preparing.
- When you cook for multiple people, it is difficult to remember how much you have had, everything is mixed up. You can write down the recipe, and then write down how much you have eaten (e.g. half, a quarter ...)
- Provide as much detail as possible about food products, the packaging can help you write everything down properly. For example, for ‘cheese’: one whole pre-cut slice of Beemster 30+ cheese, matured. And also, if you use the ‘less salt’ variant of something.

Remember that you can never write too much. Good luck filling out the diary!

Patient identification number

Food diary version 1.0
Household measurements

You can measure your standard dishes with a measuring cup. For other foods, it is best to weigh them, or infer from the packaging.

When indicating quantities, you may use household measurements. However, because these capacity measurements are not the same for everyone, we ask you to measure the household measurements used with a measuring cup. For example, you fill a mug with water as you normally would with milk and pour this into the measuring cup. You can then read the quantity and note it down below.

Household measurement	Measurement
1 glass	
1 large glass	
1 teacup	
1 coffee cup	
1 mug	
1 dessert bowl	
1 soup bowl	
1 deep plate	
1 wine glass	
1 beer glass	
……	

Below we have listed the standard contents of a cup, glass, mug, bowl, soup cup and soup plate:

- 1 cup = 125 ml
- 1 glass = 150 ml
- 1 mug = 225 ml
- 1 bowl = 200 ml
- 1 soup bowl = 250 ml
- 1 deep plate = 200 ml

Patient identification number

Food diary version 1.0

thinly spread	average	thickly spread
		

✓

Please indicate below how you drink your coffee and tea:

- Tea without / with* sugar: ……. teaspoons / cubes* sugar
- Coffee without / with* sugar, ……. teaspoons / lumps* of sugar

Coffee black / with semi-skimmed coffee milk / with full-fat coffee milk / with coffee cream / with coffee milk powder*

Please complete the following:

We would like to know on which days you have recorded your food intake. An example of a completed schedule is:

Record day	**Day**	**Date**
remarks	*2 x Mon, Tue, Wed, Thu of Fri 1x Sat of Sun*	*Non consecutive days (so not Mon-Tue or Wed-Thu in the same week)*
1	*Tuesday*	*October 13*
2	*Thursday*	*October 15*
3	*Sunday*	*October 18*

In the table below, please fill out the day and date of the 3 days on which you recorded your food intake.

Record day	**Day**	**Date**
remarks	*2 x Mon, Tue, Wed, Thu of Fri 1x Sat of Sun*	*Non consecutive days (so not Mon-Tue or Wed-Thu in the same week)*
1		
2		
3		

Patient identification number

Food diary version 1.0

Day 1: Breakfast date:…….. ……..day

Quantity	Food item
	Bread:
_____	Slice(s) white/brown/wholemeal bread
_____	Slice(s) rye bread
_____	Slice(s) currant bread
_____	Slice(s) sugar bread
_____	Piece(s) rolls
_____	Piece(s) soft buns
_____	Piece(s) croissant
_____	Piece(s) Other, namely……
	Spread / topped with:
_____	Butter
_____	Margarine, brand and type,……
_____	Half-fat margarine, brand and type,……....
	Cheese, type……
_____	Cold cuts, type……..
_____	Sweet topping, type……..
_____	Other, namely …….....
_____	
	Yogurt
_____	Bowl of low-fat/semi-skimmed/full-fat yoghurt
_____	**Custard**
_____	Bowl of low-fat/semi-skimmed/full-fat custard
	Quark
_____	Bowl of low-fat/semi-skimmed/full-fat quark
	Porridge
_____	Bowl of porridge
	The yoghurt, custard, quark filled with:
_____	Cornflakes
_____	Muesli
_____	Cruesli
_____	Fruit, namely ……..……
_____	Other, namely ……

Food diary version 1.0

_____	**Fruit** Pieces of fruit, namely …….
	Drinks:
_____	Water cup/mug/glass*
_____	Teacup/mug/glass*
_____	Coffee cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat milk cup/mug/glass**
_____	Buttermilk cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat chocolate milk cup/mug/glass**
_____	*Skimmed/semi-skimmed/full fat drinking yoghurt cup/mug/glass**
_____	Fruit juice namely……..…….cup/mug/glass*
_____	Soft drink namely……cup/mug/glass*
_____	Other, namely …….
Remarks:	If you ate/drank something that is not listed above, you can enter it here. ……..…… …… …… …… …… …… ……

* Cross-out what does not apply

Patient identification number

Food diary version 1.0

Day 1: DURING THE MORNING date:…….. ……..day

Quantity	Food item
_____	**Drinks:**
_____	Water cup/mug/glass*
_____	Teacup/mug/glass*
_____	Coffee cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat milk cup/mug/glass**
_____	Buttermilk cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat chocolate milk cup/mug/glass**
_____	*Skimmed/semi-skimmed/full fat drinking yoghurt cup/mug/glass**
_____	Fruit juice namely……..…….cup/mug/glass*
_____	Soft drink namely……cup/mug/glass*
_____	Other, namely ……..
	Cakes and confectionary
_____	Slice(s) of large cookie/cake type
_____	Cookie(s)/Biscuit(s)
_____	Pastry, type…….……....
_____	Candy bar mars / nuts / other…….……....
_____	Piece(s) of chocolate milk / dark / white*
_____	Sweets, type……
	Savoury:
_____	Cubes of cheese, type…….
_____	Piece of sausage, type……..
_____	Toast with …….....
_____	Handful(s) of chips/nuts
_____	Other, namely ……
	Fruit
_____	Pieces of fruit, namely ……...
Remarks:	If you ate/drank something that is not listed above, you can enter it here. ……..…… …… …… …… …… …… ……

* Cross-out what does not apply

Patient identification number

Food diary version 1.0

Day 1: Bread meal date:…….. ……..day

Quantity	Food item
	Bread:
_____	Slice(s) white/brown/wholemeal bread
_____	Slice(s) rye bread
_____	Slice(s) currant bread
_____	Slice(s) sugar bread
_____	Piece(s) rolls
_____	Piece(s) soft buns
_____	Piece(s) croissant
_____	Piece(s) Other, namely ……..
	Spread / topped with:
_____	Butter
_____	Margarine, brand and type,……
_____	Half-fat margarine, brand and type,……
	Cheese,
_____	type……...
_____	Cold cuts, type……
_____	Sweet topping, type……
_____	Other, namely …….....
	Drinks:
_____	Water cup/mug/glass*
_____	Teacup/mug/glass*
_____	Coffee cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat milk cup/mug/glass**
_____	Buttermilk cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat chocolate milk cup/mug/glass**
_____	*Skimmed/semi-skimmed/full fat drinking yoghurt cup/mug/glass**
_____	Fruit juice namely……..…….cup/mug/glass*
_____	Soft drink namely……cup/mug/glass*
_____	Other, namely ……
	Yogurt
_____	Bowl of low-fat/semi-skimmed/full-fat yoghurt
	Custard
_____	Bowl of low-fat/semi-skimmed/full-fat custard
	Quark

_____	Bowl of low-fat/semi-skimmed/full-fat quark
	Porridge
_____	Bowl of porridge
	The yoghurt, custard, quark filled with:
_____	Cornflakes
_____	Muesli
_____	Cruesli
_____	Fruit, namely ……
_____	Other, namely ……
	Fruit
_____	Pieces of fruit, namely ……
Remarks:	If you ate/drank something that is not listed above, you can enter it here. …… …… …… …… …… …… …… ……

* Cross-out what does not apply

Patient identification number

Food diary version 1.0

Day 1: During the day date:…….. ……..day

Quantity	Food item
	Drinks:
_____	Water cup/mug/glass*
_____	Teacup/mug/glass*
_____	Coffee cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat milk cup/mug/glass**
_____	Buttermilk cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat chocolate milk cup/mug/glass**
_____	*Skimmed/semi-skimmed/full fat drinking yoghurt cup/mug/glass**
_____	Beer glass/can/bottle*
_____	Glass of wine
_____	Fruit juice namely……..…….cup/mug/glass*
_____	Soft drink namely……cup/mug/glass*
_____	Other, namely ……
	Cakes and confectionary
_____	Slice(s) of large cookie/cake type
_____	Cookie(s)/Biscuit(s)
_____	Pastry, type…….……....
_____	Candy bar mars / nuts / other…….……..
_____	Piece(s) of chocolate milk / dark / white*
_____	Sweets, type……
	Savoury:
_____	Cubes of cheese, type……
_____	Piece of sausage, type……..
_____	Toast with …….....
_____	Handful(s) of chips/nuts
_____	Other, namely ……
	Fruit
_____	Pieces of fruit, namely ……..
Remarks:	If you ate/drank something that is not listed above, you can enter it here. ……..…… …… …… …… ……

* Cross-out what does not apply

Patient identification number

Food diary version 1.0

Day 1: HOT MEAL date:…….. ……..day

Quantity	Food item
	Soup:
_____	*Plate / cup* soup, packet / can / homemade**
	What is in it?
	…….....
	.....
	Vegetables / Salad:
_____	Serving spoons vegetables, type…….……....
_____	Tablespoons applesauce
_____	Serving spoons raw vegetables, type……....
	With sauce / dressing* type…….....…..…….....
	…….
	Meat / meat substitutes:
_____	Gram beef, type…….…….
_____	Gram pork, type…..……
_____	Gram poultry, type…..…….
_____	Gram fish, type……
_____	Gram meat substitute, type……...……
_____	Gram other, namely, …….....
_____	Tablespoons *frying butter / olive oil / sunflower oil**
	Potatoes / rice and pasta:
_____	Piece of potato (the size of 1 egg) boiled / fried*
_____	Serving spoons fries
_____	Serving spoons cooked rice, noodles
_____	Serving spoons pasta (e.g. pasta, macaroni, noodles),
_____	Other, namely……..
	Sauce:
_____	Gravy spoons gravy, made from butter / margarine / cooking and frying fat *
_____	Tablespoons sauce, type.....
	One-pot meal:
	If you ate rice or pasta as a one-pot meal today (e.g. nasi, bami, macaroni dish, stew), how did you prepare it?
	……..……
	……..……
	……

Food diary version 1.0

	Dessert:
_____	Dish of low-fat/semi-skimmed/full-fat yoghurt
_____	Dish of low-fat/semi-skimmed/full-fat custard
_____	Dish of low-fat/semi-skimmed/full-fat quark
_____	Dish of pudding Ball/piece* of ice cream, type……....
_____	Piece of fruit, type……
_____	Block of cheese, type.....……..
_____	Other, namely…….....
	Drinks:
_____	Water cup/mug/glass*
_____	Teacup/mug/glass*
_____	Coffee cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat milk cup/mug/glass**
_____	Buttermilk cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat chocolate milk cup/mug/glass**
_____	*Skimmed/semi-skimmed/full fat drinking yoghurt cup/mug/glass**
_____	Beer glass/can/bottle*
_____	Glass of wine
_____	Fruit juice namely……..…….cup/mug/glass*
_____	Soft drink namely……cup/mug/glass*
_____	Other, namely …….
Remarks:	If you ate/drank something that is not listed above, you can enter it here.
	……..……
	……
	……
	……
	……

* Cross-out what does not apply

Patient identification number

Food diary version 1.0

Day 1: During the evening date:…….. ……..day

Quantity	Food item
	Drinks:
_____	Water cup/mug/glass*
_____	Teacup/mug/glass*
_____	Coffee cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat milk cup/mug/glass**
_____	Buttermilk cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat chocolate milk cup/mug/glass**
_____	*Skimmed/semi-skimmed/full fat drinking yoghurt cup/mug/glass**
_____	Beer glass/can/bottle*
_____	Glass of wine
_____	Fruit juice namely……..…….cup/mug/glass*
_____	Soft drink namely……cup/mug/glass*
_____	Other, namely ……..
	Cakes and confectionary
_____	Slice(s) of large cookie/cake type
_____	Cookie(s)/Biscuit(s)
_____	Pastry, type…….……....
_____	Candy bar mars / nuts / other…….…….....
_____	Piece(s) of chocolate milk / dark / white*
_____	Sweets, type…….
	Savoury:
_____	Cubes of cheese, type……
_____	Piece of sausage, type……..
_____	Toast with …….....
_____	Handful(s) of chips/nuts
_____	Other, namely …….
	Fruit
_____	Pieces of fruit, namely ……..
Remarks:	If you ate/drank something that is not listed above, you can enter it here. ……..…… …… …… …… ……

* Cross-out what does not apply

Patient identification number

Food diary version 1.0

Day 2: Breakfast date:…….. ……..day

Quantity	Food item
	Bread:
_____	Slice(s) white/brown/wholemeal bread
_____	Slice(s) rye bread
_____	Slice(s) currant bread
_____	Slice(s) sugar bread
_____	Piece(s) rolls
_____	Piece(s) soft buns
_____	Piece(s) croissant
_____	Piece(s) Other, namely ……..
	Spread / topped with:
_____	Butter
_____	Margarine, brand and type,……
_____	Half-fat margarine, brand and type,……
	Cheese, type……
_____	Cold cuts, type……
_____	Sweet topping, type……
_____	Other, namely ……...
_____	
	Yogurt
_____	Bowl of low-fat/semi-skimmed/full-fat yoghurt
_____	**Custard**
_____	Bowl of low-fat/semi-skimmed/full-fat custard
	Quark
_____	Bowl of low-fat/semi-skimmed/full-fat quark
	Porridge
_____	Bowl of porridge
	The yoghurt, custard, quark filled with:
_____	Cornflakes
_____	Muesli
_____	Cruesli
_____	Fruit, namely ……..……
_____	Other, namely ……
	Fruit
_____	Pieces of fruit, namely ……

Food diary version 1.0

	Drinks:
_____	Water cup/mug/glass*
_____	Teacup/mug/glass*
_____	Coffee cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat milk cup/mug/glass**
_____	Buttermilk cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat chocolate milk cup/mug/glass**
_____	*Skimmed/semi-skimmed/full fat drinking yoghurt cup/mug/glass**
_____	Fruit juice namely……..…….cup/mug/glass*
_____	Soft drink namely……cup/mug/glass*
_____	Other, namely ……..
Remarks:	If you ate/drank something that is not listed above, you can enter it here. ……..…… …… …… …… …… …… ……

* Cross-out what does not apply

Patient identification number

Food diary version 1.0

Day 2: DURING THE MORNING date:…….. ……..day

Quantity	Food item
_____	**Drinks:**
_____	Water cup/mug/glass*
_____	Teacup/mug/glass*
_____	Coffee cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat milk cup/mug/glass**
_____	Buttermilk cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat chocolate milk cup/mug/glass**
_____	*Skimmed/semi-skimmed/full fat drinking yoghurt cup/mug/glass**
_____	Fruit juice namely……..…….cup/mug/glass*
_____	Soft drink namely……cup/mug/glass*
_____	Other, namely ……
	Cakes and confectionary
_____	Slice(s) of large cookie/cake type
_____	Cookie(s)/Biscuit(s)
_____	Pastry, type…….……....
_____	Candy bar mars / nuts / other…….……....
_____	Piece(s) of chocolate milk / dark / white*
_____	Sweets, type……
	Savoury:
_____	Cubes of cheese, type……
_____	Piece of sausage, type……..
_____	Toast with …….....
_____	Handful(s) of chips/nuts
_____	Other, namely ……
	Fruit
_____	Pieces of fruit, namely …….
Remarks:	If you ate/drank something that is not listed above, you can enter it here. ……..…… …… …… …… …… …… ……

* Cross-out what does not apply

Patient identification number

Food diary version 1.0

Day 2: Bread meal date:…….. ……..day

Quantity	Food item
	Bread:
_____	Slice(s) white/brown/wholemeal bread
_____	Slice(s) rye bread
_____	Slice(s) currant bread
_____	Slice(s) sugar bread
_____	Piece(s) rolls
_____	Piece(s) soft buns
_____	Piece(s) croissant
_____	Piece(s) Other, namely ……..
	Spread / topped with:
_____	Butter
_____	Margarine, brand and type,……
_____	Half-fat margarine, brand and type,……
	Cheese,
_____	type……...
_____	Cold cuts, type……
_____	Sweet topping, type……
_____	Other, namely …….....
	Drinks:
_____	Water cup/mug/glass*
_____	Teacup/mug/glass*
_____	Coffee cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat milk cup/mug/glass**
_____	Buttermilk cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat chocolate milk cup/mug/glass**
_____	*Skimmed/semi-skimmed/full fat drinking yoghurt cup/mug/glass**
_____	Fruit juice namely……..…….cup/mug/glass*
_____	Soft drink namely……cup/mug/glass*
_____	Other, namely ……..
	Yogurt
_____	Bowl of low-fat/semi-skimmed/full-fat yoghurt
	Custard
_____	Bowl of low-fat/semi-skimmed/full-fat custard
	Quark

Food diary version 1.0

_____	Bowl of low-fat/semi-skimmed/full-fat quark
	Porridge
_____	Bowl of porridge
	The yoghurt, custard, quark filled with:
_____	Cornflakes
_____	Muesli
_____	Cruesli
_____	Fruit, namely ……
_____	Other, namely ……
	Fruit
_____	Pieces of fruit, namely ……
Remarks:	If you ate/drank something that is not listed above, you can enter it here. …… …… …… …… …… …… …… ……

* Cross-out what does not apply

Patient identification number

Food diary version 1.0

Day 2: During the day date:…….. ……..day

Quantity	Food item
	Drinks:
_____	Water cup/mug/glass*
_____	Teacup/mug/glass*
_____	Coffee cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat milk cup/mug/glass**
_____	Buttermilk cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat chocolate milk cup/mug/glass**
_____	*Skimmed/semi-skimmed/full fat drinking yoghurt cup/mug/glass**
_____	Beer glass/can/bottle*
_____	Glass of wine
_____	Fruit juice namely……..…….cup/mug/glass*
_____	Soft drink namely……cup/mug/glass*
_____	Other, namely ……..
	Cakes and confectionary
_____	Slice(s) of large cookie/cake type
_____	Cookie(s)/Biscuit(s)
_____	Pastry, type…….……....
_____	Candy bar mars / nuts / other…….…….....
_____	Piece(s) of chocolate milk / dark / white*
_____	Sweets, type……
	Savoury:
_____	Cubes of cheese, type……
_____	Piece of sausage, type……..
_____	Toast with …….....
_____	Handful(s) of chips/nuts
_____	Other, namely ……
	Fruit
_____	Pieces of fruit, namely ……..
Remarks:	If you ate/drank something that is not listed above, you can enter it here. ……..…… …… …… …… ……

* Cross-out what does not apply

Patient identification number

Food diary version 1.0

Day 2: HOT MEAL date:…….. ……..day

Quantity	Food item
	Soup:
_____	*Plate / cup* soup, packet / can / homemade**
	What is in it?
	…….....
	.....
	Vegetables / Salad:
_____	Serving spoons vegetables, type…….……....
_____	Tablespoons applesauce
_____	Serving spoons raw vegetables, type…….....
	With sauce / dressing* type…….....…..…….....
	…….
	Meat / meat substitutes:
_____	Gram beef, type…….……
_____	Gram pork, type…..……
_____	Gram poultry, type…..……..
_____	Gram fish, type…….
_____	Gram meat substitute, type……...…….
_____	Gram other, namely, …….....
_____	Tablespoons *frying butter / olive oil / sunflower oil**
	Potatoes / rice and pasta:
_____	Piece of potato (the size of 1 egg) boiled / fried*
_____	Serving spoons fries
_____	Serving spoons cooked rice, noodles
_____	Serving spoons pasta (e.g. pasta, macaroni, noodles),
_____	Other, namely…….
	Sauce:
_____	Gravy spoons gravy, made from butter / margarine / cooking and frying fat *
_____	Tablespoons sauce, type.....
	One-pot meal:
	If you ate rice or pasta as a one-pot meal today (e.g. nasi, bami, macaroni dish, stew), how did you prepare it?
	……..……
	……..……
	…….

Food diary version 1.0

	Dessert:
_____	Dish of low-fat/semi-skimmed/full-fat yoghurt
_____	Dish of low-fat/semi-skimmed/full-fat custard
_____	Dish of low-fat/semi-skimmed/full-fat quark
_____	Dish of pudding Ball/piece* of ice cream, type……....
_____	Piece of fruit, type……
_____	Block of cheese, type.....……..
_____	Other, namely……....
	Drinks:
_____	Water cup/mug/glass*
_____	Teacup/mug/glass*
_____	Coffee cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat milk cup/mug/glass**
_____	Buttermilk cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat chocolate milk cup/mug/glass**
_____	*Skimmed/semi-skimmed/full fat drinking yoghurt cup/mug/glass**
_____	Beer glass/can/bottle*
_____	Glass of wine
_____	Fruit juice namely……..…….cup/mug/glass*
_____	Soft drink namely……cup/mug/glass*
_____	Other, namely ……..
Remarks:	If you ate/drank something that is not listed above, you can enter it here.
	……..……
	……
	……
	……
	……

* Cross-out what does not apply

Patient identification number

Food diary version 1.0

Day 2: During the evening date:…….. ……..day

Quantity	Food item
	Drinks:
_____	Water cup/mug/glass*
_____	Teacup/mug/glass*
_____	Coffee cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat milk cup/mug/glass**
_____	Buttermilk cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat chocolate milk cup/mug/glass**
_____	*Skimmed/semi-skimmed/full fat drinking yoghurt cup/mug/glass**
_____	Beer glass/can/bottle*
_____	Glass of wine
_____	Fruit juice namely……..…….cup/mug/glass*
_____	Soft drink namely……cup/mug/glass*
_____	Other, namely ……...
	Cakes and confectionary
_____	Slice(s) of large cookie/cake type
_____	Cookie(s)/Biscuit(s)
_____	Pastry, type…….……....
_____	Candy bar mars / nuts / other…….……....
_____	Piece(s) of chocolate milk / dark / white*
_____	Sweets, type……
	Savoury:
_____	Cubes of cheese, type……...
_____	Piece of sausage, type…….…..
_____	Toast with …….....
_____	Handful(s) of chips/nuts
_____	Other, namely ……
	Fruit
_____	Pieces of fruit, namely ……
Remarks:	If you ate/drank something that is not listed above, you can enter it here. ……..…….. …… …… …… …….……

* Cross-out what does not apply

Patient identification number

Food diary version 1.0

Day 3: Breakfast date:…….. ……..day

Quantity	Food item
	Bread:
_____	Slice(s) white/brown/wholemeal bread
_____	Slice(s) rye bread
_____	Slice(s) currant bread
_____	Slice(s) sugar bread
_____	Piece(s) rolls
_____	Piece(s) soft buns
_____	Piece(s) croissant
_____	Piece(s) Other, namely ……...
	Spread / topped with:
_____	Butter
_____	Margarine, brand and type,……
_____	Half-fat margarine, brand and type,……...
	Cheese, type……
_____	Cold cuts, type……..
_____	Sweet topping, type……..
_____	Other, namely …….....
_____	
	Yogurt
_____	Bowl of low-fat/semi-skimmed/full-fat yoghurt
_____	**Custard**
_____	Bowl of low-fat/semi-skimmed/full-fat custard
	Quark
_____	Bowl of low-fat/semi-skimmed/full-fat quark
	Porridge
_____	Bowl of porridge
	The yoghurt, custard, quark filled with:
_____	Cornflakes
_____	Muesli
_____	Cruesli
_____	Fruit, namely ……..……...
_____	Other, namely ……..
	Fruit
_____	Pieces of fruit, namely ……

Food diary version 1.0

	Drinks:
_____	Water cup/mug/glass*
_____	Teacup/mug/glass*
_____	Coffee cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat milk cup/mug/glass**
_____	Buttermilk cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat chocolate milk cup/mug/glass**
_____	*Skimmed/semi-skimmed/full fat drinking yoghurt cup/mug/glass**
_____	Fruit juice namely……..…….cup/mug/glass*
_____	Soft drink namely……cup/mug/glass*
_____	Other, namely ……..
Remarks:	If you ate/drank something that is not listed above, you can enter it here. ……..…… …… …… …… …… …… ……

* Cross-out what does not apply

Patient identification number

Food diary version 1.0

Day 3: DURING THE MORNING date:…….. ……..day

Quantity	Food item
_____	**Drinks:**
_____	Water cup/mug/glass*
_____	Teacup/mug/glass*
_____	Coffee cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat milk cup/mug/glass**
_____	Buttermilk cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat chocolate milk cup/mug/glass**
_____	*Skimmed/semi-skimmed/full fat drinking yoghurt cup/mug/glass**
_____	Fruit juice namely……..…….cup/mug/glass*
_____	Soft drink namely……cup/mug/glass*
_____	Other, namely ……..
	Cakes and confectionary
_____	Slice(s) of large cookie/cake type
_____	Cookie(s)/Biscuit(s)
_____	Pastry, type…….…….....
_____	Candy bar mars / nuts / other…….….....
_____	Piece(s) of chocolate milk / dark / white*
_____	Sweets, type……
	Savoury:
_____	Cubes of cheese, type……
_____	Piece of sausage, type……..
_____	Toast with …….....
_____	Handful(s) of chips/nuts
_____	Other, namely ……
	Fruit
_____	Pieces of fruit, namely …….
Remarks:	If you ate/drank something that is not listed above, you can enter it here. ……..…… …… …… …… …… …… ……

* Cross-out what does not apply

Patient identification number

Food diary version 1.0

Day 3: Bread meal date:…….. ……..day

Quantity	Food item
	Bread:
_____	Slice(s) white/brown/wholemeal bread
_____	Slice(s) rye bread
_____	Slice(s) currant bread
_____	Slice(s) sugar bread
_____	Piece(s) rolls
_____	Piece(s) soft buns
_____	Piece(s) croissant
_____	Piece(s) Other, namely ……..
	Spread / topped with:
_____	Butter
_____	Margarine, brand and type,……
_____	Half-fat margarine, brand and type,……
	Cheese,
_____	type……..
_____	Cold cuts, type……
_____	Sweet topping, type……
_____	Other, namely ……...
	Drinks:
_____	Water cup/mug/glass*
_____	Teacup/mug/glass*
_____	Coffee cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat milk cup/mug/glass**
_____	Buttermilk cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat chocolate milk cup/mug/glass**
_____	*Skimmed/semi-skimmed/full fat drinking yoghurt cup/mug/glass**
_____	Fruit juice namely……..…….cup/mug/glass*
_____	Soft drink namely……cup/mug/glass*
_____	Other, namely ……...
	Yogurt
_____	Bowl of low-fat/semi-skimmed/full-fat yoghurt
	Custard
_____	Bowl of low-fat/semi-skimmed/full-fat custard
	Quark

Food diary version 1.0

_____	Bowl of low-fat/semi-skimmed/full-fat quark
	Porridge
_____	Bowl of porridge
	The yoghurt, custard, quark filled with:
_____	Cornflakes
_____	Muesli
_____	Cruesli
_____	Fruit, namely ……
_____	Other, namely ……
	Fruit
_____	Pieces of fruit, namely ……
Remarks:	If you ate/drank something that is not listed above, you can enter it here. …… …… …… …… …… …… …… ……

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Patient identification number

Food diary version 1.0

Day 3: During the day date:…….. ……..day

Quantity	Food item
	Drinks:
_____	Water cup/mug/glass*
_____	Teacup/mug/glass*
_____	Coffee cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat milk cup/mug/glass**
_____	Buttermilk cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat chocolate milk cup/mug/glass**
_____	*Skimmed/semi-skimmed/full fat drinking yoghurt cup/mug/glass**
_____	Beer glass/can/bottle*
_____	Glass of wine
_____	Fruit juice namely……..…….cup/mug/glass*
_____	Soft drink namely……cup/mug/glass*
_____	Other, namely ……..
	Cakes and confectionary
_____	Slice(s) of large cookie/cake type
_____	Cookie(s)/Biscuit(s)
_____	Pastry, type…….……....
_____	Candy bar mars / nuts / other…….…….....
_____	Piece(s) of chocolate milk / dark / white*
_____	Sweets, type…….
	Savoury:
_____	Cubes of cheese, type…….
_____	Piece of sausage, type……..
_____	Toast with …….....
_____	Handful(s) of chips/nuts
_____	Other, namely ……
	Fruit
_____	Pieces of fruit, namely …….
Remarks:	If you ate/drank something that is not listed above, you can enter it here. ……..…… …… …… …… ……

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Patient identification number

Food diary version 1.0

Day 3: HOT MEAL date:…….. ……..day

Quantity	Food item
	Soup:
_____	*Plate / cup* soup, packet / can / homemade**
	What is in it?
	…….....
	.....
	Vegetables / Salad:
_____	Serving spoons vegetables, type…….……....
_____	Tablespoons applesauce
_____	Serving spoons raw vegetables, type……....
	With sauce / dressing* type…….....…..…….....
	…….
	Meat / meat substitutes:
_____	Gram beef, type…….…….
_____	Gram pork, type…..……
_____	Gram poultry, type…..…….
_____	Gram fish, type…….……
_____	Gram meat substitute, type……...……
_____	Gram other, namely, …….....
_____	Tablespoons *frying butter / olive oil / sunflower oil**
	Potatoes / rice and pasta:
_____	Piece of potato (the size of 1 egg) boiled / fried*
_____	Serving spoons fries
_____	Serving spoons cooked rice, noodles
_____	Serving spoons pasta (e.g. pasta, macaroni, noodles),
_____	Other, namely……..
	Sauce:
_____	Gravy spoons gravy, made from butter / margarine / cooking and frying fat *
_____	Tablespoons sauce, type.....
	One-pot meal:
	If you ate rice or pasta as a one-pot meal today (e.g. nasi, bami, macaroni dish, stew), how did you prepare it?
	……..……
	……..……
	……

	Dessert:
_____	Dish of low-fat/semi-skimmed/full-fat yoghurt
_____	Dish of low-fat/semi-skimmed/full-fat custard
_____	Dish of low-fat/semi-skimmed/full-fat quark
_____	Dish of pudding Ball/piece* of ice cream, type……....
_____	Piece of fruit, type……
_____	Block of cheese, type.....……..
_____	Other, namely……....
	Drinks:
_____	Water cup/mug/glass*
_____	Teacup/mug/glass*
_____	Coffee cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat milk cup/mug/glass**
_____	Buttermilk cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat chocolate milk cup/mug/glass**
_____	*Skimmed/semi-skimmed/full fat drinking yoghurt cup/mug/glass**
_____	Beer glass/can/bottle*
_____	Glass of wine
_____	Fruit juice namely……..…….cup/mug/glass*
_____	Soft drink namely……cup/mug/glass*
_____	Other, namely ……
Remarks:	If you ate/drank something that is not listed above, you can enter it here.
	……..……
	……
	……
	……
	……

* Cross-out what does not apply

Patient identification number

Food diary version 1.0

Day 3: During the evening date:…….. ……..day

Quantity	Food item
	Drinks:
_____	Water cup/mug/glass*
_____	Teacup/mug/glass*
_____	Coffee cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat milk cup/mug/glass**
_____	Buttermilk cup/mug/glass*
_____	*Skimmed/semi-skimmed/full fat chocolate milk cup/mug/glass**
_____	*Skimmed/semi-skimmed/full fat drinking yoghurt cup/mug/glass**
_____	Beer glass/can/bottle*
_____	Glass of wine
_____	Fruit juice namely……..…….cup/mug/glass*
_____	Soft drink namely……cup/mug/glass*
_____	Other, namely ……..
	Cakes and confectionary
_____	Slice(s) of large cookie/cake type
_____	Cookie(s)/Biscuit(s)
_____	Pastry, type…….…….....
_____	Candy bar mars / nuts / other…….……....
_____	Piece(s) of chocolate milk / dark / white*
_____	Sweets, type……
	Savoury:
_____	Cubes of cheese, type……
_____	Piece of sausage, type……..
_____	Toast with …….....
_____	Handful(s) of chips/nuts
_____	Other, namely ……
	Fruit
_____	Pieces of fruit, namely ……
Remarks:	If you ate/drank something that is not listed above, you can enter it here. ……..…… …… …… …… …… ……..

* Cross-out what does not apply