

1 Please estimate your average food use as best you can, and please answer every question.
Do not leave any lines blank.

Foods and amounts

MEAT AND FISH

(Include meat, fish and poultry eaten in sandwiches)

Average use in last 12 months

	Amount	Never or less than once/mth	1-3 per mth	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
JBEEF	Beef: roast, steak, mince, stew or casserole <i>Medium serving</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9
JBEEFBUR	Beefburgers <i>One medium burger</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9
JPORK	Pork: roast, chops or stew <i>Medium serving</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9
JLAMB	Lamb: roast, chops or stew <i>Medium serving</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9
JCHICK	Chicken or other poultry <i>Medium serving</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9
JBACON	Bacon <i>Two rashers</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9
JHAM	Ham <i>One medium thick slice</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9
JCORNB	Corned beef, Spam, or luncheon meats <i>One medium thick slice</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9
JSAUSAG	Sausages <i>Two medium</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9
JSAVPIES	Savoury pies, e.g. meat pie, pork pie, pasties, steak and kidney pie <i>One individual pie</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9
JLIVER	Liver, liver pate, liver sausage <i>Medium serving</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9
JBATFISH	Fried fish in batter, as in fish and chips <i>One medium fillet</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9
JFISHFIN	Fish fingers or fish cakes <i>Two pieces</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9
JWHIFISH	Other white fish, fresh or frozen, e.g. cod, haddock, plaice, sole, halibut <i>One medium fillet or serving</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9
JOILFISH	Oily fish, fresh or canned, e.g. mackerel, kippers, tuna, salmon, sardines, herring <i>One medium fillet</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9
JSHEFISH	Shellfish, e.g. crab, pawns, mussels <i>Medium serving</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9

Never or less than once/mth 1-3 per mth Once a week 2-4 per week 5-6 per week Once a day 2-3 per day 4-5 per day 6+ per day

Please answer every question. **Do not leave any lines blank.**

Foods and amounts

BREAD AND SAVOURY BISCUITS

(Include bread eaten in sandwiches)

Average use in last 12 months

	Amount	Never or less than once/mth	1-3 per mth	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
JWHIBRD	White bread and rolls <i>One slice or roll</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JBROBRD	Brown bread and rolls <i>One slice or roll</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JWHOLBRD	Wholemeal bread and rolls <i>One slice or roll</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JCRACKER	Cream crackers, cheese biscuits <i>One biscuit</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JCRISBRD	Crispbread, e.g. Ryvita <i>One slice</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CEREALS

Do you eat cereals?

Yes

No

→ Go to **Potatoes, rice and pasta**

If no, please go to 'potatoes, rice and pasta'.

If yes, please indicate which brand(s) (e.g. Kellogg's) and type(s) (e.g. Corn Flakes) and the amount used in the last 12 months.

Average use in last 12 months

	Amount	Never or less than once/mth	1-3 per mth	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
1. Brand	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Type	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>								
2. Brand	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Type	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>								

POTATOES, RICE AND PASTA

Average use in last 12 months

	Amount	Never or less than once/mth	1-3 per mth	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
JBOILPOT	Boiled, mashed, instant or jacket potatoes <i>One medium potato/serving</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JCHIPS	Chips or french fries <i>Medium serving</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JROASPOT	Roast potatoes <i>One medium potato</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JPOTSALD	Potato salad <i>Half cup</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JWRICE	White rice <i>Half cup cooked</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JBRICE	Brown rice <i>Half cup cooked</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please answer every question. **Do not leave any lines blank.**

Foods and amounts

POTATOES, RICE AND PASTA

(Continued)

Average use in last 12 months

	Amount	Never or less than once/mth	1-3 per mth	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
JWHPASTA	Wholemeal pasta <i>One cup cooked</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JPASTA	White or green pasta, e.g. spaghetti, macaroni, noodles <i>One cup cooked</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JLASAGNE	Lasagne <i>3 x 3ins square</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JPIZZA	Pizza <i>One medium slice</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

DAIRY PRODUCTS AND FATS

Average use in last 12 months

	Amount	Never or less than once/mth	1-3 per mth	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
JSCREAM	Single cream <i>Tablespoon</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JDCREAM	Double or clotted cream <i>Tablespoon</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JYOGHURT	Yogurt <i>5oz carton</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JCHEESE	Cheese, e.g. Cheddar, Brie, Edam <i>1oz/30g piece (matchbox size)</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JCOMCHE	Cottage cheese, low fat soft cheese <i>One tablespoon</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JEGGS	Eggs as boiled, fried, scrambled, etc <i>One</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JQUICHE	Quiche <i>Medium slice</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JMAYO	Salad cream, mayonnaise <i>Tablespoon</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JVINAIGR	French dressing/vinaigrette <i>Tablespoon</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please answer every question. **Do not leave any lines blank.**

Foods and amounts

THE FOLLOWING ON BREAD, VEGETABLES, SANDWICHES, ETC

			Average use in last 12 months								
		Amount	Never or less than once/mth	1-3 per mth	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
JBUTTER	Butter	Teaspoon	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JHARDMAR	Hard margarine in wrapper, e.g. Stork, Krona	Teaspoon	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JPOLYUNS	Polyunsaturated margarine, e.g. Flora, sunflower	Teaspoon	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JSOFTMAR	Other soft margarine in tub, e.g. Blue band, Stork S.B.	Teaspoon	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JLFSPREA	Low fat spread, e.g. Outline Gold	Teaspoon	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

SWEETS AND SNACKS

			Average use in last 12 months								
		Amount	Never or less than once/mth	1-3 per mth	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
JBISCUIT	Sweet biscuits, e.g. Nice, digestive chocolate	One	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JCAKES	Cakes	Medium slice	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JBUNS	Buns and pastries	One	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JTARTS	Fruit pies, tarts, crumbles	Medium slice/serving	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JMILKPUD	Milk puddings, e.g. rice, semolina, tapioca	Medium serving	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JSPONGE	Sponge puddings	Medium serving	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JICECREA	Ice cream, choc ices	One scoop	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JCHOC	Chocolate, chocolate bars, e.g. Mars, Crunchy	One bar/four chocolates	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JSWEETS	Sweets, toffees, mints	One	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JSUGAR	Sugar added to tea, coffee, cereal	Teaspoon	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JCRISPS	Crisps or other packet snacks, e.g. Wotsits	1 small (25g) packet	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JNUTS	Peanuts or other nuts	10 whole	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please answer every question. **Do not leave any lines blank.**

Foods and amounts

SOUPS, SAUCES AND SPREADS

Average use in last 12 months

	Amount	Never or less than once/mth	1-3 per mth	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
JVEGSOUP	Vegetable soups <i>Medium soup bowl</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JMEATSOU	Meat soups <i>Medium soup bowl</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JSAUCE	Sauces, e.g. white sauce, cheese sauce, gravy <i>Tablespoon</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JKETCHUP	Tomato ketchup <i>Tablespoon</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JPICKLES	Pickles, chutney <i>Tablespoon</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JMARMITE	Marmite, Bovril <i>Teaspoon</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JJAM	Jam, marmalade, honey <i>Teaspoon</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JPEANUTB	Peanut butter <i>Teaspoon</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

DRINKS

'Average glass' means 200 ml/7oz
'Wine glass' means 125 ml/4.5oz

Average use in last 12 months

	Amount	Never or less than once/mth	1-3 per mth	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
JTEA	Tea <i>Cup</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JCOFFEE	Coffee, regular <i>Cup</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JDECAFF	Coffee, decaffeinated <i>Cup</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JCOFFWH	Coffee whitener, e.g. Coffee-mate <i>Teaspoon</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JCOCOA	Cocoa hot chocolate <i>Cup</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JHORLI	Horlicks, Ovaltine <i>Cup</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JWINE	Wine <i>Wine glass</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JBEER	Beer, lager or cider <i>Half pint</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JPORT	Port, sherry or vermouth <i>Measure (50ml)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JLIQU	Liqueurs, e.g. Baileys <i>Measure (50ml)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JSPIRITS	Spirits, e.g. gin, brandy, whisky, vodka <i>Single (25ml)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please answer every question. **Do not leave any lines blank.**

Foods and amounts

DRINKS

(Continued)

Average use in last 12 months

		Amount	Never or less than once/mth	1-3 per mth	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
JFIZZY	Fizzy soft drinks, e.g. Coca Cola, lemonade	<i>Average glass</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JLOWCAL	Low calorie or diet fizzy soft drinks	<i>Average glass</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JFJUICE	Real fruit juice (100%), e.g. orange, apple juice	<i>Average glass</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JSQUASH	Fruit squash or cordial	<i>Average glass</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

FRUIT For very seasonal fruits such as strawberries, please estimate your average use when the fruit is in season

Average use in last 12 months

		Amount	Never or less than once/mth	1-3 per mth	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
JAPPLES	Apples	<i>One medium</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JPEARS	Pears	<i>One medium</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JORANGES	Oranges, satsumas, mandarins	<i>One medium</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JGRAPEFR	Grapefruit	<i>Half medium</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JBANANAS	Bananas	<i>One medium</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JGRAPES	Grapes	<i>Small bunch</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JMELON	Melon	<i>Half medium</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JPEACHES	Peaches, plums, apricots	<i>One</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JSTRAWB	Strawberries, raspberries	<i>Medium serving</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JTNFRUIT	Tinned fruit	<i>Medium serving</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JDRIEFR	Dried fruit, e.g. raisins, prunes	<i>Medium serving</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please answer every question. **Do not leave any lines blank.**

Foods and amounts

VEGETABLES – FRESH, FROZEN OR TINNED

Average use in last 12 months

	Amount	Never or less than once/mth	1-3 per mth	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
JCARROTS	Carrots <i>One medium</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JSPINACH	Spinach <i>Medium serving</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JBROCCOL	Broccoli <i>Medium serving</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JGREENS	Spring greens, kale <i>Medium serving</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JSPROUTS	Brussels sprouts <i>Five sprouts</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JCABBAGE	Cabbage <i>Quarter small</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JPEAS	Peas <i>One teaspoon</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JBEANS	Green beans, broad beans, runner beans <i>Medium serving</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JMARROW	Marrow, courgettes <i>Medium serving</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JCAULIFL	Cauliflower <i>Medium serving</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JPARSNIP	Parsnips, turnips, swedes <i>One medium</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JLEEKS	Leeks <i>One medium</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JONIONS	Onions <i>One medium</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JGARLIC	Garlic <i>One clove</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JMUSHROO	Mushrooms <i>Medium serving</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JPEPPERS	Sweet peppers <i>One medium</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JSALAD	Green salad <i>Medium serving</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JTOMATO	Tomatoes <i>One medium</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JCOLESL	Coleslaw <i>One tablespoon</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JBAKEDB	Baked beans <i>One tablespoon</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JLENTILS	Dried lentils, beans, peas <i>One tablespoon cooked</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JTOFU	Tofu or soya bean curd <i>2 x 2 x1 ins piece</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
JTVP	Soya meat, TVP, vegeburger <i>One burger</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

2 Are the foods listed on the previous pages representative of the foods that you ate or drank in the last 12 months?

Yes 1

JREPRES

No 2

3 Are there any other foods which you ate more than once a week? If yes, please list below.

Yes 1

JFOODOTH

No 2

Food	Usual serving size	Number of times eaten each week
<input type="text" value="JFOODOT1"/>	<input type="text" value="JFOTHSZ1"/>	<input type="text" value="JFOTHNO1"/>
<input type="text" value="JFOODOT2"/>	<input type="text" value="JFOTHSZ2"/>	<input type="text" value="JFOTHNO2"/>
<input type="text" value="JFOODOT3"/>	<input type="text" value="JFOTHSZ3"/>	<input type="text" value="JFOTHNO3"/>
<input type="text" value="JFOODOT4"/>	<input type="text" value="JFOTHSZ4"/>	<input type="text" value="JFOTHNO4"/>
<input type="text" value="JFOODOT5"/>	<input type="text" value="JFOTHSZ5"/>	<input type="text" value="JFOTHNO5"/>
<input type="text" value="JFOODOT6"/>	<input type="text" value="JFOTHSZ6"/>	<input type="text" value="JFOTHNO6"/>

4 What type of milk did you most often use?

JMILKUSE

Please tick one answer only

Full cream 1

Semi-skimmed 2

Skimmed/fat free 3

Channel Islands/whole milk 4

Dried milk 5

Soya 6

Other (specify) 7

None 8

If you use soya milk, please describe brand and type

JMSOYA1

JMSOYA2

JMSOYA3

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

JMILKDAY

Please tick one answer only

- None 1
- Quarter of a pint 2
- Half a pint 3
- Three quarters of a pint 4
- One pint 5
- More than one pint 6

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

JFRYFAT

Please tick one answer only

- Butter 1
- Lard/dripping 2
- Liquid vegetable oil 3
- Solid vegetable fat 4
- Margarine 5
- None 6

Which brand do you usually use?

If you used vegetable oil, please specify type, e.g. corn, sunflower

JOILFRY1

JOILFRY2

JOILFRY3

7 What kind of fat do you usually use for baking?

JBAKEFAT

Please tick one answer only

- Butter 1
- Lard/dripping 2
- Liquid vegetable oil 3
- Solid vegetable fat 4
- Margarine 5
- None 6

Which brand do you usually use?

JOILBAK1

JOILBAK2

JOILBAK3

8 How often do you eat food that is fried?

JFRYEAT

Please tick one answer only

Less than once a week 1

1-3 time a week 2

4-6 times a week 3

Daily 4

9 What do you do with the visible fat on your meat?

JMEATFAT

Please tick one answer only

Don't eat meat 1

Eat as little as possible 2

Eat some of the fat 3

Eat most of the fat 4

10 How often do you add salt to food while cooking?

JSALTCK

Please tick one answer only

Never 1

Rarely 2

Sometimes 3

Usually 4

Always 5

11 How often do you add salt to food at the table?

JSALTTAB

Please tick one answer only

Never 1

Rarely 2

Sometimes 3

Usually 4

Always 5

12 Do you regularly use a salt substitute, e.g. LoSalt?

If yes, which brand

JSALSUB1

JSALSUB2

JSALSUB3

13 Over the last 12 months have you regularly taken any vitamin, mineral, cod-liver/fish oil, or other food supplements? Yes 1

JVITSUP

No 2

If yes, list name, brand and daily dose (use one line for each supplement).
Two examples are provided as a guide.

Name or type (e.g. multivitamin + iron, vitamin C, pluse once-a-day cod liver oil...)	Brand (e.g. Boots, FSC, Santaogen)	Daily amount (no. of tablets/capsules/ tablespoons taken per day...)	Total daily dose (e.g. grams, mg, etc. Only complete for supplements with 3 or fewer nutrients)	Currently taking (tick one)	
Calcium and Vitamin D	Boots	1 tablet	500 mg calcium 2.5 mg vitamin D	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Fort E (vitamin E)	Lanes	2 capsules	400 iu per day	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<input type="text" value="JVITTY1"/>		<input type="text" value="JVITDO1"/>		Yes <input type="checkbox"/>	No <input type="checkbox"/> <input type="text" value="JVITCUR1"/>
<input type="text" value="JVITTY2"/>		<input type="text" value="JVITDO2"/>		Yes <input type="checkbox"/>	No <input type="checkbox"/> <input type="text" value="JVITCUR2"/>
<input type="text" value="JVITTY3"/>		<input type="text" value="JVITDO3"/>		Yes <input type="checkbox"/>	No <input type="checkbox"/> <input type="text" value="JVITCUR3"/>
<input type="text" value="JVITTY4"/>		<input type="text" value="JVITDO4"/>		Yes <input type="checkbox"/>	No <input type="checkbox"/> <input type="text" value="JVITCUR4"/>
<input type="text" value="JVITTY5"/>		<input type="text" value="JVITDO5"/>		Yes <input type="checkbox"/>	No <input type="checkbox"/> <input type="text" value="JVITCUR5"/>
<input type="text" value="JVITTY6"/>		<input type="text" value="JVITDO6"/>		Yes <input type="checkbox"/>	No <input type="checkbox"/> <input type="text" value="JVITCUR6"/>

14 Are you on a slimming diet now? Yes 1

JDIETNOW

No 2

If yes, how long have you been on a slimming diet?

JDIETLNG

2 weeks or less 1

Between 2 weeks and 1 month 2

Between 1 month and 2 months 3

2 to 4 months 4

4 to 6 months 5

6 months or more 6

JFFQDOC

JFFQMOC

Year

JFFQYOC

Please complete today's date

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THANK YOU FOR COMPLETING THE 2007-2009 FOOD QUESTIONNAIRE

FOR OFFICE USE ONLY

Day

Month

Year

Date received

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<input type="text" value="2"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text"/>
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JFFQDOR

JFFQMOR

JFFQYOR