Appendix H.1

Three Day Diet Diary

Thank you for your time and effort in this study. The following is a diary to keep track of what your child consumes during the week of the stool collection. Please be as detailed as possible in the spaces provided for the most accurate analysis of your child's diet. Be sure to include any vitamins, herbs or other supplements. If your child spikes a temperature or seems to get the stomach flu please discontinue the food diary. Please document if this week's intake was typical on the last day of recording.

Complete your diet record including details as in the example below:

Time eaten	Amount EATEN	What did you eat?	Brand name	Type (low fat, low sugar, creamy, crispy…)	Preparation / Cooking method
6 pm	½8 oz	Water	Evian	Drinking Water	
"	8 oz	Diet Soda	Coke	Caffeine free	
	3 oz	Steak		Rib Eye	Trimmed fa grilled
"	2	Celery sticks			
	2 pills	Multiple Vitamin	Flintstones	children's chewable	

If you have any questions, please call <Principal Investigator>

Appendix H.1

Day of week: **M   Tu   W   Th   F   Sa   Su**

Please circle the day of the week

Date: _____

Time eaten	Amount EATEN	What did you eat?	Brand name	Type (low fat, low sugar, creamy, crispy…)	Preparation / Cooking method