



Public reporting burden for this collection of information is estimated to average 25 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0584). Do not return the completed form to this address.

OMB#: 0925-0584  
Exp. xx/xx/xxxx

# HCHS/SOL Food Propensity Questionnaire

ID NUMBER:

FORM CODE: FPE  
VERSION: B

Contact  
Occasion

SEQ #

## ADMINISTRATIVE INFORMATION

0a. Completion Date: / /   
Month Day Year

0b. Staff ID:

**Instructions:** Enter the answer given by the participant for each response.

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

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

2. How often did you drink **apple juice**?

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

3. How often did you drink **grape juice**?

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

4. How often did you drink **other 100% fruit juice/nectar** or **100% fruit juice/nectar mixtures** (such as pineapple, pear, apricot, or others)?

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

ID NUMBER:									
---------------	--	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact  
Occasion

		SEQ #		
--	--	-------	--	--

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

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   
 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

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

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

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

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

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

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

8. How often did you drink **soft drinks, sodas, or pop**?

NEVER  (GO TO QUESTION 9)

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

ID NUMBER:									
------------	--	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion

		SEQ #		
--	--	-------	--	--

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

8a. How often were these soft drinks, soda, 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

9. How often did you drink **beer**?

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

10. 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

11. How often did you eat **oatmeal**, **grits**, or **other cooked cereals**?

NEVER  (GO TO QUESTION 12)

- 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

11a. How often was the cooked cereal you ate **oatmeal**?

- 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

ID NUMBER:								
------------	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion

		SEQ #		
--	--	-------	--	--

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

12. How often did you eat **cold cereal (box cereal such as Corn Flakes)**?

NEVER  (GO TO QUESTION 13)

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	<input type="checkbox"/>

12a. How often was the cold cereal you ate a **whole grain type** (such as shredded wheat, Wheaties, Cheerios, Raisin Bran or other bran, oat, or whole wheat cereal)?

Almost never or never	<input type="checkbox"/>
About 1/4 of the time	<input type="checkbox"/>
About 1/2 of the time	<input type="checkbox"/>
About 3/4 of the time	<input type="checkbox"/>
Almost always or always	<input type="checkbox"/>

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

NEVER

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	<input type="checkbox"/>

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

NEVER

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	<input type="checkbox"/>

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

NEVER

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	<input type="checkbox"/>

ID NUMBER:									
------------	--	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion

		SEQ #		
--	--	-------	--	--

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

16. How often did you eat **bananas**? (NOT plantains-we will ask about plantains later)

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

17. 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

18. How often did you eat **dried fruit**, such as prunes or raisins?

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 **peaches, nectarines, or plums**?

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 **grapes**?

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

ID NUMBER:									
------------	--	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion

		SEQ #		
--	--	-------	--	--

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

21. How often did you eat **melons** (such as cantaloupe, watermelon, or honeydew)?

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 **strawberries**?

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. How often did you eat **oranges, tangerines, clementines, or tangelos**?

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

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

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

25. How often did you eat **mango** (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

ID NUMBER:								
------------	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion

		SEQ #		
--	--	-------	--	--

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

26. How often did you eat **papaya, lechosa** or **fruta bomba** (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

27. 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

28. How often did you eat **COOKED greens** (such as spinach, turnip, collard, mustard, chard, or kale)?

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. How often did you eat **RAW greens** (such as spinach, turnip, collard, mustard, chard, or kale)? *(We will ask about lettuce later.)*

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 **carrots** (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

ID NUMBER:									
------------	--	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion

		SEQ #		
--	--	-------	--	--

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

31. How often did you eat **string beans** or **green beans** (fresh, canned, or frozen)?

NEVER

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	<input type="checkbox"/>

32. How often did you eat **peas** (fresh, canned, or frozen)?

NEVER

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	<input type="checkbox"/>

33. How often did you eat **corn** (fresh, canned, or frozen)?

NEVER

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	<input type="checkbox"/>

34. How often did you eat **broccoli** (fresh or frozen)?

NEVER

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	<input type="checkbox"/>

35. How often did you eat **mixed vegetables** (fresh, canned, or frozen)?

NEVER

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	<input type="checkbox"/>



ID NUMBER:								
------------	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion

		SEQ #		
--	--	-------	--	--

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

36. How often did you eat fresh **tomatoes** (including those in salads)?

NEVER

- |                     |                          |                         |                          |
|---------------------|--------------------------|-------------------------|--------------------------|
| 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 | <input type="checkbox"/> |

37. How often did you eat **summer squash** (include yellow and green squash)?

NEVER

- |                     |                          |                         |                          |
|---------------------|--------------------------|-------------------------|--------------------------|
| 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 | <input type="checkbox"/> |

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

NEVER  (GO TO QUESTION 39)

- |                     |                          |                         |                          |
|---------------------|--------------------------|-------------------------|--------------------------|
| 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 | <input type="checkbox"/> |

38a. How often were the lettuce salads you ate made with **dark green leaves**? (such as spinach or romaine)

- |                         |                          |
|-------------------------|--------------------------|
| Almost never or never   | <input type="checkbox"/> |
| About ¼ of the time     | <input type="checkbox"/> |
| About ½ of the time     | <input type="checkbox"/> |
| About ¾ of the time     | <input type="checkbox"/> |
| Almost always or always | <input type="checkbox"/> |

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

NEVER

- |                     |                          |                         |                          |
|---------------------|--------------------------|-------------------------|--------------------------|
| 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 | <input type="checkbox"/> |

ID NUMBER:									
------------	--	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion

		SEQ #		
--	--	-------	--	--

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

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

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

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

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

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

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

43. How often did you eat **salsa or pico de gallo**?

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

44. How often did you eat **ketchup**?

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

ID NUMBER:									
------------	--	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion

		SEQ #		
--	--	-------	--	--

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

45. How often did you eat **chili** (chili con carne or with beans)?

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

46. How often did you eat **tortillas** or **tacos**?

NEVER  (GO TO QUESTION 47)

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

46a. How often were your tortillas or tacos **corn tortillas** or **tacos**?

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

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

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

48. How often did you eat **winter squash** (including pumpkin, acorn, and butternut squash)?

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

ID NUMBER:									
------------	--	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion

		SEQ #		
--	--	-------	--	--

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

49. How often did you eat **avocado**?

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

50. How often did you eat **nopal**?

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

51. How often did you eat **plantain**?

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

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

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

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

NEVER  (GO TO QUESTION 54)

- 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

53a. How often was the rice or other cooked grains you ate **brown rice, cracked wheat, or millet**?

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

ID NUMBER:									
------------	--	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion

		SEQ #		
--	--	-------	--	--

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

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

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

55. How often did you eat **bagels or English 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

**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.**

56. How often did you eat **breads or rolls AS PART OF SANDWICHES** (including burger and hot dog rolls)?

NEVER  (GO TO QUESTION 57)

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

56a. How often were the breads or rolls that you used for 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

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

NEVER  (GO TO QUESTION 58)

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

ID NUMBER:									
---------------	--	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact  
Occasion

		SEQ #		
--	--	-------	--	--

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

57a. 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

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

NEVER

- |  |  |
|--|--|
| 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 <input type="checkbox"/> |

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

NEVER

- |  |  |
|--|--|
| 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 <input type="checkbox"/> |

60. 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 <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 <input type="checkbox"/> |

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

NEVER

- |  |  |
|--|--|
| 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 <input type="checkbox"/> |

ID NUMBER:								
------------	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion

SEQ #		
-------	--	--

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

62. 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

- |                     |                          |                         |                          |
|---------------------|--------------------------|-------------------------|--------------------------|
| 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 | <input type="checkbox"/> |

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

NEVER

- |                     |                          |                         |                          |
|---------------------|--------------------------|-------------------------|--------------------------|
| 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 | <input type="checkbox"/> |

64. How often did you eat **beef hamburgers** or **cheeseburgers**?

NEVER

- |                     |                          |                         |                          |
|---------------------|--------------------------|-------------------------|--------------------------|
| 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 | <input type="checkbox"/> |

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

NEVER

- |                     |                          |                         |                          |
|---------------------|--------------------------|-------------------------|--------------------------|
| 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 | <input type="checkbox"/> |

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

NEVER

- |                     |                          |                         |                          |
|---------------------|--------------------------|-------------------------|--------------------------|
| 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 | <input type="checkbox"/> |

ID NUMBER:								
------------	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion

		SEQ #		
--	--	-------	--	--

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

67. 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   
 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

68. 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   
 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

69. How often did you eat **steak** (beef)? *(Do not include steak in sandwiches)*

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

70. How often did you eat **ribs** (pork or beef)?

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

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

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



ID NUMBER:									
------------	--	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion

		SEQ #		
--	--	-------	--	--

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

72. How often did you eat **chicken** as part of **salads, sandwiches, casseroles, stews, or other mixtures?**

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

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

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

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

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

75. How often did you eat **pork** (including chops, roasts, and in mixed dishes)? *(Please do not include ham, ham steak, or sausage.)*

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

76. How often did you eat **bacon** (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

ID NUMBER:									
------------	--	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion

		SEQ #		
--	--	-------	--	--

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

77. How often did you eat **sausage** (including chorizo, breakfast, Polish, Italian and including low-fat)?

NEVER

- |                     |                          |                         |                          |
|---------------------|--------------------------|-------------------------|--------------------------|
| 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 | <input type="checkbox"/> |

78. How often did you eat **smoked fish** or **seafood** (such as smoked salmon, lox, or others)?

NEVER

- |                     |                          |                         |                          |
|---------------------|--------------------------|-------------------------|--------------------------|
| 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 | <input type="checkbox"/> |

79. How often did you eat **all other fish** or **seafood** (including shellfish) that was **NOT SMOKED**?

NEVER

- |                     |                          |                         |                          |
|---------------------|--------------------------|-------------------------|--------------------------|
| 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 | <input type="checkbox"/> |

80. How often did you eat **soups**?

NEVER  (GO TO QUESTION 81)

- |                     |                          |                         |                          |
|---------------------|--------------------------|-------------------------|--------------------------|
| 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 | <input type="checkbox"/> |

80a. How often were the soups you ate **bean soups**?

- |                         |                          |
|-------------------------|--------------------------|
| Almost never or never   | <input type="checkbox"/> |
| About 1/4 of the time   | <input type="checkbox"/> |
| About 1/2 of the time   | <input type="checkbox"/> |
| About 3/4 of the time   | <input type="checkbox"/> |
| Almost always or always | <input type="checkbox"/> |

80b. How often were the soups you ate **cream soups** (including chowders)?

- |                         |                          |
|-------------------------|--------------------------|
| Almost never or never   | <input type="checkbox"/> |
| About 1/4 of the time   | <input type="checkbox"/> |
| About 1/2 of the time   | <input type="checkbox"/> |
| About 3/4 of the time   | <input type="checkbox"/> |
| Almost always or always | <input type="checkbox"/> |

ID NUMBER:									
------------	--	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion

		SEQ #		
--	--	-------	--	--

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

80c. How often were the soups you ate **tomato** or **vegetable soups**?

- 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

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

NEVER  (GO TO QUESTION 82)

- |  |  |
|--|--|
| 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 <input type="checkbox"/> |

81a. How often did you eat pizza with **pepperoni, sausage, or other meat**?

- 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

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

NEVER

- |  |  |
|--|--|
| 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 <input type="checkbox"/> |

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

NEVER

- |  |  |
|--|--|
| 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 <input type="checkbox"/> |

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

NEVER

- |  |  |
|--|--|
| 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 <input type="checkbox"/> |

ID NUMBER:								
------------	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion

		SEQ #		
--	--	-------	--	--

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

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

NEVER

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	<input type="checkbox"/>

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

NEVER

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	<input type="checkbox"/>

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

NEVER

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	<input type="checkbox"/>

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

NEVER

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	<input type="checkbox"/>

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

NEVER

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	<input type="checkbox"/>

ID NUMBER:									
------------	--	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion

		SEQ #		
--	--	-------	--	--

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

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

NEVER

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	<input type="checkbox"/>

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

NEVER

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	<input type="checkbox"/>

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

NEVER

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	<input type="checkbox"/>

93. How often did you eat **pudding or custard**?

NEVER

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	<input type="checkbox"/>

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

NEVER

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	<input type="checkbox"/>

ID NUMBER:									
------------	--	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion

		SEQ #		
--	--	-------	--	--

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

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

NEVER

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	<input type="checkbox"/>

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

NEVER

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	<input type="checkbox"/>

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

NEVER

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	<input type="checkbox"/>

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

NEVER

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	<input type="checkbox"/>

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

NEVER  (GO TO QUESTION 100)

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	<input type="checkbox"/>

99a. How often was the pie you ate **fruit pie** (such as apple, cherry, peach, blueberry, or others)?

Almost never or never	<input type="checkbox"/>
About 1/4 of the time	<input type="checkbox"/>
About 1/2 of the time	<input type="checkbox"/>
About 3/4 of the time	<input type="checkbox"/>
Almost always or always	<input type="checkbox"/>

ID NUMBER:									
---------------	--	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact  
Occasion

		SEQ #		
--	--	-------	--	--

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

100. 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

101. 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

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

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

103. How many cups of **coffee**, caffeinated or decaffeinated, did you drink?

NONE

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

104. How many glasses of **ICED tea**, caffeinated or decaffeinated, did you drink?

NONE

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

ID NUMBER:									
------------	--	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion

		SEQ #		
--	--	-------	--	--

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

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

NONE

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

106. How often did you add **sugar** or **honey** to your coffee or tea?

NEVER

Less than 1 time per month   
 1-3 times per month   
 1 time per week   
 2-4 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

107. How often did you add **artificial sweetener** to your coffee or tea?

NEVER

Less than 1 time per month   
 1-3 times per month   
 1 time per week   
 2-4 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

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

NEVER

Less than 1 time per month   
 1-3 times per month   
 1 time per week   
 2-4 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

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

NEVER

Less than 1 time per month   
 1-3 times per month   
 1 time per week   
 2-4 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



ID NUMBER:									
------------	--	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion

		SEQ #		
--	--	-------	--	--

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

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

NEVER

Less than 1 time per month   
 1-3 times per month   
 1 time per week   
 2-4 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

111. 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

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 **sour cream**?

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 **fresh cream**?

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 foods with **oils added** or with **oils used in cooking** (do not include baked goods or salads)?

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

ID NUMBER:								
---------------	--	--	--	--	--	--	--	--

FORM CODE: FPE  
VERSION: B 5/4/10

Contact Occasion		
---------------------	--	--

SEQ #		
-------	--	--

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

115. What kind of **oils** did you **usually eat**? (*Mark all that apply.*)

- Olive
- Corn
- Canola/rapeseed
- Other