

Appendix V.1 ITFPS-2 AMPM SCREEN SHOTS- English

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB number. The valid OMB control number for this information collection is 0584-XXXX. The time required to complete this information collection is estimated to average 10 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.

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

Forms Answer Navigate Options Help

Intake Sorted_RFL Navigation_Help

Jane (4 months, F) Yr10.s233.v1 OMB Approval No. 0584-XXXX
Approval Expires: XX/XX/20XX

First, we'll make a list of the foods Jane ate and drank yesterday, Monday. It may help you remember what she ate by thinking about where she was, who she was with, or what she was doing, like eating out, or watching television.

1. CONTINUE

RECQuickListOverview **CONTINUE**

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB number. The valid OMB control number for this information collection is 0584-XXXX. The time required to complete this information collection is estimated to average 10 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.

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Jane (4 months, F) Yr10.s233.v1

[ENTER COMMENTS, IF REPORTED.]

	Food Name	Comments for Interviewer's Use	Time	Occasion	Occasion, OS
Food[1]	Breast milk		7:00AM	8	
Food[2]	Baby food rice cereal		12:00PM	2	
Food[3]	Enfamil formula		12:00PM	2	
Food[4]	Baby food plums		7:00PM	3	
Food[5]	Baby food macaroni and cheese		7:00PM	3	
Food[6]	XXX				
Food[7]					
Food[8]					

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Jane (4 months, F), Yr10.s233.v1

First, we'll make a list of the foods Jane ate and drank yesterday, Monday. It may help you remember what she ate by thinking about where she was, who she was with, or what she was doing, like eating out, or watching television.

1. CONTINUE

RECQuickListOverview CONTINUE

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

Forms Answer Navigate Options Help

Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

Did Jane have anything between her 7:00 AM Breast milk and her 12:00 PM lunch?

1. YES
 2. NO

RECBetweenIntervalPro No
 RECLastOccToMidnt

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

Forms Answer Navigate Options Help

Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

Baby food rice cereal, 12:00 PM, lunch

Was it dry or jarred?

[NOTE: DRY CEREAL IS IN A POWDERED FORM AND NEEDS TO BE MIXED WITH SOMETHING PRIOR TO SERVING.]

1. Dry
 2. Jarred
 91. Other, Specify

FIBStart IncludeInIntake

SameAsInstruction

BabyCerType

BabyCerTypeOS

BabyCerKind RiceCereal

BabyCerKindOS

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Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

Baby food rice cereal, 12:00 PM, lunch

What liquid or food was mixed with the dry cereal? (Was it formula, baby food applesauce, baby food grape juice, or something else?)

[ENTER ALL THAT APPLY IN SEPARATE FIELDS.]
 [FOR ALL BRANDS OF FORMULA, SELECT "FORMULA", BRAND QUESTIONS WILL FOLLOW.]

	BabyCerMixedWith	BabyCerMixedWithOS
DBC015[1]	Breast milk	
DBC015[2]		
DBC015[3]		
DBC015[4]		
DBC015[5]		

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Jane (4 months, F), Yr10.s233.v1

Amount 1/4

Baby food rice cereal, 12:00 PM, lunch

How much breast milk was mixed with the cereal?

1. Teaspoon
 2. Tablespoon
 3. Cup
 4. Fluid ounce
 91. Other, Specify

Unit

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

Forms Answer Navigate Options Help

Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

Amount 1/4

Baby food rice cereal, 12:00 PM, lunch

How much dry cereal was mixed in?

1. Teaspoon
 2. Tablespoon
 3. Cup
 4. Weight ounce
 91. Other, Specify

Unit

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

Forms Answer Navigate Options Help

Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

Baby food rice cereal, 12:00 PM, lunch

How much of this prepared rice cereal did Jane actually eat?

Amount

Unit

1. Teaspoon
 2. Tablespoon
 3. Cup
 4. Amount made
 91. Other, Specify

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

Forms Answer Navigate Options Help

Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

Did you get (this/most of the ingredients for this) Baby food rice cereal from the store?

[THIS QUESTION MUST BE ANSWERED BEFORE PROCEEDING WITH ANY OTHER ACTION IN THE INTAKE.]

1. YES
 2. NO

Label	Baby food rice cerea	Label	Enfamil formula
RECFIBDetailAddsAmts	<input type="text" value="1"/> Continue	RECFIBDetailAddsAmts	<input type="checkbox"/>
RECSOURCEStore	<input type="checkbox"/>	RECSOURCEStore	<input type="checkbox"/>
RECSOURCEOther		RECSOURCEOther	
RECSOURCEOS		RECSOURCEOS	
RECFish		RECFish	
RECFishOS		RECFishOS	
RECRestaurantKind		RECRestaurantKind	

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Jane (4 months, F), Yr10.s233.v1

Enfamil formula, 12:00 PM, lunch

What was the brand name or variety? (Was it Enfamil LIPIL, Similac Advance, LactoFree LIPIL, or something else?)

FIBStart 1 IncludeInIntake FormulaPrep

SameAsInstruction

FormulaBrand

FormulaBrandOS

FormulaCarnationKind

FormulaCarnationKindOS

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Jane (4 months, F), Yr10.s233.v1

Enfamil formula, 12:00 PM, lunch

Was it with iron, low iron, or something else?

[NOTE: Without iron = Low iron.]

1. Iron

2. Iron fortified

3. Low iron

91. Other, Specify

FormulaBrand

FormulaBrandOS

FormulaCarnationKind

FormulaCarnationKindOS

FormulaMilkSoyBase

FormulaIron

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Jane (4 months, F), Yr10.s233.v1

Enfamil formula, 12:00 PM, lunch

Was it ready-to-feed, liquid concentrate, powder, or something else?

1. Liquid Concentrate
 2. Powder
 3. Ready-to-feed
 91. Other, Specify

FormulaCarnationKind
 FormulaCarnationKind0
 FormulaMilkSoyBase
 FormulaIron 1 Iron
 FormulaIronOS
 FormulaForm 3

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Jane (4 months, F), Yr10.s233.v1

Enfamil formula, 12:00 PM, lunch

Was cereal or any other food mixed with the formula?

1. Yes
 2. No

FormulaMixedWith 2

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Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

Amount

Enfamil formula, 12:00 PM, lunch

How much formula did Jane actually drink?

1. Teaspoon
 2. Tablespoon
 3. Cup
 4. Fluid ounce
 5. Portion drank of bottle
 91. Other, Specify

Unit

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

Forms Answer Navigate Options Help

Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

Did you get (this/most of the ingredients for this) Enfamil formula from the store?

[THIS QUESTION MUST BE ANSWERED BEFORE PROCEEDING WITH ANY OTHER ACTION IN THE INTAKE.]

1. YES
 2. NO

Label	Baby food rice cereal	Label	Enfamil formula
RECFIBDetailAddsAmts	<input type="text" value="1"/> Continue	RECFIBDetailAddsAmts	<input type="text" value="1"/> Continue
RECSourceStore	<input type="text" value="1"/> Yes	RECSourceStore	<input type="text" value="1"/>
RECSourceOther		RECSourceOther	
RECSourceOS		RECSourceOS	
RECFish		RECFish	
RECFishOS		RECFishOS	
RECRestaurantKind		RECRestaurantKind	

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Forms Answer Navigate Options Help

Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

For lunch Jane had
 Baby food rice cereal.
 Enfamil formula.
 Did Jane eat or drink anything else?

1. YES
 2. NO

RECRReviewOfEvent

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

Forms Answer Navigate Options Help

Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

Did Jane (eat/drink) this lunch at your home?
 [IF SP REPORTS BEGINNING EATING EVENT IN ONE LOCATION, BUT CONTINUING IT ELSEWHERE, CODE PLACE EATING EVENT BEGAN.]

1. YES
 2. NO

RECEventLocation

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

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Jane (4 months, F), Yr10.s233.v1

Did Jane have anything between her 12:00 PM lunch and her 7:00 PM dinner?

1. YES
 2. NO

RECBetweenIntervalPro

RECLastOccToMidnt

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

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Jane (4 months, F), Yr10.s233.v1

Baby food plums, 7:00 PM, dinner

What was the brand name? Was it Gerber, Beech-Nut, Heinz or something else?

1. Beech-Nut
 2. Del Monte
 3. Earth's Best
 4. Gerber
 5. Heinz
 6. Nature's Goodness
 91. Other, Specify

FIBStart **IncludeInIntake**
 SameAsInstruction
 BabyFoodKind
 BabyFoodKindOS
 BabyFoodBrand
 BabyFoodBrandOS

BabyFoodHeinzOS
 BabyFoodOthBrand
 BabyFoodOthBrandOS
 BabyFoodMixedWith

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Forms Answer Navigate Options Help

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Jane (4 months, F), Yr10.s233.v1

Baby food plums, 7:00 PM, dinner

Was it First, Second, Third, Graduates, or something else?

1. First
 91. Other, Specify
 2. Second
 3. Third
 4. Graduates
 5. Tender Harvest
 6. Tropical Foods

SameAsInstruction
 BabyFoodKind Plums
 BabyFoodKindOS
 BabyFoodBrand 4 Gerber
 BabyFoodBrandOS
 BabyFoodGerber 1
 BabyFoodOthBrand
 BabyFoodOthBrandOS
 BabyFoodMixedWith

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

Forms Answer Navigate Options Help

Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

Baby food plums, 7:00 PM, dinner

Was anything added to the plums?

1. Yes
 2. No

SameAsInstruction
 BabyFoodKind Plums
 BabyFoodKindOS
 BabyFoodBrand 4 Gerber
 BabyFoodBrandOS
 BabyFoodGerber 1 First
 BabyFoodOthBrand
 BabyFoodOthBrandOS
 BabyFoodMixedWith

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Forms Answer Navigate Options Help

Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

Baby food plums, 7:00 PM, dinner

How much of this baby food did Jane actually eat?

Amount

Unit

1. Teaspoon
 2. Tablespoon
 3. Cup
 4. Weight ounce
 5. Gram
 6. Jar
 7. Microwavable tub
 8. B1
 9. B2
 10. B3
 11. B4
 12. B5
 13. M1
 14. M2
 15. M3
 16. M4
 17. M5
 18. M6
 19. M7
 20. M8
 21. M9
 91. Other, Specity

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

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Jane (4 months, F), Yr10.s233.v1

Did you get (this/most of the ingredients for this) Baby food plums from the store?

[THIS QUESTION MUST BE ANSWERED BEFORE PROCEEDING WITH ANY OTHER ACTION IN THE INTAKE.]

1. YES
 2. NO

Label	Baby food plums	Label	Baby food macaroni
RECFIBDetailAddsAmts	<input type="text" value="1"/> Continue	RECFIBDetailAddsAmts	<input type="text"/>
RECSOURCEStore	<input checked="" type="checkbox"/> Yes	RECSOURCEStore	<input type="checkbox"/>
RECSOURCEOther	<input type="checkbox"/>	RECSOURCEOther	<input type="checkbox"/>
RECSOURCEOS	<input type="checkbox"/>	RECSOURCEOS	<input type="checkbox"/>
RECFish	<input type="checkbox"/>	RECFish	<input type="checkbox"/>
RECFishOS	<input type="checkbox"/>	RECFishOS	<input type="checkbox"/>
RECRestaurantKind	<input type="checkbox"/>	RECRestaurantKind	<input type="checkbox"/>

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Jane (4 months, F), Yr10.s233.v1

Baby food macaroni and cheese, 7:00 PM, dinner

What was the brand name? Was it Gerber, Beech-Nut, Heinz or something else?

1. Beech-Nut 91. Other, Specify
 2. Del Monte
 3. Earth's Best
 4. Gerber
 5. Heinz
 6. Nature's Goodness

FIBStart **IncludeInIntake** BabyFoodHeinzOS
 SameAsInstruction BabyFoodOthBrand
 BabyFoodKind BabyFoodOthBrandOS
 BabyFoodKindOS BabyFoodMixedWith
 BabyFoodBrand
 BabyFoodBrandOS

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

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Jane (4 months, F), Yr10.s233.v1

Baby food macaroni and cheese, 7:00 PM, dinner

Was it Baby's First, Stage 1, Stage 2, Stage 3, Table Time, or something else?

1. Baby's First
 2. Stage 1
 3. Stage 2
 4. Stage 3
 5. Table Time
 91. Other, Specify

BabyFoodKindOS BabyFoodMixedWith **No**
 BabyFoodBrand **BeechNut**
 BabyFoodBrandOS
 BabyFoodGerber
 BabyFoodGerberOS
 BabyFoodBeechNut **BabysFirst**

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

Forms Answer Navigate Options Help

Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

Baby food macaroni and cheese, 7:00 PM, dinner

Was anything added to the macaroni and cheese?

1. Yes
 2. No

BabyFoodKindOS **BeechNut** **BabyFoodMixedWith**
 BabyFoodBrand **BeechNut**
 BabyFoodBrandOS **BeechNut**
 BabyFoodGerber **BeechNut**
 BabyFoodGerberOS **BeechNut**
 BabyFoodBeechNut **BeechNut**

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Forms Answer Navigate Options Help

Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

Baby food macaroni and cheese, 7:00 PM, dinner

How much of this baby food did Jane actually eat?

Amount

Unit

1. Teaspoon
 2. Tablespoon
 3. Cup
 4. Weight ounce
 5. Gram
 6. Jar
 7. Microwavable tub
 8. B1
 9. B2
 10. B3
 11. B4
 12. B5
 13. M1
 14. M2
 15. M3
 16. M4
 17. M5
 18. M6
 19. M7
 20. M8
 21. M9
 91. Other, Specify

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

Forms Answer Navigate Options Help

Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

Did you get (this/most of the ingredients for this) Baby food macaroni and cheese from the store?

[THIS QUESTION MUST BE ANSWERED BEFORE PROCEEDING WITH ANY OTHER ACTION IN THE INTAKE.]

1. YES
 2. NO

Label	Baby food plums	Label	Baby food macaroni
RECFIBDetailAddsAmts	1 Continue	RECFIBDetailAddsAmts	1 Continue
RECSOURCEStore	1 Yes	RECSOURCEStore	1
RECSOURCEOther		RECSOURCEOther	
RECSOURCEOS		RECSOURCEOS	
RECFish		RECFish	
RECFishOS		RECFishOS	
RECRestaurantKind		RECRestaurantKind	

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

Forms Answer Navigate Options Help

Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

For dinner Jane had
Baby food plums,
Baby food macaroni and cheese.
Did Jane eat or drink anything else?

1. YES
 2. NO

RECRReviewOfEvent

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

Forms Answer Navigate Options Help

Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

Did Jane (eat/drink) this dinner at your home?

[IF SP REPORTS BEGINNING EATING EVENT IN ONE LOCATION, BUT CONTINUING IT ELSEWHERE, CODE PLACE EATING EVENT BEGAN.]

1. YES
 2. NO

RECEventLocation

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

Forms Answer Navigate Options Help

Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

Did Jane have anything to eat or drink between her 7:00 PM dinner and midnight last night?

1. YES
 2. NO

RECBetweenIntervalPro
RECLastOccToMidnt

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

Forms Answer Navigate Options Help

Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

Do you remember anything else Jane drank, including water, or that she ate yesterday - even small amounts, anything she ate in the car, or while shopping, cooking or cleaning up?

[IF SIPS OR SMALL AMOUNTS OF WATER ARE REPORTED, ASK SP TO ESTIMATE THESE AMOUNTS TOGETHER AND RECORD AS EXTENDED CONSUMPTION.]

1. YES
 2. NO

RECEventLocation RECFinalReviewQuestio

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Forms Answer Navigate Options Help

Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

Was the amount of food that Jane ate yesterday much more than usual, usual, or much less than usual?

1. MUCH MORE THAN USUAL
 2. USUAL
 3. MUCH LESS THAN USUAL

RECUusualAmount 2

RECTapWtrSource

RECTapWtrSourceOS

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Jane (4 months, F), Yr10.s233.v1

When Jane drinks tap water, what is the main source of the tap water. Is it the city water supply (community water supply); a well or rain cistern; a spring; or something else?

[RECORD Drinking fountain AS CITY WATER SUPPLY.]

1. COMMUNITY WATER SUPPLY
 2. WELL OR RAIN CISTERN
 3. SPRING
 4. NEVER DRINK TAP WATER
 91. OTHER, SPECIFY

RECUusualAmount 2 Usual

RECTapWtrSource 1

RECTapWtrSource05

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Forms Answer Navigate Options Help

Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

Now I'll be asking some questions about Jane's use of table salt.

What type of salt does Jane usually add to her food at the table? Would you say it is ordinary or seasoned salt, lite salt, or a salt substitute?

1. ORDINARY, SEA, SEASONED, OR OTHER FLAVORED SALT
 2. LITE SALT
 3. SALT SUBSTITUTE
 4. NONE
 91. OTHER, SPECIFY

RECTypeTableSalt 4

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

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Intake Sorted_RFL Navigation_Help

Jane (4 months, F), Yr10.s233.v1

How often is ordinary salt or seasoned salt added in **cooking or preparing** foods in your household? Is it never, rarely, occasionally, or very often?

[THIS QUESTION APPLIES ONLY TO USE OF ORDINARY SALT OR SEASONED SALT AND NOI TO LITE SALT OR SALT SUBSTITUTES.]

1. NEVER
 2. RARELY
 3. OCCASIONALLY
 4. VERY OFTEN

RECTypeTableSaltOS RECEnd

RECFreqAddTableSalt

RECFreqAddSaltCookPr

RECSpecialDiet

RECSpecialDietType

RECSpecialDietTypeOS[

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Jane (4 months, F), Yr10.s233.v1

Is Jane **currently** on any kind of diet, either to lose weight or for some other health-related reason?

1. YES
 2. NO

RECTypeTableSaltOS RECEnd

RECFreqAddTableSalt

RECFreqAddSaltCookPr Never

RECSpecialDiet

RECSpecialDietType

RECSpecialDietTypeOS[

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

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Jane (4 months, F), Yr10.s233.v1

What kind of diet is Jane on? (Is it a weight loss or low calorie diet; low fat or cholesterol diet; low salt or sodium diet; diabetic diet; or another type of diet?)

1. WEIGHT LOSS OR LOW CALORIE DIET 7. DIABETIC DIET
 2. LOW FAT OR CHOLESTEROL DIET 8. LOW CARBOHYDRATE DIET
 3. LOW SALT OR SODIUM DIET 9. HIGH PROTEIN DIET
 4. SUGAR FREE OR LOW SUGAR DIET 10. WEIGHT GAIN DIET
 5. LOW FIBER DIET 91. OTHER, SPECIFY
 6. HIGH FIBER DIET

RECTypeTableSaltOS RECEnd

RECFreqAddTableSalt

RECFreqAddSaltCookPr 1 **Never**

RECSpecialDiet 1 **Yes**

RECSpecialDietType

RECSpecialDietTypeOS[

Blaise 4.7 Data Entry - C:\AMPMSHELL\Intake\Intake

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Jane (4 months, F), Yr10.s233.v1

Now, I have just a few more questions.

1. CONTINUE

RECTypeTableSaltOS RECEnd

RECFreqAddTableSalt

RECFreqAddSaltCookPr 1 **Never**

RECSpecialDiet 1 **Yes**

RECSpecialDietType 7

RECSpecialDietTypeOS[