## 24-Hour Food Record

Name: $\qquad$
Date: $\qquad$
Please complete the following food record. The more accurate you are in recording, the more accurate your nutritional analysis will be.

## Instructions:

1. Please write down everything you eat and drink for one full day (from the time you wake up until the time you go to sleep). Try not to change your diet in any way. This day should represent your normal eating pattern. Do not pick an atypical day, such as a day you have a party, a holiday, weddings, etc.
2. Be as accurate as possible when recording amounts. Try to record your food intake as soon as you eat, otherwise it can be hard to remember at the end of the day. If you have mixed foods or casseroles, write down all the ingredients and amounts (salad: type of lettuce, croutons, vegetables, cheese, meat, dressing). Write down if foods are fresh, frozen, or canned and the brand name. For example, include specifics such as $1 / 2$ cup $1 \%$ milk, 8 oz . fat free Dannon yogurt, 12 oz . calcium fortified orange juice.
a) Enter only one food item per line
b) Use measuring spoons for items such as jelly and condiments.
c) Use measuring cups for items such as vegetables, pasta, rice and cereals.
d) Use ounces or dimensions for meat, cheese, pizza and desserts.
e) Use number and size (small, medium and large) for bread rolls, raw fruits, etc.
f) Use ounces or cups for beverages.
3. Record the date, time and place (home or restaurant) of every meal and snack, as well as the method of preparation (fried, baked, barbecued, grilled, etc.).
4. Feel free to bring in recipes or labels of unusual foods.
5. Please list dietary supplements (vitamins, minerals, etc.).

## Food Record Form

Name:
Date:

| Time | Food or Beverage | Amount | Preparation |
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| Time | Food or Beverage | Amount | Preparation |
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