

Please Fill in the Following Details:

Child's Name: ..... Surname:.....

Mother's Name: ..... Surname: .....

Child's Date of Birth: .....  
(DD/MM/YYYY)

Please Select (✓) the Group Your Child is in:

EARLY Introduction       STANDARD Introduction

## 5 Day Food Record for Online Submission – Pilot (3 YEARS)



### Guidance for Completing the 5 Day Food Record Aide

Please record **all food and drink consumed** (actually eaten, not just offered! ☺). Include snacks, drinks and anything added like sauces, butter, oil, or any type of milk. Please aim to complete 5 consecutive days (3 week days & 2 weekend days) as soon as possible (you do not need to wait until your child's 3rd birthday).

In **all** cases, please indicate food portion sizes in weight (e.g. 6 oz, 100ml, 40g), household measurements (e.g. 2 tablespoons, 1½ teaspoons), or by fractions (e.g. 1/2 small pear or 1 biscuit).

For commercial foods/drinks, record the brand and product name e.g. McVitie's Digestives, Shreddies, Yoplait petit filous etc. Please also include any prescribed nutritional foods/drinks or toddler milks your child may be taking e.g. Neocate Active, Paediasure, supermarket brand toddler milk).

If you are continuing to breastfeed your child please record these sessions down. Write 'No food taken' if your child doesn't eat anything during certain meal/snack times.

**At the end of each record day, please enter all the foods/ drinks consumed that day as soon as possible onto the ONLINE FOOD DIARY web program (either that night or the following day).** After you have entered your child's intake onto the Online Food Diary web program for 5 days, please send this completed food record aide back to us [in an A5 (half of A4) or smaller envelope]:

**FREEPOST RSGL-ZBUE-YSYL**  
**The EAT Study**  
**Children's Allergy Dept (South Wing)**  
**St Thomas's Hospital**  
**249 Westminster Bridge Road**  
**LONDON SE1 7EH**

**FOOD RECORD– DAY 1**

DATE: ..... (DD/MM/YY)  
 CHILD'S INITIALS: .....(FIRST, LAST)

Meal Time	Record All Food/Drinks Consumed (include details of brand names, cooking methods and additions)	Quantity Eaten
<b>Breakfast</b> <i>Food(s)</i>  <i>Drink(s)</i>		
<b>Mid-Morning</b>		
<b>Lunch</b> <i>Food(s)</i>  <i>Drink(s)</i>		
<b>Mid-Afternoon</b>		
<b>Dinner</b> <i>Food(s)</i>  <i>Drink(s)</i>		
<b>Evening and/or Bedtime</b>		

IF POSSIBLE: ENTER THIS DAY'S INTAKE ONTO THE ONLINE FOOD DIARY WEB PROGRAM BEFORE PROCEEDING.

DATE ENTERED ONLINE: \_\_\_\_\_

**FOOD RECORD– DAY 2**

DATE: ..... (DD/MM/YY)  
 CHILD'S INITIALS: .....(FIRST, LAST)

Meal Time	Record All Food/Drinks Consumed (include details of brand names, cooking methods and additions)	Quantity Eaten
<b>Breakfast</b> <i>Food(s)</i>  <i>Drink(s)</i>		
<b>Mid-Morning</b>		
<b>Lunch</b> <i>Food(s)</i>  <i>Drink(s)</i>		
<b>Mid-Afternoon</b>		
<b>Dinner</b> <i>Food(s)</i>  <i>Drink(s)</i>		
<b>Evening and/or Bedtime</b>		

IF POSSIBLE: ENTER THIS DAY'S INTAKE ONTO THE ONLINE FOOD DIARY WEB PROGRAM BEFORE PROCEEDING.

DATE ENTERED ONLINE: \_\_\_\_\_

### FOOD RECORD– DAY 3

DATE: ..... (DD/MM/YY)  
CHILD'S INITIALS: .....(FIRST, LAST)

Meal Time	Record All Food/Drinks Consumed (include details of brand names, cooking methods and additions)	Quantity Eaten
<b>Breakfast</b> <i>Food(s)</i>  <i>Drink(s)</i>		
<b>Mid-Morning</b>		
<b>Lunch</b> <i>Food(s)</i>  <i>Drink(s)</i>		
<b>Mid-Afternoon</b>		
<b>Dinner</b> <i>Food(s)</i>  <i>Drink(s)</i>		
<b>Evening and/or Bedtime</b>		
IF POSSIBLE: ENTER THIS DAY'S INTAKE ONTO THE ONLINE FOOD DIARY WEB PROGRAM BEFORE PROCEEDING.		

DATE ENTERED ONLINE: \_\_\_\_\_

### FOOD RECORD– DAY 4

DATE: ..... (DD/MM/YY)

Meal Time	Record All Food/Drinks Consumed (include details of brand names, cooking methods and additions)	Quantity Eaten
<b>Breakfast</b> <i>Food(s)</i>  <i>Drink(s)</i>		
<b>Mid-Morning</b>		
<b>Lunch</b> <i>Food(s)</i>  <i>Drink(s)</i>		
<b>Mid-Afternoon</b>		
<b>Dinner</b> <i>Food(s)</i>  <i>Drink(s)</i>		
<b>Evening and/or Bedtime</b>		
IF POSSIBLE: ENTER THIS DAY'S INTAKE ONTO THE ONLINE FOOD DIARY WEB PROGRAM BEFORE PROCEEDING.		

DATE ENTERED ONLINE: \_\_\_\_\_

# FOOD RECORD– DAY 5

DATE: ..... (DD/MM/YY)  
 CHILD'S INITIALS: .....(FIRST, LAST)

Meal Time	Record All Food/Drinks Consumed (include details of brand names, cooking methods and additions)	Quantity Eaten
<b>Breakfast</b> <i>Food(s)</i>  <i>Drink(s)</i>		
<b>Mid-Morning</b>		
<b>Lunch</b> <i>Food(s)</i>  <i>Drink(s)</i>		
<b>Mid-Afternoon</b>		
<b>Dinner</b> <i>Food(s)</i>  <i>Drink(s)</i>		
<b>Evening and/or Bedtime</b>		
<b>IF POSSIBLE: ENTER THIS DAY'S INTAKE ONTO THE ONLINE FOOD DIARY WEB PROGRAM BEFORE PROCEEDING.</b>		

## PILOT FEEDBACK

Circle your response to these statements below:

**The Online Food Diary web program was easy to complete:**  
 Strongly Disagree 1 2 3 4 5 6 7 8 9 10 Strongly Agree

**I had no trouble finding time to enter my child's intake onto the Online Food Diary web program at the end of each day:**  
 Strongly Disagree 1 2 3 4 5 6 7 8 9 10 Strongly Agree

**The Online Food Diary web program was easy to navigate:**  
 Strongly Disagree 1 2 3 4 5 6 7 8 9 10 Strongly Agree

**How long did it take you (on average) to complete one day of your child's intake on the Online Food Diary web program?**  
 10 – 15 min       20 – 25 min       30 - 35 min  
 40– 45 min       more than 50 min

### Additional Comments

Please use the space below to tell us any further information that you feel is relevant to this food record/Online Food Diary web program:

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**If you have questions concerning the completion of this food diary, please contact the EAT Study Team:**  
 0800 358 0021 or  
 eatstudy@gstt.nhs.uk

**THANK YOU FOR YOUR ASSISTANCE!**

## FREEPOST ADDRESS LABELS (To Cut and Paste)

Please send this completed 5 day food record aide back to us after you have entered all the foods/drinks consumed each day onto the Online Food Diary web program. Fold the food diary in half and send it to us in an A5 (half of A4) or smaller envelope to the free post address below:

For your convenience we have provided these printed labels that you can simply cut and paste onto the envelope.

FREEPOST RSGL-ZBUE-YSYL  
The EAT Study  
Children's Allergy Dept (South Wing)  
St Thomas's Hospital  
249 Westminster Bridge Road  
LONDON  
SE1 7EH



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