Name_____

Instructions for 3 Day Diet Analysis for Nutrition 219

1. Keep a record of everything you eat and drink for 3 days. Be specific. Was it white or wheat bread, 1% or 2% milk, 1 cup or 1½ cups, did you fry it in oil or bake it. If it is a combination food and you cannot find it on the food lists, break it down, ie, a ham and cheese sandwich would be 2 slices of bread, 2 ounces of ham, 1 ounce of cheese, 1 tablespoon of mayonnaise**. Do not include vitamin pills in your analysis**. Use one copy of the 3 Day Food Record Intake Form for each day's food intake

2. When you have completed your records for all three days, begin entering the foods and beverages you have consumed into the Diet Analysis Plus program. Begin by creating a **"New Profile"** and inputting your personal information, and then you can start entering your food intake data. Be sure to spell correctly so the computer search can find your entry. There is a tutorial included with your computer program which will help you to complete your diet analysis using the software.

3. After you enter your data for all 3 days, print your reports following the directions below.
4. Now, using your reports, answer all the questions in the following pages. Follow the directions below for printing and organizing your project.

After you have entered your data for all 3 days, <u>you must print and turn in the following reports (as well as the answered questions):</u>

Using Diet Analysis 10.0

1. Select "Reports" from the top of the page
2. Select "3 Day Average" under Advanced
3. Record the days of your 3 Day Intake.
4. Select: "Print Report"; your report will load
5. Print
6. Please put the Diet Analysis Reports in the order as in # 6 below

Using Diet Analysis 9.0

1. Select "Print Reports" from the top of the page
2. Select "3 Day Average Reports"
3. Select the days of your recorded intake from the calendar.
4. Select: "Print 3 Day Average"; your report will load
5. Click on the "File" tab at the top left of your screen and select "print"
6. Please put the Diet Analysis Reports in the following order:
    a. Profile DRI Goals
    b. Energy Nutrient and DRI Goal Ranges Compared/ Macronutrient Ranges Bar Graph
    c. Fat as a Percentage of Total Calories/ Fat Breakdown
    d. Intake and DRI Goals Compared
    e. My Plate Analysis
    f. Energy Balance
    g. Complete Intake Spreadsheets- One for each of your 3 days
7. **Now answer all the questions in the following pages using the above reports**.
8. **Please staple together (or place in a folder):**
    a. The answered questions that follow
    b. The Diet Analysis Reports (in the order listed above)
    c. Your 3 Day Record Intakes sheets
9. The Reports section of the project is worth 20 points; the questions are worth 80 points, for a total of 100 points.

3 Day Food Record Intake Sheets

Keep a record of everything you eat and drink for 3 days. Be specific. Was it white or wheat bread, 1% or 2% milk, 1 cup or 1½ cups, did you fry it in oil or bake it. If it is a combination food that you are unable to find in the Diet Analysis software, you may need to break it down, ie, a ham and cheese sandwich would be 2 slices of bread, 2 ounces of ham, 1 ounce of cheese, 1 tablespoon of mayonnaise**. Do not include vitamin pills or supplements in your analysis**.

Day 1 Date: _____

Amount consumed	**Description of food or ingredient**	**How prepared**
Ex: 1 ½ cups	Honey-nut cheerios	No preparation

Day 2 Date: _____

Amount consumed	**Description of food or ingredient**	**How prepared**
Ex: 1 ½ cups	Honey-nut cheerios	No preparation

Day 3 Date: _____

Amount consumed	**Description of food or ingredient**	**How prepared**
Ex: 1 ½ cups	Honey-nut cheerios	No preparation

SELF STUDY 1: EVALUATE YOUR CARBOHYDRATE INTAKE

Take a look at your report. Your 3 days of intake are averaged for you and the results are the Intake vs Goals Report. Questions that refer to your "average daily intake" should be based on the number listed under "**Intake**" on your **Intake vs Goals** Report in the first category under "**Energy**". (in Diet Analysis 9, this is referred to as "Intake and DRI Goals Compared")

1. What is your average daily intake for carbohydrate? _____ This number is listed under "Intake" on the "Intake vs Goals" report under the category of "Energy". (This report is called Intake and DRI Goals Compared on Diet Analysis 9)

2. How many kcalories does this represent? _____
(1 gram of carbohydrate contributes 4 kcalories, so multiply your grams of carbohydrate by 4.)

3. What percent of your total kcalorie intake is contributed by carbohydrate?
_____ (This is on the **Macronutrient Ranges bar graph**. On Diet Analysis 9, it is called Energy Nutrient Intake and DRI Goal Ranges Compared which is in the small box on its own page)

4. The recommendation for carbohydrate is that 45-65% of your daily kcalories should come from carbohydrate. Based on your answer in number 3, is your carbohydrate range within that 45-65% range? Yes or No _____

5. From the list below, circle the whole grains that you consumed during the 3 days that you recorded.

Whole Grains
Whole wheat bread oatmeal cracked wheat bread whole cornmeal bulgur
buckwheat whole grain pasta popcorn brown rice wild rice
whole wheat couscous graham flour rye All bran

Cold Cereal
Cheerios Granola or Muesli Grape-nuts Nutri-grain Raisin Bran Bran flakes Mini Wheats
Shredded Wheat Total Wheaties Wheat Chex Wheat germ Kashi Go Lean

Hot Cereal
Oat bran Oatmeal Quaker Multigrain Ralston High Fiber Wheatena

Other whole grain _____

If you did not eat any whole grains, list 3 whole grains which you could include in your diet
_____, _____, _____

6. What is your DRI recommendation for fiber? _____

7. How many grams of fiber did you consume on an average day? _____
(This is on your Intake vs Goals report under Carbohydrate)

8. Compare your intake with your DRI recommendation for fiber.
How many grams of fiber were you over or under your DRI recommendation?
_____grams over or under (circle one)

SELF STUDY 1: EVALUATE YOUR CARBOHYDRATE INTAKE (continued)
Continue to evaluate your fiber intake.

9. a. **If you consumed less than your DRI**, list specifically what foods you could include in your diet to make up the difference and meet your DRI for fiber.

b. List how many grams of fiber each of your suggestions will add. For example, if you only ate 15 grams, you need to add 10 grams to make up the difference. An example might be: 1 cup of raspberries-8 grams, 2 cups of popcorn-2 grams. Make sure you list foods you would actually eat **(and don't use my examples).**

Food	Amount	Grams
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Grams Fiber _____ you need to eat to meet your DRI. How might a low fiber diet impact your health? _____
_____

9c. If you consumed your DRI of fiber or more, great job!
Now review all 3 days of your spreadsheets, circle the top 3 foods highest in fiber you consumed over the 3 days, and list them here and the amount of fiber in each food item.

Food_____ _____ Grams
Food_____ _____ Grams
Food_____ _____ Grams

How might a high fiber diet benefit your health? _____
_____

10. Another dietary goal is that no more than 10% of your total kcalories should come from refined and other processed sugars and foods high in added sugars. To assess your intake against this standard, **review your 3 day intake and identify and circle the foods high in processed (simple) sugar and list them below.**

Include: Foods containing mostly concentrated simple carbohydrates such as sugar, candy, cookies, cakes, pie, doughnuts, pastry, soda pop, sweetened beverages, lemonade, sweetened or flavored iced tea, ice cream, honey, molasses, syrup, jam, jelly, and high sugar cereals (cereals with more than 10 grams of sugar per serving). **Do not list milk, fruit, natural juices; just list foods containing processed sugars.**

_____
_____
_____

11. What other food choices could you substitute for your high sugar foods to lower your sugar intake?

_____

SELF-STUDY 2: FAT

1. What is your average daily intake for **total** grams of fat? _____(This is under **Intake, under the category of Energy,** on your **Intake vs Goals** report in DA 10, which is called **Intake and DRI Goals Compared in DA 9; DO NOT USE THE SATURATED FAT NUMBER)**

2. How many kcalories does this represent? (Remember, 1 gram of fat contributes 9 kcalories per gram) _____

3. What percent of your total kcalorie intake is contributed by fat? _____
(This is on the Macronutrient Ranges bar graph in DA 10; In Diet Analysis 9, it is called Energy Nutrient Intake and DRI Goal Ranges Compared.)
The recommendation for fat intake is that no more that 20-35% of your daily kcalories should come from fat. Did you consume more than 35% of your intake from fat based on your answer above?_____(yes or no)

4. Review your **Fat Breakdown** report. (called **Fat as Percentage of Total Calories** in DA 9)
What percent of your fat intake is saturated fat? _____ Is it more than 10% of your total kcalories? _____(yes or no)

5. Regardless of your saturated fat intake, look over your food records; what specific foods could you cut down on or eliminate to decrease your saturated fat intake?
_____
What "heart healthier" foods could you replace them with?
_____
How might a diet high in saturated fat affect your health?
_____

6. How much essential fatty acid do you consume? Refer to your Intake vs Goals report under "Essential Fatty Acids". The percentage number is the number to the right of the yellow bar graph.

Omega-6 Linoleic _____grams What % of your DRI did you meet? _____
Omega-3 Linolenic_____ grams What % of your DRI did you meet? _____
If you did not meet your DRI goal (if your intake was less than 80%) for either of the above, what foods could you add to your diet to meet your needs for essential fatty acid?
_____

7. What is your average daily intake for cholesterol? _____ grams

8. If your intake is over 300 mg, what foods could you cut down on or eliminate to bring your cholesterol intake within suggested limits?
_____

If your intake is less than 300 mg, list the top 2 foods highest in cholesterol you consumed over the 3 days. _____

SELF-STUDY 3: PROTEIN

1. What is your average daily intake in grams for protein? _____
(Refer to your **Intake vs Goals** report, called **Intake and DRI Goals Compared in DA 9**)

2. How many kcalories does this represent? (Remember, 1 gram of protein contributes 4 kcalories.) _____

3. What percent of your total kcalorie intake is contributed by protein? _____
(This is on the Macronutrient Ranges bar graph, called Energy Nutrient Intake and DRI Goal Ranges Compared on DA 9)

4. Was your protein intake in the range of the recommendation that 10-35% of your total kcalorie intake should come from protein? _____(yes or no).
If your protein intake is above or below the recommended 10-35%, what foods could you consume more of—or less of—to help it meet the recommendation?
_____

5. Now calculate your RDA for grams of protein. (See page 193 of your text). Start by dividing your weight in pounds by 2.2 to determine your weight in kilograms- _____kg. Then multiply your weight in kilograms by 0.8. _____ grams. This number represents your protein RDA.

6. What percent of your DRI did you consume? _____(This number is the one to the right of the yellow arrow or bar on your **Intake vs Goals** report)

SELF STUDY 4: Evaluate Your Health Risk

What weight is appropriate for you? When physical health alone is considered, a wide range of weights is acceptable for a person of a given height. Within the safe range, the choice of a weight is up to the individual.

1. Determine whether your current weight is appropriate for your height.
Height: _____ in (or cm) Weight: _____lb (or kg)

2. Locate your BMI on the chart and record it. _____

3. Circle your BMI Category:

Underweight Healthy weight Overweight Obese

4. Does your body weight fit in the healthy weight range? _____(yes or no)

SELF STUDY 4: Evaluate Your Health Risk (cont)

If you are underweight according to the table on the inside back cover of the text and your BMI is below 19, you may need to gain weight for your health's sake. If your weight is over the acceptable weight range your BMI value may be associated with an increased risk of disease.

5. The distribution of body fat may be more critical than the amount of fat alone. Determine whether your fat distribution is associated with health risks.

- Record your waist measurement: _____ in (or cm)

Women with a circumference of greater than 35 inches and men with a circumference of greater than 42 inches are at a high risk for obesity-related health problems, regardless of your BMI.

6. Other risk factors for chronic disease: Circle your response.

- Do you have a personal or family history of heart disease Yes/No
- Are you a male older than 45 or a postmenopausal female Yes/No
- Do you smoke cigarettes? Yes/No
- Do you have a sedentary lifestyle? Yes/No
- Have you been diagnosed with high blood pressure Yes/No
- Abnormal blood lipid profile Yes/No
- Do you have diabetes? Yes/No

The higher your BMI and waist measurement, coupled with multiple risk factors, the more likely your overall health will benefit from weight loss.

6. Look at your **Intake vs Goals Report** for ***kcalories*** under the **Energy** category**.** What percent of your DRI for kcalories did you consume? _____
Did you **exceed** your estimated daily intake for kcalories or were you **below** your estimated daily calorie intake? **Circle one:** exceed below

8. If your kcalorie intake was 120% of your DRI, what effect could your eating habits have **on your weight** over several months, or years, if you continued to **overeat** more than the recommended calorie level?

_____

If your kcalorie intake was 80% or less of your DRI, what effect could your eating habits have **on your weight** over several months, or years, if you continued to eat **less** than the recommended calorie level?

_____

9. List your usual physical activities, sports and exercise, minutes per day and times per week._____
If you are not physically active, how could you incorporate physical activity into your daily life? _____

SELF STUDY 5: VITAMINS

Review your average daily percent of your vitamin goals compared to your DRI. This is the number to the **right of the yellow bar graph on your Intake vs. Goals Report**. In the table below, note the following:

1. Column 1: list the **percentage** of your recommended intake that you consumed for the vitamins and minerals from your Intake vs. Goals Report. (This is the number to the right of the yellow bar or arrow; **Do not list the DRI number**)

2. Column 2: if your intake was less than 80% for any of the nutrients, list 3 specific foods rich in that nutrient you would consume to include more of this nutrient in your diet. List foods not included on your 3 Day Food Record.

Nutrient	**Percent of your DRI** **(1 pt each)**	**For those nutrients less than 80%, list 3 specific foods rich in the nutrient you would consume to include more of this nutrient in your diet.** **(1 pt each)**
Thiamin		
Riboflavin		
Niacin		
Vitamin B6		
Vitamin B12		
Folate		
Vitamin C		
Vitamin D		
Vitamin A (RAE)		
Vitamin E (alpha-tocopherol)		

SELF STUDY 6: MINERALS

Review your average daily percent of your mineral goals compared to your DRI. This is the number to the right of the yellow bar graph on your Intake vs. Goals Report. In the table below, note the following:

1.a. Column 1: list the **percentage** of your recommended intake that you consumed for the vitamins and minerals from your Intake vs. Goals Report. (This is the number to the right of the yellow bar or arrow; **Do not list the DRI number**)

1.b. Column 2: if your intake was less than 80% for any of the nutrients, list 3 specific foods rich in that nutrient you would consume to include more of this nutrient in your diet. List foods not included on your 3 Day Food Record.

Nutrient	**Percent of your DRI** **(1 pt each)**	**For those nutrients less than 80%, list 3 specific foods rich in the nutrient you would consume to include more of this nutrient in your diet.** **(1 pt each)**
Calcium		
Iron		
Magnesium		
Potassium		
Zinc		

2. Compare your average intake with your DRI for **sodium**. What **percent** of your recommended intake of sodium did you consume? _____

3. Review your food records and **circle the top 3 foods highest in sodium over the past 3 days**.

List them here and the milligrams of sodium in each:

Food_____ _____mg
Food_____ _____mg
Food_____ _____mg

In what ways could you change your diet to decrease your sodium intake if you consumed more than 200% of your goal? (What could you consume less of to decrease your sodium intake?

_____
_____

Overall Review

1. How do your current food habits impact your overall nutrient intake?

_____

_____

_____

2. How might your habits affect your overall health and potential for chronic disease?

_____

_____

_____

3. Do you currently take a vitamin or mineral supplement? _____
After completing the vitamin/mineral exercise on the previous page, do you feel you could benefit from a supplement? _____
_____

4. Have you made any changes in your diet or lifestyle since taking this class to improve your nutrition intake and what are they?

_____

_____

_____

If you have not made any changes, list 3 changes you could make to improve your overall nutrition and health status? _____
_____

_____

5. What were you most surprised about regarding your intake after completing this assignment?

_____

_____

_____