

Nottingham Children's Hospital

Children's Dietitians

The Department of Dietetics and Nutrition
Queen's Medical Centre Campus
Derby Road
Nottingham
NG7 2UH

Feedback

We appreciate and encourage feedback. If you need advice or are concerned about any aspect of care or treatment please speak to a member of staff or contact the Patient Advice and Liaison Service (PALS):

Freephone (City Hospital Campus): 0800 052 1195

Freephone (QMC Campus): 0800 183 0204

From a mobile or abroad: 0115 924 9924 ext 65412 or 62301



Minicom: 0800 183 0204

E-mail: pals@nuh.nhs.uk

Letter: NUH NHS Trust, c/o PALS, Freepost NEA 14614,
Nottingham NG7 1BR

www.nuh.nhs.uk

If you require a full list of references for this leaflet please email
patientinformation@nuh.nhs.uk or phone 0115 924 9924
ext. 67754.

The Trust endeavours to ensure that the information given here
is accurate and impartial.

Nottingham Children's Hospital

Food Diary Renal

Department of Dietetics and Nutrition

Name:

Date of birth:

Dietitian's name:

Please keep this diary for _____ days

This document can be provided in different languages and
formats. For more information please contact:

Nottingham Children's Hospital
Queen's Medical Centre Campus
D Floor, East Block

Children's Dietitian:

Contact number: (0115) 924 9924 Ext: 62066

Hints to help you complete this food diary

1. Please complete this food diary in as much detail as possible. Write down everything your child eats and drinks for the next few days. Include all meals, snacks and drinks.
2. Try to include **one weekend day**. It is important not to alter your child's eating habits, otherwise the results will be incorrect.
3. You do not have to weigh food but give a description of the food and drink taken. Try to give as much detail as possible using handy measures and abbreviations, e.g. -

Teaspoon	tsp	Pound	lb
Dessertspoon	dsp	Ounce	oz
Tablespoon	tbsp	Fluid ounce	fl oz
Millilitre	ml	Pint	pt
Gram	g		

Record weights from packets or bottles e.g. 200ml orange juice or 150g baked beans.

4. The brand names of manufactured foods should be stated, e.g. Heinz baked Beans or Kellogg's Cornflakes.
5. Please describe cooking method used e.g. fried, boiled, baked, microwaved, grilled.

Any other information

Any other information

6. Write down the approximate time of meal, drink or snack.
7. If any ready prepared or convenience foods are used, please note the nutritional content in the section provided or attach the labels to this food diary if possible. If you use home recipes please note the ingredients. (See page 8).

General Questions

Please tick the appropriate answer

1. What type of milk does your child drink?



Full Cream

11

Semi-skimmed

11

Skimmed

11

Channel Island

Other (please specify)

7

2.a What type of bread does your child eat?

Wholemeal

1

Brown

11

Granary

□

White

11

Other (please specify)

11

2b. What size slice?

Thin

Thick

11

Medium

□

Please state brand:

[illegible]

DAY _____

[illegible]

**3a. What type of spread does your child eat?
(please specify)**

Margarine

11

Butter

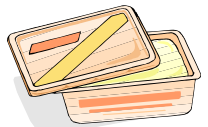
9

Low fat spread

5

Please state brand:

3b. What type of fat is used for cooking?



Lard

11

Sunflower oil

Butter

10

Olive oil

Vegetable oil

10

Rapeseed oil

Low fat spread

d 

Other (please specify)

7

3c. Do you add butter/margarine to vegetables?

Yes

10

No

10

3d. Do you add butter/margarine to mashed potatoes?

Yes

10

No

11

Yes ☐ No ☐

Yes ☐ No ☐

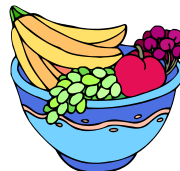
Yes ☐ No ☐

Yes ☐ No ☐

Yes ☐ No ☐

Yes ☐ No ☐

Yes ☐ No ☐

5

DAY _____

[illegible]

6c. Does your child take a packed lunch to school?

7

No

7

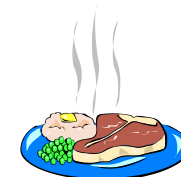
6d. Does your child have school dinners?

Yes

7

No

7



7. Does your child take any vitamins and/or mineral supplements?



Yes

7

No

7

If Yes, please specify type and daily dose

8. Is your child receiving any nutritional supplements in addition to his/her diet or nasogastric or gastrostomy feed?

Yes

7

No

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**If Yes, please specify type and the amount taken
per day**

9. How many of the following do you drink on a daily basis?

Drink	Amount	Number of cups per day
A) Tea/coffee		
How much milk is added?		
B) Squash		
Is it low calorie?		
How much squash do you use before diluting?		
C) Fizzy drinks (not low calorie)		
D) Low calorie drinks		
E) Natural fruit juice		
If you dilute the fruit juice, how much do you use before diluting?		
Malted drinks/ Hot chocolate		
G) Other (please specify) _____		

[illegible]

DAY _____

[illegible]

In the space below please include ingredients used for homemade meals, labels and nutritional information from ready meals.

No.	Name	Age	Sex	Occupation
1	John Doe	25	Male	Student
2	Jane Smith	30	Female	Teacher
3	Robert Johnson	45	Male	Engineer
4	Emily White	22	Female	Artist
5	Michael Brown	35	Male	Doctor
6	Sarah Davis	28	Female	Lawyer
7	David Wilson	50	Male	Businessman
8	Alice Miller	18	Female	Student
9	James Taylor	60	Male	Retired
10	Olivia Green	20	Female	Student
11	Benjamin Clark	33	Male	Software Engineer
12	Isabella Hall	27	Female	Marketing
13	Ethan King	40	Male	Manager
14	Ava Lee	24	Female	Designer
15	Noah Scott	38	Male	Analyst
16	Charlotte Adams	21	Female	Student
17	Liam Baker	55	Male	Teacher
18	Mia Campbell	29	Female	Writer
19	Lucas Evans	42	Male	Engineer
20	Grace Foster	19	Female	Student
21	Henry Garcia	65	Male	Retired
22	Chloe Hill	23	Female	Designer
23	Isaac King	37	Male	Manager
24	Harper Lee	26	Female	Marketing
25	Leo Scott	41	Male	Analyst
26	Amelia Taylor	20	Female	Student
27	Jack Wilson	58	Male	Teacher
28	Evelyn Young	31	Female	Writer
29	Samuel Adams	44	Male	Engineer
30	Madison Baker	22	Female	Student
31	William Clark	62	Male	Retired
32	Abigail Evans	25	Female	Designer
33	Benjamin Foster	39	Male	Manager
34	Emily Garcia	28	Female	Marketing
35	Michael Hill	43	Male	Analyst
36	Sophia King	17	Female	Student
37	David Lee	52	Male	Teacher
38	Olivia Scott	32	Female	Writer
39	James Taylor	46	Male	Engineer
40	Chloe Wilson	21	Female	Student
41	Isaac Young	36	Male	Manager
42	Harper Adams	27	Female	Marketing
43	Leo Baker	40	Male	Analyst
44	Amelia Clark	19	Female	Student
45	Jack Evans	59	Male	Teacher
46	Evelyn Foster	30	Female	Writer
47	Samuel Garcia	45	Male	Engineer
48	Madison Hill	23	Female	Student
49	William King	63	Male	Retired
50	Abigail Lee	26	Female	Designer
51	Benjamin Scott	38	Male	Manager
52	Emily Taylor	29	Female	Marketing
53	Michael Wilson	42	Male	Analyst
54	Sophia Young	18	Female	Student
55	David Adams	51	Male	Teacher
56	Olivia Baker	33	Female	Writer
57	James Clark	47	Male	Engineer
58	Chloe Evans	22	Female	Student
59	Isaac Foster	37	Male	Manager
60	Harper Garcia	28	Female	Marketing
61	Leo Hill	41	Male	Analyst
62	Amelia King	20	Female	Student
63	Jack Lee	58	Male	Teacher
64	Evelyn Scott	31	Female	Writer
65	Samuel Taylor	44	Male	Engineer
66	Madison Wilson	23	Female	Student
67	William Young	62	Male	Retired
68	Abigail Adams	25	Female	Designer
69	Benjamin Baker	39	Male	Manager
70	Emily Clark	28	Female	Marketing
71	Michael Evans	43	Male	Analyst
72	Sophia Foster	17	Female	Student
73	David Garcia	52	Male	Teacher
74	Olivia Hill	32	Female	Writer
75	James King	46	Male	Engineer
76	Chloe Lee	21	Female	Student
77	Isaac Scott	36	Male	Manager
78	Harper Taylor	27	Female	Marketing
79	Leo Wilson	40	Male	Analyst
80	Amelia Young	19	Female	Student
81	Jack Adams	59	Male	Teacher
82	Evelyn Baker	30	Female	Writer
83	Samuel Clark	45	Male	Engineer
84	Madison Evans	23	Female	Student
85	William Foster	63	Male	Retired
86	Abigail Garcia	26	Female	Designer
87	Benjamin Hill	38	Male	Manager
88	Emily King	29	Female	Marketing
89	Michael Lee	42	Male	Analyst
90	Sophia Scott	18	Female	Student
91	David Taylor	51	Male	Teacher
92	Olivia Wilson	33	Female	Writer
93	James Young	47	Male	Engineer
94	Chloe Adams	22	Female	Student
95	Isaac Baker	37	Male	Manager
96	Harper Clark	28	Female	Marketing
97	Leo Evans	41	Male	Analyst
98	Amelia Foster	20	Female	Student
99	Jack Garcia	58	Male	Teacher

Example

TIME	DESCRIPTION OF FOOD/DRINK (Including cooking method and brand name)	WEIGHT/AMOUNT OF FOOD	MEDICATION
8.00am	Porridge	1 small bowl	
	Milk (semi-skimmed)	$\frac{1}{2}$ mug full	
	Sugar	1 tsp	
	Wholemeal bread toast	2 medium slices	
	Sunflower margarine	Thickly spread	
	Orange juice	$\frac{1}{4}$ pt	
10.30am	Can of cola	1 x 330ml can	
	Chocolate digestive biscuit	2	
12.30pm	Savoury mince (homemade)	3 tbsp	
	Mashed potato	3 tbsp	
	Carrots (boiled)	2 tbsp	
	Ice cream (vanilla)	2 scoops	
	Orange squash	$\frac{1}{2}$ pt	
3.00pm	Crisps (cheese and onion)	1 packet	
	Orange squash	$\frac{1}{2}$ pt	
5.30pm	Chicken nuggets (grilled)	6	
	Mashed potato	3 tbsp	
	Peas (Boiled)	2 tbsp	
	Bakewell tart	1	
	Orange squash	$\frac{1}{2}$ pt	
7.00pm	Hot chocolate	1 mug full	