

24 Hour Food Recall

Name: _____ Date: _____

Instructions: Please write down **everything** you ate and drank (including all meals, snacks, drinks, “nibbles”, sweets, etc.) in the last 24 hours, from waking to sleeping. Be as detailed as possible regarding the amount, and types of food. If yesterday was not a typical day, please give an example of a typical day. For amounts, you can use abbreviations like: Tablespoon (tbsp), teaspoon (tsp), cup (c), ounce (oz), slice (sl), or piece (pc).

Example:

Approx. Time	Quantity or amount	Food and beverage description
8 am	2 sl 1 pc 1 tsp 1 dash 1/3 c 1 tbsp 1 tsp 1 pc	Sara Lee whole wheat bread Medium egg Canola oil Salt Lactose free 2% fat milk Sugar Regular instant coffee Medium apple

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