

APPLICATION FORM

Comparing different types of n-3 fatty acids (ALA vs EPA/DHA) on selected coronary heart disease risk factors in healthy adults A Vegetarian Feeding Study

Thank you for your interest in participation in the Nutrition Department Vegetarian Feeding Study. Please read the brief description of some of the study requirements given below to determine if you qualify!

Description

This study will be conducted from September 17, 2007 through May 16, 2008 and will consist of three 8-week feeding phases (Phase 1 – September 16, 2007 to November 16, 2007; Phase 2 – January 6, 2008 to February 29, 2008; Phase 3 – March 23, 2008 to May 16, 2008). Participants should be healthy and between the ages of 20 and 70 years. All participants will receive three free meals a day and **must be willing to come to Loma Linda University campus six days a week to consume dinner**. A “to-go” packed breakfast and lunch will also be provided. Participants must be willing to eat a lacto-ovo vegetarian diet that will include flaxseed oil and walnuts and a micro algae oil supplement, as well as eat only the meals provided by the study. On successful completion of the study all participants will receive a monetary incentive.

If you are still interested please fill out the application below. If you qualify, we will invite you to attend one of the group sessions in the month of September 2007 to give you a detailed description of the study protocol and to answer all your questions.

Application Questions

Thank you for taking the time to complete this application. After reading each question carefully, please either fill out or place a check in the appropriate box. When the application is complete, save it to your computer, then email it to nutstudies@llu.edu. This can be access through our webpage www.nutstudies.org. The document must be closed before you can attach it to an email. The application can also be faxed to 909-558-4095 or mailed to Loma Linda University, Department of Nutrition NH 1102, Loma Linda, CA 92350.

****Please be aware that all information obtained from this questionnaire is confidential.****

Name: _____
Last First Middle Initial

Address: _____
City Zip

Phones: _____
Home Work Mobile

Which number should we try 1st, 2nd, 3rd? _____
Home Work Mobile

What hours we can reach you at work? _____

Email address: _____

How often do you check this account? _____

1. What is your age? _____ 2. What is your gender? Male Female

3. What is your height? _____ 4. What is your weight? _____

5. Have you experienced any weight changes in the last year?
 No Yes Number of pounds gained _____ or lost _____

Over what period of time was the weight gained or lost? _____

6. Do you currently have any medical problems? (Ex: Diabetes, blood pressure)
 No Yes Please specify _____

7. Do you currently take any medications (prescription, over the counter)?
 No Yes List all over the counter and prescription medications taken last month

8. Do you currently take any vitamins or supplements?
 No Yes List all vitamins and supplements taken last month

9. Do you smoke or use tobacco products?
 No Yes Please specify amount smoked and or type of tobacco used.

10. How often do you drink alcohol (beer, wine, liquor)?
 Never
 Occasionally
 A few times per week
 Daily

11. What is your dietary pattern?
 Omnivore
 Lacto-ovo Vegetarian
 Vegan
 Other Please specify _____

12. Do you currently use flaxseed or flaxseed oil?
 No
 Yes
If yes, how often? <1/wk 1-3/wk >3/wk

13. Do you currently take micro algae oil supplement?

- No
 Yes

If yes, how much? _____ mg

14. How often do you engage in regular vigorous activities (brisk walking, jogging, bicycling, etc.) to work up a sweat?

- Never
 Occasionally
 A few times per week
 Daily

15. If you have had recent blood cholesterol or blood sugar levels taken, please list values here.

Total cholesterol _____ mg/dl LDL _____ mg/dl HDL _____ mg/dl
Triglyceride _____ mg/dl Glucose _____ mg/dl

16. How did you find out about the study?

- Newspaper
 Trading Post
 Flyer
 E-mail or Internet
 Other Please specify _____

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