

Peer Review Checklist

Part One

In the box under the minimum number of servings, record the number of servings from your Food Intake Record for each food group. Have your partner place a checkmark in the box if you have met the recommended servings for each food group.

Servings					
Grains, Bread, Pasta, Rice	Vegetables	Fruits	Meats	Dairy	Fats, Oils, Sweets (FOS)
Minimum 6	Minimum 3	Minimum 2	Minimum 2	Minimum 2	Minimum 6
Place a checkmark in the box if your partner meets the recommended servings					

Part Two

Record your nutrient intake in the column title "Yours" from the IHEI Nutrient Intake page. Have your partner place a checkmark in the column title "Minimum Requirements" if you met the minimum requirements.

Nutrient	Recommended	Yours	Minimum Requirements	Nutrient	Recommended	Yours	Minimum Requirements
Calories (kcal)	2200			Cholesterol (mg)	300 mg		
Protein (g)	50 g			Vitamin A (RE)	700 RE		
Carbohydrates (g)	300 g			Vitamin C (mg)	75 mg		
Dietary Fiber (g)	25 g			Calcium (mg)	1200 mg		
Total Fat (g)	No more than 30% of total calories			Iron (mg)	8 mg		
Saturated Fat (g)	No more than 10% of total calories			Sodium (mg)	<= 2400 mg		