

**BTG-COMP ■
FAST FOOD OBSERVATION FORM ■ 2012**

BUSINESS ID: 13-12- _____

CORRESPONDING SEGMENT UNIT ID: _____

BUSINESS ID:
BUSINESS NAME:
ADDRESS:

COMPLETION CODE	
COMPLETED	<input type="checkbox"/> 1
PARTIALLY COMPLETED – CODE DISPOSITION	<input type="checkbox"/> 2
NOT STARTED – CODE DISPOSITION	<input type="checkbox"/> 3
NOT ELIGIBLE – CODE DISPOSITION	<input type="checkbox"/> 96

DATE _____ - 2012 STAFF 1 _____ STAFF 2 _____
START TIME _____ : _____ AM PM END TIME _____ : _____ AM PM

DISPOSITION CODE	
Temporarily not accessible / Outside of business hours	<input type="checkbox"/> 1
Not safe	<input type="checkbox"/> 2
Asked to leave / Observation not allowed by staff	<input type="checkbox"/> 3
Address not found	<input type="checkbox"/> 5
Does not meet study criteria - DESCRIBE IN NOTES	<input type="checkbox"/> 7
Permanently closed / Does not exist	<input type="checkbox"/> 8
Other (SPECIFY):	<input type="checkbox"/> 6

LITTERED CIGARETTE PACKS No Cellophane With Cellophane
Number of bags used: _____

BUSINESS SAMPLE ATTRIBUTES	NO	YES
Business is within ¼ mile of index school	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Business replaces a primary sample observation	<input type="checkbox"/> 0	<input type="checkbox"/> 1

NOTES

A. GENERAL AND RESTAURANT EXTERIOR

A1. Is the restaurant ... ?	NO	YES	A2. RECORD SHARED BUSINESS NAME(S)
a. In a Food Court or a Mall <i>IF YES, CODE A3 AND SKIP TO SECTION D</i>	<input type="checkbox"/> 0	<input type="checkbox"/> 1	
b. In a shared space with a Grocery or Department Store <i>IF YES, COMPLETE A2</i>	<input type="checkbox"/> 0	<input type="checkbox"/> 1	
c. In a shared space with a Gas Station or Convenience Store <i>IF YES, COMPLETE A2</i>	<input type="checkbox"/> 0	<input type="checkbox"/> 1	
d. In a shared space with another Restaurant <i>IF YES, COMPLETE A2</i>	<input type="checkbox"/> 0	<input type="checkbox"/> 1	

A3. Restaurant Type <i>CODE ONE TYPE UNLESS MULTI-BRAND</i>	A5. Does the restaurant have ... ?	
	NO	YES
Burger and Fries	<input type="checkbox"/> 1	<input type="checkbox"/> 1
Mexican/Latin American	<input type="checkbox"/> 2	<input type="checkbox"/> 1
Fried Chicken/Fried Fish	<input type="checkbox"/> 3	<input type="checkbox"/> 1
Sandwich or Sub Shop	<input type="checkbox"/> 4	<input type="checkbox"/> 1
Sandwich/Pastry (e.g., Panera, Cosi, Au Bon Pain)	<input type="checkbox"/> 5	<input type="checkbox"/> 1
Pizzeria/Italian	<input type="checkbox"/> 6	<input type="checkbox"/> 1
Chinese/Pan-Asian	<input type="checkbox"/> 7	<input type="checkbox"/> 1
Other, SPECIFY:	<input type="checkbox"/> 8	<input type="checkbox"/> 1

A4. Number of exterior walls visible from parking lot or street <i>IF 4+, CODE 4</i>	A6. How much graffiti/ tagging is on building and/or property?			
	NONE	A LITTLE	SOME	A LOT
	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

B. EXTERIOR MARKETING

1 3 - 1 2 -

COUNT THE NUMBER OF ...	B1. on Building Exterior		B2. on Property			
	TALLY	TOTAL	TALLY	TOTAL		
a. All Advertisements		<input type="text"/>		<input type="text"/>		
1. Ads that include a Price Promotion		<input type="text"/>		<input type="text"/>		
2. Ads that include a Food		<input type="text"/>		<input type="text"/>		
3. Ads that include a Beverage		<input type="text"/>		<input type="text"/>		
a. Ads that include a Soda		<input type="text"/>		<input type="text"/>		
B3. Are there any ads with a ... ?	NO	YES	B4. Does the restaurant have an ... ?	NO	YES	
a. Dollar menu promotion	<input type="checkbox"/> 0	<input type="checkbox"/> 1	a. Exterior play area	<input type="checkbox"/> 0	<input type="checkbox"/> 1	
b. Health claim	<input type="checkbox"/> 0	<input type="checkbox"/> 1	b. Indoor play area visible from outside	<input type="checkbox"/> 0	<input type="checkbox"/> 1	
1. IF YES, RECORD HEALTH CLAIM WORDING:			C. DRIVE-THRU			
			C1. Does the restaurant have a drive-thru? IF NO, SKIP C2-C4	NO	YES	
				<input type="checkbox"/> 0	<input type="checkbox"/> 1	
c. Cartoon character(s)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	C2. Does menu board provide calorie info for menu items?	NO ITEMS	SOME ITEMS	ALL ITEMS
d. TV/movie star or sports/youth celebrity	<input type="checkbox"/> 0	<input type="checkbox"/> 1		<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
e. Kids' meal toy	<input type="checkbox"/> 0	<input type="checkbox"/> 1	C3. Does menu board list suggested daily calories?	NO	YES	
f. Other child-targeted marketing	<input type="checkbox"/> 0	<input type="checkbox"/> 1		<input type="checkbox"/> 0	<input type="checkbox"/> 1	
SPECIFY:			C4. Does menu board state "nutrition information available on request"?	NO	YES	
				<input type="checkbox"/> 0	<input type="checkbox"/> 1	
D. RESTAURANT INTERIOR						
D0. Is the restaurant drive-in only? <i>IF YES, SKIP TO D4</i>	NO	YES	D2. Does the restaurant have ... ?	NO	YES	
<input type="checkbox"/> 0 <input type="checkbox"/> 1			d. Cookies, cakes, pies, brownies, or candy for sale at the counter	<input type="checkbox"/> 0	<input type="checkbox"/> 1	
D1. Is the food order ... ?	NO	YES	e. Plexiglass or other divider at cash register	<input type="checkbox"/> 0	<input type="checkbox"/> 1	
a. Placed at the counter	<input type="checkbox"/> 0	<input type="checkbox"/> 1	f. Self-service machine for fountain drinks	<input type="checkbox"/> 0	<input type="checkbox"/> 1	
b. Picked up at the counter	<input type="checkbox"/> 0	<input type="checkbox"/> 1	g. Free water accessible to customers	<input type="checkbox"/> 0	<input type="checkbox"/> 1	
c. Paid for at the counter	<input type="checkbox"/> 0	<input type="checkbox"/> 1	h. Self-service salad bar	<input type="checkbox"/> 0	<input type="checkbox"/> 1	
D2. Does the restaurant have ... ?	NO	YES	D3. Number of Cash Registers <i>IF 5+, CODE 5</i>	<input type="text"/>		
a. Indoor seating	<input type="checkbox"/> 0	<input type="checkbox"/> 1				
b. Interior play area for kids	<input type="checkbox"/> 0	<input type="checkbox"/> 1				
c. Indoor display for kids' meal toys	<input type="checkbox"/> 0	<input type="checkbox"/> 1	D4. Does the restaurant have a restroom accessible to customers?	NO	YES	
j. Any ads or displays for kids' meal toys $\leq 3 \frac{1}{2}$ feet from ground	<input type="checkbox"/> 0	<input type="checkbox"/> 1		<input type="checkbox"/> 0	<input type="checkbox"/> 1	

F. BEVERAGE ITEMS

1 3 - 1 2 -

F1. Is item available? <small>IF NO, SKIP TO NEXT ROW</small>	NO	YES	F2. Size <small>SELECT OR SPECIFY SIZE</small>			F3. Price	MARK "X" IF ASKED PRICE	
a. Fountain Drink, smallest	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> Small	<input type="checkbox"/> UNSPEC	<input type="checkbox"/> _____	\$ _____.	<input type="checkbox"/>	
b. Fountain Drink, largest	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> Large	<input type="checkbox"/> UNSPEC	<input type="checkbox"/> _____	\$ _____.	<input type="checkbox"/>	
c. Packaged Soda	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 12 oz	<input type="checkbox"/> 20 oz	<input type="checkbox"/> _____	\$ _____.	<input type="checkbox"/>	
d. 100% Juice	ASK IF NOT LISTED ON MENU BOARD	<input type="checkbox"/> 0	<input type="checkbox"/> 6-7 oz	<input type="checkbox"/> 15-16 oz	<input type="checkbox"/> _____	\$ _____.	<input type="checkbox"/>	
e. Milk, skim or 1% fat (unflavored)		<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 7.5-8.5 oz	<input type="checkbox"/> 12 oz	<input type="checkbox"/> _____	\$ _____.	<input type="checkbox"/>
f. Milk, whole/Vit D or 2% fat (unflavored)		<input type="checkbox"/> 0	<input type="checkbox"/> 1					
g. Bottled Water		<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 16.9 oz	<input type="checkbox"/> 20 oz	<input type="checkbox"/> _____	\$ _____.	<input type="checkbox"/>
j. Flavored Coffee Drinks (hot or iced)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	NOTES					
k. Shakes or Malts	<input type="checkbox"/> 0	<input type="checkbox"/> 1						
l. Flavored Milk (e.g., chocolate, strawberry)	<input type="checkbox"/> 0	<input type="checkbox"/> 1						

G. FOOD ITEMS

MARK "X" IF NONE FROM G1 AVAILABLE AND SKIP SECTION G

G1. Is item available? <small>IF NO, SKIP TO NEXT ROW</small>	NO	YES	G3. Size <small>SELECT OR SPECIFY SIZE</small>			G2. Price	MARK "X" IF ASKED PRICE
a. French Fries, smallest	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> Small	<input type="checkbox"/> UNSPEC	<input type="checkbox"/> _____	\$ _____.	<input type="checkbox"/>
b. French Fries, largest	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> Large	<input type="checkbox"/> UNSPEC	<input type="checkbox"/> _____	\$ _____.	<input type="checkbox"/>
c. Cheeseburger	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> ¼ lb	<input type="checkbox"/> UNSPEC	<input type="checkbox"/> _____	\$ _____.	<input type="checkbox"/>
d. Chicken Sandwich, with roasted/grilled chicken	<input type="checkbox"/> 0	<input type="checkbox"/> 1				\$ _____.	<input type="checkbox"/>
e. Entrée Salad, with roasted/grilled chicken	<input type="checkbox"/> 0	<input type="checkbox"/> 1				\$ _____.	<input type="checkbox"/>
f. Fried Chicken, leg/drumstick & thigh	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2 pc meal	<input type="checkbox"/> UNSPEC	<input type="checkbox"/> _____	\$ _____.	<input type="checkbox"/>
g. Cheese Pizza, thin crust	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 10-12"	<input type="checkbox"/> UNSPEC	<input type="checkbox"/> _____	\$ _____.	<input type="checkbox"/>
h. Taco, with ground beef	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> Single	<input type="checkbox"/> UNSPEC	<input type="checkbox"/> _____	\$ _____.	<input type="checkbox"/>
i. Sub Sandwich, with turkey and cheese	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 6"	<input type="checkbox"/> UNSPEC	<input type="checkbox"/> _____	\$ _____.	<input type="checkbox"/>

H. KIDS' MENU REVIEW

H1. Is there a kids' menu/meal available? <small>IF NO, SKIP H2</small>	NO	YES	H2. Does kids' menu/meal offer ... ?	NO	YES
	<input type="checkbox"/> 0	<input type="checkbox"/> 1	b. A fruit, vegetable, salad, or yogurt side on menu board <small>IF YES, SKIP H2b2</small>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
H2. Does kids' menu/meal offer ... ?	NO	YES	2. Any of these available when asked?	<input type="checkbox"/> 0	<input type="checkbox"/> 1
a. Unflavored skim/1% milk, 100% juice or bottled water on menu board <small>IF YES, SKIP H2a2</small>	<input type="checkbox"/> 0	<input type="checkbox"/> 1	c. Free toys/child-oriented giveaways	<input type="checkbox"/> 0	<input type="checkbox"/> 1
2. Any of these available when asked?	<input type="checkbox"/> 0	<input type="checkbox"/> 1	d. Toys for an additional charge	<input type="checkbox"/> 0	<input type="checkbox"/> 1

E. GENERAL MENU REVIEW				1 3 - 1 2 - _____ - _____			
E1. Does the menu have ... ?		NO	YES	E2. How many ... are on the menu?		COUNT	
a. Dollar Menu	<i>IF NO, SKIP TO E1b</i>	<input type="checkbox"/> 0	<input type="checkbox"/> 1	a. Non-fried vegetable sides (w/o added fat)		_____	
1. Fruit, vegetable, salad, or yogurt on dollar menu		<input type="checkbox"/> 0	<input type="checkbox"/> 1	b. Fresh fruit sides		_____	
2. Dessert on the dollar menu		<input type="checkbox"/> 0	<input type="checkbox"/> 1	c. Other fruit sides		_____	
3. Fountain drink on the dollar menu		<input type="checkbox"/> 0	<input type="checkbox"/> 1	E3. Is there signage at the point of purchase designating ... options?		NO	YES
4. French fries on the dollar menu		<input type="checkbox"/> 0	<input type="checkbox"/> 1				
5. Entrée on the dollar menu		<input type="checkbox"/> 0	<input type="checkbox"/> 1				
b. Combo Meal or Meal Deal with sides		<input type="checkbox"/> 0	<input type="checkbox"/> 1				
c. Entrée Salad option	<i>IF NO, SKIP TO E2</i>	<input type="checkbox"/> 0	<input type="checkbox"/> 1				
1. Low-fat or fat-free salad dressing		<input type="checkbox"/> 0	<input type="checkbox"/> 1	a. Low-calorie	<input type="checkbox"/> 0	<input type="checkbox"/> 1	
E5. Does menu include mixed drinks or liquor?				NO	YES		
				<input type="checkbox"/> 0	<input type="checkbox"/> 1	b. Low-fat	<input type="checkbox"/> 0 <input type="checkbox"/> 1
						c. Low-sodium	<input type="checkbox"/> 0 <input type="checkbox"/> 1
						f. Other healthy, SPECIFY:	<input type="checkbox"/> 0 <input type="checkbox"/> 1

J. NUTRITION INFORMATION										
J1. Is ... visible at the POINT OF PURCHASE?	<i>IF NO, SKIP TO NEXT ROW</i>		J2. Does it provide calorie info for menu items?			J3. Does it list suggested daily calories?		J4. Does it state "nutrition info on request"?		
	NO	YES	NO ITEMS	SOME ITEMS	ALL ITEMS	NO	YES	NO	YES	
a. Menu board	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> 1	
b. Food display tags	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 0	<input type="checkbox"/> 1			
c. Posted material	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> 1	
d. Printed material	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 0	<input type="checkbox"/> 1			
e. Printed menu	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> 1	
J5. ASK EMPLOYEE FOR NUTRITION INFO AND CODE ALL RESPONSES		J6/J7/J8. Does it provide calorie info for menu items?			J9/J10/J11. Does it list suggested daily calories?					
Referred to item coded in J1	1	<input type="checkbox"/>	NO ITEMS	SOME ITEMS	ALL ITEMS	NO	YES			
Referred to other posted material	2	<input type="checkbox"/> →	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 0	<input type="checkbox"/> 1			
Referred to other printed material	3	<input type="checkbox"/> →	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 0	<input type="checkbox"/> 1			
Gave printed material from behind the counter	4	<input type="checkbox"/> →	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 0	<input type="checkbox"/> 1			
Ran out of printed material	5	<input type="checkbox"/>	J12. Is printed material with nutrition info attached?				<input type="checkbox"/> 0	<input type="checkbox"/> 1		
Referred to website	6	<input type="checkbox"/>	NOTES							
No nutrition info available	7	<input type="checkbox"/>								
Does not know	8	<input type="checkbox"/>								
Other, SPECIFY IN NOTES	9	<input type="checkbox"/> →								