Table 1: Results from the dietitian workshop (translated from the original language), n = 7

	Question	Summary of Answers
Q1	What apps, software, and data are you using in your daily work?	Lifesum; Food composition databases; Oviva; Debinet; Retailer websites; Optidiet/Prodi. Some participants were frustrated about the slow loading time of some websites, partially due to the slow hospital internet.
Q2	What is great about them and what is still lacking?	Expensive for patients; Freemium versions do not cover important data such as micronutrients; Complicated data format (csv instead of pdf); No sustainability data; Patients often complain that healthy eating is expensive.
Q3	What still is the most time-consuming or annoying activity that you engage in during a counselling session?	Writing reports, despite the existence of templates; Evaluating and calculating food diaries; Switching between different websites/platforms to obtain necessary information; Search bar very picky.
Q4	Which dietary factors are considered in your daily dietary consultations?	Macronutrients (7/7); Fibres(7/7); Meal timing/spacing(7/7); Processed/unprocessed food(7/7); Food categories(6/7); Energy density (4/7); Micronutrients(4/7); Food additives(4/7); Nutri-Score (1/7)
Q5	Which added value do you expect from having food purchase data analyzed?	Recognition of habits that were previously not apparent (7/7); General overview of shopping behavior (5/7) ; Support in comparing the nutritional values of different products (5/7); Others: Less effort by not having to manually analyze food diaries, can easily export pdf ; Concerns: Differentiation of who consumed what in a multi-person household; patients should not feel being watched.
Q6	When would you use digital food purchase data in your counseling sessions? For which patient group? When would you not use it?	Younger patients; Obese patients; Diabetic patients; Patients with intolerances/allergens.
Q7	Which of the available food product information would you like to use to set personalised nutritional goals/recommendations?	Nutrient content distribution (5/7); Ratios such as animal-to-plant protein ratio (5/7); Energy proportions such as total energy purchased per macronutrient group or food groups (4/7); Proportion of highly/moderate/non-processed foods purchases (4/7); Ranking of most frequently bought products (4/7).
Q8	How would you translate medical goals to nutritional recommendations based on food purchase data?	Suggest alternative products (independently or together); Comparison between recommendatioan and actual food consumption; See timeline for more motivation.