SPRINT-2

DATE	5 NOVEMBER 2022
TEAM ID	PNT2022TMID48406
PROJECT NAME	NUTRITION ASSISTANT APPLICATION

USER DETAIL.HTML

```html
<!DOCTYPE html>
<html lang="en" dir="ltr">
<head>
<meta charset="UTF-8">
<link rel="stylesheet"
href="C:\Users\sweth\OneDrive\Documents\registration.css">
<meta name="viewport" content="width=device-width, initial-scale=1.0">
<style>
*{
    margin:0px;
    padding:0px;
    box-sizing: border-box;
    font-family: 'Poppins',sans-serif;
    color:rgb(255, 174, 0);
    }
    body{
    height:100vh;
    display: flex;
    justify-content: center;
    align-items: center;
    padding: 10px;
    background-repeat:no-repeat;
    background-attachment:fixed;
    background-size:100% 100%;
    }
    .container{
    max-width: 900px;
    max-height: 1010px;
    width: 300%;
    background-color: #fff; /* linear-gradient(135deg, #71b7e6, #9b59b6)*/
    padding: 25px 30px;
    border-radius: 5px;
    box-shadow:0px;
    }
    .container .title{
    font-size: 50px;
    font-weight: 500;
    position: relative;
```

```css
}
.container .title::before{
content: "";
position: absolute;
left: 0;
bottom: 0;
height: 3px;
width: 30px;
border-radius: 5px;
background: linear-gradient(135deg, #71b7e6, #9b59b6);
}
.content form .user-details{
display: flex;
flex-wrap: wrap;
justify-content: space-between;
margin: 20px 0 12px 0;
}
form .user-details .input-box{
margin-bottom: 15px;
width: calc(100% / 2 - 20px);
}
form .input-box span.details{
display: block;
font-weight: 500;
margin-bottom: 5px;
}
.user-details .input-box input{
height: 45px;
width: 100%;
outline: none;
font-size: 16px;
border-radius: 5px;
padding-left: 15px;
border: 1px solid #ccc;
border-bottom-width: 2px;
transition: all 0.3s ease;
}
.user-details .input-box input:focus,
.user-details .input-box input:valid{
border-color: #9b59b6;
}
form .gender-details .gender-title{
font-size: 20px;
font-weight: 500;
}
form #category{
display: flex;
width: 100%;
```

```css
    margin: 14px 0 ;
    justify-content: space-between;
    border-color: #9b59b6;
    height: 45px;
    outline: none;
    font-size: 16px;
    border-radius: 5px;
    padding-left: 15px;
    border-bottom-width: 2px;
    transition: all 0.3s ease;
}
form #category label{
display: flex;
align-items: center;
cursor: pointer;
}
form #category label .dot{
height: 18px;
width: 18px;
border-radius: 50%;
margin-right: 10px;
background: #d9d9d9;
border: 15px solid transparent;
transition: all 0.3s ease;
}
#dot-1:checked ~ .category label .one,
#dot-2:checked ~ .category label .two,
#dot-3:checked ~ .category label .three{
background: #9b59b6;
border-color: #d9d9d9;
}
form input[type="radio"]{
display: none;
}
form #button{
height: 45px;
margin: 35px;
width: 90%;
}
form #button input{
height: 100%;
width: 100%;
border-radius: 5px;
border: none;
color: rgb(5, 29, 243);
font-size: 18px;
font-weight: 500;
letter-spacing: 1px;
```

```css
    cursor: pointer;
    transition: all 0.3s ease;
    background: linear-gradient(135deg, #71b7e6, #9b59b6);
    }
    form #button input:hover{
    background: linear-gradient(-135deg, #71b7e6, #9b59b6);
    }
    @media(max-width: 584px){
    .container{
max-width: 100%;
    }
    form .user-details .input-box{
margin-bottom: 15px;
width: 100%;
    }
    form .category{
width: 100%;
    }
    .content form .user-details{
max-height: 300px;
overflow-y: scroll;
    }
    .user-details::-webkit-scrollbar{
width: 5px;
    }
    }
    @media(max-width: 459px){
    .container .content .category{
flex-direction: column;
    }
    }
    </style>
</head>
<body background=C:\Users\R.Sneha\Desktop\specs.jpg >
<div class="container">
<div class="title">user details</div>
<div class="content">
<form action="{{url_for('register')}}" method="POST" class="login email">
<div class="user-details">
<div class="input-box">
<span class="details"> NAME</span>
<input type="text" placeholder="Enter your name" name="fullname">
</div>
<div class="input-box">
<span class="details">HEIGHT</span>
<input type="text" placeholder="Enter your Height" name="fullname">
</div>
<div class="input-box">
```

```
<span class="details">WEIGHT</span>
<input type="text" placeholder="Enter your Weight" name="fullname">
</div>
<div class="input-box">
    <span class="details">GENDER</span>
    <select id="category" onchange="showchange()">
    <option value="1">MALE</option>
    <option value="2">FEMALE</option>
    <option value="1">OTHERS</option></select></div>
<div class="input-box">
<span class="details">ALLERGIES </span>
<input type="text" placeholder="Enter your category" name="fullname">
</div>
<div class="input-box">
<span class="details">AGE</span>
<input type="text" placeholder="Enter your Age" name="fullname">
</div>
<div class="input-box">
<span class="details">PHONE NUMBER</span>
<input type="number" placeholder="Enter your ph.no" name="fullname">
</div>
<div class="input-box">
<span class="details">CATEGORY</span>
<select id="category" onchange="showchange()">
<option value="1">KIDS</option>
<option value="2">DIABETICS</option>
<option value="2">PREGNANT WOMEN</option>
<option value="2">MODEL</option>
<option value="2">ATHELETS</option>
<option value="2">SENIOR CITIZEN</option></select>
</div>
<div id="button">
<input type="submit" value="NEXT"></div>
</form>
</div>
</div>
</body>
</html>
```

NEXT PAGE:

```
<Html>
    <head>
    <title>user details</title>
    <style>
    *{
        padding: 0;
        margin: 0;
```

```css
font-family: sans-serif;
}
body{
background-repeat:no-repeat;
background-attachment:fixed;
background-size:100% 100%;
 }
.login-form{
position: absolute;
top: 50%;
left:55%;
transform: translate(-50%, -50%);
width: 700px;
}

.login-form h1{
font-size: 20px;
text-align: left;
text-transform: uppercase;
margin: 15px 0;
color: orange;

}
.login-form p {
font-size: 20px;
margin: 15px 0;

}

.login-form select{
font-size: 10px;
padding: 0px ;
width: 40%;
border-radius: 5px;
outline: none;
}
.login-form p {
font-size: 20px;
margin:  0;

}

.login-form select{
font-size: 10px;
padding: 0px;
width: 40%;
border-radius: 5px;
outline: none;
```

```css
}

.login-form p {
font-size: 20px;
margin:  0;
color:rgb(252, 252, 252);
}

.login-form select{
font-size: 16px;
padding: 0px;
width: 40%;
border-radius: 5px;
outline: none;

}
.login-form p{
    font-size: 20px;
margin: 15px 0;

}
.login-form select{
font-size: 16px;
padding: 0px ;
width: 40%;
border-radius: 5px;
outline: none;
}
.login-form p{
    font-size: 20px;
margin: 15px 0;

}
.login-form select{
font-size: 16px;
padding: 0px;
width: 40%;
border-radius: 5px;
outline: none;
}
.login-form p{
    font-size: 20px;
margin: 15px 0;

}
.login-form select{
font-size: 16px;
padding: 0px;
```

```css
        width: 40%;
        border-radius: 5px;
        outline: none;
        }
        .login-form p{
            font-size: 20px;
        margin: 15px 0;

        }
        .login-form select{
        font-size: 16px;
        padding: 0px;
        width: 40%;
        border-radius: 5px;
        outline: none;
        }
        .login-form input{
        font-size: 16px;
        padding: 0px;
        width: 30%;
        border-radius: 5px;
        outline: none;

        }
        .login-form button:hover{
        color: red;
        font-size: 16px;
        padding: 10px 5px;
        border-radius: 5px;
        width: 50%
        }



        </style>

    </head>
    <body background="C:\Users\R.Sneha\Downloads\reg.jpg">
    <div class="login-form">
        <p>Blood Pressure Level:</p>
        <select>
            <option value="">select</option>
            <option value="Ideal Blood Pressure">Between 90/60mmHg -
120/80mmHg</option>
            <option value="High Blood Pressure">Greater than 140/90mmHg
</option>
            <option value="Low Blood Pressure">Lower than 90/60mmHg </option>
```

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```html
    </select>
    <p>Cholesterol Level:</p>
    <select>
        <option value="">select</option>
        <option value="Borderline Level">200 - 239 mg/dL</option>
        <option value="High Level">Greater than 240 mg/dL</option>
        <option value="Low Level">Less than 200 mg/dL </option>
    </select>
    <p>How much weight do you want to reduce ? :</p>
    <select>
        <option value="">select</option>
        <option value="">Below 5</option>
        <option value="">Between 5 - 10 </option>
        <option value="">Between 10 - 15 </option>
    </select>
    <p>Which kind of food you prefer ? :</p>
    <select>
        <option value="">select</option>
        <option value="">Vegetarian</option>
        <option value="">Non-Vegetarian </option>
        <option value="">Both </option>
    </select>
    <p>How much water you intake perday ? :</p>
    <select>
        <option value="">select</option>
        <option value="">Between 90/60mmHg - 120/80mmHg</option>
        <option value="High Blood Pressure">Greater than 140/90mmHg
</option>
        <option value="Low Blood Pressure">Lower than 90/60mmHg </option>
    </select>
    <p>Any history of disease ? :</p>
    <select>
        <option value="">select</option>
        <option value="">Yes</option>
        <option value="">No </option>
    </select>
    <p>what kind of medicines are you intaking ? :</p>
     <input type="text" name="medicines" >

    <p>Do you have any bad habits? :</p>
    <select>
        <option value="">select</option>
        <option value="">Alcoholist</option>
        <option value="">Smoker </option>
        <option value="">Nothing</option>
    </select>
    <p>Notification :</p>
    <select>
```
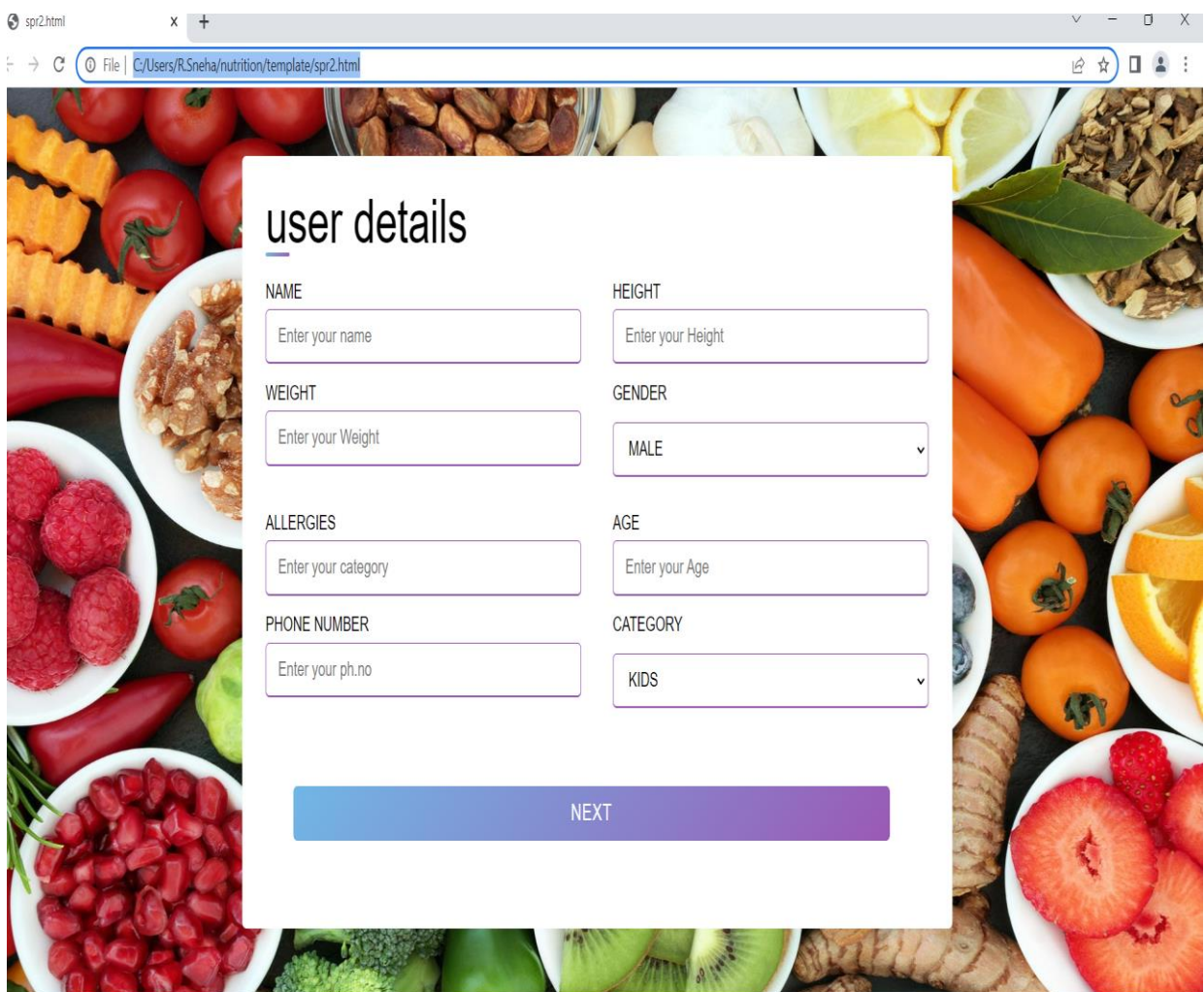
```
        <option value="">select</option>
        <option value="">Allow</option>
        <option value="">Not Allow </option>
    </select>
    <button type="submit">Submit</button>
</form>
</div>

</body>
</html>
```

USER DETAILS:

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Blood Pressure Level:
[Between 90/60mmHg - 120/80mmH ▼]

Cholesterol Level:
[Greater than 240 mg/dL ▼]

How much weight do you want to reduce ? :
[Between 5 - 10 ▼]

Which kind of food you prefer ? :
[Vegetarian ▼]

How much water you intake perday ? :
[Between 90/60mmHg - 120/80mmH ▼]

Any history of disease ? :
[Yes ▼]

what kind of medicines are you intaking ? :
[   ]

Do you have any bad habits? :
[Alcoholist ▼]

Notification :
[Allow ▼]   [Submit]