

1. What is the best example of your most typical eating style?

- a) Five or six mini-meals and snacks evenly divided throughout the day
- b) Three square meals a day
- c) Nibble all day, perhaps eating eight or more times a day
- d) Eat sporadically. One day I skip breakfast and lunch, then eat a large dinner. The next day I might eat breakfast and several snacks, but skip dinner

2. What is your average calorie intake?

- a) More than 2,500 calories a day
- b) 1,600 to 2,500 calories a day
- c) 1,000 to 1,600 calories a day
- d) Because I diet frequently, my calorie intake varies from fewer than 1,000 calories to more than 2,500 calories a day

3. Do your eating habits fluctuate?

- a) Rarely, I usually eat about the same types of foods at about the same times during the day
- b) Somewhat, although I skip a meal or eat larger/smaller meals a couple times during the week
- c) Often. My eating habits vary almost daily
- d) Always. I regularly skip meals; grab snacks on the run; forget to eat all day, then eat a large dinner; and/or switch from one eating style to another.

4. Do you eat breakfast?

- a) Yes, always
- b) Usually (at least four days a week)
- c) Sometimes (fewer than four days a week)
- d) Seldom

5. If you eat a morning meal, which of the following best represents your typical breakfast?

- a) Cereal or toast, milk, fruit
- b) Eggs, bacon, toast with butter, coffee
- c) Doughnut and coffee
- d) Coffee or tea

6. Do you eat lunch?

- a) Yes, always
- b) Usually (at least four days a week)

- c) Sometimes (fewer than four days a week)
- d) Seldom

7. If you eat a midday meal, which of the following best represents your typical lunch?

- a) A grain such as pasta or bread, meat, and a vegetable, or a large salad that contains some meat or cheese and a roll
- b) A large meal, such as a hot roast beef sandwich with gravy and mashed potatoes
- c) A fast-food lunch, such as a hamburger; French fries, and a beverage
- d) Coffee, candy bar; or soda pop

8. Do you eat an evening meal?

- a) Yes, always
- b) Usually (at least four days a week)
- c) Sometimes (fewer than four days a week)
- d) Seldom

9. If you eat an evening meal, which of the following best represents your typical dinner?

- a) I keep dinner light and usually have small portions of fish, salad, pasta and/or fruit
- b) Dinner is my biggest meal and can include generous portions of meat, vegetables, and bread or potato
- c) A frozen entree or a meal- replacement drink
- d) I usually skip dinner or grab something from a fast food restaurant

10. What do you eat most frequently for a snack?

- a) Fruits and vegetables, whole-grain breads, or yogurt
- b) Cookies, potato chips, or granola bars
- c) Candy bar, doughnut, or French fries
- d) Nothing. I seldom or never eat between meals

11. What types of foods do you consume between dinner and bedtime?

- a) Fresh fruits and vegetables, whole grains, or low-fat milk products
- b) Snack foods, such as popcorn, crackers, potato chips, or other convenience foods
- c) Chocolate, cola soft drinks, hot cocoa, or

coffee or tea

d) I do most of my overeating in the evening, including large bowls of ice cream with chocolate sauce, or second servings of leftovers from dinner

12. How frequently do you have strong cravings for starchy or sugary foods?

- a) Seldom
- b) Only during certain times of the month or year; such as two weeks before my period, or in the winter
- c) Frequently
- d) Daily, and the urges often lead to over consumption of the craved food

13. How many servings of unsweetened fruits and plain vegetables (fresh fruits and vegetables or fruits canned in their own juice and plain frozen vegetables) do you eat in the average day?

- a) Eight or more
- b) Five to seven
- c) Three to four
- d) Fewer than three

14. Of those fresh fruits, how many are vitamin C-rich selections, such as oranges, grapefruits, or cantaloupe?

- a) Three or more
- b) Two
- c) One
- d) Fewer than one each day

15. Of those fresh plain frozen vegetables, how many are dark green, such as romaine lettuce, spinach, or broccoli, or dark orange, such as sweet potatoes and carrots?

- a) Three or more
- b) Two
- c) One
- d) Fewer than one each day

16. How many servings of grain, such as bread, cereal, pasta, noodles, rice, or tortillas, do you typically eat each day (one serving + one slice of bread, one tortilla, or ½ cup cooked grains)?

- a) More than eight

- b) Six to eight
- c) Five to six
- d) Fewer than five

17. Of these grains, how often are the choices whole grains?

- a) All the time
- b) One out of every two choices is whole grain
- c) Occasionally I select whole grains
- d) Seldom or never

18. Of these grains, how often do you choose crackers, waffles, sugar coated cereals, tortilla chips, buttered popcorn, or other grains with added fat and sugar?

- a) Seldom or never
- b) Occasionally (two or three times a week)
- c) Frequently (once a day)
- d) Most of the time (more than once a day)

19. How many servings daily of extra-lean red meat, chicken, fish, and cooked dried beans and peas do you eat (one serving= 3 ounces of animal flesh or 3/4 cup of beans)

- a) Three to four
- b) Two
- c) One
- d) None

20) When you eat meat, how often do you trim the visible fat, remove the chicken skin before cooking, and cook without using oils and fats such as butter and margarine?

- a) Always
- b) Usually
- c) Sometimes
- d) Seldom or never

21) How many glasses of milk or 8-ounce servings of yogurt do you consume in a day?

- a) Three to four
- b) Two
- c) One
- d) None

22) What type of milk products, including milk, yogurt, and cheese, do you usually

consume?

- a) Nonfat (nonfat milk, nonfat yogurt, fat-free cheeses)
- b) Very low-fat (1 percent low fat milk; yogurt made from a mixture of nonfat and low-fat milk; and low fat cheeses)
- c) Low-fat (2 percent low-fat milk; yogurt made from 2 percent milk; reduced calorie or “light” cheeses)
- d) Whole milk (yogurt made from whole milk; regular cheeses)

23) How often do you snack on cookies, candy, fruited-yogurt, and other sweets (one snack serving= two small cookies, one small candy bar, one 8-ounce yogurt, etc.)?

- a) Once a day or less
- b) Twice a day
- c) Several times a day
- d) Several times a day, and often in large amounts; I'll eat half a bag or more of cookies in the evening

24. What do you usually eat for dessert?

- a) I seldom eat dessert and if I do its fresh fruit
- b) Small servings of nonfat ice cream or sorbet; oatmeal cookies, or angel food cake
- c) Moderate-sized servings of ice cream, pie, pastries, cake, or cheesecake
- d) Large servings of pie or cake and ice cream, candy, or other sweets. Sometimes I eat right from the cake or pie without portioning off a serving

25) How often do you add sugar to your foods, including coffee or tea, cereal, and/or fruit?

- a) Never
- b) Sometimes
- c) Frequently
- d) All the time

26) What is your typical weekly consumption of soda pop, including diet sodas?

- a) None to three 12-ounce cans a week
- b) Four to six 12-ounce cans each week
- c) Seven to ten 12-ounce cans each week

- d) More than ten 12-ounce cans each week

27) How many cups (5-ounce servings) of caffeinated coffee or tea do you drink on a typical day?

- a) I don't drink caffeinated coffee or tea
- b) Two to three 5-ounce cups or fewer
- c) Four 5-ounce cups
- d) Five or more 5-ounce cups

28) What is your average alcohol consumption for the week? (One drink is a 6-ounce glass of wine, 1 ounce of hard liquor; or a 12-ounce can of beer)

- a) I average less than five drinks a week, or do not drink at all
- b) I average a drink a day
- c) I average ten drinks a week
- d) I average two drinks or more a day

29) How often do you bake, steam, broil, poach, or grill food rather than fry, sauté, or use sauces and gravies that contain fat?

- a) Always
- b) Usually
- c) At least 50 percent of the time
- d) Seldom or never

30) How often do you sauté in water, broth, herbs, or other no-fat liquids?

- a) Always
- b) Usually
- c) Often
- d) Seldom or never

31) How often do you use tomato based or no-fat sauces on pasta rather than creamy sauces or sauces with fatty meats?

- a) Always
- b) Usually
- c) Often
- d) Seldom or never

32) How much salad dressing do you use?

- a) I use fat-free salad dressing or use 2 teaspoons or less of oil-based dressing on my salads
- b) I use low-fat regular salad dressing and limit the serving to 2 tablespoons
- c) I use regular salad dressing and limit the

serving to 3 tablespoons

d) I use generous servings of regular salad dressings (more than 3 tablespoons) and eat salads regularly

33) How often do you eat in fast food restaurants?

- a) Less than once a week
- b) Once a week
- c) Twice a week
- d) More than twice a week

34) How often do you use butter, margarine, oils, whipping cream, sour cream, whipped toppings, mayonnaise, and shortening?

- a) Seldom
- b) Once a day
- c) Several times a day
- d) I couldn't cook or eat without these foods

35) How often do you read labels and select foods that contain 3 grams of fat or less for every 100 calories?

- a) Always
- b) Usually
- c) Often
- d) Seldom or never

36) How many glasses of plain water do you drink daily?

- a) Six or more glasses
- b) Four to five glasses
- c) Two to three glasses
- d) I seldom drink water

37) How often do you limit intake of salty foods and avoid using salt in food preparation or at the table?

- a) Always
- b) Usually
- c) Often
- d) Seldom or never

38) What is your current weight?

- a) I'm within 10 percent of my desirable body weight
- b) I'm approximately 15 pounds or more overweight
- c) I'm approximately 15 pounds or more

underweight

d) I'm more than 20 pounds overweight

39) How often have you dieted to lose weight in the past?

- a) I've been on fewer than three weight-loss diets in my life
- b) I've been on four to six weight-loss diets in my life
- c) I've been on seven to ten weight-loss diets in my life
- d) I've lost count. I'm always trying new diets to lose weight

40) What type of supplement(s) do you take?

- a) A daily multivitamin and mineral supplement, extra calcium, vitamin C, and/or vitamin E
- b) A moderate dose vitamin supplement
- c) I'm not sure what to take, so sometimes I supplement and sometimes I don't
- d) I know my eating habits are not the very best, but I either don't take supplements or I fluctuate between not taking anything and taking large doses of single nutrient supplements

41) How often do you feel, look, act, and function at your best?

- a) Most of the time
- b) At least 50 percent of the time
- c) I get by most of the time, or am down more often than I'm up
- d) I seldom feel really good

42) How frequently do you engage in planned exercise?

- a) Five or more times a week for at least thirty minutes each time
- b) Three or more times a week for at least thirty minutes each time
- c) Fewer than three times a week
- d) I don't exercise

43) How frequently do you take time out for yourself- e.g., read a book, take a walk in the woods, visit with a friend, take a hot bath, work on hobbies?

- a) Daily

- b) At least a couple of times a week
- c) Once a month
- d) I don't remember the last time I had a moment's peace

44) How often do you discuss your personal concerns with a close friend or family member?

- a) Daily or at least several times a week
- b) Occasionally, when things get bad
- c) Seldom
- d) I have no one to talk things out with

45) What time do you usually eat your first meal of the day?

- a) Before 6 am
- b) 6-8 am
- c) 8-10 am
- d) After 10 am

46) When do you usually eat your last meal of the day?

- a) 6 pm
- b) 7-9 pm
- c) 10 pm- 12 am
- d) After 12 am

47) I find myself eating more when I am...

- a) Angry
- b) Lonely
- c) Bored
- d) Excited
- e) Content
- f) Sad

48) How many hour of sleep do you get each night?

- a) 4 or less
- b) 5-7 hours
- c) 7-9 hours
- d) 10 or more

49) How many days a week do you strength train (or lift weights)?

- a) 4 or more
- b) 2-3
- c) 1
- d) None

50) How many days a week do you

stretch?

- a) 4 or more
- b) 2-3
- c) 1
- d) None

51) How many days a week do you do cardiovascular exercise continuously for at least 20 minutes (run, walk, jog etc)?

- a) 4 or more
- b) 2-3
- c) 1
- d) None

52) What aspects of Health/Fitness would you like to know more about?

- a) Nutrition
- b) Strength training
- c) Cardiovascular training
- d) Flexibility
- e) Homeopathic medicine
- f) Relaxation techniques
- g) Other_____

53) How would you personally rate your overall fitness on a scale of 1-10?

- | | | | | | |
|---|---|---|----|---|---|
| 1 | 2 | 3 | 4 | 5 | 6 |
| 7 | 8 | 9 | 10 | | |

54) How would you rate your current nutritional habits on a scale of 1-10?

- | | | | | | |
|---|---|---|----|---|---|
| 1 | 2 | 3 | 4 | 5 | 6 |
| 7 | 8 | 9 | 10 | | |

55) What motivates you most to exercise?

- a) Socializing with others (group exercise)
- b) Results (looking and feeling better)
- c) Stress release
- d) Encouragement of a personal trainer
- e) Weight management programs
- f) Gym membership
- g) Yourself
- h) Other_____