

LIFESTYLE QUESTIONNAIRE

MRN:

Patient Name:

	Disagree	Neutral	Agree
Convenient Diner			
1. I rarely take the time to plan my meals.			
2. A lot of my meals are fast food, at restaurants, or take out most			
days of the week.			
3. Most foods I eat are convenient, ready-made, packaged, frozen			
or microwavable.			
4. I do not have consistent meal patterns from one day to the next.			
Fast Pacer			
5. I feel like I'm juggling too many things at once; my hectic			
schedule makes it hard for me to focus on my health.			
6. I usually take care of everyone else and put myself at the bottom			
of my to-do list.			
Mindless Muncher			
7. I have difficulty controlling my portion sizes.			
8. I often eat out of habit, not because I am hungry.			
I will eat until I'm too full – and may even eat more.			
Emotional Eater			
10. When I'm stressed, bored, lonely, anxious, or depressed, I turn to			
food for comfort.			
11. Over time, I have found that I need to eat more and more to get			
the feeling I want, such as reduced negative emotions of			
increased pleasure.			
Exercise Struggler			
12. Being physically active has never been one of my priorities.			
13.I don't exercise because I don't like it.			
14. I have difficulty exercising.			
Self-Critic			
15. I measure my self-worth by the numbers on the scale.			
16. I focus on the things I don't like about my body.			
17.1 avoid social situations because of my weight.			
All-or-Nothing Doer	•		
18. I'm either on or off my diet – there's no middle ground.			

Patient or Representative Signature

Date

Time

If signed by someone other than the patient, please specify relationship to patient:

Interpreter Signature

Date