Good Eating Habits Survey
(Please answer the following questions with a yes or no to the best of your ability.)

1. ___ Do you eat a healthy breakfast nearly everyday? ( whole grain cereal; eggs; whole grain pancakes; yogurt; fruit; whole grain toast)
2. ___ Do you eat a healthy snack between breakfast and lunch? ( fruit; nuts; bean dip; vegetables or similar healthy foods)
3. ___ Do you eat a healthy lunch nearly every day? ( soup; salad; tuna; chicken; turkey; whole grain pasta; fruit; vegetables or similar healthy choices)
4. ___ Do you eat a healthy snack between lunch and dinner? ( fruit; nuts; energy bar; bean dip; vegetables or similar healthy foods)
5. ___ Do you eat a healthy dinner nearly every day? ( salad, turkey; chicken; fish; vegetables; sweet potato or other similar healthy foods)
6. ___ Do you drink at least 8 glasses of spring or filtered water every day?
7. ___ Do you limit your intake of coffee to one cup or none each day?
8. ___ Do you limit your consumption of saturated fat to a few times each week? ( red meat; dairy products; fried foods)
9. ___ Do you make an effort to eat un-saturated fats several times a week? ( salmon; tuna; sardines; olive oil; canola oil; sunflower oil)
10. ___ Do you limit your intake of sugar and sweets to a few times per week? ( candy; desserts; refined flour such as bread, cakes or donuts and other sugary foods)
11. ___ Do you limit your intake of soft drinks and fast foods to a few times per week?
12. ___ Do you chew most of your food at least 20 to 30 times before swallowing?
13. ___ Do you know what your metabolic type is and eat in accordance with it? ( fast, slow or balanced metabolism determines levels of carbohydrates, protein and fats)
14. ___ Do you try to eat organic and/or locally grown produce as much as possible?
15. ___ Are you careful to eat some raw fruits and vegetables every day and not over cook your food, which destroys enzyme and nutrient levels?
16. ___ Do you watch the portion size of your meals to keep the calorie count at or under 500 calories per meal as often as possible?
17. ___ Do you try to eat something healthy about every 3 hours in order to keep your blood sugar level in a safe range and avoid the storage of fat on your body?
18. ___ Do you take quality nutritional supplements, especially for the common deficiencies such as vitamins A, B, C, D, E, omega oils, magnesium, zinc and CoQ10?
19. ___ Do you get at least 30 minutes of exercise almost every day in order to help burn calories, build muscle, improve metabolism, improve delivery of nutrients and facilitate the removal of toxins from the body?
20. ___ Do you practice some form of stress management most days such as yoga, meditation or deep breathing in order to facilitate the good digestion of foods?

Scoring:
1 - 5 no answers – You are doing fairly well on your nutrition program but there is still room or some improvement in order to avoid illness and premature aging.
6 - 10 no answers – You are not following a very healthy nutritional program and could experience health concerns during middle age.
11 - 20 no answers – Your nutritional program is very poor and you will likely experience health challenges early in your adult life.

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