

Determine Your Nutritional Health Checklist

The warning signs of poor nutritional health are often overlooked. Use this checklist to find out if you are at nutritional risk.

Please read the statements below. Circle the number in the "Yes" column for those that apply to you. Add the circled numbers to get your total nutritional risk score.

	Yes
I have an illness or condition that made me change the kind and/or	2
amount of food I eat.	
I eat fewer than two meals a day.	3
I eat few fruits or vegetables, or milk products.	2
I have three or more drinks of beer, liquor or wine almost every day.	2
I have tooth or mouth problems that make it hard for me to eat.	2
I don't always have enough money to buy the food I need.	4
I eat alone most of the time.	1
I take three or more different prescribed or over-the-counter drugs a	1
day.	
Without wanting to, I have lost or gained 10 pounds in the last six	2
month.	
I am not always physically able to shop, cook and/or feed myself	2
Total	

Nutrition Health Score:

- 0 2 Good
- 3 5 Moderate Nutritional Risk
- 6 or more High Nutritional Risk

Checklist created by the Nutrition Screening Initiative, 2626 Pennsylvania Ave., NW, Suite 301, Washington, D.C. 20037.

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