**Low Glycemic Index Diet Questionnaire**

Please answer the questions regarding your dietary habits since your last visit.

1. How many ***vegetable servings*** do you normally consume each day?

(Note: One serving is 1 cup leafy greens, ½ cup any other vegetable, raw or cooked)

|  |  |  |
| --- | --- | --- |
| 4 or more servings | 7 points | **SCORE** |
| 3 servings | 5 points |  |
| 2 servings | 3 points |  |
| 1 serving | 1 point |  |
| 0 | 0 points |  |

1. How many times do you eat ***legumes*** *(*dried beans or peas, lentils,

chickpeas, kidney beans, green peas, etc.) in a normal week?

|  |  |  |
| --- | --- | --- |
| 7 or more servings | 5 points | **SCORE** |
| 5-6 servings | 4 points |  |
| 3-4 servings | 3 points |  |
| 1-2 servings | 1 point |  |
| 0 | 0 points |  |

1. How many ***fruits*** do you normally eat each day (1/2 cup fresh fruit,

1 medium piece of fruit)?

|  |  |  |
| --- | --- | --- |
| More than 3 servings | 0 points | **SCORE** |
| 2-3 servings | 3 points |  |
| 1 serving | 2 points |  |
| 0 servings | 1. points |  |

1. What ***types of oils*** are you eating each day?

|  |  |  |
| --- | --- | --- |
| Olive oil, avocado, canola oil, olives, flaxseed oil,  coconut oil | 2 points | **SCORE** |
| Soybean oil, vegetable oil | 0 points |  |
| Butter, lard, partially hydrogenated oils | 0 points |  |
| No oils | 0 points |  |

5. In a typical day, what do you ***drink*** most often?

|  |  |  |
| --- | --- | --- |
| Water or decaffeinated tea | 2 points | **SCORE** |
| Coffee or tea | 1 point |  |
| Fruit juice | 0 points |  |
| Soft drinks | 0 points |  |
| Alcohol | 1. 0 points |  |

6. How many ***servings of whole grains*** do you eat in a usual day?

|  |  |  |
| --- | --- | --- |
| None or 1 serving | 3 points | **SCORE** |
| More than 1 serving | 1. points |  |

7. How many times per week do you eat ***sweets*** such as cookies, cakes,

or ice cream?

|  |  |  |
| --- | --- | --- |
| None | 3 points | **SCORE** |
| 1 or more | 0 points |  |

8. How many servings of ***fatty, processed meats (fast food hamburger, sausage)***

do you consume per week?

|  |  |  |
| --- | --- | --- |
| None | 1 point | **SCORE** |
| 1 serving or more | 1. points |  |

9. How many servings of ***grilled, broiled, or poached fish***

do you consume per week?

|  |  |  |
| --- | --- | --- |
| 2 or more servings | 2 points | **SCORE** |
| 1 serving | 1 point |  |
| None | 1. points |

10. How many times do you eat ***fast food*** in a normal week?

|  |  |  |
| --- | --- | --- |
| None | 2 points | **SCORE** |
| 1 or more | 0 points |  |

|  |  |
| --- | --- |
| **TOTAL SCORE:** | **%** |

**KEY**

|  |  |
| --- | --- |
| **SCORE** | **%** |
| **30** | **100** |
| **28** | **90** |
| **26** | **80** |
| **24** | **70** |
| **21** | **60** |
| **17** | **50** |
| **14** | **40** |
| **10** | **30** |
| **7** | **20** |
| **3** | **10** |