



Survey for All Patients at Well-Child Visits

In our office, we are interested in discussing the aspects of a healthy lifestyle with all our patients. While you are waiting to see the doctor, it would be helpful if you would please take a moment with your child to answer the following questions and we will review the answers during your visit. We realize how difficult it is to do all the right things all the time and recognize the questions below only reflect a small portion of the challenges that face us every day.

Patient name: _____ **Age:** _____ **Date:** _____

		True	False
5	I/my child eats fruits and vegetables 5 or more times a day.	<input type="checkbox"/>	<input type="checkbox"/>
	I/my child eats breakfast every day.	<input type="checkbox"/>	<input type="checkbox"/>
	I/my child eats dinner at the table with the family at least 2 times per week.	<input type="checkbox"/>	<input type="checkbox"/>
2	I/my child watches TV, videos or plays computer games less than 2 hours per day.	<input type="checkbox"/>	<input type="checkbox"/>
	I/my child does not have a TV in the bedroom.	<input type="checkbox"/>	<input type="checkbox"/>
1	I/my child participates in some type of physical activity in or outside of school for at least 1 hour every day.	<input type="checkbox"/>	<input type="checkbox"/>
0	I/my child does not regularly drink juice, soda or punch.	<input type="checkbox"/>	<input type="checkbox"/>
	Circle the milk you have at home: whole, 2%, 1%, skim		
	Circle the milk your child drinks at school: whole, 2%, 1%, skim, chocolate.		

On a scale of 0 (not ready) to 10 (very ready), how ready are you to consider making a change in one of the areas below? (please circle the number that best represents how ready you are.)

0 – 1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10

5	2	1	0
Eat at fruits and vegetables 5 or more times a day. Limit 100% fruit juice.	Reduce screen time to 2 hours or less every day.	Participate in at least 1 hour or more of moderate to vigorous physical activity every day	Restrict soda and sugar sweetened sports and fruit drinks. Drink water and 3-4 servings of fat-free/skim or low-fat milk instead.
Ideas for Change			
<ul style="list-style-type: none"> ✓ Try one new vegetable or fruit each week. ✓ Choose a vegetable with dip for a snack. ✓ Add fruit to my cereal ✓ Switch sweets to fruit. ✓ Eat 2 or more family meals together each week. ✓ Eat breakfast ✓ Limit snacks after dinner 	<ul style="list-style-type: none"> ✓ Plan my TV time ✓ Take the TV out of the bedroom ✓ Don't eat in front of the TV 	<ul style="list-style-type: none"> ✓ Take a family walk after dinner. ✓ Wear a pedometer and set a goal for the number of steps I take each day. ✓ Play my favorite sport or physical activity 	<ul style="list-style-type: none"> ✓ Drink no soda ✓ Limit fruit and sports drinks ✓ Switch to low-fat or skim milk ✓ Drink more water instead of sports drinks or fruit drinks.

My/child's personal health goal is to:
When I/my child reach the goal, I/my child will be rewarded by:

Parent/Guardian signature: _____ **Clinician signature:** _____