

# 5210 Healthy Habits Questionnaire (Ages 2–9)

We are interested in the health and well-being of all our patients. Please take a moment to answer the following questions.

Patient Name: \_\_\_\_\_

Age: \_\_\_\_\_ Today's Date: \_\_\_\_\_

1. How many servings of fruits or vegetables does your child eat a day?

*One serving is most easily identified by the size of the palm of your child's hand.*

\_\_\_\_\_

2. How many times a week does your child eat dinner at the table together with the family?

\_\_\_\_\_

3. How many times a week does your child eat breakfast?

\_\_\_\_\_

4. How many times a week does your child eat takeout or fast food?

\_\_\_\_\_

5. How many hours a day does your child watch TV/movies or sit and play video/computer games?

\_\_\_\_\_

6. Does your child have a TV in the room where he /she sleeps?

Yes ☐ No ☐

7. Does your child have a computer in the room where he /she sleeps?

Yes ☐ No ☐

8. How much time a day does your child spend in active play (faster breathing/heart rate or sweating)?

\_\_\_\_\_

9. How many 8-ounce servings of the following does your child drink a day?

100% Juice \_\_\_\_\_

Fruit drinks or sports drinks \_\_\_\_\_

Soda or punch \_\_\_\_\_

Water \_\_\_\_\_

Whole milk \_\_\_\_\_

Nonfat or reduced fat milk \_\_\_\_\_

10. Based on your answers, is there **ONE** thing you would like to help your child change now? Please check one box.

☐ Eat more fruits & vegetables.

☐ Spend less time watching TV/movies and playing video/computer games.

☐ Take the TV out of the bedroom.

☐ Eat less fast food/takeout.

☐ Play outside more often.

☐ Drink less soda, juice, or punch.

☐ Switch to skim or low fat milk.

☐ Drink more water.



**Please give the completed form to your clinician. Thank you.**

*Adapted by MaineHealth® and Maine Medical Center from the High Five for Kids in Massachusetts and Keep ME Healthy in Maine.*

