

## Low GI Dietary 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)

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

2. How many times do you eat **legumes** (dried beans or peas, lentils, chickpeas, kidney beans, green peas, etc.) in a normal week?

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

3. How many **fruits** do you normally eat each day (1/2 cup fresh fruit, 1 medium piece of fruit)?

		SCORE
More than 3 servings	0 points	
2-3 servings	3 points	
1 serving	2 points	
0 servings	0 points	

4. **How much oil** (1 Tbsp oil, 1/8 avocado, 8-10 black or green olives) are you eating each day?

		SCORE
More than 4 servings	0 points	
4 servings	3 points	
3 servings	2 points	
2 servings	1 point	
1 serving or less	0 points	

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

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

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

Water or decaffeinated tea	2 points	<b>SCORE</b>
Coffee or tea	1 point	
Fruit juice	0 points	
Soft drinks	0 points	
Alcohol	0 points	

7. How much **wine** (red or white) do you drink per day?

1 serving	2 points	<b>SCORE</b>
2 or more servings	0 points	

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

None or 1 serving	3 points	<b>SCORE</b>
More than 1 serving	0 points	

9. How many times per week do you eat **sweets** such as cookies, cakes, or ice cream?

None	3 points	<b>SCORE</b>
1 or more	0 points	

10. How many servings of **fatty, processed meats (fast food hamburger, sausage)** do you consume per week?

None	1 point	<b>SCORE</b>
1 serving or more	0 points	

11. How many servings of **grilled, broiled, or poached fish** do you consume per week?

2 or more servings	2 points	<b>SCORE</b>
1 serving	1 point	
None	0 points	

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

None	2 points	<b>SCORE</b>
1 or more	0 points	

<b>TOTAL SCORE:</b>	%
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**KEY**

SCORE	%
35	100
32	90
28	80
24	70
21	60
17	50
14	40
10	30
7	20
3	10