Name Sectio	n Date
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WELLNESS WORKSHEET I Evaluate Your Lifestyle

All of us want optimal health. But many of us do not know how to achieve it. Taking this quiz, adapted from one created by the U.S. Public Health Service, is a good place to start. The behaviors covered in the test are recommended for most Americans. (Some of them may not apply to people with certain diseases or disabilities or to pregnant women, who may require special advice from their physicians.) After you take the quiz, add up your score for each section.

	7 .5	Sometin	Never
Tobacco Use		G ₂	
1. I avoid smoking cigarettes.	4	1	0
2. I avoid using a pipe or cigars.	2	1	0
3. I avoid spit tobacco.	2	1	0
4. I limit my exposure to environmental tobacco smoke.	2	1	0
Tobacco Score:			
Alcohol and Other Drugs			
1. I avoid alcohol or I drink no more than 1 (women) or 2 (men) drinks a day.	4	1	0
I avoid using alcohol or other drugs as a way of handling stressful situations or problems in my life.	2	1	0
 I am careful not to drink alcohol when taking medications, such as for colds or allergies, or when pregnant. 		1	0
 I read and follow the label directions when using prescribed and over-the- counter drugs. 	2	1	0
Alcohol and Other Drugs Score:			
Nutrition			
 I eat a variety of foods each day, including seven or more servings of fruits and vegetables, depending on my calorie intake. 	3	1	0
2. I limit the amount of total fat and saturated and trans fat in my diet.	3	1	0
3. I avoid skipping meals.	2	1	0
4. I limit the amount of salt and added sugar I eat.	2	1	0
Nutrition Score:			
Exercise/Fitness			
1. I engage in moderate-intensity exercise for 150 minutes per week.	4	1	0
2. I maintain a healthy weight, avoiding being overweight or underweight.	2	1	0
3. I do exercises to develop muscular strength and endurance at least twice a week.	2	1	0
4. I spend some of my leisure time participating in physical activities such as gardening, bowling, golf, or baseball.	2	1	0
Exercise/Fitness Score:			

WELLNESS WORKSHEET I — continued Emotional Health	Almost always	Sometimes	Never
1. I enjoy being a student, and I have a job or do other work that I like.		1	0
2. I find it easy to relax and express my feelings freely.	2	1	0
3. I manage stress well.	2	1	0
 I have close friends, relatives, or others I can talk to about personal matters and call on for help. 	2	1	0
I participate in group activities (such as church and community organizations) or hobbies that I enjoy.	2	1	0
Emotional Health Score:			
Safety			
1. I wear a safety belt while riding in a car.		1	0
2. I avoid driving while under the influence of alcohol or other drugs.		1	0
3. I obey traffic rules and the speed limit when driving.		1	0
4. I read and follow instructions on the labels of potentially harmful products or substances, such as household cleaners, poisons, and electrical appliances.		1	0
5. I avoid using a cell phone while driving.	2	1	0
Safety Score:			
Disease Prevention			
1. I know the warning signs of cancer, diabetes, heart attack, and stroke.		1	0
2. I avoid overexposure to the sun and use sunscreens.		1	0
 I get recommended medical screening tests (such as blood pressure checks and Pap tests), immunizations, and booster shots. 		1	0
4. I practice monthly breast/testicle self-exams.		1	0
5. I am not sexually active <i>or</i> I have sex with only one mutually faithful, uninfected partner <i>or</i> I always engage in safer sex (using condoms) <i>and</i> I do not share needles to inject drugs.	2	1	0
Disease Prevention Score:			

What Your Scores Mean

Scores of 9 and 10–Excellent! Your answers show that you are aware of the importance of this area to wellness. More important, you are putting your knowledge to work for you by practicing good health habits. As long as you continue to do so, this area should not pose a serious health risk.

Scores of 6–8–Your health practices in this area are good, but there is room for improvement.

Scores of 3–5–Your health risks are showing!

Scores of 0–2–Your answers show that you may be taking serious and unnecessary risks with your health.