

1. **Do I eat when I'm not hungry, or not eat when my body needs nourishment?**
Yes No
2. **Do I go on eating binges for no apparent reason, sometimes eating until I'm stuffed or even feel sick?**
Yes No
3. **Do I have feelings of guilt, shame, or embarrassment about my weight or the way I eat?**
Yes No
4. **Do I eat sensibly in front of others and then make up for it when I am alone?**
Yes No
5. **Is my eating affecting my health or the way I live my life?**
Yes No
6. **When my emotions are intense — whether positive or negative — do I find myself reaching for food?**
Yes No
7. **Do my eating behaviors make me or others unhappy?**
Yes No
8. **Have I ever used laxatives, vomiting, diuretics, excessive exercise, diet pills, shots or other medical interventions (including surgery) to try to control my weight?**
Yes No
9. **Do I fast or severely restrict my food intake to control my weight?**
Yes No
10. **Do I fantasize about how much better life would be if I were a different size or weight?**
Yes No
11. **Do I need to chew or have something in my mouth all the time: food, gum, mints, candies or beverages?**
Yes No
12. **Have I ever eaten food that is burned, frozen or spoiled; from containers in the grocery store; or out of the garbage?**
Yes No
13. **Are there certain foods I can't stop eating after having the first bite?**
Yes No
14. **Have I lost weight with a diet or "period of control" only to be followed by bouts of uncontrolled eating and/or weight gain?**
Yes No
15. **Do I spend too much time thinking about food, arguing with myself about whether or what to eat, planning the next diet or exercise cure, or counting calories?**
Yes No