



How Healthy Are You?

A Quiz By Dr. Winston Craig

1. How much sweat-inducing physical activity do you do each week?

- a. 20 to 60 minutes most days
- b. 30 minutes a few times per week
- c. Very little, if any

2. When was the last time you had your blood pressure and cholesterol checked?

- a. Within the past two years
- b. Several years ago
- c. I can't remember

3. How often do you go to the dentist?

- a. Every six months for cleanings, or as often as my dentist recommends.
- b. Whenever I have a problem.
- c. Almost never

4. When was the last time you had a tetanus shot?

- a. Within the last 10 years
- b. Not since I was a child
- c. I've never had one, or I don't remember

5. What's your body-mass index? (BMI= lbs/(height)x(height) x 703)

- a. Between 18.5 and 24.9 (normal)
- b. Between 25 and 29.9 (overweight)
- c. Below 18.5 (underweight) or 30 or higher (obese)

6. How do you typically cope with stress?

- a. I regularly carve out time to recharge and/or talk with a friend or family member
- b. I don't know what to do. Mainly I feel overwhelmed
- c. I rely on harmful substances (such as alcohol or tobacco), food or another unhealthy habit to help me relax

7. How do you protect yourself from the sun?

- a. I slather on a moisturizer with SPF 15 every day and wear sunscreen on exposed areas when I'm outside
- b. I allow myself to tan once or twice a year when I'm on vacation
- c. I don't protect myself. I like to tan

8. When you feel a cold coming on, what do you do?

- a. Go to bed early and avoid sugary foods
- b. Take a multivitamin
- c. Keep on trucking – I don't have time to slow down!

9. Which of the following best describes your intake of fiber-rich foods, such as vegetables and whole grains?

- a. I have five or more servings daily, or I take a daily fiber supplement
- b. I have one or two servings per day
- c. I have a zero to 3 servings per week

10. Which of the following best describes your intake of calcium-rich foods, such as low-fat dairy products or calcium-fortified orange juice?

- a. I have three or more servings daily, or I take a daily calcium supplement (sorry, taking a multivitamin doesn't count)
- b. I have one or two servings per day
- c. I have a zero to 3 servings per week

11. How much water do you drink daily?

- a. 8 or more glasses
- b. 4-7 glasses
- c. Less than 3 glasses

12. How often do you treat aches with an over-the-counter pain reliever?

- a. I take one once or twice a year
- b. I use one occasionally
- c. I pop a pain reliever most days

13. How often do you eat foods with high sugar content and little nutritional value, such as pop, fruit drinks and pastries; deep-fried fast food; and processed foods, such as deep-fried ravioli, potato chips and croissants?

- a. 1 time or less a week
- b. 2-5 times a week
- c. Every day – I love that stuff!

14. How many hours of sleep do you get per night (be honest!)?

- a. 7-8 hours
- b. 5-6 hours
- c. 4 or less

15. How familiar are you with the medical history of your relatives?

- a. I know the medical histories of my parents and grandparents
- b. I know the medical histories of my parents
- c. I don't have a clue

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