

Analyzer Software Questions

Date: _____

Name: _____

Current Height: _____

Frame Size(measure wrist): _____

Current Weight: _____

RMR: _____

Pregnancy Status: Pregnant: _____ Lactating: _____ Neither: _____

Occupation Activity Level:

Stationary or Office Work: _____

Very light: _____

Light: _____

Moderate: _____

Physical Work: _____

Hard Physical Work: _____

Work Schedule: Hours per week: _____ **Work Days:** Mon___ Tues___ Wed___ Thur___ Fri___ Sat___ Sun___

Sleep Schedule: Work Day: _____ Non-Work Day: _____

Exercise Plan: Sedentary: _____ Very Light: _____ Light: _____ Moderate: _____ Vigorous: _____ Strenuous: _____

Hours per week: _____ Steps Per Day: _____

Weight Plan: Target Weight: _____ Target Date: _____

Additional Notes: _____
