Eating Disorders Checklist

This checklist is designed as a measure of disorder symptomatology. It must be interpreted in the context of individual client circumstances and as such should be used only in combination with a comprehensive medical and clinical assessment. It is NOT a stand-alone diagnostic tool.

A) Persistent Behaviours Interfering with Weight Gain
- Restriction of energy intake (food and drink) relative to physical requirements
- Engagement in purging behaviours (e.g. self-induced vomiting, excessive exercise)

B) Concerns About Eating and Weight
- Intense fear of weight gain or of becoming fat
- Disturbance in the way one’s body weight and shape is perceived, placing over-importance on the influence of body weight or shape on self-evaluation, or persistently failing to recognise the seriousness of low body weight

C) Binge Eating Behaviours
- Eating an amount of food in a discrete time period that is definitely larger than what is normal for most individuals in a similar timeframe and circumstance, and feeling out of control whilst doing so
- Eating more rapidly than normal
- Eating until uncomfortably full
- Eating large amounts when not hungry
- Eating alone due to embarrassment over the amount one is eating
- Feeling disgusted, depressed or guilty after the eating episode

D) Physical symptoms
- Less than minimally expected body weight for age, gender, development stage and health status.

If a patient has experienced multiple symptoms from any or all of the above categories for at least a 3 month period, they may be experiencing an Eating Disorder such as anorexia nervosa, bulimia nervosa or binge eating disorder.

In this case, it is recommended that they be referred to a psychologist for a more comprehensive assessment. To book an appointment with a psychologist, contact Strategic Psychology on (02) 6262 6157 or email support@strategicpsychology.com.au.

Reference: