

**Dubrow Physical Therapy and Golf Fitness**  
**601 West Plano Parkway, Suite 141-A**  
**Plano, TX 75075**

**Patient Nutrition Form**

**Name:** \_\_\_\_\_

**Please provide the number of servings per day.** In general, the palm of your hand = 1 serving

**Caffeine:** Yes No

How many **ounces** and **what type** of caffeine **per day**? (medium coffee mug is 10 oz.)

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**Alcohol:** Yes No

How many **servings** and **what type** of alcohol **per week**? (1= 1 beer; 5 oz of wine; 1 oz of liquor)

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**Fried Foods:** Yes No

How many **servings** and **what type** of fried food **per week**? (1= 1/2 cup French fries; hamburger; fast food; fried chicken. The palm of your hand = 1 serving)

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**Gluten (Wheat Products):** Yes No

How many **servings** of gluten **per week**? (1= 1 slice of bread; 1/2 cup pasta; 1/2 bagel; palm of crackers; 2-3 small cookies)

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**Sugar:** Yes No

How many **servings** of sugar **per day**? (1 tsp of sugar is a serving; 1 packet of sugar; 1 can of soda contains 9<sup>1</sup>/<sub>3</sub> tsp of sugar)

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**Soda:** Yes No

How many **cans** of soda **per week**?

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**Grain Fed Red Meat:** Yes No

How many **servings** of **grain fed beef per week**? If you don't specifically buy grass fed, and if that 'grass fed' isn't from a known organic source, you are buying grain fed red meat. When you eat at a restaurant, the beef is grain fed. (1= palm of your hand)

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**Dairy Fat:** Yes No

How many **servings** of dairy fat **per day**? (1= 1 tbsp butter; 1/2 cup 2% or whole milk; 4 oz of cheese)

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**Shellfish:** Yes No

How many **servings** of shellfish **per week**? (1= 4 oz of shrimp; lobster; crab; clams, mussels)

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**Fast Food:** Yes No

How many **times** do you eat fast food **per week**?

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**Water:** Yes No

How many **ounces** do you drink **per day**? (A large cup from a fast food restaurant is usually 32 oz. A regular water glass is usually 8 oz. Purchased water bottles come in 8oz, 16oz, and 20 oz)

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**Smoking:** Yes No

How many cigarettes **per day**? \_\_\_\_\_ How many cigars **per week**? \_\_\_\_\_