

# Page Love's Disordered Eating and Exercise Resource Handout Kit

Are you constantly trying to create take-away materials that support what you teach clients / patients about healthy eating? Now you can use that time more effectively, while providing resources to help them make healthy nutritional choices. This needs-oriented packet contains original handouts, with a space provided at top right where you can add your business card to personalize each, plus space at the bottom of most for your **additional recommendations**. Here's what the packet contains:

<b>DISORDERED EATING AND EXERCISE Handouts</b>	<b>Fact Sheet</b>	<b>Worksheet</b>	<b>Helpful List(s)</b>
Activity/Movement Journal		X	
Body Image and Self Esteem Worksheet: Positive Self-Talk		X	
Carbohydrate Fears	X	X	
Choosing and Enjoying Foods	X		X
Compulsive Exercise: Risks and Recovery Goals (2 pg)			X
Considerations for Returning to Exercise	X		X
Controlling Behaviors			X
Dealing with Food, Weight and Body Image			X
Dealing with Nutrition, Image and Exercise Obsession		X	X
Decreasing Your Obsessions: Nutrition and Movement Goals		X	
Dining-out Fears	X	X	X
Dining-out Tips	X		X
Evaluating the Nutritional Adequacy of Your Eating Style		X	X
Fat Fears	X	X	
Food Mood Activity Journal	X	X	X
Healthy Menu Planning (2 pg)	X		X
How Are You Doing on Your Nutritional Recovery?		X	
How Are You Doing with Your Activity/Movement Plan?		X	
How to Fight Back Puzzling Diet Fads	X		X
Meat Alternatives & Vegetarian Proteins			X
Mindful Eating			X
Protein Fears: Are you meeting your protein needs?	X	X	
Red Meat: Why is it Good For You?	X		X
Scaled? Try These Tips to <i>Kick the Scale</i>			X
Struggle with Counting?		X	
Top Ten Reasons Not to Weigh Yourself			X
Top Ten Ways to Increase Calcium			X
Top Ten Ways to Decrease Compulsive Exercise			X
Ways to Curb Overeating	X		X
Ways to Decrease Binging/Purging		X	
For the Practitioner: Nutrition Assessment of Disordered Eating Questionnaire (3 pg)		X	

Individual handouts are \$10 each. Complete *Disordered Eating Packet* (31 handouts) is just \$150 – that's a savings of over 30%! Nutrition Assessment Questionnaire is for free (Available in MS Word and PDF formats.)

**See the order form on the back.**

# Page Love's Disordered Eating Resource Kit *Order Form*

Use this form to place your order for handouts. Your order will be mailed or emailed to you upon payment clearance.

Check one	Full DISORDERED EATING Resource Kit (31 handouts)	Cost	Quantity	Total
	Microsoft Word version	\$150	X ____	
	PDF version	\$150	X ____	

Check all that apply	Individual Handouts from the DISORDERED EATING Resource Kit	Cost	Quantity	Total
	Activity/Movement Journal	\$10	X ____	
	Body Image and Self Esteem Worksheet: Positive Self-Talk	\$10	X ____	
	Carbohydrate Fears	\$10	X ____	
	Choosing and Enjoying Foods	\$10	X ____	
	Compulsive Exercise: Risks and Recovery Goals (2 pg)	\$10	X ____	
	Considerations for Returning to Exercise	\$10	X ____	
	Controlling Behaviors	\$10	X ____	
	Dealing with Food, Weight and Body Image	\$10	X ____	
	Dealing with Nutrition, Image and Exercise Obsession	\$10	X ____	
	Decreasing Your Obsessions: Nutrition and Movement Goals	\$10	X ____	
	Dining-out Fears	\$10	X ____	
	Dining-out Tips	\$10	X ____	
	Evaluating the Nutritional Adequacy of Your Eating Style	\$10	X ____	
	Fat Fears	\$10	X ____	
	Food Mood Activity Journal	\$10	X ____	
	Healthy Menu Planning (2 pg)	\$10	X ____	
	How Are You Doing on Your Nutritional Recovery?	\$10	X ____	
	How Are You Doing with Your Activity/Movement Plan?	\$10	X ____	
	How to Fight Back Puzzling Diet Fads	\$10	X ____	
	Meat Alternatives & Vegetarian Proteins	\$10	X ____	
	Mindful Eating	\$10	X ____	
	Protein Fears: Are you meeting your protein needs	\$10	X ____	
	Red Meat: Why is it Good For You?	\$10	X ____	
	Scaled? Try These Tips to Kick the Scale	\$10	X ____	
	Struggle with Counting?	\$10	X ____	
	Top Ten Reasons Not to Weigh Yourself	\$10	X ____	
	Top Ten Ways to Increase Calcium	\$10	X ____	
	Top Ten Ways to Decrease Compulsive Exercise	\$10	X ____	
	Ways to Curb Overeating	\$10	X ____	
	Ways to Decrease Binging/Purging	\$10	X ____	
	For the Practitioner: Nutrition Assessment of Disordered Eating Questionnaire (3 pg)	\$10	X ____	

Name \_\_\_\_\_ Email Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone number (in case we need to contact you with questions) \_\_\_\_\_

Credit card number \_\_\_\_\_  Visa  MC  Amex

Expiration Date \_\_\_\_\_ Security code \_\_\_\_\_  Other: \_\_\_\_\_

Signature: \_\_\_\_\_