

# Health Questionnaire Responses for Mike Kearn

| Health Questions   | Responses              |
|--|------------------------|
| To what extent do you agree with this statement: "On most days, I feel rested when I get out of bed in the morning."   | Somewhat disagree      |
| To what extent do you agree with this statement: "On most days, I am happy with my energy level."  | Somewhat disagree      |
| To what extent do you agree with this statement: "On most days, I feel healthy and fit."   | Somewhat agree         |
| Do you regularly experience back pain?   | No                     |
| Have you ever had back surgery?  | No                     |
| Do you have a bowel movement at least once per day?  | Yes                    |
| Do you have any chronic digestive issues such as reflux, IBS, Crohn's disease, celiac disease, constipation, etc.?   | No                     |
| Have you had any surgery that limits your ability to exercise?   | No                     |
| Are you currently being treated for, or are you aware of having any thyroid problems?  | No                     |
| How many days per week do you perform endurance training (sustained physical activity for 1 hour or more)?   | 0 days                 |
| How many days per week do you perform strength training exercises (weight lifting, push-ups, pull-ups, etc.)?  | 1-3 days               |
| Do you obtain at least 150 minutes per week of moderate intensity exercise, or 75 minutes or more per week of vigorous exercise? Moderate intensity is equivalent to a brisk walk or bike ride, whereas vigorous is a jog or sprint. | Yes                    |
| How many servings of processed carbs do you eat each day, on average? Examples of 1 serving of processed carbs include 1 slice of bread, 1/2 cup white rice, 5-8 crackers, 1/2 cup pasta.  | 2 servings             |
| With how many meals per day do you consume animal foods (meat, fish, chicken/turkey, bacon, sausage, dairy milk, dairy cheese, dairy yogurt, dairy ice cream, butter, cream, etc.)?  | 2 meals                |
| How many servings of fruits do you eat each day, on average? Examples of 1 serving of fruit include 1 small apple, 1 large banana or 1 cup of grapes.  | 1 serving              |
| How many servings of vegetables (excluding fried vegetables like French fries) do you eat each day, on average? Examples of 1 serving of vegetables include 1 cup of baby carrots, 2 cups of leafy greens or 1 large tomato.         | 3 servings             |
| How many minutes per day is your skin exposed to the sun, on average?  | 30 minutes             |
| How many hours do you usually spend sitting or reclining on a typical day (including sitting/reclining at work, home, traveling in a car/bus/train, watching TV, reading, using computer, etc. but not including sleeping)?          | 11 hours               |
| Do you currently smoke?  | Yes, I currently smoke |
| How many ounces of hard liquor do you have each week, on average?  | 3 ounces               |
| How many glasses of beer or wine do you have each week, on average?  | 4 glasses              |

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| How many hours per day do you sleep, on average?   | 5 hours                |
| Have you ever had bariatric surgery, lap band or stomach stapling?   | No                     |
| To what extent do you agree with this statement: "On most days, I feel rested when I get out of bed in the morning."   | Somewhat disagree      |
| To what extent do you agree with this statement: "On most days, I am happy with my energy level."  | Somewhat disagree      |
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