

The EAT-26 is the most widely used screening measure for eating disorders. The EAT-26 can be used in group or individual settings and is designed to be administered by mental health professionals, school counselors, coaches, camp counselors, and others with interest in gathering information to determine if an individual should be referred to a specialist for evaluation for an eating disorder. It is not designed to make a diagnosis of an eating disorder or to take the place of a professional diagnosis or consultation. Screening for eating disorders is based on the assumption that early identification can lead to earlier treatment, thereby reducing serious physical and psychological complications or even death. For more information, consult the EAT-26 website: ([www.EAT-26.com](http://www.EAT-26.com)).

**Instructions:** It will take you about 5 minutes to complete the EAT-26. There are no right or wrong answers. Please answer each question as accurately, honestly, and completely as possible. All of your results are either anonymous or confidential.

If you meet any of the "referral criteria" below, you should seek an evaluation by a professional who specializes in the treatment of eating disorders. It is important to stress that the EAT-26 has limited ability to accurately predict who should be referred for further evaluation. Studies have shown that high scores do not necessarily mean that a person has an eating disorder; however, it does indicate that the person has significant concerns about weight and shape. It is also important to remember that a low score on the EAT-26 does not mean that an eating disorder is not present. Denial or minimizing symptoms are common problems in those with serious eating disorders. Regardless of your score, if you are suffering from feelings which are causing you concern or interfering with your daily functioning, you should seek an evaluation from a trained mental health professional.

The five criteria for referring people for a follow-up evaluation based on a national screening study:

1. A score of more than 20 on the EAT-26.
2. A "yes" to any of the behavioral screening questions.
3. Body mass index (BMI) below 18 (*see table on back*).
4. A person has significant eating or weight concerns regardless of how questions are answered.
5. The health professional, based on clinical interview, believes that there is reason for referral.

The table below indicates the body weights for heights that are considered to be "significantly underweight" for most people 18 years old or older as represented by a Body Mass Index of 18.0. BMI is a simple method of evaluating body weight taking height into consideration. It applies to both men and women. The table below represents a conversion of the BMI into pounds and inches. There is some controversy regarding whether or not BMI is the best method of determining relative body weight and it is important to recognize that it is possible for people to be quite malnourished even though they are above the weight listed in the table below.

In order to determine if a person is "significantly underweight", locate their height (without shoes) on the table below and see if the corresponding body weight (in light indoor clothing) is at or below that listed. If so, the person can be considered "significantly underweight" and should be referred for a follow-up evaluation.

<b>Height</b> (inches)	<b>Weight</b> (pounds)	<b>Height</b> (inches)	<b>Weight</b> (pounds)
4'10"	86	5'8"	118
4'10½"	88	5'8½"	120
4'11"	89	5'9"	121
4'11½"	90	5'9½"	124
5'0"	91	5'10"	125
5'0½"	93	5'10½"	127
5'1"	95	5'11"	128
5'1½"	96	5'11½"	131
5'2"	99	6'0"	132
5'2½"	100	6'0½"	134
5'3"	101	6'1"	135
5'3½"	103	6'1½"	138
5'4"	105	6'2"	140
5'4½"	106	6'2½"	141
5'5"	108	6'3"	144
5'5½"	109	6'3½"	146
5'6"	112	6'4"	147
5'6½"	113	6'4½"	149
5'7"	114	6'5"	152
5'7½"	117	6'5½"	154

*Note: For those under 18 years old, the BMI levels are lower in determining if the person is significantly underweight. For more information on BMI, consult the EAT-26 website ([www.EAT-26.com](http://www.EAT-26.com)) to determine these levels by age.*