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**Psychosocial Factors Associated with Weight Loss: An Ancillary Study to LABS-2
The Body Image Quality of Life Inventory (BIQOL) – Version: 06/30/2006 FORMV**

Form Completion Date __ __ / __ __ / 20__ __ **BIDATE**
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Instructions: Different people have different feelings about their physical appearance. These feelings are called “body image.” Some people are generally satisfied with their looks, while others are dissatisfied. At the same time, people differ in terms of how their body-image experiences affect other aspects of their lives. Body image may have positive effects, negative effects, or no effect at all. Listed below are various ways that your own body image may or may not influence your life. For each item, check how and how much your feelings about your appearance affect that aspect of your life.

	Very Negative Effect (-3)	Moderate Negative Effect (-2)	Slight Negative Effect (-1)	No Effect (0)	Slight Positive Effect (1)	Moderate Positive Effect (2)	Very Positive Effect (3)
1. My basic feelings about myself—feelings of personal adequacy and self-worth. BIPERA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. My feelings about my adequacy as a man or woman—feelings of masculinity or femininity. BIFMF	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. My interactions with people of my own sex. BIOWNSEX	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. My interactions with people of the other sex. BIOTHSEX	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. My experiences when I meet new people. BINEWP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. My experiences at work or at school. BIWORK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. My relationships with friends. BIFRIEND	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. My relationships with family members. BIFAM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. My day-to-day emotions. BIEMOT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. My satisfaction with my life in general. BILIFE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. My feelings of acceptability as a sexual partner. BISEXP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. My enjoyment of my sex life. BISLIFE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. My ability to control what and how much I eat. BIEAT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. My ability to control my weight. BIWGT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. My activities for physical exercise. BIEXER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Very Negative Effect (-3)	Moderate Negative Effect (-2)	Slight Negative Effect (-1)	No Effect (0)	Slight Positive Effect (1)	Moderate Positive Effect (2)	Very Positive Effect (3)
16. My willingness to do things that might call attention to my appearance. BIAPPER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. My daily "grooming" activities (i.e., getting dressed and physically ready for the day). BIGROOM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. How confident I feel in my everyday life. BICONF	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. How happy I feel in my everyday life. BIHAPPY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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