English

Self-Report Version of the ODES-Y							
In the last 4 weeks how often did you...							
1	worry so much about your weight, shape, or muscles that you couldn't get it out of your head?	Never	Rarely	Sometimes	Often	Always	
		1	2	3	4	5	
2	not eat, or eat in a way to change your weight, shape, or muscles?	Never	Once or Twice	Once or Twice Each Week	3 or 4 Times Each Week	5 or 6 Times Each Week	Daily or Almost Daily
		1	2	3	4	5	6
3	binge on food (eaten what other people would say is an unusually large amount of food such as a whole litre of ice cream, in a few hours?)	1	2	3	4	5	6
4	feel like you couldn't stop eating or couldn't control how much you ate?	1	2	3	4	5	6

Instructions

Total Score - Risk level

- 1-4: low risk
- 5-7: moderate risk
- 8 or greater: high risk

Total Score - Screening decision

- 1-4: no need to screen further
- 5 or greater: merits further screening and/or assessment

Domain Scoring - recommended (see traffic light scoring)

- Who is positive on cognitive domain (3 or greater on Q1)
- Who is positive on behavioural domain (2 or greater on Q2, Q3 or Q4)
- Positive on cognitive and behavioural domain (positive on the screener and require additional screening or assessment)

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