

## FOOD JOURNAL

- Please use this page to record three days of actual food intake prior to your appointment.
- Record all information as soon as possible after food has been consumed.
- Describe all foods and beverages consumed as accurately and in as much detail as possible including estimated amounts, brand names, cooking method, etc.
- Note all GI symptoms such as bloat, pain, gas, constipation, diarrhea, etc. and track your elimination pattern.
- Include comments about eating habits and emotions and other factors such as speed eating, when a meal was eaten out, and any additional details that may be important.

<b>DAY 1</b> Date: _____	Food and Beverages	GI Symptoms	Emotions
BREAKFAST Time: _____			
LUNCH Time: _____			
DINNER Time: _____			
SNACKS Time: _____			

<b>DAY 2</b> Date: _____	Food and Beverages	GI Symptoms	Emotions
BREAKFAST Time: _____			
LUNCH Time: _____			
DINNER Time: _____			
SNACKS Time: _____			
<b>DAY 3</b> Date: _____	Food and Beverages	GI Symptoms	Emotions
BREAKFAST Time: _____			

LUNCH Time: _____			
DINNER Time: _____			
SNACKS Time: _____			