# Food and Symptom Diary

# Please complete and bring to your appointment. If you cannot download or print, you can record information on a piece of paper or take photo’s of your meals.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Your details** | | | | | |
| Name |  | | DOB |  | |
| Date |  | |  |  | |
|  | | | |  |
| **Typical daily intake – Day 1** | | | | **Symptoms and observations** |
| Breakfast | |  | | * *Use this section to record stool frequency and type (using the Bristol stool chart below).* * *Include other symptoms experienced such as wind, bloating or discomfort.* * *It may be useful to score your symptoms daily from 1 to 5 (1 = manageable symptoms, 5 = unmanageable).* |
| Mid-Morning | |  | |
| Lunch | |  | |
| Mid-Afternoon | |  | |
| Evening meal | |  | |
| Supper | |  | |
| Drinks | |  | |

|  |  |  |
| --- | --- | --- |
| **Typical daily intake – Day 2** | | **Symptoms and observations** |
| Breakfast |  | * *Use this section to record stool frequency and type (using the Bristol stool chart below).* * *Include other symptoms experienced such as wind, bloating or discomfort.* * *It may be useful to score your symptoms daily from 1 to 5 (1 = manageable symptoms, 5 = unmanageable).* |
| Mid-Morning |  |
| Lunch |  |
| Mid-Afternoon |  |
| Evening meal |  |
| Supper |  |
| Drinks |  |

|  |  |  |
| --- | --- | --- |
| **Typical daily intake – Day 3** | |  |
| Breakfast |  | * *Use this section to record stool frequency and type (using the Bristol stool chart below).* * *Include other symptoms experienced such as wind, bloating or discomfort.* * *It may be useful to score your symptoms daily from 1 to 5 (1 = manageable symptoms, 5 = unmanageable).* |
| Mid-Morning |  |
| Lunch |  |
| Mid-Afternoon |  |
| Evening meal |  |
| Supper |  |
| Drinks |  |

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A chart of different types of sausages

Description automatically generated