

Low Histamine FOOD JOURNAL

DATE			
MORNING CHECK			
BREAKFAST			
POST BREAKFAST SYMPTOM CHECK			
LUNCH			
POST LUNCH SYMPTOM CHECK			
1 PM OZ OF WATER			
SNACK			
POST SNACK SYMPTOM CHECK			
DINNER			
POST DINNER SYMPTOM CHECK			
DAILY TOTAL OZ OF WATER			
SUPPLIMENTS? Y/N			
HIT WATER GOAL? Y/N			
EVENING SYMPTOM CHECK			



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JOURNAL GLOSSARY AND HOW-TO GUIDE

JOURNAL GLOSSARY

Date: the day you are recording data for

Morning Check: After you wake up but before you eat record how you are feeling **overall** using the 1-5 scale described below. If you have particular symptoms you want to track, rate each symptom as well.

Breakfast: record all the ingredients that were in your breakfast.

Post-Breakfast Symptom Check: 30 mins after you eat record how you are feeling overall using the 1-5 scale described below. If you have particular symptoms you want to track, rate each symptom as well.

Lunch: record all the ingredients that were in your lunch.

Post Lunch Symptom Check: 30 mins after you eat record how you are feeling overall using the 1-5 scale described below. If you have particular symptoms you want to track, rate each symptom as well.

1pm OZ of Water?: Record the amount of water or tea you drank by 1pm.

Snack: record all the ingredients that were in your snack.

Post Snack Symptom Check: 30 mins after you eat record how you are feeling overall using the 1-5 scale described below. If you have particular symptoms you want to track, rate each symptom as well.

Dinner: record all the ingredients that were in your dinner.

Post Dinner Symptom Check: 30 mins after you eat record how you are feeling overall using the 1-5 scale described below. If you have particular symptoms you want to track, rate each symptom as well.

Daily Total OZ of Water: Record the amount of water or tea you drank by the end of the day.

Supplements? Y/N: Did you take your supplements today, Yes or No?

Hit Water Goal? Y/N: Did you hit your water goal today, Yes or No?

Evening Symptom Check: Just before you go to bed, record how you are feeling overall using the 1-5 scale described below. If you have particular symptoms you want to track, rate each symptom as well.

SYMPTOM SCALE:

I like to use a 1-5 scale where 1 means you feel terrible and 5 means you feel fantastic.

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HOW-TO GUIDE

The power of this guide comes from being able to quickly scan your day and see 3 days in a row. Being able to see how your symptoms fluctuate throughout the day and how they change based on food, water, and supplements is powerful information. It's a great way to determine what foods trigger your symptoms and a wonderful resource when you are testing new foods.

HOW TO

Keep this journal out during the day so you can see it and be reminded to track your information. As you move through your day, track your food, water, symptoms, and supplements.

It might help you to create a "Scale Key" by associating words/phrases to your 1- 5 scale.

For example 1: Awful, having a hard time functioning today. 3: Doing ok. Not feeling great but still able to function. 5: Feeling amazing! Symptoms are very low/non-existent.

TESTING FOOD

If you are testing food, I suggest you test for 3 days. Start a new 3-day journal page and indicate at the top of the page which food item you are testing.

SYMPTOM SCALE Key

1:

2:

3:

4:

5:

