

Food Experience Journal

During the post-purification program, write down your experiences with different foods. This will help guide you and your health care professional to determine the best long-term diet for you.

Day 1 Good luck on your journey toward better health!

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 2

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 3

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 4

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 5

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 6

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 7

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 8

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 9

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 10

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 11

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 12

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 13

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 14

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 15

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 16

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 17

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 18

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 19

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 20

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 21

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 22

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 23

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 24

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 25

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 26

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 27

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 28

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 29

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____

Day 30

What did you eat today?

Breakfast _____

Lunch _____

Dinner _____

Other _____

Food Group Being Re-introduced (circle) Dairy Grains Shellfish Eggs

Why did I choose it?

Do I feel better or worse after eating it?

Are you experiencing (circle all that apply):

Low energy level High energy level Headaches Digestive issues Congestion

Other: _____