

NAME:

DATE:

GENERAL FOOD DIARIES

Over the next few weeks you will record your intake for meals and snacks, being conscious of the timing and portions of the foods you are eating. After each intake monitor your body's response to the food and record any symptoms experienced and the timing.

Meals	Diet		Response	
	Portion	Food Item	Time	GI Symptoms
Breakfast Time:				
Lunch Time :				
Dinner Time:				
Snacks Time:				

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Questions and Challenges

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Questions and Challenges