Brain Health and Nutrition Assessment Form[™] (BHNAF)

 Name:
 Age:
 Sex:
 Date:

Please circle the appropriate number on all questions below. 0 as the least/never to 3 as the most/always.

SECTION 1

Low brain endurance for focus and concentration	0	1	2	3
Cold hands and feet	0	1	2	3
Must exercise or drink coffee to improve brain function	0	1	2	3
• Poor nail health	0	1	2	3
Fungal growth on toenails	0	1	2	3
• Must wear socks at night	0	1	2	3
Nail beds are white instead of pink	0	1	2	3
• The tip of the nose is cold	0	1	2	3

SECTION 2

• Irritable, nervous, shaky, or light-headed between meals	0	1	2	3
Feel energized after meals	0	1	2	3
• Difficulty eating large meals in the morning	0	1	2	3
• Energy level drops in the afternoon	0	1	2	3
• Crave sugar and sweets in the afternoon	0	1	2	3
• Wake up in the middle of the night	0	1	2	3
Difficulty concentrating before eating	0	1	2	3
Depend on coffee to keep going	0	1	2	3

SECTION 3

Fatigue after meals	0	1	2	3
Sugar and sweet cravings after meals	0	1	2	3
• Need for a stimulant, such as coffee, after meals	0	1	2	3
Difficulty losing weight	0	1	2	3
Increased frequency of urination	0	1	2	3
Difficulty falling asleep	0	1	2	3
Increased appetite	0	1	2	3

SECTION 4

•	Always have projects and things that need to be done	0	1	2	3
•	Never have time for yourself	0	1	2	3
•	Not getting enough sleep or rest	0	1	2	3
•	Difficulty getting regular exercise	0	1	2	3
•	Feel that you are not accomplishing your life's purpose	0	1	2	3

SECTION 5

Dry and unhealthy skin	0	1	2	3
Dandruff or a flaky scalp	0	1	2	3
Consumption of processed foods that				
are bagged or boxed	0	1	2	3
Consumption of fried foods	0	1	2	3
Difficulty consuming raw nuts or seeds	0	1	2	3
• Difficulty consuming fish (not fried)	0	1	2	3
• Difficulty consuming olive oil, avocados,				
flax seed oil, or natural fats	0	1	2	3
SECTION 6				
Difficulty digesting foods	0	1	2	3
Constipation or inconsistent bowel movements	0	1	2	3
Increased bloating or gas	0	1	2	3
Abdominal distention after meals	0	1	2	3
Difficulty digesting protein-rich foods	0	1	2	3
Difficulty digesting starch-rich foods	0	1	2	3
• Difficulty digesting fatty or greasy foods	0	1	2	3
• Difficulty swallowing supplements or large bites of food	0	1	2	3
Abnormal gag reflex	Yes or No			No
SECTION 7				
• Brain fog (unclear thoughts or concentration)	Yes or No		No	
Pain and inflammation	Yes or No		No	

Pain and inflammation	Yes or No			
Noticeable variations in mental speed	Yes or No			
Brain fatigue after meals	0 1 2 3			
• Brain fatigue after exposure to chemicals, scents, or pollutants	0 1 2 3			
• Brain fatigue when the body is inflamed	0 1 2 3			

SECTION 8

Grain consumption leads to tiredness	0	1	2	3	
• Grain consumption makes it difficult to focus and concentrate	0	1	2	3	
• Feel better when bread and grains are avoided	0	1	2	3	
• Grain consumption causes the development of any symptoms	0	1	2	3	
• A 100% gluten-free diet	Ye	Yes or No			

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Symptom groups listed on this form are not intended to be used as a diagnosis of any disease or condition.