## Brain Health and Nutrition Assessment Form $^{\text{\tiny TM}}$ (BHNAF)

Name:				_Age	: Sex: Date:				
Please circle the appropriate number on all questions belo	ow.	0 a	ıs t	he leas	t/never to 3 as the most/always.				
SECTION 1					SECTION 5				
Low brain endurance for focus and concentration	0	1	2	3	Dry and unhealthy skin	0	1	2	3
Cold hands and feet	0	1	2	3	<ul> <li>Dandruff or a flaky scalp</li> </ul>	0	1	2	3
• Must exercise or drink coffee to improve brain function	0	1	2	3	<ul> <li>Consumption of processed foods that</li> </ul>				
• Poor nail health	0	1	2	3	are bagged or boxed	0	1		
• Fungal growth on toenails	0	1	2	3	Consumption of fried foods	-		2	
• Must wear socks at night	0	1	2	3	Difficulty consuming raw nuts or seeds		1		
• Nail beds are white instead of pink	0	1	2	3	Difficulty consuming fish (not fried)	0	1	2	3
• The tip of the nose is cold	0	1	2	3	<ul> <li>Difficulty consuming olive oil, avocados, flax seed oil, or natural fats</li> </ul>	0	1	2	3
SECTION 2					SECTION 6				
$\bullet \ \ Irritable, nervous, shaky, or light-headed between meals$	0	1	2	3	Difficulty digesting foods	0	1	2	3
• Feel energized after meals	0	1	2	3	• Constipation or inconsistent bowel movements	0	1	2	3
• Difficulty eating large meals in the morning	0	1	2	3	<ul> <li>Increased bloating or gas</li> </ul>	0	1	2	3
• Energy level drops in the afternoon	0	1	2	3	Abdominal distention after meals	0	1	2	3
• Crave sugar and sweets in the afternoon	0	1	2	3	<ul> <li>Difficulty digesting protein-rich foods</li> </ul>	0	1	2	3
• Wake up in the middle of the night	0	1	2	3	<ul> <li>Difficulty digesting starch-rich foods</li> </ul>	0	1	2	3
Difficulty concentrating before eating	0	1	2	3	<ul> <li>Difficulty digesting fatty or greasy foods</li> </ul>	0	1	2	3
Depend on coffee to keep going	0	1	2	3	• Difficulty swallowing supplements or large bites of food	0	1	2	3
					Abnormal gag reflex	Ye	es o	r N	Vo
SECTION 3					SECTION 7				
Fatigue after meals	0	1	2	3	• Brain fog (unclear thoughts or concentration)	Ye	es o	r N	No
Sugar and sweet cravings after meals	0	1	2	3	Pain and inflammation	Ye	es o	r N	No
• Need for a stimulant, such as coffee, after meals	0	1	2	3	Noticeable variations in mental speed	Ye	es o	r N	No
Difficulty losing weight	0	1	2	3	Brain fatigue after meals	0	1	2	3
Increased frequency of urination	0	1	2	3	Brain fatigue after exposure to chemicals, scents,	•		•	•
Difficulty falling asleep	0	1	2	3	or pollutants	0		2	
Increased appetite	0	1	2	3	Brain fatigue when the body is inflamed	U	1	2	3
SECTION 4					SECTION 8				
Always have projects and things that need to be done	0	1	2	3	Grain consumption leads to tiredness	0	1	2	3
• Never have time for yourself	0	1	2	3	Grain consumption makes it difficult to focus	•		_	_
Not getting enough sleep or rest	0	1	2	3	and concentrate		1		
• Difficulty getting regular exercise	0	1	2	3	Feel better when bread and grains are avoided	U	1	2	3
Feel that you are not accomplishing your life's purpose	0	1	2	3	<ul> <li>Grain consumption causes the development of any symptoms</li> </ul>	0	1	2	3
					• A 100% gluten-free diet	Ye	es o	r N	No

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

SECTION 9		SECTION 12	
A diagnosis of celiac disease, gluten sensitivity, hypothyroidism, or an autoimmune disease  Family members who have been diagnosed with an autoimmune disease  Family members who have been diagnosed		A decrease in visual memory (shapes and images)	Yes or No
	Yes or No	A decrease in verbal memory	0 1 2 3
	Yes or No	Occurrence of memory lapses	0 1 2 3
	100 01 110	A decrease in creativity	0 1 2 3
with celiac disease or gluten sensitivity	Yes or No	A decrease in comprehension	0 1 2 3
Changes in brain function with stress, poor sleep,		Difficulty calculating numbers	0 1 2 3
or immune activation	0 1 2 3	Difficulty recognizing objects and faces	0 1 2 3
		A change in opinion about yourself	0 1 2 3
		Slow mental recall	0 1 2 3
SECTION 10		SECTION 13	
A loss of pleasure in hobbies and interests	0 1 2 3	A decrease in mental alertness	0 1 2 3
Feel overwhelmed with ideas to manage	0 1 2 3	A decrease in mental speed	0 1 2 3
Feelings of inner rage or unprovoked anger	0 1 2 3	A decrease in concentration quality	0 1 2 3
Feelings of paranoia	0 1 2 3	Slow cognitive processing	0 1 2 3
Feelings of sadness for no reason	0 1 2 3	Impaired mental performance	0 1 2 3
A loss of enjoyment in life	0 1 2 3	An increase in the ability to be distracted	0 1 2 3
A lack of artistic appreciation	Yes or No	Need coffee or caffeine sources to improve	
Feelings of sadness in overcast weather	0 1 2 3	mental function	0 1 2 3
A loss of enthusiasm for favorite activities	0 1 2 3		
A loss of enjoyment in favorite foods	0 1 2 3		
A loss of enjoyment in friendships and relationships	0 1 2 3		
Inability to fall into deep, restful sleep	0 1 2 3		
Feelings of dependency on others	0 1 2 3		
Feelings of susceptibility to pain	0 1 2 3		
SECTION 11		SECTION 14	
Feelings of worthlessness	0 1 2 3	Feelings of nervousness or panic for no reason	0 1 2 3
Feelings of hopelessness	0 1 2 3	Feelings of dread	0 1 2 3
Self-destructive thoughts	0 1 2 3	Feelings of a "knot" in your stomach	0 1 2 3
Inability to handle stress	0 1 2 3	Feelings of being overwhelmed for no reason	0 1 2 3
Anger and aggression while under stress	0 1 2 3	Feelings of guilt about everyday decisions	0 1 2 3
Feelings of tiredness, even after many hours of sleep	0 1 2 3	A restless mind	0 1 2 3
A desire to isolate yourself from others	0 1 2 3	An inability to turn off the mind when relaxing	0 1 2 3
An unexplained lack of concern for family and friends	0 1 2 3	Disorganized attention	0 1 2 3
An inability to finish tasks	0 1 2 3	Worry over things never thought about before	0 1 2 3
Feelings of anger for minor reasons	0 1 2 3	Feelings of inner tension and inner excitability	0 1 2 3