

Leaky Gut Assessment Scorecard

Leaky Gut Assessment					
Name					
Age		Height		Weight	
Based upon your health profile for the past 30 days , please select the appropriate number, from '0 - 3' on all questions (0 as least/never/no and 3 as most/always/yes). Each choice has been given a score. Circle the number/score you feel best applies, then add the scores in each column to create your grand score.					
Point Scale: 0 = Never 1 = Occasionally , but not severe		2 = Occasionally , but severe 3 = Frequently			
Leaky Gut Symptom Questions		0	1	2	3
How often do you experience constipation and/or diarrhea?		0	1	2	3
How often do you experience abdominal pain or bloating?		0	1	2	3
How often do you find mucus or blood in your stool?		0	1	2	3
How often do you experience joint pain or swelling (arthritis)?		0	1	2	3
How often do you experience chronic or frequent fatigue?		0	1	2	3
How often do you have food allergies, sensitivities, or intolerance?		0	1	2	3
How often do you experience sinus or nasal congestion?		0	1	2	3
How often do you experience frequent inflammation?		0	1	2	3
How often do you experience eczema, skin rashes, or hives?		0	1	2	3
How often do you experience asthma, hay fever, or airborne allergies?		0	1	2	3
How often do you experience confusion, poor memory, or mood swings?		0	1	2	3
How often do you use non-steroidal anti-inflammatory drugs (Aspirin, Tylenol, Motrin)?		0	1	2	3
How often do you use antibiotics?		0	1	2	3
How often does alcohol consumption make you sick?		0	1	2	3
How often do you experience Ulcerative colitis, Crohn's Disease, or Celiac Disease?		0	1	2	3
Subtotal for Leaky Gut Symptoms (sum of scores)					
Grand Total /45					



Interpretation

Please check the result that applies based on your score.

- ☐ **Score = 0:** Congratulations. You display no overt signs and symptoms of leaky gut. Be sure to follow diet and lifestyle guidelines for a healthy digestive tract.
- ☐ **Score = 1-5:** While a few signs and symptoms of leaky gut are present, the likelihood of it being a major health issue is low.
- ☐ **Score = 6-20:** You are showing signs of leaky gut, and it is probably resulting in a challenge to your health.
- ☐ **Score = 20+:** Leaky gut is a significant factor in your health and requires immediate attention.