

Leaky Gut Assessment Scorecard

Leaky Gut Assessment							
Name							
Age		Height		Weight			
<p>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.</p>							
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.