

LEAKY GUT SYMPTOM TRACKER

Track daily severity (0-5: None to Severe)

Week Starting: _____

SYMPTOM CATEGORY	MON	TUE	WED	THU	FRI	SAT	SUN
Bloating / Gas							
Abdominal Pain							
Fatigue / Brain Fog							
Skin Issues (Rash/Acne)							
Joint Pain / Aches							
Food Sensitivities							
Mood (Anxiety/Low)							
Bowel Consistency							

Scale: 0 = No Symptom 1 = Minimal 2 = Mild 3 = Moderate 4 = Distressing 5 = Severe/Disabling

Weekly Notes (Dietary Triggers, Stress Levels, Supplements):

This chart is for personal tracking only and does not constitute medical advice.