## Child Neurotransmitter & Nutrition Questionnaire (CNNQ)

Name:					Age:		_ Sex:_	Date:					
Please circle the appropriate number of	n all	que	esti	ions	s below	(0 as the	least/never	to 3 as the most/always	s).				
SECTION: GENERAL DIET													
Does your child have any food sensitivities or allergies? (If yes, please list			st)	<ul> <li>Does your child frequently yell or scream for unnecessary reasons?</li> <li>Does your child have an inability to nap or sleep</li> </ul>							2	3	
• List your child's 4 healthiest foods eaten during the average week.			_	w	hen physic		sted? (circle "0" if able, "3" if ur		-		2 2		
								and squirm when seated?	(	-		2	
• List your child's 4 unhealthiest foods eaten during the average week.				_	• D	oes your c		d climb excessively? ifficulty playing quietly o	r			2	
How many times does your child eat candy per week?				_		15451115 111	icisare acti	vities:	`		•	-	•
How many times does your child drink soda per week?						CTION I							
• List the top 4 foods your child craves regularly.						-	-	cited easily?	(	0	1	2	3
				_	<b>I</b>	-		nxiety and panic for		•		•	4
				_	<b>I</b>	inor reaso		1 1 1 C		•		2	
• List the medication(s) your child is currently prescribed and any over				er				erwhelmed for minor reas difficult to relax when	sons? (	IJ	1	2	3
products used.				_		e/she is aw		difficult to relax when	(	n	1	2	1
				_				isorganized attention?		-		2	
• Do you find it difficult to have your child on a special diet?						oes your e	anna nave a	isorganized attention:	`	U	1	_	•
				_		CTION (	_	10		•		•	4
SECTION A							child seem d		(	U	1	2	3
<ul><li>Does your child eat pasta, breads, and breaded foods?</li></ul>	0	1	2	3				nood changes with		^	1	2	1
• Does your child have symptoms (fatigue, hyperactivity, etc.)						vercast we				) J		2	
after eating foods containing wheat/gluten?	0							ymptoms of inner rage? ininterested in games or h	) Paciddau	-		2 2	
• Does your child consume dairy products?	0	1	2	3		-		ifficulty falling into deep,		U	1	2	3
• Does your child have symptoms (fatigue, hyperactivity, etc.)						estful sleep		imeuity faming into deep,	,	n	1	2	1
after consuming dairy products?	0	1	2	3				ninterested in friendships	.2 (	-		2	
SECTION B						-		nprovoked anger?	. (	-		2	
• Does your child eat fried fish?	0	1	2	3				ninterested in eating?	ì	-		2	
• Does your child eat roasted nuts or seeds?	•		2			ous your c		g.	`	•	_	_	
Is your child missing essential fatty acid-rich foods in		•	-		SE	CTION I	<u>H</u>						
his/her diet? (for example: avocados, flax seeds, olives)	0	1	2	3	• D	oes your c	hild have d	ifficulty handling stress?	(	0	1	2	3
(circle "0" if present, "3" if missing)		_	_		• D	oes your c	child have a	nger and aggression while	e				
• Does your child eat fried foods?	0	1	2	3		eing challe				0	1	2	3
					• D	oes your cl	hild feel tire	d even after many hours of	sleep? (	0	1	2	3
SECTION C					• D	oes your cl	hild tend to i	solate himself/herself from	n others? (	0	1	2	3
• Is your child's mental speed slow?	0	1	2	3	• D	oes your c	child get dis	tracted easily?	(	0	1	2	3
• Does your child have difficulty with learning or memory?	0	1	2	3	• D	oes your c	child have a	constant need and desire	for				
• Does your child have difficulty with balance and coordination?	0	1	2	3	<b>I</b>	andy and s		isorganized attention?	,	-		2	
SECTION D					'	oes your c	illiu liave u	isorganized attention?	,	0	1	2	3
Does your child have stress?	0	1	2	3	SE	CTION I	<u>[</u>						
• Does your child not have enough sleep and rest?				3	• D	oes your c	hild have d	ifficulty with visual memo	ory				
(circle "0" if enough, "3" if not enough)					(s	hapes and	images)?		(	0	1	2	3
• Does your child not have regular exercise?	0	1	2	3	• D	oes your c	child have d	ifficulty remembering loc	ations? (	0	1	2	3
(circle "0" if regular exercise, "3" if no exercise)					• D	oes your c	child have fa	atigue or low endurance for	or				
• Does your child feel overly worried and scared?	0	1	2	3	<b>I</b>	arning act				0	1	2	3
					• D	oes your c	child have d	ifficulty with attention or	a short				
SECTION E					<b>I</b>	tention spa			(	0	1	2	3
• Does your child have temper tantrums?		1						low or difficult speech?		-		2	
<ul> <li>Does your child exhibit wild behavior?</li> </ul>	0	1	2	3	• D	oes your c	child have u	ncoordinated or slow mov	vements? (	0	1	2	3