



# DR. JOEY JONES

## Nutrition Patient Information

Once completed, please return to [info@drjoeyjones.com](mailto:info@drjoeyjones.com).

### DEMOGRAPHIC INFORMATION

Date \_\_\_\_\_

Last Name \_\_\_\_\_ Legal First Name \_\_\_\_\_

Birth Date \_\_\_\_\_ Preferred Name (Optional) \_\_\_\_\_ Age \_\_\_\_\_ M or F (circle)

### CONTACT INFORMATION

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Home Phone  \_\_\_\_\_ Work Phone  \_\_\_\_\_ Cell Phone  \_\_\_\_\_

(Please check preferred method of contact)

## How do I determine my toxic load?

Your toxic load is the amount of toxins that your body must process.

- Yes  No Do you or have you eaten processed foods?
- Yes  No Do you eat non-organic fruits and vegetables?
- Yes  No Do you eat meat that is not organic?
- Yes  No Do you or have you ever used artificial sweeteners?
- Yes  No Do you drink soda?
- Yes  No Do the foods you eat have preservatives, additives, or sweeteners added?
- Yes  No Do you eat fast foods and/or eat out regularly?
- Yes  No Do you charbroil or grill foods?
- Yes  No Do you drink coffee regularly?
- Yes  No Do you drink alcohol?
- Yes  No Do you drink tap water?

If the majority of your answers are “yes,” then it is likely that your diet contributes significantly to your toxic load. Beyond diet, many external toxins — such as personal care products, cleaners, and pollution — add to your load. Your health care professional may have you complete a more comprehensive questionnaire to understand your toxic load.\*

