

Questionnaire – Hydrogen Breath Test

(Glucose, Lactose, Fructose)

Important Notice:

Antibiotics must not be taken at least four weeks prior to the test. Dietary instructions before the test must be followed.

Name and surname:

Date of birth:

Address:

Phone number:

Email:

Have you taken antibiotics in the last four weeks?

☐ YES

☐ NO

Have you had a colonoscopy in the last two weeks before testing?

☐ YES

☐ NO

Have you used probiotics or yogurts with probiotics two weeks before testing?

☐ YES

☐ NO

Have you used laxatives or dietary fiber supplements one week before testing?

☐ YES

☐ NO

Did you consume legumes, bran, whole grains, or other fiber-rich foods one day before testing?

☐ YES

☐ NO

Did you consume milk, pasta, yogurt, pastries, or high-sugar beverages one day before testing?

☐ YES

☐ NO

Have you eaten or drunk anything other than water or unsweetened tea in the past 12 hours (after 6 PM yesterday)?

☐ YES

☐ NO

Did you smoke, sleep, or engage in intense physical activity one hour before testing?

☐ YES

☐ NO

Have you used chewing gum or candies 12 hours before the test?

☐ YES

☐ NO

Which clinic referred you for the hydrogen breath test?

Describe your symptoms:

Note: The test is only accurate if all preparation instructions are fully followed.

If you answered "YES" to any of the above questions, the test must be postponed.

Date:

Signature: