

FEATURE GUIDE

At-home patient questionnaire

Microba GI Navigator

001

At-home patient questionnaire

Your patient will receive an email from Microba with a link to an easy-to-use questionnaire as soon as payment for their test is finalised. The questionnaire takes about 15 minutes to complete in their own time and must be done before they take their stool sample.



⌘ Symptoms

☀ Conditions

📋 Medical History

🌿 Diet

🔗 Medications

🍴 Eating patterns

🧠 Psychosocial wellbeing

⌘ Symptoms

- 01 In the past 3 months, have you had bleeding of your gums when brushing your teeth?
- 02 In the past 3 months, how often have you typically passed a bowel motion spontaneously (i.e. without the use of laxatives, suppositories, or enemas)?
- 03 How long have you tended to pass fewer than 3 bowel motions per week?
- 04 In the past 3 months, how often have you experienced loose or watery stools (without the use of laxatives, suppositories or enemas)?
- 05 How long have you been experiencing loose or watery bowel motions?
- 06 In the past 3 months, how often have you experienced hard or lumpy stools?
- 07 How long have you been experiencing hard or lumpy stools?
- 08 In the past 3 months, how often have you typically strained or needed to use effort to pass a bowel motion?
- 09 How long have you been experiencing the need to strain or use effort to pass a bowel motion?
- 10 In the past 3 months, how often have you experienced a sense of blockage or obstruction when passing a bowel motion?
- 11 In the past 3 months, have you needed to use your hand or fingers as support to pass a bowel motion?
- 12 How long have you been needing to use your hand or fingers as support to pass a bowel motion?
- 13 In the past 3 months, have you experienced a feeling of incomplete emptying when you pass a bowel motion?
- 14 How long have you been experiencing a feeling of incomplete emptying when you pass a bowel motion?
- 15 In the past 3 months, roughly how often have you experienced bothersome abdominal bloating?
- 16 In the past 3 months, how often have you experienced abdominal distension?

⦿ Symptoms

- 17

In the past 3 months, roughly how often have you experienced abdominal pain?
- 18

How long have you been experiencing abdominal pain 1 or more days per week?
- 19

Does passing a bowel motion seem to affect your abdominal pain in any way?
- 20

When you have abdominal pain, is there a change to the appearance and/or consistency of the stools?
- 21

When your stools change when you have abdominal pain, what form do they usually take?
- 22

Does there seem to be a connection between your abdominal pain and the frequency of your bowel motions?
- 23

During the last 7 days, how much have you been bothered by excessive passing of wind/gas (flatulence)?
- 24

During the last 7 days, how much have you been bothered by a sense of painful wind in the bowels, or "trapped" wind, or wind that is difficult to pass?
- 25

During the last 7 days, how bothered have you been by strong-smelling wind?
- 26

During the last 4 weeks, how much have you been bothered by_____ ?

- ☐ Stomach pain

☐ Back pain
- ☐ Period pain

☐ Headaches
- ☐ Dizziness

☐ Fainting spells
- ☐ Shortness of breath

☐ Pain or problems during sexual intercourse
- ☐ Nausea, gas, or indigestion

☐ Chest pain
- ☐ Joint pain

☐ Feeling your heart pound or race
- ☐ Feeling tired or having low energy

☐ Trouble sleeping
- ☐ Constipation, loose bowels, or diarrhoea

 Conditions

Have you ever been medically diagnosed with the following?
Please tick any that apply.

- ☐ Crohn’s disease
- ☐ Irritable bowel syndrome
- ☐ Chronic pelvic pain/persistent pelvic pain
- ☐ Interstitial cystitis/bladder pain syndrome
- ☐ Ulcerative colitis
- ☐ Endometriosis
- ☐ Overactive bladder

 Medical History

01 Have you ever had a scan that showed you had redundant colon or ptosis of the colon?

 Medications

01 Please tell us about your use of _____ (in the last week).

- ☐ Osmotic laxatives
- ☐ Stool softeners
- ☐ Stimulant laxatives
- ☐ Proton-pump inhibitor medications (PPIs)

Diet

01 Do you regularly avoid or restrict foods because of any of the following:

- ☐ How they taste, smell, or feel
- ☐ Low interest in eating or low hunger
- ☐ worry about unpleasant consequences like choking, vomiting, or feeling unwell?

02 Please tell us more about your supplement intake. How often do you take partially hydrolysed guar gum powder?

03 Do you exclude any particular food groups in your diet?

- ☐ Gluten (strict gluten-free diet)
- ☐ Wheat
- ☐ All grains
- ☐ Dairy products
- ☐ Meat (vegetarian diet)
- ☐ All animal products, including meat, seafood, eggs and dairy products (vegan diet)
- ☐ More than one of: vegetables, fruit, nuts and seeds, legumes, grains

Please tell us more about your intake of

Vegetables

Legumes

Fruit

Nuts and seeds

Wholegrains

Rye bread

Olive oil

Meat

Fish and shellfish

Ψ1 Eating patterns

- 01 Would you say that food dominates your life?
- 02 Do you believe yourself to be fat when others say you are too thin?
- 03 Have you recently lost more than 1 stone (6.35 kg) in a 3-month period?
- 04 Do you worry you have lost control over how much you eat?
- 05 Do you make yourself sick because you feel uncomfortably full?

🧠 Psychosocial wellbeing

- 01 Over the last 2 weeks, how often have you been bothered by:
- ☐ Feeling nervous, anxious or on edge

☐ Not being able to stop or control worrying

☐ Worrying too much about different things

☐ Trouble relaxing

☐ Being so restless it is hard to sit still

☐ Becoming easily annoyed or irritable

☐ Feeling afraid, as if something awful might happen

☐ Little interest or pleasure in doing things

☐ Trouble falling or staying asleep, or sleeping too much

☐ Feeling down, depressed or hopeless

☐ Feeling tired or having little energy

☐ Poor appetite or overeating

☐ feeling bad about yourself – or that you are a failure or have let yourself or your family down

☐ Trouble concentrating on things, such as reading the newspaper or watching television

☐ Moving or speaking so slowly that other people could have noticed? Or the opposite – being so fidgety or restless that you have been moving around a lot more than usual

Patient presentation markers

The patient questionnaire provides essential context for microbiome interpretation. Your patient's answers generate 35 patient presentation markers, which inform 13 of the 22 interpretations in the report, across six of the seven health categories.

The remaining interpretations draw on microbiome, gut physiology and pathogen markers alone. All raw test data is synthesised into personalised clinical interpretations (see the GI Navigator Report feature guide).

While GI symptoms often present in similar ways, GI Navigator can help uncover the relevant contributing factors and support more personalised, evidence-informed management for each patient.

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Marker Profile

Butyrate promoting diet

Patient

The degree to which the patient's diet likely promotes microbial butyrate production. Calculation takes into account both level of adherence to a Mediterranean-style diet and intake of foods shown to promote butyrate production.

Patient's Results

LOW

Range

0%100%

28%

Analytical reasoning

Patient questionnaire responses that inform this marker

🔗 Diet Questions

Please tell us more about your vegetable intake

I eat less than 4 serves of vegetables per day

I eat 4 or more serves of vegetables per day

Each health category groups related interpretations in the report.
The patient presentation markers listed under each interpretation are the questionnaire responses that inform it.

Clinical Context

Lower GI symptoms

- Hard lumpy stools
- Low stool frequency
- Constipation symptoms
- IBS symptoms
- IBS-C symptoms
- IBS-D symptoms
- IBS-M symptoms
- Abdominal bloating
- Abdominal distension
- Excess wind
- Painful wind
- Strong-smelling wind
- High stool frequency
- Diarrhoea symptoms
- Loose/watery stools
- Incomplete emptying
- Feeling of blockage
- Splinting
- Straining
- Persistent abdominal pain

Psychosocial risk

- Anxiety symptoms
- Depression symptoms
- Eating-related risk
- Avoidant eating

Dietary gaps

- Food group exclusion
- Butyrate-promoting diet
- Fibre-focused diet
- Mediterranean diet adherence

Gut Function

Pancreatic insufficiency

- IBS-D symptoms
- Diarrhoea symptoms

Slower colonic transit

- Hard lumpy stools
- Low stool frequency
- Report of redundant colon
- Constipation symptoms
- Laxative use
- IBS-C symptoms

Gut-Brain Axis

Visceral hypersensitivity

- IBS symptoms
- Chronic visceral pain conditions
- Physical symptom bother

Abdominal pain link

- IBS symptoms

Microbiome Balance

Putrefactive microbiome

- Butyrate-promoting diet
- Fibre-focused diet
- Mediterranean diet adherence

Unbalanced SCFA-producers

- Butyrate-promoting diet
- Fibre-focused diet

Gut Environment

Gut inflammation

- Report of IBD

Pro-inflammatory microbiome

- Bleeding gums
- PPI use
- Butyrate-promoting diet

Gut Barrier

Reduced colonic butyrate availability

- Butyrate-promoting diet

Intestinal permeability link

- Butyrate-promoting diet

At Microba, expect better. Because we do.

We develop world-leading microbiome research and technology.
We deliver tests that go deeper and broader. We craft insights that improve
people's lives.

Why?

Because better is possible. Because better means more freedom and
confidence. And, most importantly, because more freedom and confidence means
better, happier lives. We are an ecosystem of people organised around one simple
principle – making you better. Because better care doesn't just transform individual
lives, it builds healthier, happier communities.



MICROBA LIFE SCIENCES
LIMITED
ABN 78 604 991 173
1300 974 621
HELLO@MICROBA.COM