Number the boxes which apply to you with a 1,2,or 3. (1) for mild symptoms (2) for moderate symptoms (3) for severe symptoms. Leave the box blank if it does not apply to you.

File No: _____ Date: _____ Sex: M [ ] F [ ]
Name: _____ Age/DOB _____

Symptoms	1	2	3	Symptoms	1	2	3
Abnormal Appetite poor/excess				Cold Sweats Often			
Abdominal Bloating				Colds/Flu's Frequent			
Abdominal Pain				Colitis			
Absent Mindedness				Compulsive Behavior			
Abnormal Hair Growth				Constipation			
Acid Food Upset				Cold Extremities			
Acne				Cough			
Achy Feet				Cradle Cap			
Addiction to Smoke				Crave Spices			
Addiction to Sugar				Crave Salt			
Addiction to Alcohol				Crave Sweets			
Addiction to Drug				Crave sour/bitter			
Addiction to Spices				Crave Onions/Beans			
Anemia				Chronic Fatigue			
Anger				Cuts Heal Slowly			
Appetite-excess				Dandruff			
Arthritis				Decreased Sex Drive			
Asthma Bronchial				Depression			
Asthma Cardiac				Dermatitis			
Athlete's Foot				Diabetes			
Attention Deficit Disorder				Diarrhea			
Bad Breath				Difficulty in Swallowing			
Backache - (upper area)				Digestion Rapid			
Backache - (Middle area)				Diverticulitis			
Backache - (Lower Area)				Dream Disturbed Sleep			
Blurred Vision				Drowsy After Meals			
Body Aches				Dry Nose			
Bowel Disorders				Dry Eyes			
Brain Fog				Dry Mouth			
Breast Pain or Swelling				Dyslexia			
Breast Lumps				Ear Aches			
Bronchitis				Ear Infection			
Brown Spots				Eating Disorder			
Bruises Easily				Eczema			
Burning/ Itching Anus				Edema			
Burning Feet				Emotional Imbalances			
Canker Soars				Elbow Pains			
Coated Tongue				Excess Thirst			

File Number: _____ Date: _____

Name _____

Symptoms	1	2	3	Symptoms	1	2	3
Eyelids puffy				knee pains			
Eyes Watery				Labored breathing			
Eyes itch				Low back ache			
Fainting Spells				Low Blood Pressure			
Falling Hair				Lump in Throat			
Fatigue				Memory loss-long term			
Feels cold Often				Memory Loss -Short term			
Feels Insecure				Menses, Scanty			
Fever				Menses, Excess			
Fibromyalgia or body ache				Menses, irregular			
flatulence				Menses, Painful			
Forgetfulness				Mental confusion			
Frequent Rashes				Metallic taste			
Gags Easily				Migrating Pains			
Gall Stones				Milk Causes Discomfort			
Gastric Distress				Mood Swings			
General Itching				Mucus Production			
Greasy Foods Upset				Muscles Cramps or Spasms			
Hair loss				Nasal polyp			
Hayfever				Nausea or vomiting			
Headaches/Sinus				Neck Pains			
Headache/Morning				Nervousness			
Headache/Afternoon				Nervous Stomach			
Headaches - Migraine				Neuralgia			
Hearing Decreased				Night Sweats			
Heartburn				Nose Bleed			
Heart Irregularities				Numbness			
Hemorrhoids				Obsessive Behavior			
High Altitude causes problems				Ovarian cyst			
High Blood Pressure				Pain between shoulders			
Hip Pains				Pain on heels			
Hives				Pain unexplained			
Hoarseness				Pain - Shoulder			
Humidity-Discomfort				Perspiration Excess			
Hungry between meals				Phobias			
Hyperactivity				PMS (Premenstrual Symptom)			
Hysterectomy				Poor Memory			
Ileocecal Valve				Post Nasal Drip			
Increased Sex Drive				Premature Graying			
Indigestion				Prolapsed Uterus or Bladder			
Infertility Male/Female				Prone to Infections			
Insomnia				Prostate Trouble			
Internal Trembling				Psoriasis			
Irritable and restless				Red or Pink Eyes			
Itchy Eyes and Throat				Restless Leg Syndrome			
Keyed-up and fail to calm				Ring Worm			

File Number: _____ Date: _____

Name _____

Symptoms	1	2	3	Symptoms	1	2	3
Ringing in Ears							
Seizures							
Sensitive to cold/heat							
Shortness of Breath							
Shoulder pain							
Sighs frequently							
Sinusitis							
Skin Problems							
Sleepy During the Day							
Slow pulse < 65							
Slow starter							
Smell Decreased							
Sneezing Attacks							
Sore Throat							
Sore Canker							
Sour Stomach							
Startles Easily							
Strong Light Irritates							
Swollen Ankles and Feet							
Thinning/Thickening of the skin							
Thirst							
Throat Constriction/Throat closing							
Tightness in the chest							
Tingling sensation all over body							
Tires too easily							
Tourette's Syndrome							
Urinary tract disorder							
Urination difficult							
Urine amount increased/decreased							
Uterine Polyp							
Vaginal discharge							
Varicose veins							
Warts							
Weak Nails							
Weight Gains							
Weight Loss							
White Spots Over the Body							
Worrier							
Yeast Infection							
Other							