## **SYMPTOM SURVEY FORM**

NAME	DOCTOR	DATE
AGE SEX M F Phone # ()	(2) for MODERATE (3) for SEVERE syn	oms E symptoms
GROUP 1	GROUP 2	
1 ☐ Acid foods upset 2 ☐ Get chilled, often 3 ☐ "Lump" in throat 4 ☐ Dry mouth-eyes-nose 5 ☐ Pulse speeds after meals 6 ☐ Keyed up - fail to calm 7 ☐ Cuts heal slowly 8 ☐ Gag easily 9 ☐ Unable to relax; startles easily 10 ☐ Extremities cold, clammy 11 ☐ Strong light irritates 12 ☐ Urine amount reduced 13 ☐ Heart pounds after retiring 14 ☐ "Nervous" stomach 15 ☐ Appetite reduced 16 ☐ Cold sweats often 17 ☐ Fever easily raised 18 ☐ Neuralgia-like pains 19 ☐ Staring, blinks little 20 ☐ Sour stomach frequent	21 □ Joint stiffness after arising 22 □ Muscle-leg-toe cramps at night 23 □ "Butterfly" stomach, cramps 24 □ Eyes or nose watery 25 □ Eyes blink often 26 □ Eyelids swollen, puffy 27 □ Indigestion soon after meals 28 □ Always seems hungry; feel     "lightheaded" often 29 □ Digestion rapid 30 □ Vomiting frequent 31 □ Hoarseness frequent 32 □ Breathing irregular 33 □ Pulse slow; feels "irregular" 34 □ Gagging reflex slow 35 □ Difficulty swallowing 36 □ Constipation, diarrhea alternating 37 □ "Slow starter" 38 □ Get "chilled" infrequently 39 □ Perspire easily 40 □ Circulation poor, sensitive to cold 41 □ Subject to colds, asthma,     bronchitis	GROUP 3  42
56 ☐ Hands and feet go to sleep easily, numbness		
57 □ Sigh frequently, "air hunger" 58 □ Aware of "breathing heavily" 59 □ High altitude discomfort 60 □ Opens windows in closed room 61 □ Susceptive to colds and fevers 62 □ Afternoon "yawner" 63 □ Get "drowsy" often 64 □ Swollen ankles worse at night 65 □ Muscle cramps, worse during exercise; get "charley horses" 66 □ Shortness of breath on exertion 67 □ Dull pain in chest or radiating into left arm, worse on exertion 68 □ Bruise easily, "black/blue" spots 69 □ Tendency to anemia 70 □ "Nose bleeds" frequent 71 □ Noises in head or "ringing in ears" 72 □ Tension under the breastbone, or feeling of "tightness", worse on	GRC  73 □ Dizziness  74 □ Dry Skin  75 □ Burning feet  76 □ Blurred vision  77 □ Itching skin and feet  78 □ Excessive falling hair  79 □ Frequent skin rashes  80 □ Bitter, metallic taste in mouth in mornings  81 □ Bowel movement painful or difficult  82 □ Worries, feels insecure  83 □ Felling queasy; headache over eyes  84 □ Greasy foods upset  85 □ Stools light-colored	86  Skin peels on foot soles 87  Pain between shoulder blades 88  Stools alternate from soft to watery 90  History of gallbladder attacks or gallstones 91  Sneezing attaches 92  Dreaming, nightmare type bad dreams 93  Bad breath (halitosis) 94  Milk products cause distress 95  Sensitive to hot weather 96  Burning or itching anus 97  Crave sweets

exertion

## GROUP 6 **GROUP 7 (continued)** FEMALE ONLY 98 □ Loss of taste for meat 173 ☐ Very easily fatigued **(C)** 174 □ Premenstrual tension 99 ☐ Lower bowel gas several hours 137 ☐ Failing memory 175 ☐ Painful menses after eating 138 ☐ Low blood pressure 100 □ Burning stomach sensations, 176 □ Depressed feeling before 139 ☐ Increased sex drive eating relieves menstruation 140 ☐ Headaches, "splitting or rending" 101 ☐ Coated tongue 177 ☐ Menstruation excessive and type 102 ☐ Pass large amounts of foulprolonged 141 ☐ Decreased sugar tolerance smelling gas 178 ☐ Painful breasts 103 □ Indigestion 1/2 - 1 hour after 179 ☐ Menstruate too frequently **(D)** eating; may be up to 3-4 hrs. 180 □ Vaginal discharge 142 ☐ Abnormal thirst 104 ☐ Mucus colitis or "irritable bowel" 181 ☐ Hysterectomy/ovaries removed 143 ☐ Bloating of abdomen 105 ☐ Gas shortly after eating 182 ☐ Menopausal hot flashes 144 ☐ Weight gain around hips or waist 106 ☐ Stomach "bloating" after eating 183 ☐ Menses scanty or missed 145 ☐ Sex drive reduced or lacking 184 ☐ Acne, worse at menses 146 □ Tendency to ulcers, colitis 185 ☐ Depression of long standing 147 ☐ Increased sugar tolerance **GROUP 7** 148 ☐ Women: menstrual disorders (A) MALES ONLY 149 ☐ Young girls: lack of menstrual 107 □ Insomnia 186 ☐ Prostate trouble function 108 ☐ Nervousness 187 ☐ Urination difficult or dribbling 109 ☐ Can't gain weight **(E)** 188 ☐ Night urination frequent 110 □ Intolerance to heat 150 □ Dizziness 189 □ Depression 111 ☐ Highly emotional 151 ☐ Headaches 190 ☐ Pain on inside of legs or heels 112 □ Flush easily 191 ☐ Feeling of incomplete bowel 152 ☐ Hot flashes 113 □ Night sweats 153 ☐ Increased blood pressure evacuation 114 □ Thin, moist skin 154 ☐ Hair growth on face or body 192 ☐ Lack of energy 115 ☐ Inward trembling (female) 193 ☐ Migrating aches and pains 116 ☐ Heart palpitates 155 ☐ Sugar in urine (not diabetes) 194 ☐ Tire too easily 117 ☐ Increased appetite without 195 ☐ Avoid activity 156 ☐ Masculine tendencies (female) weight gain 196 ☐ Leg nervousness at night 118 ☐ Pulse fast at rest **(F)** 197 ☐ Diminished sex drive 119 ☐ Eyelids and face twitch 157 ☐ Weakness, dizziness 120 ☐ Irritable and restless 158 ☐ Chronic fatigue 121 ☐ Can't work under pressure **IMPORTANT** 159 ☐ Low blood pressure 160 □ Nails weak, ridged **(B)** TO THE PATIENT: Please list below 161 ☐ Tendency to hives 122 ☐ Increase in weight the five main health complaints you 162 ☐ Arthritic tendencies 123 ☐ Decrease in appetite have in order of their importance: 163 ☐ Perspiration increase 124 ☐ Fatigue easily 164 □ Bowel disorders 125 ☐ Ringing in ears 165 □ Poor circulation 126 ☐ Sleepy during day 166 ☐ Swollen ankles 127 ☐ Sensitive to cold 167 □ Crave salt 128 ☐ Dry or scaly skin 168 ☐ Brown spots or bronzing of skin 129 ☐ Constipation 169 ☐ Allergies - tendency to asthma 130 ☐ Metal sluggishness 170 ☐ Weakness after colds, influenza 131 ☐ Hair coarse, falls out 171 ☐ Exhaustion - muscular and 132 ☐ Headaches upon arising wear off nervous during day 172 ☐ Respiratory disorders 133 □ Slow pulse, below 65 134 ☐ Frequency of urination 135 ☐ Impaired hearing 136 ☐ Reduced initiative