

Medical Symptoms



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White Bear Lake, MN 55110
651.429.0101

Name _____

Date _____

Instructions

Rate each of the following symptoms based upon your health profile for the past 30 days.

- 0 = never or almost never have the symptom
- 1 = occasionally have it, effect is not severe
- 2 = occasionally have it, effect is severe
- 3 = frequently have it, effect is not severe
- 4 = frequently have it, effect is severe

DIGESTIVE TRACT

0 1 2 3 4

- Nausea or vomiting
- Diarrhea.....
- Constipation
- Intestinal/stomach pain
- Bloated feeling
- Belching, passing gas
- Heartburn

Section Total

EARS

- Itchy ears
- Earaches, ear infections
- Drainage from ear
- ringing in ears, hearing loss

Section Total

EMOTIONS

- Mood swings
- Anxiety, fear, nervousness
- Anger, irritability, aggressiveness
- Depression.....

Section Total

ENERGY/ACTIVITY

- Fatigue, sluggishness
- Apathy, lethargy
- Hyperactivity.....
- Restlessness

Section Total

EYES

- Watery or itchy eyes.....
- Swollen, red, or sticky eyelids
- Bags or dark circles under eyes
- Blurred or tunnel vision

Section Total

HEAD

- Headaches
- Faintness
- Dizziness
- Insomnia.....

Section Total

HEART

- Irregular or skipped heartbeat
- Rapid or pounding heartbeat
- Chest pains

Section Total

JOINTS / MUSCLES

- Pain or aches in joints
- Arthritis
- Stiffness or limited movement
- Feeling of weakness or tiredness ...
- Pain or aches in muscles

Section Total

MIND

0 1 2 3 4

- Poor memory.....
- Confusion, poor comprehension
- Poor concentration
- Poor physical coordination
- Difficulty in making decisions
- Stuttering or stammering.....
- Slurred Speech
- Learning disabilities.....

Section Total

LUNGS

- Chest congestion
- Asthma, bronchitis
- Shortness of breath.....
- Difficulty breathing

Section Total

MOUTH / THROAT

- Gagging, frequent clearing of throat
- Sore throat, hoarseness, loss of voice
- Swollen discolored tongue/gums/lips
- Chronic coughing
- Canker sores

Section Total

NOSE

- Excessive mucus formation
- Stuffy nose
- Sinus problems.....
- Hay fever.....
- Sneezing attacks.....

Section Total

SKIN

- Acne
- Hives, rashes, dry skin
- Hair loss
- Flushing, hot flashes.....
- Excessive sweating

Section Total

WEIGHT

- Binge eating or drinking
- Craving certain foods.....
- Excessive weight.....
- Compulsive eating
- Water retention
- Underweight.....

Section Total

OTHER

- Frequent illness
- Frequent or urgent urination
- Genital itch or discharge

Section Total

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