

Nutritec Software Symptom Survey Form

NAME: _____ DATE: _____

DOB: ____/____/____ SEX: Male Female

HEIGHT: _____ WEIGHT: _____

BLOOD PRESSURE: Pulse: Sitting: _____ Standing: _____

BP Sitting: _____ PB Lying: _____ BP Standing: _____

pH INDICATORS: AM Saliva: _____ AM Urine: _____

PM Saliva: _____ PM Urine: _____

INSTRUCTIONS: Completely black out one of the three circles:
1-mild, 2-moderate, or 3-severe

- MILD symptoms (once or twice last 6 month)
- MODERATE symptoms (once or twice last month)
- SEVERE symptoms (Chronic, once or twice last wk)
- Leave circles BLANK if they do not apply to you!

1 2 3 --- GROUP 1 SYMPATHETIC DOMINANCE ---

- 1 Acid foods upset
- 2 Feel chilled often
- 3 "Lump" in throat
- 4 Dry mouth-eyes-nose
- 5 Pulse speeds after meals
- 6 Keyed up; unable to feel calm
- 7 Cuts heal slowly
- 8 Gag easily
- 9 Unable to relax; startles easily
- 10 Extremities cold and/or 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 Body temperature rises easily
- 18 Skin sensitive to touch
- 19 Staring, blinks little
- 20 Frequently have a sour stomach

-- GROUP 2 PARASYMPATHETIC DOMINANCE--

- 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 or puffy
- 27 Indigestion soon after meals
- 28 Always seem hungry; "lightheaded" often
- 29 Food digests rapidly
- 30 Vomit frequently
- 31 Frequently hoarse
- 32 Irregular breathing
- 33 Pulse slow or feels "irregular"
- 34 Slow gag reflex
- 35 Difficulty swallowing
- 36 Alternating constipation and diarrhea
- 37 "Slow starter"
- 38 Not easily chilled
- 39 Perspire easily
- 40 Poor circulation or sensitive to cold
- 41 Subject to colds, asthma, bronchitis

----- GROUP 3 SUGAR HANDLING -----

- 42 Eat when nervous
- 43 Excessive appetite
- 44 Hungry between meals
- 45 Irritable before meals
- 46 Get "shaky" if hungry

- 1 2 3 --- GROUP 3 SUGAR HANDLING continued ---
- 47 Feeling fatigued, eating relieves
- 48 "Lightheaded" if meals delayed
- 49 Heart palpitates if meals missed or delayed
- 50 Afternoon headaches
- 51 Upset feeling from excessive eating of sweets
- 52 Awaken after a few hours sleep, hard to get back to sleep
- 53 Crave candy or coffee in afternoons
- 54 Moods of depression, "blues", or melancholy
- 55 Abnormal craving for sweets or snacks

----- GROUP 4 CARDIOVASCULAR -----

- 56 Hands and feet go to sleep easily, numbness
- 57 Sigh frequently, "air hunger"
- 58 Aware of "breathing heavily"
- 59 Discomfort at high altitude
- 60 Opens windows in closed room
- 61 Susceptible to colds and fevers
- 62 Afternoon "yawner"
- 63 Get "drowsy" often
- 64 Swollen ankles worse at night
- 65 Muscle cramps, worse during exercise; "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 on arms or legs
- 69 Tendency to anemia
- 70 Frequently have "nose bleeds"
- 71 "Ringing in ears" or noises in head
- 72 Tension under the breast-bone, or feeling of "tightness" in the chest, gets worse on exertion

----- GROUP 5 LIVER/BILIARY -----

- 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 or metallic taste in mouth in the mornings
- 81 Bowel movements painful or difficult
- 82 Feelings of worry, dread, or insecurity
- 83 Feeling queasy; headache over eyes
- 84 Greasy foods upset
- 85 Stools light-colored
- 86 Skin peels on foot soles
- 87 Pain between shoulder blades
- 88 Using laxatives
- 89 Stools alternate from soft to watery
- 90 History of gallbladder attacks or gall stones
- 91 Sneezing attacks
- 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

----- GROUP 6 DIGESTION -----

- 98 Loss of taste for meat
- 99 Lower bowel gas several hours after eating
- 100 Burning stomach sensations, eating relieves
- 101 Coated tongue
- 102 Pass large amounts of foul smelling gas
- 103 Indigestion 1/2 -1 hour after eating; may be up to 3-4 hrs.
- 104 Mucus colitis or "irritable bowel"
- 105 Gas shortly after eating
- 106 Stomach "bloating" after eating

- 1 2 3** **GROUP 7A HYPERTHYROID** **1 2 3**
- 107 0 0 0 Insomnia
 - 108 0 0 0 Nervousness
 - 109 0 0 0 Can't gain weight
 - 110 0 0 0 Intolerance to heat
 - 111 0 0 0 Highly emotional
 - 112 0 0 0 Flush easily
 - 113 0 0 0 Night sweats
 - 114 0 0 0 Skin is thin and moist
 - 115 0 0 0 Inward trembling
 - 116 0 0 0 Heart palpitates
 - 117 0 0 0 Increased appetite without weight gain
 - 118 0 0 0 Pulse races when resting
 - 119 0 0 0 Eyelids and face twitch
 - 120 0 0 0 Irritable and restless
 - 121 0 0 0 Can't work under pressure

- GROUP 7B HYPOTHYROID**
- 122 0 0 0 Noticable weight gain
 - 123 0 0 0 Decrease in appetite
 - 124 0 0 0 Easily fatigued
 - 125 0 0 0 Ringing in ears
 - 126 0 0 0 Sleepy during day
 - 127 0 0 0 Sensitive to cold
 - 128 0 0 0 Dry or scaly skin
 - 129 0 0 0 Constipation
 - 130 0 0 0 Mental sluggishness
 - 131 0 0 0 Hair coarse, falls out
 - 132 0 0 0 Headaches upon arising wear off during day
 - 133 0 0 0 Slow pulse, below 65
 - 134 0 0 0 Frequent urination
 - 135 0 0 0 Impaired hearing
 - 136 0 0 0 Reduced initiative

- GROUP 7C HYPERPITUITARY**
- 137 0 0 0 Failing memory
 - 138 0 0 0 Low blood pressure
 - 139 0 0 0 Increased sex drive
 - 140 0 0 0 Headaches, "splitting or rendering" type
 - 141 0 0 0 Decreased sugar tolerance

- GROUP 7D HYPOPITUITARY**
- 142 0 0 0 Abnormal thirst
 - 143 0 0 0 Bloating of the abdomen
 - 144 0 0 0 Weight gain around hips or waist
 - 145 0 0 0 Sex drive reduced or lacking
 - 146 0 0 0 Tendency toward ulcers and/or colitis
 - 147 0 0 0 Increased sugar tolerance
 - 148 0 0 0 (FEMALE) Menstrual disorders
 - 149 0 0 0 (YOUNG GIRLS) Lack of menstrual function

- GROUP 7E HYPERADRENAL**
- 150 0 0 0 Dizziness
 - 151 0 0 0 Headaches
 - 152 0 0 0 Hot flashes
 - 153 0 0 0 Increased blood pressure
 - 154 0 0 0 (FEMALE) Hair growth on face or body
 - 155 0 0 0 Sugar in urine (not diabetes)
 - 156 0 0 0 (FEMALE) Masculine tendencies

- GROUP 7F HYPOADRENAL**
- 157 0 0 0 Weakness and/or dizziness
 - 158 0 0 0 Chronic fatigue
 - 159 0 0 0 Low blood pressure
 - 160 0 0 0 Nails weak and/or ridged
 - 161 0 0 0 Tendency toward hives
 - 162 0 0 0 Arthritic tendencies
 - 163 0 0 0 Perspiration increase
 - 164 0 0 0 Bowel disorders
 - 165 0 0 0 Poor circulation
 - 166 0 0 0 Swollen ankles
 - 167 0 0 0 Crave salt
 - 168 0 0 0 Brown spots or bronzing of skin
 - 169 0 0 0 Allergies - tendency to asthma
 - 170 0 0 0 Weakness after colds or influenza
 - 171 0 0 0 Muscular and nervous exhaustion
 - 172 0 0 0 Respiratory disorders

- GROUP 8 FOUNDATIONAL ISSUES**
- 173 0 0 0 Apprehension
 - 174 0 0 0 Irritability
 - 175 0 0 0 Morbid fears
 - 176 0 0 0 Never seems to get well
 - 177 0 0 0 Forgetfulness
 - 178 0 0 0 Indigestion
 - 179 0 0 0 Poor appetite
 - 180 0 0 0 Craving for sweets
 - 181 0 0 0 Muscular soreness
 - 182 0 0 0 Depression; feelings of dread
 - 183 0 0 0 Noise sensitivity
 - 184 0 0 0 Acoustic hallucinations
 - 185 0 0 0 Tendency to cry without reason
 - 186 0 0 0 Hair is coarse and/or thinning
 - 187 0 0 0 Weakness
 - 188 0 0 0 Fatigue
 - 189 0 0 0 Skin sensitive to touch
 - 190 0 0 0 Tendency toward hives
 - 191 0 0 0 Nervousness
 - 192 0 0 0 Headache
 - 193 0 0 0 Insomnia
 - 194 0 0 0 Anxiety
 - 195 0 0 0 Anorexia
 - 196 0 0 0 Inability to concentrate; confusion
 - 197 0 0 0 Frequent stuffy nose; sinus infections
 - 198 0 0 0 Allergy to some foods
 - 199 0 0 0 Loose joints

- FEMALE ONLY**
- 200 0 0 0 Very easily fatigued
 - 201 0 0 0 Premenstrual tension
 - 202 0 0 0 Painful menses
 - 203 0 0 0 Depressed feelings before menstruation
 - 204 0 0 0 Excessive and prolonged menstruation
 - 205 0 0 0 Painful breasts
 - 206 0 0 0 Menstruate too frequently
 - 207 0 0 0 Vaginal discharge
 - 208 0 0 0 Hysterectomy /ovaries removed
 - 209 0 0 0 Menopausal hot flashes
 - 210 0 0 0 Menses scanty or missed
 - 211 0 0 0 Acne, worse at menses
 - 212 0 0 0 Long standing depression

- MALE ONLY**
- 213 0 0 0 Prostate trouble
 - 214 0 0 0 Urination difficult or dribbling
 - 215 0 0 0 Frequent night time urination
 - 216 0 0 0 Depression
 - 217 0 0 0 Pain on inside of legs or heels
 - 218 0 0 0 Feeling of incomplete bowel evacuation
 - 219 0 0 0 Lack of energy
 - 220 0 0 0 Migrating aches and pains
 - 221 0 0 0 Too easily tired
 - 222 0 0 0 Avoids activity
 - 223 0 0 0 Leg nervousness at night
 - 224 0 0 0 Diminished sex drive

IMPORTANT

List below your five main physical complaints in order of importance:

1. _____
2. _____
3. _____
4. _____
5. _____

Notes: