

NEW PATIENT INFORMATION FORM

Please print clearly, thank you!

Name _____ Date _____

Address _____ Apt. _____

City _____ State _____ ZIP _____

Cell Phone (____) _____ - _____ Home/Work Phone (____) _____ - _____

E-mail address: _____

REFERRED BY: _____

Occupation _____ Employer _____

Date of Birth _____ Age _____ Sex: M / F Height _____ Weight _____

Overall health (circle one): Excellent / Good / Fair / Poor

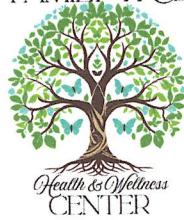
Chief complaint (reason you are here): (use separate sheet if more room needed)

Previous treatments for complaints:

Other complaints or problems (use separate sheet if needed):

Current medications & supplements being taken: (use separate sheet if needed)

Vaccinations (circle one): Fully Vaccinated / Partially Vaccinated / Unvaccinated



Are you currently under the care of a physician or other health care professionals?

(If yes, please give name and approximate date of last visit):

Do you receive chiropractic care now or have you in the past?

Do you smoke, drink coffee, soda or alcohol? (If yes indicate how much)

Tabacco/Vape/THC Vape (Circle) Coffee _____ Brand of coffee: _____ Keurig Y/N

Alcohol _____ Soda/Energy Drinks _____

How much water do you drink per day in ounces? _____

How many servings of fruit do you eat per day ($\frac{1}{2}$ cup = 1 serving otherwise 1 medium piece of fruit like a banana = 1 serving)? _____/day

How many servings of vegetables do you eat per day (1 cup leafy veggies = 1 serving otherwise $\frac{1}{2}$ cup = 1 serving)? _____/day

How many grams of protein (meat, eggs, etc.) per day?

Do you eat Breakfast/Lunch/Dinner (circle)?

What kind of sweets do you eat and how often?

Are there any foods that you currently avoid? If so which ones?

How often do you have a bowel movement?

Do you experience seasonal allergies? If yes, any medication or supplements you take for it:

How many hours of sleep do you usually get? _____ CPAP? Y/N

Sleep quality is generally (circle one): Poor / Fair / Good / Excellent Note:

Typical exercise includes:

Spirituality or religious practices:



HISTORY:

List any major illnesses with approximate dates:

List any surgeries with approximate dates:

Past accidents or injuries:

Dental History including childhood (Root canals, amalgam fillings, crowns, bridges):

Mouth Taping? Retainers? (circle)

=====

Marital Status: S M D W Name of Spouse: _____

Describe health of spouse: _____ Number of children if any _____

Name of Child	Age	Sex	Any physical conditions or concerns?
_____	_____	M/F	_____
_____	_____	M/F	_____
_____	_____	M/F	_____
_____	_____	M/F	_____

Are you pregnant? NO YES

Any family history of serious illnesses (circle those which apply): Cancer / Diabetes / Heart / Other

Any household pets or other animals you or family members are in close contact with: _____

What can we do to make you happier? _____

SIGNED: _____ DATE: _____



Cancellation Policy

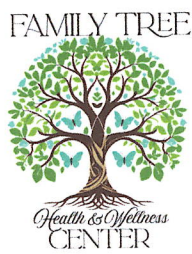
Our intention at Family Tree is to provide all our clients with the best care we can to help the body return to a harmonic and balanced state. We do our best to run a punctual schedule; part of that is being present and on time for appointments. We understand that obligations can present. Family Tree requests that any appointment cancellation or adjustment that must be made are done with at least 24-hour notice. If one scheduled appointment is not attended or cancelled with less than 24-hour notice, Family Tree will charge for the amount of time that was scheduled. By signing below, you acknowledge you have read and accept these terms.

Print Patient's Name: _____

Patient's Signature: _____

Date: _____

Parent/Guardian Signature if Necessary: _____



Informed Consent and Authorization Form for Nutrition Response Testing® and Nutritional Consultation

Nutrition Response Testing is a non-invasive system of analyzing the body to assist an assessment of underlying causes of ill health through changes in the autonomic nervous system. The system is based on the view that neurological reflexes provide information about health status and is one component of screening for organic illness or underlying “energetic” dysfunction. Nutrition Response Testing is an aid to determining possible nutritional imbalances, so that safe natural programs can be developed for the purpose of bringing about a more optimum state of health. It can also be used to encourage the immune system to “recalibrate” its responses to materials in food or the environment.

Status with the FDA and Medical Community; Not a Substitute for Medical Care: This view is not grounded in conventional medicine but considered a form of integrative, complementary or alternative medicine. While there is published literature and clinical experience supporting this method, the body of evidence has not been sufficiently demonstrated by clinically controlled studies to be recognized as valid by the medical or chiropractic communities or federal or state regulatory agencies. The Nutrition Response Testing system has not been reviewed and approved by the US Food and Drug Administration and does not provide diagnosis of or treatment for any medical condition nor conclusive evidence about nutritional deficiency or sensitivity. It is informational and meant to address energetic or autonomic reflex issues and provide guidance about potential health issues that might benefit from further screening. It is not a substitute for medical diagnostic services, nor should any medically prescribed treatments be altered or discontinued as a result of the analysis. Testing by itself should not be relied upon as a final test of the presence or absence of any disease.

An Important Note about Allergies: One aspect of Nutrition Response Testing measures sensitivities to foods and materials in the environment. These sensitivities are not necessarily the same as allergies, which refer to a very specific response of the immune system known as an “IgE”¹ response. Because immune reactions form a very complex web of interactions, it is more accurate to think of reactions to foods or items in the test as sensitivities rather than as allergies. Nutrition Response Testing therapy helps the body “retune” its responses to foods and the environment. Patients who may have true “IgE” allergies may wish to discuss possible diagnostic and treatment alternatives with an appropriate medical specialist.

Services intended to reduce sensitivities will not necessarily resolve allergies and patients should not expose themselves to allergens to which they have significant reactions based upon allergen testing or Nutrition Response Testing.

Potential Adverse Reactions: While these procedures are very safe, some sensitive people may experience a healing crisis, a short period in which symptoms increase or a period of a flu-like illness during which there could be some mild fever, chills, dizziness, loss of appetite, or similar symptoms. Such an experience, while unpleasant, can signal the body going through detoxification or other healing effort. When these difficult periods do occur, it is thought that the body needs to make a chronic condition acute for a brief time as part of the healing process. Patients are given instructions, such as avoiding materials for a time after efforts to recalibrate the body’s reactions to allergens/triggers.

Limitation of Liability. Neither the practitioner nor Ulan Nutritional Services or its affiliated organizations manufacture nutraceutical products and are not liable for any defects in recommended or provided products including, but not limited to, allergic reactions, contamination, inaccurate labeling or poor quality ingredients. In the unlikely event that there are

¹ **IgE:** is a substance produced by the immune system during allergic reactions.



any concerns, clients should discontinue use of the product(s) and consult with practitioner and their physician, as appropriate. Some products are sold under the Ulan private label but the original manufacturer has sole responsibility for product defects.

No Guarantees: No health care practice is an exact science, and there are significant individual differences between patients. No guarantees are made that a patient will gain any benefit or not suffer any adverse consequences.

Insurance Notice / Financial Responsibility: Patients are responsible for payment at the time of service. Counseling based upon the Nutrition Response System is considered non-covered and considered not “medically necessary.” Patients are responsible for the costs of services even if their third-party payor determines that a service is non-covered, “medically unnecessary,” “investigational,” or “experimental.” Related services, such as office visits and labs connected to this service could also be denied.

Practitioner Training: Practitioners have completed course work provided by Ulan Nutritional Systems in the use of Nutrition Response Testing.

Agreement and Consent

I authorize my practitioner to develop a natural, complementary health improvement program for me which may include dietary guidelines, nutritional supplements and other suggestions in order to assist me in improving my health. I have discussed the status of the Nutrition Response Testing system and wish to include Nutrition Response Testing as part of Practitioner’s counseling/consultation; I understand and agree that all decisions and recommendations are made by my Practitioner and that the Nutrition Response Testing system and Ulan Nutritional Systems is not responsible for any outcome of this consultation. I understand that improvement is most likely if I adhere to my Practitioner’s recommendations. If I do not fully comply, I understand that this will impact my results and success. I represent that I am seeking analysis using Nutrition Response Testing as part of my consultation with Practitioner to further my own health or that of my child and for no other reason. I understand and agree to the financial and other notices that have been provided. I understand that there could be potential adverse reactions and agree to assume the risks that could arise. I have been adequately informed about the clinical and legal status of this system and counseling and questions I have asked have been satisfactorily answered.

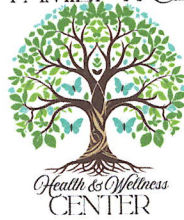
Date: _____

Signature of Patient, or Parent/Guardian

Witness

Name (Printed)

Name (Printed)



INFORMED CONSENT TO RECEIVE BIOFEEDBACK TRAINING

Patient's Name: _____

Telephone Number: _____

BIOFEEDBACK

Biofeedback is a complementary and alternative medicine technique which enables an individual to learn to change some physiological activities for the purpose of improving health. With biofeedback, the subject is connected to the biofeedback device with sensors to measure and receive information (feedback) about the body (bio). The biofeedback sensors use mild electrical impulses that measure skin temperature known as Electro Dermal Response (EDR), which teaches the individual to make subtle bodily changes, such as relaxing certain muscles, to achieve desired results, such as reducing pain. Biofeedback is often used as a relaxation technique. The instrument utilized in the training sessions is called the Quantum Educator (QUEX) biofeedback system, which requires that the client connect to the system with a head band, ankle and wrist straps to measure EDR. The scope of my practice through the use of this biofeedback system includes stress reduction training programs for relaxation training, pain management, muscle re-education and brainwave training. Although this training is expected to produce beneficial results, such results cannot be guaranteed. Biofeedback training is a complement, not a substitute, for medical or psychological treatment, or veterinary trainings for your pets. I understand that the device being used is a FDA cleared for Galvanic Skin Response Testing and thousands of electronic trivector signatures that your body will read and is not intended to directly treat or cure any specific condition, symptom or illness. I understand that this is a non-invasive procedure (the skin is not pierced). I understand that DNA analysis of my hair, nail and saliva will allow the Quantum Educator to evaluate my current state of health and provide recommended interventions if you are not able to be physically present. Homeopathic remedies, nutritional supplements and other natural remedies may be used to bring abnormal electrical patterns into equilibrium. I understand the nature of the immune system and related symptoms may be unpredictable and therefore the facility cannot guarantee any results.

I understand that it is my responsibility to ask my medical provider for permission to undergo biofeedback training if I wear a pacemaker or have any medical conditions that require surgical implants that could be interfered with.

I understand it is my responsibility to monitor the effects of biofeedback training and to continue the training if it benefits me. I will communicate to Kristin Schrader, ASPW, Nutrition Response Testing Practitioner, anytime I experience any discomfort during biofeedback training. I further understand that research suggests that more people gain considerable benefits from biofeedback training, some people may not. I have every expectation that biofeedback training will provide me with some benefit, but I understand there is no guarantee that it will. By signing below, I acknowledge that I have read and understand this document and have received acceptable answers to all my questions about biofeedback services. I consent to receive biofeedback training from Kristin Schrader, APSW, Nutrition Response Testing Practitioner. I warrant I am not under duress at this time and my consent is given voluntarily and without coercion. I further understand I may discontinue biofeedback training at any time and that I may refuse to participate in any particular or specific biofeedback training without repercussions.

Free to Decline: I understand that I may decline to the testing and training anytime.



I have read and understand the above information and my rights. I consent to the use of clinical reports and results of my case for study, the purpose of advancing clinical knowledge, research and scientific purposes provided that my identity is kept confidential.

OTHER MODALITIES: I understand that Biofeedback can be an additional tool to support the body's innate homeostasis achieved through Nutrition Response Testing.

CONFIDENTIALITY

Client information will be kept in confidence and will not be disclosed to anyone outside of this office without your written consent, unless as is required by law.

CONSENT

Your signature below indicates that you have read and understood the information in this document and that you consent to biofeedback training under the provisions stated. If you do not understand or consent to anything stated in this document, it is your responsibility to request and receive clarification before signing.

We are not licensed as a physician, psychologist or chiropractor, and I cannot and will not diagnose, treat, cure, mitigate or prevent any medical or psychological disease, disorder or condition.

Free to Decline: I understand that I may decline to the testing and training anytime.

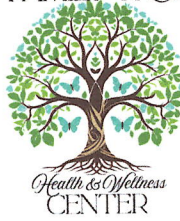
I have read and understand the above information and my rights. I consent to the use of clinical reports and results of my case for study, the purpose of advancing clinical knowledge, research and scientific purposes provided that my identity is kept confidential.

Client's Signature	Client's Name	Date
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FOR PARENTS/GUARDIANS OF MINOR CLIENT

I attest that I have full legal authority to make decisions for the minor named below, and that I give my permission for him/her to undergo biofeedback training.

Parent/Guardian's Signature	Minor's Name	Date
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Could NRT Help You?

If you are like most people who come to us for help, then most likely:

- You have one or more health conditions that have become chronic and,
- You have probably tried conventional medicine or even alternative practitioners and did not get the results you hoped for and,
- These conditions are impacting your personal life, your relationships with your spouse or children, your career or job performance, and/or your personal finances and,
- You know that, as time goes by, these conditions are not going to get better and will probably continue to worsen unless you change what you are doing and do something really effective about it.

If this describes you and you are ready to make a real demand for improvement that will put you back in charge of your own health, then you have come to the right place.

If you are a Nutrition Response Testing case and you follow our recommendations to the letter, then there is hope that you will receive the help you need to restore your health.

What is Nutrition Response Testing?

Nutrition Response Testing is a non-invasive system of analyzing the body in order to determine the underlying causes of ill health. When these are corrected through safe, natural, nutritional means, the body can repair itself in order to attain and maintain more optimum health.

Nutrition Response Testing is very precise and scientific. However, if I were to analyze you using Nutrition Response Testing before it was explained to you, you might find it strange, or simply not believable – only because it is probably very

different from anything you may have experienced before.

I can understand this because when I first saw this type of work being done, my first reaction was “Hmm, what is this strange stuff?” No one was more skeptical than I was. As a result, I studied Nutrition Response Testing extensively to see if it was for real. And I am sure happy I did because it has greatly helped me improve my health and the health of so many patients. Because of Nutrition Response Testing, we are here and are able to help you improve your health.

If you want to get healthy and stay healthy, it is important that you understand what Nutrition Response Testing is and what our recommendations are based on.

Otherwise, you are less likely to follow through and actually do what you need to do to get well. If you don’t follow through, you won’t get well. And if you are not going to get well, why do it in the first place?

The results we have been having with Nutrition Response Testing are often in the 90% and better range. The only reason we are here is to help you get well. We have no other reason for being here and hopefully, you are here for that same reason. That is why I want to make sure you get the correct understanding of what Nutrition Response Testing is right from the start.

What Makes this Approach Unique?

In medical practice, there are two key parts: the diagnosis (identifying and/or naming the “disease” or syndrome) and the treatment (drugs, surgery, etc.).

In Nutrition Response Testing we do not diagnose or treat disease - but we also have two parts: the analysis (the assessment of your body’s current health status) and the personalized health



improvement program (using designed clinical nutrition).

Simply put, first we do an analysis, and then we design a natural health improvement program to help you handle what we find in our analysis of your body and condition.

First the Analysis.

The analysis is done through testing the body's nervous system.

Nutrition Response Testing analyzes different areas on the surface of the body that relate to the state of health and to the flow of energy in each and every organ and function of the body.

This information is derived from the part of the nervous system whose job it is to regulate the functions of each and every organ.

Interestingly, since the human anatomy has not changed significantly in thousands of years, the utilization of these organs / areas have become extremely useful in our practice because they are so accurate!

Think About It.

Each area that gives a response represents a specific organ, tissue, or function, and indicates the effect that energy, or the lack of energy, is having on the body. By testing these organs / areas, we have a system of monitoring your body at each visit that has proven to be extremely accurate clinically, and that helps us identify exactly what the body needs and how well we are meeting that need.

Doesn't this sound like something you would want for yourself in order to predict, with certainty, what is needed and wanted by the body to get you to the next stage of improved health?

How Do We Do The Nutrition Response Testing Analysis?

If I were to hook you up to an electro-cardiograph machine and take a reading, that would make perfect sense to you, right?

What is actually happening during this procedure? Electrical energy from the heart is running over the wires. This electrical energy makes the electrocardiograph record the energy pattern in the form of a graph or chart. I could then study this graph and tell you what it all means.

Here is what we do with Nutrition Response Testing. Instead of connecting electrodes to the areas being tested, the Nutrition Response Testing practitioner contacts these areas with his/her own hand. With the other hand, he/she will test the muscle of your extended arm. If the organ/area being contacted is "active" the nervous system will respond by reducing energy to the extended arm, and the arm will weaken and drop. This drop signifies underlying stress or dysfunction, which can be affecting your health.

Why is the Person Who Referred You Feeling Better?

Because we did a Nutrition Response Testing analysis for him or her, we found the "active" organs/areas, and then made specific nutritional recommendations to help the body return to an improved state of health. Most importantly, the person is following through on our recommendations.

We are prepared to do the exact same thing for you now. How does that sound to you? However, the best is yet to come.



Your “Personalized Health Improvement Program”.

Let’s say the liver or kidney areas are active. Then what?

Our next step is to test specific, time-tested and proven, highest-possible quality nutritional formulas against those weak areas, to find which ones bring the organ/areas back to strength.

Our decades of clinical experience tell us that when we have found the correct nutritional supplements, as indicated by this procedure, and have worked out a highly personalized nutritional supplement schedule, we have identified the most important first step in correcting the underlying deficiency or imbalance that caused the organ/area to be active in the first place. By following the program as precisely as possible, you are well on your way to restoring normal function and improving your health.

It’s that simple!

In medicine, the medical doctor makes a diagnosis and then uses drugs or surgery to attack or suppress the symptom, or to surgically remove the “offending” organ or malfunctioning part.

In Nutrition Response Testing we use “DESIGNED CLINICAL NUTRITION” to correct the cause of the problem, so that the body can regain the ability to correct itself.

What is a Designed Clinical Nutrition?

“Designed Clinical Nutrition” is exactly that: **designed** (*especially prepared based on a specific plan*) **clinical** (*pertaining to the results gotten in clinical use or actual practice on huge numbers of patients over many years*) **nutrition** (*real food, designed by nature to enable the body to repair itself and grow healthfully*).

In most cases it is concentrated, whole food in a tablet, capsule or powder, prepared using a unique manufacturing process that preserves all of the active

enzymes and vital components that make it work as Nature intended. These real food supplements have been designed to match the needs of the body, as determined by the positive response shown when tested against the active Nutrition Response Testing organs/areas that were found on your individual Nutrition Response Testing analysis. These are nutrients you are simply not getting, or not assimilating, in your current diet.

These deficiencies may be due to your past personal eating habits and routines, but it is for sure due, in some large extent, to the lack of quality in the foods commercially available in grocery stores or restaurants today.

An example of a whole food could be carrots. Carrots are high in *Vitamin A Complex*. A “complex” is something made up of many different parts that work together. Synthetic vitamin A does not contain the whole “Vitamin A Complex” found in nature. So, if we were looking for a food high in Vitamin A, carrots might be one of our choices.

If one actually were deficient in any of the components of Vitamin A Complex, one would be wise to seek out a supplement that was made from whole foods that were rich in this complex - not from chemicals re-engineered in a laboratory to look like one little part of the Vitamin A Complex that has erroneously been labeled as “Vitamin A.”

Designed Clinical Nutrition is not ‘over-the-counter’ vitamins. Over-the-counter vitamins are pharmaceutically engineered chemical fractions of vitamin structures reproduced in a laboratory. Because they are not made from whole foods, “over-the-counter” vitamins are not “genuine replacement parts” as they lack many of the essential elements normally present in WHOLE foods. [Please ask about our audio CD: “*The Whole Truth About Vitamins*,” for an entertaining, in-depth explanation of this aspect of vitamins and other nutritional supplements.]

Vitamins that are being used all over today generally only need to have a small percentage of their actual content derived from natural sources to be labeled



“natural”. If they are not derived from whole foods, they often make you even more deficient and nutritionally out-of-balance. They can create other health problems because they do not contain all of the co-factors found in nature that make the vitamins work.

So-called “scientific research,” done with these shoddy substitutes, repeatedly “proves” that vitamins don’t do much good for anyone! Can you imagine who pays for these “researches”?

SUMMARY

1. Through an analysis of your body’s organs/areas, we help you to determine the exact nutrients you need to supplement your diet, in order to bring about balance and better health.
2. We make these highly concentrated therapeutic formulations available to you in tablets, capsules, or in powdered form to “supplement” your current diet. That’s why they are called “food supplements.”
3. Depending on your individual situation, we might also require that you make some specific changes in your diet & eating habits, and in your routines, in order to bring about the best possible results.

How are These Products Produced?

One example of a designed clinical nutrition supplement that we use is called “Catalyn”. This product is produced by starting with a wide variety of carefully chosen organically grown vegetables, taking the water and fiber out using a vacuum, low heat process - without heating or cooking the vegetables, and then utilizing the concentrated food to make a bottle of Standard Process Catalyn Tablets.

The key to this whole procedure is the way it is done, using the “Standard Process” method:

A. Standard Process nutrients are derived from plants grown on their own farms, in soil free of pesticides – and no chemicals are ever used. Ph.D.’s checks the soil before the seeds are sown, to make sure of the fertility of the soil – and even the weeding is done by hand.

B. The machinery involved in the processing of these products is made of glass and stainless steel only.

C. The temperature used in processing harvested plants is never raised above the point of 90 degrees Fahrenheit, so that the active ingredients are not cooked; they remain active and alive, and have a very long shelf life.

Your vitality and energy is derived from live food. Most foods available today are dead - or are not really foods at all - as in boxed cereals, canned vegetables, soda pop, etc. You can readily understand the difference between dead, devitalized pseudo-foods, with the synthetic or isolated vitamins on the one hand, and “Designed Clinical Nutrition” and a diet of real foods, on the other.

There is a Great Deal of Technology and Know-How Behind What We Do.

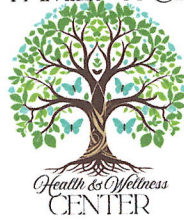
Having been designed through decades of clinical use on tens of thousands of patients, and on patients from many different types of health care practitioners, you can be assured that Nutrition Response Testing is capable of evaluating and solving your health concerns.

An analysis of your active organs / areas will be performed on each follow up visit. Often these follow up visits also reveal additional layers of dysfunction. These can then be addressed in the correct sequence for your body.

Each patient gets a completely individualized program.

Very much like opening a combination lock, you must use the right numbers in the right sequence and in the right direction at the right time – then the lock opens easily.

Therefore, since every case is different, by following the correct sequence as revealed through Nutrition Response Testing, even the most complicated cases can be handled.



Is it Possible to Restore Your Health?

Many people we see in our practice have eaten themselves into their current state of ill-health, to one degree or another. The deficiencies or imbalances lead to a breakdown in resistance, or immunity, and a loss of the ability to cope with environmental stresses (chemical, microscopic, or otherwise).

So, yes, the **good news** is that it is possible to reverse the process!

What could be more natural? What could be more correct? Each cell, tissue, and organ in your body is in the process of replacing itself every day, month, and year. The health of each organ is dependent on making the correct nutrients available to upgrade or to maintain the health of the body at a cellular level.

Designed Clinical Nutrition provides the right basic materials.

Nutrition Response Testing tells you when and what to use to bring about the desired result.

With this understanding of what we do, can you see how we might be able to help you do something effective to get yourself well?

And once that is achieved, do you see how you might be able to use this approach to stay well?

Now you have the complete 1-2-3 package. You now know:

- What we do
- How and why we do it

- What you need to do to have the potential of restoring your health and staying healthy.

But in the end you are the one responsible for your own condition. And with our guidance, we feel that – if you are a Nutrition Response Testing case – your chances of greatly improving your health can be as high as 90% or better.

How Do You Qualify to be a Nutrition Response Testing Patient?

Our long-term experience in a wide variety of cases tells us the first thing we must determine is whether or not you are a “Nutrition Response Testing Case”. If you are NOT a “Nutrition Response Testing Case” then it is unlikely that Nutrition Response Testing will ever help you. However, if you are a “Nutrition Response Testing Case”, then, in our experience, it is our belief that nothing else will help you as much.

If our analysis indicates that you are not a Nutrition Response Testing case, then in all probability, while a nutritional program may give you some benefit, it may not give you the maximum results you desire.

We wish you the best of luck in your quest to take back full responsibility for your health. Just remember to do it one step at a time, and that we are here to guide you in that quest.

Once we accept your case, you can count on us to do everything in our power to help you achieve your health objectives, and to help you achieve a healthier, happier life.

May you never be the same.

Acknowledge with Signature You Have Read This: _____

Date: _____



SYMPTOM SURVEY FORM

Patient: _____

Date: _____

INSTRUCTIONS:

LEAVE BLANK IF THEY DO NOT APPLY TO YOU.

- 0 0 0 MILD once or twice in the last six months
- 0 1 0 MODERATE occurred once or twice last month
- 0 0 1 SEVERE occurred once or twice in the last week

GROUP 1

1. 0 0 0 Acid foods upset
2. 0 0 0 Get chilled often
3. 0 0 0 "Lump in throat"
4. 0 0 0 Dry mouth-yes-nose
5. 0 0 0 Pulse speeds after meals
6. 0 0 0 Keyed up – fail to calm
7. 0 0 0 Cuts heals slowly
8. 0 0 0 Gag easily
9. 0 0 0 Unable to relax; startles easily
10. 0 0 0 Extremities cold, clammy
11. 0 0 0 Strong light irritates
12. 0 0 0 Urine amount reduced
13. 0 0 0 Heart pounds after retiring
14. 0 0 0 "Nervous" stomach
15. 0 0 0 Appetite reduced
16. 0 0 0 Cold Sweats often
17. 0 0 0 Fever easily raised
18. 0 0 0 Neuralgia-like pains (pain that travels along the length of a nerve)
19. 0 0 0 Staring, blinks little

GROUP 2

20. 0 0 0 Sour Stomach often
21. 0 0 0 Joint stiffness on arising
22. 0 0 0 Muscle-leg-toe cramps at night
23. 0 0 0 "Butterfly: stomach, cramps
24. 0 0 0 Eyes or nose watery
25. 0 0 0 Eyes blink often
26. 0 0 0 Eyelids swollen, puffy
27. 0 0 0 Indigestion soon after meals
28. 0 0 0 Always seems hungry; feels "lightheaded" often
29. 0 0 0 Digestion Rapid
30. 0 0 0 Vomiting frequent

31. 0 0 0 Hoarseness frequent
32. 0 0 0 Breathing irregular
33. 0 0 0 Pulse slow; feels;" irregular"
34. 0 0 0 Gagging reflex slow
35. 0 0 0 Difficulty swallowing
36. 0 0 0 Constipation, diarrhea alternating
37. 0 0 0 "Slow starter"
38. 0 0 0 Get "chilled" infrequently
39. 0 0 0 Perspire easily
40. 0 0 0 Circulation poor, sensitive to cold
41. 0 0 0 Subject to colds, asthma, bronchitis

GROUP 3

42. 0 0 0 Eats when nervous
43. 0 0 0 Excessive appetite
44. 0 0 0 Hungry between meals
45. 0 0 0 Irritable before meals
46. 0 0 0 Get "shaky" if hungry
47. 0 0 0 Fatigue, eating relieves
48. 0 0 0 "Lightheaded" if meals delayed
49. 0 0 0 Heart palpitates if meals missed or delayed
50. 0 0 0 Afternoon headaches
51. 0 0 0 Overeating sweets upsets
52. 0 0 0 Awaken after few hours sleep-hard to get back to sleep
53. 0 0 0 Crave candy or coffee in afternoon
54. 0 0 0 Moods depression – "blues" or melancholy
55. 0 0 0 Abnormal craving for sweets or snacks

GROUP 4

56. 0 0 0 Hands and feet go to sleep easily, numbness
57. 0 0 0 Sigh frequently, "air hunger"
58. 0 0 0 Aware of "breathing heavily"
59. 0 0 0 High altitude discomfort
60. 0 0 0 Opens windows in closed rooms
61. 0 0 0 Susceptible to colds and fevers
62. 0 0 0 Afternoon "yawner"
63. 0 0 0 Get "drowsy" often
64. 0 0 0 Swollen ankles, worst at night
65. 0 0 0 Muscle cramps, worse during exercise: get "charley horses"
66. 0 0 0 Shortness of breath on exertion

- 67. 0 0 0 Dull pain in chest or radiating into left arm, worse on exertion
- 68. 0 0 0 Bruise easily, "black and blue" spots
- 69. 0 0 0 Tendency to anemia
- 70. 0 0 0 "Nose bleed" frequent
- 71. 0 0 0 Noises in head, or "ringing in ears"
- 72. 0 0 0 Tension under the breastbone, or feeling of "tightness", worse on exertion

GROUP 5

- 73. 0 0 0 Dizziness
- 74. 0 0 0 Dry skin
- 75. 0 0 0 Burning feet
- 76. 0 0 0 Blurred vision
- 77. 0 0 0 Itching skin and feet
- 78. 0 0 0 Excessive falling hair
- 79. 0 0 0 Frequent skin rashes
- 80. 0 0 0 Bitter, metallic taste in mouth in mornings
- 81. 0 0 0 bowel movements painful or difficult
- 82. 0 0 0 Worrier, feels insecure
- 83. 0 0 0 Feeling queasy; headache over eyes
- 84. 0 0 0 Greasy foods upset
- 85. 0 0 0 Stools light colored
- 86. 0 0 0 Skin peels on foot soles
- 87. 0 0 0 Pain between shoulder blades
- 88. 0 0 0 Use laxatives
- 89. 0 0 0 Stools alternate from soft to watery
- 90. 0 0 0 History of gallbladder attacks or gallstones
- 91. 0 0 0 Sneezing attacks
- 92. 0 0 0 Dreaming, nightmare type bad dreams
- 93. 0 0 0 Bad breath (halitosis)
- 94. 0 0 0 Milk products cause distress
- 95. 0 0 0 Sensitive to hot weather
- 96. 0 0 0 Burning or itching anus
- 97. 0 0 0 Crave sweets

GROUP 6

- 98. 0 0 0 loss of taste for meat
- 99. 0 0 0 Lower bowel gas several hours after eating
- 100. 0 0 0 Burning stomach sensations, eating relieves
- 101. 0 0 0 Coated tongue
- 102. 0 0 0 Pass large amounts of foul-smelling gas
- 103. 0 0 0 Indigestion ½-1 hour after eating; may be up to 3-4 hours
- 104. 0 0 0 Mucous colitis or "irritable bowel"
- 105. 0 0 0 Gas shortly after eating
- 106. 0 0 0 Stomach "bloating" after eating

GROUP 7A

- 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 Thin, moist skin
- 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 fast at rest
- 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

- 122. 0 0 0 Increase in weight
- 123. 0 0 0 Decrease in appetite
- 124. 0 0 0 Fatigue easily
- 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, wears off during day
- 133. 0 0 0 Slow pulse, below 65
- 134. 0 0 0 Frequency of urination
- 135. 0 0 0 Impaired hearing
- 136. 0 0 0 Reduced initiative

GROUP 7C

- 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 rending" types
- 141. 0 0 0 Decreased sugar tolerance

GROUP 7D

- 142. 0 0 0 Abnormal thirst
- 143. 0 0 0 Bloating of 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 to ulcers, colitis
- 147. 0 0 0 Increased sugar tolerance
- 148. 0 0 0 Woman: menstrual disorder
- 149. 0 0 0 Young girls: lack in menstrual function

GROUP 7E

- 150. 0 0 0 Dizziness
- 151. 0 0 0 Headaches
- 152. 0 0 0 Hot flashes

- 153.000 Increased blood pressure
- 154.000 Hair growth on face or body (female)
- 155.000 Sugar in urine (not diabetes)
- 156.000 Masculine tendencies (female)

GROUP 7F

- 157.000 Weakness, dizziness
- 158.000 Chronic fatigue
- 159.000 Low blood pressure
- 160.000 Nails weak, ridged
- 161.000 Tendency to hives
- 162.000 Arthritic tendencies
- 163.000 Perspiration increased
- 164.000 Bowel disorders
- 165.000 Poor circulation
- 166.000 Swollen ankles
- 167.000 Crave salt
- 168.000 Brown spots or bronzing of skin
- 169.000 Allergies- tendency to asthma
- 170.000 Weakness after colds, influenza
- 171.000 Exhaustion- muscular and nervous
- 172.000 Respiratory disorders

GROUP 8

- 173.000 Apprehension
- 174.000 Irritability
- 175.000 Morbid feels
- 176.000 Never seems to get well
- 178.000 Forgetfulness
- 179.000 Poor appetite
- 180.000 Craving for sweets
- 181.000 Muscular soreness
- 182.000 Depression; feeling of dread
- 183.000 Noise sensitivity
- 184.000 Acoustic hallucinations
- 185.000 Tendency to cry without reason
- 186.000 Hair coarse and/or thinning
- 187.000 Weakness
- 188.000 Fatigue
- 189.000 Skin sensitive to touch
- 190.000 Tendency toward hives
- 191.000 Nervousness
- 192.000 Headache
- 193.000 Insomnia
- 194.000 Anxiety
- 195.000 Anorexia
- 196.000 Inability to concentrate; confusion
- 197.000 Frequent stuffy nose; sinus infections

- 198.000 Allergy to some foods
- 199.000 Loose joints

FEMALE ONLY

- 200.000 Very easily fatigued
- 201.000 Premenstrual tension
- 202.000 Painful menses
- 203.000 Depressed feelings before menstruation
- 204.000 Menstruate excessive and prolonged
- 205.000 Painful breasts
- 206.000 Menstruate too frequently
- 207.000 Vaginal discharge
- 208.000 Hysterectomy/ovaries removed
- 209.000 Menopausal hot flashes
- 210.000 Menses scanty or missed
- 211.000 Acne, worse at menses
- 212.000 Depression of long standing

MALE ONLY

- 213.000 Prostate trouble
- 214.000 Urination difficult or dribbling
- 215.000 Night urination frequently
- 216.000 Depression
- 217.000 Pain on inside of legs or heels
- 218.000 Feeling of incomplete bowel evacuation
- 219.000 Lack of energy
- 220.000 Migrating aches and pains
- 221.000 Tire to easily
- 222.000 Avoids activity
- 223.000 Leg nervousness
- 224.000 Diminished sex drive

List the **five main complaints** you have in the order of their importance:

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

Office Use:

1. _____ 2. _____
3. _____ **Total:** _____