

HEALTH CARE PROFESSIONAL: Mary Cetan, FLAP, DOM NAME: AGE:

MODERATE symptom (occurs several times a month)

1 MILD symptom (occurs rarely)

INSTRUCTIONS: Circle the number that applies to you. **If a symptom does not apply, don't circle anything** for that symptom.

Circle the corresponding number.

	RE symptom (occurs several times a month) RE symptom (occurs almost constantly)	
3 SEVE	Symptom (occurs aimost constantily)	
CDOUR 1	45 1 2 7 Cat "ababa" if box and	05 1 2 7 Di
GROUP 1 1. 1 2 3 Acid foods upset	45. 1 2 3 Get "shaky" if hungry 46. 1 2 3 Fatigue, eating relieves	85 . 1 2 3 Discor should
 1 2 3 Acid foods upset 1 2 3 Get chilled often 	46. 1 2 3 Fatigue, eating relieves47. 1 2 3 "Lightheaded" if meals delayed	86 . 1 2 3 Occas
3 . 1 2 3 "Lump" in throat	48. 1 2 3 Heart palpitates if meals missed	87. 1 2 3 Stools
4. 1 2 3 Dry mouth, eyes, nose	or delayed	to wat
5. 1 2 3 Pulse speeds after meal	49. 1 2 3 Fatigue in afternoon	88 . 1 2 3 Sneezi
6 . 1 2 3 Keyed up, fail to calm	50. 1 2 3 Overeating sweets upsets	89 . 1 2 3 Dream
7. 1 2 3 Gag occasionally	51 . 1 2 3 Awaken after few hours sleep,	bad dr
8. 1 2 3 Unable to relax, startle easily	hard to get back to sleep	90 . 1 2 3 Bad br
9. 1 2 3 Extremities cold, clammy	52 . 1 2 3 Crave candy or coffee in afternoon	91 . 1 2 3 Milk pr
10. 1 2 3 Strong light irritates	53. 1 2 3 Moods of "blues" or melancholy	92 . 1 2 3 Sensiti
11. 1 2 3 Occasionally weak urine flow	54 . 1 2 3 Craving for sweets or snacks	93 . 1 2 3 Burnin
12. 1 2 3 Heart pounds after retiring		94 . 1 2 3 Crave
13. 1 2 3 "Nervous" stomach		
14. 1 2 3 Appetite reduced occasionally		1 2 3
15. 1 2 3 Cold sweats often	GROUP 4	
16. 1 2 3 Get heated easily	55 . 1 2 3 Hands and feet go to	GROUP 6
17. 1 2 3 Nerve discomfort	sleep easily, numbness	95 . 1 2 3 Loss o
18. 1 2 3 Staring, blink little	56 . 1 2 3 Sigh frequently, "air hunger"	96 . 1 2 3 Lower
19. 1 2 3 Sour stomach frequent	57 . 1 2 3 Aware of "breathing heavily"	after e
TOTAL	58 . 1 2 3 High-altitude discomfort	97 . 1 2 3 Burnin
1 2 3	59 . 1 2 3 Open windows in closed room	eating
	60. 1 2 3 Immune system challenges	98 . 1 2 3 Coated
GROUP 2	61. 1 2 3 Afternoon "yawner"	99 . 1 2 3 Pass la
20. 1 2 3 Joint stiffness after arising	62. 1 2 3 Get "drowsy" often	of foul
21. 1 2 3 Muscle, leg, toe cramps at night	63 . 1 2 3 Swollen ankles worse at night	100 . 1 2 3 Indiges
22. 1 2 3 "Butterfly" stomach, cramps	64 . 1 2 3 Muscle cramps, worse during	may be
23. 1 2 3 Eyes or nose watery	exercise; get "charley horse"	101. 1 2 3 Watery
24 . 1 2 3 Eyes blink often	65 . 1 2 3 Difficulty catching breath,	102. 1 2 3 Gas sh
25. 1 2 3 Eyelids swollen, puffy	especially during exercise	103. 1 2 3 Stoma
26. 1 2 3 Indigestion soon after meals	66 . 1 2 3 Tightness or pressure in chest,	T
27. 1 2 3 Always seem hungry,	worse on exertion	1 2 3
feel "lightheaded" often	67. 1 2 3 Skin discolors easily after impact	CDOUD 7A
28. 1 2 3 Digestion rapid 29. 1 2 3 Vomit occasionally	68. 1 2 3 Tendency to anemia69. 1 2 3 Noises in head or "ringing in ears"	GROUP 7A 104 . 1 2 3 Difficu
30 . 1 2 3 Hoarseness frequent	70. 1 2 3 Fatigue upon exertion	105 . 1 2 3 On edg
31. 1 2 3 Uneven breathing	70. 1 2 3 Taugue uport exertion	106 . 1 2 3 Can't g
32 . 1 2 3 Pulse slow		107 . 1 2 3 Intoler
33. 1 2 3 Gagging reflex slow		108 . 1 2 3 Highly
34. 1 2 3 Difficulty swallowing	GROUP 5	109. 1 2 3 Flush 6
35 . 1 2 3 Temporary constipation or diarrhea	71 . 1 2 3 Dizziness	110 . 1 2 3 Night:
36 . 1 2 3 "Slow starter"	72 . 1 2 3 Dry skin	111 . 1 2 3 Thin, n
37 . 1 2 3 Get "chilled"	73 . 1 2 3 Burning feet	112. 1 2 3 Inward
38 . 1 2 3 Perspire easily	74 . 1 2 3 Blurred vision	113. 1 2 3 Heart
39 . 1 2 3 Sensitive to cold	75 . 1 2 3 Itching skin and feet	114 . 1 2 3 Increa:
40 . 1 2 3 Upper respiratory challenges	76 . 1 2 3 Hair loss	weight
	77. 1 2 3 Occasional skin rashes	115. 1 2 3 Pulse f
	78 . 1 2 3 Bitter, metallic taste in mouth	116. 1 2 3 Eyelids
	in morning	117. 1 2 3 Irritabl
GROUP 3	79 . 1 2 3 Occasional constipation	<u>118</u> . 1 2 3 Can't v
41. 1 2 3 Eat when nervous	80. 1 2 3 Worrier, feels insecure	
42. 1 2 3 Excessive appetite	81. 1 2 3 Nausea occasionally after eating	1 2 3
43. 1 2 3 Hungry between meals	82. 1 2 3 Greasy foods upset	
44. 1 2 3 Irritable before meals	83. 1 2 3 Stools light-colored	
	94 1 2 7 Ckin pools on foot solos	

84. 1 2 3 Skin peels on foot soles

			_	
85.	1	2	3	Discomfort between
				shoulder blades
86.	1	2	3	Occasional laxative use
87.	1	2	3	Stools alternate from soft
				to watery
88.	1	2	3	Sneezing attacks
89.	1	2	3	Dreaming, nightmare-type
				bad dreams
90.	1	2	3	Bad breath (halitosis)
91.	1	2	3	Milk products cause upset
92.	1	2	3	Sensitive to hot weather
93.	1	2	3	Burning or itching anus
94.	1	2	3	Crave sweets
1	-	2	-	TOTAL
GRO	U	P	6	
95.	1	2	3	Loss of taste for meat
96.	1	2	3	Lower bowel gas several hours
				after eating
97.	1	2	3	Burning stomach sensations,
				eating relieves
98.	1	2	3	Coated tongue
99.	1	2	3	Pass large amounts
				of foul-smelling gas
100.	1	2	3	Indigestion ½-1 hour after eating;
				may be up to 3-4 hours after
101.	1	2	3	Watery or loose stool
101. 102.	1	2	3	Watery or loose stool Gas shortly after eating
102.				Gas shortly after eating
	1	2	3	
102.	1	2	3	Gas shortly after eating
102. 103.	1	2	3	Gas shortly after eating Stomach "bloating" TOTAL
102. 103.	1	2 2	3	Gas shortly after eating Stomach "bloating" TOTAL
102. 103.	1	2 2 P:	3 3 -	Gas shortly after eating Stomach "bloating" TOTAL
102. 103. 1 GRO 104.	1 1	2 2 P:	3 3 - 7 A 3	Gas shortly after eating Stomach "bloating" TOTAL Difficulty sleeping
102. 103.	1 1 -	2 2 P :	3 3 - 7 A 3 3	Gas shortly after eating Stomach "bloating" TOTAL Difficulty sleeping On edge
102. 103. 104. 105.	1 1 -	2 2 P: 2 2 2	3 3 - 7 A 3	Gas shortly after eating Stomach "bloating" TOTAL Difficulty sleeping On edge Can't gain weight
102. 103. 104. 105. 106. 107.	1 1 1 1 1 1	2 2 2 2 2 2 2 2	3 3 7 A 3 3 3	Gas shortly after eating Stomach "bloating" TOTAL Difficulty sleeping On edge Can't gain weight Intolerance to heat
102. 103. 104. 105. 106. 107. 108.	1 1 1 1 1 1	2 2 P: 2 2 2 2 2 2	3 3 7 A 3 3 3 3	Gas shortly after eating Stomach "bloating" TOTAL Difficulty sleeping On edge Can't gain weight Intolerance to heat Highly emotional
102. 103. 1 104. 105. 106. 107. 108. 109.	1 1 1 1 1 1	2 2 2 2 2 2 2 2	3 3 7 A 3 3 3 3 3	Gas shortly after eating Stomach "bloating" TOTAL Difficulty sleeping On edge Can't gain weight Intolerance to heat Highly emotional Flush easily
102. 103. 104. 105. 106. 107. 108. 109. 110.	1 1 1 1 1 1 1 1	2 2 2 2 2 2 2 2 2 2	3 3 3 3 3 3 3 3 3	Gas shortly after eating Stomach "bloating" TOTAL Difficulty sleeping On edge Can't gain weight Intolerance to heat Highly emotional Flush easily Night sweats
102. 103. 104. 105. 106. 107. 108. 109. 110.	1 1 1 1 1 1 1 1 1	2 2 2 2 2 2 2 2 2 2 2 2 2 2	3 3 3 3 3 3 3 3 3 3	Gas shortly after eating Stomach "bloating" TOTAL TOTAL Difficulty sleeping On edge Can't gain weight Intolerance to heat Highly emotional Flush easily Night sweats Thin, moist skin
102. 103. 104. 106. 107. 108. 109. 110. 111.	1 1 1 1 1 1 1 1 1	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	3 3 3 3 3 3 3 3 3 3 3	Gas shortly after eating Stomach "bloating" TOTAL Difficulty sleeping On edge Can't gain weight Intolerance to heat Highly emotional Flush easily Night sweats Thin, moist skin Inward trembling
GRO 104. 105. 106. 107. 108. 109. 111. 112. 113.	1 1 1 1 1 1 1 1 1	2 2 2 2 2 2 2 2 2 2 2 2 2 2	3 3 3 3 3 3 3 3 3 3	Gas shortly after eating Stomach "bloating" TOTAL Difficulty sleeping On edge Can't gain weight Intolerance to heat Highly emotional Flush easily Night sweats Thin, moist skin Inward trembling Heart races
102. 103. 104. 106. 107. 108. 109. 110. 111.	1 1 1 1 1 1 1 1 1 1	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	3 3 3 3 3 3 3 3 3 3 3 3 3	Gas shortly after eating Stomach "bloating" TOTAL Difficulty sleeping On edge Can't gain weight Intolerance to heat Highly emotional Flush easily Night sweats Thin, moist skin Inward trembling Heart races Increased appetite without
102. 103. 104. 105. 106. 107. 108. 109. 111. 112. 113. 114.	1 1 1 1 1 1 1 1 1 1 1	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	3 3 3 3 3 3 3 3 3 3 3 3 3	Gas shortly after eating Stomach "bloating" TOTAL Difficulty sleeping On edge Can't gain weight Intolerance to heat Highly emotional Flush easily Night sweats Thin, moist skin Inward trembling Heart races Increased appetite without weight gain
102. 103. 104. 105. 106. 107. 108. 110. 111. 112. 113. 114.	1 1 1 1 1 1 1 1 1 1 1	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Gas shortly after eating Stomach "bloating" TOTAL Difficulty sleeping On edge Can't gain weight Intolerance to heat Highly emotional Flush easily Night sweats Thin, moist skin Inward trembling Heart races Increased appetite without weight gain Pulse fast at rest
102. 103. 104. 105. 106. 107. 110. 111. 112. 113. 114.	1 1 1 1 1 1 1 1 1 1 1 1	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Gas shortly after eating Stomach "bloating" TOTAL Difficulty sleeping On edge Can't gain weight Intolerance to heat Highly emotional Flush easily Night sweats Thin, moist skin Inward trembling Heart races Increased appetite without weight gain Pulse fast at rest Eyelids and face twitch
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102. 103. 104. 105. 106. 107. 110. 111. 112. 113. 114.	1 1 1 1 1 1 1 1 1 1 1 1	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Gas shortly after eating Stomach "bloating" TOTAL Difficulty sleeping On edge Can't gain weight Intolerance to heat Highly emotional Flush easily Night sweats Thin, moist skin Inward trembling Heart races Increased appetite without weight gain Pulse fast at rest Eyelids and face twitch
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GROUP 7B	GROUP 7F					
119. 1 2 3 Increase in weight	151 . 1 2 3 Weakness	s, dizziness 18	37 . 1 2 3	Nervousness causing		
120. 1 2 3 Decrease in appetite	152 . 1 2 3 Tired thro	oughout day		loss of appetite		
121 . 1 2 3 Fatigue easily	153 . 1 2 3 Nails wea	ak, ridged <u>18</u>	38 . 1 2 3	Nervousness with indigestion		
122 . 1 2 3 Ringing in ears	154 . 1 2 3 Sensitive	skin <u>18</u>	39 . 1 2 3	3 Gastritis		
123. 1 2 3 Sleepy during day	155. 1 2 3 Stiff joint	<u>19</u>	90 . 1 2 3	3 Forgetfulness		
124. 1 2 3 Sensitive to cold	156 . 1 2 3 Perspirati	ion increase 19	91 . 1 2 3	Thinning hair		
125 . 1 2 3 Dry or scaly skin	157 . 1 2 3 Bowel disc	comfort		TOTAL		
126. 1 2 3 Temporary constipation	158 . 1 2 3 Poor circu	ulation 1	1 2	TOTAL		
127. 1 2 3 Mental sluggishness	159. 1 2 3 Swollen a					
128. 1 2 3 Hair coarse, falls out	160 . 1 2 3 Crave salt		EMALE (
129 . 1 2 3 Tension in head upon arising	161. 1 2 3 Areas of s			3 Very easily fatigued		
wears off during day	162 . 1 2 3 Upper res			3 Premenstrual tension		
130. 1 2 3 Slow pulse below 65	163. 1 2 3 Tiredness			Menses more painful than usual		
131. 1 2 3 Changing urinary function	164 . 1 2 3 Breathing	g challenges 19	9 5 . 1 2 3	,		
132. 1 2 3 Sounds appear diminished		AL	VC 1 2 7	before menstruation		
133. 1 2 3 Reduced initiative	1 2 5	• • • • • • • • • • • • • • • • • • •	96. 1 2 3	Painful breasts during mensesMenstruate too frequently		
1 2 3 TOTAL	GROUP 8	<u> </u>		3 Hysterectomy/ovaries removed		
GROUP 7C	165 . 1 2 3 Muscle w		99. 1 2 3			
134. 1 2 3 Failing memory with age	166 . 1 2 3 Lack of st)0. 1 2 3	·		
135. 1 2 3 Increased sex drive				Acne, worse at menses		
136. 1 2 3 Episodes of tension in head	168 . 1 2 3 Muscular	soreness				
137 . 1 2 3 Decreased sugar tolerance	169 . 1 2 3 Heart rac	es 1	1 2	TOTAL		
	170 . 1 2 3 Hyperirrit	I				
	171 . 1 2 3 Feeling of		ALE ON	ILY		
GROUP 7D)2 . 1 2 3	3 Less involved in		
138 . 1 2 3 Abnormal thirst	173 . 1 2 3 Swelling o	of ankles		exercise/social activities		
139. 1 2 3 Bloating of abdomen	174 . 1 2 3 Change in	n urinary function 20)3 . 1 2 3	B Difficult to postpone urination		
140. 1 2 3 Weight gain around hips or waist	175 . 1 2 3 Tendency	to consume <u>20</u>)4 . 1 2 3	3 Weak urinary stream		
141. 1 2 3 Sex drive reduced or lacking				Feeling of "blues" or melancholy		
142. 1 2 3 Tendency for stomach issues	176 . 1 2 3 Muscle sp)6 . 1 2 3	Feeling of incomplete		
143. 1 2 3 Immune system challenges	177 . 1 2 3 Blurred vi			bowel evacuation		
144. 1 2 3 Menstrual disorders				3 Lack of energy		
	179. 1 2 3 Numbnes)8 . 1 2 3	Muscles in arms and legs seem		
	180. 1 2 3 Night swe		1 2 7	softer/smaller		
GROUP 7E 145. 1 2 3 Dizziness	181. 1 2 3 Rapid dig 182. 1 2 3 Sensitivity		1 0 . 1 2 3	Tire too easily Avoid activity		
146. 1 2 3 Headaches				3 Leg nervousness at night		
147 . 1 2 3 Hot flashes	bottom of	·		3 Diminished sex drive		
148. 1 2 3 Hair growth on face		ns on chest and abdomen	1 2 . 1 2 3	Diffinished Sex drive		
or body (female)	185 . 1 2 3 Hemorrho	pids 1	1 2	TOTAL		
149 . 1 2 3 Sugar in urine (not diabetes)	186 . 1 2 3 Apprehen					
150. 1 2 3 Masculine tendencies (female)		g bad is going to happen)				
TOTAL						
IMPOPTANT I Please lis	t halow tha five main phys	sical complaints you have in o	rdor of th	oir importance		
INII ORTANT Flease iis	t below the five main phys	sical complaints you have in or	idei oi tii	ien importance.		
1.		4.				
2.		5.				
=-		<u></u>				
3.						
TO 1	DE COMPLETED DV LIE	N THE CARE PROFESSIONA	0.1			
101	BE COMPLETED BY HEA	ALTH CARE PROFESSIONA	4L			
Digestion Large Int	estine (Palpate)	Adrenals		Pass/Fail Zinc Taste Test		
	Ascending	Pass/Fail Pupil Dilation Exam		<u>Pass/Fail</u> Cuff Test		
	Transverse	Postural Hypotension		Cuff Pressure		
	Descending	Supine		pH of Saliva		
Murphy's Sign		Standing	-	Pulse		
BARNES THYROID TE	ST	סבכז	TRICTIO	NS ON USE		
The test is conducted by the patient in the morning before leaving bed				e professionals. If you are a patient, you should not use		
1 ne test is conducted by the patient in the morning before leaving bed 10 minutes. The test is invalidated if the patient expends any energy prior any reason, shaking down the thermometer, etc. It is important that the te	to taking the test such as getting up for	the systems survey. If you are not a trained h	health care prac	ctitioner, you should not use the systems survey. Health		
making the prior positioning of both the thermometer and a clock importan	t.	care practitioners should only use the systems survey to provide services that are within the scope of their license or professional training. The systems survey is intended to be used as a helpful tool for health care practitioners in				
PRE-MENSES FEMALES AND MENOPAUSAL FEMALES (any two days during the month) FEMALES HAVING MENSTRUAL CYCLES (the second and third days of flow or any five days in a row) MALES (any two days during the month)						

Day 1 _____ Day 2 ____ Day 3 ___

____ Day 4 _____ Day 5 _