

HEALTH SURVEY

The-Allergy-Kit.com

Name: _____ Date _____

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NEUROLOGICAL	A	B	C
Trouble getting to sleep			
Trouble staying asleep			
Difficulty waking up			
Trouble staying awake			
Tired most of the time			
Weakness			
Lack of endurance			
Depression			
Loss of pleasure/ interest			
Crying spells			
Agitation			
Excess worry			
Phobias/ fearful			
Panic attacks			
Anxious or nervous			
Suspicious			
Irritability/ anger			
Delusions			
Hallucinations			
Seizures			
Tremor			
Shaky feeling			
Hyperactive			
Balance Problems			
Feel Faint			
Blackouts			
Dizziness - Lightheaded			
Spinning			
With position change			
Difficulty concentrating			
Trouble thinking clearly			
Indecisive			
Confusion			
Memory disturbance			
Learning disability			
Difficulty with speech			
Difficulty with writing			
Taste diminished or gone			
Decreased sense of smell			
Vision blurred			
Trouble focusing			
Loss of hearing			
Ears ringing			
Frequently too hot			
Frequently too cold			
Headaches - Migraine type			
Stress type			
Sinus type			
Numbness			
TOTAL			

RATE EACH SYMPTOM
A = BEFORE STARTING ALLERGY TREATMENT
B = AFTER FIRST ALLERGY KIT
C = AFTER SECOND ALLERGY KIT

- (BLANK) _____ No Trouble
- 1 Mildly Troubling
 - 2 Moderately Troublesome
 - 3 Severly Troublesome

Please total each system where Indicated

GASTROINTESTINAL	A	B	C
Mouth ulcers-cankers			
Mouth/ tongue raw or sore			
Heartburn			
Indigestion			
Excess acidity			
Gastritis or 'acid stomach'			
Gastric ulcers			
Nausea			
Abdominal pain			
Sore all over			
Cramping pain			
Upper abdominal pain			
Lower abdominal pain			
Gas pains			
Intestinal gas			
Abdominal bloating			
Constipation			
Diarrhea			
Alternating constipation/ diarrhea			
Rectal itch			
Food cravings			
Fluctuating appetite			
Loss of appetite			
Excessive hunger			
TOTAL			
CARDIOVASCULAR	A	B	C
Chest pain			
Chest pain only with exertion			
Leg pain on exertion			
Swelling of feet			
Rapid pulse/ pounding heart for no apparent reason			
TOTAL			
MUSCULOSKELETAL	A	B	C
Aching generalized			
Muscle soreness			
Muscle cramps			
Muscle weakness			
Muscle jerks			
Muscle stiffness			
Arthritis, joint pain			
Back pain			
Stiffness in neck and shoulders			
TOTAL			

RESPIRATORY	A	B	C
Nose congested			
Only seasonal			
Only in some situations			
Constant			
Constant/ worse at times			
Nose runny			
Nose itching			
Sneezing			
Nose bleeds			
Eye itching			
Eye soreness			
Eye watering			
Eye redness			
Crusting/ rash on eyelids			
Swelling on eyelids			
Dark circles under eyes			
Ears sore			
Ears - deep itching			
Ear pressure			
Ear fluid			
Sinus pressure or dullness			
Sore throat			
Swelling throat			
tightness of throat			
Itching mouth or throat			
Drainage from nose or sinuses in throat			
Hoarseness			
swollen neck lymph nodes			
Shortness of breath			
Trouble moving air in and out			
Asthma or wheezing			
Air not satisfying			
Smothering feeling			
Tight chest			
Chest pain with breathing			
Chest pain with coughing			
Cough			
Throat infections			
Ear infections			
Sinus infections			
Bronchitis			
Pneumonia			
TOTAL			

URINARY SYSTEM	A	B	C
Frequent urination			
Burning on urination hesitation to start urination			
Obstruction to urinary flow			
Loss of urinary with straining, coughing or activity			
Urinary tract infection			
Bed wetting			
TOTAL			

SKIN	A	B	C
Skin rash			
Eczema or dermatitis			
Itching or irritated skin			
Dry skin			
Rough skin			
Easy Bruising			
Flushing/ redness of skin			
Hives			
Acne starting or persisting into adulthood			
Dandruff			
Excessive perspiration			
Sweaty hands and feet			
TOTAL			

FEMALES ONLY	A	B	C
Vaginal soreness/ burning			
Vaginal itch			
Vaginal discharge/ infection			
Loss of sexual interest			
Hair growth, face			
Irregular menstrual periods			
Menstrual cramps			
Development of or worsening of symptoms during the time prior to menstruation			
Headaches			
Fluid retention			
Weight gain			
Increased appetite			
Irritability			
Angry outbursts			
Depression			
Fatigue			
Confusion			
Personality change			
Change in the sex drive			
Clumsiness			
TOTAL			

	A	B	C
NEUROLOGICAL TOTAL			
GASTROINTESTINAL TOTAL			
CARDIOVASCULAR TOTAL			
MUSCULOSKELETAL TOTAL			
RESPIRATION TOTAL			
URINARY SYSTEM TOTAL			
SKIN TOTAL			
FEMALES ONLY TOTAL			

	A	B	C
GRAND TOTAL			