Nutritec Sc	oftware Symptom Survey	1 2 3	GROUP 3 continued
NAME:	DATE:	44 O O O 45 O O O	Hungry between meals
		46 0 0 0	Get "shaky" if hungry
Phone:	E-mail:	47 0 0 0	0 0 , 0
Fay:	DOB://	48 O O O 49 O O O	•
1 ax.		50 0 0 0	Heart palpitates if meals missed or delayed Afternoon headaches
	Female Tissue Calcium:	51 O O O 52 O O O	Upset feeling from excessive eating of sweets Awaken after few hours sleep hard to get back
Height:	Weight :	53 0 0 0	to sleep Crave candy or coffee in afternoons
Blood Pressure: Pulse:		54 O O O 55 O O O	Moods of depression "blues" or melancholy Abnormal craving for sweets or snacks
Sitting:	Laying: Standing:	FC () ()	GROUP 4
	ompletely black out one of the three circles: -mild, 2-moderate, 3-severe	57 () () 58 () () 59 () ()	Aware of "breathing heavily" Discomfort at high altitude
MILD s	symptoms (once or twice last 6 months)	60 0 0 0	
-	RATE symptoms (once or twice last month)	61 O O O	Susceptible to colds and fevers Afternoon yawner
O O SEVER	RE symptoms (Chronic, once or twice last week)	63 0 0 0	
	ircles BLANK if they do not apply to you!	64 🔾 🔾 🔾	Swollen ankles worse at night
	,,	65 () ()	Muscle cramps, worse during exercise; "charley-horse"
1 2 3	GROUP 1	66 🔾 🔾 🔾	Shortness of breath on exertion
1 O O O Acid	•	67 🔾 🔾	Dull pain in chest or radiating into left arm,
2 O O O Feel		22 0 0 0	worse on exertion
3 () () ("Lun 4 () () () Dry r		68 O O O	Bruise easily,"black/blue"spots on arms or leg Tendency to anemia
5 O O O Puls	e speeds after meals	70 0 0 0	Frequently have "nose bleeds"
6 O O O Keye	ed up; unable to feel calm	71 0 0 0	"Ringing in ears" or noises in head
7 O O O Cuts 8 O O O Gag	heal slowly	72 🔾 🔾 🔾	
	easny ble to relax; startles easily		"tightness" in the chest, gets worse on exertion
10 O O O Extre	emities cold and/or clammy	73 🔾 🔾 🔾	
11 O O O Stroi		74 O O O	Dry skin
12 O O O Urino	e amount reduced t pounds after retiring	75 0 0 0	
14 O O O "Ner		76 0 0 0	Blurred vision Itching skin and feet
15 O O O Appe			Excessive falling hair
16 ○ ○ ○ Cold 17 ○ ○ ○ Body		79 🔾 🔾 🔾	Frequent skin rashes
	y temperature rises easily sensitive to touch		Bitter or metallic taste in mouth in the morning
19 🔘 🔘 🔾 Stari		81 () () () 82 () () ()	
	uently has a sour stomach	83 0 0 0	
\sim	GROUP 2	84 🔾 🔾 🔾	Greasy foods upsets
$\sim \sim \sim$	t stiffness after rising	85 0 0 0	
23 O O O "But	cle-leg-toe cramps at night terfly" stomach, cramps	86 O O O	•
24 O O O Eyes	s or nose watery	88 0 0 0	
$\Delta \Delta \Delta \Delta$	s blink often	89 0 0 0	
$\sim \sim \sim$	ids swollen or puffy gestion soon after meals	90 O O O	
28 O O O Alwa	ys seems hungry; "lightheaded" often	92 0 0 0	
29 O O O Food	d digests rapidly	93 🔾 🔾 🔾	C. C
	it frequently	94 0 0 0	
~ ~ ~ '	uently hoarse ular breathing	95 O O O	
	e slow or feels "irregular"	97 () ()	
	gag reflex	• •	GROUP 6
	culty swallowing		Loss of taste for meat
	rnating constipation and diarrhea w starter"		Lower bowel gas several hours after eating
38 O O O Not 6	easily chilled		Burning stomach sensations, eating relieves Coated tongue
	pire easily		Pass large amounts of foul smelling gas
	r circulation or sensitive to cold ect to colds, asthma, bronchitis		Indigestion 1/2 - 1 hour after eating; may be up
-	GROUP 3	404 0 0 0	to 3-4 hrs.
\sim	when nervous		Mucus colitis or "irritable bowel" Gas shortly after eating
13 O O Exce			Stomach "bloating" after eating

1 2 3	GROUP 7A	1 2 3 GROUP 8
107 0 0 0	Insomnia	173 O O Apprehension
108 🔾 🔾 🔾		174 O O Irritability
109 🔾 🔾 🔾	Can't gain weight	175 O O Morbid fears
	Intolerance to heat	176 O O Never seems to get well
111 () () ()	Highly emotional	177 O O O Forgetfulness
112 0 0 0	Flush pasily	178 O O Indigestion
113 0 0 0	Night events	179 O O Poor appetite
113 0 0 0	Night Sweats	180 O O Craving for sweets
	Skin is thin and moist	
115 0 0 0	Inward trembling	181 O O Muscular soreness
116 0 0 0	Heart palpitates	182 O O Depression; feelings of dread
117 0 0 0	Increased appetite without weight gain	183 O O Noise sensitivity
118 O O O	Pulse races when resting	184 O O Acoustic hallucinations
119 0 0 0	Eyelids and face twitch	185 O O Tendency to cry without reason
120 🔾 🔾 🔾	Irritable and restless	186 O O Hair is coarse and/or thinning
121 0 0 0	Can't work under pressure	187 O O Weakness
	GROUP 7B	188 O O O Fatigue
400 0 0		189 O O Skin sensitive to touch
	Noticeable weight gain	190 O O Tendency towards hives
123 () () ()	Decrease in appetite	191 O O Nervousness
124 O O O	Easily fatigued	192 O O Headache
	Ringing in ears	193 O O Insomnia
126 O O O	Sleepy during day	194 O O Anxiety
127 () () ()	Sensitive to cold	
128 () () ()	Dry or scaly skin	195 O O Anorexia
129 🔾 🔾 🔾		196 O O Inability to concentrate; confusion
	Mental sluggishness	197 O O Frequent stuffy nose; sinus infections
	Hair coarse, falls out	198 O O Allergy to some foods
	Headaches upon arising wear off during day	199 O O Loose joints
132 0 0 0	Pulse slow, below 65	FEMALE ONLY
133 0 0 0	Fuse slow, below 65	200 O O Very easily fatigued
134 0 0 0	Frequent urination	201 O O Premenstrual tension
135 0 0 0	Impaired hearing	202 O O Painful menses
136 0 0 0	Reduced initiative	
	GROUP 7C	203 O O Depressed feelings before menstruation
137 O O O	Failing memory	204 O O Excessive and prolonged menstruation
	Low blood pressure	205 O O Painful breasts
	Increased sex drive	206 O O Menstruate too frequently
	Headaches, "splitting or rending" type	207 O O Vaginal discharge
141 0 0 0		208 O O Hysterectomy / ovaries removed
141 0 0 0	C	209 O O Menopausal hot flashes
	GROUP 7D	210 O O Menses scanty or missed
	Abnormal thirst	211 O O O Acne, worse at menses
143 🔾 🔾 🔾	Bloating of the abdomen	212 O O C Long standing depression
144 0 0 0	Weight gain around hips or waist	
	Sex drive reduced or lacking	MALE ONLY
	Tendency toward ulcers and/or colitis	213 O O Prostate trouble
	Increased sugar tolerance	214 O O Urination difficult or dribbling
	(FEMALE) Menstrual disorders	215 O O Frequent night-time urination
	(YOUNG GIRLS) Lack of menstrual function	216 O O Depression
149 0 0 0		217 O O Pain on inside of legs or heels
	GROUP 7E	218 O O Feeling of incomplete bowel evacuation
150 O O O	Dizziness	219 O O Lack of energy
151 O O O	Headaches	220 O O Migrating aches and pains
152 O O O	Hot flashes	221 O O Too easily tired
153 🔾 🔾 🔾	Increased blood pressure	222 O O Avoids activity
	(FEMALE) Hair growth on face or body	223 O O Leg nervousness at night
	Sugar in urine (not diabetes)	224 O O Diminished sex drive
	(FEMALE) Masculine tendencies	
130000	` '	List below your five main physical complaints in order of importance:
	GROUP 7F	
	Weakness and/or dizziness	1
	Chronic fatigue	
159 🔾 🔾 🔾	Low blood pressure	2
160 🔾 🔾 🔾	Nails weak and/or ridged	
161 () () ()	Tendency towards hives	3
162 🔾 🔾 🔾	Arthritic tendencies	
163 🔾 🔾 🔾	Perspiration increase	4
	Bowel disorders	
165 🔾 🔾 🔾	Poor circulation	5
	Swollen ankles	
167 0 0 0		Notes:
	Brown spots or bronzing of skin	110100.
	Allergies - tendency to asthma	
	Weakness after colds or influenza	
	Muscular and nervous exhaustion	
	Respiratory disorders	
	I NOODII ULULY ULOULUGI O	