# NUTRI-Body® Questionnaire

by David W. Rowland, PhD

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"It is more important to know the person who has the condition than it is to know the condition the person has." — Hippocrates.

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<thead>
<tr>
<th>NAME (Print)</th>
<th>Sex</th>
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<th>Address</th>
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<tr>
<th>Date</th>
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This questionnaire is designed to assess bodily signs which may relate to nutritional imbalance. Its sole purpose is to educate and to inform. It is not intended to diagnose diseases. If you suspect that you may have a medical problem, please seek competent medical care. TO COMPLETE THIS FORM: If any part of a statement is true for you, PLACE a iii", ii2" or ii3" in the brackets beside it. Use H," for "sometimes", "Hmild", "2" for "often" or "moderate", and "3" for "vel" often" or "severe", skip all statements that do not apply to you. At the end of each section, total the numbers in the brackets and multiply by the factor indicated. Do not Hagonize" over any statement. If it is unclear or questionable, ignore it and go on to the next.

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### Section A-1

- [ ] Dry mouth, dry eyes, dry nasal membranes.
- [ ] Dry or leathery skin.
- [ ] Dry or chapped lips.
- [ ] Stools hard and dry.
- [ ] Low volume of urine, urinate infrequently.
- [ ] Tendency to form kidney stones.

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<th>TOTAL X 8</th>
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### Section A-2

- 1 Infrequent bowel movements.
- [ ] Painful, hard bowel movements.
- [ ] Abdominal distension.
- [ ] Loss of appetite.
- [ ] Haemorrhoids or rectal fissure.
- [ ] Overweight.
- [ ] Varicose veins.
- [ ] Tendency to form gallstones.

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<table>
<thead>
<tr>
<th>TOTAL X 6</th>
<th>A-2</th>
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</table>

### Section A-3

- 1 Rough, dry, flaky or scaly skin.
- [ ] Eczema, psoriasis, dermatitis.
- [ ] Dry or gritty feeling in eyes, dry tear ducts.
- [ ] Dry, lifeless, or brittle hair, split ends.
- [ ] Brittle or cracked nails.
- [ ] Dry mouth, throat, mucous membranes.
- [ ] Wounds or injuries heal slowly, poorly.
- [ ] Bleeding gums, easy bruising.
- [ ] Frequent colds, infections, sickness.
- [ ] Depression, lack of motivation.
- [ ] Forgetfulness, short attention span.
- [ ] FEMALE: Premenstrual syndrome.
- [ ] FEMALE: Difficulty getting pregnant or carrying to term.

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<table>
<thead>
<tr>
<th>TOTAL X 5</th>
<th>A-3</th>
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<table>
<thead>
<tr>
<th>Section A-4</th>
<th>Section A-5</th>
<th>Section A-6</th>
<th>Section A-7</th>
<th>Section A-8</th>
<th>Section B-1</th>
<th>Section B-2</th>
</tr>
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<tbody>
<tr>
<td>Excess fluid retention (edema) in hands or feet.</td>
<td>Cold sores, herpes simplex.</td>
<td>Muscular weakness.</td>
<td>Anxiety.</td>
<td>Indigestion or sourness 2 to 3 hr. after meals.</td>
<td></td>
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</tr>
<tr>
<td>Poor co-ordination.</td>
<td>Inability to concentrate.</td>
<td>Allergic chemical sensitivities.</td>
<td>Short attention span, hypertension</td>
<td>Full, logy feeling after heavy meat meal.</td>
<td></td>
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<tr>
<td>Impaired wound healing.</td>
<td>Low resistance to stress.</td>
<td></td>
<td>Insomnia, sleeplessness.</td>
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</tr>
<tr>
<td>Premature aging.</td>
<td>Hair dull, dry, sparse, loose and falling out.</td>
<td></td>
<td>Depression, moodiness.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hair dull, dry, sparse, loose and falling out.</td>
<td>Brittle nails, slow growing nails.</td>
<td></td>
<td>Anxiety, panic attacks.</td>
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<tr>
<td>Mood swings, depression.</td>
<td></td>
<td></td>
<td>Migraine headaches.</td>
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<tr>
<td>Insomnia.</td>
<td></td>
<td></td>
<td>Restless legs.</td>
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<tr>
<td>Nervousness, agitation.</td>
<td></td>
<td></td>
<td>Hyperactivity.</td>
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<tr>
<td>Low resistance to stress.</td>
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_ TOTAL X 3 = O A-4 _

_ TOTAL X 6 = O A-5 _

_ TOTAL X 12 = O A-6 _

_ TOTAL X 6 = O A-7 _

_ TOTAL X 10 = O A-8 _

_ TOTAL X 6 = O B-1 _

_ TOTAL X 25 = O B-2 _
Section B-3
[ ] Low tolerance to alcohol or sugar.
[ ] Skin oily on nose and forehead.
[ ] Dark circles or hags under the eyes.
[ ] Fats/greasy foods cause nausea, headaches.
[ ] Stool appears yellow, clay-coloured, foul odoured.
[ ] Pale, greasy stools that float.
[ ] Foul-smelling bowel gas.
[ ] Bad breath/bad taste in mouth, excess body odour.
[ ] Pain on inside of right shoulder blade.
[ ] Consistent gas & bloating from most foods, and especially from onions, cabbage, radishes, cucumbers.

__ TOTAL X 5 = O B-3

Section B-4
[ ] Greasy, foul-smelling stools.
[ ] Chronic diarrhea.
[ ] Undigested food in stools.
[ ] Mucus in stools.
[ ] Foul-smelling intestinal gas.

__ TOTAL X 10 = O B-4

Section B-5
[ ] Indigestion, bloating after meals.
[ ] Intestinal gas, especially after sugary foods.
[ ] Diarrhea or constipation.
[ ] Urinary tract infections.
[ ] Yeast infections, candidiasis.
[ ] Cold sores, canker sores.

__ TOTAL X 8 = O B-5

Section C-1
[ ] Dental cavities/caries.
[ ] Overweight.
[ ] Nervousness, hyperactivity.
[ ] Anxiety or depression.
[ ] Cravings, addictions.
[ ] Yeast infections, candidiasis.
[ ] Recurring infections.
[ ] High cholesterol in blood.
[ ] High triglycerides.
[ ] Gallstones, gout or kidney stones.

__ TOTAL X 5 = O C-1

Section C-2
[ ] High blood pressure.
[ ] Stools dry, shrunken.
[ ] Excess fluid retention, edema.
[ ] Stomach ulcers.
[ ] Tremors, convulsions or seizures.
[ ] Irritability.
[ ] Excessive thirst or excessive urination.

__ TOTAL X 7 = O C-2

Section C-3
[ ] High blood pressure.
[ ] Irritability, restlessness, excitement.
[ ] Nausea, vomiting.
[ ] Headaches.
[ ] Convulsions, tremors.
[ ] Insomnia.
[ ] Frequent urination, bladder irritation.
[ ] Irregular heartbeat.
[ ] Ringing sound in ear, tinnitus.
[ ] FEMALE: Fibrocystic breast lumps.

__ TOTAL X 6 = O C-3

Section C-4
[ ] High blood pressure.
[ ] Shingles, hives.
[ ] Anemia.

__ TOTAL X 16 = O C-4

Section C-5
[ ] Whitish, yellowish or brown mottling of teeth.
[ ] Pitting of teeth.
[ ] Nausea or vomiting.
[ ] Pain and aching of bones and spine.

__ TOTAL X 12 = O C-5
Section C-6
[ ] Excitement.
[ ] Confusion.
[ ] Depression.
[ ] Muscular twitching.
[ ] Abdominal cramps.
[ ] Spasmodic muscular contractions.
[ ] Heart palpitations.
[ ] Rapid breathing.

_ _ TOTAL X 6 = O C-6

Section D-1
[ ] Brittle fingernails, vertically ridged nails.
[ ] Pain in forearm or biceps.
[ ] Cramps in calf muscle during sleep or exercise.
[ ] Painful cramping of feet or toes.
[ ] Joint pains.
[ ] Teeth prone to decay, frequent toothaches.
[ ] Poor quality or malformation of bones.
[ ] Nervous tics or twitches, twitching muscles.
[ ] Nervousness, irritability, anxiety.
[ ] Unusual sensitivity to noise.
[ ] Insomnia.
[ ] Heart palpitations.
[ ] FEMALE: Excessive, lengthy, painful menses.

_ _ TOTAL X 4 = O D-1

Section D-2
[ ] Irritable nerves or muscles, nervous tics/twitches.
[ ] Muscle spasms, tremors, convulsions or seizures.
[ ] Muscle cramps in bottom of feet.
[ ] Muscular tension, tight muscles.
[ ] Restless legs, legs in constant motion at night.
[ ] Knee pain, hip pain.
[ ] Irregular heartbeat.
[ ] Painful and cold hands or feet.
[ ] Excessive body odour.
[ ] Loose or sensitive teeth.
[ ] Anxiety, confusion, disorientation, irritability.
[ ] Nausea, dizziness or lightheadedness.
[ ] Mental depression or apathy.
[ ] Startle reactions, hypersensitivity to noise.
[ ] Poor co-ordination.
[ ] Cravings for chocolate.
[ ] Insomnia, restlessness, hyperactivity.

_ _ TOTAL X 7 = O D-4

Section D-3
[ ] Swelling of ankles or hands.
[ ] Dry skin.
[ ] Slow, rapid or irregular heartbeat, palpitations.
[ ] Constipation.
[ ] Unusual thirst.
[ ] Muscular weakness.
[ ] Unusually sore or stiff muscles after exercising.
[ ] Agitation, irritability.
[ ] High blood pressure.

_ _ TOTAL X 6 = O D-3

Section D-S
[ ] Prone to athletic injuries, strained knees, elbow.
[ ] Loss of ligament tone or strength.
[ ] Muscular weakness.
[ ] Nervous degeneration.
[ ] Creaking or clicking of joints.
[ ] Knee, hip or ankle pain.

_ _ TOTAL X 8 = O D-S
Section D-6
[ ] Cuts, wounds, sores heal slowly.
[ ] Hair or nails grow slowly.
[ ] Loss of sense of smell or taste.
[ ] Catch colds, flu, infections easily.
[ ] Brittle nails.
[ ] White spots on fingernails.
[ ] Acne.
[ ] Stretch marks.
[ ] Sterility or impotence.
[ ] White coating on tongue.
[ ] Loss of appetite, anorexia.
[ ] Sleep disturbances.
[ ] Diarrhea.
[ ] MALE: Prostate problems, low sperm count.
[ ] MALE: Delayed sexual maturity.
[ ] CHILDREN: Growing pains, stunted growth.

_ TOTAL X 4 = O D-6

Section D-7
[ ] Dry skin.
[ ] Dry hair.
[ ] Brittle or fragile nails.
[ ] Slow wound healing.
[ ] Joint pain, tenderness or swelling.
[ ] Muscular soreness, cramps in legs or back.
[ ] Diabetes, diabetic tendencies.
[ ] Anxiety or depression.

_ TOTAL X 8 = O D-7

Section D-8
[ ] Rapidly aging skin, loss of skin elasticity.
[ ] Weak hair shafts, thinning hair, split ends.
[ ] Soft or weak nails.
[ ] Retarded growth, incomplete skeletal development.

_ TOTAL X 12 = O D-8

Section E-I
[ ] Dry hair.
[ ] Brittle nails.
[ ] Slow mental reactions.
[ ] High cholesterol in blood.
[ ] Enlargement of thyroid gland, goitre.
[ ] Heart palpitations.
[ ] Irritability.
[ ] Overweight.
[ ] Sluggish metabolism.
[ ] Constipation.
[ ] FEMALE: Cystic breasts, breast lumps.

_ TOTAL X 5 O E-t

Section E-2
[ ] High cholesterol in blood.
[ ] High triglycerides.
[ ] Intolerance to alcohol.
[ ] Glucose intolerance, hypoglycemia, diabetes.
[ ] Cravings for sugars or starches.

_ TOTAL X 10 O E-2

Section E-3
[ ] Muscular degeneration, muscular dystrophy.
[ ] Weakened heart tissue, cardiomyopathy.
[ ] Loss of skin elasticity, excessive wrinkling.
[ ] Cancer or heart disease.
[ ] Cataracts.
[ ] Cystic fibrosis.

_ TOTAL X 10 O E-3

Section F-I
[ ] Poor night vision, unable to see well in dim light.
[ ] Eyes sensitive to glare, sunlight or bright lights.
[ ] Inability to adjust eyes when entering a dark room.
[ ] Dry eyes, dry cornea.
[ ] Eyelids red, scaly or dry.
[ ] Eye inflammations, conjunctivitis.
[ ] Styes, eyelids swollen.
[ ] Get colds or respiratory infections easily.
Section F-1 continued
[ ] Sinus problems.
[ ] Abscesses in ears, mouth or salivary glands.
[ ] Brittle or dry hair.
[ ] Dry, rough or scaly skin.
[ ] Hard "goosebumps" on backs of arms.
[ ] Acne, pimples or blackheads.
[ ] Warts.
[ ] Kidney, urinary or bladder infections, burning or itching when urinating.

_ TOTAL X 3 = O F-1

Section F-2
[ ] Burning in mouth and throat.
[ ] Poor bone development.
[ ] Abnormal number of dental cavities, cracking teeth.
[ ] Osteoporosis (demineralized bone).
[ ] Osteomalacia (softening of bone).
[ ] Rickets (bowlegs, knock-knees).
[ ] Joint pains, bone pains.
[ ] Muscular cramps.
[ ] Nearsightedness, myopia.
[ ] Nervousness.
[ ] Insomnia.
[ ] Constipation.

_ TOTAL X 5 = O F-2

Section F-3
[ ] Muscular weakness, swelling or wasting.
[ ] Poor co-ordination.
[ ] Involuntary movements of the eyes.
[ ] Brittle and falling hair.
[ ] Tendency to form blood clots.
[ ] Fat malabsorption, celiac sprue, cystic fibrosis.
[ ] Hemolytic anemia, sickle cell anemia.
[ ] FEMALE: Menstrual discomfort.
[ ] MALE: Low sex drive, impotence.

_ TOTAL X 10 = O F-3

Section G-1
[ ] Heart palpitations or gallop rhythm.
[ ] Slow heart beat or rapid heart beat.
[ ] Vague chest pains, shortness of breath.
[ ] Enlarged heart.
[ ] Diastolic blood pressure over 90.
[ ] Forgetfulness, poor memory, short attention span.
[ ] Muscular tenderness, weakness or wasting.
[ ] Irritability.
[ ] Feel depressed.
[ ] Loss of appetite or loss of weight.
[ ] Numbness, pricking or tingling in hands or feet.
[ ] Loss of ankle or knee jerk reflexes.
[ ] Poor co-ordination.
[ ] Stiffness or swelling in ankles, feet or legs.
[ ] Cramping pains in legs, especially after exercising.
[ ] Tenderness in calf muscle under pressure.
[ ] Constipation.
[ ] Vulnerability to insect bites, esp. mosquitoes or fleas.

_ TOTAL X 3 = O G-1

Section G-2
[ ] Cracks or sores in corner of mouth.
[ ] Reddish-purple (magenta) coloured tongue.
[ ] Shiny, sore or swollen tongue.
[ ] Lips red, white, scaly, swollen or chapped.
[ ] Conjunctivitis.
[ ] Cataracts.
[ ] Sensation of "sand" under the eyelids.
[ ] Eyes sensitive to light.
[ ] Blurred vision, dimming of vision.
[ ] Eyes red, itchy, burning.
[ ] Red lines in whites of eyes.
[ ] See spots before eyes.
[ ] Abnormally greasy or scaly skin around nose.
[ ] Falling hair, abnormal hair loss.
[ ] Oily hair.
[ ] Loss of fullness in upper lip.
[ ] Wrinkles radiating from lips towards nose/cheeks.

_ TOTAL X 3 = O G-2
Section G-3
[ ] Diarrhea.
[ ] Chapping of backs of hands.
[ ] Itchy, red or inflamed skin, dermatitis.
[ ] Irritability, anxiety or depression.
[ ] Loss of sense of humour.
[ ] Indigestion.
[ ] Small ulcers or canker sores in mouth.
[ ] Burning sensation in hands or feet.
[ ] Insomnia.
[ ] Whitish, coated tongue.
[ ] Brilliant red, painful tongue.
[ ] Swollen tongue with red tips and sides.
[ ] Feel as if hands or feet go numb.

_ TOTAL X 4 = O G-3_

Section G-4
[ ] Pupils in eyes are unusually large, dilated.
[ ] Periods of deep depression.
[ ] Burning sensation of hands or feet.
[ ] Poor co-ordination.
[ ] Lightheaded or dizzy when sitting up or standing up.
[ ] Diarrhea or constipation.
[ ] Numbness or tingling in hands or feet.
[ ] Joint pains.
[ ] Muscle cramps.
[ ] Rapid heartbeat on exertion.
[ ] Irritability, agitation.
[ ] Headaches.
[ ] Insomnia, sleeplessness.
[ ] Quarrelsome, hot temper.
[ ] Inability to cope with stress.
[ ] Restless legs, constant motion of legs at night.

_ TOTAL X 3 = O G-4_

Section G-5
[ ] Greenish tint to urine.
[ ] Hyperactivity.
[ ] Poor co-ordination in walking.
[ ] FEMALE: Nausea of pregnancy.
[ ] FEMALE: Acne worse during periods.
[ ] FEMALE: Swelling of face, abdomen or extremities during menses.

_ TOTAL X 4 = O G-5_

Section G-6
[ ] Skin shiny, dry and scaly.
[ ] Tongue purplish-red (magenta) swollen & painful.
[ ] Nausea.
[ ] Muscular pains.
[ ] Mental depression.
[ ] Poor appetite.
[ ] Fingernails a pale colour, pale complexion.
[ ] Sleeplessness.
[ ] Irregular heart beat.
[ ] Hair loss, brittle hair.
[ ] Loss of skin pigment.

_ TOTAL X 4 = O G-6_

Section G-7
[ ] Sore, beefy red tongue.
[ ] Lemon-yellowish tint to skin, pale complexion.
[ ] Numbness, tingling, soreness, weakness in hands/feet.
[ ] Jerking of limbs.
[ ] Memory loss.
[ ] Stammer.
[ ] Apathy, feel as if have lost incentive in life.
[ ] Depression, moodiness.
[ ] Anxiety, irritability, nervousness, agitation.
[ ] Anemia.
[ ] Hallucinations, delusions.
[ ] Loss of appetite.
[ ] Confusion, disorientation.
[ ] Back pains.
[ ] Dizziness.
[ ] Dimmed vision.
[ ] Poor stomach digestion, low stomach acid.
[ ] FEMALE: Menstrual disturbances.

_ TOTAL X 4 = O G-7_
Section G-8
[ ] Tongue red, shiny, smooth and painful.
[ ] Ulcers in mouth.
[ ] Red, swollen or bleeding gums.
[ ] Intestinal malabsorption, sprue.
[ ] Diarrhea.
[ ] Heart palpitations.
[ ] Swelling of ankles.
[ ] Lightheadedness, faintness.
[ ] Apathy or depression.
[ ] Forgetfulness.
[ ] Loss of appetite, weight loss.
[ ] Greying hair.
[ ] Excess pigmentation of skin.
[ ] Irritable, agitated, brooding or self-conscious.
[ ] Anemia.

_ TOTAL X 3 = O G-8

Section G-9
[ ] Skin bruises easily, "black & blue" marks.
[ ] Hemorrhages or ruptured blood vessels in eye.
[ ] Gums bleed easily, especially when brushing teeth.
[ ] Bluish-red, swollen or inflamed gums.
[ ] Loose teeth, loss of dental fillings.
[ ] Cuts, sores or wounds heal slowly.
[ ] "Fleeting" pains in joints or legs, joint tenderness.
[ ] Catch infections, colds, flu or viruses easily.
[ ] Listlessness, lack of endurance, tire easily.
[ ] Cuticles tear easily.
[ ] Excessive hair loss.
[ ] Restlessness or irritability.
[ ] Nosebleeds.
[ ] Broken capillaries, hemorrhages, pink spots on skin.
[ ] Bloating or puffiness in face.
[ ] Anemia.
[ ] Fragile bones.
[ ] Thinning or premature aging of skin.

_ TOTAL X 3 = O G-9

Section H-2
[ ] Bleed easily (gums, nosebleeds, cuts).
[ ] Bruise easily.
[ ] Tiny red blood spots on skin.
[ ] Varicose veins, hemorrhoids.
[ ] Inflamed, swollen joints.
[ ] FEMALE: miscarriages, threatened miscarriages.
[ ] FEMALE: heavy & prolonged menstrual bleeding.

_ TOTAL X 10 = O H-2

Section I-1
[ ] Rough skin.
[ ] Excessive perspiration.
[ ] Loss of former taste or craving for meat.
[ ] Nausea, inclination to vomit.
[ ] Potatoes disagree.
[ ] Belching accompanied by head colds.
[ ] Constipation accompanied by throbbing headaches.
[ ] Numbness, stiffness or loss of sensation in arms/legs.
[ ] Poor or failing memory.
[ ] Stitching or burning pain in head with dizziness, relieved by eating.

_ TOTAL X 5 = O I-1

Section 1-2
[ ] High or low blood pressure.
[ ] Anemia.
[ ] Emphysema.
[ ] Kidney disease.

_ TOTAL X 12 = O 1-2

Section 1-3
[ ] Nausea or vomiting.
[ ] Abdominal pain.
[ ] Diarrhea.
[ ] Excessive hair loss.
[ ] Hyperactivity, irritability or nervousness.
[ ] Depression.

_ TOTAL X 8 = O 1-3
Section 1-4

[ ] Constipation.
[ ] Cramps or vague abdominal aches or discomfort.
[ ] Dizziness.
[ ] Anxiety or irritability.
[ ] Nervousness or restlessness.
[ ] Lack of ambition, apathy or depression.
[ ] Hand tremors.
[ ] Poor co-ordination.
[ ] Sallow complexion, greyish-greenish-yellow tint.
[ ] Convulsions, seizures.
[ ] Paralysis.
[ ] Catch colds, infections easily.
[ ] Vomiting.
[ ] CHILDREN: Hyperactivity.

--- TOTAL X 4 = O 1-4

Section 1-5

[ ] Tremors or poor co-ordination.
[ ] Inflamed gums.
[ ] Loss of ability to speak.
[ ] High blood pressure.
[ ] Diabetic tendencies.
[ ] Mental disturbances or personality changes.
[ ] Poor memory.
[ ] Depression or uncontrollable crying.
[ ] Metallic taste in mouth.
[ ] Allergic tendencies.
[ ] Loss of self-confidence.
[ ] Food cravings.
[ ] Facial and back pain.
[ ] Loss of appetite.
[ ] Irritability.

--- TOTAL X 3 = O 1-5

Section 1-6

[ ] Eyes sensitive to bright lights, head lights, sunlight.
[ ] Tightness or "lump" in throat, hurts under stress.
[ ] Inability to cope with stressful events.
[ ] Form gooseflesh easily or "cold sweats".
[ ] Voice rises to high pitch or is "lost" during stress.
[ ] Easily shaken up or startled from unexpected noise.
[ ] Prefer being alone, uneasy when centre of attention.
[ ] Blood pressure fluctuates, sometimes too low.
[ ] Perfectionist, set high standards.

--- TOTAL X 10 = O 1-6

J-1 continued

[ ] Avoid complaints, try to ignore inconveniences.
[ ] Work off worries, things left undone cause concern.
[ ] Allergies (e.g., skin rash, hay fever, asthma, etc.).
[ ] Mood swings, tendency to cry easily.
[ ] Difficulty relaxing.
[ ] Emotional upsets cause complete exhaustion.
[ ] Unusual craving for salt.
[ ] Perspire excessively, sweating of hands or feet.
[ ] More than usual neck, head, shoulder tension.
[ ] Blood pressure decreases when going from a lying position to a standing position.

--- TOTAL X 3 = O J-1

Section 1-7

[ ] Persistent high blood pressure.
[ ] Rapid pulse.
[ ] Fluid retention of facial tissues, puffy face.
[ ] Stronger than average physically.
[ ] Strong feelings, blow up easily, dislike being crossed.
[ ] FEMALE: Excess hair on face, arms, legs.
[ ] MALE: Baldness, hairy arms and back, muscular "square" build, aggressive in business or sports.

--- TOTAL X 8 = O J-2

Section J-3 [FEMALE]

[ ] Irregular or discomforting menstrual periods.
[ ] Hot flashes, night sweats.
[ ] Nervousness, depression, mood swings.
[ ] Have had uterus and/or ovaries removed.
[ ] Lost or diminished sex drive.
[ ] Breast swelling before or during periods.
[ ] Unable to have children because of sterility (not because of age or operation).

--- TOTAL X 8 = O J-3

Section J-3 [MALE]

[ ] Difficulty urinating... starting, burning.
[ ] Above associated with back or leg pains.
[ ] Have to urinate more than twice during night.
[ ] Prostate trouble or prostate surgery.
[ ] Lost or diminished sex drive.

--- TOTAL X 10 = O J-3
Section J-4

[ ] Burning sensation upon urination.
[ ] High diastolic blood pressure (above 90).
[ ] Lower back pains.
[ ] Puffiness around eyes.
[ ] Have to urinate more than twice per night.
[ ] Legs often feel heavy.
[ ] Unable to control flow of urine, incontinence.
[ ] Joint pains.
[ ] Anemia.

TOTAL X 6 = 0 J-4

Section J-5

[ ] Pain on inside of left shoulder blade.
[ ] Pain on left side of abdomen.
[ ] Shingles on trunk of body.
[ ] Cold hands or feet.
[ ] Feel cold and sweaty.
[ ] Shakiness.
[ ] Slow healing of wounds, cuts, abrasions.
[ ] Constant, intense thirst.
[ ] Urinate more than 2 litres daily.
[ ] Breath smells sweet or of acetone.
[ ] Tingling, burning, jabs or numbness in hands feet.
[ ] Vision failing.
[ ] Urine contains sugar.
[ ] Moody with marked ups and downs.
[ ] Cold sweats of the hands even when warm.
[ ] Fainting, blacking out or convulsions.
[ ] Vague, unrelated complaints relieved by eating but return with a vengeance.

TOTAL X 3 = 0 J-5

Section J-6

[ ] Muscles stiff in morning, feel need to limber up.
[ ] Fail to feel rested, even after sleeping long hours.
[ ] Feel "creaky" after sitting still for some time.
[ ] Heart seems to miss beats or turn "flip-flops".
[ ] Nauseated in morning.
[ ] Start slow in morning, gain speed in afternoon.
[ ] Motion sickness when travelling.
[ ] Dizzy in morning or when moving up and down.
[ ] Cold hands or feet.
[ ] Sensitivity to cold, prefer warm climate.
[ ] Hair scanty, dry, brittle, dull, lustreless, lifeless.

TOTAL X 4 = 0 J-7
Section J-8
[ ] Cold hands or feet, cold all over.
[ ] Infertility or impotence.
[ ] Headaches affecting one side of head.
[ ] Excessive urination.
[ ] Left upper neck pain.
[ ] Left little finger pain.
[ ] Overweight from waist down or from waist up.
[ ] Feelings of inadequacy.
[ ] Changeable temperment, moody.
[ ] Feelings dominate over logic.
[ ] Abdominal "apron" offat.
[ ] Fluid swelling in ankles, fingers, feet.
[ ] Puffiness under eyes.
[ ] FEMALE: Loss of menstrual function.

_ TOTAL X 4 = O _

Section J-9
[ ] Chronic flu, viral infections.
[ ] Hay fever, allergies, allergic rhinitis.
[ ] Asthma, eczema.
[ ] Swollen glands in armpit, groin, tonsils.
[ ] Feeling of puffiness in throat.
[ ] Soreness on both sides of neck at shoulder level.
[ ] Irregular heartbeat.
[ ] More than usual number of cavities.
[ ] Look older than chronological age.

_ TOTAL X 6 = O _

Section K-1
[ ] Awake in morning not feeling rested.
[ ] An almost "painful" fatigue not helped by rest.
[ ] Dark or puffy circles under the eyes.
[ ] Spastic colon, colitis, irritable bowel.
[ ] Minor, chronic complaints that recur.
[ ] High blood pressure.
[ ] Bed-wetting, uncontrolled urination.
[ ] Enlargement of lymph glands in neck.
[ ] Have been called a "hypochondriac".
[ ] Insomnia, sleep disturbances.
[ ] Heavy sweating not related to exercise.
[ ] Fluid retention.
[ ] Muscle spasms, aching muscles.
[ ] Painful, stiff or swollen joints.
[ ] Depression or crying spells.

_ TOTAL X 3 = O _

K-1 continued
[ ] Sinus attacks.
[ ] Catch colds easily.
[ ] History of bronchitis or pneumonia.
[ ] Hyperactivity.
[ ] Constipation or diarrhea.
[ ] Marked fluctuations in weight.
[ ] Eczema, psoriasis, rashes, dermatitis.
[ ] Irritability.
[ ] Bladder infections.
[ ] Hay fever, sneezing attacks.
[ ] Dry stuffy nose, tendency to pick nose.
[ ] Runny nose.
[ ] Bloating or puffiness in face.
[ ] Bronchial asthma.
[ ] Migraine headaches.

_ TOTAL X 2 = O _

Section K-2
[ ] Tremors of hands or feet.
[ ] Double vision.
[ ] Slurred speech.
[ ] Irritability or impatience.
[ ] Loss of stamina while doing physical work.
[ ] Lose temper easily, emotionally unsettled.

_ TOTAL X 8 = O _

Section K-3
[ ] Fingers and/or toes go cold.
[ ] Arms and/or legs "go to sleep".
[ ] Numbness or heaviness in arms or legs.
[ ] Cramps in hand when writing.
[ ] Sharp, diagonal crease in earlobe.
[ ] Tingling sensation in lips or fingers.
[ ] Short walk sensation in lips or fingers.
[ ] Memory not as good as it used to be.
[ ] Ankles swell late in day.
[ ] Persistent, nagging cough.
[ ] Breathlessness on slight exertion or lying down.
[ ] Urinate more than twice during night.
[ ] High blood pressure.
[ ] Whitish ring under outer part of cornea in the eye.
[ ] Impotent or frigid.
[ ] Chest pain after physical exertion or emotional stress.

_ TOTAL X 3 = O _
Section K-4
[ ] Irritable if late for a meal or miss a meal.
[ ] Headaches that are worse after missing a meal.
[ ] Irritable before breakfast.
[ ] Easily upset or frustrated.
[ ] Constant worrying.
[ ] Fits of anger, agitation, temper outbursts.
[ ] Episodes of shakiness or tremors.
[ ] Sudden, strong cravings for sweets, coffee, alcohol.
[ ] Episodes of uncontrollable eating, binging.
[ ] Asthmatic attacks.
[ ] Anxiety attacks, crying spells.
[ ] Get hungry soon after eating.
[ ] Sudden drop in energy in mid-morning or mid-day.
[ ] Fatigue or sleepiness after eating, worse if eat dessert.
[ ] Cold hands or feet.
[ ] Wake up at night feeling hungry.
[ ] Wake up in middle of night and can't go back to sleep.
[ ] Nervousness, shaky feelings, depression or headaches relieved by eating sweets.
[ ] CHILDREN: Attention deficit or hyperactivity.

TOTAL X 3 = O K-4

Section K-5
[ ] Diarrhea or abdominal distress while visiting foreign or unfamiliar locations.
[ ] Unexplained indigestion, gas or bloating.
[ ] Intestinal tract irritable, burns or cramps for no apparent reason.
[ ] Recently developed food/environmental allergies.
[ ] Frequent colds, flu or other acute illness.
[ ] Difficulty overcoming intestinal yeast overgrowth.
[ ] Ravenous appetite.
[ ] Anal itching, often worse at night.
[ ] Feelings of rectal fullness or pressure.
[ ] Weight loss or inability to gain weight.
[ ] Muscular wasting or weakness.
[ ] Lethargy, slow reflexes.
[ ] Bowel movements changeable, sometimes hard, sometimes soft, for no apparent reason.

TOTAL X 4 = O K-5

Section K-6 [FEMALE]
Indicate which conditions apply only if they occur within 14 days prior to and two days after the menstrual period:
[ ] Anxiety, nervous tension, pounding heart.
[ ] Irritability, restlessness.
[ ] Depression, mood swings.
[ ] Emotional outbursts, crying spells.
[ ] Headaches, dizziness, fainting.
[ ] Backache, cramps.
[ ] Insomnia.
[ ] Bloating, weight gain.
[ ] Forgetfulness, confusion.
[ ] Increased appetite, craving for sweets.
[ ] Breast tenderness.
[ ] Swelling of hands, feet, edema.

TOTAL X 4 = O K-6

Section K-7
[ ] Repeated use of antibiotics or birth control pills.
[ ] Cravings for sugars, bread or alcohol.
[ ] Indigestion/discomfort after eating fruits or sweets.
[ ] Severe reactions to perfume, tobacco, chemicals.
[ ] Intolerance to alcohol.
[ ] Hypersensitivity to certain foods.
[ ] Diarrhea or constipation.
[ ] Rectal itching or bladder infections.
[ ] Coated or sore tongue.
[ ] Chronic sore or scratchy throat, oral thrush.
[ ] Feel bad all over, without apparent cause.
[ ] Feeling of being in a mental fog, "spaciness."
[ ] Hives, psoriasis or skin rash.
[ ] Anxiety or depression.
[ ] Tiredness, feelings of being "drained."
[ ] Athlete's foot, toenail or fingernail fungus.
[ ] Allergy or sensitivity to airborne moulds.
[ ] Allergy or sensitivity to mouldy or fermented foods.
[ ] FEMALE: Premenstrual tension, menstrual cramps.
[ ] FEMALE: Vaginal discharge, burning, itching.
[ ] FEMALE: Endometriosis, uterine fibroids.
[ ] MALE: Prostate problems, impotence.
[ ] MALE: Itching of penis or groin.

TOTAL X 3 = O K-7

Add up the numbers you have written beside each statement. Multiply this total by the factor indicated to determine the score for each section.
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