

HEALTH SURVEY

This is a health survey designed to help you assess where you are.
Recognition is well on the way to healing

PLEASE BRING THIS FORM BACK WITH YOU EACH TIME.

IF YOU ARE LATE, YOU'VE USED SOME OF THE TIME YOU PAID FOR!

I do not diagnose or treat any kind of condition of disease.

Please Note: Always consult your doctor and do not get off any prescription drug without consulting him or her.

If you have any short questions between consultations, please feel free to call 483-9024 the first hour I am in the store. Please realize that I must limit your phone call to five minutes or less.

Homeopathics, essential oils and flower essences are essentially non-toxic and can be used with prescription medications. They do not conflict with drugs.

Herbs can be foods, tonics, or strong medicines and can conflict with drugs. Always ask about complications. I generally recommend the non-conflicting food or tonic herbs.

**FOR ALL HEALTH OR DISEASE CONDITIONS USE COMMON SENSE
AND CONSULT YOUR DOCTOR OR HEALTH PROFESSIONAL.**

NAME _____ **AGE** _____

BIRTHDAY _____ (you can lie about your age and name, but give your correct birthday.)

TIME OF DAY BORN _____

OCCUPATION _____

SEX: (you must be male or female)

- MALE**
- FEMALE**

If female, check all that apply

- Pre-puberty (not menstruating)**
- Menstruating** If not, why? _____
- PMS**
- Heavy bleeding** _____

- Heavy cramping**
- Pregnant**
- Nursing**
- Chemical birth control methods-Type:** _____

MENOPAUSE

- Hormone replacement therapy-Type:** _____
- Hysterectomy**
- Partial hysterectomy**
- Hot flashes**
- Dryness**

Note: Hormonal imbalances of all kinds include emotional symptoms such as irritability, mood swings, anxiety, memory problems, concentration, libido changes, crying, etc... Hormonal changes are often ignored by western

medicine (post-partum blues, etc.) and erroneously treated with anti-depressants, etc.

PRESCRIPTION MEDICATIONS

Drug Name	Year Started (how long used it?)	Reason
1. _____		
2. _____		
3. _____		
4. _____		
5. _____		
6. _____		
7. _____		
8. _____		
9. _____		
10. _____		
11. _____		
12. _____		
13. _____		
14. _____		
15. _____		

Note: Antacids (acid blockers) stop stomach acid needed for proper digestion and are often a cause or contributor of anemia, mineral mal-absorption, and OSTEOPOROSIS. GERD or heartburn may be a sign of stomach irritation, not too much stomach acid. It just feels that way.

NON PRESCRIBED MEDICATIONS (Over-the-counter)

Drug Name	Year Started (how long used it?)	Reason
1. _____		
2. _____		
3. _____		
4. _____		
5. _____		

HERBAL SUPPLEMENTS

Name	Reason
1. _____	
2. _____	
3. _____	
4. _____	
5. _____	
6. _____	
7. _____	
8. _____	
9. _____	
10. _____	
11. _____	

SEX STUFF-Sex Drive

- Low**
- Medium**
- High**

Has there been a change in habits or desires over the last few weeks or months?

- Yes**
- No**
- Less interested in sex**
- More interested in sex**

Hormones play a huge part in energy, metabolism, brain, and emotional health.

WOMEN: When did you have...

your last child? _____ your last miscarriage? _____

Any infertility? _____

If you have lost your sex drive, it is often the use of anti-depressant drugs or chemical birth control methods or hormonal shifts due to onset of sex, pregnancy, miscarriage, or other emotional traumas. High blood pressure medications can cause impotence in men.

A hint to MALES-Women often feel sexier about partners that can express their feelings rather than that “cold grope in the middle of the night.”

POTTY TALK-Bowel Habits

How many bowel movements are you having...

Daily? _____ Weekly? _____

- Less often**
- Using laxatives**

Do you have...

- Hemorrhoids?**
- Diarrhea?**

Do you have other bowel challenges?

- IBS**
- Crohn's**
- Polyps**

□ Other (specify) _____

SURGERIES

Type of Surgery

Date

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

INJURIES

Type of Injury

Date

1. _____
2. _____
3. _____

❖ **Old traumas that changed your life...**

I haven't been well since _____ happened to me.

I was a certain way and am now _____

DISEASES

What are they and how are they being treated? (Medications, etc.)

1. _____

2. _____

3. _____

EMOTIONAL AND SPIRITUAL HEALTH

How much time do you spend each day to commune with your inner self or God? (These activities can include prayer, meditation, scripture study, etc.)

- Every day
- Once a week
- Occasionally
- Almost Never

This is a part of your physical health, just as surely as any other part.

SOCIAL CIRCUMSTANCES

- MARRIED** How long? _____
- SINGLE**
- DIVORCED** How long? _____

Conflicts with spouse or relatives? _____

If you have a partner, do you go out on regular dates?

- Yes
- No

If yes, how often?

- More than once a week
- Once a week
- Infrequent
- Almost never

Do you like your partner? _____

Sometimes people love their partners, but don't particularly like them. A wise man once determined how much you like someone by how much time, energy, and money you spend on them. Are you fooling yourself?

Relationships can make or break your health.

**MAKE A COMMITMENT TO YOUR PARTNERSHIP TO
GO OUT AT LEAST ONCE A WEEK.**

SLEEP SCHEDULE

I generally go to sleep at _____ pm am

I wake up at _____ am pm

I generally get _____ hours of sleep per night.

EXERCISE

How often do you exercise?

- Daily for _____ minutes or _____ times a week
- Occasionally
- Sedentary

**Exercise, as well as deep breathing, massages your inner organs.
IF YOU ARE NOT REGULARLY EXERCISING, WALK 20 MINUTES A DAY.**

DIETARY — PLEASE CHECK APPLICABLE BOXES

**Foods can affect all aspects, including physical, mental, emotional, and spiritual health. Check the ones most usual in your eating patterns.
(You are what you eat)**

Building foods-Concentrate your diet with these foods to heal from serious diseases or for more energy. If raw foods give you gas, either steam them or cook them. Use these foods as your main staple.

- Organic foods
- Vegetables

- ❑ **Raw foods**
- ❑ **Fresh, ripe fruits**
- ❑ **Green foods**
- ❑ **Raw seeds, raw nuts**

Maintaining foods -These generally don't particularly improve your health.
Use them in moderation.

- ❑ **Breads (use whole grains)**
- ❑ **Cooked foods (few or no enzymes)**
- ❑ **Spicy foods (may affect digestion)**
- ❑ **Meats (use sparingly)**
- ❑ **Legumes (can produce gas)**
- ❑ **Dairy (poorly absorbed, mucus forming, lactose problems)**
- ❑ **Some frozen foods (few or no enzymes)**

Foods to eliminate for allergies are wheat, dairy, sweets, and soda pop.

Destructive foods -These can contribute to disease!!!

- ❑ **Tobacco (very hard on your health and pocket book)**
- ❑ **Alcohol (emotional escape, source of sugar)**
- ❑ **Fast foods (very little nutrition and high cost)**
- ❑ **Over the counter drugs (more drugs, less health)**
- ❑ **Prescription drugs (improve your health with the building foods)**
- ❑ **Recreational drugs (is this your emotional escape?)**
- ❑ **Peanut butter (most brands are rancid)**
- ❑ **Processed foods (lots of preservatives)**
- ❑ **Stimulants (the more you use, the less energy you have)**
- ❑ **Pork (poorly digested, lots of uric acid)**
- ❑ **Sugar (may be a hormonal problem, contributes to osteoporosis)**
- ❑ **Soda pop (contributes to osteoporosis)**
- ❑ **Margarine (it is a trans fatty acid, use butter instead)**
- ❑ **Canned foods (very little food value and no enzymes)**
- ❑ **Coffee (very acidic and may contribute to gout or kidney problems)**
- ❑ **Fried foods (toxic and may impair memory and concentration)**

Food cravings _____

Food sensitivities _____

Foods you avoid _____

WEIGHT

Any weight changes in the last couple of years? _____

How much change? _____

Weight goals _____

Complimentary Supplements (generally useable with medications):