

# SYSTEMS SURVEY FORM

Name	Practitioner	Date
Birth Date	Approx Weight	Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>
Pulse: Recumbent /	Standing /	Vegetarian <input type="checkbox"/> Gluten Free <input type="checkbox"/>
Blood Pressure: Recumbent /	Standing /	Ragland's Test is Positive <input type="checkbox"/>

INSTRUCTIONS: Fill in only the circles which apply to you.

- ☐ ☐ ☐ MILD symptoms (occurs rarely).  
☐ ☒ ☐ MODERATE symptoms (occurs several times a month).  
☐ ☐ ☒ SEVERE symptoms (occurs almost constantly)  
☐ ☐ ☐ Leave circles BLANK if they don't apply to you!

1 2 3

- 51 ☐ ☐ ☐ Awaken after few hours sleep - hard to get back to sleep  
52 ☐ ☐ ☐ Crave candy or coffee in afternoons  
53 ☐ ☐ ☐ Moods of "blues" or melancholy  
54 ☐ ☐ ☐ Craving for sweets or snacks

## GROUP 1

- 1 ☐ ☐ ☐ Acid foods upset  
2 ☐ ☐ ☐ Get chilled often  
3 ☐ ☐ ☐ "Lump" in throat  
4 ☐ ☐ ☐ Dry mouth-eyes-nose  
5 ☐ ☐ ☐ Pulse speeds after meal  
6 ☐ ☐ ☐ Keyed up - fail to calm  
7 ☐ ☐ ☐ Gag occasionally  
8 ☐ ☐ ☐ Unable to relax; startles easily  
9 ☐ ☐ ☐ Extremities cold, clammy  
10 ☐ ☐ ☐ Strong light irritates  
11 ☐ ☐ ☐ Occasionally weak urine flow  
12 ☐ ☐ ☐ Heart pounds after retiring  
13 ☐ ☐ ☐ "Nervous" stomach  
14 ☐ ☐ ☐ Appetite reduced occasionally  
15 ☐ ☐ ☐ Cold sweats often  
16 ☐ ☐ ☐ Get heated easily  
17 ☐ ☐ ☐ Nerve discomfort  
18 ☐ ☐ ☐ Staring, blinks little  
19 ☐ ☐ ☐ Sour stomach frequent

## GROUP 2

- 20 ☐ ☐ ☐ Joint stiffness on arising  
21 ☐ ☐ ☐ Muscle-leg-toe cramps at night  
22 ☐ ☐ ☐ "Butterfly" stomach, cramps  
23 ☐ ☐ ☐ Eyes or nose watery  
24 ☐ ☐ ☐ Eyes blink often  
25 ☐ ☐ ☐ Eyelids swollen, puffy  
26 ☐ ☐ ☐ Indigestion soon after meals  
27 ☐ ☐ ☐ Always seems hungry; feels "lightheaded" often  
28 ☐ ☐ ☐ Digestion rapid  
29 ☐ ☐ ☐ Vomit occasionally  
30 ☐ ☐ ☐ Hoarseness frequent  
31 ☐ ☐ ☐ Uneven breathing  
32 ☐ ☐ ☐ Pulse slow  
33 ☐ ☐ ☐ Gagging reflex slow  
34 ☐ ☐ ☐ Difficulty swallowing  
35 ☐ ☐ ☐ Temporary constipation or diarrhea  
36 ☐ ☐ ☐ "Slow starter"  
37 ☐ ☐ ☐ Get "chilled"  
38 ☐ ☐ ☐ Perspire easily  
39 ☐ ☐ ☐ Sensitive to cold  
40 ☐ ☐ ☐ Upper respiratory challenges

## GROUP 3

- 41 ☐ ☐ ☐ Eat when nervous  
42 ☐ ☐ ☐ Excessive appetite  
43 ☐ ☐ ☐ Hungry between meals  
44 ☐ ☐ ☐ Irritable before meals  
45 ☐ ☐ ☐ Get "shaky" if hungry  
46 ☐ ☐ ☐ Fatigue, eating relieves  
47 ☐ ☐ ☐ "Lightheaded" if meals delayed  
48 ☐ ☐ ☐ Heart palpitates if meals missed or delayed  
49 ☐ ☐ ☐ Fatigue in afternoons  
50 ☐ ☐ ☐ Overeating sweets upsets

## GROUP 4

- 55 ☐ ☐ ☐ Hands and feet go to sleep easily, numbness  
56 ☐ ☐ ☐ Sigh frequently, "air hunger"  
57 ☐ ☐ ☐ Aware of "breathing heavily"  
58 ☐ ☐ ☐ High altitude discomfort  
59 ☐ ☐ ☐ Opens windows in closed rooms  
60 ☐ ☐ ☐ Immune system challenges  
61 ☐ ☐ ☐ Afternoon "yawner"  
62 ☐ ☐ ☐ Get "drowsy" often  
63 ☐ ☐ ☐ Swollen ankles, worse at night  
64 ☐ ☐ ☐ Muscle cramps, worse during exercise; get "charley horses"  
65 ☐ ☐ ☐ Difficulty catching breath, especially during exercise  
66 ☐ ☐ ☐ Tightness or pressure in chest, worse on exertion  
67 ☐ ☐ ☐ Skin discolors easily after impact  
68 ☐ ☐ ☐ Tendency to anemia  
69 ☐ ☐ ☐ Noises in head, or "ringing in ears"  
70 ☐ ☐ ☐ Fatigue upon exertion

## GROUP 5

- 71 ☐ ☐ ☐ Dizziness  
72 ☐ ☐ ☐ Dry skin  
73 ☐ ☐ ☐ Burning feet  
74 ☐ ☐ ☐ Blurred vision  
75 ☐ ☐ ☐ Itching skin and feet  
76 ☐ ☐ ☐ Hair loss  
77 ☐ ☐ ☐ Occasional skin rashes  
78 ☐ ☐ ☐ Bitter, metallic taste in mouth in mornings  
79 ☐ ☐ ☐ Occasional constipation  
80 ☐ ☐ ☐ Worrier, feels insecure  
81 ☐ ☐ ☐ Nausea occasionally after eating  
82 ☐ ☐ ☐ Greasy foods upset  
83 ☐ ☐ ☐ Stools light colored  
84 ☐ ☐ ☐ Skin peels on foot soles  
85 ☐ ☐ ☐ Discomfort between shoulder blades  
86 ☐ ☐ ☐ Occasional laxative use  
87 ☐ ☐ ☐ Stools alternate from soft to watery  
88 ☐ ☐ ☐ Sneezing attacks  
89 ☐ ☐ ☐ Dreaming, nightmare type bad dreams  
90 ☐ ☐ ☐ Bad breath (halitosis)  
91 ☐ ☐ ☐ Milk products cause upset after impact  
92 ☐ ☐ ☐ Sensitive to hot weather  
93 ☐ ☐ ☐ Burning or itching anus  
94 ☐ ☐ ☐ Crave sweets

## GROUP 6

- 95 ☐ ☐ ☐ Loss of taste for meat  
96 ☐ ☐ ☐ Lower bowel gas several hours after eating  
97 ☐ ☐ ☐ Burning stomach sensations, eating relieves  
98 ☐ ☐ ☐ Coated tongue  
99 ☐ ☐ ☐ Pass large amounts of foul-smelling gas  
100 ☐ ☐ ☐ Indigestion 1/2 - 1 hour after eating; may be up to 3-4 hrs.  
101 ☐ ☐ ☐ Watery or loose stool  
102 ☐ ☐ ☐ Gas shortly after eating  
103 ☐ ☐ ☐ Stomach "bloating"

- | 1   | 2                     | 3                     | GROUP 7A                               |
|-----|-----------------------|-----------------------|--|
| 104 | <input type="radio"/> | <input type="radio"/> | Difficulty sleeping                    |
| 105 | <input type="radio"/> | <input type="radio"/> | On edge                                |
| 106 | <input type="radio"/> | <input type="radio"/> | Can't gain weight                      |
| 107 | <input type="radio"/> | <input type="radio"/> | Intolerance to heat                    |
| 108 | <input type="radio"/> | <input type="radio"/> | Highly emotional                       |
| 109 | <input type="radio"/> | <input type="radio"/> | Flush easily                           |
| 110 | <input type="radio"/> | <input type="radio"/> | Night sweats                           |
| 111 | <input type="radio"/> | <input type="radio"/> | Thin, moist skin                       |
| 112 | <input type="radio"/> | <input type="radio"/> | Inward trembling                       |
| 113 | <input type="radio"/> | <input type="radio"/> | Heart races                            |
| 114 | <input type="radio"/> | <input type="radio"/> | Increased appetite without weight gain |
| 115 | <input type="radio"/> | <input type="radio"/> | Pulse fast at rest                     |
| 116 | <input type="radio"/> | <input type="radio"/> | Eyelids and face twitch                |
| 117 | <input type="radio"/> | <input type="radio"/> | Irritable and restless                 |
| 118 | <input type="radio"/> | <input type="radio"/> | Can't work under pressure              |

#### GROUP 7B

- |     |                       |                       |   |
|-----|-----------------------|-----------------------|---|
| 119 | <input type="radio"/> | <input type="radio"/> | Increase in weight                                |
| 120 | <input type="radio"/> | <input type="radio"/> | Decrease in appetite                              |
| 121 | <input type="radio"/> | <input type="radio"/> | Fatigue easily                                    |
| 122 | <input type="radio"/> | <input type="radio"/> | Ringing in ears                                   |
| 123 | <input type="radio"/> | <input type="radio"/> | Sleepy during day                                 |
| 124 | <input type="radio"/> | <input type="radio"/> | Sensitive to cold                                 |
| 125 | <input type="radio"/> | <input type="radio"/> | Dry or scaly skin                                 |
| 126 | <input type="radio"/> | <input type="radio"/> | Temporary constipation                            |
| 127 | <input type="radio"/> | <input type="radio"/> | Mental sluggishness                               |
| 128 | <input type="radio"/> | <input type="radio"/> | Hair coarse, falls out                            |
| 129 | <input type="radio"/> | <input type="radio"/> | Tension in head upon arising wears off during day |
| 130 | <input type="radio"/> | <input type="radio"/> | Slow pulse, below 65                              |
| 131 | <input type="radio"/> | <input type="radio"/> | Changing urinary function                         |
| 132 | <input type="radio"/> | <input type="radio"/> | Sounds appear diminished                          |
| 133 | <input type="radio"/> | <input type="radio"/> | Reduced initiative                                |

#### GROUP 7C

- |     |                       |                       |                             |
|-----|-----------------------|-----------------------|-----------------------------|
| 134 | <input type="radio"/> | <input type="radio"/> | Failing memory with age     |
| 135 | <input type="radio"/> | <input type="radio"/> | Increased sex drive         |
| 136 | <input type="radio"/> | <input type="radio"/> | Episodes of tension in head |
| 137 | <input type="radio"/> | <input type="radio"/> | Decreased sugar tolerance   |

#### GROUP 7D

- |     |                       |                       |                                  |
|-----|-----------------------|-----------------------|----------------------------------|
| 138 | <input type="radio"/> | <input type="radio"/> | Abnormal thirst                  |
| 139 | <input type="radio"/> | <input type="radio"/> | Bloating of abdomen              |
| 140 | <input type="radio"/> | <input type="radio"/> | Weight gain around hips or waist |
| 141 | <input type="radio"/> | <input type="radio"/> | Sex drive reduced or lacking     |
| 142 | <input type="radio"/> | <input type="radio"/> | Tendency for stomach issues      |
| 143 | <input type="radio"/> | <input type="radio"/> | Immune system challenges         |
| 144 | <input type="radio"/> | <input type="radio"/> | Menstrual disorders              |

#### GROUP 7E

- |     |                       |                       |                                      |
|-----|-----------------------|-----------------------|--------------------------------------|
| 145 | <input type="radio"/> | <input type="radio"/> | Dizziness                            |
| 146 | <input type="radio"/> | <input type="radio"/> | Headaches                            |
| 147 | <input type="radio"/> | <input type="radio"/> | Hot flashes                          |
| 148 | <input type="radio"/> | <input type="radio"/> | Hair growth on face or body (female) |
| 149 | <input type="radio"/> | <input type="radio"/> | Sugar in urine (not diabetes)        |
| 150 | <input type="radio"/> | <input type="radio"/> | Masculine tendencies (female)        |

#### GROUP 7F

- |     |                       |                       |                               |
|-----|-----------------------|-----------------------|-------------------------------|
| 151 | <input type="radio"/> | <input type="radio"/> | Weakness, dizziness           |
| 152 | <input type="radio"/> | <input type="radio"/> | Tired throughout day          |
| 153 | <input type="radio"/> | <input type="radio"/> | Nails weak, ridged            |
| 154 | <input type="radio"/> | <input type="radio"/> | Sensitive skin                |
| 155 | <input type="radio"/> | <input type="radio"/> | Stiff joints                  |
| 156 | <input type="radio"/> | <input type="radio"/> | Perspiration increase         |
| 157 | <input type="radio"/> | <input type="radio"/> | Bowel discomfort              |
| 158 | <input type="radio"/> | <input type="radio"/> | Poor circulation              |
| 159 | <input type="radio"/> | <input type="radio"/> | Swollen ankles                |
| 160 | <input type="radio"/> | <input type="radio"/> | Crave salt                    |
| 161 | <input type="radio"/> | <input type="radio"/> | Areas of skin darkening       |
| 162 | <input type="radio"/> | <input type="radio"/> | Upper respiratory sensitivity |
| 163 | <input type="radio"/> | <input type="radio"/> | Tiredness                     |
| 164 | <input type="radio"/> | <input type="radio"/> | Breathing challenges          |

- | 1   | 2                     | 3                     | GROUP 8   |
|-----|-----------------------|-----------------------|---|
| 165 | <input type="radio"/> | <input type="radio"/> | Muscle weakness                                       |
| 166 | <input type="radio"/> | <input type="radio"/> | Lack of Stamina                                       |
| 167 | <input type="radio"/> | <input type="radio"/> | Drowsiness after eating                               |
| 168 | <input type="radio"/> | <input type="radio"/> | Muscular soreness                                     |
| 169 | <input type="radio"/> | <input type="radio"/> | Heart races   |
| 170 | <input type="radio"/> | <input type="radio"/> | Hyperirritable  |
| 171 | <input type="radio"/> | <input type="radio"/> | Feeling of a band around your head                    |
| 172 | <input type="radio"/> | <input type="radio"/> | Melancholia (feeling of sadness)                      |
| 173 | <input type="radio"/> | <input type="radio"/> | Swelling of ankles                                    |
| 174 | <input type="radio"/> | <input type="radio"/> | Change in urinary function                            |
| 175 | <input type="radio"/> | <input type="radio"/> | Tendency to consume sweets or carbohydrates           |
| 176 | <input type="radio"/> | <input type="radio"/> | Muscle spasms   |
| 177 | <input type="radio"/> | <input type="radio"/> | Blurred vision  |
| 178 | <input type="radio"/> | <input type="radio"/> | Involuntary muscle action                             |
| 179 | <input type="radio"/> | <input type="radio"/> | Numbness  |
| 180 | <input type="radio"/> | <input type="radio"/> | Night sweats  |
| 181 | <input type="radio"/> | <input type="radio"/> | Rapid digestion                                       |
| 182 | <input type="radio"/> | <input type="radio"/> | Sensitivity to noise                                  |
| 183 | <input type="radio"/> | <input type="radio"/> | Redness of palms of hands and bottom of feet          |
| 184 | <input type="radio"/> | <input type="radio"/> | Visible veins on chest and abdomen                    |
| 185 | <input type="radio"/> | <input type="radio"/> | Hemorrhoids   |
| 186 | <input type="radio"/> | <input type="radio"/> | Apprehension (feeling that something bad will happen) |
| 187 | <input type="radio"/> | <input type="radio"/> | Nervousness causing loss of appetite                  |
| 188 | <input type="radio"/> | <input type="radio"/> | Nervousness with indigestion                          |
| 189 | <input type="radio"/> | <input type="radio"/> | Gastritis   |
| 190 | <input type="radio"/> | <input type="radio"/> | Forgetfulness   |
| 191 | <input type="radio"/> | <input type="radio"/> | Thinning hair   |

#### FEMALE ONLY

- |     |                       |                       |  |
|-----|-----------------------|-----------------------|--|
| 192 | <input type="radio"/> | <input type="radio"/> | Very easily fatigued                   |
| 193 | <input type="radio"/> | <input type="radio"/> | Premenstrual tension                   |
| 194 | <input type="radio"/> | <input type="radio"/> | Menses more painful than usual         |
| 195 | <input type="radio"/> | <input type="radio"/> | Depressed feelings before menstruation |
| 196 | <input type="radio"/> | <input type="radio"/> | Painful breasts during menses          |
| 197 | <input type="radio"/> | <input type="radio"/> | Menstruate too frequently              |
| 198 | <input type="radio"/> | <input type="radio"/> | Hysterectomy / ovaries removed         |
| 199 | <input type="radio"/> | <input type="radio"/> | Menopausal hot flashes                 |
| 200 | <input type="radio"/> | <input type="radio"/> | Menses scanty or missed                |
| 201 | <input type="radio"/> | <input type="radio"/> | Acne, worse at menses                  |

#### MALE ONLY

- |     |                       |                       |  |
|-----|-----------------------|-----------------------|--|
| 202 | <input type="radio"/> | <input type="radio"/> | Less involved in exercise/social activities  |
| 203 | <input type="radio"/> | <input type="radio"/> | Difficult to postpone urination              |
| 204 | <input type="radio"/> | <input type="radio"/> | Weak urinary stream                          |
| 205 | <input type="radio"/> | <input type="radio"/> | Feeling of "blues" or melancholy             |
| 206 | <input type="radio"/> | <input type="radio"/> | Feeling of incomplete bowel evacuation       |
| 207 | <input type="radio"/> | <input type="radio"/> | Lack of energy                               |
| 208 | <input type="radio"/> | <input type="radio"/> | Muscles in arms and legs seem softer/smaller |
| 209 | <input type="radio"/> | <input type="radio"/> | Tire too easily                              |
| 210 | <input type="radio"/> | <input type="radio"/> | Avoids activity                              |
| 211 | <input type="radio"/> | <input type="radio"/> | Leg nervousness at night                     |
| 212 | <input type="radio"/> | <input type="radio"/> | Diminished sex drive                         |

List the five main complaints you have in the order of their importance:

- |    |
|----|
| 1. |
| 2. |
| 3. |
| 4. |
| 5. |

#### RESTRICTIONS ON USE

THE SYSTEMS SURVEY IS TO BE USED ONLY BY TRAINED HEALTH CARE PRACTITIONERS. IF YOU ARE A PATIENT, YOU SHOULD NOT USE THE SYSTEMS SURVEY. IF YOU ARE NOT A TRAINED HEALTH CARE PRACTITIONER, YOU SHOULD NOT USE THE SYSTEMS SURVEY. HEALTH 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 NOT INTENDED TO DIAGNOSE ANY DISEASE. THE SYSTEMS SURVEY IS INTENDED TO BE USED AS A HELPFUL TOOL FOR HEALTH CARE PRACTITIONERS IN COLLECTING INFORMATION CONCERNING THE HEALTH AND WELLNESS OF PATIENTS.