

Geipel Chiropractic

125 W. Boughton Rd. -----Bolingbrook, IL 60440
Phone (630) 378-4100 Fax (630) 378-9963

Nutritec Software Symptom Survey Form

Name: _____ Date: _____
Address _____ City: _____
State: _____ Zip _____
Home Phone _____ Work _____
D.O.B. _____ Sex Male Female
Height _____ Weight _____
BLOOD PRESSURE: (Does not need completed)
Sitting _____ Lying _____ Standing _____
Pulse: Sitting _____ Standing _____
pH Indicators AM Saliva _____ PM Saliva _____

INSTRUCTIONS: Completely black out one of the three circles:
1-mild, 2-moderate, or 3 severe

- Mild symptoms (once or twice last 6 months)
- Moderate symptoms (once or twice last month)
- Severe symptoms (Chronic, once or twice last week)
- Leave circles BLANK if they do not apply to you.

1 2 3-----Group 1---

1. Acid foods upset
2. Feel chilled often
3. "Lump" in throat
4. Dry mouth-eyes-nose
5. Pulse speeds after meals
6. Keyed up; unable to feel calm
7. Cuts heal slowly
8. Gag easily
9. Unable to relax; startles easily
10. Extremities cold and/or clammy
11. Strong light irritates
12. Urine amount reduced
13. Heart pounds after retiring
14. "Nervous" stomach
15. Appetite reduced
16. Cold sweats often
17. Body temperature rises easily
18. Skin sensitive to touch
19. Staring, blinks little
20. Frequently have a sour stomach

---Group 2---

21. Joint stiffness after arising
22. Muscle-leg-toe cramps at night
23. "Butterfly" stomach, cramps
24. Eyes or nose watery
25. Eyes blink often
26. Eyelids swollen or puffy
27. Indigestion soon after meals
28. Always seems hungry; 'lightheaded' often
29. Food digests rapidly
30. Vomit frequently
31. Frequently hoarse
32. Irregular breathing
33. Pulse slow or feels "irregular"
34. Slow gag reflex
35. Difficulty swallowing
36. Alternating constipation and diarrhea
37. "Slow starter"
38. Not easily chilled
39. Perspire easily
40. Poor circulation or sensitive to cold
41. Subject to colds, asthma, bronchitis

---Group 3---

42. Eat when nervous
43. Excessive appetite
44. Hungry between meals
45. Irritable before meals
46. Get "shaky" if hungry

1 2 3-----Group 3 continued---

47. Feeling fatigued, eating relieves
48. "Lightheaded" if meals delayed
49. Heart palpitates if meals missed or delayed
50. Afternoon headaches
51. Upset feeling from excessive eating of sweets
52. Awaken after few hours sleep hard to get back to sleep
53. Crave candy or coffee in afternoons
54. Moods of depression "blues" or melancholy
55. Abnormal craving for sweets or snacks

-----Group 4-----

56. Hands and feet go to sleep easily, numbness
57. Sigh frequently "air hunger"
58. Aware of "breathing heavily"
59. Discomfort at high altitude
60. Opens windows in closed room
61. Susceptible to colds and fevers
62. Afternoon "yawner"
63. Get "drowsy" often
64. Swollen ankles worse at night
65. Muscle cramps, worse during exercise; "charley-horses"
66. Shortness of breath on exertion
67. Dull pain in chest or radiating into left arm, worse on exertion
68. Bruise easily, "black/blue" spots on arms or legs
69. Tendency to anemia
70. Frequently have "nose bleeds"
71. "Ringing in ears" or noises in head
72. Tension under the breast-bone, or feeling of "tightness" in the chest, gets worse on exertion

-----Group 5-----

73. Dizziness
74. Dry skin
75. Burning feet
76. Blurred vision
77. Itching skin and feet
78. Excessive falling hair
79. Frequent skin rashes
80. Bitter or metallic taste in mouth in the mornings
81. Bowel movements painful or difficult
82. Feeling of worry, dread, or insecurity
83. Feeling queasy; headache over eyes
84. Greasy foods upset
85. Stools light-colored
86. Skin peels on foot soles
87. Pain between shoulder blades
88. Using laxatives
89. Stools alternate from soft to watery
90. History of gallbladder attacks or gall stones
91. Sneezing attacks
92. Dreaming, nightmare type bad dreams
93. Bad breath (halitosis)
94. Milk product cause distress
95. Sensitive to hot weather
96. Burning or itching anus
97. Crave sweets

-----Group 6-----

98. Loss of taste for meat
99. Lower bowel gas several hours after eating
100. Burning stomach sensations, eating relieves
101. Coated tongue
102. Pass large amounts of foul smelling gas
103. Indigestion 1/2 - 1 hour after eating; may be up to 3 - 4 hours
104. Mucus colitis or "irritable bowel"
105. Gas shortly after eating
106. Stomach "bloating" after eating

Next →

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1 2 3 -----Group 7A-----

- 107. ○ ○ ○ Insomnia
- 108. ○ ○ ○ Nervousness
- 109. ○ ○ ○ Can't gain weight
- 110. ○ ○ ○ Intolerance to heat
- 111. ○ ○ ○ Highly emotional
- 112. ○ ○ ○ Flush easily
- 113. ○ ○ ○ Night sweats
- 114. ○ ○ ○ Skin is thin and moist
- 115. ○ ○ ○ Inward trembling
- 116. ○ ○ ○ Heart palpitates
- 117. ○ ○ ○ Increased appetite without weight gain
- 118. ○ ○ ○ Pulse races when resting
- 119. ○ ○ ○ Eyelids and face twitch
- 120. ○ ○ ○ Irritable and restless
- 121. ○ ○ ○ Can't work under pressure

-----Group 7B-----

- 122. ○ ○ ○ Noticeable weight gain
- 123. ○ ○ ○ Decrease in appetite
- 124. ○ ○ ○ Easily fatigued
- 125. ○ ○ ○ Ringing in ears
- 126. ○ ○ ○ Sleepy during day
- 127. ○ ○ ○ Sensitive to cold
- 128. ○ ○ ○ Dry or scaly skin
- 129. ○ ○ ○ Constipation
- 130. ○ ○ ○ Mental sluggishness
- 131. ○ ○ ○ Hair course, falls out
- 132. ○ ○ ○ Headaches upon arising wear off during day
- 133. ○ ○ ○ Slow pulse, below 65
- 134. ○ ○ ○ Frequent urination
- 135. ○ ○ ○ Impaired hearing
- 136. ○ ○ ○ Reduced initiative

-----Group 7C-----

- 137. ○ ○ ○ Failing memory
- 138. ○ ○ ○ Low blood pressure
- 139. ○ ○ ○ Increased sex drive
- 140. ○ ○ ○ Headaches, "splitting or rending" type
- 141. ○ ○ ○ Decreased sugar tolerance

-----Group 7D-----

- 142. ○ ○ ○ Abnormal thirst
- 143. ○ ○ ○ Bloating of the abdomen
- 144. ○ ○ ○ Weight gain around hips or waist
- 145. ○ ○ ○ Sex drive reduced or lacking
- 146. ○ ○ ○ Tendency toward ulcers and/or colitis
- 147. ○ ○ ○ Increased sugar tolerance
- 148. ○ ○ ○ (FEMALE)Menstrual disorders
- 149. ○ ○ ○ (YOUNG GIRLS)Lack of menstrual function

-----Group 7E-----

- 150. ○ ○ ○ Dizziness
- 151. ○ ○ ○ Headaches
- 152. ○ ○ ○ Hot flashes
- 153. ○ ○ ○ Increased blood pressure
- 154. ○ ○ ○ (FEMALE)Hair growth on face or body
- 155. ○ ○ ○ Sugar in urine (not diabetes)
- 156. ○ ○ ○ (FEMALE)Masculine tendencies

-----Group 7F-----

- 157. ○ ○ ○ Weakness and/or dizziness
- 158. ○ ○ ○ Chronic fatigue
- 159. ○ ○ ○ Low blood pressure
- 160. ○ ○ ○ Nails weak and/or ridged
- 161. ○ ○ ○ Tendency toward hives
- 162. ○ ○ ○ Arthritic tendencies
- 163. ○ ○ ○ Perspiration increase
- 164. ○ ○ ○ Bowel disorders
- 165. ○ ○ ○ Poor circulation
- 166. ○ ○ ○ Swollen ankles
- 167. ○ ○ ○ Crave salt
- 168. ○ ○ ○ Brown spots or bronzing of skin
- 169. ○ ○ ○ Allergies-tendency to asthma
- 170. ○ ○ ○ Weakness after colds or influenza
- 171. ○ ○ ○ Muscular and nervous exhaustion
- 172. ○ ○ ○ Respiratory disorders

1 2 3 -----Group 8-----

- 173. ○ ○ ○ Apprehension
- 174. ○ ○ ○ Irritability
- 175. ○ ○ ○ Morbid fears
- 176. ○ ○ ○ Never seems to get well
- 177. ○ ○ ○ Forgetfulness
- 178. ○ ○ ○ Indigestion
- 179. ○ ○ ○ Poor appetite
- 180. ○ ○ ○ Craving for sweets
- 181. ○ ○ ○ Muscular soreness
- 182. ○ ○ ○ Depression; feelings of dread
- 183. ○ ○ ○ Noise sensitivity
- 184. ○ ○ ○ Acoustic hallucinations
- 185. ○ ○ ○ Tendency to cry without reason
- 186. ○ ○ ○ Hair is coarse and/or thinning
- 187. ○ ○ ○ Weakness
- 188. ○ ○ ○ Fatigue
- 189. ○ ○ ○ Skin sensitive to touch
- 190. ○ ○ ○ Tendency toward hives
- 191. ○ ○ ○ Nervousness
- 192. ○ ○ ○ Headache
- 193. ○ ○ ○ Insomnia
- 194. ○ ○ ○ Anxiety
- 195. ○ ○ ○ Anorexia
- 196. ○ ○ ○ Inability to concentrate; confusion
- 197. ○ ○ ○ Frequent stuffy nose; sinus infections
- 198. ○ ○ ○ Allergy to some food
- 199. ○ ○ ○ Loose joints

-----FEMALE ONLY-----

- 200. ○ ○ ○ Very easily fatigued
- 201. ○ ○ ○ Premenstrual tension
- 202. ○ ○ ○ Painful menses
- 203. ○ ○ ○ Depressed feeling before menstruation
- 204. ○ ○ ○ Excessive and prolonged menstruation
- 205. ○ ○ ○ Painful breasts
- 206. ○ ○ ○ Menstruate too frequently
- 207. ○ ○ ○ Vaginal discharge
- 208. ○ ○ ○ Hysterectomy / ovaries Removed
- 209. ○ ○ ○ Menopausal hot flashes
- 210. ○ ○ ○ Menses scanty or missed
- 211. ○ ○ ○ Acne, worse at menses
- 212. ○ ○ ○ Long standing depression

-----MALE ONLY-----

- 213. ○ ○ ○ Prostate trouble
- 214. ○ ○ ○ Urination difficult or dribbling
- 215. ○ ○ ○ Frequent nighttime urination
- 216. ○ ○ ○ Depression
- 217. ○ ○ ○ Pain on inside of legs or heels
- 218. ○ ○ ○ Feeling of incomplete bowel evacuation
- 219. ○ ○ ○ Lack of energy
- 220. ○ ○ ○ Migrating aches and pains
- 221. ○ ○ ○ Too easily tired
- 222. ○ ○ ○ Avoids activity
- 223. ○ ○ ○ Leg nervousness at night
- 224. ○ ○ ○ Diminished sex drive

IMPORTANT

List below your five main physical complaints in order of importance:

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

NOTES:

Patient Name: _____
Date: _____