

# SYSTEMS SURVEY FORM

*Stevenson*

Patient \_\_\_\_\_ Doctor \_\_\_\_\_ Date \_\_\_\_\_  
 Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Approx Weight \_\_\_\_\_ Sex: Male  Female   
 Pulse: Recumbent \_\_\_\_\_ Standing \_\_\_\_\_ Vegetarian  Gluten-free   
 Blood pressure: Recumbent \_\_\_\_/\_\_\_\_ Standing \_\_\_\_/\_\_\_\_ Ragland's Test Is Positive

**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 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 ○ ○ ○ Cut heals slowly
- 8 ○ ○ ○ Gag easily
- 9 ○ ○ ○ Unable to relax; startles easily
- 10 ○ ○ ○ Extremities cold, 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 ○ ○ ○ Fever easily raised
- 18 ○ ○ ○ Neuralgia-like pains
- 19 ○ ○ ○ Staring, blinks little
- 20 ○ ○ ○ Sour stomach often

**GROUP 2**

- 21 ○ ○ ○ Joint stiffness on arising
- 22 ○ ○ ○ Muscle-leg-toe cramps at night
- 23 ○ ○ ○ "Butterfly" stomach, cramps
- 24 ○ ○ ○ Eyes or nose watery
- 25 ○ ○ ○ Eyes blink often
- 26 ○ ○ ○ Eyelids swollen, puffy
- 27 ○ ○ ○ Indigestion soon after meals
- 28 ○ ○ ○ Always seems hungry; feels "lightheaded" often
- 29 ○ ○ ○ Digestion rapid
- 30 ○ ○ ○ Vomiting frequent
- 31 ○ ○ ○ Hoarseness frequent
- 32 ○ ○ ○ Breathing irregular
- 33 ○ ○ ○ Pulse slow; feels "irregular"
- 34 ○ ○ ○ Gagging reflex slow
- 35 ○ ○ ○ Difficulty swallowing
- 36 ○ ○ ○ Constipation, diarrhea alternating
- 37 ○ ○ ○ "Slow starter"
- 38 ○ ○ ○ Get "chilled" infrequently
- 39 ○ ○ ○ Perspire easily
- 40 ○ ○ ○ Circulation poor, 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
- 47 ○ ○ ○ Fatigue, eating relieves
- 48 ○ ○ ○ "Lightheaded" if meals delayed
- 49 ○ ○ ○ Heart palpitates if meals missed or delayed
- 50 ○ ○ ○ Afternoon headaches
- 51 ○ ○ ○ Overeating sweets upsets

**1 2 3**

- 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 ○ ○ ○ High altitude discomfort
- 60 ○ ○ ○ Opens windows in closed rooms
- 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; get "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 and blue" spots
- 69 ○ ○ ○ Tendency to anemia
- 70 ○ ○ ○ "Nose bleeds" frequent
- 71 ○ ○ ○ Noises in head, or "ringing in ears"
- 72 ○ ○ ○ Tension under the breastbone, or feeling of "tightness", wors 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, metallic taste in mouth in mornings
- 81 ○ ○ ○ Bowel movements painful or difficult
- 82 ○ ○ ○ Worrier, feels insecure
- 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 ○ ○ ○ Use laxatives
- 89 ○ ○ ○ Stools alternate from soft to watery
- 90 ○ ○ ○ History of gallbladder attacks or gallstones
- 91 ○ ○ ○ Sneezing attacks
- 92 ○ ○ ○ Dreaming, nightmare type bad dreams
- 93 ○ ○ ○ Bad breath (halitosis)
- 94 ○ ○ ○ Milk products 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 hrs.
- 104 ○ ○ ○ Mucous colitis or "irritable bowel"
- 105 ○ ○ ○ Gas shortly after eating
- 106 ○ ○ ○ Stomach "bloating" after eating

- 1 2 3 GROUP 7A
- 107 000 Insomnia
  - 108 000 Nervousness
  - 109 000 Can't gain weight
  - 110 000 Intolerance to heat
  - 111 000 Highly emotional
  - 112 000 Flush easily
  - 113 000 Night sweats
  - 114 000 Thin, moist skin
  - 115 000 Inward trembling
  - 116 000 Heart palpitates
  - 117 000 Increased appetite without weight gain
  - 118 000 Pulse fast at rest
  - 119 000 Eyelids and face twitch
  - 120 000 Irritable and restless
  - 121 000 Can't work under pressure
- GROUP 7B
- 122 000 Increase in weight
  - 123 000 Decrease in appetite
  - 124 000 Fatigue easily
  - 125 000 Ringing in ears
  - 126 000 Sleepy during day
  - 127 000 Sensitive to cold
  - 128 000 Dry or scaly skin
  - 129 000 Constipation
  - 130 000 Mental sluggishness
  - 131 000 Hair coarse, falls out
  - 132 000 Headaches upon arising, wear off during day
  - 133 000 Slow pulse, below 65
  - 134 000 Frequency of urination
  - 135 000 Impaired hearing
  - 136 000 Reduced initiative
- GROUP 7C
- 137 000 Falling memory
  - 138 000 Low blood pressure
  - 139 000 Increased sex drive
  - 140 000 Headaches, "splitting or rending" type
  - 141 000 Decreased sugar tolerance
- GROUP 7D
- 142 000 Abnormal thirst
  - 143 000 Bloating of abdomen
  - 144 000 Weight gain around hips or waist
  - 145 000 Sex drive reduced or lacking
  - 146 000 Tendency to ulcers, colitis
  - 147 000 Increased sugar tolerance
  - 148 000 Women: menstrual disorders
  - 149 000 Young girls: lack of menstrual function
- GROUP 7E
- 150 000 Dizziness
  - 151 000 Headaches
  - 152 000 Hot flashes
  - 153 000 Increased blood pressure
  - 154 000 Hair growth on face or body (female)
  - 155 000 Sugar in urine (not diabetes)
  - 156 000 Masculine tendencies (female)
- GROUP 7F
- 157 000 Weakness, dizziness
  - 158 000 Chronic fatigue
  - 159 000 Low blood pressure
  - 160 000 Nails weak, ridged
  - 161 000 Tendency to hives
  - 162 000 Arthritic tendencies
  - 163 000 Perspiration increase
  - 164 000 Bowel disorders
  - 165 000 Poor circulation
  - 166 000 Swollen ankles
  - 167 000 Crave salt
  - 168 000 Brown spots or bronzing of skin
  - 169 000 Allergies - tendency to asthma

- 1 2 3
- 170 000 Weakness after colds, influenza
  - 171 000 Exhaustion - muscular and nervous
  - 172 000 Respiratory disorders
- GROUP 8
- 173 000 Muscle weakness
  - 174 000 Lack of Stamina
  - 175 000 Drowsiness after eating
  - 176 000 Muscular soreness
  - 177 000 Rapid heart beat
  - 178 000 Hyper-irritable
  - 179 000 Feeling of a band around your head
  - 180 000 Melancholia (feeling of sadness)
  - 181 000 Swelling of ankles
  - 182 000 Diminished urination
  - 183 000 Tendency to consume sweets or carbohydrates
  - 184 000 Muscle spasms
  - 185 000 Blurred vision
  - 186 000 Loss of muscular control
  - 187 000 Numbness
  - 188 000 Night sweats
  - 189 000 Rapid digestion
  - 190 000 Sensitivity to noise
  - 191 000 Redness of palms of hands and bottom of feet
  - 192 000 Visible veins on chest and abdomen
  - 193 000 Hemorrhoids
  - 194 000 Apprehension (feeling that something bad will happen)
  - 195 000 Nervousness causing loss of appetite
  - 196 000 Nervousness with indigestion
  - 197 000 Gastritis
  - 198 000 Forgetfulness
  - 199 000 Thinning hair
- FEMALE ONLY
- 200 000 Very easily fatigued
  - 201 000 Premenstrual tension
  - 202 000 Painful menses
  - 203 000 Depressed feelings before menstruation
  - 204 000 Menstruation excessive and prolonged
  - 205 000 Painful breasts
  - 206 000 Menstruate too frequently
  - 207 000 Vaginal discharge
  - 208 000 Hysterectomy / ovaries removed
  - 209 000 Menopausal hot flashes
  - 210 000 Menses scanty or missed
  - 211 000 Acne, worse at menses
  - 212 000 Depression of long standing
- MALE ONLY
- 213 000 Prostate trouble
  - 214 000 Urination difficult or dribbling
  - 215 000 Night urination frequent
  - 216 000 Depression
  - 217 000 Pain on inside of legs or heels
  - 218 000 Feeling of incomplete bowel evacuation
  - 219 000 Lack of energy
  - 220 000 Migrating aches and pains
  - 221 000 Tire too easily
  - 222 000 Avoids activity
  - 223 000 Leg nervousness at night
  - 224 000 Diminished sex drive

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

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_