

MultiSymptom Questionnaire

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BODY/FUNCTIONAL AREA	SYMPTOM	SEVERITY SCORE	INSTRUCTIONS
Abdominal	Bloating		
	Indigestion or slow digestion		Fill in the Severity Score Column using the Severity Key
	Abdominal Gurgling		Severity Score can range from 1 - 9
	Cramps and/or pain		Leave blank if you don't have this Symptom
	Farting		If you have a Symptom not shown here, add at end
	Burping		
	Constipation		SEVERITY KEY
	Diarrhoea		Rare or Very Mild = 1
	Nausea or vomiting		Moderate or Annoying = 2
	Reflux/GERD and/or hiatus hernia		Severe or Frequent = 3
	Difficulting swallowing or chewing		Off the scale, REALLY BAD = 9
	No appetite		
	Incontinence		GENERAL KEY
	Can't handle certain foods - fat, protein, fibre, FODMAPs etc.		PMT = PreMenstrual Tension
	Excessive weight gain		
	Binge eating or drinking or compulsive eating		
	Teeth problems		
	Sweet food cravings		
	Constantly hungry		
	Chemical, metallic or blood taste in mouth		
Rapid weight loss or under weight			
Ears	Itchy, ringing or aches		
	Hearing Loss or Blocked Ears		
	Ear ache or ear infections		
Eyes	Itchy or watery or swollen, inflamed or sticky eyelids		
	Bags or dark circles		
Fatigue	Blurred or tunnel vision or visual disturbance		
	Mental and/or physical		
Hair	Excessive fatigue during or after exercise		
	General weakness and tiredness during day		
Head	Excessive loss or balding or hirsutism (female unwanted growth)		
	Headaches		
Heart	Migraine		
	Faintness, Dizziness or Vertigo		
Lungs	Irregular or skiped heartbeat or rapid or pounding heartbeat		
	Chest pain		
Mind/Emotions	Chest congestion or productive cough		
	Asthma - wheezing or coughing spasms or difficulty breathing		
	Recurrent bronchitis or COPD		
	Dry cough		
	Shortness of breath or pain during exercise		
	Spitting or coughing up yellow mucus		
Mind/Emotions	Spitting or coughing up clear mucus		
	Depressed or just down		
	Apathy or unmotivated		
	Trouble concentrating, comprehending, focussing		
	Poor memory		
	Anxiety and worry and fear		
	Mood swings, anger, irritable or aggressive		
	Stuttering, stammering or slurred speech		
	Difficulty making decisions		
	Poor Co-ordination		
	Agitated, find it hard to relax		
	learning disabilities		
Mind/Emotions	Constant clearing of throat, excessive mucus or post nasal drip		
	Sore throat, hoarseness, loss of voice		

Mouth/Throat	Painful, swollen or discoloured tongue		
	Mouth ulcers or sore gums		
	Cold sores		
Muscles	Cramps		
Nose/Sinus	Sneezing attacks or Hay fever		
	Painful sinuses		
	Stuffy nose		
Other	Sinus congestion or blocked or sinus infection		
	Genital itch or discharge		
	Recent illness		
Pain	Reduced libido (desire for sex)		
	Susceptibility to illness (Cold, Flu etc.)		
	Fluid retention		
	Frequent or urgent urination during day		
	In Joints or Arthritis		
Skin	In Muscles		
	More like a stiffness or limitation of movement		
	Nerves		
	Other		
	Rash or Psoriasis or eczema or other condition		
Sleep	Acne		
	Dry skin		
	Excessive sweating		
	Can't get to sleep		
	Frequent waking		
	Cant get back to sleep		
	Don't feel refreshed upon awaking		
	Frequent urination at night		
	Excessive thinking and worry		
	Woken up because too hot or cold or in pain or leg cramps		
Stress	Sleep for long hours		
	Woken up by children, pets, snoring, noise, light etc.		
	Reduced Ability to cope with stress		
Women's Health	External stress levels		
	Internal stress levels		
	Hot flushes		
	PMT-A Tension, anxiety, irritable or Mood swings		
	PMT- C Increased appetite, sweet craving, tired, headache		
	PMT-D Confusion, constipation, acne, migraine, depression		
	PMT-H Weight gain, swelling, breast changes		
Personal Details	Periods - heavy or prolonged bleeding		
	Periods - irregular or absent cycles		
	Gender		
	Age		
	Height (cm)		
	Weight (cm)		
	Waist Circumference (cm)		
Hip Circumference (cm)			
% Body fat (if known)			

NOTE: we will speak about other symptoms and your main concerning issues in the **history interview**

Enter Your **Name** here >>

Enter Your **Phone** here >>

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