Dr Stephanus P. E. Boshoff D.C. **Dr. Carisa S. E. Novak D.C.**

BOSHOFF CHIROPRACTIC CENTER

SYMPTOM RECORD

NAME: _____ DATE: _____

INSTRUCTIONS: Place a √ mark in the boxes that apply to you

- ❑ **Depression and/ or anxiety**
- ❑ **Sugar intolerance**
- ❑ **Lack of appetite or excessive appetite**
- ❑ **Vague yet chronic chest pains or shortness of breath**
- ❑ **Irregular heart beat**
- ❑ **Chronic indigestion and/ or constipation**
- ❑ **Intolerance to protein (meats, soybeans, milk products, fish)**
- ❑ **Leg cramps after exercising**
- ❑ **Chronic agitation and irritability**
- ❑ **Phobia of "crawling on your skin"**
- ❑ **Chronic fatigue**
- ❑ **Sleep apnea (breathing disturbance)**
- ❑ **Anger, fear, and/ or paranoia**
- ❑ **Excessive rapid heart beat with only mild or moderate exercise**
- ❑ **Lack of strength or heaviness in arms or legs**
- ❑ **Burning and/ or numbness of the arms, hands, feet, and/ or toes**
- ❑ **Enlarged heart and/ or heart failure**
- ❑ **Chronic heartburn**
- ❑ **Swelling of extremities**
- ❑ **Bloating after eating**
- ❑ **Chronic stomach ache or pain**
- ❑ **Mental dullness and/ or poor concentration**
- ❑ **Vulnerability to insect bites— particularly flea and mosquito bites**
- ❑ **Chronic bed wetting**
- ❑ **Temper tantrums and/or violent behavior**
- ❑ **Cravings for sugar and sweets**
- ❑ **Apathy or feelings of impending doom**
- ❑ **Eye fibrillations (twitches)**
- ❑ **Lack of urination**
- ❑ **Loss of muscle tissue in the arms or legs**
- ❑ **Dysmenorrhea (painful menstruation)**
- ❑ **Chronic eye bleeding (retinal bleeding)**
- ❑ **Rapidly aging skin**
- ❑ **Chronic nausea and vomiting**
- ❑ **Cold hands, ears, feet**
- ❑ **Sensitivity to noise**
- ❑ **History of bulimia**
- ❑ **Daily consumption of two or more alcoholic drinks**
- ❑ **Daily consumption of coffee or tea**
- ❑ **Weekly consumption of raw fish**
- ❑ **Chronic backaches that are unresponsive to traditional remedies**
- ❑ **Feeling argumentative or quarrelsome**
- ❑ **Low tolerance for pain**

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