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Occasionally have it, the effect is not severe

2 Occasionally have it, the effect is severe

3 Frequently have it, the effect is not severe

Rarely or never have the symptom

POINT SCALE

How to complete the questionnaire

Record your symptoms over the past 6 months.

When you redo this questionnaire after the Detox 101 21-day program, record your symptoms for the previous 7 days only.

Gas	tro-Intestinal Tract
	Nausea or vomiting
	Diarrhoea
	Constipation
	Bloated feeling
	Belching, or passing gas
	Heartburn
	Intestinal / Stomach pain
Total	
Emo	otions
Emo	otions Mood swings
Emc	
Emo	Mood swings
Emc	Mood swings Anxiety, fear or nervousness
Emc	Mood swings Anxiety, fear or nervousness Anger, irritability, or aggressiveness
Emo	Mood swings Anxiety, fear or nervousness Anger, irritability, or aggressiveness Depression
Emo	Mood swings Anxiety, fear or nervousness Anger, irritability, or aggressiveness Depression

4 Frequently have it, the effect is severe
Ears Itchy ears Earaches, ear infections Draining from ear Ringing in ears
Total
Energy / Activity Fatigue, sluggishness Apathy, lethargy Hyperactivity Restlessness Total
Eyes Watery or itchy eyes

Swollen, red or sticky eyelids Bags or dark circles under eyes

Blurred or tunnel vision

Total

Head	Heart
Headaches	Irregular or skipped heartbeat
Faintness	Rapid or pounding heartbeat
Dizziness	Chest pain
Insomnia or poor sleep	Total
Total	Total
	Lungs
Joints / Muscles	Chest congestion or tight chest
	Asthma
Pain or aches in joints	Shortness of breath
Arthritis	
Stiffness or limitation of movement	Difficult breathing
Pain or aches in muscles	Total
Feeling of weakness or tiredness	
Total	
	Mind
	Poor memory
Mouth / Throat	Confusion, poor comprehension
	Poor concentration
Chronic coughing	Poor physical coordination
Frequent need to clear throat	Brain fog
Sore throat, hoarseness, loss of voice	Indecisiveness
Swollen/discoloured tongue, gum, lips	Stuttering or stammering
Mouth sores	Slurred speech
Total	Learning disabilities
	Total
Nose	
Stuffy nose	Skin
Sinus problems	
Hay fever	Acne
Sneezing attacks	Hives, rashes, or dry skin
Excessive mucus formation	Hair loss
	Flushing or hot flushes
Total	Excessive sweating

Weight	
Binge eating/drinking	
Craving certain foods	
Overweight	
Difficulty losing weight	
Compulsive eating	
Water retention	
Underweight	
Total	

Oth	er
	Frequent illness
	Frequent or urgent urination
Tota	1

Grand Total

How to calculate your score

Add individual scores and total scores for each group.

Add each of the group scores and calculate a grand total.

Optimal is less than 10 Mild Toxicity: 10-50

Moderate Toxicity: 50-100 Severe Toxicity: over 100

Source: Adapted from the Institute for Functional Medicine

Disclaimers for your information

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