

# Module 1: Getting Started

<b>NUTRITIONAL SURVEY</b>	Name	
	Email	
	Phone	

Do You Currently Experience Any of the Following Conditions?		
	YES	NO
Do you experience fatigue?		
Do you experience anxiety?		
Do you have loss of weight or appetite?		
Do your hands tingle?		
Do you experience muscle cramping?		
Do you experience vomiting?		
Does your heart flutter?		
Do you have skin conditions?		
Are you experiencing depression?		
Do you have weight gain?		
Do you experience bruising?		
Do you have reduced muscle mass?		
Do you have diarrhea?		
Are you experiencing hair loss?		
Do you have digestive problems?		
Do you experience numbness?		
Do you experience muscle weakness?		
Do you experience nausea?		
Do you experience constipation?		
Do you experience slow wound healing?		
Do you experience skin rashes?		
Do you have a low libido?		
Do you experience low energy levels?		
If you experience two or more symptoms listed above you might want to ask Dr Shante about micronutrient testing.		