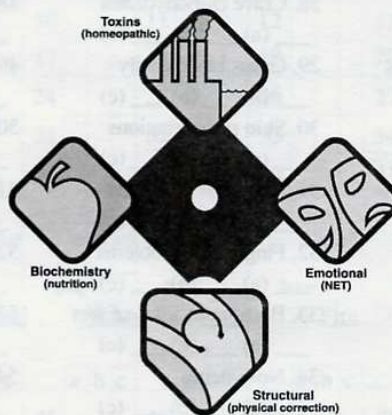


Quick and Easy
Wellness Check



The Home Run Formula to Health
...Symptoms can be related to one or more factors!

The following checklist and descriptions are not intended as a replacement for consultation, diagnosis, or treatment. In all cases it is recommended that you consult with your healthcare professional.

Name: _____ Date: _____

Check either (a), (b), or (c) after each question.

(a) Rare/Never (b) 1-3 times a month (c) One or more times a week

- | | | |
|--|--|---|
| 1. Stomach discomfort
___ (a) ___ (b) ___ (c) | 21. Athlete's Foot
___ (a) ___ (b) ___ (c) | 41. Loss of libido
___ (a) ___ (b) ___ (c) |
| 2. Lung congestion
___ (a) ___ (b) ___ (c) | 22. Mucus in throat
___ (a) ___ (b) ___ (c) | 42. Film/Coating on tongue
___ (a) ___ (b) ___ (c) |
| 3. Dehydrated or thirsty
___ (a) ___ (b) ___ (c) | 23. Sensitivity to touch
___ (a) ___ (b) ___ (c) | 43. Allergy-type symptoms
___ (a) ___ (b) ___ (c) |
| 4. Gas-type indigestion
___ (a) ___ (b) ___ (c) | 24. Sensitivity to cold air
___ (a) ___ (b) ___ (c) | 44. Anxiety/Nervous feelings
___ (a) ___ (b) ___ (c) |
| 5. Circulation problems
___ (a) ___ (b) ___ (c) | 25. Grinding of teeth
___ (a) ___ (b) ___ (c) | 45. Carpal Tunnel symptoms
___ (a) ___ (b) ___ (c) |
| 6. Intestinal upsets
___ (a) ___ (b) ___ (c) | 26. Mood swings
___ (a) ___ (b) ___ (c) | 46. Lack of balance
___ (a) ___ (b) ___ (c) |
| 7. Yeast infections
___ (a) ___ (b) ___ (c) | 27. Variable appetite
___ (a) ___ (b) ___ (c) | 47. General flu symptoms
___ (a) ___ (b) ___ (c) |
| 8. Burping or belching
___ (a) ___ (b) ___ (c) | 28. Crave carbohydrates
___ (a) ___ (b) ___ (c) | 48. Arthritic pain
___ (a) ___ (b) ___ (c) |
| 9. Hoarseness or laryngitis
___ (a) ___ (b) ___ (c) | 29. Gums bleed easily
___ (a) ___ (b) ___ (c) | 49. Fatigued and irritable
___ (a) ___ (b) ___ (c) |
| 10. Swollen feet
___ (a) ___ (b) ___ (c) | 30. Skin rash/irritations
___ (a) ___ (b) ___ (c) | 50. Overly sensitive
___ (a) ___ (b) ___ (c) |
| 11. Fats hard to digest
___ (a) ___ (b) ___ (c) | 31. Urination problems
___ (a) ___ (b) ___ (c) | 51. Sensitive scars on body
___ (a) ___ (b) ___ (c) |
| 12. Sweat easily
___ (a) ___ (b) ___ (c) | 32. Finger nail problems
___ (a) ___ (b) ___ (c) | 52. Lack of coordination
___ (a) ___ (b) ___ (c) |
| 13. Alcohol intolerance
___ (a) ___ (b) ___ (c) | 33. Burning in soles of feet
___ (a) ___ (b) ___ (c) | 53. Body achiness
___ (a) ___ (b) ___ (c) |
| 14. Constipation
___ (a) ___ (b) ___ (c) | 34. Nose itches
___ (a) ___ (b) ___ (c) | 54. Tooth pain
___ (a) ___ (b) ___ (c) |
| 15. Cold sores
___ (a) ___ (b) ___ (c) | 35. Crave sugar-type foods
___ (a) ___ (b) ___ (c) | 55. Hay Fever symptoms
___ (a) ___ (b) ___ (c) |
| 16. Nose discharge or dryness
___ (a) ___ (b) ___ (c) | 36. Feelings of nausea
___ (a) ___ (b) ___ (c) | 56. Weeping or sobbing
___ (a) ___ (b) ___ (c) |
| 17. Bladder problems
___ (a) ___ (b) ___ (c) | 37. Eczema or dry skin
___ (a) ___ (b) ___ (c) | 57. Localized itching
___ (a) ___ (b) ___ (c) |
| 18. Earaches
___ (a) ___ (b) ___ (c) | 38. Hearing/Ear sensitivities
___ (a) ___ (b) ___ (c) | 58. Acid Reflux symptoms
___ (a) ___ (b) ___ (c) |
| 19. Restless sleep
___ (a) ___ (b) ___ (c) | 39. Jaw problems
___ (a) ___ (b) ___ (c) | 59. Sinus/Head pressure
___ (a) ___ (b) ___ (c) |
| 20. Abdominal bloating
___ (a) ___ (b) ___ (c) | 40. Headaches from the sun
___ (a) ___ (b) ___ (c) | 60. Muscular pain/spasm
___ (a) ___ (b) ___ (c) |

- | | | |
|---|--|---|
| 61. Dizziness or vertigo
___ (a) ___ (b) ___ (c) | 67. Migraines or headaches
___ (a) ___ (b) ___ (c) | 73. Sporadic low back pain
___ (a) ___ (b) ___ (c) |
| 62. Dry mouth
___ (a) ___ (b) ___ (c) | 68. Voracious appetite
___ (a) ___ (b) ___ (c) | 74. Feeling overworked
___ (a) ___ (b) ___ (c) |
| 63. Stiffness in joints
___ (a) ___ (b) ___ (c) | 69. Strained ligaments
___ (a) ___ (b) ___ (c) | 75. Hemorrhoids
___ (a) ___ (b) ___ (c) |
| 64. Stomach cramping
___ (a) ___ (b) ___ (c) | 70. Trouble swallowing
___ (a) ___ (b) ___ (c) | 76. Heartburn-type pain
___ (a) ___ (b) ___ (c) |
| 65. Sore throat
___ (a) ___ (b) ___ (c) | 71. High temperature/fevers
___ (a) ___ (b) ___ (c) | 77. Ears feel under water
___ (a) ___ (b) ___ (c) |
| 66. Overexertion pain
___ (a) ___ (b) ___ (c) | 72. Bone pain
___ (a) ___ (b) ___ (c) | 78. General aches and pain
___ (a) ___ (b) ___ (c) |

Scoring Form — Complete when finished with all questions.

Transfer all the check marks from the questions to the (a), (b), or (c) grid boxes below. When finished total the (a), (b), and (c) columns and fill in the drop-down boxes to complete each category.

	a	b	c	a	b	c	a	b	c	a	b	c	a	b	c	a	b	c			
1				2			3			4			5			6					
8				9			10			11			12			13					
15				16			17			18			19			20					
22				23			24			25			26			27					
29				30			31			32			33			34					
36				37			38			39			40			41					
Total \sqrt{s}																					
	x2 x10			x2 x10			x2 x10			x2 x10			x2 x10			x2 x10			x2 x10		
	b+c			b+c			b+c			b+c			b+c			b+c			b+c		
	Earth			Metal			Water			Wood			Fire			Para Solve			Flora Plus		
43				44			45			46			47			48					
49				50			51			52			53			54					
55				56			57			58			59			60					
61				62			63			64			65			66					
67				68			69			70			71			72					
73				74			75			76			77			78					
Total \sqrt{s}																					
	x2 x10			x2 x10			x2 x10			x2 x10			x2 x10			x2 x10					
	b+c			b+c			b+c			b+c			b+c			b+c					
	Allergy			ER 911			Scars-Adhesions			Visceral Polarity			Flu Immune			Pain Relief					

Category (b+c) Score

0-4
Excellent

6-10
Moderate

12+
Needs Attention

Give this form to your practitioner. Retake and re-evaluate in 30 days.

Category Access Points

Earth:

Spleen, Stomach, **HCL**, Pancreas and **Hypoadrenals**

Metal:

Lungs and Large Intestines

Water:

Kidneys and Bladder

Wood:

Liver and Gall Bladder

Fire:

Heart, Adrenals, Thyroid, Pituitary, **Hypoadrenals** and **Vit B**

Para Solve:

Parabowel p1, Parabowel p2 and **ICV**

Flora Plus:

Bowel Flora p3 and **ICV**

Allergy:

Allergy, SMP, ICV and Hypoadrenals

ER 911:

Emotional Points, Hypoadrenals, ICV and Vit B

Scars-Adhesions:

Scars, Skin, Joint and **Cat I**

Visceral Polarity:

Brain, GV 26, CV 24 and Cat I

Flu Immune:

Spleen, Thymus, and Combination of Spleen/Thymus

Pain Relief:

Contact Area of Pain and/or Access with "Feeling" of Pain

Note: Use *The Home Run Formula* to check all Access Points within a problem Category, focusing on the **NET Vitals** (*listed in bold*).