

# eWellness Questionnaire

Helping you one question at a time!

## CHRONIC FATIGUE SYNDROME

Name: First Name MI Last Name	Date of Birth:
	Patient Code:

Please do not select anything if the answer is no or negative.  
Select Rarely 'R' if this is an uncommon event or symptom.  
Select Frequent 'F' if this is a common event or symptom.  
Select Always 'A' if this is a persistent event or symptom. Also select 'A' for Yes

At first glance there may seem to be a lot of questions. But each of these questions were selected because of their direct or indirect relation to the symptoms mentioned.

### Section 1

1. R F A Consume breads / pastas / starches

2. R F A Nervousness or irritable

### Section 2

3. R F A Alcohol use extensively

9. R F A Consume white sugar

4. R F A Drink coffee / soda / ice tea

10. R F A Consume refined carbs

5. R F A Smoke or use tobacco

11. R F A Consume wheat or gluten

6. R F A Eat fast food

12. R F A Very little exercise

7. R F A Eat pre processed / packaged foods

13. R F A Family or financial stressors

8. R F A Drink cow's milk

### Section 3

14. R F A Vertigo / dizziness

16. R F A Double vision or blurred vision

15. R F A Light headedness

### Section 4

17. R F A Difficulty going to sleeping

22. R F A Trouble sweating

18. R F A Slow metabolism

23. R F A Fatigued or tired

19. R F A Diabetes

24. R F A Diabetic medications

20. R F A Thyroid problems

25. R F A Thyroid medication

21. R F A Too much stress / tension

### Section 5

26. R F A Pre-menopausal

32. R F A Mood swings

27. R F A Peri-menopausal

33. R F A Bouts of depression

28. R F A Suffer from PMS

34. R F A Loosing your memory

29. R F A Breast tenderness

35. R F A Thinning hair or brittle hair

30. R F A Irregular periods

36. R F A Hormone replacement

31. R F A Fibrocystic breasts

### Section 6

37. R F A Chest pain / angina / tightness

39. R F A Slow or fast heart beats at rest

38. R F A High blood pressure

### Section 7

40. R F A Poor circulation in your hands

### Section 8

41. R F A Inflamed intestine - "Leaky gut"

42. R F A Constipation

### Section 9

43. R F A Headaches or migraines

48. R F A Chronic fatigue syndrome

44. R F A Stiffness or muscle spasms

49. R F A Back pain or neck pain

45. R F A Bone pains

50. R F A Joint pain

46. R F A Difficulty exercising

51. R F A Arthritis

47. R F A Fibromyalgia

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Section 10	
52. R F A Anti-depressants	55. R F A Poor coordination
53. R F A Pain medications	56. R F A Brain fog - lack of concentration
54. R F A Numbness or tingling	

Section 11	
57. R F A Anxiety / anxiousness	58. R F A Feelings of worthlessness

Section 12	
59. R F A Allergies	