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|  | **Self-Assessment Health Profile****Name: ­­**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Please print****Date:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Patricia Lambers, L.Ac.****San Jose Acupuncture Center** |

Check  the symptoms you have experienced during the last six months. Circle and check  those that have been most troublesome.

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| **Section 1, Part A** | **Section 3, Part A** |
| ****weak, lethargic, weary | ****restless fatigue |
| ****apathy | ****emotional sensitivity |
| ****dull thinking or feeling | ****insomnia and anxious sleep |
| ****excessive need for sleep | ****dryness without thirst |
| ****susceptible to colds, flus, allergies | ****blurred or weak vision |
| ****prolonged recovery following illness | ****thinning of hair |
| ****pasty, pale complexion | ****dry or hard stool |
| ****shortness of breath | ****dry skin, eyes, hair, nails |
| ****aversion to talking | ****anemia |
| ****perspires easily with exertion | ****muscle cramps |
| ****easily chills | ****lack of semen |
|  | ****scanty or infrequent menstruation |
| **Section 1, Part B** | ****insufficient lactation |
| ****perspires easily while at rest | ****pale, sallow complexion |
| ****atony or prolapse of stomach, intestines, anus | ****poor skin healing |
| ****constant diarrhea or lack of bowel control | ****palpitations |
| ****hemorrhoids, varicose veins | ****night sweats |
| ****dizzy or weak after meal or bowel movement |  |
| ****well-being followed by sudden exhaustion | **Section 3, Part B** |
|  | ****easy bruising or bleeding |
| **Section 2, Part A** | ****chronic ulcers: mouth, throat, stomach, intestines, vagina |
| ****parched, thirsty | ****excessive bleeding during menses, pregnancy, postpartum, or menopause |
| ****extreme dryness of skin or mucous membranes | ****bleeding hemorrhoids and blood in stool, urine, or sputum |
| ****scant secretions and urination |  |
| ****uncomfortable feeling of heat in the body | **Section 4** |
| ****low afternoon fever with sweating | ****profound weakness |
| ****constipation | ****atrophy of muscles and organs |
| ****hot flashes | ****sagging or wrinkling of skin |
| ****night sweats | ****diminished sexual arousal and pleasure |
| ****unstable blood sugar, emotional lability | ****infertility or early menopause |
| ****persistent dry cough | ****repeated miscarriages |
|  | ****loosening or loss of teeth |
| **Section 2, Part B** | ****early thinning or graying of head and pubic hair |
| ****excess secretions: eyes, nose, mouth, skin, vagina | ****decline of memory, vision, or hearing |
| ****seminal incontinence, premature ejaculation | ****progressive loss of weight or emaciation |
| ****frequent urination or incontinence | ****compromised immunity |
| ****dizzy or weak after sex |  |

**Self-Assessment Health Profile for:**

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| **Section 5** | **Section 3, Part C** |
| ****restlessness and agitation | ****easy bruising |
| ****hypersensitivity to pain or insult | ****cold hands or feet |
| ****sudden rage, grief, or panic | ****irregular or painful menses |
| ****constant anxiety, worry, or confusion | ****mottling, numbing, and chilling of limbs |
| ****easily startled or frightened | ****sharp pains: head, eyes, joints, limbs, breasts, organs |
| ****erratic sleep, insomnia, or disturbing dreams | ****mid-cycle or premenstrual pain or tender breasts |
| ****dull, glazed or bizarre look to eyes and face | ****painful hemorrhoids, cysts, or lumps |
| ****delirium |  |
|  | **Section 3, Part D** |
| **Section 6, Part A** | ****angina |
| ****stuffy head | ****severe or constant headache |
| ****mild nausea or reflux | ****traumatic bruises, swellings, and sprains |
| ****distension or fullness in chest or abdomen | ****stabbing or throbbing aches or pains |
| ****gas pains, cramps, tension in stomach or intestines | ****pain aggravated at night or from inactivity |
| ****hiccups, belching, or flatulence | ****severe cramping, numbness, or paralysis |
| ****constipation or irregular bowel movements | ****dark red or purple complexion |
| ****dull or intermittent pains | ****purple lesions on the skin, tongue, mouth, or lips |
|  | ****severe menstrual cramps with dark blood or clots |
| **Section 6, Part B** | ****hard or immobile lumps, masses, or organs |
| ****acute discomfort, fullness, pressure in head, chest,  limbs, or abdomen |  |
| ****abdominal bloating but unable to release gas | **Section 7, Part A** |
| ****wheezing and chest pain | ****fever |
| ****difficulty swallowing, as if something is stuck | ****pain, soreness, swelling, or dryness with a  sensation of heat or burning |
| ****stitch or acute pain in abdomen, ribs, or flanks | ****sores or infections with green or yellow pus |
| ****fullness or dull pain under ribs or sternum | ****yellow, green, or foul smelling discharge from eyes, nose, throat, anus, vagina, or urethra |
|  | ****extreme thirst with a craving for cold foods or drink |
| **Section 2, Part C** | ****red eyes, ears, nose, lips, face, skin |
| ****soft or loose stool | ****feeling of heat: limbs, abdomen, chest, head, genitals |
| ****puffy eyes, face, hands, or ankles | ****aggravation from alcohol, fried, or spicy foods,  and head environment |
| ****frequent, scanty, or difficult urination |  |
| ****lethargic in humid weather | **Section 8** |
| ****soft swellings, nodules, cysts, enlarged lymph nodes | ****lack of thirst |
| ****premenstrual edema and swelling of breasts | ****listless and weak |
| ****tender muscles or joints | ****cold feeling in limbs, head, chest, abdomen, or genitals |
| ****dry but thirsty | ****pale face with cold, clammy hands and feet |
|  | ****loose stool after eating raw or cold foods and liquids |
| **Section 2, Part D** | ****profuse urination or edema in cold climate or after  ingesting cold liquids, eating raw or cold foods |
| ****swollen or heavy head and limbs | ****craving for warm, cooked foods and hot drinks |
| ****swollen, sore muscles and joints | ****pain in head, chest, limbs, joints aggravated by cold |
| ****excess saliva, mucus, or perspiration | ****pale, purplish skin, nail beds, lips, or tongue |
| ****scanty or absent urine |  |
| ****edema of hands, feet, face, or abdomen |  |
| ****thick, nauseated feeling in mouth, stomach, head |  |

**Self-Assessment Health Profile for:**

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| **Section 7, Part B** | **Section 11 - *continued*** |
| ****dryness or thirst without desire or ability to drink | ****coarse, brittle nails or hair |
| ****feeling of heat in stomach or chest with a  nauseating taste in the mouth | ****touchiness from heat, wind, noise, bright light |
| ****sticky yellow or green discharge from nose, throat,  bronchi, urethra, or vagina | ****numbness, tingling of limbs when asleep or  inactive |
| ****hot flashes with profuse perspiration | ****muscle cramps of pelvis, sides, hips, calves, feet |
| ****fever or heat not relieved by perspiring or drinking | ****tension in shoulders, neck, sacrum, hips, legs |
| ****loose or sticky stool streaked with mucus or pus | ****stitching under diaphragm, between ribs, groin, pelvis |
| ****burning, red, oozing sores, boils, pimples, blisters, or rashes | ****high pitched or loud ringing in the ears (tinnitus) |
| ****worse from heat and/or humidity and sweet,  spicy, or oily foods | ****dizzy, queasy, flushed, headache from hunger,  anger |
|  | ****hypersensitive genital organs |
| **Section 9, Part A** | ****nervous, irritable, short tempered |
| ****itching or prickling sensations of skin, ears, eyes,  nose; sneezing; headache | **Section 12** |
| ****unpredictable or migrating pains | ****anxiety, dread |
| ****dizziness or headache with cold, flu, or allergy | ****restless and excitable |
| ****muscle soreness or shivering in winds or drafts | ****mood swings (laughs easily, cries easily) |
| ****numbness or pain of face or scalp | ****insomnia when nervous, worried, or excited |
| ****neck stiffness or spasm | ****restless sleep and vivid dreams or nightmares |
| ****worse from drafts, changing temperatures, pressure | ****cravings for cool drinks, juicy or hot, spicy foods |
|  | ****sores of mouth and tongue |
| **Section 9, Part B** | ****easily overheats and perspires |
| ****trembling hands, feet, head | ****easy blushing of face, chest, neck, and ears |
| ****disequilibrium, being uncoordinated | ****burning, sensitivity or irritation of mouth, tongue,  urethra, vagina, or anus |
| ****contracture or quivering of tongue | ****frequent urination or bowel movements from nervousness |
| ****spasms, twitches, cramps of nerves, muscles, viscera | ****palpitations when nervous, upset, or fatigued |
| ****vertigo, motion sickness, hypertension | ****easily confused or disoriented |
| ****headache with vertigo, numbness, spasms,  parasthesia (strange sensations) | **Section 13** |
| ****seizures, sequellae of stroke, or T.I.A. | ****tender muscles |
| ****worse from wind, changing barometric pressure,  or changing from lying to upright posture | ****slow digestion or indigestion |
|  | ****variable appetite |
| **Section 10** | ****frequent abdominal gas or bloating |
| ****dizziness or fullness in head from mucus congestion | ****loose stool from raw or cold foods and liquids |
| ****nausea with phlegm in chest or throat | ****lingering hunger after meals |
| ****thick, sticky secretions from ears, eyes, nose,  throat, mouth, anus, vagina, or urethra | ****hard to gain, lose, or regulate weight |
| ****firm, mobile lumps, cysts, enlarged lymph nodes | ****difficulty focusing, distractible |
| ****worse in humid environment or from eating sticky,  greasy, oily foods, milk products, eggs, or sugar | ****overwhelmed by details, upset by changes |
| ****sticky or greasy stool | ****lethargy and inertia |
|  | ****prolapse of stomach, intestines, uterus, vagina, bladder |
| **Section 11** | ****lack of muscle tone or strength |
| ****dry eyes | ****water retention, puffiness, heaviness of head, limbs |
| ****blurred or unclear vision | ****easy bruising, prolonged or heavy menstruation |
| ****easy chilling arms, hands, legs, feet | ****easily worried, obsessed |

**Self-Assessment Health Profile for:**

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| **Section 14** | **Section 16 - *continued*** |
| ****weakness of chest | ****thirst for alternately cold and hot liquids |
| ****respiratory allergies | ****sensitivity or aversion to strong odors or flavors |
| ****runny nose or stuffy sinuses | ****erratic cravings for fatty, sour, or sweet foods |
| ****frequent, lingering colds, coughs, throat clearing,  laryngitis | ****tenderness, tension, and heaviness in muscles,  especially head, neck, jaw, elbows, or knees |
| ****morning attacks of coughing or sneezing | ****headache with heaviness or pressure behind eyes,  nausea, diarrhea |
| ****constant phlegm in chest or throat | ****sensitivity to light, noise, heat, and humidity |
| ****shortness of breath, chest pain, wheezing from  fatigue or exertion | ****variable blood sugar |
| ****dryness and tightness of mucous membranes or skin | ****eating disorders |
| ****urge to urinate after laughing, coughing, or sneezing | ****irritable bowel |
| ****skin rashes, eczema, hives | ****food sensitivity or intolerance |
| ****sensitive to wind, cold, or dryness | ****vacillates between assertiveness and ambivalence,  irritability and lethargy |
| ****stiffness of joints and muscles |  |
| ****easily disappointed or offended | **Section 17** |
|  | ****slow digestion, sluggish intestines |
| **Section 15** | ****weak gums and loose teeth |
| ****puffiness around eyes | ****dryness and thirst with water retention |
| ****diminished libido | ****sore, swollen joints and muscles |
| ****lack of sexual secretions | ****heaviness, weakness, and soreness of head, neck,  back, sacrum, and limbs |
| ****loss or thinning of pubic hair | ****loose or dry, small stool with bloating |
| ****early cessation of menses, irregular cycle | ****frequent, scanty or difficult urination |
| ****disorder or urination | ****easily chilled in back, belly, legs, or arms |
| ****rigidity of spine and joints | ****craves salty or sweet foods, causing constipation,  dryness and water retention |
| ****difficulty conceiving or carrying to term | ****edema |
| ****weak or sore low back, hips, knees, ankles, or feet | ****rheumatism |
| ****lack of stamina and endurance | ****cystitis, urethritis, vaginitis, leucorrhea |
| ****diminished motivation and apathy | ****prostatic hypertrophy or prostatitis |
| ****forgetfulness and mental dullness | ****distractible, insecure, volatile, or apathetic, inert |
| ****puffiness or swelling of feet and ankles |  |
| ****weak vision, dull hearing | **Section 18** |
| ****low humming or buzzing in ears (tinnitus) | ****insomnia or restless sleep alternating with heavy  slumber and difficulty awakening |
| ****easily defeated and disgruntled | ****nervousness or mood swings alternating with  fatigue and lumbar weakness |
|  | ****easily overheated or chilled |
| **Section 16** | ****hot chest, head, ears, face and hands, with cold  belly, buttocks, feet |
| ****cold hands and feel with feeling of fullness in  throat, chest, or abdomen | ****easily enthused but difficult to sustain effort or  excitement |
| ****indigestion with nausea, bloating, flatulence, belching | ****melancholy and restless after prolonged mental or  physical exertion |
| ****erratic elimination, constipation, or diarrhea | ****sexually excitable but difficult to sustain arousal or  achieve release |
| ****spasm, pain or esophagus, stomach, intestines, uterus | ****anxiety, despair, phobias |

**Self-Assessment Health Profile for:**

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| **Section 18 - *continued*** |  |
| ****nausea, diarrhea, urinary frequency associated  with anxiety or fright | **Please list your additional health** **concerns:** |
| ****craves salty, spicy food and stimulants |  |
| ****chronic endometritis/cervicitis/urethritis |  |
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| **Section 19** |  |
| ****sensitivity to changes in temperature and humidity |  |
| ****easily overheated but can’t sweat |  |
| ****dry cough with heat in throat or chest |  |
| ****flushes when coughing, laughing, or sneezing |  |
| ****heat triggers sneezing, itchy throat, or rashes |  |
| ****dry skin with cracking, redness, and itching,  especially from cold and dryness |  |
| ****light sleeper and wakes easily |  |
| ****itching, inflammation of vagina or urethra without  discharge |  |
| ****alternately euphoric and melancholic, hysterical or  depressed |  |
| ****easily hurt or offended |  |
| ****craves spicy, hot foods and stimulants |  |
| ****hives, eczema, rashes, worse in daytime |  |
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| **Section 20** |  |
| ****tense, stiff neck, shoulders, chest, or loins |  |
| ****irregular bowel movements |  |
| ****sensitivity or aversion to strong odors or flavors |  |
| ****loss of ability to smell |  |
| ****irregular, tense, or shallow breathing, wheezing,  or sighing |  |
| ****sensitive, easily irritated skin or mucous membranes of  upper respiratory or genito-urinary tracts |  |
| ****sensitivity or aversion to heat, dryness, wind,  drafts, or sudden changes in weather |  |
| ****feels awkward expressing feelings or reactions |  |
| ****craving for fatty, sour, and spicy foods |  |
| ****hives, itching, worse at night |  |
| ****sensitive to rage or rejection |  |
| ****seasonal sinusitis or hay fever |  |
| ****bursitis, lumbago, or sciatica that comes and goes |  |
| ****neck spasms, and occipital or lateral headaches |  |
| ****depressed, sad, quiet, angry |  |
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**This Health Profile is excerpted from *Between Heaven and Earth: A Guide to Chinese Medicine* (Beinfield & Korngold, Ballantine, 1991).**