



"An integrated medical approach to complement your lifestyle"

SYMPTOM QUESTIONNAIRE

Name _____

If you have amalgam fillings please check how often you have encountered the symptoms below that could possibly signify mercury toxicity. Rate them accordingly to the following scale:

0 = never
1 = rarely

2 = often
3 = always

Central Nervous System

- _____ Irritability
- _____ Anxiety/nervousness
- _____ Restlessness
- _____ Exaggerated response to stimulation
- _____ Fearfulness
- _____ Emotional instability
- _____ Lack of self control
- _____ Mood swings
- _____ Fits of anger
- _____ Violent behavior
- _____ Loss of self-confidence
- _____ Indecision
- _____ Shyness or timidity
- _____ Easily embarrassed
- _____ Loss of memory
- _____ Insomnia
- _____ Depression/despondency
- _____ Withdrawal
- _____ Suicidal tendencies
- _____ Manic depression
- _____ Numbness/tingling of hands, feet, fingers, or toes
- _____ Muscle weakness
- _____ Tremors/trembling of hands
- _____ Headache
- _____ Confusion
- _____ Poor physical coordination
- _____ Slurred speech

Digestive Tract

- _____ Nausea or vomiting
- _____ Colitis
- _____ Bloating
- _____ Heartburn
- _____ Constipation
- _____ Blood in stool
- _____ Crohns disease
- _____ Diarrhea
- _____ Abdominal pain
- _____ Belching, passing gas
- _____ Poor appetite
- _____ Food sensitivities
- _____ Binge eating & drinking
- _____ Craving certain foods
- _____ Excessive weight gain
- _____ Weight loss
- _____ Compulsive eating

Head, neck & Oral Cavity

- _____ Bleeding gums
- _____ Loosening of teeth
- _____ Excessive salivation
- _____ Foul breath
- _____ Metallic taste
- _____ Burning sensation lip& tongue
- _____ Canker sores
- _____ Gagging
- _____ Frequent need to clear throat