



# 7 Systems Health Appraisal



Name: \_\_\_\_\_

Structural System		Digestive System		Delivery System	
	Food cravings or binge eating		Feeling bloated, gas		High Blood pressure, LDL Cholesterol or triglycerides
	Joint pain or aches, stiffness		Constipation / Loose stool		Brain fog or feeling sleepy after meals
	Back and/or neck pain		Over weight		Loss of Muscle
	Rapid heartbeat		Stomach or intestinal pain		High Blood Sugar/ Diabetes
	Loss of strength, decreased muscle tone		Heartburn / bad breath		Heart or blood vessel problems or use of statin drugs
	Over weight		Food allergies or sensitivities		Over weight
	Weak memory or mental fog		Depression or mood swings		Resting plus > 70
0 Total		0 Total		0 Total	
Energy System		Communication System		Defense System	
	Overweight		Overweight		Overweight
	Getting Winded easily		Anger / Irritability		Chronic pain, joint pain with exercise
	Brain Fog for forgetfulness		Low morning energy		Autoimmune disease
	Low energy, fatigue or not feeling rested after a good night's sleep		Night sweats or feeling cold		Frequent colds or flu/ infections
	Loss of muscle / strength		Depression / Sleep problems		Skin Problems
	Loss of smell or taste		Loss of sex drive		Frequent anti-inflammatory use or antibiotic use
	Just plain feeling old		More stress than you can handle		Periodontal disease
0 Total		0 Total		0 Total	
Detox System		Scoring Scale			
	Overweight	5 = Have almost every day, severe effect			
	Brain fog or ringing in ears	4 = Frequently have, severe effect			
	Muscle pain	3 = Frequently have, effect not severe			
	Decreased kidney function	2 = Occasionally have, severe effect			
	Skin Problems	1 = Occassionally have it - mild effect			
	Decreased energy	0 = Never or almost never			
	Sensitivity to foods, medications, fragrances, alcohol, MSG, cigarette smoke, smog or caffeine	<b>Instructions:</b> Score each System of your body by entering 0-5 in each of the blue boxes. Use the scoring scale from above.		<b>Graph:</b> Your results will automatically be graph to the right of this section.	
0 Total					

7 Systems

**Overall 7 Systems Health Score: 0**

**For More Information Contact:**

**Tri-State Physicians and Physical Therapy Clinic**

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Date: \_\_\_\_\_

## 7 Systems Health Appraisal Graph

