

Detoxification and Drainage Questionnaire

Point count	Points
Never or almost never have the symptom	0
Occasionally have it	1
Occasionally have it, effect is severe	2
Frequently have it, effect is not severe	3
Frequently have it, effect is severe	4

Emotions	Points
Irritability	
Nervousness	
Mood swings	
Frequent crying	
Aggressive behavior, i.e., road rage	
Anxiety	
Fear	
Confusion	
*Depression	
*Suicidal thoughts	
Total Emotions	

Skin	Points
Increased sweating, ear wax, oily skin	
Skin rashes	
Brown spots on hands and face	
Boils	
Skin tags (small hanging warts)	
Acne	
Eczema	
Fever blisters	
Warts	
Total Skin	

Ear, Nose and Throat	Points
Increased salivation	
Mouth ulcers	
Common cold	
Sinusitis	
Sore throats	
*Ear infections	
Hay fever	
Loss of smell	
Cough	
Total Ear, Nose and Throat	

Mind and Brain	Points
Hyperactivity	
Stammering when speaking or problem finding words	
Difficulty in concentration	
Difficulty in making decisions	

Name: _____

Date: _____

Date:

Headache	
Poor memory	
Poor coordination	
*Compulsive behavior	
*Sleep disturbance	
Memory loss	
Total Mind and Brain	

Digestive System	Points
Loose stools	
Diarrhea	
Heartburn	
Constipation	
Bloating	
Abdominal pain	
Intolerance to certain foods	
Nausea or vomiting	
Severe diarrhea with blood or mucous	
Total Digestive System	

Kidney	Points
Increase in urination frequency and amount	
Needing to get up in the night to pass urine	
*Urinary tract infections and cystitis	
*Kidney stones	
*Blood in the urine	
Total Kidney	

Joints and Muscles	Points
Fleeting muscle aches or joint aches	
Tendinitis (e.g., tennis elbow, golfer's elbow, achilles tendinitis)	
Gout	
Arthritis	
Fibromyalgia	
Total Joints and Muscles	

Metabolism	Points
Feeling of coldness	
Hypoglycemia	
Craving certain foods	
Water retention	
Obesity	
Cellulite	
Total Metabolism	