

Diagnoses and Mainsymptoms Copyright Dr. H. Frei, 2018

Name

Date

To treat you in a holistic way, we need a complete description of your complaints. Please complete the following head-to-toe questions, underlining whatever applies to you, and make note if you fell this is necessary. The list is not complete so feel free to add any extra comments in the appropriate box.

Head

- Headache
- Eye complaints
- Cold / sinus complaints
- Inflamed throat
- Ear inflammation / infection

Chest

- Heart: disturbances to heart rhythm / weakness / pain
- Lung: cough / bronchitis / asthma

Abdomen

- Stomach: heartburn / burning / cramps
- Intestines: digestive problems / diarrhoea / constipation

Kidneys and urinary tract

- Inflammation / infection of kidney and bladder
- Urinary incontinence

Genitals

- Menstrual complaints
- Painful sexual intercourse

Musculoskeletal system

- Soft-tissue rheumatism
- Joint complaints

Skin

- Skin rash / inflammation / infection / warts
- Sweat

- Problems getting to sleep and sleeping through the night
- Nightmares

Mood

- Anxiety / fears
- Depression

Describe any complaints not listed above:

As a next step you must mark in the CHECKLIST OF RELIABLE SYMPTOMS those important modalities that apply to your complaints. Try to find at least 8 and maximally 16 symptoms.