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PARASITE QUESTIONNAIRE

Scores SYMPTOM NEVER OCCASSIONALLY FREQUENTLY MOST OF THE TIME Chronic Fatigue Swollen/Achy Joints Increased Appetite/Hungry After Meals Eat out at Restaurants Nervous or Irritable Restless Sleep/Grind Teeth in Sleep Night Sweats Blurry/Unclear Vision **Fevers** Frequent Colds/Flu/Sore Throat Recurrent Feelings of Unwellness Constipation Diarrhea Alternating w/Constipation Thinning or Loss of Hair Allergies or Food Sensitivities Irritable Bowel/Spastic Colon Rectal or Anal Itching Bloating or Gas Abdominal or Liver Pain/Cramps Mucus in Nose that is Moist/Encrusted Dark Circles Under Eyes Bowel Urgency/Incontinence Skin problems, rashes, hives, itchy skin Vertical Wrinkles Around Mouth Kiss Pets/Allow Pets to Lick Face Go Barefoot Outside Home Travel Outside US Eat Lightly Cooked Pork/Salmon Products Eat Sushi, Sashimi Swim in Creeks, Rivers, Lakes History of Parasitic Infection Loose Stools or Diarrhea Pale, Anemic, or Yellowish Skin Foul-Smelling Stools Low-back or Kidney Pain Indigestion/Malabsorption **TOTAL** 15-25 some possibility exists - 26-45 strong possibility - 46- probable infection