

# How would I rate my health & energy right now?

COMPLETE THIS QUESTIONNAIRE THEN ADD UP YOUR SCORE.

**1 = disagree, 5 = agree**

## HEALTH SCORE

Tired most of the time

1 2 3 4 5

Overweight

1 2 3 4 5

Prone to hormonal symptoms

1 2 3 4 5

Suffering from dark circles or bags under your eyes

1 2 3 4 5

Suffering from poor memory or concentration

1 2 3 4 5

Often feeling anxious or stressed

1 2 3 4 5

Very dry skin in need of daily moisturisers

1 2 3 4 5

Often constipated (you rarely go once a day)

1 2 3 4 5

Difficulty sleeping

1 2 3 4 5

Low or depressed

1 2 3 4 5

Prone to indigestion or bloating after food

1 2 3 4 5

What's your score now?

What was your previous score?

In which areas do you score the highest? - Use this information to set your health goals

## ENERGY & BLOOD SUGAR CONTROL SCORE

I often have mood swings or difficulty concentrating

1 2 3 4 5

I get dizzy or irritable if I go 4 to 6 hours without food

1 2 3 4 5

I often over-react to stress

1 2 3 4 5

I often crave something sweet or coffee after meals

1 2 3 4 5

I have less energy than I used to have

1 2 3 4 5

I often feel too tired to exercise

1 2 3 4 5

I am gaining weight and/or finding it harder to lose weight

1 2 3 4 5

I often have energy slumps during the day or after meals

1 2 3 4 5

I still feel tired 20 minutes after getting up

1 2 3 4 5

I need tea, coffee, a cigarette, or something sweet to get me going in the morning

1 2 3 4 5

I often crave chocolate, sweet foods, bread, cereal or pasta

1 2 3 4 5

What's your score now?

What was your previous score?

In which areas do you score the highest? - Use this information to set your health goals

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