



# ADRENAL QUESTIONNAIRE

Corbett Chiropractic & Health Enhancement  
Dr. Daniel G. Corbett DC, CCST  
507-645-8846  
www.corbettdc.com

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

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

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home#: \_\_\_\_\_

Gender (circle one):    **MALE**                      **FEMALE**

Work#: \_\_\_\_\_

Primary Care Physician: \_\_\_\_\_

Referring Physician: \_\_\_\_\_

Although your history and symptoms are very important in our analysis of your condition, it is also important for us that you understand:

- We do not treat symptoms, illness, conditions or diseases.
- This is not a treatment for allergies, this does not diagnose allergies or relieve allergies
- A symptom is an attempt by your body to tell you something.
- We identify substances that may cause stress on the body and work to reduce substance specific stress using a combination of Low Level Light Therapy, Acupoint Stimulation, Homeopathy, Nutrition and Energetic Information to help bring the body back into balance
- We do not use drugs in this program.
- There is no single method that will work for everyone but this integrative approach can help increase your core level energy, boost your immune system and help your body better deal with substance stressors leading to a higher quality of life
- Just because certain substances are considered "healthy" or "safe", this does not mean they are appropriate, "healthy" or "safe" for you.
- Your diet and environment consists of everything you **eat, drink, rub on your skin, or inhale**
- Our procedures are safe, non-invasive and painless.
- If you suffer from anaphylaxis, we recommended you consult your primary care physician for medical treatment appropriate for you.
- If you believe you suffer from allergies, we recommend you consult with your general practitioner, immunologist or board certified allergist before seeking alternative care.

## Adrenal Questionnaire

You regularly eat a <u>nutritious breakfast</u> ?	Yes	No
You regularly get 8 hours sleep and get to sleep before 11:00 p.m.?	Yes	No
Feeling Fatigue in the morning despite sufficient hours of sleep - difficult to get up in the morning like normal - even when you are a " <i>morning person</i> " ...	Yes	No
Feeling Fatigue in the afternoons between 3-5 p.m.	Yes	No
Feeling more energetic in the late afternoon and early evening.	Yes	No



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Insomnia/Irregular sleep - Fatigued at night but still waking up often.	Yes No
Weight gain and can't lose it, especially around the waist.	Yes No
Depression for not particular reason as well as for particular reasons.	Yes No
Hair loss	Yes No
Acne	Yes No
Reliance on stimulants like caffeine & cookies	Yes No
Cravings for carbohydrates or sugars	Yes No
Poor immune function	Yes No
Intolerance to cold.	Yes No
Hypersensitivity to light/sound/touch/odors (for example the sound of the bathroom fan just drives me nuts - the car radio may sound generally annoying when it used to be enjoyable.)	Yes No
Poor Memory/Fog/Memory lapses/Difficulty Concentrating.	Yes No
Reduced sex drive	Yes No
Constipated	Yes No
Feel easily - often overwhelmed	Yes No
Recurrent Candida infections	Yes No
Increased frequency of urination	Yes No
High frequency of getting the flu and other respiratory diseases and these symptoms tend to last longer than usual.	Yes No
Tendency to tremble when under pressure	Yes No
Crave for salty, fatty, and high protein food such as meat and cheese.	Yes No
Increase symptoms of PMS for women; period are heavy and then stop, or almost stopped on the 4th day, only to start flow again on the 5th or 6th day.	Yes No
Pain in the upper back or neck with no apparent reasons.	Yes No
Feels better when stress is relieved, such as on a vacation.	Yes No
Cold Extremities	Yes No



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Poor Digestion/Gas/Heartburn	<i>Yes</i> <i>No</i>
Panic attacks	<i>Yes</i> <i>No</i>
Impotency & Erectile Dysfunction	<i>Yes</i> <i>No</i>
Bed Wetting	<i>Yes</i> <i>No</i>
Rheumatoid Arthritis	<i>Yes</i> <i>No</i>
Post-nasal drip	<i>Yes</i> <i>No</i>
Thymus gland dysfunction	<i>Yes</i> <i>No</i>
Heart Palpitations	<i>Yes</i> <i>No</i>
Hepatitis C	<i>Yes</i> <i>No</i>
Lupus	<i>Yes</i> <i>No</i>

### ***Adrenal Score Card***

Give each question a numerical value of 0-4

0 never, 1 rarely, 2 sometimes, 3 often and 4 always, Add 1 additional point if condition is severe

- 1. I feel fatigued even after a good night's sleep \_\_\_\_\_
- 2. I have low tolerance to cold \_\_\_\_\_
- 3. My body temperature is below 98.6 \_\_\_\_\_
- 4. I have poor circulation \_\_\_\_\_
- 5. I have low blood sugar (hypoglycemia) \_\_\_\_\_
- 6. I have food and/or inhalant allergies \_\_\_\_\_
- 7. I suffer from depression and/or apathy \_\_\_\_\_
- 8. I have low stamina and/or endurance \_\_\_\_\_
- 9. I have low resistance to infections \_\_\_\_\_
- 10. My self esteem is low due to low energy \_\_\_\_\_
- 11. I have joint and muscle aches and pains \_\_\_\_\_
- 12. I have poor digestion \_\_\_\_\_
- 13. I have a tendency toward constipation \_\_\_\_\_
- 14. I need more than eight hours of sleep to feel rested \_\_\_\_\_
  
- Total points \_\_\_\_\_

**Answer Key:**

Less than 10 points indicates the adrenals are not overly stressed or the individual handles stress well



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10-15 points indicates the adrenals are moderately stressed and the patient may benefit from an adrenal regeneration program

16-20 points indicates the adrenals are being pushed too hard and the patient would benefit from an adrenal regeneration program

Over 21 points indicates the patient is probably in adrenal fatigue and the patient's health is at risk if you do not implement a stress reduction and adrenal regeneration program