Bjutiful Soul™
DETOXING & HYDRATING SOUL-MIND-BODY

Natural Health Consultant
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Name First:_____Last:_____

Email:_____

Mailing Address:_____

City:_____ State:_____Zip:_____

Telephone:_____

Age: _____Height: _____Weight: _____

What is your complaint? Example: ____Weight Loss | _____Nutrition | _____Anxiety| _____Stress

____Headaches | _____Emotional Well Being | _____Headaches

____Fatigue | _____Other:_____

How can we help?

List your previous health challenges and concerns. _____

_____

What medications/supplement do you take? Put them in chronological order – 1st to last.

Medications Supplements What? Why? How Long? What? Why? How Long?

What is your pH? Take your pH immediately after arising; then record the results. If you need pH strips, secure a supply at a local pet store etc?
Monday am |Tuesday am |Wednesday am| Thursday am| Friday am| Saturday am| Sunday AM| pH Arise at:
_____ _____ _____ _____ _____ _____ _____
General Questions

What type of work do you do now? _____ What type of work in the past? _____How stressful is your

life? (1-10 high) _____ What does your complexion look like?_____ What color are the whites of your eyes?
What does your tongue look like? Coated Cracked Pink
Does it stink?_____ Does it float? _____

Do you exercise? Y/N type/frequency: _____Do you smoke or use tobacco products? Y/N type/amount _____
Have your traveled recently? Y/N where/when?_____ Have you traveled abroad? Y/N where/when
_____ Have you been exposed to chemicals? Y/N type/when _____

How many times does your bowel eliminate each day? _____ If not how often per week?_____

What do you eat? Record all of the different things you are consuming. Please, don't fudge the results.
Monday _____
Tuesday _____
Wednesday _____
Thursday _____
Friday _____
Saturday _____
Sunday _____
Breakfast Snacks Lunch Snacks Dinner Snacks Retired at:

How is your digestion? Circle
heartburn Indigestion Reflux Bloating Gas Are you sensitive to any foods? Which ones?

What do you drink? Record all of the different things you are drinking. Please, don't fudge the results.
How Much Each Day?_____ water_____ regular soda _____coffee/tea _____ diet soda ____juice
_____ alcohol _____other energy drinks

How do you feel? Record "How you feel". Please, use regular terms and be specific.
wake up midmorning noon Mid-day dinner time before bed
Monday_____
Tuesday _____
Wednesday _____
Thursday _____
Friday _____
Saturday _____
Sunday _____

Do you have other thoughts you would like to share?

1. How many meals and snacks do you eat each day?
   Meals _____ Snacks _____
2. How many times a week do you eat the following meals away from home?
   Breakfast _____ Lunch _____ Dinner _____

   What types of eating places do you frequently visit? (Check all that apply)
   Fast-food _____ Diner/cafeteria _____
   Restaurant _____ Other _____
3. On average, how many pieces of fruit or glasses of juice do you eat or drink each day?
   Fresh fruit _____ Juice (8 oz cup) _____
4. On average, how many servings of vegetables do you eat each day? _____
5. On average, how many times a week do you eat a high-fiber breakfast cereal? _____
6. How many times a week do you eat red meat (beef, lamb, veal) or pork? _____
7. How many times a week do you eat chicken or turkey? _____
8. How many times a week do you eat fish or shellfish? _____
9. How many hours of television do you watch every day? _____
   Do you usually snack while watching television? Yes _____ No _____
10. How many times a week do you eat desserts and sweets? _____
11. What types of beverages do you usually drink? How many servings of each do you drink a day?

	Milk:	Alcohol:
Water _____	Whole milk _____	Beer _____
Juice _____	2 % milk _____	Wine _____
Soda _____	1 % milk _____	Hard liquor _____
Diet soda _____	Skim milk _____	
Sports drinks _____		
Iced tea _____		
Iced tea with sugar _____		

Please review your entries to make sure you have answered all of the questions and that they are a good reflection of your situation before you forward a copy of this Information Thanks for the opportunity to be part of your journey to *Bjutiful Soul.™*