

Patient Name: _____

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Is your Adrenal Gland fatigued?

- | | | | |
|---|-----|----|---|
| 4 | YES | NO | Do you get frazzled easily or fly off the handle easily? |
| 3 | YES | NO | Do you startle easily and/ or have low tolerance for loud noises? |
| 4 | YES | NO | Do you have a low stamina for stress and/ or cave in easily? |
| 3 | YES | NO | Do you have unusual fatigue, especially in the morning and/ or have more energy at night? |
| 4 | YES | NO | Do you feel tired but wired and/ or have low reserve to meet any type of challenge? |
| 2 | YES | NO | Do you have salt cravings? |
| 3 | YES | NO | Do you get cranky/ tired if you skip a meal and find you have to eat frequently? |
| 2 | YES | NO | Do you have excess sensitivities to chemicals and/ or increased allergies? |
| 2 | YES | NO | Do you have low tolerance for alcohol, caffeine, other drugs or strong odors? |
| 2 | YES | NO | Do you have dizziness upon standing or low blood pressure? |

***Total ____; If your score is more than 15, then you may have some degree of Adrenal Fatigue**

***Labs to consider: Adrenal Stress Index (4 salivary Cortisol levels, DHEA, Insulin, 17-OH Progesterone levels)**

***Supplements to help with low Adrenal function: B-Complex, Licorice, Adrenal Cortex and others**

Are your Sex Hormones Unbalanced (FEMALES)

- | | | | |
|---|-----|----|--|
| 4 | Yes | No | Do you have premenstrual mood swings? |
| 4 | Yes | No | Do you have premenstrual or menopausal food cravings? |
| 4 | Yes | No | Do you experience irregular periods? |
| 3 | Yes | No | Have you ever experienced a miscarriage, an abortion, or infertility? |
| 4 | Yes | No | Have you used birth control pills or other hormone medication? |
| 3 | Yes | No | Do you have uncomfortable periods--cramps, lengthy or heavy bleeding, or sore breasts? |
| 4 | Yes | No | Do you get Peri- or postmenopausal discomfort (hot flashes, sweats, insomnia, or mental dullness)? |
| 3 | Yes | No | Do you experience skin eruptions with period? |

***Total ____; If your score is more than 6, then you most likely have an imbalance with your Progesterone and Estrogen levels which are contributing to you not feeling well**

***Labs to consider: Salivary Hormone Testing**

***Supplements to help balance your Sex Hormones: Natural Progesterone, Natural Estrogen**

Are your Sex Hormones Unbalanced? (MALES)

- | | | | |
|---|-----|----|---|
| 4 | Yes | No | Do you have low libido (sex drive)? |
| 4 | Yes | No | Do you have erection difficulties? |
| 3 | Yes | No | Do have premature ejaculation? |
| 3 | Yes | No | Do you have a decrease in muscle strength recently? |
| 2 | Yes | No | Do you have frequent urination at night? |
| 2 | Yes | No | Do you feel depressed recently? |

***Total_____; If your score is more than 8, then you may have low testosterone or low precursors to testosterone**

***Labs to consider: Salivary Hormone Testing**

*** Supplements to help balance your Sex Hormones: Testosterone,**

Is Your Thyroid Underactive?

- | | | | |
|---|-----|----|---|
| 4 | Yes | No | Do you experience low energy? |
| 4 | Yes | No | Are you easily chilled (especially hands and feet)? |
| 4 | Yes | No | Do other family members have thyroid problems? |
| 4 | Yes | No | Can you gain weight without overeating; hard to lose excess weight? |
| 3 | Yes | No | Do you have to force yourself to do even moderate exercise? |
| 4 | Yes | No | Do you find it hard to get going in the morning? |
| 3 | Yes | No | Do you have high cholesterol? |
| 3 | Yes | No | Do you have low blood pressure? |
| 4 | Yes | No | Did you gain weight near the start of menses, a pregnancy, or menopause? |
| 3 | Yes | No | Do you get chronic headaches? |
| 3 | Yes | No | Do you use food, caffeine, tobacco, and/or other stimulants to get going? |

***Total_____; If your score is more than 15, than your Thyroid is probably causing your low energy and mood**

***Labs to consider: Amino Acid Levels, Neurotransmitter Levels, Serum Thyroid levels (T4, T3)**

***Supplements to help boost Thyroid: L-Tyrosine; Meds to consider: Thyroid Hormone**

Are you deficient in DHEA?

- | | | | |
|---|-----|----|---|
| 4 | YES | NO | My libido is low |
| 3 | YES | NO | My body does not have a special scent during sexual arousal |
| 3 | YES | NO | My belly is getting fat |
| 2 | YES | NO | My muscles are flabby |
| 2 | YES | NO | My hair is dry |
| 3 | YES | NO | My skin and eyes are dry |

***Total____; If your score is more than 10, than you probably have a DHEA deficiency**

***Labs to consider: Salivary DHEA levels or Serum DHEA-S levels**

***Supplements to help boost DHEA: Natural DHEA**

Are you deficient in Pregnenolone?

- | | | | |
|---|-----|----|---|
| 4 | YES | NO | I have memory loss |
| 4 | YES | NO | I feel drained and have a hard time handling stress |
| 3 | YES | NO | My joints hurt most of the time |
| 3 | YES | NO | I have lost interest in art and/ or music |
| 2 | YES | NO | I don't see colors as brightly as I used to |
| 2 | YES | NO | I have low blood pressure |
| 2 | YES | NO | I have cravings for salt and salty foods |

***Total____; If your score is more than 11, than you are probably deficient in Pregnenolone**

***Labs to consider: Salivary 17-OH Progesterone level; Serum Pregnenolone level**

***Supplements to help boost Pregnenolone: Natural Pregnenolone, B-complex vitamins**

Are you deficient in Melatonin?

- | | | | |
|---|-----|----|---|
| 4 | YES | NO | I look older than I am |
| 4 | YES | NO | I have trouble falling asleep or staying asleep |
| 3 | YES | NO | When I get up in the morning, I don't feel rested |
| 3 | YES | NO | I feel as if I am always going to bed late and waking up late |
| 2 | YES | NO | I cannot tolerate jet-lag |

***Total____; If your score is more than 9, than you probably have a Melatonin deficiency**

***Supplements to help boost Melatonin levels: Natural Melatonin, L-Tryptophan, 5-HTP**