Health Appraisal Questionnaire
Comprehensive Practitioner Tally Form

Health Appraisal Questionnaire (HAQ)
The HAQ is designed to be a useful consultation tool; it should not, however, replace a full clinical consultation. All answers need to be discussed with your patient and further questioning may be required to qualify answers and get further relevant details. Please note that all questions in **bold** and all questions in Section 12.3 require further medical investigation, as these symptoms may indicate a serious medical condition.

How to fill in the scoring sheet
- Enter total scores for each section in the column entitled **"Patient Score Total for This Section".**
- Circle priority rating based on results of each section (i.e. **L** = Low priority, **M** = Medium priority, **H** = High priority).
- Each section's priority score is based upon the clinical significance of symptoms. From these results you may determine the areas of highest priority for your patient.

	Low Priority Scores	Medium Priority Scores	High Priority Scores	Patient Score Total for This Section	Priority Rating for This Section
SECTION 1: GASTROINTESTINAL					
1.1 – Stomach: Hypoacidity	0 - 4	5 - 9	10 +		☐L ☐M ☐H
1.2 – Stomach: Hyperacidity	0 - 4	5 - 9	10 +		☐L ☐M ☐H
1.3 – Small Intestine/Pancreas	0 - 4	5 - 9	10 +		☐L ☐M ☐H
1.4 – Colon	0 - 4	5 - 9	10 +		☐L ☐M ☐H
1.5 – Liver/Gall Bladder/Pancreas	0 - 4	5 - 9	10 +		☐L ☐M ☐H
SECTION 2: ENDOCRINE					
2.1 – Symptoms of underactive thyroid	0 - 4	5 - 9	10 +		☐L ☐M ☐H
2.2 – Symptoms of overactive thyroid	0 - 4	5 - 9	10 +		☐L ☐M ☐H
2.3 – Stress, fatigue and adrenals	0 - 4	5 - 9	10 +		☐L ☐M ☐H
SECTION 3: IMMUNE					
3.1 – Low immunity	0 - 4	5 - 9	10 +		☐L ☐M ☐H
3.2 – Allergy	0 - 4	5 - 9	10 +		☐L ☐M ☐H
SECTION 4: CARDIOVASCULAR					
4.1 – Healthy red blood cell maintenance	0 - 3	4 - 7	8 +		☐L ☐M ☐H
4.2 – Healthy blood pressure maintenance	0 - 3	4 - 7	8 +		☐L ☐M ☐H
4.3 – Heart	0 - 3	4 - 7	8 +		☐L ☐M ☐H
4.4 – Circulatory system	0 - 3	4 - 7	8 +		☐L ☐M ☐H
SECTION 5: GLUCOSE TOLERANCE					
5.1: Symptoms of hypoglycaemia	0 - 3	4 - 7	8 +		☐L ☐M ☐H
5.2: Symptoms of hyperglycaemia	0 - 3	4 - 7	8 +		☐L ☐M ☐H
SECTION 6: GENITOURINARY SYSTEM AND REPRODUCTIVE HORMONES					
6.1 – Kidney/Bladder	0 - 3	4 - 7	8 +		☐L ☐M ☐H
6.2 – Prostate/Male hormone balance	0 - 3	4 - 7	8 +		☐L ☐M ☐H
6.3 – Symptoms of PMS	0 - 4	5 - 9	10 +		☐L ☐M ☐H
6.4 – Menstrual irregularities	0 - 4	5 - 9	10 +		☐L ☐M ☐H
6.5 – Symptoms of menopause	0 - 4	5 - 9	10 +		☐L ☐M ☐H
6.6 – Other female sexual and hormonal problems	0 - 4	5 - 9	10 +		☐L ☐M ☐H
SECTION 7: MUSCULOSKELETAL					
7.1 – Bone	0 - 3	4 - 7	8 +		☐L ☐M ☐H
7.2 – Muscle	0 - 3	4 - 7	8 +		☐L ☐M ☐H
7.3 – Connective tissue	0 - 3	4 - 7	8 +		☐L ☐M ☐H
SECTION 8: BRAIN AND NERVOUS SYSTEM					
8.1 – Neurological	0 - 3	4 - 7	8 +		☐L ☐M ☐H
8.2 – Stress history	0 - 3	4 - 7	8 +		☐L ☐M ☐H
8.3 – Symptoms of insomnia	0 - 3	4 - 6	7 +		☐L ☐M ☐H
8.4 – ADHD/Learning disorders	0 - 2	3 - 6	7 +		☐L ☐M ☐H
SECTION 9: RESPIRATORY SYSTEM	0 - 4	5 - 9	10 +		☐L ☐M ☐H
SECTION 10: HAIR, SKIN AND NAILS	0 - 1	2 - 3	4 +		☐L ☐M ☐H
SECTION 11: DETOXIFICATION CAPACITY	0 - 3	4 - 6	7 +		☐L ☐M ☐H
SECTION 12: GENERAL HEALTH HISTORY					
12.1 – Patient health history	0 - 1	2 - 3	4 +		☐L ☐M ☐H
12.2 – Weight management	0 - 1	2 - 3	4 +		☐L ☐M ☐H
12.3 – High risk symptoms	0	1 - 2	4 +		☐L ☐M ☐H

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