Please check the medical problems you have had in the past or have currently

- [ ] AIDS
- [ ] Alcoholism
- [ ] Allergies
- [ ] Anemia
- [ ] Arteriosclerosis
- [ ] Arthritis
- [ ] Asthma
- [ ] Back Pain
- [ ] Bronchitis
- [ ] Bruise Easily
- [ ] Cancer
- [ ] Chest Pain
- [ ] Cold Extremities
- [ ] Concussion
- [ ] Constipation
- [ ] Cramps
- [ ] Depression
- [ ] Diabetes
- [ ] Digestion Problems
- [ ] Dizziness
- [ ] Ears Ringing
- [ ] Eye Pain
- [ ] Fatigue
- [ ] Frequent Urination
- [ ] Headache
- [ ] Heavy Menstruation
- [ ] Hemorrhoids
- [ ] High Blood Pressure
- [ ] Hot Flashes
- [ ] Irregular Cycle
- [ ] Irregular Heart Beat
- [ ] Kidney Infection
- [ ] Kidney Stones
- [ ] Loss of balance
- [ ] Loss of memory
- [ ] Loss of smell
- [ ] Loss of taste
- [ ] Lumps In Breast
- [ ] Neck Pain or Stiffness
- [ ] Nervousness
- [ ] Nosebleeds
- [ ] Pacemaker
- [ ] Polio
- [ ] Poor Posture
- [ ] Prostate Trouble
- [ ] Sciatica
- [ ] Shortness of Breath
- [ ] Sinus Infection
- [ ] Sleep Problems
- [ ] Spinal Curvatures
- [ ] Stroke
- [ ] Swelling of ankles
- [ ] Swollen Joints
- [ ] Thyroid Condition
- [ ] Tuberculosis
- [ ] Ulcers

- [ ] **Varicose Veins**
- [ ] **Venereal Disease**

Other