

ADRENAL FATIGUE QUICK CHECK

Patient name _____ Date _____

Place a check next to any of the following that currently apply to you.

- Difficulty getting up in the morning
- Continuing fatigue, not relieved by sleep and rest
- Lethargy, lack of energy to do normal daily activities
- Sugar cravings
- Salt cravings
- Allergies
- Digestion problems
- Increased effort needed for everyday tasks
- Decreased interest in sex
- Decreased ability to handle stress
- Increased time needed to recover from illness, injury or traumas
- Light-headed or dizzy when standing up quickly
- Low mood
- Less enjoyment or happiness with life
- Increased PMS
- Symptoms worsen if meals are skipped or inadequate
- Thoughts are less focused, brain fog
- Memory is poorer
- Decreased tolerance for stress, noise, disorder
- Don't really wake up until after 10:00 A.M.
- Afternoon low between 3:00 P.M. and 4:00 P.M.
- Feel better after supper
- Get a "second wind" in the evening, and stay up late
- Decreased ability to get things done—less productive
- Have to keep moving—if I stop, I get tired.
- Feeling overwhelmed by all that needs to be done
- It takes all my energy to do what I have to. There's none left over for anything or anyone else.