

Health Status Check

	Consider the statement and enter the corresponding number in the box e.g. 'Often' enter '2'	Very often	Often	Sometimes	Rarely	Never
		1	2	3	4	5
1	Overall health: My health status is poor					
2	Open mouth breathing is my norm, dry lips, dry mouth					
3	Stuffy, runny, itchy nose, sinus congestion, narrow nasal passages, recurrent colds					
4	Lump sensation in the throat, difficulty swallowing, irritated throat, sensitive airways					
5	Shallow breathing, difficulty breathing abdominally					
6	Heavy breathing, over breathing, difficulty getting air in, chest tightness					
7	Sneezing, sighing, yawning, taking big breaths prior to speaking					
8	Daytime apnoea, holding the breath, forgetting to exhale					
9	Noisy breathing, mucus build up, clearing the throat, coughing , sneezing, wheezing					
10	Forward leaning and/or slumped posture					
11	Insomnia, restless sleep, snoring, sleep apnoea, grinding, clenching teeth					
12	Low on energy, morning tiredness, tired during the day, poor concentration					
13	Heart palpitations, extra and/or irregular heartbeats					
14	Internal stress, brain in overdrive, in a hurry, sugar cravings, addictive tendencies					
15	Feeling anxious, depressed, afraid, avoiding conflict, people pleaser					
16	Irritated, angry, impatient, conflicts, over ambitious					
17	Indigestion, constipation, over eating					
18	Stiff and/or tense muscles, pain in the back, neck, shoulders, headaches					
19	Shortness of breath during exercise, low endurance at physical work					
20	The voice does not carry, hoarseness, squeaky/nasal/strained voice					

Max score 100, high score is body in balance

Low score of below 50 suggests your breathing has a great potential for improvement