

## Parasite Exposure Questionnaire

Please check the boxes for symptoms or exposures that you have or had to determine if your underlying health issues may be associated with an unresolved parasitic infection.

### Symptom Checklist:

- Increased appetite
- Chronic fatigue for undetermined reasons
- Swollen or achy joints
- Anxiety, irritability
- Insomnia
- Teeth grinding especially while sleeping
- Night sweats
- Fevers of unknown origin
- Frequent colds, flu
- Constipation
- Diarrhea alternating with constipation
- Loose stools or diarrhea
- Bowel urgency
- Abdominal pain or cramps
- Bloating or gas
- Anal itching

- Food sensitivities or allergies
- Dark circles under the eyes
- Sinus congestion
- Chronic wet cough despite treatments
- Rashes, hives or itchy skin
- Hair loss
- Weight instability with loss or gain

**Potential Exposure Checklist:**

- Dog or cat owner
- Go barefoot outside
- Travel in 3rd world countries
- Eat lightly cooked pork/salmon products
- Eat sushi or sashimi
- Swim in creeks, rivers, lakes
- Eat out at restaurants
- History of suspicious or know parasitic infection
- Maintain a garden

**If you have checked more than 6 boxes than a parasitic infection may be causing or contributing to the symptoms. Please discuss this with your Doctor for proper guidance on stool testing to obtain more information.**