

**BIOCHEMICAL
METABOLIC
ANALYSIS
(BMA)
PACKET**

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BIOCHEMICAL METABOLIC ANALYSIS

Gland-dominate Formulation

PURPOSE: Your metabolism controls your body size, shape and the rate at which you burn calories. Thus it determines the rate at which you gain or lose weight, and whether it is difficult or easy for you to maintain your ideal weight. A weight chart will be provided and offers maintenance ranges for your height. You will find within that range the weight at which you feel the most alive, flexible, strong and healthy.

Your metabolism also determines where excess fat and cellulite accumulates on the body. Have you noticed that some people gain weight all over their body, whereas others gain in the hip or rear areas primarily, and yet another person may gain only around the waist or mid-body areas? Have you also observed that some people who are within normal weight can still carry cellulite or fatty areas in certain parts of their body, most often in the stomach or hips.

Fatty tissue will remain in these areas until there is glandular balance. Imbalances in metabolism, body chemistry, can occur because of many different factors. Your body chemistry is directly affected by your food chemistry, i.e., the chemical affect of foods on the metabolism, biochemistry. Cravings is one sign of body chemistry/food chemistry imbalance. Some people crave sweets, others dairy products, others salty, rich or spicy foods. These cravings will leave the body once the biochemistry is balanced.

Your metabolism affects your ability to handle stress of all types and influences your job and hobby preferences, sleep and eating patterns and your personality.

BASIC FOUR GLAND TYPES:

There are four basic gland which influence the metabolism. They are: the Thyroid, The Adrenals, The Pituitary and The Gonadal. At birth one is dominate and has more influences on you, your biochemistry and your personality. Obviously, because each person has these glands, each person is influenced by all four. However, generally you will find one dominate gland, a secondary dominate gland which has definite influences, and the other two glands will be of minimal or no influence.

BIOCHEMICAL METABOLIC ANALYSIS QUESTIONNAIRE:

Complete this questionnaire to determined which metabolic or dominate gland type you are of the basic four. If unsure of an answer, ask your best friend to help you answer them. When answering questions, it will help you to ask yourself these questions also:

1. Does this apply to me now? If yes, then answer appropriately.
2. If no, then ask yourself: In my past, can I say this was true for me.
3. If yes, answer appropriately.
4. If no, then ask yourself: If I had a preference, I would choose ?, then answer appropriately.
5. If none of the questions seem to apply, choose the best answer available to you that could possibly fit.
6. If one part of the answer fits, circle the whole answer.
7. Accuracy is essential. Double check yourself and be sure you have answered accurately.

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BIOCHEMICAL METABOLIC ANALYSIS

Questionnaire

Date: _____ Client: _____

SECTION A: BODY SHAPE AND APPEARANCE

- I. **OVERWEIGHT:** (If you are near or at your normal weight, go to Section A II.)
 Look at yourself straight on in the mirror, focusing on the overall outline and shape of your body:
- A. Body is at least a full size smaller above the waist than below.
 - B. Body is stocky and full-figured, with pronounced curve at waist or hips.
 - C. Body is curvy but much fuller thru middle (waist, hips, upper thighs) than at the extremities (neck, head, lower arms, calves and ankles).
 - D. Body is childlike in outline, with small breasts and "baby fat" all over.
- II. **AT OR NEAR NORMAL WEIGHT:** (Answer all questions from this section to last page)
 If you are not overweight, look at your body as it is now. If you have a few extra pounds, think of your body as it would be at your best weight. At your ideal, best weight you would be:
- A. Slim, but with curvy hips and rear.
 - B. Slender, but full-figured and strongly built.
 - C. Very Slender, and fine-boned.
 - D. Slender, childlike and undeveloped.
- III. **TURN SIDEWAYS AND FOCUS ON THE LINE OF YOUR BACK**
- A. Back is slightly "swayed" and rear end sticks out prominently.
 - B. Back is straight and rear appears flat and "tucked under."
 - C. Rear is round but not extremely pronounced; lower back is straight.
 - D. Rear is small and childlike, shoulders are round and head comes forward from the line of back.
- IV. **HEAD:** (Focus on head in relation to its shape and to overall body)
- A. Head is slightly small for body size.
 - B. Head is square and have a square or round face.
 - C. Head is long and have a slender face.
 - D. Head is slightly large for body size.
- V. **CHEST AND BREASTS:**
- A. Small chest, small breasts, with noticeable texture to breast tissue and prominent nipple glands.
 - B. Large chest, large rounded breasts.
 - C. Small chest, medium to large breasts. Breast size increased with age.
 - D. Medium chest, small "budding" breasts with silky texture.
- VI. **HANDS AND FEET:**
- A. Average in size, small fingers and toes.
 - B. Square, with small fingers and toes.
 - C. Long, with tapering fingers and toes.
 - D. Small, delicate.

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|--|
| PAGE I (Physical) A(G): _____ B(A): _____ C(T): _____ D(P): _____ (X2) |
| TOTALS _____ |

- VII. TEETH:
- White, medium-sized, slightly crowded and uneven.
 - Large, slightly yellowish, with prominent ridges.
 - Small, white, even, prone to cavities.
 - Large, especially front center.

- VIII. MOUTH SHAPE:
- Thin, well-shaped, "serious".
 - Full, often "set" or pursed.
 - Wide, mobile, expressive.
 - Rosebud, childlike.

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- IX. SKIN:
- Smooth, oily.
 - Oily, slightly coarse, with a tendency to flaky patches.
 - Smooth, of normal oiliness, tendency to red areas and easy bruising..
 - Dry, delicate, tendency to hives.

SECTION B: LOCATION OF EXTRA POUNDS (Fatty tissue)

Answer this section of questions if you have any extra pounds or if you have ever had any.

- X. OVERALL OUTLINE AND SHAPE OF BODY
- Body is at least a full size smaller above the waist than below.
 - Body is stocky and full-figured, with pronounced curve at waist or hips.
 - Body is curvy but much fuller thru middle (waist, hips, upper thighs) than at the extremities (neck, head, lower arms, calves and ankles).
 - Body is childlike in outline, with small breasts and "baby fat" all over.
- XI. WHERE IS MOST OF YOUR EXTRA FATTY TISSUE?
- On the rear end.
 - Across the stomach and upper back.
 - Around the middle - spare tire, wide hips, heavy upper thighs.
 - All over, no single location.
- XII. LOOK AT YOUR BACK - WHERE DO YOU HAVE MORE FATTY TISSUE?
- Below the waist.
 - Across the upper back.
 - Around the waist.
 - All over, not more above or below.
- XIII. FROM THE BACK*-- Can You See "Saddlebags" or Pockets of Fatty Tissue on the Outer Thighs?
- Yes (Count below is A and C for Yes)
 - No (Count below is B and D for No)
- XIV. FROM THE FRONT*-- Do You Have a "Spare Tire" (Roll Around Middle)
- Yes (Count below is A and C for Yes)
 - No (Count below is B and D for No)
- XV. HANDS AND FEET *- Do They Have an Accumulation of Fatty Tissue? If They Do the Bones Will Not Be Too Prominent.
- Yes (Count below is B and D for Yes)
 - No (Count below is A and C for No)

| | | | | | |
|-------------------|-------------|-------------|-------------|-------------|-----------------|
| PAGE 2 (Physical) | A(G): _____ | B(A): _____ | C(T): _____ | D(P): _____ | (X2, EXCEPT*=1) |
| TOTALS | _____ | _____ | _____ | _____ | |

Date: _____ Client: _____

The next eight questions are on the location of cellulite, or "cottage cheesy" fatty tissue. Even if you are not overweight, you probably do have some cellulite on your body. To check for cellulite, first examine the area in question. Does the fat appear to be wrinkly? If so, the area has cellulite. If the area appears to have fatty tissue but is not wrinkly, then gently squeeze about an inch or so of the fatty tissue between two fingers or have someone do this for you. This will show cellulite that is not apparent just from looking at it. If you have no cellulite now, but did in the past, answer these questions as if you have the cellulite now.

XVI. UPPER ARMS:

- A. Yes (Count below is B and C for Yes)
 B. No (Count below is A and D for No)

XVII. UPPER HIPS: (Meaning the place you rest your hands when straight beside you)

- A. Yes (Count below is C for Yes**)
 B. No (Count below is A, B and D for No)

XVIII. LOWER HIPS (Place where you smooth your skirt or pants):

- A. Yes (Count below is A and C for Yes)
 B. No (Count below is B and D for No)

XIX. UPPER THIGHS:

- A. Yes (Count below is C for Yes**)
 B. No (Count below is A, B and D for No)

XX. INSIDE OF KNEES - UPPER NOT THE LOWER LEG:

- A. Yes (Count below is D for Yes**)
 B. No (Count below is A, B, and C for No)

XXI. SHOULDER BLADES:

- A. Yes (Count below is B for Yes**)
 B. No (Count below is A, C and D for No)

XXII. REAR END - THE BUTTOCKS PROPER:

- A. Yes (Count below is A for Yes**)
 B. No (Count below is B, C, and D for No)

XXIII. MAIN AREA OF CELLULITE (Place you consider biggest problem)

- A. Rear, outer thighs.
 B. Stomach, back.
 C. Upper thighs.
 D. Knees, breasts.

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|-------------------------------|-------------|-------------|-------------|-----------------------|
| PAGE 3 (Physical) A(G): _____ | B(A): _____ | C(T): _____ | D(P): _____ | (X1, except 2 for **) |
| TOTALS | _____ | _____ | _____ | _____ |

SECTION C: EATING PATTERNS

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- XXIV. WHICH DO YOU LOVE THE MOST?
 A. Rich or spicy foods.
 B. Steak, salty foods.
 C. Bread, sweets.
 D. Dairy products, fruit.
- XXV. AT AN AFTERNOON PARTY, WHICH FOODS WOULD YOU FIND HARDEST TO RESIST?
 A. The creamy dips.
 B. Hot dogs, salami or peanuts.
 C. Cakes or candies.
 D. Ice Cream.
- XXVI. THE TOTAL NUMBER OF GLASSES, CUPS OR CANS OF COFFEE, TEA OR COLA YOU CONSUME DAILY IS:
 A. One or two
 B. Three or Four
 C. Five or More
 D. None
- XXVII. WHICH DO YOU PREFER FOR BREAKFAST?
 A. French Toast
 B. Bacon and eggs
 C. Toast and Jam
 D. Fruit and Yogurt
- XXVIII. IDEALLY, WHEN WOULD YOU LIKE TO HAVE YOUR BIGGEST MEAL?
 A. Breakfast.
 B. Dinner.
 C. Lunch.
 D. Prefer no big meal, just lots of snacks.

SECTION D: ENERGY PATTERNS

- XXIX. HOW MANY HOURS WOULD YOU LIKE TO SLEEP EACH NIGHT?
 A. 8-9 hours.
 B. 4-6 hours.
 C. 5-6 hours; when energetic; 9-10 hours when tired.
 D. 7-8 hours.
- XXX. WHEN DOES YOUR HIGHEST ENERGY PERIOD OCCUR?
 A. Late in the day - I prefer staying up late.
 B. Energetic all day.
 C. Following meals.
 D. Early mornings.
- XXXI. DO YOU HAVE TROUBLE SLEEPING AT NIGHT?
 A. Rarely.
 B. Often.
 C. Occasionally, but only for one night at a time.
 D. Occasionally, but when I do it happens every night for a while.

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|--------|-------------|-------------|-------------|-------------|------|
| PAGE 4 | A(G): _____ | B(A): _____ | C(T): _____ | D(P): _____ | (X1) |
| TOTALS | _____ | _____ | _____ | _____ | |

Date: _____ Client: _____

SECTION E: EXERCISE PATTERNS

XXXII. WHY DO YOU EXERCISE?

- A. Because moving feels good.
- B. To burn off my excess energy.
- C. So I can eat more later.
- D. To get an exercise "high".

XXXIII. WHAT IS YOUR FAVORITE AEROBIC EXERCISE?

- A. Jazz Dancing.
- B. Pumping Iron.
- C. A very varied workout.
- D. Long-distance running.

XXXIV. HOW DO YOU FEEL IF YOU MISS YOUR REGULAR EXERCISE?

- A. Heavy, tired.
- B. Angry.
- C. Irritable or depressed.
- D. My thoughts go round and round.

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SECTION F: YOUR HEALTH HISTORY

XXXV. WHAT IS YOUR MOST TYPICAL SMALL HEALTH PROBLEM?

- A. Bladder infections.
- B. Constipation.
- C. Tiredness, fatigue.
- D. Colds.

XXXVI. WHICH OF THESE LARGER HEALTH PROBLEMS DO YOU FEEL YOU COULD BE MORE PRONE TO DEVELOP OR HAVE NOW?

- A. Breast lumps.
- B. High blood pressure.
- C. Ulcers.
- D. Chronic Allergies.

XXXVII. ARE YOU PRONE TO UPSET STOMACH OR DIARRHEA?

- A. No (Count A and B for No)
- B. Yes (Count C and D for Yes)

XXXVIII. ARE YOU PRONE TO HEADACHES?

- A. No. (Count A and B for No)
- B. Occasionally. (Count C)
- C. Yes, quite a bit. (Count D)

XXXIX. DO YOUR HANDS AND FEET FEEL COLD AT NIGHT?

- A. Sometimes. (Count A and D for Sometimes)
- B. Rarely or never. (Count B)
- C. Often. (Count C)

XL. DO YOUR FEET TEND TO SWELL UP?

- A. Yes, mostly when overweight. (Count A and B)
- B. No. (Count D)
- C. Yes, mostly in hot weather. (Count C)

PAGE 5
TOTALS

A(G): _____ B(A): _____ C(T): _____ D(P): _____ (X1)

- XL I. DO YOUR HANDS TEND TO SWELL UP?**
 A. No (Count A and D)
 B. Yes, when I eat salty foods. (Count B)
 C. Yes, mostly in hot weather. (Count C)
- XLII. WHEN YOU ARE ILL, WHICH PARTS OF YOUR BODY ARE MOST LIKELY TO ACHE?**
 A. Hands and feet.
 B. Lower back.
 C. Neck and Shoulders.
 D. Knees.
- XLIII. HOW MUCH DO YOU PERSPIRE?**
 A. Moderately.
 B. Quite a bit.
 C. Variably. Very lightly when slim; more when heavy.
 D. Lightly.
- XLIV. WHICH OF YOUR SENSES DO YOU FEEL IS YOUR MOST ACUTE ONE?**
 A. Touch
 B. Hearing
 C. Taste/smell
 D. Sight
- XLV. WHICH OF YOUR SENSES DO YOU FEEL IS YOUR LEAST ACUTE ONE?**
 A. Touch
 B. Hearing
 C. Taste/smell
 D. Sight
- XLVI. (FEMALES) ARE YOU PRONE TO CRAMPS DURING YOUR MENSTRUAL PERIOD?**
 A. First day only.
 B. Rarely.
 C. Yes, quite badly.
 D. Very little.
- XLVII. IF YOU HAVE BEEN PREGNANT, WHICH OF THESE BEST DESCRIBE YOUR EXPERIENCE:**
 A. Delightful, enjoyed it.
 B. Easy, comfortable.
 C. Felt heavy and uncomfortable.
 D. Didn't like it much.

SECTION G: CREATIVITY AND WORK

- XLVIII. IF YOU HAD YOUR CHOICE OF ANY WORK IN THE WORLD -- MONEY ASIDE -- WHAT WOULD YOU DO?**
 A. Teach something I love.
 B. Sell something I believe in.
 C. Create something I feel for.
 D. Design something essential.

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|--------|-------------|-------------|-------------|-------------|------|
| PAGE 6 | A(G): _____ | B(A): _____ | C(T): _____ | D(P): _____ | (X1) |
| TOTALS | _____ | _____ | _____ | _____ | |

Date: _____ Client: _____

- XLIX. IF YOU COULD WORK IN ANY SITUATION AT ALL, WHERE WOULD YOU WORK?
 - A. In my home.
 - B. In a giant, wonderful workplace.
 - C. Out in the world, traveling.
 - D. In a serene, beautifully designed office.
- L. OF THESE REAL-LIFE JOBS, WHICH ONE WOULD YOU CHOOSE?
 - A. Service person (health care professional, consultant, teacher, secretary, clerk).
 - B. Production person (salesperson, engineer, executive).
 - C. Marketing/creative person (designer, marketing).
 - D. Technical person (computer programmer, accountant).

SECTION H: PERSONALITY

- LI. IS IT EASY FOR YOU TO LAUGH AT YOURSELF?
 - A. It's possible, if I don't feel threatened.
 - B. Yes, I accept my kookiness.
 - C. No, I am no kooky.
 - D. I don't exactly laugh, I am amused.
- LII. WHICH OF THESE SUBJECTS DO YOU MOST ENJOY DISCUSSING OR THINKING ABOUT?
 - A. Sex, home, family, food.
 - B. Business, money, practical things.
 - C. Arts, current events, your latest project.
 - D. Philosophy, ideals, the broader questions of life.
- LIII. WHICH OF THE FOLLOWING BEST DESCRIBES YOUR DISPOSITION?
 - A. Sensuous, warm and comfortable.
 - B. Friendly, open and practical.
 - C. Artistic, lively and changeable.
 - D. Intellectual, cool and detached.
- LIV. WHEN YOU ARE "UP" YOU ARE:
 - A. Radiant, welcoming to all.
 - B. A "hail fell well met."
 - C. Sparkly and funny.
 - D. Giggly as a happy child.
- LV. WHEN YOU FEEL "DOWN" YOU BECOME:
 - A. Weepy.
 - B. Angry and hollering.
 - C. Depressed, irritable, even cruel.
 - D. Neurotic, obsessed, withdrawn.
- LVI. WHICH OF THE FOLLOWING BEST DESCRIBES YOUR TEMPER?
 - A. Quick-tempered but easily distracted from your anger by flattery or apologies.
 - B. Slow to get angry, but once you are, you stay mad for a while.
 - C. Quick-tempered over small matters, inclined to get depressed when thwarted.
 - D. Slow to get angry and quick to get over it, once you have a chance to think it over.

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|--------|-------------|-------------|-------------|-------------|-------|
| PAGE 7 | A(G): _____ | B(A): _____ | C(T): _____ | D(P): _____ | (X1) |
| TOTALS | _____ | _____ | _____ | _____ | _____ |

SECTION I: RELATIONSHIPS

- LVII. WHAT DO YOU FEEL IS MOST IMPORTANT IN A RELATIONSHIP?
- Nurturing one another.
 - A stable relationship, home base.
 - Variety, stimulation, interaction.
 - Companionship.
- LVIII. HOW DO YOU FEEL YOUR WORK RELATIONSHIPS SHOULD BE ORGANIZED >
- I like a sense of friendly teamwork with my co-workers.
 - I like friendly but competitive relationships at work.
 - It varies. I like to keep changing, sometimes work alone, then with others.
 - I'm an Ivory Tower sort of worker, like to keep a certain distance.
- LIX. HOW MANY CLOSE PERSONAL FRIENDS DO YOU LIKE TO HAVE?
- I need a lot of warm relationships to feel good.
 - I prefer a "crowd" of friends, all equally close.
 - I like to have lots of friends, and each one different.
 - Few, but I need deep intensity.
- LX. IN YOUR LOVE RELATIONSHIPS, HOW OFTEN DO YOU LIKE TO HAVE SEX?
- Every day.
 - Twice a week or so.
 - In spurts. A lot for a while, then not at all for a while.
 - Once a week or less.

SECTION J: FEMALES ONLY

- LXI. ARE YOUR OVARIES STILL ACTIVE? Yes No
- LXII. TAKING MEDICATION OR SUPPLEMENTS FOR HORMONE BALANCE? Yes No
- LXIII. ARE YOU POST-MENOPAUSAL OR HAD ONE OR MORE OVARY REMOVED?
- Yes, one ovary still working.
 - Yes, both ovaries removed.
 - Past menopause
 - No.

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BMA.FRM 2/8/96

| PAGE | A (Gonadal) | B (Adrenal) | C (Thyroid) | D (Pituitary) | Date: |
|------------|-------------|-------------|-------------|---------------|---------------|
| One | | | | | Ideal Weight: |
| Two | | | | | |
| Three | | | | | Dominate: |
| Four | | | | | Second: |
| Five | | | | | Third: |
| Six | | | | | Fourth: |
| Seven | | | | | |
| Eight (X1) | | | | | Date Cravings |
| TOTAL | | | | | Left: |