



# Stress Opinionnaire

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Instructions: 1. Print form. 2. Using Scores below, put your score in box to left of each question. 3. Add Total For All Answer Scores. 4) Put Total Score To The Right Of The Word "Stress" In the Title. 5) At The Bottom Of Form Put The Grand Total for all Stressors. 6) For Your Evaluation of this form, use the Passcodes on page one to open web page titled "Evaluation - Stress" at [www.AdvancedClinicalNutrition.com](http://www.AdvancedClinicalNutrition.com).

USER'S NAME: ur-stressors PASSWORD: stress-eval

## SCORE

- 0 Definitely not a factor.
- 1 Possibly a factor, but I do not think so.
- 2 Possibly a factor, I just do not know.
- 3 I think this could be a factor.
- 4 I feel that this is a significant factor.
- 5 I know that this is a key factor.

## Structural / Physical Stress = \_\_\_\_\_

- ☐ Physical Work Habits
- ☐ Inherited Weakness
- ☐ Rest Habits
- ☐ Joint Mobility/Weak Muscles
- ☐ Physically Abused (Past/Present)
- ☐ Postural Habits
- ☐ Exercise Habits
- ☐ Past Surgeries
- ☐ Past Injuries (auto, sports, etc.)
- ☐ Birth Trauma (Forceps Used To Deliver You, C-Section, Pre-mature, Mother Pregnant & On Drugs )

## Chemical Stress = \_\_\_\_\_

- ☐ Food Choices (Processed, Refined, Bleached, Enriched, Vitamin & Chemical Additives, Dyes, Colorings)
- ☐ Water (Drinking Tap or Filtered)
- ☐ Beverage Choices (Coffee, Black or Lipton Type Teas, Sodas, etc.)
- ☐ Eating Habits (Infrequent, Excessive, Insufficient Chewing, Drink Fluids with Solid Food)
- ☐ Inefficient Digestion (Gas, GERD, Bloating, Indigestion, Heartburn)
- ☐ Drugs (prescription, over counter or recreational)
- ☐ Alcohol Frequent Use or Abuse
- ☐ Smoking-Cigarettes, Cigars, Snuff
- ☐ Skin Exposures – (Chemicals or Vitamins Isolates in Make-Up and Skin Care Products, Dust, Glass, Chemical/ Metal/Gas Fumes, Smoke, Synthetic Fibers, Paint, Glue, Smoke, etc.)
- ☐ Air (See Skin Exposures for Examples)



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## Mental/Emotional/Spiritual Stress = \_\_\_\_\_

- ☐ Self Esteem (low), Negative Self-Talk
- ☐ Conflicts in Your Values or Rules you live by, Religious or Spiritual Beliefs
- ☐ Finances (Lack, Underpaid), Job or Business Insecure
- ☐ Mental or Emotional Conflicts – Verbal or Physical Abuse towards or From Others, OR Mental Challenges, such as Memory Loss, Inability to Concentrate, Focus, Brain Fog OR Emotional Anxieties, Fears, Phobias, Feelings Get Hurt Easily, Experience Envy, Jealousy.
- ☐ Unhappy Home Environment – Disorganize, Hygiene, Poor Relationships, Toxic People
- ☐ Assertive and Communication Skills – Poor, Weak, or inadequate
- ☐ Work Environment – Overwork, Bored or Dislike Duties, Co-Worker or Employer Conflicts, Feel Unappreciated or Not Valued
- ☐ Social Environment – Unhealthy, Lack of loyal, supportive friends who accept you as you are and keep your confidences.
- ☐ Relaxation and Re-Creation - Lack of or inability to relax, play, refresh energies, invest time in a "creative" activity or invest too much time in play and procrastinate on timely follow-through in responsibilities.
- ☐ Conflicts in Relationship with Extended Family (Parents, Grandparents, Siblings, In-Laws)

## Electro-Magnetic Field (EMF) Stress = \_\_\_\_\_

- ☐ Rarely Stand or Walk Bare Footed On Earth (in dirt or sand) for 5-15 minutes minimum. -
- ☐ Home, Office or Work Place Not Ventilated
- ☐ Lack of Indoor Air Purifiers
- ☐ Daily Exposure to Video Games, Computer Terminals, Television or Radios
- ☐ Daily Exposure to Air or Heating Units, Dishwashers, Washer/Dryers, Refrigerators.
- ☐ Overhead Lighting, including fluorescent lighting, Lamps, Electric Blankets, etc.
- ☐ Use or Near Microwaves.
- ☐ Live Near High Wires, TV or Radio Station Antennas, etc.
- ☐ Use Cell or Mobile Phones Daily.
- ☐ Wear Heavy Metal Jewelry or have metal implants (inside body).

**Grand Total \_\_\_\_\_**  
**(Total Score for each Stressor)**