



pH BALANCING – 7 Day Record

Dr. Donna F. Smith

NAME: _____

D A Y	Date	Time	URINE pH Number		URINE TEST RESULT ✓ AL or AC		SALIVA pH Number		SALIVA TEST RESULT ✓ AL or AC		Number of Teaspoons of	Number of Teaspoons of	COMMENTS
			A.M.	P.M.	AL	AC	A.M.	P.M.	AL	AC			
	00/00/00	00:00											
M													
T													
W													
Th													
F													
S													
Su													
S	01/01/14	06:45	6.2			✓		7.0					At 6:45 A.M. urine was acid and saliva was ideal (balanced pH).
S	01/01/14	04:30		6.5				7.8	✓				At 4:30 P.M. urine was ideal (balanced pH) and saliva was alkaline.

Ideal pH is 6.4 to 7.0 • Testing at the same time(s) daily provides the best results. • For A.M. test after at least 6 hours sleep; P.M. before 5 p.m.

DATE: MM/DD/YR • **TIME:** XX:XX Example: 6 a.m. is 06:00; 6:15 p.m. is 06:15 • **URINE OR SALIVA PH NUMBER** is the number on the pH paper.

TEST RESULT: ✓ row under AL Column for Alkaline pH Number (7.1 or over) Or under AC column for Acid pH Number (6.3 or below).

WHEN PH IS IDEAL (On or between 6.4.-7.0) Shade the row under both the AL and AC columns. • **S** = Samples of two rows recording for a.m. and p.m. tests.

TEASPOON COLUMNS: In the “Number of Teaspoons of” Columns, record the amount daily consumed for 1 or 2 recommended Supplements to help pH Balancing. **COMMENTS:** Any additional information to report.