Breathe Easy Bodywork

Specializing in soothing stress and its effects

Symptom Tracker

Name ______________________________________

Please list the health symptoms that trouble you below. Then assess their severity with the "check system". In the "Assessment 1" column, write today's date and rate each of your symptoms as to how they are currently, before you begin bodywork. We can then track your progress!

Rating System:

1 check = intermittent symptoms - not every day

2 checks = symptoms present part of most days or nights

3 checks = symptoms present all day *or* night

4 checks = symptoms present all day *and* night

Symptoms	Assessment 1 Date	Assessment 2 Date	Assessment 3 Date	Assessment 4 Date
Example - Sneezing	☑			