Seroctin Progress Chart

Fill out week #1 BEFORE beginning supplementation
Rate each symptom in the following manner:
0 = No Trouble
1 = Mildly Troublesome
2 = Moderately Troublesome
3 = Severely Troublesome

NEUROLOGICAL	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8
Stress								
Agitation								
Feeling Blue								
Excess Worry								
Phobias								
Panic Attacks								
Anxious/Nervous								
Irritibilitiy/Anger								
Impatience								
Hyperactive								
Indecisive								
Confusion								
Crying Spells								
Memory Lapse								
Lack of Focus								
Trouble Getting To Sleep								
Sleep Quality (REM)								
Difficulty Waking Up								
Tired Most Of The Time								
Lack of Endurance								
Loss Of Pleasure/Interest								
TOTAL SCORE								

CARDIOVASCULAR	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8
Chest Pain / Tightness								
Swelling (Feet, Legs, Hands)								
Cold Hands & Feet								
Sweaty Palms								
TOTAL SCORE								

GASTROINTESTINAL	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8
Heartburn								
Indigestion								
Acid Stomach								
Food Cravings								
TOTAL SCORE								

WOMEN ONLY	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8
Development or increase of conditions prior to menstration								
Loss Of Libido								
Headache								
Irritibility/Anger								
Depression								
Impatience								
Emotional Fatigue								
Physical Fatigue								
Angry Outbursts								
TOTAL SCORE								