

ACIDITY SELF TEST

Use this checklist to get a sense of how acidic you may be. Determining your acidity levels isn't an exact science but this Self-Test can help you get a better idea of **how urgently** you need to begin alkalizing your body.

The more symptoms, the more acidic you may be, and the more urgent it is for you to begin an alkalizing program.

BEGINNING SYMPTOMS

<input type="checkbox"/> Acne	<input type="checkbox"/> Hyperactivity	<input type="checkbox"/> Strong smelling urine
<input type="checkbox"/> Agitation, anxiety	<input type="checkbox"/> Panic attacks	<input type="checkbox"/> Mild headaches
<input type="checkbox"/> Muscular Pain	<input type="checkbox"/> Pre-menstrual and menstrual cramping	<input type="checkbox"/> Rapid panting breath
<input type="checkbox"/> Cold hands and feet	<input type="checkbox"/> Pre-menstrual anxiety and depression	<input type="checkbox"/> Rapid heartbeat
<input type="checkbox"/> Dizziness	<input type="checkbox"/> Lack of sex drive	<input type="checkbox"/> Irregular heartbeat
<input type="checkbox"/> Low energy	<input type="checkbox"/> Bloating	<input type="checkbox"/> White coated tongue
<input type="checkbox"/> Muscular and joint pains	<input type="checkbox"/> Heartburn	<input type="checkbox"/> Hard to get up in morning
<input type="checkbox"/> Food allergies	<input type="checkbox"/> Diarrhea	<input type="checkbox"/> Excess head mucous (stuffiness)
<input type="checkbox"/> Chemical sensitivities to odor, gas, heat	<input type="checkbox"/> Hot urine	<input type="checkbox"/> Metallic taste in mouth
<input type="checkbox"/> Constipation		<input type="checkbox"/> indigestion

INTERMEDIATE SYMPTOMS

<input type="checkbox"/> Cold sores	<input type="checkbox"/> Ear aches	<input type="checkbox"/> Urethritis
<input type="checkbox"/> Depression	<input type="checkbox"/> Hives	<input type="checkbox"/> Cystitis
<input type="checkbox"/> Loss of memory	<input type="checkbox"/> Swelling	<input type="checkbox"/> Urinary infection
<input type="checkbox"/> Loss of concentration	<input type="checkbox"/> Viral infections (cold, flu)	<input type="checkbox"/> Gastritis
<input type="checkbox"/> Migraine headaches	<input type="checkbox"/> Bacterial infections (staph, strep)	<input type="checkbox"/> Colitis
<input type="checkbox"/> Insomnia	<input type="checkbox"/> Fungal infections (Candida albicans, athlete's foot, vaginal)	<input type="checkbox"/> Excessive falling hair
<input type="checkbox"/> Disturbance in smell, taste, vision, hearing	<input type="checkbox"/> Impotence	<input type="checkbox"/> Psoriasis, eczema
<input type="checkbox"/> Asthma		<input type="checkbox"/> Endometriosis
<input type="checkbox"/> Bronchitis		<input type="checkbox"/> Numbness and swelling
<input type="checkbox"/> Hay fever		<input type="checkbox"/> Sinusitis
		<input type="checkbox"/> Dark circles under eyes

ADVANCED SYMPTOMS

<input type="checkbox"/> Crohn's disease	<input type="checkbox"/> Erythematosis	<input type="checkbox"/> Scleroderma
<input type="checkbox"/> Schizophrenia	<input type="checkbox"/> Multiple Sclerosis	<input type="checkbox"/> Leukemia
<input type="checkbox"/> Learning disabled	<input type="checkbox"/> Sarcoidosis	<input type="checkbox"/> Tuberculosis
<input type="checkbox"/> Hodgkin's disease	<input type="checkbox"/> Rheumatoid arthritis	<input type="checkbox"/> All forms of cancer
<input type="checkbox"/> Systemic lupus	<input type="checkbox"/> Myasthenia gravis	<input type="checkbox"/> Diabetes
<input type="checkbox"/> Osteoporosis	<input type="checkbox"/> Heart & circulatory disease	<input type="checkbox"/> Kidney diseases and stones in the liver or gall bladder
<input type="checkbox"/> Chronic digestive problems	<input type="checkbox"/> Eye diseases	