



INWA LLC SYMPTOM SURVEY

Symptom		Organ
<input type="checkbox"/> Heart Attack	CW	Circulatory Weakness
<input type="checkbox"/> Forgetfulness	C-NGW	Circulatory - Nerve/Glands Weakness
<input type="checkbox"/> Eye Irritation	CS	Circulatory Stress
<input type="checkbox"/> Fevers	CS	Circulatory Stress
<input type="checkbox"/> Gums -Sore	CS	Circulatory Stress
<input type="checkbox"/> Inflammation	CS	Circulatory Stress
<input type="checkbox"/> Mouth Sores	CS	Circulatory Stress
<input type="checkbox"/> Sore Throats	CS	Circulatory Stress
<input type="checkbox"/> Tonsillitis	CS	Circulatory Stress
<input type="checkbox"/> Absent Mindedness	CW	Circulatory Weakness
<input type="checkbox"/> Arteries - Hardening	CW	Circulatory Weakness
<input type="checkbox"/> Falling asleep while sitting	CW	Circulatory Weakness
<input type="checkbox"/> Feet Cold	CW	Circulatory Weakness
<input type="checkbox"/> Fingers - Numb	CW	Circulatory Weakness
<input type="checkbox"/> Hands Cold	CW	Circulatory Weakness
<input type="checkbox"/> Mind - Rigid	CW	Circulatory Weakness
<input type="checkbox"/> Stroke	CW	Circulatory Weakness
<input type="checkbox"/> Thinking - Inflexible	CW	Circulatory Weakness
<input type="checkbox"/> Toes - Numb	CW	Circulatory Weakness
<input type="checkbox"/> Wounds won't heal in extremities	CW	Circulatory Weakness
<input type="checkbox"/> Colitis	IS	Intestinal Stress
<input type="checkbox"/> Irritable Bowel Syndrome	IS	Intestinal Stress
<input type="checkbox"/> Stool - Watery	IS	Intestinal Stress
<input type="checkbox"/> Gas	IS-LW-SS	Intestinal Stress - Liver Weakness - Stressed Stomach
<input type="checkbox"/> Stool - Loose	IS-SS	Intestinal Stress - Stressed Stomach
<input type="checkbox"/> Allergies	IW	Intestinal Weakness
<input type="checkbox"/> Body Odor - Strong	IW	Intestinal Weakness
<input type="checkbox"/> Bowel Inflammation	IW	Intestinal Weakness
<input type="checkbox"/> Constipation	IW	Intestinal Weakness
<input type="checkbox"/> Diarrhea/Constipation alternating	IW	Intestinal Weakness
<input type="checkbox"/> Hay Fever	IW	Intestinal Weakness
<input type="checkbox"/> Hemorrhoids	IW	Intestinal Weakness
<input type="checkbox"/> Parasites	IW	Intestinal Weakness
<input type="checkbox"/> Respiratory Congestion	IW	Intestinal Weakness
<input type="checkbox"/> Skin Eruptions	IW	Intestinal Weakness
<input type="checkbox"/> Stools - Hard & Dry	IW	Intestinal Weakness
<input type="checkbox"/> Earaches	IW-CS	Intestinal Weakness / Circulatory Stress
<input type="checkbox"/> Backache	KS	Kidney Stress
<input type="checkbox"/> Bladder Infection	KS	Kidney Stress
<input type="checkbox"/> Fearful	KS	Kidney Stress
<input type="checkbox"/> Heavy Feeling	KS	Kidney Stress
<input type="checkbox"/> Indecisive	KS	Kidney Stress
<input type="checkbox"/> Leg Pains	KS	Kidney Stress
<input type="checkbox"/> Neck Pain	KS	Kidney Stress
<input type="checkbox"/> Prostate Problems	KS	Kidney Stress
<input type="checkbox"/> Shoulder Pain	KS	Kidney Stress
<input type="checkbox"/> Sluggishness - Late Afternoon	KS	Kidney Stress
<input type="checkbox"/> Timid	KS	Kidney Stress
<input type="checkbox"/> Uncertain	KS	Kidney Stress

<input type="checkbox"/> Urination - Burning	KS	Kidney Stress
<input type="checkbox"/> Wishy-Washy	KS	Kidney Stress
<input type="checkbox"/> Ankles Weakness	KW	Kidney Weakness
<input type="checkbox"/> Arthritis	KW	Kidney Weakness
<input type="checkbox"/> Attitudes - Hardened	KW	Kidney Weakness
<input type="checkbox"/> Back-Chronic Pain	KW	Kidney Weakness
<input type="checkbox"/> Bones - Brittle	KW	Kidney Weakness
<input type="checkbox"/> Change - Unable to adapt - Fear of Change	KW	Kidney Weakness
<input type="checkbox"/> Fracture	KW	Kidney Weakness
<input type="checkbox"/> Hips - One higher	KW	Kidney Weakness
<input type="checkbox"/> Impotence	KW	Kidney Weakness
<input type="checkbox"/> Inflexible	KW	Kidney Weakness
<input type="checkbox"/> Knees - Weakness	KW	Kidney Weakness
<input type="checkbox"/> Leg - Chronic Pain	KW	Kidney Weakness
<input type="checkbox"/> Osteoporosis	KW	Kidney Weakness
<input type="checkbox"/> Shoulders -One droops lower	KW	Kidney Weakness
<input type="checkbox"/> Spine - Curvature	KW	Kidney Weakness
<input type="checkbox"/> Stiffness	KW	Kidney Weakness
<input type="checkbox"/> Thinking Patterns - rigid & inflexible	KW	Kidney Weakness
<input type="checkbox"/> Anger & Defensiveness	LS	Liver Stress
<input type="checkbox"/> Cold hands & feet	LS	Liver Stress
<input type="checkbox"/> Flu-like symptoms	LS	Liver Stress
<input type="checkbox"/> Gall Bladder attack	LS	Liver Stress
<input type="checkbox"/> Migraine Headaches	LS	Liver Stress
<input type="checkbox"/> Muscles - Stiff & Aching	LS	Liver Stress
<input type="checkbox"/> Puffy Eyelids	LS	Liver Stress
<input type="checkbox"/> Rib Cage/right-Swelling/Tenderness underneath	LS	Liver Stress
<input type="checkbox"/> Skin Eruptions (acne/pimples/rashes)	LS	Liver Stress
<input type="checkbox"/> Sleep - Difficulty falling asleep/awakening in AM	LS	Liver Stress
<input type="checkbox"/> Diarrhea	LS-IS	Liver Stress / Intestinal Stress
<input type="checkbox"/> Headaches	LS-IW	Liver Stress / Intestinal Weakness
<input type="checkbox"/> Dizziness	LS-N/GS	Liver Stress / Nerve/Gland Stressed
<input type="checkbox"/> Nausea	LS-SS	Liver Stress / Stressed Stomach
<input type="checkbox"/> Bowels - Poor Elimination	LW	Liver Weakness
<input type="checkbox"/> Candida	LW	Liver Weakness
<input type="checkbox"/> Chronic Fatigue	LW	Liver Weakness
<input type="checkbox"/> Depression	LW	Liver Weakness
<input type="checkbox"/> Despair (what's the use)	LW	Liver Weakness
<input type="checkbox"/> Despondency	LW	Liver Weakness
<input type="checkbox"/> Fat Digestion - Poor	LW	Liver Weakness
<input type="checkbox"/> Food Allergies	LW	Liver Weakness
<input type="checkbox"/> Health Changeable	LW	Liver Weakness
<input type="checkbox"/> Hypochondriac feelings	LW	Liver Weakness
<input type="checkbox"/> Hypoglycemia	LW	Liver Weakness
<input type="checkbox"/> Immune Weakness	LW	Liver Weakness
<input type="checkbox"/> Indigestion	LW	Liver Weakness
<input type="checkbox"/> Liver spots on skin	LW	Liver Weakness
<input type="checkbox"/> PMS	LW-KS	Liver Weakness / Kidney Stress
<input type="checkbox"/> Adrenal Exhaustion	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Anxiety	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Body Temperature - Low	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Burned Out	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Circulation - Poor	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Convulsions	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Dreaming - Restless	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Enervation	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Excitability	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Fright	N/GW	Nerves/Glands Weakened

<input type="checkbox"/> Hands/Feet Cold	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> High Strung	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Insomnia	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Memory - Poor	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Mental Confusion	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Mental Diseases	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Nervous Exhaustion	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Nervousness	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Overactive	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Relaxing Difficulty	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Restlessness	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Sexual Drive - Lack of	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Skin - Dry	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Speak - Inability to speak clearly	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Speech Incoherent	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Thinking - Muddled	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Thyroid - Low function	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Tired	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Tossing & Turning at night	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Waking up frequently	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Weeping & laughing unreasonable	N/GW	Nerves/Glands Weakened
<input type="checkbox"/> Fatigue	R-K-N/GW	Respiratory -Kidney -Nerve/Glands Weakness
<input type="checkbox"/> Breathing - Shallow	RS	Respiratory Stress
<input type="checkbox"/> Cough	RS	Respiratory Stress
<input type="checkbox"/> Grieving Excessive	RS	Respiratory Stress
<input type="checkbox"/> Lymphatic Swelling	RS	Respiratory Stress
<input type="checkbox"/> Sadness - Excessive	RS	Respiratory Stress
<input type="checkbox"/> Sinus Congestion	RS	Respiratory Stress
<input type="checkbox"/> Wheezing	RS	Respiratory Stress
<input type="checkbox"/> Appetite - Poor	RW	Respiratory Weakness
<input type="checkbox"/> Asthma	RW	Respiratory Weakness
<input type="checkbox"/> Breath -Short of	RW	Respiratory Weakness
<input type="checkbox"/> Chest - Tension	RW	Respiratory Weakness
<input type="checkbox"/> Colds & Flu - Frequent	RW	Respiratory Weakness
<input type="checkbox"/> Emphysema	RW	Respiratory Weakness
<input type="checkbox"/> Feeble Speaking	RW	Respiratory Weakness
<input type="checkbox"/> Grief - Repressed or deep seated	RW	Respiratory Weakness
<input type="checkbox"/> Hardness of Heart	RW	Respiratory Weakness
<input type="checkbox"/> Inability to feel close to others	RW	Respiratory Weakness
<input type="checkbox"/> Lung -Chronic Infections	RW	Respiratory Weakness
<input type="checkbox"/> Pallor	RW	Respiratory Weakness
<input type="checkbox"/> Perspiration - Excessive	RW	Respiratory Weakness
<input type="checkbox"/> Belching	SS	Stressed Stomach
<input type="checkbox"/> Bloating	SS	Stressed Stomach
<input type="checkbox"/> Craving for junk foods	SS	Stressed Stomach
<input type="checkbox"/> Foul Breath	SS	Stressed Stomach
<input type="checkbox"/> Future fears	SS	Stressed Stomach
<input type="checkbox"/> Off-balance	SS	Stressed Stomach
<input type="checkbox"/> Sour Stomach	SS	Stressed Stomach
<input type="checkbox"/> Sugar cravings	SS	Stressed Stomach
<input type="checkbox"/> Upset	SS	Stressed Stomach
<input type="checkbox"/> Worry	SS	Stressed Stomach
<input type="checkbox"/> Chronic & Degenerative Diseases	WS	Weakened Stomach
<input type="checkbox"/> Clinging to the past	WS	Weakened Stomach
<input type="checkbox"/> Cold Limbs	WS	Weakened Stomach
<input type="checkbox"/> Cramping	WS	Weakened Stomach
<input type="checkbox"/> Difficult Swallowing Capsules	WS	Weakened Stomach
<input type="checkbox"/> Energy Loss	WS	Weakened Stomach

<input type="checkbox"/> Inability to gain/lose weight	WS	Weakened Stomach
<input type="checkbox"/> Lump in throat	WS	Weakened Stomach
<input type="checkbox"/> Muscle Tone - Poor	WS	Weakened Stomach
<input type="checkbox"/> Physical Development - Poor	WS	Weakened Stomach
<input type="checkbox"/> Physical Weakness/Long Term	WS	Weakened Stomach
<input type="checkbox"/> Repressed Anger	WS	Weakened Stomach
<input type="checkbox"/> Tension in Solar Plexus	WS	Weakened Stomach
<input type="checkbox"/> Thyroid overstimulated	WS	Weakened Stomach
<input type="checkbox"/> Unable to cope with new situations	WS	Weakened Stomach
<input type="checkbox"/> Weakness - General	WS	Weakened Stomach
<input type="checkbox"/> Worries & Fears - Deep Seated	WS	Weakened Stomach