Health Status Survey

My Name: _____ **Date**: _____

IMPORTANCE OF THIS DOCUMENT:

- Sometimes people's health improvements can be obvious and happen within days. Other times health improvements are gradual over a longer period of time.
- This survey acts as **a snapshot of your health every 3-months** so you will be able track and compare your health over time.

INSTRUCTIONS:

- Complete this survey with care, before you commence the LifeVantage products. Then file away in a safe place for later reference. Make a note in your calendar in 3-months time.
- Make sure you take your LifeVantage products daily as recommended.
- Then complete this survey again every 3-months.

MY CURRENT HEALTH STATUS ***(Below, circle your answers and write comments)***

1) THIS IS MY: Initial | 2nd | 3rd | 4th | 5th | 6th Health Status Survey

2) Do I have high levels of physical energy consistently throughout the day?

Never *Rarely* *Occasionally* *Regularly* *Consistently* *Always*

Comments:

3) Do I sleep well throughout the night and feel rested and fresh in the morning?

Never *Rarely* *Occasionally* *Regularly* *Consistently* *Always*

Comments:

4) Do I consistently have good focus, concentration and mental awareness?

Never *Rarely* *Occasionally* *Regularly* *Consistently* *Always*

Comments:

5) Do I suffer from headaches or migraines?

Never *Rarely* *Occasionally* *Regularly* *Consistently* *Always*

Comments:

6) Does my skin look healthy? *(good texture, smooth, moist, good elasticity)*

Never *Rarely* *Occasionally* *Regularly* *Consistently* *Always*

Comments:

7) **Do I have any specific problems or pain within my body?** *(joints, stomach, eyes, feet, etc)*

Never *Rarely* *Occasionally* *Regularly* *Consistently* *Always*

Comments:

8) Do I have daily and easy bowel movements?

Never *Rarely* *Occasionally* *Regularly* *Consistently* *Always*

Comments:

9) How often have I experienced Cold's and Flu's in the past 12 months?

Never *Rarely* *Occasionally* *Regularly* *Consistently* *Always*

Comments:

10) In considering my overall health and vitality do I feel fit, calm and well?

Never *Rarely* *Occasionally* *Regularly* *Consistently* *Always*

Comments:

11) Approximately what is my current weight? What is my ideal weight range?

Current weight: Ideal weight range:

12) Any other comments I want to record about my current health?

Comments:

13) Is there an area of my health I would like to improve over the next year?

Comments:

14) Why is it important to me that I achieve these improvements?

Comments:

15) What is my plan to achieve my health improvements?

e.g. Use LifeVantage products daily. Eat more fruit and veggies daily. Eat less junk food. Exercise regularly etc.

Comments:

MY USAGE OF LIFEVANTAGE PRODUCTS

If applicable, record the LifeVantage products you've been using.

Product Name	Did I use the products Daily? Comments.
Protandim Nrf2 Synergizer *(the core product)*	
Protandim Nrf1 Synergizer	
ProBio	
Omega+	

"…Nrf2 which may well become the most extraordinary therapeutic and most extraordinary preventive breakthrough in the history of medicine. It is our opinion that raising Nrf2 is likely to be the most important health promoting approach into the foreseeable future."

- Washington State University (page 11)

FYI - Some of The Many Scientific Papers on Our Products and Nrf2 Activation

- Protandim reduces Oxidative Stress by 40% after 30 days: https://pubmed.ncbi.nlm.nih.gov/16413416/
- Nrf2, a Guardian of Healthspan and Gatekeeper of Species Longevity: https://pubmed.ncbi.nlm.nih.gov/21031035/
- Nrf2, a Master Regulator of Detoxification: https://pubmed.ncbi.nlm.nih.gov/25672622/