



## Health history for hair test 727

First let me say I am very grateful for the FDC e-list and all of the wonderful support being offered. I have attached my hair analysis and below are answers to the questions found in the files section of the yahoo group.

### 1) What are your current symptoms and health history?

Current symptoms are exhaustion, and severe brain fog, joint and soft tissue pain, inability to exercise due to extreme stiffness and pain even after a mild exercise with no sweat. Cannot do cardio without extreme pain. I have a history of lyme disease - have been infected at least twice and was undiagnosed for about 20 yrs the first time resulting in complete vision loss in right eye, and misdiagnosis of MS, fibromyalgia, lupus and nonspecific autoimmune. I finally got a lyme test through Igenex and started alternative treatments and fully recovered my vision and gut and felt great until about 7 yrs ago I was bitten again and took abx and took homeopathics. Nov 2010 I fell in my kitchen and injured my thorascic area - soft tissue but was incapacitated for several weeks and this seemed to re-activate lyme symptoms of exhaustion and aching joints and soft tissue.

2) Dental history (wisdom teeth removed?**never had any** First root canal placed? **none** Braces? **none** First amalgam etc...) **was in high school before I had any cavities but got several.**

3) What dental work do you currently have in place? **all metal fillings removed in 2005 by holistic dentist with compatability testing and oral chelation for two years after that.** What part of the dental cleanup have you completed?

4) What dentistry did your mother have at any time before or during pregnancy?**unknown**

5) What vaccinations have you had and when (including flu and especially travel shots)? **many - everything required for a baby of the 1950's.**

6) Supplements and medications (including dosages) taken at time of hair test, or for the 3-6 months before the sample was taken. **I stopped supplements for 3 weeks prior to testing (I know that's not much)**

7) Other information you feel may be relevant?

8) What is your location - city & country (so that we can learn where certain toxins are more prevalent). **I live in NYC and am very sensitive to EMFs and have lots of protectors on my phones and electronic devices. I spend plenty of time in tick-laden areas but have been extremely vigilant of tick checking.**

Once he has given you your unique hair test number please forward the above questions through to the Frequent Dose Chelation group, inform them of your hair test number and ask