Insufficient Stomach Acid Self-Test

Instructions: Circle the number that best describes the intensity of your symptoms. If you do not know the answer circle (0).

(0) rarely or never (1) mildly or less than twice a week

(2) moderately or three to six times per week (3) strongly or daily

A "sour, achy and sore" stomach	0	1	2	3
Gas immediately following a meal	0	1	2	3
Abdominal distention during and after eating	0	1	2	3
Excessive burping	0	1	2	3
A poor appetite	0	1	2	3
Easily turned off from eating	0	1	2	3
Bad breath	0	1	2	3
Poor sense of taste	0	1	2	3
Poor sense of smell	0	1	2	3
Discomfort swallowing large amounts	0	1	2	3
Sluggish bowel movements	0	1	2	3
Becoming unusually picky about food	0	1	2	3
Recent unexpected weight loss	0	1	2	3
Diagnosis of anemia	No (0)		Yes (10)	

Total:_____ Low: 0 - 10 Moderate: 11 - 20 High: over 20

Excess Stomach Acid Self Test

Instructions: Circle the number that best describes the intensity of your symptoms. If you do not know the answer to the question circle (0).

(0) rarely or never (1) mildly or less than twice a week

(2) moderately (3) strongly or daily

A burning and aching stomach pain, worse 1-4 hours after eating	0	1	2	3
Sensation of hunger one to two hours after a meal	0	1	2	3
Stress and thoughts of food worsen stomach pain	0	1	2	3
Acid reflux (heartburn), especially when bending over or lying down	0	1	2	3
Heartburn that is worse with spicy and fatty food	0	1	2	3
Heartburn that is worse with alcohol and/or caffeine	0	1	2	3
Heartburn that is worse with sugar, chocolate or citrus fruits and juices	0	1	2	3
Heartburn that is temporarily relieved with consumption of milk, carbonated beverages, starchy food or antacids	0	1	2	3
Heartburn that improves with times of rest and relaxation	0	1	2	3
Discomfort when swallowing	0	1	2	3
Chest pain, shortness of breath or tendency to respiratory infections	0	1	2	3
Tendency to constipation	0	1	2	3
Stools that become black and pasty	0	1	2	3
Unexpected weight gain	0	1	2	3

Total:_____ Low: 0 - 12 Moderate: 13 - 24 High: over 25