External Invasion Symptom Questionnaire

External Invasion Symptom Questionnaire

Describe Your Symptoms

Onset of Symptoms

Sweated Since the Onset
- Yes
- No

Did you have a fever?
- Yes
- No

Do you have a fever now?
- Yes
- No

Subjectively Feel Chills, Warm, C
- Chill
- W
- Cold

Cough
- Yes
- No

Phlegm
- None
- Yellow/Green/Brown
- Clear/White

Runny Nose
- Yes
- No

Mucus
- None
- Yellow/Green/Brown
- Clear/White

Sore throat
- Yes
- No

Thirsty
- Yes
- No

Nasal congestion
- Yes
- No

Headache/Body Ache
- Yes
- No

Extreme fatigue
- Yes
- No

On your Period (Women)
- Yes
- No

First Day of Last or Current Period (Women)