

Wired Life Solutions Center
Questionnaire 1

		Indicate the level of occurrence of these symptoms you are currently suffering or have suffered in the past					Did you recognize this as possibly computer use related		Did you seek Medical help	
Symptoms		Yes Always	Yes Sometimes	No	Not Sure	Can't Remember	Yes	No	Yes	No
A. Behavioral and Organ function effects of Nutritional and Biochemical deficiencies										
A	Behavioral Symptoms									
1	Feeling depressed and harassed during or after computer use									
2	Feeling of being overwhelmed, by all you need to do on the computer									
3	Feeling of abandonment even when others show love or kindness it never seems enough and you feel resentful									

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4	Difficulty communicating with loved ones after computer use									
5	Feeling on edge i.e. unable to relax and wind down									
6	Inability to function and establish relationships without a computer connection									
7	Feeling overwhelmed by conversations with family and friends that used to feel normal i.e. inability to handle normal conversation with family and friends									
8	Compulsive desire for computer use as a way of escape from loneliness even when others around (computer addiction)									
9	Excessive concentration during computer use which you realize fully only after computer use									
10	Memory loss after computer use									
11	Short attention span									
12	Speech problem during or after computer use ie. Difficulty in arranging words in correct order which may make you afraid you may be losing it									
13	Difficulty comprehending what others are saying									
14	Disorientation during or after computer use									
15	Inability to differentiate reality from virtual experience									
16	Impatience, getting easily upset									

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17	Inability to handle noise and even small talk sometimes									
18	Always hungry when using the computer									
19	Feeling of dizziness or breathlessness during or after computer use									
20	Feeling of boredom when not on computer									
21	Feeling the flow of electromagnetic fields from the computer screen.									
B	Organ function Related Symptoms									
1	Allergies and asthma symptoms exacerbated by or commencing during computer use									
2	Panic attacks									
3	Dry Eyes and Double vision									
4	Feeling excessively thirsty when in front of the computer									
6	Lung murmurs with no history of asthma or other respiratory problems									
7	Digestive problems and constipation									
9	Rapid breathing when using or after using the computer									
10	Static in the fingers									

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11	Problem with computer glare									
C	Muscleloskeletal effect of Nutritional and Biochemical deficiency									
1	Eye pain that is not corrected by glasses and other normal treatment									
2	Stress headache at the sides, back, top and front of the head									
3	Pain in neck, upper back, arms right to the fingers.									

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SELF SCORE SHEET

Name _____

Occupation/Position _____

Organization _____

	Categorize level of computer use	Daily	Week ly	Not Sure	Never	Score
A	At Work					
1	Very Intensive Computer Use - more than 5 aggregate hours					4
3	Intensive Computer Use - 2 to 4 aggregate hours					3
4	Moderate Computer use - 1 to 2 aggregate hours					2
5	Low Computer use - Less than an aggregate of 1 hour					1
6	No Computer use					0

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B	At Home					
1	Very Intensive Computer Use - more than 5 aggregate hours					4
2	Intensive Computer Use - 2 to 4 aggregate hours					3
3	Moderate Computer use - 1 to 2 aggregate hours					2
4	Low Computer use - Less than an aggregate of 1 hour					2
5	No Computer use					0

Total score

Driven computer user	8
Very High exposure	6 to 8
High exposure	3 to 5
High to Low Exposure	1 to 3
Low to mild Exposure	1
No computer related issues	0 to 0

Look at your score and link it with the symptoms above.