

Visit 1 Date <u>6-14-18</u>		Interim / Final Analysis Date <u>8-9-18</u>		Interim / Final Analysis Date <u>9-6-18</u>	
Condition(s) Reported on Visit 1	% + Better - Worse	Describe Specific Changes: Quantify Frequency and Severity	% + Better - Worse	Describe Specific Changes: Quantify Frequency and Severity	
Eg. 8 out of 10 headache, 2x a Day or Eg. 3 out of 10 low back pain daily	+70%	Now: 2 out of 10 headache, 1x a week	+90%	Now: 1 out of 10 headache, 1x a month	
	-30%	Now: 5 out of 10 low back pain daily	-10%	Now: 4 out of 10 low back pain occasionally	
Low Back Pain (Constant)	+50%	Significantly decreased. - pain after standing/sitting for long periods	+60%	pain after walking, standing, or sitting for long periods less pain while running	80
Hip Pain (Achy/Sharp)	+50%	decreased, only experience if I over exert	+80%	occurs less frequent only after strenuous activity	90
Right arm tingling/numb	+20%	still experiencing while riding bike	+40%	occurs less frequently	100
Left groin Pain	+50%		100%	no groin pain after recent workouts or runs	100
Heavier periods	+70%	lighter flow, fewer days	+90%	lighter, fewer days	100
reflux every few days	+80%	decreased	100%	haven't noticed any reflux	100
ringing in ears	0		+10%	occurs less frequently	80
Fatigue	70%	More energy throughout day	+80%	experiencing more energy able to resume some workouts	80
Depression	70%	decreased, less stress	+80%	Decreased, less stress Able to be more social and leave home more often	80
Constipation	100%		100%		100