

Interpreting the Hypothyroid Risk Questionnaire™

The Hypothyroid Risk Questionnaire™ compares the probability that a person will have hypothyroidism at some point in their lifetime with the number of symptoms that are associated with hypothyroidism.

This will give you a very good idea of **the probability that you have low thyroid function now.**

The “**Symptoms**” section provides a numerical value for the quantity of symptoms that have been associated with decreased thyroid function. Once you multiply the **Total for A times 2**, you will know the probability that you have hypothyroidism based on symptoms.

For example: If you have 30 symptoms, and multiply the **Total for A times 2**, you will see that there is a 60% probability that you have hypothyroidism based on symptoms using this questionnaire.

Since many of the general symptoms can also be caused by other conditions, even if someone scored 50 in the “Symptoms” section there is still only a 50% chance that they have hypothyroidism if the risks are low.

The “**Risks**” sections provides a numerical value for quantity of risks that have been associated with decreased thyroid function. Section B is multiplied by 10, and Section C is multiplied by 5. They are then added together to provide total possible risks. Since each pregnancy increases hypothyroid risk by 5%, women may score higher than 100 in this section.

Write your **Symptom Score (S)** Here: _____

Write your **Risk Score (R)** Here: _____

What is the probability that you have low thyroid function now?

Use the chart below to determine if you are probably hypothyroid, or if you have a medium or low probability of being hypothyroid.

The < symbol means “Less Than”.

The > symbol means “Greater Than”.

Example: If **S** Score is greater than 30, and **R** Score is less than 20, there is a medium probability that you are now hypothyroid.

	R<20	R> 20 & < 30	R>30
S<20	Very Low Probability	Low Probability	Medium Probability
S>20 & <30	Low Probability	Medium Probability	High Probability
S> 30	Medium Probability	High Probability	Very High Probability

How do you Achieve Optimal Hormone Health?

The first step towards any kind of hormone health is always a healthy diet that is made up of fruits and vegetables, whole grains (ideally gluten free), fish, poultry and low fat meats.

Avoid eating excessive amounts of **uncooked** Brussel sprouts, kale, broccoli, cabbage, cauliflower, kohlrabi, millet, radishes, rutabagas, soy or turnips. Excessive amounts of these raw foods can interfere with thyroid function. Three servings a week or less of raw is okay. They may be eaten daily if they are cooked.

Avoid iodine supplements over 1,000 mcg (1 mg). More than 1,000 mcg can cause thyroid irritation and may result in autoimmune thyroid disease.

Monitor thyroid hormone lab tests properly. An ideal test should include at least Free T3, Free T4 & TSH. The anti-TPO and anti-TG antibody tests should be done once a year, especially in women. The Reverse T3 test should also be added if there are many, or severe symptoms, especially if T3 or T4 are low or low normal range.

Women should monitor all thyroid hormones, including the antibodies during pregnancy as well as 3 and 6 months after pregnancy.

ThyroMend™ is a *Hormone Specific Formulation™* which improves the seven important thyroid actions. It is specifically designed for people with low thyroid function (hypothyroidism), and people who are at risk for low thyroid function.



Only **ThyroMend™** is able to safely and effectively:

- {1} increase bio-available iodine for the thyroid cells,
- {2} increase iodine uptake by thyroid cells through interactions with sodium-iodide-symporter (NIS) proteins
- {3} increase T3 & T4 production and secretion from thyroid cells
- {4} increase conversion of thyroxine (T4) to the more bioactive triiodothyronine (T3),
- {5} increase the RXR/TR heterodimerization of thyroid receptors on target cells throughout the body,
- {6} increase binding of thyroid hormone receptors to DNA by RXR/TR heterodimers throughout the body &
- {7} increased effect of T3 on target gene expression within receptor cells throughout the body.

Please see YourHormones.com/ThyroMend/ for more information, or contact your healthcare professional.

Fatigue
Hair Loss
Brain Fog
Slow Pulse
Depression

Do

Weight Gain
Poor Memory
Slow Thinking
Low Sex Drive
Sensitive to Cold
Changes in Sleep

You

Moody & Irritable
Difficulty Thinking
Cold Hands & Feet
Hard to Concentrate
Low Blood Pressure
Less than 1 BM Daily
Low Body Temperature

Have

Pasty, Puffy or Pale Skin
Poor Short Term Memory
Dizziness or Poor Balance
Teeth Imprints on Tongue
Dry Skin, Worse in Winter
Hand & Feet Numbness
Outer Eyebrow Thinning

Low

Yellow Palms & Soles
Joint Stiffness & Pain
Recurrent Headaches
Decreased Body Hair
Elevated Cholesterol
Decreased Sweating

Thyroid

Recurring Infections
Thinning Eyelashes
Nasal Congestion
Bags under Eyes
Enlarged Tongue
Fluid Retention

Function?

Muscle Aches
Hoarse Voice
Bloated Face
Sleep Apnea

**your
hormones**

YourHormones.com/ThyroMend/

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Hypothyroid Risk Questionnaire™

Hypothyroidism (low thyroid function) can affect your entire body, so the symptoms associated with hypothyroidism can be very diverse.

However, many of the general symptoms in this questionnaire can also be caused by other conditions, so it is important to know a few things about personal and family medical history in order to assess if there is a higher probability of low thyroid function.

The Hypothyroid Risk Questionnaire™ is not used to diagnose hypothyroidism. However, the questionnaire can be used to assess risk of hypothyroidism, and to track improvement in symptoms if a thyroid condition is being treated. A diagnosis requires lab tests and interpretation by a licensed healthcare professional.

How the Hypothyroid Risk Questionnaire™ works

The Hypothyroid Risk Questionnaire™ is an advanced tool that correlates symptoms (**S**) with risks (**R**).

Section "A" is used to count the number of symptoms (**S**) associated with low thyroid function.

Sections "B" and "C" are used to compile information on the risks (**R**) associated with low thyroid function.

Filling Out the Hypothyroid Risk Questionnaire™

- Place a check next to any symptom you experience.
- Place a check next to any risks that you may have based on health history, diet and lifestyle history, family history, and gender specific questions.
- Calculate your Symptom Score and Risk Score, then see other side for interpretation.

About the Hypothyroid Risk Questionnaire™

Developed by Joseph J Collins, RN, ND, a pioneer in functional endocrinology, and in the correlation analysis of clinical data. Joseph J. Collins, RN, ND is licensed as a Naturopathic Physician by the state of Washington, and licensed as an RN by the State of Florida. He is CEO and founder of Your Hormones, Inc.

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Hypothyroid Risk Questionnaire™



Section A Symptoms

- 1. Fatigue or Tired
- 2. Exhausted
- 3. Difficulty Doing Everyday Activities
- 4. Everything Takes Longer to Do
- 5. Low Body Temperature
- 5. Weight Gain
- 7. Cannot Lose Weight with Diet & Exercise
- 8. Difficulty Remembering
- 9. Difficulty Concentrating
- 10. Slow or Unclear Thinking
- 11. Difficulty Learning Something New
- 12. Feeling Depressed
- 13. Feeling Discouraged
- 14. Moody & Irritable
- 15. Decreased Motivation
- 16. Low Sex Drive
- 17. Decreased Sexual Activity
- 18. Changes in Sleep
- 19. Outer Eyebrow Thinning
- 20. Hair is Coarse and Dry
- 21. Skin is Coarse, Dry or Scaly
- 22. Itchy Skin
- 23. Sensitive to Cold, Cold Intolerance
- 24. Cold Hands & Feet
- 25. Decreased Sweating
- 26. Slow Pulse
- 27. Low Blood Pressure
- 28. Dizziness or Poor Balance
- 29. Feel Lightheaded
- 30. Less than 1 BM Daily
- 31. Constipation, Straining
- 32. Fluid Retention
- 33. Puffy Hands
- 34. Puffy feet
- 35. Puffy Face
- 36. Bags under Eyes
- 37. Pasty, Puffy or Pale Skin
- 38. Yellow Palms & Soles
- 39. Enlarged Tongue
- 40. Teeth Imprints on Tongue
- 41. Thinning Eyelashes
- 42. Recurring Infections
- 43. Nasal Congestion
- 44. Hand & Feet Numbness
- 45. Change in Voice
- 46. Joint Stiffness & Pain
- 47. Muscle Aches
- 48. Muscle Weakness
- 49. Hearing Problems
- 50. Recurrent Headaches

Total for A: _____ This is your Total Symptom Score

Section B Risks

Health History

- 1. Do you have **any** auto-immune disease such as lupus, rheumatoid arthritis or sarcoidosis?
- 2. Have you **ever** been treated for **any** type of thyroid disease or thyroid condition?
- 3. Do you have elevated Cholesterol?
- 4. Do you **ever** taken thyroid medication or thyroid glandulars?
- 5. Have you **ever** been on lithium or amiodarone?

Total for Section B: _____

Section C More Risks

Diet & Lifestyle History

- 1. Have you **ever** smoked or used tobacco?
- 2. Have you **ever** taken iodine supplements with more than 1,000 mcg (1 mg) of iodine?
- 3. Do you avoid eating **ALL** of these foods: salt, seafood, dairy and seaweed?
- 4. Do you **daily** eat **raw** Brussel sprouts, broccoli, cabbage, cauliflower, kale, kohlrabi, millet, radishes, rutabagas, soy or turnips?

Family History (Genetically related parents, grandparents, siblings, cousins, aunts and uncles.)

- 5. Has any family member had auto-immune disease Lupus, Rheumatoid Arthritis, etc.)?
- 6. Has a family member had thyroid disease?

Men Only

- 1. Have you ever had erectile Dysfunction?
- 2. Have you ever had infertility or low sperm count?
- 3. Have you ever had gynecomastia (increased breast tissue growth)?
- 4. Are you 50 years of age or older?

Women Only

- 1. Have you had PMS, PMDD, or PCOS?
- 2. Have you had excessive Menstrual Bleeding?
- 3. Have you ever had a miscarriage?
- 4. Are you 40 years of age or older?

Pregnancy

How many times have you been pregnant? _____

Total for Section C: _____
(Women - add number of pregnancies with this number)

- 1) Multiply Section B Total by 10. B X 10 = _____
 - 2) Multiply Section C Total by 5. C X 5 = _____
- Add Line 1) and Line 2) together.

Line 1) + Line 2) = _____ This is your Risk Score

See other side for interpretation.

For more information go to: yourhormones.com