

FINDING HEALTH

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Medical Practitioner (MBChB-Uct), Certified Ozone Practitioner
Biofeedback Practitioner, Eastern Medicine (EM), Finding Health 2 (FH2)
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Colon & Digestive ASSESSMENT

This questionnaire allows you check how well your colon and digestive system is functioning.

Place a tick in the column if you suffer from any of the below.

Count the ticks(COLON SCORE) and grade your need for a colon cleanse.

Do you have digestive issues like constipation, diarrhea, gas, bloating, burping , heartburn, acid reflux or abdominal discomfort?	
Do you have gas, bloating or other digestive issues once or more per week?	
Do you have irregular bowel movements?	
D you have less than 1 bowel movement per day?	
Do you experience bad breath or bad taste in the mouth unrelated to food?	
Do you have streaks, lines or white marks on your fingernails?	
Do you have a white coating on your tongue?	
Do you struggle with fatigue or low energy?	
Have you taken antibiotics in the last 2 years?	
Do you drink alcohol or coffee?	
Do you drink Cold drinks(eg.Coke), sports drinks(eg. Energade) or Packaged fruit juices?	
Do you crave sweets, chocolates or starchy bread?	
Do you eat junk food (things like chips, biscuits, sweets, chocolates or fast food)?	
Do you eat in a hurry?	
Do you drink water with your meals?	
Do you have high stress levels and/or severe anxiety?	
Are you considered to be overweight ?	
Do you gain or lose weight easily?	
Do you have a protruding belly?	
Are you considered to be underweight ?	
Do you have joint pain, stiffness or arthritis?	
Do you suffer from skin conditions itchy/dry skin, rashes, eczema, acne, hives or psoriasis?	
Do you have a very busy life?	
Do you suffer from any type of pain , muscle cramps or headaches?	
Do you have frequent diarrhea or loose stools?	
Do you get sick often (2+ times per year) or feel like you need an immune system boost?	
Do you struggle with seasonal allergies (hayfever, sinusitis)?	
Are you currently taking any medications or aspirin/ibuprofen?	
Have you ever struggled with any type of candida, yeast or fungal issues?	
Do you struggle with parasites, worms?	
Do you have foot or nail fungus?	
Are your stress levels moderate to high?	
Do you have multiple foods sensitivities, intolerances or food allergies (ex: gluten or dairy)?	
Do you have any autoimmune disease? (ex. Arthritis, Hashimoto's, MS, Psoriasis)	
Do you have thyroid issues or sluggish metabolism?	
Do you struggle with depression, anxiety, lack of focus or concentration difficulties?	

Do you struggle with mood swings and irritability?	
Have you been diagnosed with any Digestive or Colon Disease(eg. IBS, Polyps, Diverticulosis, Crohns Disease, Colon Cancer)	
Have you been diagnosed with any other chronic disease or ailment?	
Do you have problems sleeping?	
Do you feel like you are aging faster than you should be?	
✓ TOTAL SCORE (Count the Ticks)	

COLON SCORE
25 + : Severe Require to do: 5 x (5 DAY COLOTOX) cleanses, one after the other, with 2 days break in between. Score Indicates more severe issues in the digestive system that require attention, and if left un-attended, disease processes will lead to continuous and recurrent ill-health. Treatment requires atleast a month of colon cleansing. Additionally, you will benefit by following a detoxification program of cleansing the liver and kidneys. A parasite and candida cleanse will be a must.
15-25: Moderate Require to do: 3 x (5 DAY COLOTOX) cleanses, one after the other, with 2 days break in between. Indicates moderate issues in the digestive system that require attention which requires atleast 2 to 3 weeks of colon cleansing.
< 15 : Mild Require to do: 1 x (5 DAY COLOTOX)cleanse atleast once a year for optimal health.

IMPORTANT:

1. All those who suffer from the following will be in the category of SEVERE and will require 5 COLOTOX cleanses one after the other with the additional liver, parasite and candida cleanse.

- Chronic constipation
- Any chronic disease (eg. Diabetes , Arthritis , Cholesterol, strokes etc.)
- Any Auto-immune condition(eg. Thyroiditis, Arthritis, Lupus, Multiple sclerosis etc.)
- Any Digestive or Colon Disease(eg. Leaky Gut Syndrome, Polyps, Diverticulosis, Crohns Disease, Colon Cancer, gallstones)
- All cancers
- Parasite and Candida issues
- Overweight or underweight by more than 15 kg

2. Those that have active, overactive, irritated bowels or those with bowels that move too often, (more than 4 times a day.) This includes those with Colitis, Irritable Bowel Syndrome, Crohn's Disease, etc. will skip COLOTOX 1 capsules and go directly to COLOTOX 2 Powder as a chronic treatment.

TESTIMONIAL: Really helped Detox my body. I have used the colotox 1 everyday and have done the 5 day course and feel so much better. Has definitely worked wonders for me. Thanks Doc. (S.Badat)



**THE ROAD TO HEALTH BEGINS WITH COLON CLEANSING !
- NO MATTER WHAT THE DISEASE OR HEALTH ISSUE -
GET COLOTOX AND CLEANSE YOUR BOWELS TODAY !
EXPERIENCE OVERALL WELL BEING !!**

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