



Dear Valued Customer:

Take a minute to fill out this Silica test.

If you score 5 points or more...

YOU JUST MAY NEED SILICA!

Do you have arthritis or other joint problems?	YES___ (1 pt.)	NO___ (0 pt.)
Do you frequently experience sore muscles and spasms?	YES___ (1 pt.)	NO___ (0 pt.)
Does your skin feel dry?	YES___ (1 pt.)	NO___ (0 pt.)
Do you have acne?	YES___ (1 pt.)	NO___ (0 pt.)
Do you have eczema?	YES___ (1 pt.)	NO___ (0 pt.)
Does your skin feel creepy?	YES___ (1 pt.)	NO___ (0 pt.)
Are you experiencing hair loss or thinning?	YES___ (1 pt.)	NO___ (0 pt.)
Do you have splitting and or brittle nails?	YES___ (1 pt.)	NO___ (0 pt.)
Do you have hardening of the arteries or high blood pressure?	YES___ (1 pt.)	NO___ (0 pt.)
Do you experience frequent bone fractures?	YES___ (1 pt.)	NO___ (0 pt.)
Do you suffer from heartburn and or acid reflux?	YES___ (1 pt.)	NO___ (0 pt.)
Do you experience occasional vertigo?	YES___ (1 pt.)	NO___ (0 pt.)
Do you have bleeding gums?	YES___ (1 pt.)	NO___ (0 pt.)
Do you have periodontal gum loss?	YES___ (1 pt.)	NO___ (0 pt.)
Do you have bone spurs?	YES___ (1 pt.)	NO___ (0 pt.)
Do you have kidney stones?	YES___ (1 pt.)	NO___ (0 pt.)

The material in this questionnaire is not intended as medical advice. Its content is solely informational and educational.

Please consult a physician should the need for one be indicated.