

Stress Tracking Sheet

Week # _____

Action	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Level of anger/ irritability (1-10)							
Level of stress (1-10)							
Stress Trigger: Negative thoughts, negative people, negative environment etc.							
What did you do to relieve your stress?							
Did it help?							
Any joint/body pain?							
Any Digestive symptoms?							
Other symptoms							

Functional Medicine is a personalized approach to identification of the root cause of disease and empowerment of individuals to heal themselves.

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