



Please answer the following questions. The answers will help us ensure you obtain what you want from any session and subsequent programme. Then please send it by e-mail to : gregory@creatingharmonyinyourlife.com. All information will be treated in the strictest confidence.

The Breakthrough to Harmony process will help you to answer the signals from your body, so permanently end your persistent, repetitive or recurrent discomfort. The process is not for everybody. It is only for you if you want to end once and for all any aches, pain, burning, tingling, limitation, numbness, and/or weakness. Always visit a licensed medical doctor to rule out organic disease, and let your doctor know you are using the Breakthrough to Harmony process.

The following will help you determine if you can use the Breakthrough to Harmony process to transform the dis-harmony in your body. Now complete the following to total your points, then you will know if you can use the Breakthrough to Harmony process to transform the dis-harmony in your own body.

Notes for answering questions

- Answer openly and honestly and write whatever comes into your mind no matter how irrelevant it may seem at that moment.
- The first answer that comes to mind is usually the best one.
- Complete and send to: gregory@creatingharmonyinyourlife.com.



Creating *Harmony* in Your Life

Questions:

1. Have you experienced any of the following?
 - A. Aches, pain, tingling, burning, limitation, numbness or weakness for more than six weeks.
 - B. Discomfort has returned to the area of the old 'injury'.
 - C. Your pain comes and goes over time.
 - D. Your pain level fluctuates over time.

Yes _____ 5 points, or
No _____ 0 points

2. Does your level or frequency of pain change during times of higher stress, tension or emotion?

Always/Almost always _____ 5 points, or
Sometimes _____ 3 points, or
Never _____ 0 points

3. Does the location of your pain move - even slightly?

Frequently _____ 5 points, or
Sometimes _____ 3 points, or
Never _____ 0 points

4. Do you have any of the following personality traits? Do you tend to be:
 - A. Perfectionist
 - B. Very dependable
 - C. Spiritual or religious
 - D. A helper, giver or do-gooder
 - E. A people pleaser
 - F. Controlling (do be honest)
 - G. Sensitive to criticism
 - H. Somewhat compulsive

Four or more of these characteristics _____ 5 points, or
One to three of these characteristics _____ 3 points, or
None of these characteristics _____ 0 points

5. Do you have any history of gastrointestinal or tension related issues such as:
 - A. Irritable Bowel Syndrome
 - B. Constipation
 - C. Ulcer
 - D. Candida
 - E. Gastritis
 - F. Acid reflux
 - G. Tension or migraine headaches
 - H. Hives
 - I. Eczema
 - J. Any other tension related issues?

Two or more of these _____ 5 points, or
One of these _____ 3 points, or
None of these _____ 0 points



Creating *Harmony* in Your Life

6. Have you tried and had limited, temporary or no success with methods of managing your pain? Such as:
- A. Surgery
 - B. Prescription or Over the Counter drugs
 - C. Physical therapy
 - D. Acupuncture
 - E. Chiropractic
 - F. Exercise, Yoga or Stretching
 - G. Pain clinics
 - H. Any other
- Two or more unsuccessful methods* _____ 5 points, or
One unsuccessful method _____ 3 points, or
No unsuccessful methods _____ 0 points
7. Do you find that applying heat or ice ever provides temporary relief?
- Yes* _____ 5 points, or
No _____ 0 points
8. Do you find that exercise, stretching or movement of any kind temporarily reduces your level of discomfort?
- Yes* _____ 5 points, or
No _____ 0 points
9. Has your level of pain or discomfort *Ever* changed when you were distracted or had a change in lifestyle (such as a holiday) or had any other significant life event?
- Always/Almost always* _____ 5 points, or
Sometimes _____ 3 points, or
Never _____ 0 points
10. Have you ever been told any of the following?
- A. Surgery will not help you (or it has not helped you)
 - B. You have a soft tissue problem
 - C. Something is pressing on a nerve
 - D. Your problem is degenerative
 - E. You have inflammation of muscles, nerves or tendons
 - F. We cannot find anything structurally wrong
- Yes* _____ 5 points, or
No _____ 0 points



Creating *Harmony* in Your Life

27 - 45 points: Very likely the Breakthrough to Harmony process will help you.

15 - 26 points: Likely the Breakthrough to Harmony process will help you.

0 - 14 points: Unlikely the Breakthrough to Harmony process will help you.

If your score indicates that it is likely or very likely the Breakthrough to Harmony process will help you, then you can achieve the same great results as everyone else. Just start now by completing the following:

1. Please provide name and contact details – the best e-mail and telephone number to contact you.
2. If you could have anything as a result of this session – what would it be? (stated in the positive)
3. What do you anticipate you will obtain from this session - what do you believe is possible?
4. Do you have any concerns about the session? Please share them.
5. What do you currently have in your life that you no longer want?
6. What do you *NOT* currently have in your life that you *DO* want?
7. Write a short life history in note form including significant events for you (positive and negative).
8. What patterns have you noticed occurring in your life so far?
9. Give details of any other coaching/therapy undertaken to date.