Vital Body Measurements



for



| Y | Your Name | | | |
|--|-----------|---------|---------|---------|
| | Month 1 | Month 2 | Month 3 | Month 4 |
| Date | | | | |
| | | | | |
| Body Mass Index (BMI) (18.5 to 24.9)* | | | | |
| | | | | |
| Blood Pressure (Less than 120/80)* | | | | |
| | | | | |
| Blood Cholesterol (Less than 200 mg/dL)* | | | | |
| | | | | |
| Blood Sugar (Less than 140 mg/dL)* | | | | |
| | | | | |
| CRP (Less than 10 mg/L)* | | | | |

Complete this form each month *(Ideal mesurements)

pH Readings



for



| Your Name |
|-----------|

Measure the pH of your saliva in the morning before you do anything else like drinking water or tea, eating or smoking. Fill your mouth with saliva and then swallow it. Repeat this step to help ensure that your saliva is clean. Then the third time, put some of your saliva onto the pH paper. Take the reading IMMEDIATELY.

Complete this form every day in 4 week cycles