

Case Title: P.M.**Gender: Female, First Visit: Friday, August 7, 2015, Main Complaint: Weakness, Migraine**

Aug 07, 2015 - Analysis :

Symptom	Degree
MIND - ANXIETY	3
MIND - FEAR - dark	1
MIND - FEAR - disease - of impending	2
MIND - FEAR - high places, of	2
MIND - FEAR - injections, of	3
MIND - IRRESOLUTION	2
MIND - MOOD - changeable, variable, etc.	1
MIND - TIMIDITY	3
STOMACH - THIRSTLESS	2
RECTUM - CONSTIPATION	3
GENITALIA-FEMALE - SEXUAL desire - diminished	2
GENITALIA-FEMALE - STERILITY	2
CHEST - INDURATION - Mammae	2
EXTREMITIES - PERSPIRATION - Hand - palm	2
EXTREMITIES - PERSPIRATION - Foot - offensive	2
EXTREMITIES - UNCOVER, inclination to - Feet	2
SLEEP - POSITION - back, on - with hand over the head	2
GENERALITIES - AIR - draft - agg.	3
GENERALITIES - COLD - agg.	3
GENERALITIES - FOOD and DRINKS - chocolate - desire	2
GENERALITIES - FOOD and DRINKS - eggs - desire	2
GENERALITIES - WEAKNESS	3