

MOUTH, HAND, & FOOT WRITING FORM

by Yoshiaki Omura, M.D., Sc.D., © 2009

Name: _____ Age: _____ Sex: _____ Today's Date : _____

Address: _____ Profession: _____ Time : _____ am pm

Phone #: _____ Cellular Phone #: _____ Fax #: _____ E-mail: _____

Chief Complaint: _____ Questions? Call 212-781-6262
 FAX TO: 212-923-2279

Left Mouth write L-M	: Telomere : : Integrin $\alpha_5\beta_1$ (or Oncogene C-fos Ab2): : Acetylcholine : : β -Amyloid (1-42) : : L- Homocysteine or CRP: : Chrysotile Asbestos : : Tremolite Asbestos : : Al; Hg : : Chlamydia Trachomatis : : Mycobacterium TB : : Cytomegalovirus : : Substance P :	Right Mouth write R-M
before treatment		before treatment
after treatment		after treatment
Left Hand write L-H	: Telomere : : Integrin $\alpha_5\beta_1$ (or Oncogene C-fos Ab2): : Acetylcholine : : β -Amyloid (1-42) : : Cardiac Troponin I : : Chrysotile Asbestos : : Tremolite Asbestos : : Al; Hg : : Chlamydia Trachomatis : : Mycobacterium TB : : Cytomegalovirus : : Substance P :	Right Hand write R-H
before treatment		before treatment
after treatment		after treatment
Left Foot write L-F	: Telomere : : Integrin $\alpha_5\beta_1$ (or Oncogene C-fos Ab2): : Acetylcholine : : Chrysotile Asbestos : : Tremolite Asbestos : : Al; Hg : : Chlamydia Trachomatis : : Mycobacterium TB : : Cytomegalovirus : : Substance P :	Right Foot write R-F
before treatment		before treatment
after treatment		after treatment

(All the measurement units used here are BDORT Units)