



Office Use Only:

In Office Pre-Op or Post-Op

Physician:

Dr. Liberatore Dr. Liotta

Lexington ENT Sinus Outcome Report

Patient Name: _____

Pre-Op Date: _____ Post Op Date: _____

This questionnaire is intended to help define your symptoms and provide valuable information to our doctors. Please answer the following questions regarding any problems you have experienced over the past two weeks. Consider how severe the problem is, when you experience it and how frequently it happens, please rate each item below on how "bad" it is by circling the number that corresponds with how you feel.

Table with 7 columns: SYMPTOMS, No Problem, Very Mild Problem, Mild or Slight Problem, Moderate Problem, Severe Problem, Problem As Bad As It Can Be. Rows include symptoms like Runny Nose, Cough, Nasal Congestion, etc.





II. Xenobiotic Tolerability Test (XTT)

1. Are you presently using prescription drugs?
2. Are you presently taking one or more of the following over-the-counter drugs?
3. If you have used or currently use prescription drugs, which of the following scenarios best represents your response to them?
4. Do you currently use or within the last 6 months had you regularly used tobacco products?
5. Do you have strong negative reactions to caffeine or caffeine containing products?
6. Do you commonly experience "brain fog," fatigue, or drowsiness?
7. Do you develop symptoms on exposure to fragrances, exhaust fumes, or strong odors?
8. Do you feel ill after you consume even small amounts of alcohol?
9. Do you have a personal history of
10. Do you have a history of significant exposure to harmful chemicals such as herbicides, insecticides, pesticides, or organic solvents?
11. Do you have an adverse or allergic reaction when you consume sulfite containing foods such as wine, dried fruit, salad bar vegetables, etc?

Overall Score Tabulation

Recommended protocols based on new detoxification questionnaire (MSQ and XTT)
MSQ SCORE _____ (High >50; moderate 15-49; Low <14)
XTT SCORE _____ (High >10; moderate 5-9; Low <4)

Table with 6 columns: MSQ Score, XTT Score, Description, Medical Food, Diet, Additional Nutraceutical Support. Rows include symptom levels like 'High level of general symptoms and indicated symptoms of elevated toxic load'.

Recommended protocols based on new detoxification questionnaire (MSQ and XTT)
MSQ SCORE _____ (High >50; moderate 15-49; Low <14)
XTT SCORE _____ (High >10; moderate 5-9; Low <4)

Additional Symptom-Specific Support

Table with 2 columns: Symptom, Nutraceutical Support. Symptoms include 'Water retention and/or frequent or urgent urination', 'Heartburn and/or intestinal/stomach pain', 'Diarrhea, constipation, and/or intestinal/stomach pain'.

Note: Patients with high MSQ but low XTT may be exhibiting pathology that is not related to toxic load. Other mechanisms should be considered such as inflammation/immune/allergic gastrointestinal dysjunction, oxidative stress, hormonal/neurotransmitter dysfunction, nutritional depletion, and/or mind body. Individualize support with specific medical foods, diet, and/or nutraceuticals

