

## **Low Testosterone Questionnaire**

### **ADAM Questionnaire (Androgen Deficiency in the Aging Male)**

If you are concerned that your testosterone level is low, this set of ten simple questions is a good place to start. You can save a copy of this form to your personal computer by clicking on the file menu on the top left of the page and then selecting “save as” or “save a copy”.

<b>Answer YES or NO to each of the following questions:</b>		<b>Yes</b>	<b>No</b>
1.	Do you have a decrease in libido (sex drive)?		
2.	Do you have a lack of energy?		
3.	Do you have a decrease in strength and/or endurance?		
4.	Have you lost height?		
5.	Have you noticed a decreased "enjoyment of life?"		
6.	Are you sad and/or grumpy?		
7.	Are your erections less strong?		
8.	Have you noticed a recent deterioration in your ability to play sports?		
9.	Are you falling asleep after dinner?		
10.	Has there been a recent deterioration in your work performance?		

If you answered YES to questions 1 or 7 or any 3 other questions, you may be experiencing androgen deficiency (low testosterone level). A simple saliva test done in the privacy of your home can help you determine your free testosterone level. To order a home-saliva testosterone test click the link below.

[http://www.prostatehealthnaturally.com/prostate\\_supplements/prostate\\_supplements\\_other.html](http://www.prostatehealthnaturally.com/prostate_supplements/prostate_supplements_other.html)

*\*\*Adapted from Morley, et al. Validation of a screening questionnaire for androgen deficiency in aging males. Metabolism. 2000;49(9):1239-1242*