



## FEEDBACK FORM

LAST NAME:.....B. Gilbert.....AGE: .....PURCHASE  
DATE:.....

**If DEVICE FAILS TO PRODUCE SATISFACTORY RESULTS, PLEASE RETURN THIS FORM COMPLETED 30-90 DAYS TO RECEIVE RETURN-AUTHORIZATION AND YOUR RETURNS INSTRUCTIONS (DEPENDS UPON YOUR LOCATION).**

**RE-SAVE THIS DOCUMENT EACH TIME YOU UPDATE IT**

On a Scale of 1 -10 (10=BEST)

Base-Line	1	2	3	4	5	6	7	8	9	10
<b>Prior to EarthPulse™ I'm sleeping</b>	( )	( )	( x )	( )	( )	( )	( )	( )	( )	( )
My energy level is	( )	( )	( x )	( )	( )	( )	( )	( )	( )	( )
My physical performance level is	( )	( )	( x )	( )	( )	( )	( )	( )	( )	( )
My mental performance level is	( )	( )	( )	( x )	( )	( )	( )	( )	( )	( )
My resting-breath-hold (RBH) is	In seconds: 40.8									
My pain level is (10=worst)	( )	( )	( )	( )	( )	( )	( )	( x )	( )	( )
My body-weight is	_____215___ lbs. or _____ kgs.									
I usually wake to urinate	_____3___ many times per night									

	1	2	3	4	5	6	7	8	9	10
<b>Day 7 on EarthPulse™ I'm sleeping</b>	( )	( )	( )	( )	( x )	( )	( )	( )	( )	( )
My energy level is	( )	( )	( )	( )	( x )	( )	( )	( )	( )	( )
My physical performance level is	( )	( )	( )	( x )	( )	( )	( )	( )	( )	( )
My mental performance level is	( )	( )	( )	( )	( x )	( )	( )	( )	( )	( )
My resting-breath-hold (RBH) is	In seconds: 45.6									
My pain level is (10 = worst)	( )	( )	( )	( )	( )	( )	( x )	( )	( )	( )
My body-weight is	_____212___ lbs. or _____ kgs.									
I usually wake to urinate	___1___ many times per night									

**Resting Breath Hold (RBH) almost never fails to improve during first week.** If RBH did fail to improve (or got worse which is even more rare), please re-read your RBH test instructions (in the same email this document was attached to. Usually a reduction can be tracked to a failure to oxygen load consistently with the past RBH test, or taking under different conditions.

**Comments:** Please write as much as you would like in the space below. PARTICULARLY HELPFUL WOULD BE YOUR COMMENTS ON ANY CHANGES IN NUTRITIONAL SUPPLEMENTATION OR MEDICATION DURING THE TIME OF YOUR 90 DAY TRIAL. The page will continue down as necessary. Call for technical support if you have any questions. Contact numbers are at end of this document. Thank you!



	1	2	3	4	5	6	7	8	9	10
<b>Day 14 on EarthPulse™ I'm sleeping</b>	( )	( )	( )	( )	( x )	( )	( )	( )	( )	( )
My energy level is	( )	( )	( )	( )	( x )	( )	( )	( )	( )	( )
My physical performance level is	( )	( )	( )	( )	( x )	( )	( )	( )	( )	( )
My mental performance level is	( )	( )	( )	( )	( )	( x )	( )	( )	( )	( )
My resting-breath-hold (RBH) is	In seconds: 53.2									
My pain level is (10 = worst)	( )	( )	( )	( )	( x )	( )	( )	( )	( )	( )
My body-weight is	_____210_____ lbs. or _____ kgs.									
I usually wake to urinate	_____1_____ many times per night									

**Comments:** Please use the device nightly during the first 90-day period to maximize statistical probability and level of success. Please make sure you oxygen load properly to make your RBH as accurate as possible.

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	1	2	3	4	5	6	7	8	9	10
<b>Day 21 on EarthPulse™ I'm sleeping</b>	( )	( )	( )	( )	( )	( x )	( )	( )	( )	( )
My energy level is	( )	( )	( )	( )	( )	( x )	( )	( )	( )	( )
My physical performance level is	( )	( )	( )	( )	( )	( x )	( )	( )	( )	( )
My mental performance level is	( )	( )	( )	( )	( )	( )	( x )	( )	( )	( )
My resting-breath-hold (RBH) is	In seconds: 59.8									
My pain level is (10 = worst)	( )	( )	( )	( )	( x )	( )	( )	( )	( )	( )
My body-weight is	_____209_____ lbs. or _____ kgs.									
I usually wake to urinate	_____2_____ many times per night									

**Comments:** ANY CHANGES MADE TO SUPPLEMENTS OR MEDICATIONS?

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	1	2	3	4	5	6	7	8	9	10
<b>Day 28 on EarthPulse™ I'm sleeping</b>	( )	( )	( )	( )	( )	( x )	( )	( )	( )	( )
My energy level is	( )	( )	( )	( )	( )	( x )	( )	( )	( )	( )
My physical performance level is	( )	( )	( )	( )	( )	( )	( x )	( )	( )	( )
My mental performance level is	( )	( )	( )	( )	( )	( x )	( )	( )	( )	( )
My resting-breath-hold (RBH) is	In seconds: 60.1									
My pain level is (10 = worst)	( )	( )	( )	( )	( x )	( )	( )	( )	( )	( )
My body-weight is	_____209_____ lbs. or _____ kgs.									
I usually wake to urinate	_____2_____ many times per night									

**Comments:** Please use the device nightly during the first 90-day period to maximize statistical probability and level of success. Thank you!

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	1	2	3	4	5	6	7	8	9	10
<b>Day 60 on EarthPulse™ I'm sleeping</b>	( )	( )	( )	( )	( )	( )	( x )	( )	( )	( )
My energy level is	( )	( )	( )	( )	( )	( )	( x )	( )	( )	( )
My physical performance level is	( )	( )	( )	( )	( )	( x )	( )	( )	( )	( )
My mental performance level is	( )	( )	( )	( )	( )	( x )	( )	( )	( )	( )
My resting-breath-hold (RBH) is	In seconds: 57.3									
My pain level is (10 = worst)	( )	( )	( )	( x )	( )	( )	( )	( )	( )	( )
My body-weight is	_____210_____ lbs. or _____ kgs.									
I usually wake to urinate	_____2_____ many times per night									

**Comments:** Please use the device nightly during the first 90-day period (don't loan it out yet) to maximize statistical probability and level of success. Thank you!

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It was during this month that I had my thyroid levels checked. I was discovered to be hypo thyroid again. After making Adjustments to my supplements and thyroid medication in 30 days time, my thyroid levels were in the hyper thyroid levels. I am still working on those adjustments as well as addressing a bladder infection. During this whole 90 day period I was working an overtime hours and traveling once per week schedule. Overall my well being was improved given the challenges I was dealing with. I had been diagnosed with fibromyalgia several years ago and so pain is a constant, however since using the earthpulse. I have a level of pain that has not returned as well as I no longer wake up



with severe stiffness since the first week of using it.

	1	2	3	4	5	6	7	8	9	10
<b>Day 90 on EarthPulse™ I'm sleeping</b>	( )	( )	( )	( )	( )	( )	( x )	( )	( )	( )
My energy level is	( )	( )	( )	( )	( )	( )	( x )	( )	( )	( )
My physical performance level is	( )	( )	( )	( )	( )	( )	( x )	( )	( )	( )
My mental performance level is	( )	( )	( )	( )	( )	( )	( x )	( )	( )	( )
My resting-breath-hold (RBH) is	In seconds: 72.5									
My pain level is (10 = worst)	( )	( )	( x )	( )	( )	( )	( )	( )	( )	( )
My body-weight is	_____210_____ lbs. or _____ kgs.									
I usually wake to urinate	_____1_____ many times per night									

NOW,... IF YOU'D LIKE TO LOAN YOUR EARTHPULSE OUT, TO A FRIEND TO TRY, PLEASE DO SO.

Thank you and be well.

**Comments:** Please write as much as you would like here, then return to email below.

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Paul,

Overall I have been very satisfied with the Earthpulse. I used it in the alert mode for sometimes 10-12 hours per day as well as using recover mode at night. I have had a couple of days in the 30 day period where I woke up and felt almost rested. But given this period is the worst time of the year for me with work, stress and upset in my schedule, I fared well. In the next two weeks I will be able to return to a normal 40 hour work week with weekends off. I am anxious to see how much better I can feel now that my schedule will improve and my thyroid levels return to a more normal range.

I very much appreciate the shipping rebate. This expense was a stretch for us but my husband was supportive and agrees there was improvement. He also experienced the relief from stiffness in his joints in the morning and noticed a bit of a return of it when I took the machine out of town once per week.