



CLIENT FOLLOW UP FORM

Client Name: Kristie Donnelly

Date: 3/4/25

Email:

Practitioner: Leigh Gibbs

PROGRESS	How have you been feeling since our last session? Have you noticed any improvements or changes in your symptoms or condition?
	A lot of stress over Xmas with dad. Hot flushes. Liver struggling. Constipation a little
SYMPTOMS	Are there any particular symptoms or issues that have improved or worsened? Please describe any new symptoms or changes you have experienced.
	Hot flushes are new. Less irritable on the Premular. Tennis elbow gone. Knees are ok. No brain fog unless sick. Sinus are good.
PROTOCOL	Have you been following the treatment plan and recommendations discussed in our previous session? Are you taking the prescribed supplements, herbal remedies, or following dietary and lifestyle modifications?
MEDICATIONS/Supps	Have you started or stopped any medications, supplements, or other therapies since our last session? Are you experiencing any side effects or interactions?
	Back on Premolar. 2 a day life extension. 1 tablet. Stop complex. Low Bp.
EMOTIONS	How has your emotional state been recently? Are you experiencing any significant stressors, anxiety, depression, or mood swings?
	No. All good.
ENERGY	Have you noticed any changes in your energy levels, fatigue, or sleep patterns? Are there specific times of the day when you feel better or worse?
	Bed at 10pm. If stressed wake in middle of night.
DIGESTION	Have there been any changes in your digestion or bowel movements? Are you experiencing any bloating, constipation, diarrhea, or other digestive issues?
	Every day or 2.
DIET	How has your diet been lately? Have you been able to incorporate any recommended dietary changes? Do you have any challenges or concerns regarding your nutritional plan?
	Plenty of veg/fruit. Been having coconut water with sea salt and lemon.
GOALS	Progress Towards Goals: Are you satisfied with the progress you've made so far? Are there any goals or outcomes that you would like to achieve or discuss further?
	Bringing cholesterol down. Balancing blood fats. Hot flushes.



SUPPORT	Additional Support: Is there anything else you would like to address or any specific questions or concerns you have regarding your health or treatment plan?
TREATMENT	Aims and suggestions for this appointment.
	<p>Reduce saturated fat. And carbohydrates/sugar. Up protein. Tofu. Lipotropex. OmegAval. Zinc. Herbal mix for Hormones, immune, liver, heart, nervous system. w liquorice. Sage tea before bed.</p> <p>Globe, 40</p> <p>Holy Basil 50</p> <p>Wild Yam 50</p> <p>Shizandra 40</p> <p>Licorice 30</p>
FOLLOW UP APPT:	TBC

