



CLIENT FOLLOW UP FORM

Client Name: Janine Dungate

Date: 4/9/25

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 few days after taking broccoli sprout got a cough. For a week. A lot of mucous in the throat - allergies. Blowing nose. Not much energy. Increased to 2 x 2 day got symptoms. Back to 1 twice. Tickle. Dry cough still.
SYMPTOMS	Are there any particular symptoms or issues that have improved or worsened? Please describe any new symptoms or changes you have experienced.
	Feeling ok. Felt crampy in stomach. Going to bathroom everyday. Bloating is better. Acid reflux has improved. Not burping as much. Not as uncomfortable. Allergies still in the morning. Bloods done before starting protocol. LFT elevated. Wins - period 25 days. A lot less pain, clots. Hot flushes still.
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?
	Naturopath 3 x vitamin C infusions in a month?? Maybe caused elevated LFTs.
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?
EMOTIONS	How has your emotional state been recently? Are you experiencing any significant stressors, anxiety, depression, or mood swings?
	Fatigue. Good emotions.
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?
	Yesterday off. Energy levels at 3/10 feels like she needs to lie down. Muscles are sore.
DIGESTION	Have there been any changes in your digestion or bowel movements? Are you experiencing any bloating, constipation, diarrhea, or other digestive issues?
	Felt constipated. Formed.
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?



	<p>Diet normal. Eggs gluten free soughdough. Apple. Rockmelon.</p> <p>Smoothies - 2 strawberries. Fine. Green powder, slippery elm. Maca powder. Macadamia Milk. Pea Protein</p> <p>Macadamias for nut. Try Juicing. Added ginger.</p>
GOALS	<p>Progress Towards Goals: Are you satisfied with the progress you've made so far?</p> <p>Are there any goals or outcomes that you would like to achieve or discuss further?</p>
SUPPORT	<p>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?</p>
	Calcium almost out.
TREATMENT	<p>Aims and suggestions for this appointment.</p>
	<p>Fish oil. - Sulphurane. Drop back to 1 2 per day. NuZest. Vanilla. GI Revive.</p> <p>B vitamin - every second day.</p> <p>Colonoscopy. End of September. Plant - high oxalates foods.</p> <p>Juicing - try carrot apple cucumber, ginger, celery.</p>
FOLLOW UP APPT:	25/9/25

