



CLIENT FOLLOW UP FORM

Client Name: Mitch Dolman

Date: 11/10/25

Email:

Practitioner: Leigh Gibbs

PATHOLOGY FINDINGS	Bloodwork/Stool
	Bloods done in July.
PROGRESS	How have you been feeling since our last session? Have you noticed any improvements or changes in your symptoms or condition?
	Taking for a week or 2. Feeling better within himself. Past week, 2 or 3 times a day. 5-20mins. Vision goes black. Doesn't like the taste of the Minerals.
SYMPTOMS	Are there any particular symptoms or issues that have improved or worsened? Please describe any new symptoms or changes you have experienced.
	Still the same. Mood has improved.
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?
	Mix apple juice. Try hydralyte? Switch to capsules. Taking fish oil and E.
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?
	Melatonin Medication run out. Been ok off it.
EMOTIONS	How has your emotional state been recently? Are you experiencing any significant stressors, anxiety, depression, or mood swings?
	Fairly good. Improvement in the tone of his voice. Sounding more vibrant.
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?
	Energy has improved.
SLEEP	Better, worse?
	Hard to get to sleep. But once asleep. Waking up at 8-9:30am.
DIGESTION	Have there been any changes in your digestion or bowel movements? Are you experiencing any bloating, constipation, diarrhea, or other digestive issues?
	Digestion better. No reflux - going daily. Burping not as much.



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?
	Diet - Add a protein - Yoghurt & eggs. Lunch - sushi, burrito, sausage rolls. Add some veg. Last week reduced to 14 - 16 bottles. Reduce 2 more bottles. Smoking slowly decreasing. Drop 2 cigarettes a day.
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?
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.
	Instant scripts. HTMA NAC. Zinc Sustain CalMag MagDuo Consider Coeliac Disease? More liver support for next appt.
FOLLOW UP APPT:	

