



# CLIENT FOLLOW UP FORM

**Client Name:** Halley Flanagan

**Date:** 22.11.25

**Email:**

**Practitioner:** Leigh Gibbs

<b>PATHOLOGY FINDINGS</b>	<b>Bloodwork/Stool</b>
	Had recently due to severe fatigue. Asked to send through.
<b>PROGRESS</b>	<b>How have you been feeling since our last session? Have you noticed any improvements or changes in your symptoms or condition?</b>
	Heavy period. Lasted longer than usual. Years ago PCOS. First few days had a lot of bowel movement. Now constipation. 1 / day. Hard to move - dehydrated? Not enough food? Oils?
<b>SYMPTOMS</b>	<b>Are there any particular symptoms or issues that have improved or worsened? Please describe any new symptoms or changes you have experienced.</b>
	Started to get little red dots around mouth and eyes. Like allergy rash. Since taking GFE. Comes up if she has a little dairy - Still lack of appetite. Dont feel like eating until 1pm. Sometimes only 1 meal a day. Headaches - heat around temples. Every 2nd day. Usually at work. Stress. Squeezing dull. Had one yesterday. Didn't last too long.
<b>PROTOCOL</b>	<b>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?</b>
	Orthoplex heme iron, Fe max alternate days. Feeling better.
<b>MEDICATIONS/ Supps</b>	<b>Have you started or stopped any medications, supplements, or other therapies since our last session? Are you experiencing any side effects or interactions?</b>
	Was taking CHM Peony and bupleurum.
<b>EMOTIONS</b>	<b>How has your emotional state been recently? Are you experiencing any significant stressors, anxiety, depression, or mood swings?</b>
	Apathetic. - bit low.
<b>ENERGY</b>	<b>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?</b>
	Energy levels at 6 now.
<b>SLEEP</b>	<b>Better, worse?</b>
	Waking still. Not great sleep.



<b>DIGESTION</b>	<b>Have there been any changes in your digestion or bowel movements? Are you experiencing any bloating, constipation, diarrhea, or other digestive issues?</b>
	Always consistently bloated. Wake up 3-4 months pregnant. Main meal in the afternoon 5months pregnant.
<b>DIET</b>	<b>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?</b>
	Boiled egg in the morning. Waking - she has water. Macha. Moringa leaf tea.
<b>GOALS</b>	<b>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?</b>
<b>SUPPORT</b>	<b>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?</b>
	Away overseas - 17 December.
<b>TREATMENT</b>	<b>Aims and suggestions for this appointment.</b>
	Magnesium. Take at night. Ginger gentian? Adrenal cocktail - coconut water, lime, salt. 100ml 1 cap per day. Send PDF. Bs on the alternate Stay away from stone fruits & apples, pears, watermelon, grapes, beets. Honey etc. Berries are fine. Whole oranges, paw paw, mandarin, firm banana, Pumpkin, celery, cucumber, zucchini, lettuce, spinach, Bok choy,
<b>FOLLOW UP APPT:</b>	

