Mentoring the Mentors
Dr. Stuart White
Session 2
April 28, 2005

2-Mentor goals:

- To declare what is possible and establish a commitment to that possibility
- Address personal and professional barriers limiting the ability to serve
- Evolution of vision/mission/ethics that drive success
- Create immediate action steps to apply learning and growth

3-Mentoring the mentor:

- Who are the mentors? – Practitioners
- Who are we mentoring? – Patients and GAP
- What’s the purpose? – Optimized life
- How does it work? – Whatever you learn you teach someone else (anyone else)
- Who’s is included? – Self selection, you pick yourself

4-Mentoring the mentor:

- Each participant attends monthly teleconferences (1 hour in duration, 4th Thursday of month) creating a round table discussion/exploration of the dynamics and details of a nutrition-based wholistic practice
- Each participant chooses a colleague in his/her world to convey the notes and information – no information squandering
- Issues/problems/questions are considered a learning process for everyone, although individual’s remain anonymous
- All questions, comments, case studies to be directed through email to SP rep who will compile and include in next teleconference (must be submitted 10 days prior)

5-Eternal Truth

- “We command nature by obeying her.”
  Sir Roger Bacon 1634

- “If we are not for ourselves,
  Who will be for us?
If we are only for ourselves,
  What are we?
If not now,
  When?”
  Hillel - 1st century
6-The Mission -

- To help people change into themselves
- To assist them where they bog down – get sick.
- To improve the human race – to contribute to the phenome and maybe the genome?

7-Stats to celebrate

- Aristotle said, “If you can name a thing, you can control a thing”
- To measure is to bring light to the area, and light brings growth
- Our strengths become our weaknesses when not balanced
- Our weaknesses become our strengths when balanced
- Never underestimate how working with your weakness will pave the way for others – in this mentor program we are working on ourselves and each other - the healer is healed, the healed becomes the healer.

8-Stats to celebrate

9-Stress – Allostatic Load & Hormesis

- Stress is a condition of human existence and a factor in the expression of disease. A broader view of stress is that it is not just the dramatic stressful events that exact their toll but rather the any events of daily life that elevate levels of physiological systems to cause some measure of wear and tear. We call this wear and tear ” allostatic load,” and it reflects not only the impact of life’s experiences but also of genetic load; individual habits of reflecting items such as diet, exercise, and substance abuse; and developmental experiences that set lifelong patterns of behavior and physiological reactivity… Hormones associated with stress and allostatic load protect the body in the short run and promote adaptation, but in the long run allostatic load causes changes in the body that lead t disease … Among the most potent
of stressors are those arising from competitive interactions between animals of the same species, leading to the formation of dominance hierarchies

 Gorski describes that appropriate stress increases health!

10-Stress – HPA Axis

 Gorski HPA Axis is impacted by stress – most consideration for intervention concerns the adrenal portion only
 Gorski Symplex F/M (6), Hypothalmex (2), Tribulus (2) support the H and the P upper portion of this axis
 Gorski Drenamin (6), Eleuthero (3) support the adrenal fatigue
 Gorski Tired adrenals react
 Gorski Strong adrenals are tolerant

11-Stress – HPA Axis

 Gorski New product - Rhodiola/Ginseng (2-4)
 Gorski 150 mg Rhodiola Rosea 20:1 + 100 mg Panax Ginseng 5:1
 Gorski Also known as Arctic Root & Golden Root (Rhodiola Rosea or Sedum Roseum contains active compounds ‘rosavins & salidrosides’
 Gorski Lab studies show adaptogenic and tonic activity, studies show reduced fatigue and improvement in mental work and accuracy
 Gorski Especially consider to improve mental performance (exams, interviews), recuperate from stress (Surgery, Accidents, infections), address chronic fatigue and decline of aging

12-Clinical Tips

 Gorski Consider every patient for nutritional needs
 Gorski Publish the nutritional experiment
 Gorski Develop profound case history and interview – get to know your subject – spread your reputation of comprehensive wholistic expertise – get them talking about the remarkable time the had with you
 Gorski Practice the 6 I’s of successful professional service
 Gorski Practice preventions – keep yourself alive and positive

13-A Clinical Study

 (Notes to follow)

14-A Clinical Study

 (Notes to follow)
The Whole Healer

Personal Mastery

Clinical Mastery  Mission Mastery

Healer/Doctor

Reputation Mastery  Change Mastery

Professional Mastery  Interactive Mastery

16-Deemed Physiological Priorities

Endocrine balance  
(Supplementation & lifestyle)

Glycemic regulation  
(Low carb diet)

Reduce immune burdens  
(Supplementation, detox, allergy removal)

17 - Formula for Success – The ‘I’s have it

1. Introduction – be transparent and rational
2. Interview – be mutual and intimate
3. Investigate – measure and record
4. Initiate – report of findings and correlate
5. Inquiry – check for conception
6. Itinerary – scheduling and treatment plan

*Every visit includes every ingredient
18 – Introduction:

- Show your philosophy
- Share the mission
- State what you are going to do
- Enroll patient in why you are doing exam

19 – Interview:

- Make notes, remind people you care by remembering
- Build intimacy – this is the foundation of the partnership
- Mutualism – match the level of disclosure
- Demonstrate comfort in the topic

20 – Investigate:

- Utilize analytical tools to measure wellness and anomalies
- Educate as you proceed – why, what is learned
- Practice vocal anesthesia to offset test anxiety (white coat syndrome)
- Correlate major complaints/symptoms with findings

21 – Initiate:

- Report all the findings and correlate with symptoms
- Simply read all positive findings and explain all changes since last visit
- The therapeutic use of rationale – describe how each supplement works and its objective

22 – Inquiry:

- Confirm understanding and comprehension
- Detect present or future problems
- Employ preventions to avoid foreseen issues ($, vegetarian)
- Complete one’s issues - close patient up so they are not leaving with everything hanging out

23 – Itinerary:

- Treatment plan says how long, how often, and how much
- Identify re-evaluation along the way and introduce scope of the program/project
- Headline the immediate goals – succinct and frank
24 - 1st Visit – The Start

- Need a strong start to compel patient compliance, demonstrate your expertise, declare the project
- Most doctors are uncomfortable in the subject matter (e.g., Sexual function is embarrassing to talk about) – show patient your comfort and direct get-to-the-point, get-after-it, get-to-it, get-it-done, get-on-it approach
- Lead them into this ‘human frankness’ - this is the foundation of the partnership
- Nothing human is ugly!
- Frankness is trustworthy – the interview is a little nervous-making because it is so intimate and interrogative stripping away the social defense of the word ‘fine’ – nervous-making while also silently relaxing because it declares the scope of care
- People relax into the declaration that you will seek to care for all that you have spoken about – Aristotle said, “To name a thing is to control a thing”
- It is recommended that the doctor do the interview for three primary reasons:
  1 – it builds the relationship between doctor and patient
  2 – as patient discloses doctor may conjecture and explain functional approach
  3 – brings doctor to the starting line

25 - 1st Visit – The Start (Continued)

- Patient primary concern – must be established and respected – if not clear and honored patient will not be open to anything additional the doctor envisions – it is ‘true north’ that the compass always points to (e.g., constipation, loss libido, fertility, headaches, prevent cancer)
- This establishes the nature of the experiment and the need for accountability – acts as an anchor to the lofty expansiveness of biochemical modulation
- It is recommended that every item of the sheet be asked – simply record answers – disregard excuses – it does not matter why the patient has frontal headaches, simply that they do
- Full interview establishes existing drug protocols and gives doctor opportunity to align with them (e.g., blood thinners)
- Often patient will ask, “What results should I expect?” – turn the sheet over and review/read the symptoms you expect to be gone by the next month visit

26 – Primary Concern – Case History Form

27 – Nutritional Schedule Form

28 – Primary Concern Case History Form

29 – Nutritional Schedule Form (Sample)

30 – Case History Form (Sample)

31 – Nutritional Schedule Form (Sample)

32 – Case History Form (Sample)
33 – Nutritional Schedule Form (Sample)

34 – Case History Form (Sample)

35 – Nutritional Schedule Form (Sample)
Primary Concern:
Consistent:
Month:
Headaches: Basal/Temples/Cluster/Crown/TMJ/Frontal/Migraine(prodromal-halluc./photophobia/olfaction/na
Ears: Noise(Ring/Hiss/Pound)/Plug/Pop/Ache/Drain/Itch/Loss/Dizzy/Wax Tongue: Thick/Coated pH:
Eyes: Burn/Tear/Ache/Red/Dry/Film/Blur/Floaters/Spots/Tired/Puffy/Style/Twitch/Circles
Sinus: Dry/Drain/Plug/Post(white/yellow/green/gray/brown/blood/clear)/Sneezing/Smell loss/Taste loss/Thirst
Sore Throat/Hoarseness/Cough(dry/productive)/Allergies/URI/Fever/Chills/Halitosis/Cankers/Blisters/F
Neck Stiffness/Shoulder Tension/Chielosis/Dry mouth/Cold,sweaty hands,feet/gums/teeth/glands/dys;
Chest:Tension/Tight/Pressure/Heavy/Anxiety/Congestion/Pain/Sternal
Sharp Heart Pain/Palpitations/MVP/Tachy/Brady/Murmur/Arm pain
Shortness of Breath: Constant/Exertion/Asthma/Wheeze/Air hunger/Yawning
Heartburn/Indigestion(aches/cramps/nausea/queasy)/Bloat/Gas/Belch/Ulcer/H.H.
Bowels: Regular/Incomplete/Sluggish(every_____days)/Cramps/Laxative/Suppositories/Enemas/Colonics/Bulk
Fecal Consistency: Soft/Ribbons/Mucous/Normal/Hard/Pebbles/Dry/Pain/Diarrhea/Constipation
Hemorrhoids: History/Current (swollen/burn/blood/distend/itch/sting/ache/cramp)
Prostate: History/Current (burn/ache/pain/restrict/dribble/emission/swell)
Vagina (burn/itch/dry/pain/blood) Discharge (clear/white/yellow/green/brown/odor)
Menses: Regular/Irregular (early/late)/Skip BC pill LMP
Flow (heavy/moderate/light/long/brief) Cramps-mild/med/severe/back
Low Abdominal Puffiness/Fluid-face/hands/feet/body
Breast Tenderness/Acne(pre/mid/post)/Spotting/Clots
PMS -(Mood swing/irritable/depression)/Breast/Fluid/Tired
Ovulation: Pains/Cysts/Discharge/Regular/Irrregular/Fibroids
Breast Feeding/Fibrosis/Lump/Discharge/Prosthesis/Reduction/Tender
Menopause: Natural/Surgical(partial/complete)/Hormones/Patch/Flashes/Formication
Cramps/Aches/Anxiety: Legs/Feet/Arms/Hands Rash/Acne/Dry/Itch/Fungus/Patch/Fluid/Cellulite/Nails-Spots/Hair Loss-Limp
Urination: Nocturnal____/night____/week Frequency/Urgent/Burn/Pain/Odor/Spasm/Leak/UTI
Sleep: Difficulty Falling Asleep/Insomnia/Interrupted(____/night) sleep craving/jolts
Dreams/Nightmares/Night sweats/Restlessness/____hrs per nt.
Sad/Grief/Depression/Moodiness/Irritable/Worrisome/Angry/Nervous/Frustrated/Anxiety/Panic/Cry/Fear/Shame
Appetite: Low/High/Sweet/Coffee/Tea/Chocolate/Beer/Wine/CHO/spices./Ice Cream/Soda Stress
Energy: Low/Variable/Up/Slow to start (improving/worse)____am/pm/meals low/Exercise
Memory(name/number/word) Coordination/Concentration Sexuality(flat/low/normal)/Impotent
Slow Healing/Brusing/Arthralgia:
Weight: (+/-_____lbs) Overall (+/-____) Height: BF% ( ) Pulse BP: / Chol. HDL Tri.
Medications: Surgery/Allergy:
# NUTRITION SCHEDULE

**VERSEDAAL CONTACT REFLEX ANALYSIS**

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**SPECIAL INSTRUCTIONS**

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**DATE__________________ RE-EVALUATION DATE_________________**

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| SLIDE 25 |
Primary Concern: Wellness

Consistent: hx

Headaches: Basal/Temples/Cluster/Crown/TMJ/Frontal/Migraine (prodromal, halluci., photophobia, oiffaction, nausea)

Ears: Noise (Ring/Hiss/Pound)/Plug/Pop/Ache/Drain/Itch/Loss/Dizzy/Wax Tongue: Thick/Coated pH:

Eyes: Burn/Tear/Ache/Red/Dry/Film/Itch/Blur/Floater/Sots/Tired/Puffy/Style/Twitch/Circles

Sinus: Dry/Drain/Plug/Post/White/Yellow/Green/Gray/Brown/Blood/Clear/Sneezing/Sniff Loss/Taste Loss/Thirst

Sore Throat/Hoarseness/Cough (dry/productive)/Allergies/URI/Fever/Chills/Halitosis/Canker/Blister/Flu

Neck Stiffness/Shoulder Tension/Cheliosis/Dry mouth/Cold, sweaty hands/feet/gums/teeth/glands/dysphasia

Chest: Tension/Tight/Pressure/Heavy/Anxiety/Congestion/Pain/Sternal

Sharp Heart Pain/Palpitations/MVP/Tachy/Brady/Murmur/Arm pain

Shortness of Breath: Constant/Exertion/Asthma/Wheeze/Air hunger/Yawning

Heartburn/Indigestion (aches/cramps/nausea/queuey)/Bloat/Gas/Belch/Ulcer/H.H.

Bowels: Regular/Incomplete/Sluggish (every ___ days)/Cramps/Laxative/Suppositories/Enemas/Colonics/Bulk

Fecal Consistency: Soft/Ribbons/Mucous/Normal/Hard/Pebbles/Dry/Pain/Diarrhea/Constipation

Hemorrhoids: History/Current (swollen/burn/blood/distend/itch/sting/ache/cramp)

Prostate: History/Current (burn/ache/pain/restrict/dribble/emission/swell)

Vagina (burn/itch/dry/pain/blood) Discharge (clear/white/yellow/green/brown/odor)

Menses: Regular/Inregular (early/late)/Skip BC pill LMP

Flow (heavy/moderate/light/long/brief)/Cramps-mild/med/severe/back

Low Abdominal Puffiness/Fluid-face/hands/feet/body

Breast Tenderness/Acne (pre/mid/post)/Spotting/Cloths

PMS -(Mood swing, irritable, depression)/Breast/Fluid/Tired

Ovulation: Pains/Cysts/Discharge/Regular/Inregular/Fibroids

Breast Feeding/Fibrosis/Lump/Discharge/Prosthesis/Reduction/Tender

Menopause: Natural/Surgical (partial/complete)/Hormones/Patch/Flashes/Formication

Cramps/Aches/Anxiety: Legs/Feet/Arms/Hands Rash/Ache/Dry/Itch/Fungus/Patch/Fluid/Cellulite/Nails-Sots/Hair Loss/Limp

Urination: nocturnal __/night __/week Frequency/Urgent/Burn/Pain/Odor/Spasm/Leak/UTI

Sleep: Difficulty Falling Asleep/Insomnia/Interrupted(___/night)/sleep craving/jolts Dreams/Nightmares/Night sweats/Restlessness/___ hrs per nt.

Sad/Grief/Depression/Moodiness/Irritable/Worrisome/Angry/Nervous/Frustrated/Anxiety/Panic/Cry/Fear/Shame

Appetite: Low-High/Sweet/Coffee/Tea/Chocolate/Seaweed/CHO & spices/Ice Cream/Soda Stress Work

Energy: Low/Variable/O/H/Slow to start (improving/worse) __ am/pm/meals/low/Exercise

Memory (name/number/word) Coordination/Concentration Sexuality (flat/low/normal) Impotent

Slow Healing/Brusing/Arthralgia: Carpal Tunnel

Weight: ___ (+/- ___ lbs) Overall (+/- ___) Height: ___ BF% ___ Pulse ___ BP: ___ Chol. HDL Tri.

Medications: Surgery/Allergy:
# NUTRITION SCHEDULE

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### SPECIAL INSTRUCTIONS

- Supportive 28%o
- Versendaal Contact Reflex Analysis
- Metabolic
- Immune/Allergy: Gallbladder 21
- Hormonal: Hypersecretes 9
- Master: RHNP (SP) Accommodation 6
- Spinal

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*WHOLE HEALTH ASSOCIATES*
1406 Vermont
Houston, Texas 77006
713/522-6336
Primary Concern: Wellness

Consistent

Month: 2

Headaches: Basal/Temperes/cluster/Crown/TMJ/Frontal/Migraine (prodromal-hallucination/photophobia/oilfaction/nausea)

Ears: Noise (Ringing/Hiss/Pound)/Plug/Pop/Ache/Drain/Itch/Loss/Dizzy/Wax Tongue: Thick/Coated pH: 7

Eyes: Burn/Tear/Ache/Red/Dry/Film/Itch/Blur/Floaters/Spots/Tired/Puffy/Style/Twitch/Circles

Sinus: Dry/Drain/Plug/Post (white/yellow/green/grey/brown/blood/clear)/Sneezing/Smell loss/Taste loss/Thirst

Sore Throat: Hoarseness/Cough (dry/productive)/Allergies/URI/Fever/Chills/Halitosis/Cankers/Blisters/Flu

Neck Stiffness/Shoulder Tension/Chiolosis/Dry mouth/Cold, sweaty hands, feet/gums/teeth/glands/dysphagia

Chest: Tension/Tight/Pressure/Heavy/Anxiety/Congestion/Pain/Sternal

Sharp Heart Pain/Palpitations/MVP/Tachy/Brady/Murmur/Arm pain

Shortness of Breath: Constant/Exertion/Asthma/Wheeze/Air hunger/Yawning

Heartburn/Indigestion (aches/cramps/nausea/queasy)/Bloat/Gas/Belch/Ulcer/H.H.

Bowels: Regular/Incomplete/Sluggish (every ___ days)/Cramps/Laxative/Suppositories/Enemas/Colonics/Bulk

Fecal Consistency: Soft/Ribbons/Mucous/Normal/Hard/Pebbles/Dry/Pain/Diarrhea/Constipation

Hemorrhoids: History/Current (swollen/burn/blood/distend/itch/sting/ache/cramp)

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Vagina (burn/itch/dry/pain/blood) Discharge (clear/white/yellow/green/brown/odor)

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Breast Tenderness/ Acne (pre/mid/post)/Spotting/Clots

PMS (mood swing/irritable/depression)/Breast/Fluid/Tired

Ovulation: Pains/Cysts/Discharge/Regular/ Irregular/Fibroids

Breast Feeding/Fibrosis/Lump/Discharge/Prosthesis/Reduction/Tender

Menopause: Natural/Surgical (partial/complete)/Hormones/Patch/Flashes/Flametrography

Cramps/Aches/Angiography: Legs/Feet/Arms/Hands

Rash/Itch/Antiчив/Infection/Fluid/Cellulite/Nails/Spots/Hair Loss-Limp

Urination: Nocturnal 12/night _/week Frequency/Urgent/Burn/Pain/Odor/Spasm/Leak/UTI

Sleep: Difficulty Falling Asleep/Insomnia/Interrupted (___night)/sleep craving/jolts

Dreams/nightmares/Night sweats/Restlessness/___hrs per nt.

Sad/Grief/Depression/Anxiety/Moodiness/Irritability/Worrisome/Angry/Nervous/Frustration/Anxiety/Panic/Cry/Mood/Fear/Shame

Appetite: Low/High/Sweet/Cold/Tea/Chocolate/Beef/Wine/Chopsticks/Ice cream/Soda Stress: Weak

Energy: Low/Variable/Up/Slow to start (improving/worse) ___ am/pm/meals Low/Exercise

Memory/name/number/word) Coordination/Concentration Sexuality (flat/low/normal)/Impotent

Slow Healing/Brusing/Arthralgia: Osteoporosis (Carpal Tunnel) ___ quart

Weight: ___ lbs) Overall ___ Height: ___ BF% ___ Pulse ___ BP ___ Chol. HDL Tri.

Surgery/Allergy: ___
## NUTRITION SCHEDULE

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**SPECIAL INSTRUCTIONS**

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**VERSEENDAAL CONTACT REFLEX ANALYSIS**

**METABOLIC**

**IMMUNE/ALLERGY**

**HORMONAL**

**MASTER**

**SPINAL**

**STRONG/INCOMPLETE**

- Hypothalamus ≤
- Adrenocorticot 4
- Gallbladder 12.
Primary Concern: Chronic/Recurrent
Consistent:
Month: 14

Headaches: Basal/Temple/Cluster/Crown/TMJ/Temporal/Migraine (prodromal-hallucinations/photophobia/olfaction/nausea)

Ears: Noise (Ring/Hiss/Pound)/Plug/Pop/Ache/Drain/Itch/Loss/Dizzy/Wax Tongue: Thick/Coated pH: 7.5

Eyes: Burn/Teal/Ache/Red/Dry/Film/Itch/Blurr/Floaters/Swells/Tired/Puffy/Typo/Twitch/Circles

Sinus: Dry/Drain/Plug/Post/white/yellow/green/brown/blood/cream/Sneezing/Smell loss/Taste loss/Thirst

Sore Throat/Hoarseness/Cough (dry/productive)/Allergies/URI/Fever/Chills/Halitosis/Cankers/Blisters/Flu

Neck Stiffness/Shoulder Tension/Choliosis/Dry mouth/Cold, sweaty hands, feet/gums/teeth/glands/dysphagia

Chest: Tension/Tight/Pressure/Heavy/Anxiety/Congestion/Pain/Sternal

Sharp Heart Pain/Palpitations/MVP/Tachy/Brady/Murmur/Arm pain

Shortness of Breath: Constant/Exertion/Asthma/Wheeze/Air hunger/Yawning

Heartburn/Indigestion (aches/cramps/nausea/queasy)/Bloat/Cast/Del/Spots/Ulcer

Bowels: Regular/Incomplete/Sluggish (every___ days)/Cramps/Laxative/Suppositories/Enemas/Colonics/Bulk

Fecal Consistency: Soft/Ribbons/Mucous/Normal/Hard/Pebbles/Dry/Pain/Diarrhea/Constipation

Hemorrhoids: History/Current (swollen/burn/blood/distend/itch/tingle/ache/cramp)

Prostate: History/Current (burn/ache/pain/restrict/dribble/emission/swell)

Vagina (burn/itch/dry/pain/blood) Discharge (clear/white/yellow/green/brown/odor)

Menses: Regular/Irregular (early/late)/Skip BC pill LMP

Flow (heavy/moderate/light/long/brief) Cramps-mild/med/severe/back

Low Abdominal Pain/Sinus/Fluid-face/hands/feet/body

Breast Tenderness/Acne/pre/mid/post/Spotting/Clots

PMS (Mood swing/irritable/depression)/Breast/Fluid/Tired

Ovulation: Pains/Cysts/Discharge/Regular/Irregular/Fibroids

Breast Feeding/Fibrosis/Lump/Discharge/Prosthesis/Reduction/Tender

Menopause: Natural/Surgical/partial/complete/Hormones/Patch/Flashes/Formication

Cramps/Aches/Angjin: Legs/Feet/Arms/Hands Rash/itch/Dry/Che/Itch/Fungus/Patch/Fluid/Cellulite/Nails-Spots/Pain/Sweats/Head Loss-Limp

Urination: Nocturnal___/night___/week Frequency/Urgent/Burn/Pain/Odor/Spasm/Leak/UTI

Sleep: Difficulty Falling Asleep/Nocturia/Interrupted___/night___/sleep craving/jolts

Dreams/Nightmares/Night sweats/Restlessness___hrs per nt.

Sad/Grief/Depression/Moodiness/Irritable/Worrisome/Angry/Nervous/Frustrated/Anxiety/Panic/Cry/Fear/Shame

Appetite: Low/High/Sweet/Coffee/Tea/Chocolates/Beer/Wine/Cho/spices/Ice Cream/Soda Stress

Energy: Low/Variable/Up/Go Slow to start (improving/worse)___am/pm/meals low/Exercise

Memory (name/number/word) Coordination/Concentration/Sexuality (flat/hit/normal)/Impotent

Slow Healing/Brusinig/Arthralgia:

Weight: 145 lbs Overall 145 Height: 5'7" BF% _17_ Pulse BP: ___ Chol. HDL Tri.

Medications:

Surgery/Allergy:
NUTRITION SCHEDULE

<table>
<thead>
<tr>
<th>PRODUCT</th>
<th>When Arising</th>
<th>Breakfast</th>
<th>Lunch</th>
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<th>Dinner</th>
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<th>No. of Bottles</th>
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</tbody>
</table>

SPECIAL INSTRUCTIONS

Anergy: Milk
Primary Concern: Bladder

Headaches: Basal/Temple/Cluster/Crown/TMJ/Temporal/Migraine (prodromal/hallucinations/photophobia/olfaction/nausea)

Ears: Noise (Ring/Hiss/Pounding)/Plug/Pop/Ache/Drain/Itch/Loss/Dizzy/Wax Tongue: Thick/Coated pH: 7.5

Eyes: Burn/Fear/Ache/Red/Dry/Film/Itch/Blur/Bloater/Spots/Tired/Puffy/Style/Twitch/Circles

Sinus: Dry/Drain/Plug/Postwhite/yellow/green/gray/brown/blood/clear/Sneezing/Smell loss/Taste loss/Thirst

Sore Throat/Hoarseness/Cough (dry/productive)/Allergies/URI/Fever/Chills/Halitosis/Cankers/Blisters/Flu

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Sharp Heart Pain/Palpitations/MVP/Tachy/Brady/Murmur/Arm pain

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  Flow (heavy/moderate/light/long/brief)/Cramps-mild/med/severe/back
  Low Abdominal Puffiness/Fluid-face/feet/hands/body
  Breast Tenderness/Pressure/numbness/Spotting/Clots
  PMS (mood swings/irritability/depression)/Breast/Fluid/Tired
  Ovulation: Pains/Cysts/Discharge/Regular/irregular/Fibroids

Breast Feeding/Fibrosis/Lump/Discharge/Prosthesis/Reduction/Tender

Menopause: Natural/Surgical/partial/complete)/Hormones/Patch/Flashes/Formication

Cramps/Aches/Anxiety: Legs/Feet/Arms/Hands Rash/Anonymity/Dry/itch/Fungus/Patch/Fluid/Cellulite/Spots/Spots/Hair Loss/Limp

Urination: Nocturnal day/night/day/week Frequency/Urgent/Burn/Pain/Odor/Spasm/Leak/UTI

Sleep: Difficulty Falling Asleep/Insomnia/Interrupted (___/night)/sleep cramping/tonic

Dreams/Nightmares/Night sweats/Restlessness/___ hrs per nt.

Sad/Grief/Depression/Moodiness/Irritable/Worrisome/Angry/Nervous/Frustrated/Anxiety/Panic/Cry/Fear/Shame

Appetite: Low/high/Sweet/Coffee/Tea/Chocolate/Beer/Wine/CHO/spices/Ice Cream/Soda stressed

Energy: Low/Variable/Up/Slow to start (improving/worse) ___ am/pm/meals low/Exercise

Memory/name/navigation/Concentration/Coordination/Sexuality (flat/tall/normal/Impotent

Slow Healing/Brusing/Arthralgia:

Weight: 140 lbs Overall (5/12) Height: 5' 11''

BF% (17) Pulse: 70 BP: 140/78 Chol. HDL Tri.

Medications: aspirin 325

Surgery/Allergy:
### NUTRITION SCHEDULE

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**SPECIAL INSTRUCTIONS**

- **HORMONAL**
  - Prog (prog) 6
- **IMMUNE/ALLERGY**
  - Eye 6
- **MUSCLE (MSC)**
  - Heart & Vials 6
- **MUSCLE**
  - BCAA (BCA) 7, HSP 3, B.O. (B.O.) 7
- **SPINAL**
  - **STRONG/INCOMPLETE**
  - Hypothen (Hypothen) 7, Inst. Inst. 3, Bone Marrow 7
36 - Practitioner Take-downs

- Onset of disease & dying after under care (osteoporosis, cancer, CAD) – self blame!
- Other competitive practitioners – defend yourself!
- New research, new techniques – prove it!
- Broken promises – loss of trust!
- Money $ - disempowerment!
- Control – energy competition!
- Risk of Failure – lack of faith!

37 - Practice hedonism ~ avoid the pain, pursue the pleasure

- Remember the pain – avoid repeating mistakes
- Practice must be fun and fulfilling at least most of the time or practitioners will begin to limit the experiment
- Practice preventions –
  1 – Avoid having recommendations declined
  2 – Avoid being canceled due to lack of funding
  3 – Avoid unanticipated deal-killers – allergies to wheat, vegetarianism, dysphagia, drug contraindications
  4 – Solve the problems before recommendations are made

38 – Nutritional Procedure/Protocol from Start to Finish: (Form)
Nutrition Strategy Patient Flow Chart:

1. **Patient enters/1st visit:**
   - Introductory information
   - Identification of goals and objectives
   - Case history
   - Examination & report of findings
   - Explanation of scheduling and payment options
   - Supporting literature given

2. **Patient is established/2nd visit:**
   - Review first month, changes and experiences
   - Explain causes of changes
   - Examination & report of findings
   - Repeat positive findings from 1st visit
   - Supporting literature

3. **Maintenance care:**
   - Interval between visits lengthens (4-6 months)
   - Ongoing review and support of chronic conditions
   - Discuss vitality, longevity concepts and lifetime goals
   - Discuss others therapies such as vital force, scars and personal work
   - Send letter congratulating graduation to maintenance care

4. **3rd - 8th visits:**
   - Review the past month
   - Examination & report of findings
   - Review positive findings from prior visit
   - Supporting literature

5. **9th visit:**
   - Review and determine readiness for maintenance
   - Introduce concepts of maintenance care
   - Encourage final analysis testing (blood, saliva, urine, hair) and complete ACG
   - Determine subtle patterns needing support
40 - The Experiment

- Everyday is an experiment – people are very experimental if you can demonstrate safety and gain (what did we learn)
- Experiments are a success regardless of outcome – whether healing happens the experiment proves something
- Explain, “I learn by what works and what doesn’t work – both outcomes tell me about you and how your machinery works”
- Handout paper “The nutritional experiment”

41 – “NOTICE OF UNDERSTANDING AND AGREEMENT FORM”

42 – “NUTRITIONAL INFORMED CONSENT FORM”

43 - Eternal Truth

- Four Noble Truths of Buddhism
  - This is a world of suffering
  - Suffering has a cause
  - Through mindfulness we can find the cause
  - We can be released from the wheel of suffering

- Biochemistry is Buddhist!

44 - Healing Process – Sequencing

Patient           Practitioner
Complaint/ambition + vision/goals
Symptom Resolution + Foundational repair – 7 pillars
Chronic Issues + DNA repair/ expression

Enlivened evolution
Whole person/whole world/holograph
45 – The 7 Pillars of Healing

- **Endocrine/Hormonal** ~ Disruption & Depression
- **Glycemic Management** ~ Insulin / Cortisol Dysregulation
- **pH Bioterrain** ~ Net Acid Excess
- **Inflammatory status** ~ Cumulative Repair Deficit
- **Immune burdens** ~ Toxicity, Infection & Infestation
- **Tropho-restorative** ~ Repair, Fortification & Synchronicity
- **Complete physiological cycles** ~ Uninterrupted process

= NORMAL MIRACLE (46)

47 - Take on the process yourself

- Get out of the way – be responsible – serve your people – make a difference
- Every patient needs nutritional support – you are proof of that
- Go at their pace, constantly take them further incrementally, develop them as if they make a difference to God’s Plan
- The paradigm is the foundation of your service – build the paradigm – if you build it they will come – What is your paradigm?

48 - Action steps for tomorrow

- Consider every patient for nutritional needs
- Publish The Nutritional Experiment in the waiting/treatment area
- Establish dedicated hours to schedule nutritional services
- Define your nutritional service, create flow chart, set the fees, record stats
- Schedule Mentoring the Mentor phone coaching sessions
- Prepare to dazzle the patient with the depth of interview and case history – resulting in referrals because you did what no one ever did with them before, a referral-based waiting list practice, and profound self fulfillment that can only come from assisting in the healing process

“How we long to become
that which we hardly believe we are.”

Pir Vilayat Kahn

Give generously,
As you have received.
The Nutritional Experiment -  
Outcome based learning

Why don't you start by telling me what your reasons and hopes are for being here? This is where the experiment begins.

A scientific nutritional experiment must always be accountable to the original motive for seeking care, so the results of the experiment may tell plainly whether it is possible to achieve the original intention. Most people vastly underestimate the body's ability to successfully achieve change and improvement, and part of the purpose of this nutritional approach is to teach people it is safe to experiment.

Indeed when experiments are well run people become comfortable with trying new things and applying previously unknown technologies. This is good to learn so that when we arrive at serious challenges in our lives we have learned to innovate and experiment, until we find what works and improve our lives and the lives of our loved ones. Oftentimes the experiment in normal physiology that is explored in this office becomes a possibility for others in our lives because we have discovered answers that might work for them as well. This is especially true when someone discovers that nutritional interventions work for themselves and also consider their children's health challenges or their parents or spouse.

We learn as much from what works and from what doesn't work. For example, when we support the adrenal glands regularly yet find no improvement with insomnia we discover that mechanism is not in issue. The scientific way is to then move on to another physiological mechanism and experiment to see if that will affect the quality of sleep. A well documented experiment will teach a great deal about exactly where the issue lies, and then this discovery will exist for years as information about how a person's unique biochemistry works.

It is important that the nutritional therapeutic modality be viewed as an experiment, so that we remember that each person is a biochemical individual that is uniquely complex. Most of the nutritional principles and science we employ today have been derived from empirical data collected over generations. It is called ancestral knowledge, since in fact our ancestors were the ones who collected the data and showed the patterns that have proven to be science.

When a person smokes cigarettes over a period of time and develops cancer no one is surprised by the outcome of that experiment, nor by the effect of cocaine/drugs, decadent lifestyles, excessive stimulants, junkfood (Super-size Me). These are experiments of what doesn't work at all, and in fact damages the body. These activities cause stress and premature aging. Likewise our effort to improve nutrition is an experiment in the other direction, wherein perhaps the body can be strengthened, we may achieve youthful aging, and stress can be reduced.

A famous poem says it well,

"Every moment of loving is an act of living  
And every moment of hating is an act of dying  
All our moments add together, like the digits in a sum  
And tell us plainly whether life or death shall come"

Let the experiment we were born to continue. Let us learn the way things work best, and then let our lives contribute to the collective discovery and wisdom of how to live powerfully on this planet. Nutrition works! Learn how. Teach others by telling them how your experiment turned out ...
So who talked you into coming in here? Did they give you some idea of what we do here? I consider that today is a discovery: it’s a time for you to find out whether I am the right person for you to work with, whether we are suited for each other because healing is very sacred process and you have to be with the right people to go through that process, and also whether this technique is the approach that you are looking for. So I am going to be very transparent today and give you the opportunity to sample my opinions and see whom you are getting involved with. Should you discover that we are not suited or that this isn’t what you are interested in just tell me and I will help you to the door gracefully, there will be no charge and you will not embarrass to who referred you. This would not be a waste of our time to discover that we are not supposed to work together. I do not want to go three months with you and have you say, “I didn’t know this is what it would be like and I wish I had never started this.”

We are going to begin with a very detailed interview that is very intimate. I am going to ask you many questions about all the intricacies of your body, and this will create groupings that will reveal where you may have weaknesses. It also will create document that we can compare back to in the future to see if you have made improvement. For example, if you are having headaches daily and next time they are only coming weekly we have made improvement. I am committed to your improvement and I do not want to pretend that you are getting better. As well there will be some questions about your past, looking for major events which may have impacted your health, and if you would rather keep those things private simply lie to me. So when I say, “Any history of rape?” you simply say, “No” and that keep things private. If you do tell me it is recorded in code that no one could read and these notes are confidential.

After the interview we are going to an examination by testing the contact reflex points located across the surface of your body. The chart on the wall shows the points we will be touching. You’ll notice that some of the points are located in the groin and some in the chest - I will not be touching directly any of the private parts although if any of the touching offends you please speak up and we will use alternate methods. I don’t think any of this will feel invasive. When I touch you I am introducing my energy into a specific circuit in your body and if I am able to defeat and overwhelm that circuit then that means that that area of your body needs support and strengthening. It does not mean that we can diagnose in this way, so that if the liver tests weak it does not mean that you have hepatitis. After we find all the weaknesses we will prioritize the weaknesses to determine where to begin the therapy.

Then we will create a custom formula of nutrient supplements for you designed to target the priority weaknesses over the next month until I see you next. If this approach works for you I will see monthly for the next 8-9 months, after which we will compete with an extensive blood and hair analysis to be sure that there is nothing left uncares for. The nutrients are not herbal in the beginning, because most herbs are stimulants and depressants, and we want to begin with trophic strengthening substances to repair and fortify you first. We may use herbs later for specific reasons, but initially we are trying to strengthen you. The nutrients are derived from vegetable sources and animal sources and I will give you literature to learn about how they are made and their quality.

I will speak to you at the end about exact costs, once we know what the recommendations will be, and of course will review with you whether this is within your means or not. I will speak to you about discounts or charity should that be necessary.

Are there any questions about this or my training or anything, or shall we begin?
Why don’t you start by telling me what your reasons and hopes are for being here?
Primary Concern:
Consistent:
Month:

Headaches: Basal/Temples/Cluster/Crown/TMJ/Frontal/Migraine (prodromal-halluc./photophobia/olfaction/nausea)

Ears: Noise (Ring/Hiss/Pound)/Plug/Pop/Ache/Drain/Itch/Loss/Dizzy/Wax
Tongue: Thick/Coated
pH:

Eyes: Burn/Tear/Ache/Red/Dry/Film/Itch/Blur/Floaters/Spots/Tired/Puffy/Stye/Twitch/Circles

Sinus: Dry/Drain/Plug/Post/white/yellow/green/brown/blood/clear/Sneezing/Smell loss/Taste loss/Thirst

Sore Throat/Hoarseness/Cough (dry/ productive)/Allergies/URI/Fever/Chills/Halitosis/Cankers/Blisters/Flu

Neck Stiffness/Shoulder Tension/Chielosis/Dry mouth/Cold/sweaty hands, feet/gums/teeth/glands/dysphagia

Chest: Tension/Tight/Pressure/Heavy/Anxiety/Congestion/Pain/Sternal

Sharp Heart Pain/Palpitations/MVP/Tachy/Brady/Murmur/Arm pain

Shortness of Breath: Constant/Exertion/Asthma/Wheeze/Air hunger/Yawning

Heartburn/Indigestion (aches/cramps/nausea/queasy)/Bloat/Gas/Belch/Ulcer/H.H.

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Low Abdominal Puffiness/ Fluid-face/ hands/feet/body
Breast Tenderness/ Acne (pre/ mid/ post)/ Spotting/ Clots
PMS -(Mood swing/ irritable/ depression)/ Breast/ Fluid/ Tired
Ovulation: Pains / Cysts/ Discharge/ Regular/ Irregular/ Fibroids

Breast Feeding/ Fibrosis/ Lump/ Discharge/ Prosthesis/ Reduction/ Tender

Menopause: Natural/ Surgical (partial/ complete)/ Hormones/ Patch/ Flashes/ Formication

Cramps/ Aches/ Anxiety: Legs/ Feet/ Arms/ Hands Rash/ Acne/ Dry/ Itch/ Fungus/ Patch/ Fluid/ Cellulite/ Nails- Spots/ Hair Loss- Limp

Urination: Nocturnal _____ / night _____ / week Frequency/ Urgent/ Burn/ Pain/ Odor/ Spasm/ Leak/ UTI

Sleep: Difficulty Falling Asleep/ Insomnia/ Interrupted (____/ night) / sleep craving/ jolts
Dreams/ Nightmares/ Night sweats/ Restlessness/ ____ hrs per nt.

Sad/ Grief/ Depression/ Moodiness/ Irritable/ Worrisome/ Angry/ Nervous/ Frustrated/ Anxiety/ Panic/ Cry/ Fear/ Shame

Appetite: Low/ High/ Sweet/ Coffee/ Tea/ Chocolate/ Beer/ Wine/ CHO/ spices/ Ice Cream/ Soda Stress

Energy: Low/ Variable/ Up/ Slow to start (improving/ worse) __am/ pm/ meals low/ Exercise

Memory (name/ number/ word) Coordination/ Concentration Sexuality (flat/ low/ normal)/ Impotent

Slow Healing/ Bruising/ Arthralgia:

Weight: (+/- _____ lbs) Overall (+/- _____) Height: BF% ( ) Pulse BP: / Chol. HDL Tri.

Medications: Surgery/ Allergy:
## NUTRITION SCHEDULE

### CONTACT REFLEX ANALYSIS

#### METABOLIC

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<tr>
<th>PRODUCT</th>
<th>When Arising</th>
<th>Breakfast</th>
<th>Mid-morn</th>
<th>Lunch</th>
<th>3 pm</th>
<th>Dinner</th>
<th>Before Sleep</th>
<th>No. of Bottles</th>
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#### IMMUNE/ALLERGY

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#### HORMONAL

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#### MASTER

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#### STRONG/INCOMPLETE

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### SPECIAL INSTRUCTIONS

Ragland’s:  
( / ) / lying  
( / ) / standing  

Ca cuff test:  

Allergy:
Nutritional Procedure/Protocol from Start to Finish:
Whole Health Associates

Vision Statement: To encourage the expression of the deep longings and aspiration that catalyze and open into the service of higher purpose

New Patient
1st Visit
- welcome to the office and time check with practitioner’s schedule
- completion of clinic intake forms and disclaimer
- completion of symptom survey form
- office visit includes introduction to nutritional approach and my approach
- interview of purpose of visit and objectives for visit, case history, nutritional examination
- contact reflex analysis
- report of findings and recommendations, including long-term goals/plan (management)
- explanation of rescheduling, costs and payment options, and return policy
- supporting literature

Established Patient
2nd Visit
- review of symptoms and interview, note changes and explain what caused the change
  - Introduce and explore role of diet and lifestyle
  - repeat positive findings from 1st visit
  - contact reflex analysis
  - report of findings and recommendations, review again long-term goals/plan
  - supporting literature

3rd through 8th Visit
- review of symptoms and interview
  - review diet and lifestyle
  - repeat positive findings from 1st visit
  - contact reflex analysis
  - report of findings and recommendations
  - supporting literature

9th Visit
- review of symptoms and determine shift towards maintenance
  - introduce ideas of maintenance and encourage final analysis with blood, urine, hair
  - introduce and complete Acoustic Cardiography
  - final fine tooth comb to determine subtle patterns of need

Maintenance Care
- described by interval between visits over 8 weeks
- ongoing Latest and greatest updates
- ongoing chronic degenerative projects, such as osteoporosis or CAD
- introduce resource for future health challenges personally or with family friends
- discuss longevity and vitality concepts
- create lifetime goals
- introduce other therapies and approaches to continue the evolution of self
- send letter acknowledging the completion of corrective care
Nutritional Procedure/Protocol from Start to Finish:

Vision Statement: To encourage the expression of the deep longings and aspiration that catalyze and open into the service of higher purpose

New Patient
1st Visit

Established Patient
2nd Visit

3rd through 8th Visit

9th Visit

Maintenance Care