

NAME SAMANTHA STERRY	DATE 19-03-2018
ADDRESS 28 ALFRED ST, PAR	KSIDE 5063
PHONEMOBII	LE 0412920900
	MAIL Sanartha. Sterry Qgnail. con
OCCUPATION ONLINE BUSINESS HEALTH FU	
ALLERGIES /INTOLERANCES/REACTIONSELAS	TOPLAST
MEDICATIONS AND/OR SUPPLEMENTS VITEY	1000 ( Monsonr)
PROBI	IOTIC (INNER HEALTHIPLUS)
ALCOHOL/SMOKING/REC. DRUGSNO,	
YOUR HISTORY (injuries/ surgery/past major illnesses/ cl	
WITH ANAESTHETIC, NO MAI	FOR ILLNESSES, EYE SURGERY
(LENY get 15 herry 190)	FOR ILLNESSES, EYE SURGERY
PAST HISTORY: MOTHER Breat Carlo FA  OTHER  OTHER	THER - Kidney Stone 8
OTHERO	THER
* gradua ovopin conce	
YOUR SYMPTOMS/ REASON FOR VISIT-	
SKIN BREAKOUTS	5Am 15/16/14
OVERAL HEALTH.	
	lus - 61cces
	717 - time
	31 tone
	40 - 1111
	uymay
	(18



# INFECTION & PREVENTION CONTROL QUESTIONAIRE

## **PURPOSE**

This patient questionnaire has been developed to assist me in the assessment of all clients at their time of arrival

## DEFINITION

The World Health Organisation (WHO) states that corona viruses are a large family of viruses that cause illnesses ranging from the common cold to more severe diseases such as the Middle East respiratory syndrome (MERS-CoV) and the Severe Acure respiratory Syndrome (SARS-CoV). Corona Virus Disease (COVID-19), is caused by a new strain of corona virus officially know as Severe acute Respiratory Syndrome Coronavirus 2 (SARS -CoV-2)

## SYMPTOMS

Commonly symptoms of coronavirus or COVID-19 include fever or history of fever (more than 38 degrees Celsius), dry or moist cough, shortness of breath, sore throat, runny nose and diarrhoea

## **ACTIONS**

If after the assessment, there are indications or suspicion that the client/ patient is at risk, the continuation of the scheduled appointment will be reconsidered.

# PATIENT DECLARATION

I have not returned from overseas in the last 14 days and / or been in contact with someone that has returned overseas within the last 14 days.

Your Name
SAMANTHA STERRY.

1	Have you returned from interstate and /or been in contact with someone that has returned from interstate or overseas in the last 14 days?	YES (NO)
2	Have you been unwell with a respiratory illness such as a cold or fever?	YES/NO
3	have in contact in the last 12 days with any person suspected to have	YES/NO
	or diagnosed with Novel Corona Virus disease/COVID – 19?	

PATIENT: STERRY, SAMANTHA

THE FOLLOWING RECOMMENDATIONS SHOULD BE TAKEN ONLY WITH MEALS IN ORDER TO INCREASE ABSORPTION AND TO AVOID STOMACH DISCOMFORT.IF DISCOMFORT OCCURS SUPPLEMENTATION CAN BE REDUCED TO A MINIMUM THEN INCREASED GRADUALLY.

RECOMMENDATION	AM	NOON	PM
PARA-PACK VEGAN	2	2	2
ADEN COMPLEX	2	2	2
ACTIVATED B6 PLUS (Vitamin B6)	1	0	1
IRON PLUS	0	0	1
ZINC PLUS	2	1	2
Molyzinc	1	1	1
MANGANESE PLUS	1	1	2
VITAMIN C PLUS	1	1	2
HCL SUPPORT	2	2	2

THESE RECOMMENDATIONS ARE BASED UPON THE MINERAL LEVELS FOUND IN THE HAIR TISSUE MINERAL ANALYSIS AND MAY AT TIMES NEED MODIFICATION AS PER SPECIFIC NEED AND/OR INDIVIDUAL CIRCUMSTANCES. THESE RECOMMENDATIONS ARE PROVIDED ONLY AS A PROFESSIONAL GUIDE TO SUPPLEMENTAL ASSISTANCE.

THESE RECOMMENDATIONS MAY NOT INCLUDE MINERALS WHICH APPEAR BELOW NORMAL OR IN TURN MAY RECOMMEND MINERALS WHICH APPEAR ABOVE NORMAL ON THE HTMA GRAPH. THIS IS NOT AN OVERSIGHT. SPECIFIC MINERALS WILL INTERACT WITH OTHER MINERALS TO RAISE OR LOWER TISSUE MINERAL LEVELS, AND THIS PROGRAM IS DESIGNED TO BALANCE THE PATIENT'S MINERAL LEVELS THROUGH THESE INTERACTIONS.

THESE RECOMMENDATIONS SHOULD NOT BE TAKEN OVER A PROLONGED PERIOD OF TIME WITHOUT OBTAINING A RE-EVALUATION. THIS IS NECESSARY IN ORDER TO MONITOR PROGRESS AND MAKE THE NECESSARY CHANGES IN THE NUTRITIONAL RECOMMENDATIONS AS REQUIRED.

SPECIAL NOTE: NUTRITIONAL SUPPLEMENTS DO NOT TAKE THE PLACE OF A GOOD DIET. THEY ARE BUT AN ADDITIONAL SOURCE OF NUTRIENTS, AND THEREFORE, MUST NOT BE SUBSTITUTED FOR A BALANCED DIET.

## INTRODUCTION

THE FOLLOWING REPORT SHOULD NOT BE CONSIDERED AS DIAGNOSTIC, BUT RATHER AS A SCREENING TOOL THAT PROVIDES AN ADDITIONAL SOURCE OF INFORMATION. THIS REPORT SHOULD ONLY BE USED IN CONJUNCTION WITH OTHER LABORATORY TESTS, HISTORY, PHYSICAL EXAMINATION AND THE CLINICAL EXPERTISE OF THE ATTENDING HEALTHCARE PROFESSIONAL.

TEST RESULTS WERE OBTAINED BY A LICENSED\* CLINICAL LABORATORY ADHERING TO TESTING PROCEDURES THAT COMPLY WITH GOVERNMENTAL PROTOCOL AND STANDARDS ESTABLISHED BY TRACE ELEMENTS, INC., U.S.A. THE FOLLOWING INTERPRETATION IS BASED UPON INTERNATIONAL DATA AND DEFINED BY EXTENSIVE CLINICAL RESEARCH CONDUCTED BY DAVID L. WATTS, PH.D.

This analysis including levels, ratios, ranges and recommendations are based upon the sample and sampling technique meeting the following requirements:

- \*\* Sample obtained from the mid-parietal to the occipital region of scalp.
- \*\* Sample is proximal portion of hair length (first 1" to 2" of hair closest to scalp.
- \*\* Sufficient sample weight (minimum of 150 mg.)
- \*\* High grade stainless steel sampling scissors.
- \*\* Untreated virgin hair (no recent perms, bleaching, or coloring agents).
- \* Clinical Laboratory License

U.S. Department of Health and Human Services, State of Texas Department of Health,

Clinical Laboratories Improvement Act, 1988 No. 45-D0481787

## METABOLIC TYPE

## SLOW METABOLISM, TYPE #1

This patient is classified as a SLOW METABOLIZER TYPE # 1. Generally speaking, the Slow Metabolizer is experiencing the following endocrine and CNS activity. However, in those cases involving endocrine replacement therapy, such as; thyroid, insulin, adrenal steroids (anti-inflammatory drugs), etc., as well as endocrine antagonists and in extreme cases of surgical removal of a gland, tissue mineral patterns can be significantly affected. In these cases, the following reported indications of endocrine status should not be considered as representative of endocrine activity. Additional clinical tests and patient history should be taken into consideration.

Para-Sympathetic Nervous System Dominance Tissue Alkalinity Pancreatic Activity Increased Adrenal Medullary Insufficiency Parathyroid Activity Increased Thyroid Activity Decreased Hypochlorhydria

Physical Characteristics May Include:

Fatigue Low Body Temperature Low Blood Pressure Orthostatic Hypotension Pear-Shaped Body Structure Cold Extremities

There are several sub-classifications of each metabolic type, ranging from Type #1 to Type #4. This is taken into consideration on their supplement and dietary recommendations. The extent to which the patient is manifesting these metabolic characteristics depends upon the degree and chronicity of the mineral patterns.

#### **RE-EVALUATION**

A re-evaluation is suggested at three months from the beginning of implementation of the TEI supplement program. However, if major symptomatic changes occur (other than from toxic metal removal), a retest can be submitted sooner.

## TRENDS

The following trends may or may not be manifesting in the patient at this time. Each trend that is listed is a result of research including statistical and clinical observations. This trend analysis is advanced merely for the consideration of the health professional, and should not be considered an assessment of a medical condition. Further investigation may be indicated based upon your own clinical evaluation.

#### \*\*\* SPECIAL NOTE \*\*\*

It must be emphasized that the following are only trends of potential health conditions. Realistically, the probability for each trend's occurance is based upon the degree and duration of the specific mineral imbalance. Since this analysis is not capable of determining either the previous degree of imbalance and/or previous duration, the trend analysis should only be used as an indicator to the health-care professional of potential manifestation's, particularly if the biochemical imbalance continues.

TENDENCY	1	2	3	4	5	6	7	8
ALLERGIES ANEMIA CHOLESTASIS CONSTIPATION DEPRESSION DERMATITIS FATIGUE HEADACHES LIVER DYSFUNCTION PERIODONTAL PROBLEMS								

## COMMENTS

## ALLERGIES AND COPPER:

The mineral copper is a constituent of the enzyme histaminase and the protein ceruloplasm, both of which have the ability to destroy histamine. Zinc is required for the storage of histamine. Since the patient's zinc level is low to copper, or the tissue copper level is elevated, a low serum histamine may be present. This may result in histamine depletion if chronic. Low histamine levels have been found in the serum of patients who suffer from allergies to foods and inhalants.

## ANEMIA AND EXCESS COPPER RELATIVE TO IRON:

Copper in excess amounts can contribute to iron deficiency anemia, by interfering with iron absorption and decreasing the metabolic activity of iron. A low iron to copper ratio indicates a trend toward anemia.

## CHOLESTASIS AND ELEVATED COPPER:

The patient's test results reveal an excess tissue copper level. A history of mononucleosis or hepatitis is frequently noted with this HTMA pattern. Since the mineral copper is normally eliminated via the liver, extrahepatic obstruction (cholestasis) may be present.

## DEPRESSION AND HIGH COPPER:

High tissue copper has been associated with an increased incidence of depression, especially in women, often occurring near their menstrual period. The causative role of excess copper in depression may be due to its producing neurotransmitter imbalances in the brain, or its interfering with other nutrient minerals such as iron, zinc and manganese.

## DEPRESSION AND HYPOTHYROIDISM:

An elevation of calcium relative to potassium is associated with hypothyroidism. Depression is often seen when a concomitant

DOCTOR REPORT PATIENT: STERRY, SAMANTHA

hypothyroid condition exists.

#### DERMATOSIS AND COPPER:

Copper is known to antagonize the metabolic activity of zinc as well as decrease its absorption. This may be a contributing factor to copper-induced dermatitis. Copper toxicity often produces skin rashes that are characterized by red itchy areas occurring on the face, neck, and lower back, on the thighs, and behind the knees.

#### FATIGUE:

High calcium to potassium is associated with an underactive thyroid. Fatigue is often a common complaint associated with low thyroid function.

## HEADACHES AND HIGH TISSUE COPPER:

Elevated copper has been implicated in producing headaches, usually occurring in the frontal region. Copper water pipes may contribute to high tissue copper levels. The patient's water may be sent for analysis to determine if it is a source of copper contamination.

#### HYPOADRENIA:

Low tissue sodium and potassium relative to calcium and magnesium is associated with adrenal insufficiency. This may result in low blood pressure, postural hypotension, and fatigue.

#### HYPOADRENIA AND EXCESS TISSUE COPPER:

Adrenal steroid production effects the regulation of copper excretion. Excess tissue copper levels indicate an adrenal insufficiency, especially in the slow metabolizer. Adrenal insufficiency and hypothyroidism frequently occur simultaneously; therefore, evaluation of thyroid function may be appropriate. Copper toxicity may not be due to excessive exposure, but rather to chronic low exposure and buildup resulting from an inability of elimination.

#### HYPOTHYROID:

High calcium relative to potassium indicates a tendency toward a low thyroid function. It has been found that an elevated TSH, even when circulating T-3 and T-4 are normal, is an early indication of hypothyroidism.

## HYPOTHYROIDISM AND COPPER:

The mineral copper appears to have a suppressing effect upon the thyroid gland. Excess copper can cause a potassium loss and elevation of tissue calcium.

## LIVER DYSFUNCTION:

High tissue copper levels are associated with decreased liver function. Copper is stored in the liver and eliminated via the gall bladder. Excessive accumulation of copper or its removal contributes to liver and gall bladder sluggishness. This can result in constipation and biliary stone formation due to incomplete emptying of the gall bladder.

#### PERIODONTAL PROBLEMS AND ELEVATED COPPER:

Copper is associated with the hormone estrogen. Studies have reported that shifts in hormonal levels can predispose women to problems ranging from bacterial overgrowth contributing to swollen gums and plaque formation.

## IMPORTANT NOTE ON TOXIC METAL ELIMINATION:

As toxic metals are mobilized from storage tissues for removal from the body, the patient may experience an exacerbation of his/her present symptoms or new symptoms associated with a particular mineral. If this occurs, or if the symptoms become too uncomfortable have the patient discontinue supplementation for three days, during which symptoms should be relieved. Have the patient then resume the program at one-third the recommended dosage, usually the PM portion, then gradually build up to twice per day and back to the full program. This may be done over a one to two-week period. If symptoms again arise, have the patient continue on only the PM portion for one week before increasing.

## **CONTRAINDICATIONS**

It is suggested that additional supplementation and/or intake of the following nutrients and food substitutes (if any) should be avoided by the patient until re-evaluation.

## \* THYMUS \*

The thymus has an opposing effect on the adrenal glands. As long as an adrenal insufficiency is indicated, thymus supplementation should be avoided.

#### \* COD LIVER OIL \*

Cod liver oil will contribute to an adverse reduction in the metabolic rate, which can result in increased fatigue and depression. It is suggested that cod liver oil be avoided until the biochemical pattern improves.

## **DIETARY SUGGESTIONS**

The following dietary suggestions are defined by several factors: the individual's metabolic type, mineral levels, mineral ratios, as well as the nutrient content of each food including protein, carbohydrate, fat, vitamins and minerals. Based upon these determinations, it may be suggested that foods be avoided or increased temporarily to aid in the improvement of this individual's chemistry.

#### GENERAL DIETARY PRINCIPLES FOR THE SLOW METABOLIZER:

A low protein, high carbohydrate, and high fat diet in addition to increased consumption of refined sugars and dairy products have a slowing-down effect upon metabolism and energy production.

- \* EAT A HIGH PROTEIN FOOD AT EACH MEAL...Lean protein is recommended and which should constitute at least 40% of the total caloric value of each meal. Recommended sources are lean beef, fish and fowl. Other good sources of protein include bean and grain combinations and eggs. Increased protein intake is necessary in order to increase the metabolic rate and energy production.
- \* INCREASE FREQUENCY OF MEALS...while decreasing the total caloric intake for each meal. This is suggested in order to sustain the level of nutrients necessary for energy production, and decrease blood sugar fluctuations.
- \* EAT A MODERATE AMOUNT OF UNREFINED CARBOHYDRATES...Carbohydrate intake should not exceed 40% of total daily caloric intake. Excellent sources of unrefined carbohydrates include whole grain products, legumes and root vegetables.
- \* AVOID ALL SUGARS AND REFINED CARBOHYDRATES...This includes white and brown sugar, honey, candy, soda pop, cake, pastries, alcohol and white bread.
- \* AVOID HIGH PURINE PROTEIN...Sources of high purine protein include: liver, kidney, heart, sardines, and mackerel.
- \* REDUCE INTAKE OF FATS AND OILS...Fats and oil include fried foods, cream, butter, salad dressings, mayonnaise, etc... Fat intake should not exceed 20% of the total daily caloric intake.
- \* REDUCE OR AVOID MILK AND MILK PRODUCTS...such as cheese, yogurt, cream, etc... These foods should be reduced to no more than once every three to four days.
- \* REDUCE FRUIT JUICE INTAKE...until the next evaluation. This includes orange juice, apple juice, grape juice and grapefruit juice. Vegetable juices are acceptable.
- \* AVOID CALCIUM AND/OR VITAMIN D SUPPLEMENTS

## FOOD ALLERGIES:

In some individuals, certain foods can produce a maladaptive or "allergic-like" reaction commonly called "food allergies". Consumption of foods that one is sensitive to can bring about reactions ranging from fatigue or drowsiness to rashes, migraine headaches and arthritic pain.

DOCTOR REPORT PATIENT: STERRY, SAMANTHA

hypothyroid condition exists.

#### DERMATOSIS AND COPPER:

Copper is known to antagonize the metabolic activity of zinc as well as decrease its absorption. This may be a contributing factor to copper-induced dermatitis. Copper toxicity often produces skin rashes that are characterized by red itchy areas occurring on the face, neck, and lower back, on the thighs, and behind the knees.

#### FATIGUE:

High calcium to potassium is associated with an underactive thyroid. Fatigue is often a common complaint associated with low thyroid function.

## HEADACHES AND HIGH TISSUE COPPER:

Elevated copper has been implicated in producing headaches, usually occurring in the frontal region. Copper water pipes may contribute to high tissue copper levels. The patient's water may be sent for analysis to determine if it is a source of copper contamination.

#### HYPOADRENIA:

Low tissue sodium and potassium relative to calcium and magnesium is associated with adrenal insufficiency. This may result in low blood pressure, postural hypotension, and fatigue.

#### HYPOADRENIA AND EXCESS TISSUE COPPER:

Adrenal steroid production effects the regulation of copper excretion. Excess tissue copper levels indicate an adrenal insufficiency, especially in the slow metabolizer. Adrenal insufficiency and hypothyroidism frequently occur simultaneously; therefore, evaluation of thyroid function may be appropriate. Copper toxicity may not be due to excessive exposure, but rather to chronic low exposure and buildup resulting from an inability of elimination.

#### HYPOTHYROID:

High calcium relative to potassium indicates a tendency toward a low thyroid function. It has been found that an elevated TSH, even when circulating T-3 and T-4 are normal, is an early indication of hypothyroidism.

## HYPOTHYROIDISM AND COPPER:

The mineral copper appears to have a suppressing effect upon the thyroid gland. Excess copper can cause a potassium loss and elevation of tissue calcium.

## LIVER DYSFUNCTION:

High tissue copper levels are associated with decreased liver function. Copper is stored in the liver and eliminated via the gall bladder. Excessive accumulation of copper or its removal contributes to liver and gall bladder sluggishness. This can result in constipation and biliary stone formation due to incomplete emptying of the gall bladder.

#### PERIODONTAL PROBLEMS AND ELEVATED COPPER:

Copper is associated with the hormone estrogen. Studies have reported that shifts in hormonal levels can predispose women to problems ranging from bacterial overgrowth contributing to swollen gums and plaque formation.

## IMPORTANT NOTE ON TOXIC METAL ELIMINATION:

As toxic metals are mobilized from storage tissues for removal from the body, the patient may experience an exacerbation of his/her present symptoms or new symptoms associated with a particular mineral. If this occurs, or if the symptoms become too uncomfortable have the patient discontinue supplementation for three days, during which symptoms should be relieved. Have the patient then resume the program at one-third the recommended dosage, usually the PM portion, then gradually build up to twice per day and back to the full program. This may be done over a one to two-week period. If symptoms again arise, have the patient continue on only the PM portion for one week before increasing.

Sensitivity to foods can develop due to biochemical (nutritional) imbalances, and which can be aggravated by stress, pollution and medications. Nutritional imbalance can further be contributed to by restricting food variety, such as eating only a small group of foods on a daily basis. Often a person will develop a craving for the food they are most sensitive to and may eat the same food or food group more than once a day.

The following section may contain foods that are recommended to be avoided. These foods should be considered as potential "allergy foods" or as foods that may impede a rapid and effective response. Consumption of these foods should be completely avoided for four days. Afterwhich, they should not be eaten more frequently than once every three days during course of therapy.

#### FOODS THAT MAY AFFECT THYROID ACTIVITY:

The following list of foods belongs to a family of foods that are known to decrease thyroid activity when eaten in appreciable quantities. If an under-active condition is present, excessive consumption can contribute to symptoms associated with hypothyroidism, such as: fatique, cold sensitivity, depression, weight gain, dry skin and hair, and constipation.

White Turnips

Fluorides

Horseradish

Chlorinated Water

Intake of the following foods should be reduced considerably until the next evaluation:

Cabbage
Rutabagas
Cole Slaw
Sauerkraut
Soybeans

Mustard Walnuts

#### FOODS THAT MAY IMPEDE ADRENAL FUNCTION:

The following foods should be reduced or completely avoided until the next evaluation, or until notified otherwise by the attending doctor:

Almonds Rass Cashews Garbanzo Beans Wild Rice **Brazil Nuts** Clams (raw) Tofu Soybean Flour Cocoa Powder Baker's Yeast Walnuts Pecans Peanuts Hazelnuts Chestnuts Tortilla Roll Spinach Molasses Figs (dried)

Torula Yeast

## AVOID DIETARY FATS AND OILS UNLESS NOTIFIED OTHERWISE BY ATTENDING DOCTOR:

The handling of fats is difficult during a reduced metabolic state, and can contribute to a further reduction in the metabolic rate. It is suggested that all sources of high dietary fat and oil be avoided until the next evaluation.



Sardines (canned)

Tuna (canned in oil)

Avocado Oil

Liverwurst

Coconut Oil

#### FOODS ALLERGIES RELATED TO COPPER:

Individuals with excessive tissue copper accumulation will often crave foods that are high in copper. The following foods, which are high in copper relative to zinc, should be avoided until the next evaluation:

Chocolate

Liver

Crab Herring Walnuts Lobster

Haddock Pecans Bran Flakes

Almonds

Peanut Butter Shrimp

Sesame Seeds

Trout

Bakers Yeast Mushrooms Brazil Nuts

Mushrooms Avocado Sunflower Seeds

Grapes

## REACTIONS ASSOCIATED WITH FOOD ALLERGIES

Excess intake of high copper foods has been associated with several reactions, both physical and emotional. Physical reactions may include frontal headaches, skin rashes, joint stiffness, constipation, insomnia causing morning fatigue, bloating, water retention and cold sensitivity. Emotional reactions may include depression, crying spells, fearfulness, anxiety, irritability, anger, aggressive behavior and withdrawal.

## FOODS HIGH IN PHYTIC ACID:

The following food sources may be increased in the diet until the next evaluation as they contain a high amount of phytic acid. Foods high in phytates will aid in reducing the accumulation of soft tissue calcium.

Oatmeal

Strawberries

Rye Bread

Whole Wheat

Blackberries

Brown Rice

Rye Crackers

Wheat Germ

## FOODS HIGH IN POTASSIUM RELATIVE TO OTHER SPECIFIC NUTRIENT CONTENT:

The following foods may be increased in the diet until the next evaluation:

Beef (lean)

Tomatoes

Raisin Bread

Whole Wheat Bread

Snapper

Cucumber

Rye Bread Ham Cornbread

Chicken

Celery

#### FOODS HIGH IN NIACIN:

Niacin (vitamin B3) is known to improve circulation, increase the metabolic rate via enzymes requiring B3, as well as help lower cholesterol and excess copper accumulation. The following foods are rich sources of niacin and may be eaten liberally:

Bran Flakes

Fish (broiled)

Beef

Tuna

Chicken (light)

Peas

## METHIONINE RICH FOODS:

The following foods are a rich source of the essential amino acid methionine, which supplies sulfur to the cells for the

DOCTOR REPORT PATIENT: STERRY, SAMANTHA

activation of enzymes, and energy metabolism. Sulfur is also involved in detoxification processes. Toxic substances are combined with sulfur, converted to a nontoxic form and then excreted. The following foods may be consumed liberally during course of therapy:

Bass

Trout Cod Tuna

Flounder Round Steak

Turkey

Mackerel

Short Ribs

Perch

Sirloin

Pumpkin Seeds

Swordfish

The above list of foods are also high in glutamic and aspartic acid. These amino acid proteins help to improve tissue alkalinity.

#### SPECIAL NOTE:

This analysis will list only a limited number of dietary foods to avoid or to increase in the diet. For those foods not specifically mentioned in this section, continued consumption on a moderate basis may be considered appropriate unless recommended otherwise.

NO PART OF THIS INTERPRETIVE REPORT MAY BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL, INCLUDING PHOTOCOPYING, RECORDING, OR ANY INFORMATION STORAGE OR RETRIEVAL SYSTEM WITHOUT PERMISSION IN WRITING FROM TRACE ELEMENTS, INC., U.S.A.

> InterClinical Laboratories Pty Limited Unit 6/10 Bradford Street, Alexandria, N.S.W. 2015, Sydney, Australia

Ph: (02) 9693-2888 Fax: (02) 9693-1888

Email: lab@interclinical.com.au

Authorized Representative for Australia and New Zealand

on them take mg 1.2. In she oracles CZ

John - OB

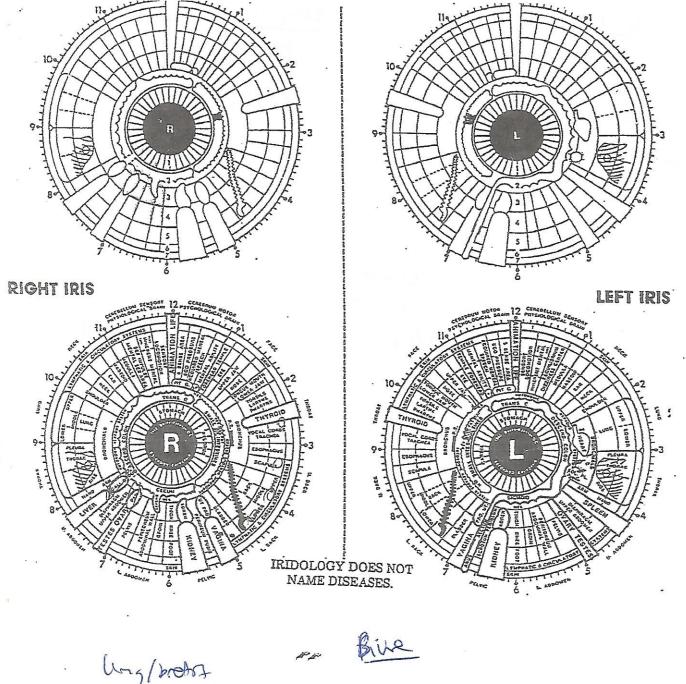
WY - NN - ( rond

The Greening) Int oxide 50/BCA -1.2moverible unbound copper (CP) That = Shess Tog
The Tog
The te.
The Combound) VV No + K+ see to. × unbound 1 row - mg, 1038 nedy retinal Hypothyteoid & Advers! Statt - Advand couldfully

Adoptioner

Cod Three one rehad (prospets mg)

I mg Diet: STEM DEVIATION WITH Systems: (digestive, bowel, respiratory circulatory, heart, reproductive, urinary, immune, sleep, tongue, sense organs, hair, skin, nails, eyes, extremeties, appearance.....) 8



ling/brotest

bust. Psoug Borcle

CHOI TO

ling)

SVW

Date:	11/3/10.
Name:	JAM STEPPLY
D.O.B.:	/
PH:	



Genetic Potential Through Nutrition

# Your Prescription

at

Please give 24 hours notice if you need to postpone an appointment so that others may use the time allocated to you.

Do not exceed recommended dosage. Take medication strictly as directed. If you have any issues or questions,

Supplementation Dosage:	please consult your Practitioner.							
Supplement	Dosage Instructions							
PHEE Perhaly hydroged Gus	e Gum 1 5000 1-2 x daily							
WILD -C	1-2 x daily							
GO LIVER OIC	2 daily							
INTESTACLERE (PARAMET)	I cosile 3 x daily them star							
LEN STIRT PLEEX (pensiler)	1 ( work 600) 3 x Al, with food							
SAI ON PROSIONE (MATIFIEDEA)	BE HOLZ 380.							
MTBIX PHYSE DETEX	I Jelspoon & BREAK COST							
DICEST - X ( ) GRESTON/Stools)	1 toplet MARKERIORENTATION OF OF THE							
*Maximum of 2 repeat scripts per supplement. This script is valid until  Additional Supplement Directions:	. After this time please return to your Practitioner.							
Dietary Recommendations: 1001 50042	Driey Corfee And Wist							
HAS 2 TABLESpons	of Flax 55208 DAINY							
Lifestyle Recommendations:   A DACE NOR  .	BATA GOOY TEMPS COMES -> See hadout							
Practitioner Name:	Registration No:							
Clinic contact details:	Your next appointment is on							

they lend water. por phore -Cog imas oil Bovers Every and Day now on prex 1 so daily \* Fect deplered on way to period \* Herry Presid charges cup missed 2 in between f Adreal cockbult. & intermittent body on toff - 56th looks 400 of Neder hosed Thomas ng \$ not of much who -c STILL ON DICLEIDE & lumphology # A drit bake PKq.A LIVE - Bowel - Alexan - St. in Mannsfor room willy - feel x - many phas - DICESU-X

30/2/20

Date:	Metagenics
Name: SAM STERRY	Genetic Potential Through Nutrition
D.O.B.:	
PH:	Your Prescription
	Do not exceed recommended dosage. Take medication strictly as directed. If you have any issues or questions,
Supplementation Decome	please consult your Practitioner.
Supplementation Dosage:	
Supplement	Dosage Instructions
WILD - C ( to copped + V.	and I - 2 y daily
God liver but (for VIA	~~ A + D) 2.3 C/px 60 dail
machening soms (elen	ental, 2 × da, 1/1
mush off PEEX	AS Lunch
STAM ON PHOTE	1-L y daily
D16959 - X (BOWELT) ON	ENSINE AND BEFORE BED
PROBIOTIC.	884022 BED
MATRIX PHATE DETRY	! I terspoon IN a little water
*Maximum of 2 repeat scripts per supplement. This script is valid until  Additional Supplement Directions:	After this time please return to your Practitioner.
3) & PAIRLOY - Y Intinen	mi 1 5000 7 x days
+ energy	
(1) (3) 180m VITALL	
	Most Mprosphere
Dietary Recommendations:	orabling - Touldon
	or casules
=> When I makely	phre debrer
	nutres.
	******
y singura	000
Lifestyle Recommendations:	BASIN BODY TEMPSTAINES
	> ALV LET AS Know
Practitioner Name:	Registration No:
Clinic contact details:	
Chine Contact actums.	

Your next appointment is on \_\_\_\_\_

Please give 24 hours notice if you need to postpone an appointment so that others may use the time allocated to you.

Date: 1913 118 Name: 500 51269 D.O.B.:					Metag Genetic Potential T	enics Through Nutrition
PH:			strictly as di	Your Pres ed recommend rected. If you have sult your Practiti	ed dosage. Take ave any issues o	medication r questions,
Supplementation Dosage:				,		
Supplement	Breakfast  Dose  Before During	After Before	Lunch Dose During After	Dinner  Dose  Before During	Bedtime After	Away from With Meals Meals
terms tolis		V				
you ar morse	to	***	daily	194	aflerno	n 1
CLEXE SKIN	2	czysule,		410.	2 ( -)	sules
in a west increase	to 3	caps do	3		3 (4)	les-
INNEL HEALTH PR	US					
*Maximum of 2 repeat scripts per supplement. This	s script is valid till			. After this time p	ease return to you	ur Practitioner.
Additional Supplement Directions:	much of	f v	TEX	be il	neecl	
Dietary Recommendations:	5 1 -					
To the purious						
AUSD (MEIC	PARASIT	TREE S	HT26	-Bj-		
4					- C	
ifestyle Recommendations:	42/2	<u>R</u> A	JAC II	8004	12 mpr Ro	nes
		=)	see	hadaA		
ractitioner Name:			Registratio	on No:		
Clinic contact details:		Your n	evt appointm			

Please give 24 hours notice if you need to postpone an appointment so that others may use the time allocated to you.

ET5233 - 09/17

12/6/18 # SKN clesod up ferme Faite t after stapped Clex/St.V not regular -> started lumphatory dong 5:2 diet 2 8245 - 5745 + 8998 5 days - whosever posta etc. Dainy - mix in cottee ) fen x week there few x week Live Dred - laternalu, - trasfator - good masly headache + ord cells - wom/ - + celly out not out it is a - De styrecyles

Date:	Metagenics
Name: SAM STEER 1	Genetic Potential Through Nutrition
D.O.B.:	Vous Proscription
PH:  Supplementation Dosage:	Your Prescription  Do not exceed recommended dosage. Take medication strictly as directed. If you have any issues or questions, please consult your Practitioner.
Supplementation Dosage:	
Supplement	Dosage Instructions
Cod hure one (VIAnina)	. 2.3 caparles daily
Moneson	20mg 2 x daily
BE: POILEV	12 ISPA AT BREAVEAT.
Schoole free? To order	or tryad Admelsi
PARASITES (INTESTACLEDE)	1 casse 3 x dily terrenton
- 19610 ou 5000 -	belone bed.
- whole food Wromin C	- ord e/
C. C. 1 118(cspoord 1V	EE (1425~) NAEA (5
*Maximum of 2 repeat scripts per supplement. This script is valid until	. After this time please return to your Practitioner.
Additional Supplement Directions:	sectants is see honder
mid making and mil	A sterness (hit wild C)
* APPLI CIDER VINERALE:	2 ENDINE A CHIE
UNITE DIFFETT SACH MAS	
Dietary Recommendations:	EICH FORDS - buter/ocanic
1 5 23 (cd) 8005 Migu	CHSE beef WERCOM
)4	(lapsules)
* BOAD SAL COPPIE . 588	DS CAPSICUME DUSTINES
200 m 11 0 866	

2) THIELD

S) YOUR MUNESIAN CORPLE ALD VIANIN A COURT

Practitioner Name: \_\_\_\_\_\_ Registration No: \_\_\_\_\_\_

Clinic contact details:

Your next appointment is on \_\_\_\_\_

t

Please give 24 hours notice if you need to postpone an appointment so that others may use the time allocated to you.

28/1/20 Decep - Annsiter 1 - Nomena esizphil TO WECK - t-eally - orlell POST \$ 40 mn & poude Cod lines oil munfield \$ 10 8+4 4/2/120

dance refers and

Date:	14/6/18.
Name: _	JAM FERRY
D.O.B.:	
PH:	



## Your Prescription

Do not exceed recommended dosage. Take medication strictly as directed. If you have any issues or questions, please consult your Practitioner.

## Supplementation Dosage:

Supplement		Dose			Dose			Dose			Bedtime from Meals	
	Before	During	After	Before	During	After	Before	During	After		Medis	
MAENERUM			V						6			
Limphalox			/						V			
OICLEAR			/						/	4		
FEMME FORTE			/									
Persiona										/		
( Holps remove boo	-1 (	)95hr	gen:	-	d n.	14	non	nter				
		<u></u>							)			
*Maximum of 2 repeat scripts per supplement. Thi	s script i	s valid ti	:11				. After th	is time p	olease re	turn to y	our Prac	titioner.
Additional Supplement Directions:					-had	.¥.		· .				
	<del></del>	-										11
Dietary Recommendations:	R	RA	Th	RI	101	-	12.0-	050	ATE	15 10	2 3	
TAKE HO		130	NVI	. †	The state of the s	ا کسط	Beice	L C	(1.82	2	(m) +	-
	1					/ W			1	P	)	
* Aros DARRY	5	160	7	Ar	DH	h	MSH.	1.				
4 Follow					- 1	- V				40	DIE	7 .
Lifestyle Recommendations:												
												44
							4 1 1					
Practitioner Name:					_ Reg	gistratio	on No:					
Clinic contact details:										·		

Please give 24 hours notice if you need to postpone an appointment so that others may use the time allocated to you.

Your next appointment is on \_

12/3/20 3 Abspoon. Puting Flagreed in smoother horning stipped elm \$ still on harbor. not soring daily every > had a restly heavy period Shirl book of - 20012 3 Hang Distanceof EASTA (on ecp) Abrevol Cocketals - expre mice (sea sof) even of the When Het Fitty / for an 2-3 days meak light nexts from 2-3 pm losy weight abdoned mosed 2 morns from horry preprod User 2 cup (90 mis) draged 3 x Any 2 July possible Nesdy framed intertilese Dred Live - 900 - orde celts Barel -mild - good - prostoly