



CLIENT FOLLOW UP FORM

Client Name: Claudia Gomez

Date: 10/10/25

Email:

Practitioner: Leigh Gibbs

PATHOLOGY FINDINGS	Bloodwork/Stool
	Elevated Liver Enzymes High tgl. High anion gap. - Metabolic Syndrome? Low Vit D 70. AST:ALT = 0.66 - NAFLD
PROGRESS	How have you been feeling since our last session? Have you noticed any improvements or changes in your symptoms or condition?
	Likes tea. Passing 1 per day. Digestion better.
SYMPTOMS	Are there any particular symptoms or issues that have improved or worsened? Please describe any new symptoms or changes you have experienced.
	Indigestion at night time. After dinner. Feels heavy. Sleep sitting up for a while Every now again feel a squeezing in the chest. Mid thoracic. Heat and rubbing helps it - ??
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?
	Yes. Forgot to do the apple cider vinegar.
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?
	Fine.
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?
	All good.
SLEEP	Better, worse?
	No changes.
DIGESTION	Have there been any changes in your digestion or bowel movements? Are you experiencing any bloating, constipation, diarrhea, or other digestive issues?



	Leaving marks. Gall bladder.
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?
	Drinking more water. 10 times a day peeing.
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?
	Weight Management.
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?
	Nope. Gastro enterologist middle of November. Weight for next appt
TREATMENT	Aims and suggestions for this appointment.
	Herbs to support liver. And gall bladder. D Minder App. Inflammation. Celtic sea salt in water. Rosemary, St Marys, Globe, Shisandra, Fennel, Maritime Pine, Gymnema. Consider Choline & DHA?
FOLLOW UP APPT:	In 3 weeks.

