



CLIENT FOLLOW UP FORM

Client Name: Janine Dungate

Date: 20/11/25

Email:

Practitioner: Leigh Gibbs

PATHOLOGY FINDINGS	Bloodwork/Stool
	Colonoscopy all good. Haemorrhoids small. Sensitive stomach GP. Recommended to see a dietician.
PROGRESS	How have you been feeling since our last session? Have you noticed any improvements or changes in your symptoms or condition?
	Garlic burping for hours. Had avocado - bloating. Indigestion symptoms. Rice - bloating also gluten free bread.
SYMPTOMS	Are there any particular symptoms or issues that have improved or worsened? Please describe any new symptoms or changes you have experienced.
	Head cold, sinus pain. Pressure. Mild headaches. Avocado makes her worse Dry eyes. Sore and stingy. Neck and shoulder pain on 1 side. Randomly. CYCLE - regular 26-28 days.
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?
	Not taking the enterozyme. 2 caps. In morning. Sulphoraphane - When she was taking them at night making her burp. Gi Revive still - morning and with dinner. Vit B. Ca & D. Fish oil. Magnesium at night.
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?
	New job good. Less stressed. Front desk
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?



	Nervous system settled. Good, been exercise.
SLEEP	Better, worse?
	Good - wake up once - toilet. Hot. Easily back to sleep.
DIGESTION	Have there been any changes in your digestion or bowel movements? Are you experiencing any bloating, constipation, diarrhea, or other digestive issues?
	Burping after smoothie - sometimes repeats. Better stools. Well formed.
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?
	Lunch chicken & a sweet potato gluten free wrap. Lettuce, cucumber, carrot, Mayonnaise. Whole egg mayonnaise. Melons are good, rockmelon. Watermelon can burp. Apple are good. Strawberries and raspberries. Dinner - all meat fine. Red meat - Paleo bread - histamine?? Pumpkin seeds.
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.
	Run out of enterozyme. Bone broth mayo. Stay off rice. Go off GI Revive. Gemmune IB. 1/day. GFE for 2 weeks. Bs 1 x every 2 days. Ca & D?? Replace? Stay off Enterozyme. Check in if any issues.
FOLLOW UP APPT:	

