



## NUTRITIONAL CONSULT INTAKE

Name \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_ Weight \_\_\_\_\_ Height \_\_\_\_\_

### CURRENT HEALTH CONCERNS

Example - Overweight, fatigue, hormone imbalance, prescription medications, general wellness...

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

### HEALTH GOALS

Example - Lose weight, improve labs (A1C, Cholesterol, sugar spikes), better digestion

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

In preparation for a nutritional consultation, please gather any recent lab work you may have. These may include:

Hemoglobin A1C

Lipid Panel (cholesterol)

Complete Blood Count

Blood Pressure

Vitamin D

Iron Panel

Metabolic Panel

Thyroid/Hormone Panel

Imaging Reports

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If you have completed a neurotransmitter (provided by the office) results will be reviewed during consultation. Date submitted \_\_\_\_\_

# CURRENT MEDICATIONS

Statin/Cholesterol      Fosamax/Bone Density      Pain Relief/NSAIDS      Blood Pressure      Metformin/ GLP-1  
SSRI (Anti Anxiety/ Anti Depression)      Acid Reducer      Auto Immune      Cardiac      Ozempic/Weight Loss

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# CURRENT SUPPLEMENTS/ HERBS

Vitamin: A B C D E      Fish Oil      Glucosamine      Multi-Vitamin      Turmeric      Zinc

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## OFFICE USE

Nutritional Consultation Appointment \_\_\_\_\_

### Follow - Up

Phone Call

1 2 3 4 5

Week Month

Following \_\_\_\_\_

In Office Visit

### Additional Testing

Nuetrotransmitter     Cortisol     Systems Survey     W/H Ratio \_\_\_\_\_

Pluse Ox     Zinc     Stress Test     HSR     Clinical \_\_\_\_\_

### Protocol

Detox 10 / 28 Day     Neuro/Brain     Metabolic/Diabetes     Bone Health

GI     Stress     Hormonal     Cholesterol     Foundational     Immune Health

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