

# The Triad of Dysfunction: Clinical Sequencing Worksheet

Client Name: \_\_\_\_\_ Date: \_\_\_\_ Primary Concern: \_\_\_\_\_

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## Section 1: The Triad Screening (Symptom Clusters)

*Check all that apply to identify the "Three-Headed Hydra" presence.*

### Cluster A: CIRS (Biotoxin Illness)

- ☐ History of exposure to Water Damaged Buildings (WDB)
- ☐ "Ice pick" pains or migrating joint pain
- ☐ Metallic taste in mouth or static shocks
- ☐ Sensitivity to light and/or morning stiffness
- ☐ *Known HLA-DR Genetic Susceptibility?* [ Yes / No / Unknown ]

### Cluster B: MCAS (Mast Cell Activation)

- ☐ Reacts to many foods, smells, or jewelry (nickel)
- ☐ Sudden flushing, hives, or unexplained itching
- ☐ Tachycardia (racing heart) or "air hunger"
- ☐ Symptoms worsen with heat, vibration, or stress
- ☐ History of "reacting to everything" (supplements/meds)

### Cluster C: Stealth Infections (Lyme & Co.)

- ☐ History of tick bite or "bullseye" rash
  - ☐ "Crushing" fatigue that doesn't improve with rest
  - ☐ Night sweats or air hunger (Babesia indicator)
  - ☐ Foot pain or "cat scratch" stretch marks (Bartonella indicator)
  - ☐ Flu-ish feeling that cycles or comes and goes
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## Section 2: Clinical Sequencing Planner

Follow the CFMP™ Protocol order. Do not move to the next step until the current step is "Stable."

Step	Phase	Action Plan / Specific Recommendations	Status
1	Safety & Environment	Remediation, HEPA filters, moving out of mold.	[ ]
2	Mast Cell Stability	Quercetin, Luteolin, Holy Basil, Low Histamine Diet.	[ ]
3	Drainage Pathways	Support liver, lymph, and daily bowel movements.	[ ]
4	Gentle Binding	Introduce Charcoal, Clay, or Zeolite (Start low/slow).	[ ]
5	Targeted Clearing	Antimicrobials for Lyme/Bartonella/EBV.	[ ]

### Section 3: Cell Danger Response (CDR) Assessment

**Current State (Circle One):** \* **CDR1 (Defense):** Inflammation, high reactivity, low energy, "stuck" in survival mode. \* **CDR2 (Repair):** Starting to rebuild, less reactive, but still easily fatigued. \* **CDR3 (Recovery):** Returning to normal function, improved mitochondrial output.

**Observations on Reactivity:**

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### Next Steps & Practitioner Notes:

1. Immediate Priority: \_\_\_\_\_
2. Referrals Needed (Testing/Remediation): \_\_\_\_\_
3. Follow-up Date: \_\_\_\_\_

**Practitioner Signature:** \_\_\_\_\_

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