THE MULTI-SYSTEM MATRIX: Symptom Mapping & Progress Tracker

Client Name: _____ Date: __ Practitioner: _____ Phase: [ ] Discovery [ ] Implementation [ ] Maintenance

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Section 1: The Bio-Individual Threshold (The "Beaker" Assessment)

Identify the "liquids" filling your beaker. Check all that apply to determine your current total toxic burden.

Foundational Load: - [ ] Known Genetic SNPs (MTHFR, COMT, etc.) - [ ] History of Chronic Stress/Trauma - [ ] Environmental Exposure (Mold, Heavy Metals, Pesticides) - [ ] History of Frequent Antibiotic/Medication Use

Current Triggers (The "Overflow" Factors): - [ ] Poor Sleep Quality (<7 hours or restless) - [ ] High Sugar/Processed Food Intake - [ ] High Occupational/Relational Stress - [ ] Known or Suspected Infections (EBV, H. Pylori, Candida)

Section 2: Multi-System Symptom Mapping

List your top 10 symptoms. Use the "Primary Node" column to identify where the "traffic" is heaviest (Assimilation, Defense/Repair, Communication, Energy, Biotransformation).

Symptom Cluster (e.g., Bloating, Fog, Joint Pain)	Intensity (1-10)	Primary Node (Practitioner Use)	Secondary Intersecting Node
1.			
2.			
3.			
4.			
5.			
6.			
7.			

Symptom Cluster (e.g., Bloating, Fog, Joint Pain)	Intensity (1-10)	Primary Node (Practitioner Use)	Secondary Intersecting Node
8.			
9.			
10.			

Section 3: Cross-Talk & "Lead Domino" Analysis

Practitioner Observations (Identify the Systemic Saboteurs):

- [ ] **Gut-Brain Axis:** Is intestinal permeability driving microglial activation (brain fog/anxiety)?

- [ ] **Adrenal-Thyroid Sabotage:** Is HPA-axis stress driving high Reverse T3 (fatigue/weight gain)?

- [ ] **The Common Denominator:** Which node appears most frequently in Section 2? _____

- [ ] **The Lead Domino:** What is the ONE intervention that will impact the most nodes? _____

Section 4: The "Zig-Zag" Progress Tracker

Healing is non-linear. Use this to track weekly trends rather than daily fluctuations.

Week #	Avg. Energy (1-10)	Top Symptom Flare? (Y/N)	Stress Level (1-10)	Notes (Sleep, Digestion, Mood)
Week 1				
Week 2				
Week 3				
Week 4				

Reflection / Beaker Level: *Compared to last month, how "full" does your beaker feel? (0% Empty to 100% Overflowing): ___%*

Next Steps:

1. **Primary Focus: _____**

2. **"Home Renovation" Priority:** [ ] Plumbing (Gut) [ ] Insulation (Toxins) [ ] Wiring (Nerves)

3. **Next Appointment Date: _____**

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