Immune Matrix & Pattern Assessment Tool

Client Name: __ *Date:* _____

Objective: To move from a "Warfare Model" (killing invaders) to a "Homeostatic Surveillance Model" by identifying immune triggers, T-Helper patterns, and subclinical trends in blood chemistry.

Section 1: The "Reveal" (ROOTS Method™ Triggers)

Check any that apply to identify the primary "alerts" currently signaling the immune system.

Digestive Status (The Gut-Immune Connection) - [ ] History of PPI or antacid use (potential for intestinal permeability) - [ ] Frequent bloating, gas, or food sensitivities - [ ] History of "stomach bugs" or food poisoning

Nutrient Foundations (Raw Materials) - [ ] Low Vitamin D levels (or lack of sun exposure) - [ ] White spots on fingernails/frequent colds (potential Zinc deficiency) - [ ] Low intake of Vitamin A-rich foods (liver, orange/yellow vegetables)

Lifestyle Stressors (Immune Regulators) - [ ] High-stress career or personal life (Elevated cortisol/NLR) - [ ] Poor sleep quality (less than 7 hours) - [ ] History of chronic viral infections (EBV, Shingles, Cold Sores)

Section 2: The T-Helper "Teeter-Totter" Pattern Analysis

Categorize symptoms to determine the dominant immune trend.

Pattern	Clinical Manifestations (Check all that apply)	Indication
Th1 Dominant	[ ] Hashimoto's [ ] Type 1 Diabetes [ ] Chronic Viral Load	Organ-specific autoimmunity
Th2 Dominant	[ ] Seasonal Allergies [ ] Eczema/Rashes [ ] Asthma [ ] Chemical Sensitivity	Humoral/Allergic response
Th17 (Firestarter)	[ ] Rheumatoid Arthritis [ ] Crohn's/UC [ ] Severe Joint Stiffness/Flares	High tissue destruction

Pattern	Clinical Manifestations (Check all that apply)	Indication
Treg (Firefighter)	[ ] "Always Sick" [ ] Symptoms never resolve [ ] Multiple food/env. triggers	Failure of resolution

Section 3: Functional CBC Quick-Check

Compare standard lab results against functional ranges to identify subclinical trends.

Marker	Standard Range	Functional Range	Client Value	Trend (High/Low)
WBC Count	3.4 – 10.8	**5.0 – 7.5**		
Neutrophils	40 – 75%	**50 – 60%**		
Lymphocytes	20 – 45%	**25 – 35%**		
Monocytes	0 – 12%	**0 – 7%**		
Eosinophils	0 – 5%	**0 – 3%**		
NLR Ratio*	N/A	**< 2.0**		
Neutrophil-to-Lymphocyte Ratio (Neutrophil % divided by Lymphocyte %)				

Section 4: Practitioner Observations & Reflection

Primary Immune Pattern Identified: _____ *(e.g., Th2 dominance with suspected Zinc deficiency and gut permeability)*

Key "Resolution" Priorities: 1. _____ 2. _____

Next Steps (Optimize & Target):

- [ ] **Gut Support:** Seal boundaries to reduce antigen load.
- [ ] **Nutrient Repletion:** Focus on Vitamin D, Zinc, and Vitamin A.
- [ ] **Modulation:** Use specific immunomodulators to balance the Th-teeter-totter.

- [ ] **Re-evaluate:** Schedule follow-up CBC in 3–4 months to track NLR and Monocyte trends.

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