

R.O.O.T.S. Method™: Symptom Reveal & Vitality Scorecard

Client Name: _____ Date: _____

Instructions: This tool is designed for the **Reveal** phase of your journey. It helps identify underlying imbalances and "Total Body Burden." For Section 1, rate each symptom based on the last 14 days: * **0** = Never/Not present * **1** = Mild (Occasional, does not interfere with life) * **2** = Moderate (Frequent, interferes with daily tasks) * **3** = Severe (Constant, debilitating)

Section 1: Symptom Inventory (The Reveal)

Category	Symptom	Score (0-3)
DIGESTION	Bloating, gas, or reflux	—
	Irregular bowel movements	—
ENERGY	Afternoon "slump" or caffeine reliance	—
	Waking up feeling unrefreshed	—
COGNITION	Brain fog or lack of focus	—
	Mood swings or irritability	—
RESILIENCE	Difficulty falling or staying asleep	—
	Sensitivity to smells, lights, or sounds	—
	TOTAL SCORE:	—

Section 2: Vitality Habit Tracker (The Sustain Phase)

Track these "Bio-Individual Minimums" for one week to identify patterns.

Day	Hydration (80oz+)	Movement (20 min)	Protein at Breakfast	Sleep (7-8 hrs)
Mon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Day	Hydration (80oz+)	Movement (20 min)	Protein at Breakfast	Sleep (7-8 hrs)
Tue	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thu	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fri	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sun	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 3: Scoring & Clinical Reflection

Total Symptom Score Interpretation: * **0-5:** Maintenance Phase (Focus on the *Sustain* Membership) * **6-15:** Moderate Burden (Focus on the *Optimize* Group Program) * **16+:** High Clinical Burden (Focus on the *High-Ticket Mastermind*)

What is the #1 symptom currently preventing you from showing up fully in your life/work?

On a scale of 1-10, how ready are you to address the ROOT cause of these symptoms? __

Next Steps:

☐ **Schedule Lab Review:** Review "Reveal" markers (TSH, Ferritin, Vitamin D). ☐

Ecosystem Match: Based on your score, the _____ program is your best fit. ☐ **Resource:** Download the *Complete Lab Interpretation Manual* from the client portal.

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