

Poly-Pharmacy & Nutrient Depletion Audit

Client Name: _____ Date: _____ Practitioner: _____ Complexity Score (0-10): _____

Section 1: The Poly-Pharmacy Landscape

List all current medications (prescribed and OTC). Poly-pharmacy is defined as 5+ medications.

Medication Name	Purpose/Condition	Duration of Use	Dosage
1.			
2.			
3.			
4.			
5.			
6.			

Section 2: The "Reveal" – Metabolic Sensitivity

Check all that apply to identify potential CYP450 "Poor Metabolizer" phenotypes.

- History of "extreme sensitivity" to standard medication doses.
- History of medications "never working" even at high doses (potential Ultra-Rapid Metabolizer).
- Multiple "paradoxical" reactions (meds cause the opposite of intended effect).
- Known genetic SNPs (e.g., CYP2D6, CYP3A4, CYP2C19) from previous testing.
- Chronic "brain fog," muscle pain, or fatigue that started *after* a specific prescription.

Section 3: The "Organize" Phase – Nutrient Depletion Mapping

Cross-reference Section 1 with common depletions. Note any symptoms the client is experiencing.

Medication Category	Likely Nutrient Depletions	Client Symptoms (e.g., cramps, fatigue)
Statins	CoQ10	
Metformin	Vitamin B12, Folate	
PPIs / Acid Blockers	Magnesium, B12, Calcium, Zinc	
Diuretics / BP Meds	Magnesium, Potassium, Zinc, B1	
Oral Contraceptives	B-Vitamins, Magnesium, Selenium	

Section 4: "Red Flag" Interaction Screening

Safety check: Are any of these high-risk combinations currently present?

- [] **Serotonin Risk:** Is the client taking an SSRI/SNRI **AND** 5-HTP or L-Tryptophan?
- [] **Metabolic Inhibition:** Is the client taking Berberine **AND** medications like Cyclosporine or Clarithromycin?
- [] **Clearance Risk:** Is the client using St. John's Wort **AND** Birth Control or Blood Thinners?
- [] **Absorption Risk:** Are supplements and medications taken within the same 2-hour window?

Section 5: Strategic Integration Plan

The 2-Hour Rule: All supplements must be taken at least 2 hours apart from pharmaceutical medications. **Titration Schedule:** - **Week 1-2 Focus:** Introduce ONE depletion replacement (e.g., CoQ10 for Statin users). - **Monitoring:** Watch for increased medication sensitivity as cellular function improves.

Practitioner Observations & Reflection:

Are the client's "crisis" symptoms likely the disease process, or iatrogenic (medication-induced) depletions?

Next Steps for the Medical Team:

- [] Provide client with "Professional Script" for their MD.
 - [] Suggest MD monitor: [] B12 Levels [] Magnesium [] A1c [] Liver Enzymes
 - [] Schedule follow-up audit in 4 weeks.
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