

Defense & Repair: Immune Function Mapping Tool

Client Name: _____ Date: _____

Section 1: The "Three I's" Assessment

Identify the primary drivers of the client's immune presentation. Check all that apply and provide specific details (e.g., "Post-viral fatigue" or "Th1 Dominance").

- ☐ **Inflammation:** (Systemic, localized, metabolic/meta-inflammation)
 - *Details:* _____
- ☐ **Infection:** (Occult pathogens, EBV, Lyme, Gut Dysbiosis, Viral load)
 - *Details:* _____
- ☐ **Insults:** (Environmental antigens, mold, toxins, physical trauma, NSAID use)
 - *Details:* _____

Section 2: Immunological ATMs (Contextual Mapping)

Map the timeline of the immune response to identify why the system is stuck.

Category	Definition	Client Specifics (Notes)
Antecedents	Pre-existing (Genetics, birth, trauma)	
Triggers	Discrete events (Infections, mold, loss)	
Mediators	Factors keeping it going (LPS, Stress, IL-6)	

Section 3: Functional Lab Interpretation (CBC with Diff)

Use the client's most recent Complete Blood Count (CBC) to calculate the **Neutrophil-to-Lymphocyte Ratio (NLR)**.

Formula: Absolute Neutrophils ÷ Absolute Lymphocytes = **NLR**

- **Client NLR Score:** _____
- **hs-CRP (if available):** _____

Interpretation Guide: * **1.0 – 2.0:** Optimal / Healthy Balance. * **> 2.5:** Early systemic inflammation; shift toward innate immunity dominance. * **> 3.0:** Significant physiological stress; high metabolic/cardiovascular risk.

Section 4: The Immune-Endocrine Bridge

Is chronic inflammation causing "static" on the hormone lines? (The Doorbell Analogy)

- ☐ **Signs of Insulin Resistance:** (Elevated glucose despite diet, waist-to-hip ratio)
 - ☐ **Signs of Thyroid Resistance:** (Normal TSH but low T3, cold hands, fatigue, thinning hair)
 - ☐ **Cytokine Indicators:** Is there evidence of high TNF- α or IL-6 (e.g., "creaky" joints, brain fog)?
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Section 5: Case Conceptualization & Reflection

Primary Node Overlap: How is Defense & Repair affecting other nodes? (e.g., "*Gut permeability (Assimilation) is driving LPS (Mediator) which is raising NLR (Defense).*")

The "Music" Level: On a scale of 1-10, how loud is the inflammatory "music" (cytokines) preventing the hormones from being heard? ____

Next Steps / Intervention Strategy:

- ☐ **Reduce Mediators:** (e.g., Omega-3s, Curcumin, Sleep hygiene)
 - ☐ **Address Triggers:** (e.g., Gluten removal, Gut protocol)
 - ☐ **Follow-up Lab Date:** _____
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