

The Clinical Logic & "Non-Responder" Troubleshooting Map

Client Name: __ Date: __ Current Protocol Week: __

Section 1: The Bias Check (Practitioner Self-Audit)

Before analyzing the client, analyze your own thinking to avoid "Protocol-itis."

- ☐ **Anchoring Bias:** Am I over-relying on the client's initial diagnosis or my first impression?
- ☐ **Confirmation Bias:** Am I only looking for data that supports my "favorite" root cause (e.g., Mold, SIBO)?
- ☐ **Availability Heuristic:** Am I treating this client exactly like my last "success story" without looking at their unique terrain?
- ☐ **Expert Blindness:** Have I spent enough time in the "Reveal" and "Organize" phases, or did I jump to "Target"?

Section 2: Driver vs. Compensation Analysis

Distinguish if the symptoms are the "Fire" (Driver) or the "Smoke" (Compensatory Mechanism).

Current Symptom/Lab Marker	Is this a Primary Driver?	Is this a Compensation? (The body's adaptation)	Potential Hidden Driver to Investigate
<i>Example: High Reverse T3</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<i>Systemic Inflammation / LPS</i>
1. _____	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. _____	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. _____	<input type="checkbox"/>	<input type="checkbox"/>	_____

Section 3: Hierarchy of Intervention Checklist

Ensure "Stability Before Specificity." If the client is reactive, check your order of operations.

Phase	Priority Area	Status (Ready/Needs Work)	Notes/Observations
1	Nervous System: Is the client in sympathetic "fight or flight"?	<input type="checkbox"/>	
2	Blood Sugar: Is there glycemic variability/nocturnal hypoglycemia?	<input type="checkbox"/>	
3	Drainage: Are bowels moving 1-2x daily? Is hydration/kidney support OK?	<input type="checkbox"/>	
4	Targeted: Are we using high-potency antimicrobials or hormones?	<input type="checkbox"/>	

Section 4: "Non-Responder" Troubleshooting Logic

Current Plateau Description: _____

The Differential Pivot: If the "Target" (e.g., Thyroid) is supported but "Energy" (e.g., Fatigue) is still low, what is the unaddressed node? - ☐ **Biotransformation Node:** (Hidden toxins, mold, heavy metals, poor phase II detox) - ☐ **Immune Node:** (Occult infections, latent viruses, dental cavitations) - ☐ **Assimilation Node:** (Malabsorption despite "clean" diet, occult parasites)

Reflection & Clinical Intuition

What is the client's body "intelligently" trying to do with these symptoms?

Next Steps:

1. _____
 2. _____
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