

# Polypharmacy & Nutrient Depletion (DIND) Integration Worksheet

Client Name: \_\_\_\_\_ Date: \_\_\_\_ Primary Physician: \_\_\_\_\_ Current Med Count: \_\_\_\_\_

---

## Section 1: The Medication Matrix & Nutrient Debt

List current medications and identify potential Drug-Induced Nutrient Depletions (DINDs) based on the L3 Integration Table.

Medication Name	Drug Class (e.g., Statin, PPI, Metformin)	Potential Depletions (CoQ10, B12, Mg, etc.)	Associated Symptoms (Cramps, Fatigue, Fog)

## Section 2: "Low and Slow" Implementation Tracker

To minimize immunological flares or Herxheimer reactions, introduce ONE high-potency nutraceutical every 4–5 days. Use this section to monitor the "Target" phase.

Date Started	Nutraceutical & Dosage	Synergy Goal (e.g., Statin Support)	Reaction/Tolerance (1-10)

**Detoxification Readiness Checklist:** - ☐ Bowels moving 1–2x daily? - ☐ Hydration (min. 2L water/day)? - ☐ Binders available (e.g., Charcoal/Pectin) if flare occurs? - ☐ Lymphatic support (dry brushing/movement) active?

## Section 3: Physician Collaboration Preparatory Notes

Use the R.O.O.T.S. Method™ to prepare for a collaborative tapering conversation with the client's prescribing physician. Note: We do not alter prescriptions; we document physiological readiness for the MD to review.\*\*

**Objective Improvements Documented:** - ☐ Weight Loss: \_\_ lbs - ☐ BP Log Average: \_\_ / \_\_  
- ☐ Fasting Glucose/HbA1c: \_\_ - ☐ HS-CRP/Inflammatory Markers: \_\_

**Drafting the "Physician Letter" Bullet Points:** *Example: "Client has achieved [X] through lifestyle intervention. Please evaluate if a reduction in [Medication] is appropriate."*

---

## Section 4: Reflection & Clinical Observations

**Practitioner Observations:** (Note any "prescribing cascades" identified or shifts in the biochemical baseline)

---

**Client Feedback/Subjective Score:** On a scale of 1–10, how is your vitality since starting the synergy protocol? \_\_/10

---

### Next Steps:

- ☐ Schedule follow-up in 14 days to assess "Low and Slow" progress.
- ☐ Client to deliver progress summary to MD on date: \_\_\_\_\_

*AccrediPro Standards Institute Certified Tool | L3 Advanced Clinical Integration*

---