

Immune Status Mapping & Strategy Worksheet

Client Name: _____ Date: _____

Primary Concern: _____

Section 1: The Immune Status Triad (Assessment)

Review current symptoms and functional lab trends (CBC, NK Cell Activity, SIgA, Cyrex) to categorize the client's primary immune "posture." Check all that apply.

Bucket 1: Immune Deficiency ("The Tired System")

- **Lab Clues:** Low NK cell activity, Low Secretory IgA (SIgA), Low Total Globulins, WBC < 4.5.
- **Symptom Check:**
 - [] Catches every cold/flu circulating
 - [] Slow wound healing
 - [] History of chronic viral "reactivation" (e.g., EBV, Cold Sores)
 - [] Chronic fatigue/low stamina

Bucket 2: Immune Reactivity ("The Angry System")

- **Lab Clues:** High IgG/IgA food sensitivities, High Histamine, Eosinophilia, High Th2 markers.
- **Symptom Check:**
 - [] Seasonal allergies or asthma
 - [] Skin rashes, hives, or "flushing"
 - [] Immediate reactivity to foods or chemicals
 - [] Chronic sinusitis or "puffiness"

Bucket 3: Autoimmunity ("The Confused System")

- **Lab Clues:** Positive tissue antibodies (TPO, ANA, RF), High Th1 or Th17, Cyrex Array 5 reactivity.
- **Symptom Check:**

- [] Diagnosed autoimmune condition (or strong family history)
 - [] Migratory joint pain or stiffness
 - [] Brain fog and "unexplained" systemic inflammation
 - [] Symptoms that "flare" and "remit"
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Section 2: Defense & Repair Matrix Mapping

Identify the "Why" behind the immune posture.

Matrix Component	Findings / Notes
Antecedents (Genetics/Birth)	HLA-DR4 status, C-section birth, early antibiotic use: _____
Triggers (The "Spark")	Recent viral infection (EBV/COVID), mold exposure, toxin/hapten: _____
Mediators (The "Fuel")	High IL-6, chronic stress, ongoing gut dysbiosis, lack of sleep: _____

Section 3: Cross-System Influence (Hormone-Immune Mapping)

The immune system does not act in a vacuum. Assess the regulators.

- **HPA Axis Status:** [] High Cortisol (Acute) [] Low Cortisol/Burnout [] Glucocorticoid Resistance
 - **Sex Hormone Balance:**
 - [] Estrogen Dominance (Immune Stimulant)
 - [] Low Progesterone (Loss of immune-calming effect)
 - [] Low Testosterone (Loss of immune modulation)
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Section 4: Clinical Roadmap & Reflection

Dominant Immune Posture: _____

Key Lab Priorities: * [] Lymphocyte Map (Th1/Th2/Th17 balance) * [] NK Cell Activity (First line of defense check) * [] Cyrex Array 5 or 12 (Predictive Autoimmunity/Pathogens)

Practitioner Observations:

Immediate Next Steps (Coaching Focus): 1. _____ 2. _____

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