

# ME/CFS Bioenergetic Stability & PEM Tracker

Client Name: \_\_\_\_\_ Week of: \_\_\_\_\_

## Section 1: The "Reveal" (Baseline Markers)

*Practitioner to complete during initial session based on OAT/Lab findings.* \* **Primary Metabolic Block:** ☐ Citrate/Isocitrate (Krebs) ☐ Succinate (Complex II) ☐ 8-OHdG (Oxidative Stress) \* **Calculated Anaerobic Threshold (AT):** \_ **BPM (Stay 15-20 beats below age-predicted max)** \* **Current Energy Envelope:** \_ Minutes of activity before required rest.

---

## Section 2: Daily Bioenergetic Tracking

Use this table to monitor the "Wired but Tired" response and ensure you are staying within your metabolic capacity.

Day	Energy Level (1-10)	Exceeded AT? (Yes/No)	PEM Symptoms? (Brain fog, pain, fatigue)	High-Dose Protocol Taken?
Mon				<input type="checkbox"/> CoQ10 <input type="checkbox"/> NAD+ <input type="checkbox"/> Mag
Tue				<input type="checkbox"/> CoQ10 <input type="checkbox"/> NAD+ <input type="checkbox"/> Mag
Wed				<input type="checkbox"/> CoQ10 <input type="checkbox"/> NAD+ <input type="checkbox"/> Mag
Thu				<input type="checkbox"/> CoQ10 <input type="checkbox"/> NAD+ <input type="checkbox"/> Mag
Fri				<input type="checkbox"/> CoQ10 <input type="checkbox"/> NAD+ <input type="checkbox"/> Mag
Sat				<input type="checkbox"/> CoQ10 <input type="checkbox"/> NAD+ <input type="checkbox"/> Mag
Sun				<input type="checkbox"/> CoQ10 <input type="checkbox"/> NAD+ <input type="checkbox"/> Mag

---

## Section 3: The "Energy Envelope" Pacing Log

Record your 15-minute activity segments to identify "Metabolic Rigidity" patterns.

- **Activity Segment (15 mins):** \_\_\_\_\_ **Rest Segment (15 mins):** ☐ Horizontal Rest Complete
  - **Activity Segment (15 mins):** \_\_\_\_\_ **Rest Segment (15 mins):** ☐ Horizontal Rest Complete
  - **Activity Segment (15 mins):** \_\_\_\_\_ **Rest Segment (15 mins):** ☐ Horizontal Rest Complete
- 

## Section 4: Weekly Reflection & Scoring

**1. Metabolic Stability Score:** How many days this week did you avoid a "crash" (PEM)? \_\_\_\_ / 7 Days

**2. Supplement Tolerance:** \* Did high-dose CoQ10/NAD+ cause insomnia or "wired" feelings? ☐ Yes ☐ No \* *Note:* If yes, ensure Magnesium is being taken at a 1:1 ratio with mitochondrial supports.

**3. Observations on Rigidity:** Did you feel a "crash" specifically after a meal or a short walk?

---

---

## Next Steps for Next Session:

☐ Review Heart Rate Monitor data for AT spikes. ☐ Titrate ☐ CoQ10 / ☐ NAD+ dosage (Current: \_\_\_\_ mg). ☐ Assess "Total Toxic Burden" progress to exit Cell Danger Response.

---

*AccrediPro Standards Institute Certified Tool | Module 17: Advanced Bioenergetics*

---