

Client Name (LAS-F) (first three letters of last name, initial of first)

From Application for Services doc:

Goal:

History

Self:

Family:

Current medical issues

Meds:

Prescribed:

Non-prescribed and supplements:

Foods: Any comments?

B 1.
2.
3.

Snack 1.
2.
3

L 1.
2.
3

Snack 1.
2.
3

D 1.
2.
3

Snack 1.
2.
3

From Body Map Check the date. If more than 1 year old, it is historical record, not current information. (Though you may want to check in on any adaptations to the schedule or physical changes encountered since the original body map)

Agni:

Appetite

Digestion

Other symptoms:

Weight: (current weight: # @ x'x", BMI ?)

Ama: indicators noted

Elimination:

Elimination pattern

Stool Quality

Sleep:

Sleep patterns

Sleep quality

Ojas: Stress level

Mental/Emotional:

	Present (Vikruti)	Historical (Prakruti)
Agni		
Appetite		
Digestive symptoms		
Weight pattern		
Ama		
Patterns/mealtimes		
Food habits		
Elimination		
Pattern: daily elimination		
Stool Quality		
Sleep		
Pattern: sleep/wake times		
Sleep quality		
Energy		
Pattern of daily activities		
Stamina		
Strength		
Immunity		
Mental/Emotional		
Stress level		
Causes of stress		
Degree of worry, fear		
Degree of anger, control		
Degree of sadness, attachment		
Favorite qualities of self		
Least favorite qualities		

Srotas	Present (Vikruti)	Historical (Prakruti)
Annava (See Agni above)		
Pranava Respiratory issues?		
Ambuva Water metabolism issues?		
Rasava Dry/moist issues? (skin)		
Raktava Cold/hot issues? (color)		
Mamsava Muscular tissues issues? Strong/tone?		
Medava Adipose tissue issues?		
Asthiva Bone, teeth, hair, nails		
Majjava Nervous system Sensory/motor		
Shukrava Reproductive capacity		
Artavava Menstrual issues/female repro issues		
Stanyava Breast feeding issues		
Purishava (See elimination above)		
Mutrava Urinary patterns and qualities		
Svedava Sweating patterns and qualities		
Manova (See Mental/Emo above)		

Initial Assessment and Recommendations

Food Pillar		Recommendations
State of Agni:		
Regular mealtimes		
Food habits		
Food choices		
Elimination		
Regular/irregular		
Stool quality		
Sleep		
Regular/irregular routines		
Sleep quality		
Energy (physical)		
Flow of day		
Daily routines		
Daily exercise		
Mental/Emotional		
Current challenges		
Symptom		
Symptom		
Symptom		