SAMPLE CLIENT PROTOCOL

Deep Dive Intake Session

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SEE ALSO · NUTRITION

Endometriosis Meal Plan

Adrenal Healing Creamsicle

SEE ALSO · DOCUMENTS

MACROtrio 2024

> *When we are able to step back and see the big picture and actually clarify what we need to address, then our fertility picture can be seen outside of the tunnel-vision that we are often forced into.*

SECTION ONE

Key Patterns I See

My role is to take all of the information we have and interpret the patterns I'm seeing — but this is still an interpretation, not a fixed answer. Your role is to reflect on what resonates with your body, your history, and your experience, and let me know what feels aligned so we can stay focused and not go in ten different directions. I always remind clients: you have all the puzzle pieces. I'm here to help you organize them and decide which ones actually matter right now.

Metabolic Stability

Your body is running in a low-fuel, low-metabolic-signal state — meaning your reproductive system may not be getting a strong enough signal that there is enough fuel available to support conception, implantation, and early pregnancy. This can affect thyroid conversion, estrogen and testosterone availability, cervical fluid, luteal function, egg quality, and overall fertility resilience.

SUPPORTING CLUES

- Leptin persistently low: 3 (2023) → 2.9 (2024) → 1.8 (2025)
- Insulin low/borderline: 4.4 → 5 → 4.2 → 3.2; triglycerides 93 → 62/65
- SHBG consistently high — 168 in 2025, still 130 in 2026
- Low testosterone history, low libido, vaginal dryness, estradiol previously 35
- Meals inconsistent in protein, carbohydrate, fat and calories — lunch often salad-based, dinner sometimes skipped, gaps of 4–5+ hours
- Cold hands and feet, dry skin, brittle nails, low body-temperature trends
- HIIT twice weekly may be a mismatch for current fuel intake

Immune Regulation

Your immune system is very likely playing a role in the fertility picture, but we need more clarity before assuming this is a primary driver. The positive ANA, history of endometriosis, and unexplained infertility make immune regulation worth investigating. Low ESR and hs-CRP suggest there may not be obvious systemic inflammation on that specific draw. This bucket is about ruling things in or out carefully rather than jumping to conclusions.

SUPPORTING CLUES

- ANA positive more than once
- Endometriosis found and removed despite absence of classic symptoms
- Endometriosis is associated with altered immune-inflammatory signaling in the pelvic environment
- TTC ~2.5 years without clear explanation; four unsuccessful IUIs

Nervous System & Stress Regulation

Your stress picture is clinically relevant. The main pattern is that work stress hits your system hard and reduces your capacity by the end of the day — feeding into inconsistent dinners, lower recovery, under-fueling, low libido, and thyroid and metabolic strain. For fertility, we want the nervous system to feel safe, nourished, and well-recovered enough to support reproduction.

SUPPORTING CLUES

- Work stress "hits hard"; less capacity for social or physical activity afterward
- No consistent stress-release practice
- Dinner feels stressful and unstructured — often late, inconsistent, or replaced by snacks
- ~7 hours of sleep; fertility optimization may benefit from closer to 9
- Screens within 60 minutes of bed; bedroom not fully dark or cool
- HIIT may act as a stressor if not matched by food and recovery

Nutrient & Mineral Balance

Several nutrient reserves appear depleted or suboptimal, and this is one of the clearest areas to prioritize. Fertility needs strong nutrient status for ovulation, egg quality, implantation, thyroid function, hormone production, immune tolerance, and early pregnancy. The clearest patterns are low ferritin, low omega-3 status, low vitamin A/retinol, and possible zinc–copper imbalance.

SUPPORTING CLUES

- Ferritin chronically low: 7 → 22 → 17 → 22. "In range" at 22, but not optimal for TTC alongside heavy bleeding
- Vitamin A/retinol low at 34; ceruloplasmin low-borderline at 15 (2026)
- Serum zinc borderline low at 65 in 2025, now in range
- Omega-3 index remains low despite supplementation
- One year of a vegan diet in 2023 may bear on iron, zinc, retinol, omega-3, protein and B12 stores

Uterine Structure & Environment

The uterine and pelvic environment is a major bucket because endometriosis and fibroids were found even without obvious symptoms. The surgery was important; now we optimize the environment after excision — inflammation, lining quality, progesterone-estradiol balance, blood flow, bowel regularity, and immune signaling.

SUPPORTING CLUES

- Periods short (3–4 days) but start heavy with many large clots; early menarche at 9
- History of endometriosis and fibroids suggests estrogen, prostaglandin and inflammatory patterns are relevant
- Constipation may impair estrogen clearance and add to pelvic inflammatory load
- BBT charts suggest progesterone support can create better sustained luteal-phase temperatures

Gut Health

Burping, constipation, occasional bloating, low nutrient reserves, keratosis pilaris, and difficulty raising certain markers despite supplementation all say gut health deserves serious attention. The gut may be affecting fertility through nutrient absorption, inflammation, estrogen clearance, immune regulation, and the gut–vaginal–uterine microbiome connection.

SUPPORTING CLUES

- Frequent burping through the day, even before eating in the morning
- Bowel movements not reliably daily; stools difficult to pass, type 3, sometimes very dark
- Keratosis pilaris on arms and legs
- Hidden gut inflammation score rose from 2 in April to 5 in May
- Low ferritin, low retinol and stubborn omega-3 status all raise absorption questions
- Burping may point toward upper-GI dysfunction, low stomach acid, *H. pylori*, reflux physiology, or dysbiosis

Thyroid Health

Thyroid health is a major convergence point in this case. Labs suggest the thyroid may not be functioning optimally for fertility, especially viewed alongside low ferritin, low metabolic signaling, high SHBG, constipation, cold tendencies, and stress physiology. I see the thyroid picture as downstream of four things: proper fueling, nutrient repletion, lowering stress burden, and improving gut health. It is excellent that autoimmunity is not present in past or current labs.

SUPPORTING CLUES

- TSH repeatedly above a functional preconception target: 3.24 → 2.53 → 2.99
- Free T3 low/suboptimal: 3.0, 2.9, 3.1. Reverse T3 of 22 in 2026
- Cold hands and feet, low temperature trends, and constipation support low thyroid signaling
- Low fuel availability can suppress conversion and raise reverse T3
- Low vitamin A, zinc and iron all affect thyroid hormone production, conversion, or receptor function

Hormone Signaling

FAM charts suggest you are ovulating, but overall hormone signaling may not be as strong or as bioavailable as we would want for conception, implantation, libido, cervical fluid, and early pregnancy support. The pattern is not that one hormone is dramatically broken — it is that the body may be binding up sex hormones, producing lower free hormone activity, and prioritizing survival over robust reproductive output.

SUPPORTING CLUES

- SHBG repeatedly high (168 in 2025, 130 in 2026) — binding estrogen and testosterone and lowering free, bioavailable hormone
- Testosterone low historically; low libido a top symptom; vaginal dryness present
- Estradiol decreased to 35 in 2024, suggesting lower follicular output depending on cycle timing
- FSH consistently elevated: 9.3 → 9.8 → 10.5, suggesting ovaries need more stimulation to recruit follicles
- Low leptin, low insulin, low triglycerides and high SHBG together point to low metabolic fuel signaling

SECTION TWO

Core Therapeutic Goals

The biggest opportunities are not about fixing every lab marker one by one. They are about rebuilding the foundations your body needs to feel safe, nourished, and supported enough for conception and pregnancy. These are your four main entry points into the web — each one optimizes downstream thyroid function, hormones, and uterine environment.

01

Eating enough / metabolic refueling

Your labs show your body is not getting a strong enough "we have enough fuel" signal. Consistent meals, adequate protein, carbohydrate and fat, and a reliable dinner rhythm support thyroid function, hormone production, ovulation quality, cervical fluid, libido, and implantation.

02

Nutrient repletion

Several key fertility nutrients are depleted or not fully optimized — iron and ferritin, omega-3s, vitamin A, and minerals like zinc and copper. Rebuilding these stores gives your body the raw materials for egg quality, hormone production, thyroid function, uterine health, and early pregnancy.

03

Nervous system stability

Your body does best reproductively when it feels safe and regulated. More predictable meals, eating more, bringing in more joy, and matching exercise to your current fuel status all help shift your body out of stress and conservation mode.

04

Estrogen : progesterone balance

Supporting bowel regularity and detoxification pathways — by eating more — helps your body process and clear estrogen. This matters given the history of endometriosis, fibroids, heavy clotty periods, constipation, and bloating. Saturated fats, vitamin C, zinc and carbohydrates support progesterone production, plus enough estrogen to improve vaginal dryness.

What to Expect

Timeline	Endometriosis is a tough condition to treat, and integrative and functional therapies do not produce overnight results. Expect 3–6 months for symptom improvement, and up to 12 months to see changes on laparoscopic evaluation.
Symptom survey	Take the Endometriosis Self-Survey at the beginning and end of your program, then again at 6 months.
Symptom journal	Track dates and a 1–10 pain scale weekly. When we are used to feeling awful, we don't always recognize improvement — journaling makes progress visible, and if results plateau we can troubleshoot more effectively.

SECTION THREE

Nutrition

How to Eat

Prioritize eating enough — you likely run on the low side of glucose. Fueling optimally gives your body the raw materials it needs to clear excess estrogen. This is not about weight gain as a goal; it is about getting leptin, insulin, thyroid conversion, SHBG and sex-hormone availability to look more fertile.

2100–2200	100–130 g	150 g	120 g	35 g
CALORIES	PROTEIN	CARBOHYDRATE	FAT	FIBER

- Eat every 3–4 hours. Do not skip meals. Do not fast longer than 12 hours overnight.
- No fasted workouts — snack beforehand and a full meal within 30–60 minutes after.
- **MACRO-Trio at each meal:** every meal and snack includes protein + carbohydrate + fat. Carbs in isolation, or too much carb without stabilizing protein and fat, leads to imbalanced blood sugar.
- Add a true carbohydrate source at each meal: rice, potatoes, sourdough, oats, beans, fruit, squash.
- Evenly space carbs and fats across the day — aim for 40 g carbohydrate and 30 g fat per meal. This is crucial for thyroid and adrenal support.
- No "salad as a meal" unless it has real protein, starch and fat.
- Bedtime snack: ½ cup tart cherry juice, or ½ banana with a sprinkle of salt and 3 brazil nuts.

BIGGEST OPPORTUNITY · BREAKFAST

- Eat within 1 hour of waking; target 500–600 calories
- Add carbs — toast with butter, adrenal creamsicle drink
- Include more fat: ghee, butter, coconut or heavy cream

PROTEIN · 60 G → 100–120 G DAILY

- Target 30–40 g per meal
- Keep rotisserie chicken on hand; increase canned salmon and tuna
- Get your partner involved prepping protein — especially red meat

What to Eat: Therapeutic Foods to Add

Oily fish	SMASH — sardines, mackerel, anchovies, salmon, herring — 2–3× per week. Tinned options make this easy.

Full-fat dairy	Organic and grass-fed where possible. If tolerated: women eating three or more servings daily were 18% less likely to develop endometriosis.
Estrogen balance	2 tablespoons flaxseed daily, root vegetables, lentils.
Reduce inflammation	Dark chocolate, berries, green tea, matcha, rosemary, ginger and ginger tea, rooibos, honeybush.
Immune support	Red plants — pomegranate, acai, cranberry. Oats, watercress, peppermint, onions and onion skin, chamomile, peaches, galangal, brazil nuts. Food-based iodine: seafood, egg yolks, grass-fed butter, iodized salt, seaweed and kelp.
Zinc	Deficiency is associated with endometrioma development. Animal proteins and sea proteins — especially oysters, clams and mussels.
Copper	Beef liver, dark chocolate, sunflower seeds, cashews, chickpeas, lentils, dried apricots, avocado, quinoa, blackstrap molasses, shiitake, almonds, asparagus, kale, chia.
Vitamin A & iron	Liver, dairy, ghee, butter. Iron from animal foods, oysters, clams, mussels, blackstrap molasses.
Omega-3	Low levels inhibit inflammation regulation. Oily fish — herring, salmon, sardines — and omega-3–enriched eggs.

SECTION FOUR

Lifestyle

Begin somatic work

Somatic work helps bring you back into your body and out of the exhausting loop of trying to "fix broken fertility," which often keeps the nervous system in a state of pressure, vigilance and self-blame. Instead of approaching your body as a problem to solve, these practices create internal safety, regulation and reconnection — conditions that support hormonal communication, blood flow, digestion, inflammation balance and reproductive function. This is not a replacement for the clinical work we are doing together; it unlocks the place from which healing and conception can be supported.

Optimize bowel movements

No fewer than one well-formed bowel movement per day. This is crucial for estrogen clearance. Implement the foundational strategies first, then report back so we can assess whether additional support is needed.

Boost oxytocin

Oxytocin plays an important role in stress reduction, pain modulation and immune regulation — all relevant to endometriosis. Activities that naturally boost it — playing with pets, physical affection, music, gentle yoga, sex, therapeutic touch or massage — calm the nervous system and reduce cortisol-driven inflammation. Elevated oxytocin can also enhance uterine blood flow, improve mood, and promote parasympathetic balance.

Reconsider HIIT; prioritize gentler movement

Movement reduces pro-inflammatory immune cells while increasing populations that promote tissue repair. Exercise also enhances pelvic blood flow, improves lymphatic drainage, and supports oxygen delivery to endometrial tissue — helping break the cycle of stagnation and inflammation. Walking, hiking, yoga, swimming, Pilates or strength training support hormone metabolism and endorphin release. The goal is not intensity but consistency: gentle to moderate movement most days of the week.

SECTION FIVE

Supplements

In endometriosis, supplementation can reduce chronic pain, pain during sex, urinary and bowel pain, and has led to regression or resolution of lesions and endometriosis-related ovarian cysts. Many are associated with improved fertility, reduced need for surgery, and improved sleep. But more is not always better — these have been chosen specifically for this client's labs, symptoms and provider discussion. Typical timeline is 3–6 months of consistent use before reevaluating.

STOP

- Turmeric supplement
- CoQ10, until we know it can be absorbed (we will assess with GI Map results)
- Prebiotic/probiotic, complete biotic, and NAC until the GI Map is collected — hold on restarting until we see results

CONTINUE

- Egg quality support
- Once the GI Map is collected, restart NAC and increase to 1 capsule with each meal — supports glutathione production and may reduce cyst size and inflammation
- Omega — take with your highest-fat meal

NEW · BEGIN AFTER COLLECTING THE GI MAP

- Magnesium — 3 capsules, 30–60 minutes before bed
- Adrenal cocktail powder with vitamin C — 1 scoop mid-afternoon, or at your lowest energy point
- Calcium-D-Glucarate — 2 capsules daily in the luteal phase (dose reassessed after GI Map)
- BioAeMulsion — 2 drops daily for 30 days, then stop; take with your highest-fat meal

Prescribed Protocol

SUPPLEMENT	DOSE & TIMING	NOTES
Magnesium (Glycinate) Pure Encapsulations · 180 caps	3–4 caps once daily Before bed · 3 months	~360–480 mg, 30–45 min before bedtime. Lower the dose if loose stool occurs.
Calcium-D-Glucarate Pure Encapsulations · 60 caps	2 caps once daily 3 months	Phase III estrogen metabolism support. Luteal phase only.
Bio-Ae-Mulsion® Biotics Research · 30 mL	2 drops once daily With breakfast · 1 month	Vitamin A repletion. Take with the highest-fat meal.
Adrenal Cocktail Powder Jigsaw Health · 240 g	1 scoop once daily Mid-afternoon · 3 months	Take at the lowest-energy point of the day.

SECTION SIX

Next Steps

Focus on these Cohort Curriculum sections

The Shift	Complete in full.
Clarify	"Wait… this is stress", "Pattern Interrupt", and "Eat like a grown-ass woman".
Egg & sperm focus	Sleep revival and "Don't normalize poor sleep" — low-hanging fruit; tell me if these are not easy wins and we will strategize. Review the sperm modules together with your partner: morphology recommendations to move from 4% to 12%.

Rheumatology referral

Reach out for a referral to explore the autoimmune labs flagged in prior testing — ANA screen repeatedly positive, pattern changed to speckled, titer increasing over time. They have the tools to assess this; bring the results back to me and we will integrate them with your whole story and discuss options. A positive ANA alone does not diagnose autoimmune disease, but in the context of infertility, endometriosis, thyroid changes, and possible implantation failure after multiple IUIs, it deserves a deeper look.

IDEALLY WE CLARIFY

Updated ANA titer and pattern · ENA panel · dsDNA · complements C3/C4 · celiac screen · antiphospholipid antibodies

WHAT WE ARE FOCUSING ON NOW

- Repleting macro- and micronutrients
- Improving estrogen metabolism, detox and clearance
- Improving progesterone production in the luteal phase
- Encouraging balanced immune function
- Fostering a system of safety — getting into welcome-baby mode

WHAT WE STILL NEED TO CLARIFY

- GI Map stool test — to define the exact dysfunction patterns fueling endo: intestinal permeability, inflammatory contribution from the microbiome, gut immune function, and digestion/absorption
- Autoimmunity — pending rheumatology workup

Between now and our next session

Monitor	Notice any symptoms after eating raw vegetables, more protein/fat/carbohydrate, high fiber, or prebiotic and probiotic foods. Watch for burping, gas or other GI discomfort — and tell me what you find.
Track intake	Log three days in the Food & Mood Journal before we meet, so we can see how close you are to your macro goals — as long as it is not creating undue stress. Enter each food separately (chicken breast, broccoli, olive oil, sweet potato) rather than describing the meal. Or simply photograph meals and upload them to the portal.

This is a sample protocol published to illustrate the depth of a YFYF fertility investigation. Client name and identifying details are fictional; clinical content is representative of a real workup. It is not medical advice and should not be used to self-treat.