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## DUO Follow UP Questionnaire

This is a follow up questionnaire to help with possible adjustments/changes needed for your holopathic /supplemental/healthcare plan with DUO! Please be as specific and detailed as you can...the more detail the more in depth the session can be.

- Please tell us the positive subtle or big changes/shifts that have taken place with your health and emotional/mental state since last session with DUO?
- Please tell us any other shifts/changes you may be currently experiencing since beginning your health journey with DUO? (Examples as follows ... changes in pain level or type/nature of pain, mobility, weight, digestion, diarrhea/constipation, sleep, mood, skin, vision, headaches, fatigue, cycle if female, color of drainage/sinus congestion/ cough - dry or wet.)
- Do symptoms come and go or persist?
- How long has this shift / change been going on?
- Have you changed anything or added anything to help with any current symptoms? Including dietary or lifestyle changes?
- Any pharmaceutical/medication/supplement changes from your medical Doctor or other health professional since beginning working with DUO? Please provide details and info?