

# Healing Plan

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Problems Diagnosed:

Risk Factors/Risk behaviors:

Strengths/Allies:

Goals:

Tools to use on an ongoing basis or resume in case of flare:

Diet/ Intestinal Health	
Exercise/Movement /Body Work	
Mind/Body/ Emotional Health/ Spirituality	
Vitamins/Nutritional Supplements/Herbs	
Standard Medical Therapies (meds, hormones, etc.)	

Be sure to consider sleep, hormones, infection, nutrition, detox issues