



RETESTING & RE-EVALUATIONS

Purpose and Timing

By Dr. Donna F. Smith

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If you have not yet read our visitor web page that defines the difference between a scientific “Test” of your biochemistry and a scientific “Evaluation,” please [click here](#) for this information. Though both are based on scientific research, the procedures and research criteria for each are quite different.

An example of a scientific biochemical test is the Laboratory Report of blood, urine, saliva, hair and/or stool. An example of a scientific Nutritional Evaluation is the Health Appraisal Comprehensive (HAC) Bargraph Summary Report.



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PURPOSE

The purposes for Retesting and Re-Evaluations are as follows:

1. Lab Reports identify which test values indicate healing is complete (i.e., in homeostasis).
2. Lab Reports identify which have improved since the last test, yet, are still in the process of healing; and will, therefore, need continued therapeutic supplement and dietary support.
3. The HAC Report indicates which symptoms are no longer present and which have improved due to the benefits of your therapeutic supplement and dietary program, as well as lifestyle changes you are consistently applying to date.
4. Lab Reports allow me to monitor test values and symptoms that are not yet receiving support through your Clinical Nutrition Therapy.
 - a. As you know, the **Clinical Nutrition Therapy** you receive is based upon your selected **Therapeutic Supplement Financial Plan (Rabbit, Squirrel, Turtle)**, which determines the number of “clinical” priority abnormal test values and symptoms supported through your therapy.
 - b. Thus, abnormal test values and/or symptoms not currently receiving support through your therapy will progressively get worse until the higher priorities have attained optimal healing and thus therapy for these are discontinued, making room in your Financial Plan to support other abnormal test values and/or symptoms.
 - c. Therefore, by monitoring test values and symptoms not currently receiving support through your therapy, should any require immediate attention or therapy due to this progression, retesting and re-evaluations will alert us of this.
5. Similar to #3 above, monitoring also identifies the status of lower priority (sub-clinical) biochemistry, so that we may continue to monitor any change in their status from low to high priority.
 - a. Some of the sub-clinical biochemistry will improve due to the positive influence from supporting the higher priority (clinical) areas, and others will continue to



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move in an adverse direction until we are able to support them.

- b. However, keep in mind, that these latter areas are not priority, at this time, and by monitoring them through retesting and reevaluations, should any become a priority, we will adjust your **Clinical Nutrition Therapy** to support them.
 - c. This also applies to the progression of their symptoms as identified on the HAC Report.
6. Provides information to identify patterns of healing as your body progresses through the four Phases of Healing explained in your Client Handbook.
7. The results of retests and re-evaluations, also, identifies which therapeutic supplements may be:
- a. Discontinued, because optimal values have been attained.
 - b. Continued a while longer, until updated retests and re-evaluations in the future indicate optimal values.
 - c. Started, i.e., when one or more supplements have been discontinued, this allows room in your Therapeutic Financial Plan for other supplements to be started to support other areas of the body with abnormal values. This way we can systematically address all abnormal values in due time, until optimal values in all retests and re-evaluations have been attained.



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TIMING

The timing for Retesting your biochemistry and Re-Evaluations is based upon the results from the previous tests and evaluations.

The **specific month and year** for each retest and re-evaluation is indicated on your **Therapeutic Supplement Program of Care (POC)** in the last column titled, “**Specimen Collection (Last) – Next**” on the first row that includes the POC Date and your name.

On this row, you will find the initials for the test or evaluation, the date of the last test or evaluation in parenthesis, followed by a hyphen and date for the month and year for the next retest or re-evaluation.

Please mark these dates (month/year) on your personal calendar so you will be ready for timely future retesting and re-evaluations. **Clinical Nutrition Laboratory Re-Testing of your Biochemistry** may include one or more test, such as blood, urine, saliva, hair, and/or stool; in addition to the **Health Appraisal Comprehensive (HAC) Report** of your Nutritional Evaluation of your Symptoms.

Abbreviations for Biochemical Tests and Evaluations

The abbreviations for the most frequent retesting and re-evaluations are listed below:

1. **ASI** (Adrenocortex Stress Index Saliva Test).
2. **BRA** (Bone Resorption Analysis Urine Test),
3. **CSDA/P** (Comprehensive Digestive Stool Analysis with Parasitology). **CSDA** is the Comprehensive Digestive Stool Analysis without testing for parasites (aka Parasitology).
4. **DYS** (Dysbiosis Questionnaire) – this is the date the Dysbiosis Program was completed and is a reminder to complete and submit monthly Dysbiosis Questionnaires until the historical and grand total scores equal. Then updated blood, urine or stool, whichever is required, will confirm that the intestinal lining has been healed and regrowth of intestinal flora is sufficient.
5. **HAC** (Health Appraisal Comprehensive (HAC) Bargraph Summary Report) – this means



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it is time to complete and send us a copy of the HAC Questionnaire so we may evaluate the status of your symptoms.

6. **MENO** (Menopause Hormone Saliva Test for females who are pre-menopausal, in menopause or have had a partial or complete hysterectomy.) **MENO+** means a MENO saliva hormone test that includes some Adrenal Hormone Testing.
7. **MHPe** (Male Hormone Profile Saliva Test [e = expanded, because it includes some Adrenal Hormone Testing]. **MHP** is Male Hormone Profile Testing without the Adrenal Hormone Tests.
8. **NBCA-44** (Nutritional Blood Chemistry Analysis of 44 blood tests – this is provided through our Lab). **NBCA-MD** (Nutritional Blood Chemistry Analysis of blood tests provided through your physician)
9. **RHYTHM** (Hormone Saliva Test for Females who are menstruating monthly or irregularly, if irregularity is not because of being pre-menopausal.)
10. **TMA or TMHA** (Tissue Mineral Hair Analysis)

Importance of Timely Retesting and Re-Evaluations

Timing is important for Retesting of your biochemistry and Re-Evaluations to make timely changes in your therapy to assure continued healing so you may attain optimal healing as soon as is possible, in respect to your Financial Supplement Plan.

Timing is also important to reduce client's time, effort and financial investment in Clinical Nutrition Therapy by preventing delays in attaining optimal healing, i.e., to prevent:

1. **Creating abnormal values** from taking therapeutic supplements longer than is necessary.
 - a. In these cases, you may be taking a therapeutic supplement due to a deficiency; however, taking it longer than is necessary can result in having an excessive amount of one or more nutrient.
 - b. When this occurs, which is identified in the next retest or re-evaluation, other supplements must be recommended to detoxify the excess.
 - c. Therefore, when retesting and reevaluations are not timely this can result in



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increasing your financial investment in your over-all supplement program and delays in attaining optimal healing.

2. **Delays in making a timely adjustment or change** in your current supplement program. For example, an updated test may indicate:
 - a. A different supplement is required for the next level of healing, than the one you are taking, or
 - b. One or more new supplements is required for a stronger program to make positive changes in the test values to assure continued healing.

Purpose for Advanced Notice

I communicate advanced notice for the month/year for each retest and re-evaluation so each client may have the opportunity to be proactive regarding:

- Scheduling time for retesting and re-evaluations. For examples,
 - Time to make arrangements with me for earlier testing or evaluation should they be on vacation or have some other personal conflict in their schedule.
 - :
 - Time to go to the Retesting webpage to print a new **Specimen Collection Kit Checklist** to perform advanced tasks for preparing for, collecting and mailing samples. This also includes reading new documents posted on the Retesting webpage since their last test or evaluation.
- Preparing financially.
- And lastly, so we can work together to stay on top of dates for timely retesting and re-evaluations since they are scheduled months, even a year for some, in advance. **Therefore, if you are not contacted by us in the first week in the month/year for a particular test, please contact our office immediately.**



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HEALTH MAINTENANCE – THE NUTRITIONAL CHECK-UP

Similar to an annual medical check-up, we provide annual Nutritional Check-ups, which consists of one or more Biochemical Test and Evaluation, for “Maintenance” clients, i.e., for people who are not currently receiving Clinical Nutrition Therapy.

Annual Nutritional Check-Ups are provided to:

1. Monitor how well “Maintenance” clients have sustained their healing results, after completing their Clinical Nutrition Therapy, so they can stay healthy from year to year, for the rest of their lives.
2. Assess the effects of personal Health Maintenance practices, i.e., the effects of Dietary, Mind-Body Connection, Electro-Magnetic Fields (EMF) Remediation and other Lifestyle changes made to date to maintain health. This also includes monitoring their progress on other changes in these aspects of Health Maintenance, until they have mastered the consistent application of all principles of healthy living. When retests and re-evaluations indicate:
 - a. Optimal values related to these aspects, they know to continue doing as they are in each of these aspects of health maintenance. In other words, the changes they have made in these aspects of life are sufficiently assisting their body in maintaining their optimal health (test values). We call this living a “principle-centered healthy” lifestyle. This is the greatest assurance for longevity and the prevention of disease.
 - b. Any that do not have optimal values provides the feedback they need to know which aspects need to be adjusted so that their next Nutritional Check-up will have positive or optimal results.
3. Identify current levels of toxicity, i.e.,
 - a. Related to exposures to pollutants that they have no control over, like “outside” air pollution. That is unless they are willing to wear an oxygen tank and mask, which is not practical for most people.
 - b. To determine how successful they have been in eliminating toxic exposures that



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they have control over.

- c. Monitoring the frequency of completing **Full Body Detoxification Programs**. As a general rule, I recommend completing this program every six months. However, the results of Nutritional Check-ups will determine if a client requires full body detoxification at intervals of three, 12 or longer periods of time. How frequently this is needed is dependent upon whether the client has:
- i. Eliminated all toxic exposures from their lifestyle that is within their control,
 - ii. Their work place does not subject them to frequent, or daily, exposure,
 - iii. Completed timely full body detoxification programs. For example, if timely detoxification is not completed or they need to complete this program more often than they originally estimated,
 1. They will have more (quantity) and deeper accumulation of toxins in their cells and tissues,
 2. Thus may require more frequent or longer periods on their **full body detoxification program** to successful cleanse their body internally.
 3. Then staying timely in completing **Full Body Detoxification Programs** as indicated in their Nutritional Check-up will prevent this recurrence. .



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GREATEST ASSET = HEALTHY CITIZENS

As you know our mission statement was first spoken by Winston Churchill in 1947, when he said, ***“Healthy Citizens are the Greatest Asset Any Country Can Have.”***

Your improved health to date is making an impact on raising the number of healthy citizens in your country today. However, for your country to be a leading country on earth in respect to its healthy citizens, more people need to know about Clinical Nutrition Therapy.

You may recall when you first contacted me, especially if Clinical Nutrition Therapy was new to you, that you were unsure about whether my therapy could help you. You hoped it would, however, you did not know for sure until you had been in therapy for a sufficient time to experience its healing results.

Some of you may have contacted me more than once, i.e., did not start therapy until sometime later because of your uncertainty the first time you contacted me. If this is your case, looking back you may have thought you wished you had started the first time so you could be receiving therapy sooner rather than later.

Some inquirers, by the time, they contact me are frustrated with the lack of help they have received from other therapies, especially medicine, which increases their hesitation to try something new. This may even apply to you when you first contacted me.

Because the Public at large is not aware that Clinical Nutrition is foundational to healing the human mind and body, they do not realize that part of their frustration using other therapies is because they were not also receiving Clinical Nutrition Therapy.

In other words, to give you two examples,

1. Medicine cannot be effective without Clinical Nutrition Therapy because drugs deplete the body of nutrients and increases its level of toxicity.
2. Chiropractics cannot be effective to hold adjustments in subluxated vertebrae when the tissue around the vertebrae is deficient in nutrients

So Clinical Nutrition Therapy is effective when used alone and a must in conjunction with other therapies for each person to receive the results they expect to through the therapies they use.

However, because **Public Health Education** is still centered on medicine (drugs and



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surgery), the general public is not aware of the above facts and so when these other therapies fail to provide the results they need and expect, they move on to another therapy and this cycle is repeated. Then by the time they hear about **Clinical Nutrition Therapy**, they are even more uncertain as to whether Clinical Nutrition Therapy can help them, or it will just be another failed therapy to add to their long list.

Therefore, it is our responsibility to help others, who are considering Clinical Nutrition Therapy for the first time, to not hesitate, but to have confidence that is not only safe and effective, but because it is foundational to healing the human body, they will not be able to heal their body, not matter what other therapies they use, until they include Clinical Nutrition Therapy. .

So no matter that I am speaking the truth verbally at Inquiry Consultations or in my publications regarding how safe, effective and essential Clinical Nutrition Therapy is, if this therapy is new to them, people are more willing to give Clinical Nutrition Therapy a chance when they can read the actual words from our clients regarding their successful experiences in therapy.

So when it is time to update the documents on the **Retesting** webpage for the analysis of your retests and re-evaluations, please take time to complete the “**Success Story Form**” and helps us with our outreach to other citizens who are considering Clinical Nutrition Therapy.

Though most clients have more than one area of improvement they can report on, completing and submitting the **Success Story Form** on just one area, **each time** you are on the **Retesting webpage** to complete the other documents for retesting and re-evaluations, will require minimal time from you and then in time, you will have been able to report on all areas of improvement, with minimal effort and time on our part.

Thus, our mission statement becomes a mission statement for all of us as we work together to increase the number of healthy citizens in our country and together fulfill Winston Churchill's words, “**The Greatest Asset Any Country can have is Healthy Citizens.**”

Thank you in advance for your Success Story Forms.



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E-BOOKS BY DR. SMITH

Be prepared! Increase your knowledge! Below are the e-books that are now available to our clients and the public on other related health care topics.

- **Anti-Aging Personal Care Program (Hair, Skin, and Nails)** – Over 200 Pages
- **Comprehensive Holistic Dental Health Program** – The Dangers of Traditional Dentistry and an Introduction to Holistic Dentistry (**169 pages** – articles, charts, forms and therapeutic supplement information for acute symptoms (toothaches), chronic dental health challenges (abscesses, gum disease) and dental health (how to internally repair and strengthen teeth and gums).
- **Fibromyalgia – A Clinical Nutrition Syndrome** (70 Pages).
- **Hair Restoration Program [Anti-Grey and Hair & Scalp Solutions]** - (69 Pages).
- **Health Chest – Updating Your Medicine Chest To A Health Chest** - (Over 190 Pages).
 - Over safe and effective remedies for 100 acute symptoms and injuries.
- **Lyme's Disease – Clinical Nutrition Approach to Healing** (32 Pages).
- **15 False Assumptions the Public Makes About Food Supplements** – (15 Pages)

DISCLAIMER

Information is provided for nutritional education purposes only and not for the diagnosis or treatment of any medical condition, disorder or disease. Present laws indicate that the author must advise you to seek medical attention for your disease, if you have one. Choosing to do so, or not, is your constitutional right and you are ultimately the only person who is responsible for any decisions, risks or actions you take regarding the care of your mind and body. This author's intention is to provide health care education from a nutritional biochemical perspective so you are equipped to make an informed decision regarding your health care.