

The Functional Blood Chemistry Analysis (FBCA) Blueprint

IMPLEMENTING FBCA INTO YOUR CLINIC

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The Main Focus of Functional Blood Chemistry Analysis

The main focus of FBCA is to give you, the practitioner, a tool to assess the underlying cause of the many chronic diseases that your patients suffer from. It is NOT about diagnosis but rather a way to analyze your patient's functional state of health and assess trends towards ill health or trends towards health. With that information, and information from your other functional diagnostic assessments, you can better prepare and implement an individualized treatment protocol for your patient.

FBCA is patient focused and not disease focused. For instance you are not assessing whether or not your patient has gallstones. You ARE assessing for the weaknesses and imbalances in the patients physiology to try and understand why the patient has a trend towards the development of biliary stasis, which may end up causing them to develop gallstones. You are discovering and correcting the underlying trends towards a particular disease process or dysfunction so the body can in turn return to a state of health and wellness.

In order for this system to work in your clinic it must be clinically effective, easily implemented, have a high degree of patient compliance, and be financially rewarding.

The Main Role of FBCA in the Clinic

1. **The prevention of disease and dysfunction** by looking at the major risk factors of mortality and morbidity in their blood:
 - a. Identifying the risk factors that can be reduced or avoided i.e. avoid the consumption of high sugar containing foods in patients that are trending towards higher and higher blood glucose levels
 - b. Making the patient aware that they have risks for developing a particular disease e.g. cardiovascular disease or type II diabetes
2. **The early detection of disease and dysfunction through the use of a Functional analysis of the blood test results and assessing trends towards:**
 - a. **Blood sugar dysregulation**
 - b. **Cardiovascular disease**
 - c. **Thyroid imbalance**
 - d. **Adrenal irregularities**
 - e. **Acid-Base imbalances**
 - f. **Gallbladder dysfunction**
 - g. **Kidney dysfunction**
 - h. **Liver dysfunction**
 - i. **Allergies**

- j. **Heavy metals toxicity**
- k. **Gastrointestinal dysfunction**
- l. **Immune Imbalance**
- m. **Oxidative Stress**
- n. **Red blood cell dysfunction and anemia**
- o. **Inflammation**
- p. **Sex hormone irregularities**

Benefits of Functional Diagnosis to your Patients

1. Improved quality of their health care because you are focused on them and not their disease
2. Reduced costs because you'll be able to pin point what's going on without having to spend a fortune on additional tests
3. If you do need additional tests, you'll be able to tell exactly what they are from the results of your Functional Analysis
4. Finally, they'll have a practitioner that can make sense of all the numbers and give them a pathway that they can follow towards health and wellness

What Type of Practitioners are Suited for Functional Blood Chemistry Analysis?

1. Licensed health care providers who are licensed to order labs (DC, ND, MD, DO, DDS, PA, NP, etc.)
2. Certified Clinical Nutritionists who may be able to get lab results from the patient themselves and order labs through a 3rd party lab company like DirectLabs
3. There is a role to be played by support staff/providers within the clinical setting e.g. Chiropractic assistants, RNs, and Dieticians.

Implementing Functional Blood Chemistry Analysis Into Your Clinic

1. Successful Implementation of FBCA Requires Support

A successful health care practitioner needs a system and also needs the support of people in the office/clinic who not only understand the system but work with the system rather than against it. In terms of blood testing you'll get support from the lab company you use to order lab tests from.

- a. They'll set up panels for you so that your most commonly ordered lab tests are bundled together into a panel. Examples of this include:
 - Basic chemistry metabolic panel + CBC
 - Male panel
 - Female panel
 - Cardiovascular risk panel
- b. They'll handle additional testing that's needed after a test result is done. A lab will typically keep a blood sample for 3-4 days after the test is run in case the physician needs to run additional tests
- c. They'll keep you posted of the test being done and will email you to let you know the results are in. At that point you can request a PDF file in an email or login to your online portal to download the results.

You'll also need support from your front desk staff that must be familiar with the tests you want ordered, the instructions to tell the patient before testing and the procedure you want implemented once the blood test results come back. This might mean transposing the results onto a FBCA tracking form or entering the results into a Blood Chemistry Software program, selecting the reports you want run and printing out practitioner and patient versions so you can sit down with the patient and have your Report of Findings Consultation.

2. Successful Implementation of FBCA Requires Tools

In order for a system to be streamlined you must have the tools on hand to quickly, efficiently, and easily do your job of reading and analyzing the blood test results. These might include the following tools:

- Lab tracking forms
- Conversion charts
- Lab assessment and interpretation forms
- Written report form templates
- FBCA software

3. Successful Implementation Requires Knowledge

A comprehensive chemistry and CBC/Hematology panel may have upwards of 70 individual elements on them. You will have to know what each of these elements mean, what body systems they refer to and what possible conditions and dysfunctions they are associated with. You will also have to understand the various patterns that exist between these individual elements and what clinical dysfunctions they point to. Then

you need to be able to translate that complex info into a language the patient can understand.

It's beyond the scope of this guide to go through the knowledge portion of FBCA. Luckily I have a 12 week online FBCA Training that does that and a reference manual too. But the knowledge portion is very important because this is where you will give meaning to the large amount of data that is sitting in the report that comes back from the lab.

The patient's typical experience is for a doctor to take a quick glance at the results and make a generalized statement about what they see: "Your cholesterol is a bit elevated so we'll start you on some Statins but everything else looks normal to me." They walk out of that visit with the printed report, some chicken scratch notes that they don't understand and a sense of bewilderment about what just happened.

It's the job of a practitioner trained in FBCA to correct that. We have to provide meaning to the results. We have to uncover the diamonds in the rough and make sense of what's going on: point out the results that fall outside of the "normal" reference range, point out the elements that fall outside of the "optimal" range, explain what that means, start to connect the dots by pointing out the interconnected relationships that exist within the results, and begin to paint a picture of what the blood is really telling us: "here's where you're at and these are the trends I am noticing. Trends that point towards the development of dysfunctions in the interconnected systems of your body, and here's what we can do to correct those trends. My job is to identify the trends and provide treatment options to move you back into a state of health and wellness."

4. Successful Implementation of FBCA Requires That You Know Your Market

Unless you are still in medical school or have just graduated you probably have an existing database of patients. If this is the case then there are a few questions you must ask yourself about your patients so you can best use that database to grow your practice with FBCA:

1. Who in my practice would be suited for FBCA?
2. Am I open to offering FBCA Assessments to all my new patients?
3. How do I introduce FBCA to my current patients?

I personally think that FBCA can be used to grow an already existing practice and add new patients to the clinic. In my practice every new patient got a full Male or Female oriented blood panel and they paid for the test right there and then in the office. The reason for this is the blood test requisition form now has some value. They've already paid for the test so are more likely to do it.

Another thing you can do is go through your database of patients and identify those people that haven't seen you for a while and encourage them to come in for a wellness

checkup that includes a comprehensive blood test and 2 appointments. One to go over the results and the second to follow up.

5. Successful Implementation of FBCA: Who Will Benefit?

Here's a short list of the type of patient/client that I think will most likely benefit from you introducing the concept of doing an FBCA assessment.

This list is by no means exhaustive but will help you identify likely candidates from your current patient database or new patients that come to your clinic.

1. **Patients wanting to lose weight** or change their body composition
2. **Patients with energy issues:** fatigue, weakness etc.
3. **Patients with inflammatory conditions.** Here are the organ systems associated with inflammatory conditions
 - a. Obesity – current research shows that obesity is probably the number 1 cause of inflammation in the body.
 - b. Arthritis (Joint and skeletal system)
 - c. Muscular inflammation (sarcopenia and renal relationships)
 - d. Atherosclerosis (inflammation of the cardiovascular system)
 - e. Type II Diabetes (inflammation associated with the endocrine system)
 - f. Auto-immune (Inflammatory conditions such as Rheumatoid Arthritis, Lupus etc.)
 - g. Gastrointestinal inflammation (Inflammatory Bowel Disease, Crohn's disease, Irritable Bowel Syndrome, Gastritis etc.)
4. **Patients with blood sugar dysregulation**
 - a. Metabolic Syndrome
 - b. Type II Diabetes
 - c. Insulin sensitivities e.g. hyperinsulinemia which is associated with the following conditions:
 - i. Atherosclerosis
 - ii. Obesity
 - iii. Hypertension
 - iv. Hyperlipidemia
 - v. Cancer especially bowel, breast and prostate cancer
 - vi. Alzheimer's disease

vii. Premature aging with the problem of Advanced Glycosylation End Products (AGEs)

5. Patients with cardiovascular disease and dysfunction

- a. Hypertension
- b. Hyperlipidemia
- c. Atherosclerosis
- d. Congestive Heart Failure
- e. Vascular insufficiencies

6. Stress related issues

7. Hormonal issues

- a. Decreased thyroid function
- b. Decreased libido
- c. Menstrual problems: endometriosis, PMS
- d. Menopausal issues
- e. Infertility (male and female)

8. Gastrointestinal conditions

- a. Hypochlorhydria
- b. Pancreatic insufficiency
- c. Gallbladder dysfunction
- d. Gastric inflammation
- e. Dysbiosis
- f. Leaky Gut Syndrome

Integrating FBCA Into Your Clinic

How will you incorporate FBCA into your practice?

At this point, I think it's important for you to identify how you will be incorporating FBCA into your practice.

Here are a few options:

a. New Patient – Option A

- Every new patient that comes into your office gets a blood test before they come and see you. They fill out all office paperwork (intake forms,

questionnaires, request for records forms, etc.) AND they get their blood tested. Why? Because you're going to order it anyway so why not get it up front and use your functional analysis in your first visit. Believe me; nothing impresses a patient more when you can articulate what's going on with them simply by going through the results of their blood.

b. New Patient – Option B

- You wait to get a blood test on your patient after the first office visit. The first visit allows you to create some rapport, get a full understanding of what's going on with them and to communicate the value of what you do and the methods you use to do them. At this point the patient is primed and ready to "buy" the lab test and get it done. When the lab test results come back you can get them in for a second appointment to do a review of findings.

c. Existing Patients - Maintenance/Wellness

- As I mentioned above, a functional analysis of blood test results is a great way to get existing patients or patients that you haven't seen in a while to come back into the office for a visit. I would consider this to be an annual event. Run birthday specials or give them some incentive to come back into the office.

How Many Patients Will You See?

Operating a successful Functional Medicine practice requires a combination of preparatory clinical analysis and face time with potential patients. This type of practice is for the serious health practitioner motivated to solving some of the most challenging health conditions.

It is not uncommon for chiropractic physicians to pack in as many patients as humanly possible within a one hour time frame. The two to five minute chiropractic treatment is voiced and endorsed by many a consultant. Unfortunately, that model will not work for chiropractors who have a genuine desire to build a profitable practice utilizing Functional Medicine techniques and FBCA consultations.

It is recommended that **60 minutes be allotted for a new Functional Medicine patient consultation and 30 minutes for clinical Report/Interpretation of Findings.**

It must be reminded that ALL health care professionals are not only responsible for face time with patients but need to set aside time to review and study the case. Although this may be second nature to most physicians and other healthcare professions, I have witnessed some who assumed "winging" the preparatory clinical analysis was ok. I will be the first to tell you that the future of developing a healthy practice utilizing Functional Medicine will ultimately come to a flaming halt and crash if one does not do their due diligence in the clinical preparation of each and every case.

Aside from the pure ethical reasons for taking the time to prepare a case, the inner confidence derived from a job well done will radiate to your patient's increased

acceptance of your clinical recommendations. Don't ever underestimate this important ingredient of patient management.

What does this mean in terms of FBCA? Having a firm grasp of the knowledge of FBCA, the thinking process if you will, will make this easier. Using tracking forms to document the optimal ranges and how their blood test results fall into those ranges will help enormously. Utilizing FBCA software, which not only plots the values against the normal and optimal range, but gives you color reports will go a long way to helping you with your follow up consultations.

How Will You Charge for FBCA?

The issue of fair compensation must not only be addressed but needs to be clearly embraced by the health care professional. There are some questions you must ask yourself:

- a. Will I pass on the cost of the blood test to my patient or will I mark it up?
- b. Will I charge a Lab Consultation fee?
- c. If I use a report from software, will I charge extra for that?
- d. Will I build an FBCA "product" that bundle in the lab test plus 2 consultations?
HINT – this is a good idea!

FBCA Report of Clinical Findings

This section will cover the Report of Clinical Findings appointment you will have with your patients. At this appointment you are going to go over their blood work and tell them what's going on.

The purpose of the Report of Clinical Findings appointment

1. To begin to rule in and rule out the underlying causes and dysfunctions in the functional systems of the body
2. To give you objective indicators to back up the subjective indicators
3. To educate the patient about the underlying cause of their problems
4. To establish the areas you are going to recommend for treatment

The "Report of Clinical Findings" Appointment

At this stage of your clinical procedure, the patient has had their lab testing done and most patients are anxious to find out what their lab tests revealed and are ready with open eyes and ears to know what to do next.

This makes it a pure joy to offer this type of health care.

Patients are commonly ready and willing to get started and rarely if ever need any form of extra motivation to move forward.

The following is a simple list of topics discussed during “**report of clinical findings**”

- Discussion of results.
- Interpretation of findings
- Implementation of treatment plan.
- Go over the patient’s goals and see if they are in line with the program you intend to recommend.

More on the “Interpretation of Findings”

- a. At this stage it’s worth handing the patient the tracking form filled out with their results or the patient report from the software program.
- b. Give them some time to read through before beginning your orientation
- c. Go over the element results first and orient them to the difference between “normal” and “optimal” ranges.
- d. The “normal” ranges really refer to pathology. Anything outside the “normal” range, high or low, indicate the potential for pathology and disease.
- e. The “optimal” range represents a functional range. Anything outside of the “Optimal or Functional” range can be used to assess for the risk of developing a disease or the trend towards developing a pathology, before the disease develops.
- f. For instance, a blood glucose value above 110, which is above the pathological range, might indicate diabetes, whereas a blood glucose of 95, which is above the “Functional range” might indicate insulin resistance, metabolic syndrome and a future risk of developing diabetes if this trend is not reversed.
- g. Next, go over some of the patterns that you are seeing between the elements and start to relate what you are seeing to the symptoms they are dealing with:
 - “I know from the questionnaire that you filled out that you are dealing with quite a bit of discomfort after eating with bloating, gas and a general feeling of fullness. These are common findings with people that have a condition called hypochlorhydria, or low stomach acid. Interestingly enough, I am seeing evidence of this in your blood work. Your BUN, MCV and Total Globulin levels are elevated along with a decreased total protein, phosphorous and alkaline phosphatase. Luckily hypochlorhydria is quite easy to treat and reverse, so I’ll talk a bit more about what we can do about it later in this appointment when I go through my recommended treatment plan.”

- h. As you go through this try not to overwhelm the patient with everything you are seeing and try and relate back what you are seeing to the symptoms they are suffering from because this will make it much easier when you come to putting together a treatment plan.

The Treatment Plan

This next section will give you an idea of some of the many ways you can approach the treatment of your patients. This is a very non-specific look at treatment but hopefully it will give you some ideas of where to focus attention.

Diet

1. Start by making simple dietary changes with a focus on the following:

- a. Eliminating elements that are known to be incompatible with health (trans fatty acids in the form of hydrogenated or partially hydrogenated oils and margarine, refined sugar)
- b. Eliminating suspected allergens and making appropriate substitutions where possible
- c. Making recommendations on appropriate protein, fat and carbohydrate ratios specific to the patient's needs.
- d. Focus on balanced glycemic control and stabilization
- e. Use medical foods wherever appropriate
- f. Focus on foods that are high in a particular nutrient that is deficient

2. There are appropriate situations for individualizing the diet to a particular condition:

- a. Allergy elimination diet
- b. Low inflammation diet
- c. Detoxification diet
- d. Glycemic stabilization diet
- e. Dysbiosis diet
- f. Gluten free diet

Hydration

1. The majority of the body is water so it's essential that you educate your patients about the need for proper hydration, which includes the following:

- a. Consuming appropriate amounts of pure, filtered, and undistilled water appropriate to their body weight
- b. They eliminate diuretic beverages or at least replace the loss of body fluids caused by drinking diuretic beverages with appropriate water.

Adequate Digestion

1. Supporting stomach function with HCl and Pepsin when needed
2. Supporting small intestine function with digestive enzymes when needed
3. Supporting hepatobiliary function with cholagogues and gallbladder nutrients when needed

Proper elimination

1. Supporting the large intestine with fiber when needed
2. Supporting the kidneys
3. Supporting the lymphatic system with lymphatic drainage
4. Assisting the body to sweat with steam or sauna treatments where appropriate

Biotransformation

1. Supporting liver detoxification with appropriate diet and nutritional support
2. Stress hormone balancing
3. Sex hormone balancing
4. Thyroid hormone balancing

Basic Nutritional Support

It's important that your patient's basic nutritional needs are covered. You must balance this with the nutrient/supplement protocols you plan to make based on the assessments of the testing you have done. Patients can get very overwhelmed not only at the cost of supplements but also at the volume of pills they have to take. The following represent basic nutritional support:

1. Multiple vitamin and mineral supplements
2. Essential Fatty Acids
3. Antioxidants

Rest and Relaxation

1. Sleep cycle support with specific herbal and nutritional formulas, relaxation techniques and appropriate dietary counseling

Stress Management

1. Nutritional and botanical support
2. Breathing techniques
3. Guided imagery

Movement and Exercise

1. Exercise goals
2. Cardiovascular/aerobic
3. Flexibility/stretching
4. Resistance training

Step #10 – Follow Up Appointments

It's important to specify the timing of follow-up appointments so you can maximize patient compliance and ensure the success of your program.

The purpose of the follow-up appointments

1. To assess your patient's progress. You can do this by using many of the systems you used to make the initial assessment:
 - a. Health questionnaires i.e. ask them to re-do the NAQ
 - b. Re-doing the blood test to make sure you are moving them in the right direction
 - c. Asking patients to fill out a health journal where they can track their diet, lifestyle changes, exercise routine, sleep patterns and stress reduction techniques
2. To keep the patient on track with their health goals and making them aware of the success they are achieving using Functional Diagnosis.

Techniques to increase compliance

I have found that using progress questionnaires throughout the treatment phase of the Functional Medicine program helps keep the patient focused on the successes and bringing them back to their initial health goals.

Full Re-evaluation

At some point a full re-evaluation must take place. This is basically a repeat of many of the tests they have already done, including Blood Chemistry Tests and Out-Sourced tests (saliva tests, stool tests, etc.).

It is important to write an evaluation report at this time outlining your assessment of where the patient is in terms of their health goals and the resolution of the dysfunctions. At this time you must make the following decisions:

1. The patient has done what they came to do and it's time to move them away from "Condition Care" and put them into a ***Maintenance Program***.
2. The patient still has a way to go with their treatment and it's time to fine-tune their treatment protocol. They must be encouraged to carry on with your work. At this stage it's important to emphasize how far they have come.
 - a. Re-visit the initial NAQ you ran at their initial examination
 - b. Review their initial health goals

Patient compliance requires that you show them that they are far along the road to health and wellness and that they need to do a little more work but to emphasize how far they have come.