



# HEALTH EMPOWERMENT GUIDE

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# Welcome to the Health Empowerment Guide

When talking to doctors it is important to know how to speak with them in a way that will benefit your health, what to ask for and how to advocate for yourself... this can be challenging for many reasons. Some doctors don't see the need for these tests, some don't like to be told to do things they think a patient has " found on the internet". They don't want to leave you strapped with excess bills and insurance companies demand reasons for test before they will cover them. For these reasons I am here to give you a bit more help.

I want to encourage you in your new life. I want you to feel comfortable in your new role as the captain of your own team! Are you ready to move forward with your life? That means being proactive. That means never again standing back and letting other people control your choices and what you do. Stay curious ! Embrace cooking! Join our community!

Let me feed you with information, with hope , with acceptance, and with ideas for better health.

In good health,

A handwritten signature in black ink, appearing to read "Ashley Toy". The signature is fluid and cursive, with a large, sweeping flourish at the end.

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# SELF ASSESSMENT QUESTIONNAIRE

Your metabolism is the engine and food is your fuel. How well is your engine running? Look at yourself. Feel how you feel. Listen to what your body is telling you. Don't look for answers or solutions yet. That can derail the internal conversation. Just be curious and listen.

The following list of questions resembles the intake form for my clinic. It is a self-assessment questionnaire that I give to my clients to help them start listening and pondering what is going on. Don't look for answers just yet— those will come later. This is the beginning of a conversation I want you to start having with your body. I don't proceed with my clients until they answer these questions. At the end of the list, you will find some blank spaces. I want you to add at least ten additional things to the list that you think your body would like to communicate to you. Remember, in my clinic, anything is up for discussion. It can be as seemingly minor as a muffin top or as major as heart disease: **Y = Yes; N = No; S = Sometimes**

	Y	N	S	Details?
Is your energy low?				
Is your physical strength limited?				
Is your physical structure what you'd like?				
Do you have to drag yourself out of bed in the morning?				
Do you wake up feeling like you pulled an all-nighter?				
Do you long for a nap every afternoon?				
Are you having difficulty adapting to the stress you are under?				
Are you having trouble falling or staying asleep?				
Is your sex drive M.I.A.?				
Do you weigh more than you feel you should?				

# SELF ASSESSMENT QUESTIONNAIRE cont.

	Y	N	S	Details?
Do you have trouble recovering after overindulging in food or alcohol?				
Are your hangovers (including the sugar-binge hangovers) harsher than they have ever been before?				
Are you unable to get the performance you need out of your body?				
Is your body depositing fatty tissue where it has never been before?				
Has your body changed into a shape you barely recognize?				
Do you have flabby upper arms?				
Do you have sagging skin on your face or neck?				
Do you have digestive issues like gas, bloating, constipation, heartburn, indigestion, or IBS?				
Are your periods irregular?				
Do you have hot flashes and/or brain fog?				
Do you have depression, anxiety, or mood swings?				
Do you have problems with focus, memory, concentration, or other cognition issues?				
Do you have an autoimmune disease, or a family history of autoimmune disorders?				

# SELF ASSESSMENT QUESTIONNAIRE cont.

	Y	N	S	Details?
Do you have high cholesterol, elevated triglycerides, or low HDL?				
Do you have high blood pressure?				
Do you have systemic inflammation?				
Do you have high blood sugar, are you insulin resistant, or do you have full-blown diabetes?				
Have you been diagnosed with a disease or disorder?				

More issues you have noticed:	Details?

These responses indicate evidence of conversations your body is having with you. Something is off with your metabolism, and that means your body is metabolically adapting to an environment that isn't right for it. Maybe your body is whispering, talking, or even screaming for your attention. Your body has acted heroically by adapting, and we can and should be thankful for that. When we listen and stop looking at these things as complaints, but instead see them as requests for repair, then we can design a plan that meets your unique metabolic needs. My goal here is to give you the tools to say, "I hear you and I am ready to feed your metabolic needs."

# CREATING YOUR HEALTH WISHLIST

What is health? For you, it might be something different from what is health for anyone else in the world. Is it being fit and free of disease? Is health feeling balanced, or having energy, or getting down to a weight that doesn't burden you? Or is it getting your chronic conditions manageable again? Whenever a new client comes into my office, one of the first things we do is sit down together and make a Health Wish List. This is a list of everything the client would like to happen. The first things my clients usually mention are that they want to change the number on the scale, and/or they want to change the progression of a chronic disease they have been diagnosed with. I think those goals are too narrow. Why limit yourself to a diagnosis or a number on the scale, or that one, most pressing symptom? I want you to dream big. Think of everything you want for your body. And this can be an ongoing list. You can check things off as you achieve them, and you can always add more. In fact, I encourage you to add more, as you learn more and get to know this process better. I always encourage my clients to go further.

Below is a sampling of some of the items my clients have come up with for their own Health Wish Lists. Check the ones that you want on your list, then try to add ten more items at the end of this list that mean something to you.

- |   |   |
|---|---|
| <input type="checkbox"/> I want more energy.                          | <input type="checkbox"/> I want to feel happier.                  |
| <input type="checkbox"/> I want to feel good all day long.            | <input type="checkbox"/> I want to get rid of my anxiety.         |
| <input type="checkbox"/> I want to get rid of my mid-afternoon slump. | <input type="checkbox"/> I want to reverse my autoimmune disease. |
| <input type="checkbox"/> I want to sleep better.                      | <input type="checkbox"/> I want to solve my blood sugar issues.   |
| <input type="checkbox"/> I want to want to have sex!                  | <input type="checkbox"/> I no longer want to have diabetes!       |
| <input type="checkbox"/> I want to get some of this fat off my hips.  | <input type="checkbox"/> _____                                    |
| <input type="checkbox"/> I want to banish the back fat!               | <input type="checkbox"/> _____                                    |
| <input type="checkbox"/> I want to reduce the cellulite on my thighs. | <input type="checkbox"/> _____                                    |
| <input type="checkbox"/> I want to get rid of my double chin.         | <input type="checkbox"/> _____                                    |
| <input type="checkbox"/> I want better, clearer skin.                 | <input type="checkbox"/> _____                                    |
| <input type="checkbox"/> I want to get rid of my wrinkles.            | <input type="checkbox"/> _____                                    |
| <input type="checkbox"/> I want to get the sag out of my upper arms.  | <input type="checkbox"/> _____                                    |
| <input type="checkbox"/> I want to stop being constipated.            | <input type="checkbox"/> _____                                    |
| <input type="checkbox"/> I want to get rid of my indigestion.         | <input type="checkbox"/> _____                                    |
| <input type="checkbox"/> I want to lower my cholesterol.              | <input type="checkbox"/> _____                                    |

This is just a small sampling. Your list can be much more detailed, much more inclusive, much longer. Actually write it down. Include everything! Dream big. And then recognize something very important: Everything you eat influences the possibility that every single thing on your wish list will come true—or will only remain a dream.

# REQUEST FOR CARE SAMPLE LETTER

This can be challenging, for many reasons. Some doctors don't see the need for these tests. Some don't like to be told to do things they think a patient "found on the Internet" (and this happens a lot). Also, they don't want to leave you strapped with excessive bills, and insurance companies demand reasons for tests before they will cover them. For all these reasons, I give you a little more help. For instance, I tell you frequently to put your lab requests in writing, along with those symptoms you defined in the Self-Assessment Questionnaire. But how do you do that? I help my clients with this by providing them with letter samples that they can use.

*Dear Dr. Sanders:*

*I am having some health issues that are very concerning to me. In addition to the normal labs we would run at this visit, can we please run some diagnostics, so that we can help define what's going on with me? The reason I am requesting these is because I am experiencing:*

- Hair loss and thinning at the crown. This is not normal for me.*
- Chin acne*
- Unexplained rapid weight gain (my activity and caloric intake have not varied)*
- Extreme breast tenderness*

*Also please note that:*

- I have a previous diagnosis of adenomyosis*
- I have a positive gene for Alzheimer's and heart disease (APOE-e4) and my mother already suffers from dementia, with onset in her late 60s.*
- My younger sister suffered a heart attack at age 47 and my mother suffered a heart attack at age 70.*
- I am 49 and premenopausal.*

*Because of rapid weight gain, I would like to run:*

- Hemoglobin A1*
- Fasting glucose (blood sugar)*
- Fasting insulin*

*Because of hair loss and weight gain, I would like to run:*

- TSH*
- T3/T4 free and uptake*

*Because of age and cardiovascular risk, I would like to run:*

- CRP*
- Lipid panel*

*Because of dysmenorrhea and age, I would like to run:*

- E2*
- FSH*
- LH*
- Progesterone*
- Testosterone free and total*

*Thank you for your time.*

*Sincerely,*



# REQUEST FOR CARE

Dear Dr. \_\_\_\_\_

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The reason I am requesting these is because I am experiencing:

---

---

---

Also please note that:

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---

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Because of \_\_\_\_\_, I would like to run:

---

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Because of \_\_\_\_\_, I would like to run:

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Because of \_\_\_\_\_, I would like to run:

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Thank you for your time.  
Sincerely,

# THE DIGESTIVE RESERVE TEST (LEMON CHALLENGE)

## How are your enzymes reserves? Low reserves can slow your metabolism!

This test is designed to determine how the body deals with acids. The test gives us the information regarding the availability of trace minerals, phosphoric and bicarbonate buffers (salts) and if they are readily available for the body to use to balance acids.

Take the test approximately 2 hours after eating. In this test, you will measure the Saliva pH six times at one minute intervals.

### GETTING STARTED

To begin the test, first swallow ten times, and then take a saliva pH reading.

pH \_\_\_\_\_ prior to taking test.

### ITEMS REQUIRED

- A watch with a second hand
- Juice from 1/2 fresh lemon
- 9 paper towels
- 9 pieces litmus paper about 1 inch long
- 1/2 cup water
- 1 plastic spoon
- 1/4 cup water

### INSTRUCTIONS

1. Combine juice from the lemon and 1/2 cup water, and drink it down.
2. Then take the 1/4 cup of water and swish it around in the mouth, and swallow.
3. Then begin watching the clock. At the end of the first minute take a reading of the saliva pH, using a spoon and sliding the litmus paper into the slurry of saliva on the spoon. If the paper shows streaked, stir the saliva in the spoon with the paper to get an average reading, or to see if the paper goes any darker. record the reading. (Use the darkest tone or color that matches the guide.) Wipe out the spoon with the paper towel and repeat the procedure until all of the readings are done.

### pH READING:

1 min. \_\_\_\_\_ 2 min. \_\_\_\_\_ 3 min. \_\_\_\_\_ 4 min. \_\_\_\_\_ 5 min. \_\_\_\_\_ 6 min. \_\_\_\_\_

Wait 5 more minutes and test the pH of the saliva again. pH reading \_\_\_\_\_

Wait 5 more minutes and test the pH of the saliva again. pH reading \_\_\_\_\_

### RESULTS:

The ideal is that the body stabilized the pH within a 3 minute window showing that it had an optimal enzyme reserve. If not, consider Metabolism Enzyme Balance to rebuild and restore the body's reserves. Add herbs and spices to your meals to make sure you chew your food thoroughly.

**REMEMBER:** Enzymes activate your body's ability to extract micronutrients from whole foods. It is those micronutrients that repair and heal the metabolism.

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# 7-DAY pH TESTING PROTOCOL

## BALANCING THE BODY'S ECOSYSTEM

A wonderful way to balance the body's ecosystem is testing Urine and Saliva pH.

- Ecosystem Dictates What will Flourish
- Parasites
- Bacteria
- Virus
- Healthy Bacteria
- Healthy Tissue
- What Stores in Fat Cells
- What Burns for Fuel

## IDEAL pH RANGE

In order to maintain a healthy alkaline blood value, the urine and saliva pH is slightly acidic at 6.8

### URINE 6.8 | SALIVA 6.8 | BLOOD 7.35 - 7.45 (Critical)

A neutral pH is 7. We call the **URINE sample ACID if less than 6.8** and we call the **SALIVA ALKALINE if greater than 6.8**.

Each body will require a different push to achieve optimal pH. It is essential to monitor the pH frequently and to make the appropriate adjustments daily. pH should be taken at approximately the same time every day. Take pH shortly after 10:30am or 2-3 hours after waking and away from food by 30min to 1 hour. Dip pH strips into urine or saliva sample.

**DO NOT place pH strips directly into the mouth.**

	TIME TAKEN	SALIVA pH	URINE pH	SALIVA pH ACID OR ALKALINE	URINE pH ACID OR ALKALINE	RANKING
EXAMPLE TEST	10:30 am	5.0	7.5	ACID	ALKALINE	4
Day 1						
Day 2						
Day 3						
Day 4						
Day 5						
Day 6						
Day 7						

## INTERPRETATIONS OF pH

Ranking your body's ecosystem from a 5 being to a 1 needing support.

- 6.8 Saliva / 6.8 Urine = **5** (Balanced)
- Alkaline Saliva / Acid Urine = **4**
- Acid Saliva / Alkaline Urine = **3**
- Very Acid Saliva / Very Acid Urine = **2**
- Alkaline Saliva / Alkaline Urine = **1**

Approximately 90% of the time we make the most recommendations based on which pH is the most significantly off. Approximately 90% of the time, we consider the other a compensation mechanism by the body.

# 7-DAY pH TESTING PROTOCOL

## pH: WHAT CAN IT TELL YOU?

- Acidity/Alkalinity of Sample
- How the Body is Striving for Homeostasis
- If the Body has the Capacity to Detoxify & Release Fat Based Toxins
- External Secretion Success = Internal Secretions Success or Note
- What Organs / Processes are Stressed
- How Effective Your Weight Loss and Metabolism Enhancement will Be
- What Can Flourish in the Body

## OPTIONS:

### IF ALKALINE SALIVA / ACID URINE CONSIDER:

- Digestive enzymes:  
*Metabolism Enzyme Balance*
- Try Metabolism Free Radicals
- Consume more alkaline forming foods
- Chew food more before swallowing
- Increase vegetable portions
- Mint or mint teas
- Coconut vinegar
- Herbal bitters
- Stretching
- Outdoor exercise

### IF VERY ACID SALIVA / VERY ACID URINE CONSIDER:

- Probiotics: *Metabolism Pro-Biotic*
- Try Metabolism Free Radicals
- Consume more alkaline forming foods
- Baking soda / sea salt baths
- Deep breathing exercises
- Stress reducing techniques
- Outdoor walking
- Lime juice in water
- Coconut vinegar
- Alfalfa tea
- Grapefruit (not if on statin drugs)

### IF ACID SALIVA / ALKALINE URINE CONSIDER:

- Try *Metabolism Free Radicals*
- Heavy weights
- Increase protein portions
- Lime juice in water
- Papaya
- Figs
- Lima beans
- Potassium rich foods - Dandelion root

### IF ALKALINE SALIVA / ALKALINE URINE CONSIDER:

- Digestive enzymes: *Metabolism Enzyme Balance*
- Reduce stress: *Metabolism Stress Blend*
- Try Metabolism T4T3
- Try Metabolism Free Radicals
- Increase protein portions
- Epsom salt baths
- Heavy weights
- Increase spring water intake - Brisk walking
- Increase Vitamin C intake
- Ingest sea salt orally (Celtic is my favorite)