

**Client Remedies Taken**

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

Remedy \_\_\_\_\_ Potency \_\_\_\_\_ Date Given/Mailed \_\_\_\_\_ Doses \_\_\_\_\_

For: Acute \_\_\_\_\_ Chronic \_\_\_\_\_ Dosing 1 tsp. RSB OR \_\_\_\_\_

SX: \_\_\_\_\_

Remedy \_\_\_\_\_ Potency \_\_\_\_\_ Date Given/Mailed \_\_\_\_\_ Doses \_\_\_\_\_

For: Acute \_\_\_\_\_ Chronic \_\_\_\_\_ Dosing 1 tsp. RSB OR \_\_\_\_\_

SX: \_\_\_\_\_

Remedy \_\_\_\_\_ Potency \_\_\_\_\_ Date Given/Mailed \_\_\_\_\_ Doses \_\_\_\_\_

For: Acute \_\_\_\_\_ Chronic \_\_\_\_\_ Dosing 1 tsp. RSB OR \_\_\_\_\_

SX: \_\_\_\_\_

Remedy \_\_\_\_\_ Potency \_\_\_\_\_ Date Given/Mailed \_\_\_\_\_ Doses \_\_\_\_\_

For: Acute \_\_\_\_\_ Chronic \_\_\_\_\_ Dosing 1 tsp. RSB OR \_\_\_\_\_

SX: \_\_\_\_\_

Remedy \_\_\_\_\_ Potency \_\_\_\_\_ Date Given/Mailed \_\_\_\_\_ Doses \_\_\_\_\_

For: Acute \_\_\_\_\_ Chronic \_\_\_\_\_ Dosing 1 tsp. RSB OR \_\_\_\_\_

SX: \_\_\_\_\_

Remedy \_\_\_\_\_ Potency \_\_\_\_\_ Date Given/Mailed \_\_\_\_\_ Doses \_\_\_\_\_

For: Acute \_\_\_\_\_ Chronic \_\_\_\_\_ Dosing 1 tsp. RSB OR \_\_\_\_\_

**SX:** \_\_\_\_\_