

BRAIN HEALTH *md*

STRATEGIC BRAIN HEALTH CONCIERGE

DESIGNED EXCLUSIVELY FOR YOU

Personalized *Brain Health* Plan

Every brain is different.
Find out what works for yours.

PATIENT

DATE

NEXT REVIEW

◆ *Private & Confidential* ◆

PREPARED FOR

Personalized *Brain Health Plan*

This document summarizes your cognitive assessment, biomarker profile, family history, lifestyle factors, and the recommendations developed during your consultation.

| *Confidential. Intended for the named patient only. Not for distribution without authorization.*

PHYSICIAN

Dr. Raquel Fonseca Ward

NEUROLOGY · BOARD CERTIFIED

Dr. Fonseca Ward completed her Internal Medicine residency at **Weill Cornell Medicine — NewYork-Presbyterian Queens**, her Neurology training at **North Shore University Hospital — Northwell Health / Hofstra University**, and her fellowship at **Mass General Brigham — Harvard University**.

Her clinical focus is the prevention of cognitive decline through the identification and management of modifiable risk factors.

ABOUT THIS PLAN

Scope & *Methodology*

The Brain Health Foundation evaluates modifiable risk factors associated with cognitive decline, stroke, and depression. Risk stratification is informed by validated cognitive assessments, biomarker testing, and the Brain Care Score developed by the McCance Brain Care Center at Mass General Brigham.

I.

Assessment

Cognitive testing, biomarker panel, family history, and lifestyle review establish a baseline and identify modifiable risk factors.

II.

Intervention

Recommendations across nutrition, exercise, sleep, cognitive training, supplements, and medications when indicated.

III.

Reassessment

Periodic review of cognitive testing, biomarkers, and the Brain Care Score to track progress and adjust the plan.

SECTION ONE

Current Status

AGE	GENETIC BIOMARKER	RISK TIER	BRAIN SCORE
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Cognitive Assessment

ASSESSMENT 01		ASSESSMENT 02	
TOOL	TOOL
SCORE	SCORE

Symptoms Reported

Cardiovascular Risk Factors

CHECK ALL THAT APPLY

- | | |
|--|--|
| <input type="checkbox"/> Hypertension | <input type="checkbox"/> Obesity |
| <input type="checkbox"/> Type 2 Diabetes | <input type="checkbox"/> Smoking |
| <input type="checkbox"/> Hyperlipidemia | <input type="checkbox"/> Family Hx CAD < 55M / < 65F |

Other Past Medical History

Current Medications

Hormonal Status

MENOPAUSAL STATUS	HRT USE	THYROID STATUS
Pre · Peri · Post · N/A	Yes · No	Euthyroid · Hypo · Hyper · On treatment
.....

SECTION TWO

Lifestyle *Baseline*

DOMAIN	STATUS	NOTES
Nutrition		
Exercise		
Sleep		
Stress		
Alcohol		
Tobacco		
Cognitive Engagement		
Hearing		
Air Pollution		
TBI History		
Education		

— Clinician Notes

SECTION THREE

Neurological *Family History*

Dementia, Alzheimer's, Parkinson's, stroke, and other neurodegenerative conditions.

RELATION	CONDITION	AGE OF ONSET	STATUS
Mother			
Father			
Maternal Grandmother			
Maternal Grandfather			
Paternal Grandmother			
Paternal Grandfather			
Siblings / Other			

— Patterns & Observations

SECTION FOUR

Biomarker *Profile*

Foundational panel — see attached lab summary for complete results.

MARKER	RESULT	STATUS
Genetic (APOE / other)		
Total Cholesterol		
LDL		
HDL		
ApoB		
Lp(a)		
Fasting Glucose		
Fasting Insulin		
HbA1c		
hs-CRP		
Homocysteine		
Vitamin D		
Vitamin B12		
TSH		
Free T3		
Free T4		
<i>Others</i>		

SECTION FIVE

Imaging

— Imaging Studies

MRI, CT OR OTHER PRIOR NEUROLOGICAL STUDIES

TYPE	DATE	FINDINGS

— Herpes Zoster Vaccination

STATUS	DATE ADMINISTERED
<i>Vaccinated · Not Vaccinated · Partial</i>	

NOTES

SECTION SIX

Brain Care *Score*

CURRENT
/ 21

TARGET
/ 21

CLINICAL ASSESSMENT

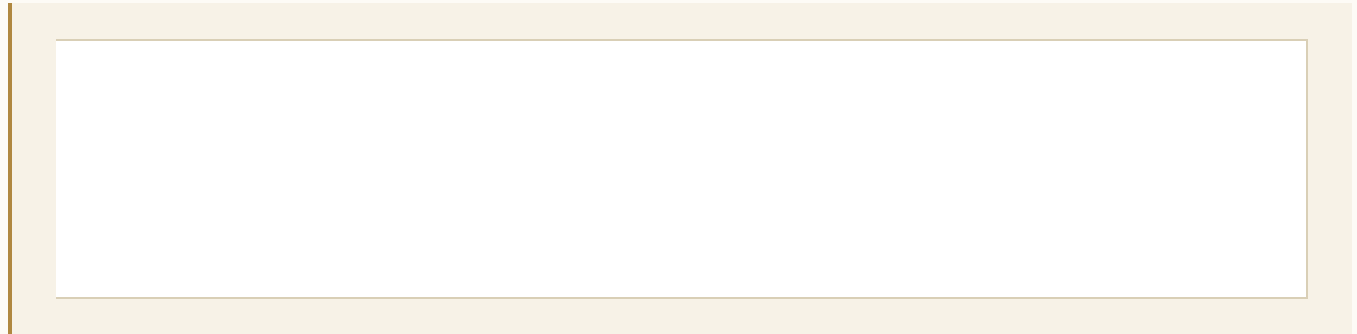
Strengths & *Opportunities*

Strengths

To Optimize

SECTION SEVEN

Strategic *Goals*



LIFESTYLE PROTOCOL

Daily *Recommendations*

- 01
Nutrition
MIND Diet — Mediterranean-DASH Intervention for Neurodegenerative Delay
- 02
Exercise
150 min/week aerobic activity · 2 days strength training
- 03
Sleep
7–8 hours per night, consistently, without prescription medications
- 04
Stress & Cognitive
- 05
Social & Purpose
1–2 social engagements per week

SECTION EIGHT

Personalized *Recommendations*

01. Supplements

[Empty text box for Supplements]

02. Medications

[Empty text box for Medications]

03. Other

[Empty text box for Other]

Cognitive *Training*

FREQUENCY

DURATION

PLATFORM

Reassessment *Schedule*

NEXT REVIEW

CADENCE

FOCUS AREAS

Dr. Raquel Fonseca Ward

NEUROLOGY · BOARD CERTIFIED