

Documentation Template for Systemic Tongue Mapping

Relevant Medical History

- **Chronic Conditions:**
- **Medications:**
- **Allergies:**
- **Surgical History:**
- **Family History of Systemic Conditions:**

Lifestyle Factors

- **Dietary Habits:**
- **Hydration:**
- **Alcohol Use:**
- **Tobacco Use:**
- **Sleep Quality:**
- **Stress Levels:**

Tongue Assessment Protocol

General Observations

- **Tongue Body Shape:**
(e.g., swollen, thin, scalloped, pointed, cracked)
- **Tongue Body Color:**
(e.g., pale, red, purple, dusky)
- **Tongue Coating:**
 - **Color:**
 - **Thickness:**
 - **Distribution:**
 - **Moisture Level:**
- **Tongue Mobility:**
(e.g., limited range, tremors, deviations)

Systemic Tongue Map Regions

| Region | Associated Organ/System | Observations |
|---------|-----------------------------------|--------------|
| Tip | Heart / Lung | |
| Sides | Liver(left) / Gallbladder (right) | |
| Center | Spleen / Stomach | |
| Root | Kidneys / Bladder / Intestines | |
| Margins | Immune / Lymphatic System | |

Notable Features

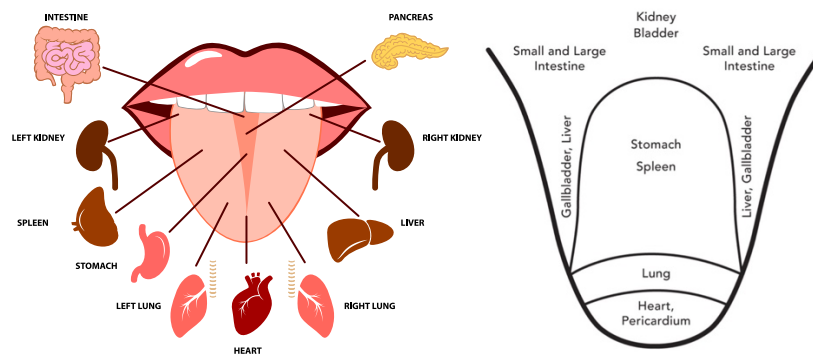
- **Fissures or Cracks (location & depth):**
- **Tooth Marks / Scalloping:**
- **Red or Purple Spots (petechiae):**
- **Sub-lingual Vein Observation (dilation, color):**
- **Lesions / Discoloration (specify location):**
- **Geographic tongue/bald patches (specify location)**

Recommendations

- **Further Testing / Referrals:**
- **Dietary or Lifestyle Modifications:**
- **Herbal / Nutritional Supplementation (if relevant):**
- **Monitoring Plan / Follow-Up Schedule:**

Attachments / Imaging

- ☐ High-resolution tongue photograph(s)
- ☐ Comparison with prior assessments (if available)
- ☐ Patient education



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