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## Disrupting the System for the Betterment of All



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**CEOCFO:** *Ms. Walker, prominent on your site is "Revitalist is changing the way we provide relief for treatment resistant conditions." What is your approach?*

**Ms. Walker:** Revitalist is combining mental health and medical providers working in a team-like approach in order to address the brain as a whole. Currently our system tries to simplify a complex organ by labeling it with one primary diagnosis; co-existing aspects should always be considered. This is an important aspect all our providers firmly believe and include in their mission for every person.

**CEOCFO:** *That sounds sensible; why is that not being done routinely now?*

**Ms. Walker:** I believe that medicine and mental health over the past five decades have theories that we are now proving to be scientifically flawed. Seeing the theories actually come to fruition with true evidence-based results, means we are able to quantize more of the data and address specific aspects of care allowing individuals to receive greater results in their individual journey to wellness.

**CEOCFO:** *How does this work on a practical basis for the patients?*

**Ms. Walker:** Practically speaking, the providers that we have at each of our locations have behavioral health and medical training in order to address individuals' wellness, mental health, and somatic conditions (which may present as treatment resistant pain syndromes). We are learning that the brain has more capabilities than we ever imagined. Stimulating the brain in specific context allows for regeneration by utilizing the internal, endogenous systems giving individuals a healing path to wellness for a greater quality of life.

Services we offer include ketamine Infusions, ketamine assisted psychotherapy, transcranial magnetic stimulation, vitamin infusions, acupuncture, as well as various types of therapies including individual, group, and intensive outpatient programs. The goal of these services is to address the root cause of presentation of symptoms allowing us to break the cycle of what the brain is doing instead of superficially suppressing the symptoms.

**CEOCFO:** *Would you give us an example of what a patient might come to you for and how you would go about figuring out the best method for them?*

**Ms. Walker:** Each have their own qualities for referral, so most providers will refer clients to us in order for them to seek our services. Most clients that we deal with have symptoms of depression, anxiety, PTSD or suicidality, and they have

tried a minimum of two modalities of treatment. Those modalities can be medications, different forms of therapy, anything where someone has tried to address those conditions and have not received the results they expected. Those individuals are the ones that we deal with the most. With vitamin infusions, anyone can walk in with a chief complaint and our providers can help them at that time. Conditions such as brain fog, fatigue, post-COVID long-hauler syndrome, immunosuppression — individuals are able to come in and receive the help they need with the majority feeling positive results in the same day.

The youngest client we have had in our clinic was ten years-old. With vitamins infusions when individuals weigh over 95lbs, they are a potential candidate to receive these services. The oldest client we have had was 90 years of age. That individual actually experienced complex grief after losing her husband of 72 years. Ketamine has such a high safety index we were able to administer this service to her allowing her the ability to feel safe while healing from such a traumatic loss. We are the bridge to individuals to help them feel heard with integrity and validation while also advocating for a better wellness plan.

**CEO CFO: *How are you reaching out to the public and doctors that are treating patients now to let them know what you have and to help them understand how you can make a difference?***

**Ms. Walker:** We are trying to diversify that as much as we can. We do have our own media company that helps with the media marketing aspect but we also value that our team members are out in the community. Part of the company mission is to help educate, advocate, and increase access to everyone. With that we do constantly work on relationship building in the community with clients, providers and therapists, offering lunch-and-learns, online community support groups, as well as full transparency to the healthcare community allowing them the opportunity to come to any of our locations at any time.

**“Life is tough right now, and we have to have the ability to help support communities, individuals, and providers in order to push forward for a better future.” Kathryn Walker**

We do have websites for each of our clinic locations. We have white papers coming out and additional content with podcasts and publications. Everything that someone would want us to participate with, basically if we feel it would help expand advocacy, awareness, and access, then someone from our team will participate with that as it aligns with the mission of our company.

**CEO CFO: *How long has Revitalist been offering services?***

**Ms. Walker:** I was a critical care nurse for about ten years and then went back to anesthesia school and practiced anesthesia for about seven years before I opened the first clinic in Knoxville. The first clinic we opened wanting to help our community. I was overwhelmed with the demand. We quickly recognized the skill set we possess as advanced practice nurses allowed us the ability to hold someone’s hand while keeping them safe. This is something we have lost in the current healthcare system because of the overwhelming demand of services coupled with the astronomical shortage of providers.

Really the demand for the services along with the enriched environment we created has been so vast it continues to exceed the expectations we originally predicted. In December of 2021, we will have ten locations in seven states. The reason for the aggressive approach is because of the severe need we are all feeling. Everyone that we have on our team is passionate and they are oriented to help every person that is able to ask for help. This is why we are working to diversify and push as hard as we can in order to try and help save as many lives as possible.

**CEO CFO: *When you are opening these clinics, are they de novo or part of exciting facilities?***

**Ms. Walker:** We were looking at doing more of a build versus buy, but now we have individuals that already have clinics that are open and have a similar vision with trying to push forward for greater change. We consider both aspects. Really the biggest part is making sure that all of us come with a common mindset as to what we want to try to accomplish. Individuals can always contact us if they have clinics and are looking for greater support in the sector.

When you are one person or two people and you are dealing with such a demand for these services, you can get compassion fatigue and we are feeling this in the medical community right now. The providers are feeling it as well as the

patients and clients who receive care from the providers. Life is tough right now, and we have to have the ability to help support communities, individuals, and providers in order to push forward for a better future.

**CEOFCO: *Would you explain what a clinic is in the context of Revitalist?***

**Ms. Walker:** Clinics of this nature are unique. They combine mental health and traditional health. If you go across the nation, there is the Department of Mental Health Services, there is also the Department of Health — two completely separate entities. These are traditionally governed by the state establishing a sense of segregation with the body from the mind. The diversity our company model implements with consideration to behavioral, neurological, and psychiatric views allows us a wonderful approach on inclusivity giving the mind and body the comprehensive approach that is needed advancing wellness, advocacy, and care.

With our clinicians having 10, 20, or 30 years of experience understanding accreditation and regulation processes with this type of system allows us the ability to create best practices and continuity of care. This is something that needs to be urgently upgraded in the outpatient community because individuals do not receive the advocacy that we feel is necessary. By allowing such a diverse group of providers, we are able to help increase the advocacy not only within the walls of our clinic but as well as for the clinicians we collaborate with in our surrounding communities.

We can work with every specialist in the community. We focus on episodic care working with individuals and their established care team helping to optimize health concerns that don't respond to traditional therapies. Working in this manner allows us to assist our colleagues with treatment resistant clients giving them the ability to treat more traditionally responsive clients without having to spend an exorbitant amount of time, resources, and energy.

**CEOFCO: *How is the information shared among your clinics and providers? How do you quantify what you are finding and how do you let other people in the world know what you discovered through treating patients in some of these manners?***

**Ms. Walker:** We have recently hired our VP of Research and Development, Dr. Denise Hopkins-Chadwick, Ph.D, RN. She is leading this division helping to compile data we have acquired since our first location opening in 2018. The continued production of quality content is the best way for us to keep our audiences up-to-date.

**CEOFCO: *What are one or two things you learned since Revitalist has been treating patients? What may have changed from your original concept?***

**Ms. Walker:** Two things to sum it up. One, there is a big gap in real-time care that individuals are receiving and what we as westernized professionals believe they are receiving. I have learned a lot of individuals do not care for westernized medicine because the efficacy has become so low and the individuals feel they are being "pushed through the system". As a traditionally trained provider we do not always understand this because we are not out in the community to see it. Westernized providers do not realize they are being commonly grouped in a negative light with big pharmaceutical companies. If we do not have the time to sit, listen, and feel concerns from individuals, then we stay in our own idealistic bubble and think we are doing all we can do with these individuals when in reality we need to be more aware of additional angles of care that are available — something we did not learn in nursing or medical school, and to be accepting of the research out there for those things, even though they have not been traditionally presented to us.

The second thing I have learned would be the values that we have as medical providers are wonderful. It is interesting to go into the community and see the different levels of value, meaning that as a medical provider it is part of our ethics that if a person walks in, we are to take care of that person period. It does not matter if you come in with shackles, or if you come in and look like you have been the person giving or receiving abuse, it does not matter, we have to treat you because you are a person and that falls under our ethics. Individuals in the mental health world, their values have to somewhat align with the individuals that they see and they are not supposed to impose their values on others but sometimes these lines become skewed.

I understand values need to be considered and understood, but I think having the personalized touch that mental health providers provide along with the streamlined alignment of structure medical providers have are going to align so well giving the sense of fluidity and peace every person deserves when they are requesting help from the healthcare system.

**CEOFCO: *Is the investment community paying attention to Revitalist?***

**Ms. Walker:** While it is still in its infancy stage, they are paying attention to psychedelics specifically. Revitalist as a whole is still a very new, very fresh entity that investors are just now learning about. With the investment community it is going to need to be viewed as a long-term investment as we are some of the first pioneers with healthcare evolution. Once investors start noticing the quality of products we are producing, instead of focusing just on the quantity, then we will start pulling away from the market. It is an exciting time for sure.