

SUPPLEMENT SCHEDULE

Treatment Protocol:

Start Date		End Date			Lab Date		
	1	2	3	4	5	6	7
Example	Sun Chorella 10 caps w/ water 1 hour before meal	MycoPul 2 caps w/ water	Dotti Patch Wed / Sat				
On Waking							
Breakfast							
Mid Morning							
Lunch							
Mid Afternoon							
Dinner							
Bedtime							

