LazrPulsr Mk 7 Treatment Record ~ West Nile Protocol 01/25/15

Follow with General health procedures

Patient Name _____ **Number**_____

Instructions ~ Warnings
(NO DIET SWEETENERS! Not even Stevia)

Follow all Brochure recommendations for diet and nutrition.

Nutrition: From Standard Process, THESE ARE REQUIRED!

Echinacea C	**10 tabs 1 time after 3rd visit**
Immuplex	**10 caps 1 time after 3rd visit**

Note: You may need to begin the following detox program depending on the patient.
#626 Lymphatic NS - while performing any quality Ion Foot Bath

Visit #1 _____/_____/_____ **80 min**
____**#697 All Virus** (20)
____**#534 West Nile** (60)
Next visit 3 weeks

Visit #2 _____/_____/_____ **80 min**
____**#698 West Nile Inf** (30)
____**#699 West Nile Inf 2** (50)
Next visit 3 weeks

Visit #3 _____/_____/_____ **66 min**
____**#799 Viral Cleanse 2** (40)
____**#604 Lymph Detox** (26)

End of program

Home Care – Mk III Home Therapy System:
Run Viral Immune protocol 1 time each year
Use essential oil of Lemon on spine instead of Red Thyme

You may also perform other procedures in between these visits if needed but do not perform these visits quicker than one every three weeks.
Notes:

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