

APPENDIX D

EXAMPLE PATIENTS

The following are examples illustrating how to apply the NUTRI-SPEC system to your patients. (To work through them you will only need to have read Chapters 1, 2 & 3, and Appendices A, B and C.)

It will take approximately 10 minutes for your staff to run the clinical tests in the order they are listed in Appendix A. You then need only refer to the first two pages of your Quick Reference Guide (Appendix C) and answer 5 questions:

- 1) Is there an Electrolyte Stress/Electrolyte Insufficiency Imbalance?
- 2) Is there an Anaerobic/Dysaerobic Imbalance?
- 3) Is there a Glucogenic/Ketogenic Imbalance?
- 4) Is there a Sympathetic/Parasympathetic Imbalance?
- 5) Is there an Acid/Alkaline Imbalance?

Then, prescribe diet and supplements as indicated in your Quick Reference Guide (QRG) on the supplementation page(s) for the Imbalance(s) you found.

In these examples, the patient's major complaint is listed on the Test Results Form, along with the initial set of NUTRI-SPEC test results and one or two follow-up tests. At the bottom of each column are listed the answers to the five questions from your Quick Reference Guide along with the proper supplementation and dietary recommendations.

Test yourself. Use your QRG to answer the five questions for the patient's initial testing. See if you come to the same recommendations you see written at the bottom of the first column. Next, look at the patient's follow-up test results in the second column. This second set of tests would be done within a week following the initial testing, and shows how or if your patient has begun to respond to your recommendations. Ask yourself the five questions from the QRG. Are the patient's Imbalances responding satisfactorily? Or, are they over-responding, indicating a decrease in supplementation? Are new Imbalances showing up that were hidden on the first testing?

Now, turn the page and you will find the complete question-by-question interpretation of that patient's initial and follow-up tests. How does this interpretation compare with yours? Do you see that five questions is almost always all there is to it?

Work through all the example patients and you will have already developed the understanding of how to interpret each of your own patient's tests in just a minute or two.

Name: #1 Age: 54 Gender: M
 Major Complaints and Drugs: Chronic neck and back pain; high blood pressure (no meds.)

If on any of these drugs, Adjust: SG = SG -6 (UpHx10) = +6 (SpHx10) = -3 If on 2 or more: SG = SG -10 UpH = +10 SpH = -5 - Statins - Tylenol/ Acetaminphn - Advil/ Ibuprofen - Aleve/ Naproxen - Beta Blocker - Ca Channel Blocker - ACE Inhibitor - Angiotensin Blocker	DATE	FIRST TEST	DAY 6	DAY 28
	Glucose (30 sec)			
Bilirubin (30 sec)				
Ketones (40 sec)				
SG (45 sec) drug Adj SG A = SG#	19 ^A -1	20 ^A -3	12 ^A 3	
Blood (60 sec)				
Protein (albumin) (60 sec)				
Urobilinogen (60 sec)				
Nitrite/Leukocytes (120 sec)				
UpH x 10 drug Adj UpH B=(UpH-50)/2	54 ^B 2	61 ^B 5	61 ^B 5	
SpH1 x 10 drug Adj SpH C=(SpH-62)	68 ^C 6	65 ^C 3	67 ^C 5	
SpH2 x 10 (2+ min) SpH2 - SpH1	71 3	68 3	67 0	
HYDRATION (0, -12-, 12+) = A + B + C - 12	-5	-7	1	
A + B - C (drug Adj) SG - HYD	^D -5 ^E 24	^D -1 ^E 27	^D 3 ^E 11	
Dermo A/L Edema RR	R1/0 +1 18	-1/0 0 19	-1/0 0 18	
SBP1 Pa SBP2	162 72 166	150 74 158	152 72 154	
DBP1 Pa-P1 DBP2	100 ¹⁰ 2 103	92 ¹⁰ 2 90	84 ¹⁰ -2 89	
P1 P2 P3	70 88 84	72 86 76	74 84 76	
BHT RR - (BHT/5) DBP2-P3	55 ⁸ 7 ⁹ 19	58 ⁸ 7 ⁹ 14	52 ⁸ 8 ⁹ 13	
SBP2 - SBP1 DBP2 - DBP1	4 3	8 -2	2 5	
(SBP2 - SBP1) + (DBP2 - DBP1)	⁷ 7	⁷ 6	⁷ 7	
(SBP2 - SBP1) - (DBP2 - DBP1)	⁶ 1	⁶ 10	⁶ -3	
(Higher SBP1 or 2) + (Higher DBP1 or 2)	⁵ 269	⁵ 250	⁵ 243	
(Highest P) - (P1) (Highest P) - (P3)	18 4	14 10	10 8	
(Highest P - P1) + (Highest P - P3)	⁴ 22	⁴ 24	⁴ 18	
(Highest P - P1) - (Highest P - P3)	³ 14	³ 4	³ 2	
(Highest P - P1) + (Higher SBP - Lower)	² 22	² 22	² 12	
(Highest P - P1) - (SBP2 - SBP1)	¹ 14	¹ 6	¹ 8	
Electrolyte S/I ?	ES	ES	—	
Anaerobic/Dysaerobic ?	—	—	—	
Glucogenic/Ketogenic ?	—	—	—	
Symp/Parasymp ?	—	—	—	
Acid/Alkaline?	—	—	—	
Other? (Prostaglandin, GI, Medication, etc.) (Body Temp, Day of Cycle, etc.)	PG	PG	PG	
Supplementation:	Activator 2, 2 X, A Formula ES 3, 2 X, A Taurine 2, 2X, B K Citrate ½ scoop* MgCl ₂ ½ scoop* Phos Drops 1/2 tsp* I-S Immune Restore 2, 2X, B	Activator ✓ ES ✓ Taurine ✓ K Citrate ✓ MgCl ₂ ✓ Phos Drops ✓ I-S Immune Restore ✓	Activator ✓ ES 1, 2 X, A Taurine 1, 2 X, B K Citrate Stop MgCl ₂ Stop Phos Drops 3/8 tsp* I-S Immune Restore 2, B eve meal	
Diet:	Eat Well – Be Well PG Diet * Electrolyte Tonic=* Mix in 3 cups water. Drink ½ b/f brkfst & ½ b/f meals 2/3.	Eat Well – Be Well PG Diet * Electrolyte Tonic=* Mix in 3 cups water. Drink ½ b/f brkfst & ½ b/f meals 2/3.	Eat Well – Be Well PG Diet * Electrolyte Tonic=* Mix in 2 cups water. Drink ½ b/f brkfst & ½ b/f meals 2/3.	
0- +8				
1 +8				
2 +8				
3 +8				
4 +8				
5 +7				
6 +7				
7 +7				
8 +5				
9 +5				
10 +5				
11 +3				
12 +3				
13 +1				
14 +1				
15 0				
16 0				
17 0				
18 -1				
19 -1				
20 -3				
21 -3				
22 -5				
23 -5				
24 -5				
25 -7				
26 -7				
27 -7				
28 -8				
29 -8				
30+ -8				

PATIENT #1 ANALYSIS AND RECOMMENDATIONS:

First Test (Day 0)

Analysis of 5 Fundamental Metabolic Balance Systems:

- 1) ES/EI? 3 out of the first 4 tests indicate ES.
- 2) A/D? No.
- 3) G/K? No.
- 4) S/P? No.
- 5) Ac/AI? No.
- 6) PG diet is needed due to chronic pain.

Supplementation and Diet:

Follow Quick Reference Guide (QRG) for choosing ES Supplements.

The patient's Eating Plan must include Eat Well – Be Well and the PG Diet.

First Follow-Up (Day 6)

Analysis:

- 1) ES/EI? 2 more ES than EI out of the first 4 tests indicate ES.
- 2) A/D? No.
- 3) G/K? No.
- 4) S/P? No.
- 5) Ac/AI? No.
- 6) PG diet.

Supplementation and Diet:

Follow QRG protocol for choosing ES Supplements.

Eating Plan requires no changes.

Schedule the next follow-up in 3 weeks.

Second Follow-Up (Day 28)

Analysis: No Imbalances show up on this testing.

Supplementation and Diet:

Since the ES Imbalance no longer shows up do you stop all ES supplements? No. Simply review the ES Supplementation protocol for only the supplements the patient has been taking. You will find some supplements that may be stopped, some whose dosage may be decreased, and some that remain unchanged.

Name: #2 Age: 35 Gender: F
 Major Complaints and Drugs: Migraine headaches (no meds.)

If on any of these drugs, Adjust:	DATE			FIRST TEST			DAY 4		
	SG = SG -6 (UpHx10) = +6 (SpHx10) = -3	Glucose (30 sec)							
	Bilirubin (30 sec)								
	Ketones (40 sec)								
	SG (45 sec)	drug Adj SG	A = SG#	27		^A -7	23		^A -5
If on 2 or more:	Blood (60 sec)								
SG = SG -10 UpH = +10 SpH = -5	Protein (albumin) (60 sec)								
	Urobilinogen (60 sec)								
	Nitrite/Leukocytes (120 sec)								
- Statins	UpH x 10	drug Adj UpH	B=(UpH-50)/2	50		^B 0	54		^B 2
- Tylenol/ Acetamphn	SpH1 x 10	drug Adj SpH	C=(SpH-62)	64		^C 2	67		^C 5
- Advil/ Ibuprofen	SpH2 x 10 (2+ min)		SpH2 - SpH1	68		4	69		2
- Aleve/ Naproxen	HYDRATION (0, -12-, 12+) = A + B + C - 12			-17			-10		
- Beta Blocker	A + B - C		(drug Adj) SG - HYD	^D -9		^E 44	^D -8		^E 33
- Ca Channel Blocker	Dermo A/L	Edema	RR	R1/W3		+1	16	R2/W1	0
- ACE Inhibitor	SBP1	Pa	SBP2	114	58	116	120	63	124
- Angiotensin Blocker	DBP1	Pa-P1	DBP2	74	¹⁰ -2	79	78	¹⁰ -1	83
	P1	P2	P3	60	62	68	64	66	70
	BHT	RR - (BHT/5)	DBP2-P3	50	⁸ 6	⁹ 11	50	⁸ 6	⁹ 13
SG A(SG#)	SBP2 - SBP1		DBP2 - DBP1	2		5	4		5
0- +8	(SBP2 - SBP1) + (DBP2 - DBP1)			⁷		7	⁷		9
1 +8	(SBP2 - SBP1) - (DBP2 - DBP1)			⁶		-3	⁶		-1
2 +8	(Higher SBP1 or 2) + (Higher DBP1 or 2)			⁵		195	⁵		207
3 +8	(Highest P) - (P1)		(Highest P) - (P3)	8		0	6		0
4 +8	(Highest P - P1) + (Highest P - P3)			⁴		8	⁴		6
5 +7	(Highest P - P1) - (Highest P - P3)			³		8	³		6
6 +7	(Highest P - P1) + (Higher SBP - Lower)			²		10	²		10
7 +7	(Highest P - P1) - (SBP2 - SBP1)			¹		6	¹		2
8 +5	Electrolyte S/I ?			—			—		
9 +5	Anaerobic/Dysaerobic ?			D			D		
10 +5	Glucogenic/Ketogenic ?			—			—		
11 +3	Symp/Parasymp ?			—			—		
12 +3	Acid/Alkaline?			—			—		
13 +1	Other? (Prostaglandin, GI, Medication, etc.) (Body Temp, Day of Cycle, etc.)			PG			PG		
14 +1	Supplementation:			Activator 2, 2 X, A Oxy D 2, 2 X, A Oxy D+ 3/8 tsp, 2X, B I-S X-Flam 2, 2X, B			Activator ✓ D ✓ D+ ✓ I-S X-Flam ✓		
15 0	Diet:			Eat Well – Be Well Dys Diet PG Diet Increase water intake.			Eat Well – Be Well Dys Diet PG Diet		
16 0									
17 0									
18 -1									
19 -1									
20 -3									
21 -3									
22 -5									
23 -5									
24 -5									
25 -7									
26 -7									
27 -7									
28 -8									
29 -8									
30+ -8									

PATIENT #2 ANALYSIS AND RECOMMENDATIONS:

First Test (Day 0)

Analysis of 5 Fundamental Metabolic Balance Systems:

- 1) ES/EI? No.
- 2) D/A? Both of the first two tests indicate D.
- 3) G/K? No.
- 4) S/P? No.
- 5) Ac/Al? No.
- 6) PG diet is needed due to headaches.

Supplementation and Diet:

Follow QRG protocol for choosing D Supplements.

The patient's Eating Plan must include Eat Well – Be Well, the Dysaerobic Diet, the PG Diet, and an increased water intake.

First Follow-Up (Day 4)

Analysis:

- 1) ES/EI? No.
- 2) D/A? Both of the first 2 tests indicate D.
- 3) G/K? No.
- 4) S/P? No.
- 5) Ac/Al? No.
- 6) PG Diet.

Supplementation and Diet:

Follow QRG protocol for choosing D Supplements.

Eating Plan requires no changes.

Since no additional Imbalances showed up, the patient will not need another follow-up for 3 weeks.

Name: #3 Age: 47 Gender: M

Major Complaints and Drugs: Chronic neck pain from whiplash injury; indigestion; sinus problems
(no meds.)

If on any of these drugs, Adjust: SG = SG -6 (UpHx10) = +6 (SpHx10) = -3 If on 2 or more: SG = SG -10 UpH = +10 SpH = -5 - Statins - Tylenol/ Acetamphn - Advil/ Ibuprofen - Aleve/ Naproxen - Beta Blocker - Ca Channel Blocker - ACE Inhibitor - Angiotensin Blocker	DATE			FIRST TEST			DAY 7		
	Glucose (30 sec)								
Bilirubin (30 sec)									
Ketones (40 sec)									
SG (45 sec)	drug Adj SG	A = SG#		20		A -3	18		A -1
Blood (60 sec)									
Protein (albumin) (60 sec)									
Urobilinogen (60 sec)									
Nitrite/Leukocytes (120 sec)									
UpH x 10	drug Adj UpH	B=(UpH-50)/2		60		B 5	62		B 6
SpH1 x 10	drug Adj SpH	C=(SpH-62)		66		C 4	65		C 3
SpH2 x 10 (2+ min)	SpH2 - SpH1			69		3	65		0
HYDRATION (0, -12-, 12+) = A + B + C - 12				-6			-4		
A + B - C		(drug Adj) SG - HYD		D -2		E 26	D 2		E 22
Dermo A/L	Edema	RR		R2/W2		0 14	R1/W1		0 14
SBP1	Pa	SBP2		116	68	124	118	70	125
DBP1	Pa-P1	DBP2		58	¹⁰ -4	66	62	¹⁰ -2	68
P1	P2	P3		72	82	84	72	80	82
BHT	RR - (BHT/5)	DBP2-P3		53	⁸ 3	⁹ -18	50	⁸ 4	⁹ -14
SBP2 - SBP1		DBP2 - DBP1		8		8	7		6
(SBP2 - SBP1) + (DBP2 - DBP1)				⁷	16		⁷	13	
(SBP2 - SBP1) - (DBP2 - DBP1)				⁶	0		⁶	1	
(Higher SBP1 or 2) + (Higher DBP1 or 2)				⁵	190		⁵	193	
(Highest P) - (P1)		(Highest P) - (P3)		12		0	10		0
(Highest P - P1) + (Highest P - P3)				⁴	12		⁴	10	
(Highest P - P1) - (Highest P - P3)				³	12		³	10	
(Highest P - P1) + (Higher SBP - Lower)				²	20		²	17	
(Highest P - P1) - (SBP2 - SBP1)				¹	4		¹	3	
Electrolyte S/I ?				—			—		
Anaerobic/Dysaerobic ?				—			—		
Glucogenic/Ketogenic ?				—			—		
Symp/Parasymp ?				S			S		
Acid/Alkaline?				—			—		
Other? (Prostaglandin, GI, Medication, etc.) (Body Temp, Day of Cycle, etc.)				PG			PG		
Supplementation:				Activator 2, 2 X, A Complex S 2, 2 X, A Electro Tonic 1/2 tsp 2X, B Oxy-Max 2, 2 X, A I-S X-Flam 2, 2X, B			Activator ✓ S ✓ E.T. ✓ Oxy-Max ✓ I-S X-Flam ✓		
Diet:				Eat Well – Be Well Symp Diet PG Diet			Eat Well – Be Well Symp Diet PG Diet		
0- +8									
1 +8									
2 +8									
3 +8									
4 +8									
5 +7									
6 +7									
7 +7									
8 +5									
9 +5									
10 +5									
11 +3									
12 +3									
13 +1									
14 +1									
15 0									
16 0									
17 0									
18 -1									
19 -1									
20 -3									
21 -3									
22 -5									
23 -5									
24 -5									
25 -7									
26 -7									
27 -7									
28 -8									
29 -8									
30+ -8									

PATIENT #3 ANALYSIS AND RECOMMENDATIONS:

First Test (Day 0)

Analysis of 5 Fundamental Metabolic Balance Systems:

- 1) ES/EI? No.
- 2) D/A? No.
- 3) G/K? No.
- 4) S/P? 2 out of the 4 tests indicate S.
- 5) Ac/AI? No.
- 6) PG diet is needed due to chronic pain.

Supplementation and Diet:

Follow Quick Reference Guide (QRG) protocol for choosing S Supplements.

The patient's Eating Plan must include Eat Well – Be Well, the Sympathetic Diet, and the PG Diet.

First Follow-Up (Day 7)

Analysis:

- 1) ES/EI? No.
- 2) D/A? No.
- 3) G/K? No.
- 4) S/P? 2 of 4 tests indicate S.
- 5) Ac/AI? No.
- 6) PG Diet.

Supplementation and Diet:

Follow QRG protocol for choosing S Supplements.

Eating Plan requires no changes.

Since improvement is noted already in the Imbalance you are treating and no additional Imbalances show up, the patient needs to be scheduled for the next follow-up in 3 weeks.

Name: #4 Age: 61 Gender: M
 Major Complaints and Drugs: Back pain and bursitis of the left shoulder (no meds.)

If on any of these drugs, Adjust:	DATE			FIRST TEST			DAY 3		
	SG = SG -6 (UpHx10) = +6 (SpHx10) = -3	Glucose (30 sec)							
	Bilirubin (30 sec)								
	Ketones (40 sec)								
	SG (45 sec)	drug Adj SG	A = SG#	13		^A 1	14		^A 1
If on 2 or more:	Blood (60 sec)								
SG = SG -10 UpH = +10 SpH = -5	Protein (albumin) (60 sec)								
	Urobilinogen (60 sec)								
	Nitrite/Leukocytes (120 sec)								
- Statins	UpH x 10	drug Adj UpH	B=(UpH-50)/2	66		^B 8	66		^B 8
- Tylenol/ Acetamphn	SpH1 x 10	drug Adj SpH	C=(SpH-62)	65		^C 3	63		^C 1
- Advil/ Ibuprofen	SpH2 x 10 (2+ min)	SpH2 - SpH1		69		4	69		6
- Aleve/ Naproxen	HYDRATION (0, -12-, 12+) = A + B + C - 12			0			-2		
- Beta Blocker	A + B - C		(drug Adj) SG - HYD	^D 6		^E 13	^D 8		^E 16
- Ca Channel Blocker	Dermo A/L	Edema	RR	R1/R1		+1 10	R1/R1		0 12
- ACE Inhibitor	SBP1	Pa	SBP2	130	65	132	128	66	132
- Angiotensin Blocker	DBP1	Pa-P1	DBP2	84	¹⁰ -1	86	84	¹⁰ 2	85
	P1	P2	P3	66	76	82	64	72	80
	BHT	RR - (BHT/5)	DBP2-P3	66	⁸ -3	⁹ 4	64	⁸ -1	⁹ 5
SG A(SG#)	SBP2 - SBP1		DBP2 - DBP1	2		2	4		1
0- +8	(SBP2 - SBP1) + (DBP2 - DBP1)			⁷		4	⁷		5
1 +8	(SBP2 - SBP1) - (DBP2 - DBP1)			⁶		0	⁶		3
2 +8	(Higher SBP1 or 2) + (Higher DBP1 or 2)			⁵		218	⁵		217
3 +8	(Highest P) - (P1)		(Highest P) - (P3)	16		0	16		0
4 +8	(Highest P - P1) + (Highest P - P3)			⁴		16	⁴		16
5 +7	(Highest P - P1) - (Highest P - P3)			³		16	³		16
6 +7	(Highest P - P1) + (Higher SBP - Lower)			²		18	²		20
7 +7	(Highest P - P1) - (SBP2 - SBP1)			¹		14	¹		12
8 +5	Electrolyte S/I ?			—			—		
9 +5	Anaerobic/Dysaerobic ?			—			—		
10 +5	Glucogenic/Ketogenic ?			—			—		
11 +3	Symp/Parasymp ?			—			—		
12 +3	Acid/Alkaline?			Met Alk			Met Alk		
13 +1	Other? (Prostaglandin, GI, Medication, etc.) (Body Temp, Day of Cycle, etc.)			PG			PG		
14 +1	Supplementation:			Activator 2, 2 X, A Phos Drops 1/4 tsp* NaGlyc 1 scoop* Proton Plus 2, 2 X, A I-S Immune Power 2, 2X, B			Activator ✓ Phos Drops 3/8 tsp* NaGlyc ✓ Proton Plus ✓ I-S Immune Power ✓		
15 0	Diet:			Eat Well – Be Well PG Diet Avoid juice, fruit * Electrolyte Tonic=* Mix in 2 cups water. Drink ½ b/f brkfst & ½ b/f meals 2/3.			Eat Well – Be Well PG Diet Avoid juice, fruit * Electrolyte Tonic=* Mix in 2 cups water. Drink ½ b/f brkfst & ½ b/f meals 2/3.		
16 0									
17 0									
18 -1									
19 -1									
20 -3									
21 -3									
22 -5									
23 -5									
24 -5									
25 -7									
26 -7									
27 -7									
28 -8									
29 -8									
30+ -8									

PATIENT #4 ANALYSIS AND RECOMMENDATIONS :

First Test (Day 0)

Analysis of 5 Fundamental Metabolic Balance Systems:

- 1) ES/EI? No.
- 2) D/A? No.
- 3) G/K? No.
- 4) S/P? No.
- 5) Ac/Al? All three of the first three tests are a perfect match for any of the Alkalosis patterns. There is a perfect match in the urine and saliva pHs (B & C) for a Metabolic Alkalosis. The Metabolic Alkalosis is confirmed by a P1 less than 67. Potassium Depletion Alkalosis is eliminated without confirmation from the Dermo.
- 6) PG diet is needed due to chronic pain.

Supplementation and Diet:

Follow QRG protocol for choosing Metabolic Alkalosis Supplements.

The patient's Eating Plan must include Eat Well – Be Well and the PG Diet, and the avoidance of juice and fruit.

First Follow-Up (Day 3)

Analysis:

- 1) ES/EI? No.
- 2) D/A? No.
- 3) G/K? No.
- 4) S/P? No.
- 5) Ac/Al? 2 out of the first 3 tests and all the confirming tests match a Metabolic Alkalosis.
- 6) PG Diet.

Supplementation and Diet:

Follow QRG protocol for choosing Metabolic Alkalosis Supplements. Note that a decrease in the dosage of Phos Drops is indicated.

The Eating Plan requires no changes.

Since the Metabolic Alkalosis pattern has been confirmed and no additional Imbalances show up, the patient will need the next follow-up in 3 weeks.

Name: #5 Age: 33 Gender: F

Major Complaints and Drugs: Fatigue; Insomnia; PMS: menstrual cramps; mega-doses of B6 and Calcium for cramps and to help sleep on the advice of a "Nutritionist"

If on any of these drugs, Adjust:	DATE			FIRST TEST			DAY 7		
	SG = SG -6 (UpHx10) = +6 (SpHx10) = -3	Glucose (30 sec)							
	Bilirubin (30 sec)								
	Ketones (40 sec)								
	SG (45 sec)	drug Adj SG	A = SG#	28		^A -8	25		^A -7
If on 2 or more:	Blood (60 sec)								
SG = SG -10 UpH = +10 SpH = -5	Protein (albumin) (60 sec)								
	Urobilinogen (60 sec)								
	Nitrite/Leukocytes (120 sec)								
- Statins	UpH x 10	drug Adj UpH	B=(UpH-50)/2	52		^B 1	53		^B 1
- Tylenol/ Acetamnphn	SpH1 x 10	drug Adj SpH	C=(SpH-62)	68		^C 6	67		^C 5
- Advil/ Ibuprofen	SpH2 x 10 (2+ min)	SpH2 - SpH1		68		0	67		0
- Aleve/ Naproxen	HYDRATION (0, -12-, 12+) = A + B + C - 12			-13			-13		
- Beta Blocker	A + B - C		(drug Adj) SG - HYD	^D -13		^E 41	^D -11		^E 38
- Ca Channel Blocker	Dermo A/L	Edema	RR	R1/W2	0	16	R1/W1	0	18
- ACE Inhibitor	SBP1	Pa	SBP2	113	70	118	116	68	120
- Angiotensin Blocker	DBP1	Pa-P1	DBP2	72	¹⁰ -2	80	68	¹⁰ -2	78
	P1	P2	P3	72	88	78	70	86	76
	BHT	RR - (BHT/5)	DBP2-P3	55	⁸ 5	⁹ 2	65	⁸ 5	⁹ 2
SG A(SG#)	SBP2 - SBP1		DBP2 - DBP1	5		8	4		10
0- +8	(SBP2 - SBP1) + (DBP2 - DBP1)			⁷		13	⁷		14
1 +8	(SBP2 - SBP1) - (DBP2 - DBP1)			⁶		-3	⁶		-6
2 +8	(Higher SBP1 or 2) + (Higher DBP1 or 2)			⁵		198	⁵		198
3 +8	(Highest P) - (P1)		(Highest P) - (P3)	16		10	16		10
4 +8	(Highest P - P1) + (Highest P - P3)			⁴		26	⁴		26
5 +7	(Highest P - P1) - (Highest P - P3)			³		6	³		6
6 +7	(Highest P - P1) + (Higher SBP - Lower)			²		21	²		20
7 +7	(Highest P - P1) - (SBP2 - SBP1)			¹		11	¹		12
8 +5	Electrolyte S/I ?			—			—		
9 +5	Anaerobic/Dysaerobic ?			D			D		
10 +5	Glucogenic/Ketogenic ?			—			—		
11 +3	Symp/Parasymp ?			S			S		
12 +3	Acid/Alkaline?			—			—		
13 +1	Other? (Prostaglandin, GI, Medication, etc.) (Body Temp, Day of Cycle, etc.)			PG			PG		
14 +1	Supplementation:			Activator 2, 2 X, A Oxy D 2, 2 X, A Oxy D+ 3/4 tsp, 2 X, B Proton Plus 1, 2 X, A Complex S 2, 2 X, A Electro Tonic 3/8 tsp 2X, B I-S X-Flam 2, 2X, B			Activator ✓ D ✓ D+ 1/2 tsp, 2 X, B Proton Plus ✓ S ✓ Electro Tonic ✓ I-S X-Flam ✓		
15 0	Diet:			Eat Well – Be Well Dys Diet Symp Diet PG Diet Increase water intake.			Eat Well – Be Well Dys Diet Symp Diet PG Diet Increase water intake.		
16 0									
17 0									
18 -1									
19 -1									
20 -3									
21 -3									
22 -5									
23 -5									
24 -5									
25 -7									
26 -7									
27 -7									
28 -8									
29 -8									
30+ -8									

PATIENT #5 ANALYSIS AND RECOMMENDATIONS:

First Test (Day 0)

Analysis of 5 Fundamental Metabolic Balance Systems:

- 1) ES/EI? No.
- 2) D/A? Both of the first two tests indicate D.
- 3) G/K? No.
- 4) S/P? Of the four tests, 3 indicate S and 0 indicate P = S.
- 5) Ac/Al? No.
- 6) PG diet is needed due to PMS symptoms and cramps.

Supplementation and Diet:

Follow QRG protocol for choosing D Supplements and S Supplements.

The patient must stop the vitamin B6 and calcium that she had been taking.

The patient's Eating Plan must include Eat Well – Be Well, the Sympathetic Diet, the PG Diet, and an increased water intake.

First Follow-Up (Day 7)

Analysis:

- 1) ES/EI? No.
- 2) D/A? Both of the first two tests still indicate D.
- 3) G/K? No.
- 4) S/P? 3 out of 4 tests indicate S.
- 5) Ac/Al? No.
- 6) PG Diet.

Supplementation and Diet:

Follow QRG protocol for choosing D Supplements and S Supplements. Note that the dosage of Oxy D+ is decreased.

Eating Plan requires no changes.

The next follow-up test must be scheduled in 3 weeks.

Name: #6 Age: 56 Gender: F
 Major Complaints and Drugs: Back pain; elevated cholesterol and elevated blood pressure (no meds.)

If on any of these drugs, Adjust: SG = SG -6 (UpHx10) = +6 (SpHx10) = -3 If on 2 or more: SG = SG -10 UpH = +10 SpH = -5 - Statins - Tylenol/ Acetaminophn - Advil/ Ibuprofen - Aleve/ Naproxen - Beta Blocker - Ca Channel Blocker - ACE Inhibitor - Angiotensin Blocker	DATE			FIRST TEST			DAY 3			Day 6		
	Glucose (30 sec)											
Bilirubin (30 sec)												
Ketones (40 sec)												
SG (45 sec)	drug Adj SG	A = SG#		10		^A 5	20		^A -3	20		^A -3
Blood (60 sec)												
Protein (albumin) (60 sec)												
Urobilinogen (60 sec)												
Nitrite/Leukocytes (120 sec)												
UpH x 10	drug Adj UpH	B=(UpH-50)/2		68		^B 9	52		^B 1	55		^B 2
SpH1 x 10	drug Adj SpH	C=(SpH-62)		68		^C 6	70		^C 8	69		^C 7
SpH2 x 10 (2+ min)	SpH2 - SpH1			72		4	70		0	69		0
HYDRATION (0, -12-, 12+) = A + B + C - 12				8			-6			-6		
A + B - C		(drug Adj) SG - HYD		^D 8		^E 2	^D -10		^E 26	^D -8		^E 26
Dermo A/L	Edema	RR		0/0		+1 16	0/0		0 18	0/0		0 16
SBP1	Pa	SBP2		170	72	178	170	72	178	164	74	170
DBP1	Pa-P1	DBP2		114	¹⁰ 2	116	108	¹⁰ 2	112	102	¹⁰ 4	106
P1	P2	P3		70	84	80	70	82	80	70	82	80
BHT	RR - (BHT/5)		DBP2-P3	37	⁸ 9	⁹ 36	60	⁸ 6	⁹ 32	49	⁸ 6	⁹ 26
SBP2 - SBP1		DBP2 - DBP1		8	2		8	4		6	4	
(SBP2 - SBP1) + (DBP2 - DBP1)				⁷	10		⁷	12		⁷	10	
(SBP2 - SBP1) - (DBP2 - DBP1)				⁶	6		⁶	4		⁶	2	
(Higher SBP1 or 2) + (Higher DBP1 or 2)				⁵	294		⁵	290		⁵	276	
(Highest P) - (P1)		(Highest P) - (P3)		14	4		12	2		12	2	
(Highest P - P1) + (Highest P - P3)				⁴	18		⁴	14		⁴	14	
(Highest P - P1) - (Highest P - P3)				³	10		³	10		³	10	
(Highest P - P1) + (Higher SBP - Lower)				²	22		²	20		²	18	
(Highest P - P1) - (SBP2 - SBP1)				¹	6		¹	4		¹	6	
Electrolyte S/I ?				ES			ES			ES		
Anaerobic/Dysaerobic ?				A			D			D		
Glucogenic/Ketogenic ?				—			—			—		
Symp/Parasymp ?				—			—			—		
Acid/Alkaline?				—			—			—		
Other? (Prostaglandin, GI, Medication, etc.) (Body Temp, Day of Cycle, etc.)				PG			PG Insomnia +4 Diarrhea +4			PG		
Supplementation:				Activator 2, 2 X, A Formula ES 3, 2 X, A Taurine 2, 2 X, B Adapto-Max 3 A brkfst Oxy-Max 3 A eve meal K Citrate ½ scoop* Phos Drops 1/8 tsp* Oxy A 2, 2 X, A Oxy Tonic 1 scoop* I-S Immune Power 2, 2X, B			Activator ✓ ES ✓ Taurine 1, 2 X, B Adapto-Max ✓ Oxy-Max ✓ K Citrate ✓ MgCl ₂ ½ scoop* Phos Drops 7/8 tsp* Stop A & Oxy Tonic ↓ I-S I-Power to 2, 1X, B Add I-S X-Flam 2, 1X, B			Activator ✓ ES ✓ Taurine 1, 2 X, B Adapto-Max ✓ Oxy-Max ✓ K Citrate ✓ MgCl ₂ ½ scoop* Phos Drops 3/8 tsp* D 2, 2 X, A D+ 3/8 tsp, 2 X, B I-S I-Power 2, 1X, B I-S X-Flam 2, 1X, B		
Diet:				Eat Well – Be Well Ana Diet PG Diet			Eat Well – Be Well PG Diet			Eat Well – Be Well Dys Diet PG Diet		
				* Electrolyte Tonic=* Mix in 2 cups water. Drink ½ b/f brkfst & ½ b/f meals 2/3.			* Electrolyte Tonic=* Mix in 3 cups water. Drink ½ b/f brkfst & ½ b/f meals 2/3.			* Electrolyte Tonic=* Mix in 3 cups water. Drink ½ b/f brkfst & ½ b/f meals 2/3.		

PATIENT #6 ANALYSIS AND RECOMMENDATIONS:

First Test (Day 0)

Analysis of 5 Fundamental Metabolic Balance Systems:

- 1) ES/EI: 3 out of the first 4 tests indicate ES.
- 2) D/A? Both of the first two tests indicate A.
- 3) G/K? No.
- 4) S/P? No.
- 5) Ac/Al? No.
- 6) PG Diet is needed due to back pain.

Supplementation and Diet.

Follow QRG protocol for choosing ES Supplements and for A Supplements. Note: Even though the QRG lists Oxy Tonic as 1/2 scoop, 2 X before, since this patient is mixing an Electrolyte Tonic anyway, the sum of the 2 doses (or the whole day's worth) of Oxy Tonic should be thrown into the Electrolyte Tonic instead of having to fool with a separate supplement later in the day.

The patient's Eating Plan must include Eat Well – Be Well and the Anaerobic Diet.

First Follow-Up (Day 3)

Analysis:

- 1) ES/EI? 3 out of 5 tests indicate ES.
- 2) D/A? Both of the first 2 tests indicate Dysaerobic, even though the patient was Anaerobic on the first test. The patient also reports on Day 3 with extreme dysaerobic symptoms, insomnia and diarrhea.
- 3) G/K? No.
- 4) S/P? No.
- 5) Ac/Al? No.
- 6) PG Diet.

Supplementation and Diet:

Follow QRG protocol for choosing ES Supplements. The supplementation for the Anaerobic Imbalance must be stopped immediately.

Eating Plan requires deleting the Anaerobic Dietary recommendations.

Since the patient showed an extreme reaction to the Anaerobic supplementation -- shifting to a strongly Dysaerobic test pattern accompanied by extreme dysaerobic symptoms -- we have stopped the Anaerobic supplementation. We do not know as yet whether the patient needs to be actually treated as Dysaerobic or whether stopping the A and Oxy Tonic will allow the patient's D/A test pattern to normalize. We must therefore schedule another Follow-Up test within a week.

Second Follow-Up (Day 6)

Analysis:

- 1) ES/EI? 3 out of 5 tests indicate ES.
- 2) D/A? Both of the first 2 tests indicate D.
- 3) G/K? No.
- 4) S/P? No.
- 5) Ac/Al? No.
- 6) PG Diet.

Supplementation and Diet:

Follow QRG protocol for choosing ES Supplements and for choosing D Supplements.

The Eating Plan now includes Eat Well – Be Well, the Dyaerobic Diet and the Prostaglandin Diet.

Name: #7 Age: 28 Gender: F
 Major Complaints and Drugs: Depression; fatigue; insomnia; PMS (no meds.)

If on any of these drugs, Adjust:	DATE			FIRST TEST			DAY 7		
	SG = SG -6 (UpHx10) = +6 (SpHx10) = -3	Glucose (30 sec)							
	Bilirubin (30 sec)								
	Ketones (40 sec)								
	SG (45 sec)	drug Adj SG	A = SG#	15		^A 0	20		^A -3
If on 2 or more:	Blood (60 sec)								
SG = SG -10 UpH = +10 SpH = -5	Protein (albumin) (60 sec)								
	Urobilinogen (60 sec)								
	Nitrite/Leukocytes (120 sec)								
- Statins - Tylenol/ Acetaminphn	UpH x 10	drug Adj UpH	B=(UpH-50)/2	60		^B 5	60		^B 5
- Advil/ Ibuprofen	SpH1 x 10	drug Adj SpH	C=(SpH-62)	70		^C 8	68		^C 6
- Aleve/ Naproxen	SpH2 x 10 (2+ min)		SpH2 - SpH1	70		0	68		0
- Beta Blocker	HYDRATION (0, -12-, 12+) = A + B + C - 12			1			-4		
- Ca Channel Blocker	A + B - C		(drug Adj) SG - HYD	^D -3		^E 14	^D -4		^E 24
- ACE Inhibitor	Dermo A/L	Edema	RR	R1/W1	+1	15	0/W1	0	16
- Angiotensin Blocker	SBP1	Pa	SBP2	100	81	104	100	80	104
	DBP1	Pa-P1	DBP2	78	¹⁰ 3	78	80	¹⁰ 6	82
	P1	P2	P3	74	78	72	74	80	78
	BHT	RR - (BHT/5)	DBP2-P3	81	⁸ -1	⁹ 6	83	⁸ -1	⁹ 4
	SBP2 - SBP1		DBP2 - DBP1	4		0	4		2
	(SBP2 - SBP1) + (DBP2 - DBP1)			⁷		4	⁷		6
	(SBP2 - SBP1) - (DBP2 - DBP1)			⁶		4	⁶		2
	(Higher SBP1 or 2) + (Higher DBP1 or 2)			⁵		182	⁵		186
	(Highest P) - (P1)		(Highest P) - (P3)	7		9	6		2
	(Highest P - P1) + (Highest P - P3)			⁴		16	⁴		8
	(Highest P - P1) - (Highest P - P3)			³		-2	³		4
	(Highest P - P1) + (Higher SBP - Lower)			²		11	²		10
	(Highest P - P1) - (SBP2 - SBP1)			¹		3	¹		2
0- +8	Electrolyte S/I ?			—			—		
1 +8	Anaerobic/Dysaerobic ?			—			—		
2 +8	Glucogenic/Ketogenic ?			✗			—		
3 +8	Symp/Parasymp ?			P			P		
4 +8	Acid/Alkaline?			—			—		
5 +7	Other? (Prostaglandin, GI, Medication, etc.) (Body Temp, Day of Cycle, etc.)			PG			PG		
6 +7	Supplementation:			Activator 2, 2 X, A Complex P 1, 2 X, A Phos Drops 1/2 tsp* Tyrosine 2, 2 X, B Phenylalanine 2, 2 X, B Glutamine 2, 2 X, B I-S Immune Power 2, 2X, B			Activator ✓ P ✓ NaGlyc 2 scoops Phos Drops ✓ Tyrosine ✓ Phenylalanine ✓ Glutamine ✓ I-S Immune Power ✓		
7 +7	Diet:			Eat Well – Be Well P'symp Diet PG Diet			Eat Well – Be Well P'symp Diet PG Diet		
8 +5				* Electrolyte Tonic=* Mix in 2 cups water. Drink 1/2 b/f brkfst & 1/2 b/f meals 2/3.			* Electrolyte Tonic=* Mix in 3 cups water. Drink 1/2 b/f brkfst & 1/2 b/f meals 2/3.		
9 +5									
10 +5									
11 +3									
12 +3									
13 +1									
14 +1									
15 0									
16 0									
17 0									
18 -1									
19 -1									
20 -3									
21 -3									
22 -5									
23 -5									
24 -5									
25 -7									
26 -7									
27 -7									
28 -8									
29 -8									
30+ -8									

PATIENT #7 ANALYSIS AND RECOMMENDATIONS:

First Test (Day 0)

Analysis of 5 Fundamental Metabolic Balance Systems:

- 1) ES/EI? No.
- 2) D/A? No.
- 3) G/K? 1 out of the first 2 tests indicate K, Ketogenic Imbalance confirmed by DBP2-P3.
- 4) S/P? 2 of the 4 tests indicate P.
- 5) Ac/AI? No.
- 6) PG Diet is needed due to PMS symptoms.

Since we have a patient testing both Ketogenic and Parasympathetic we must eliminate one of these Imbalances by the [***] criteria in your QRG. In this patient, the first criterion applies. Since the (Highest P-P1)–(Highest P-P3) is 4, and P3 is not 88+, we will treat the Parasympathetic Imbalance and not treat the Ketogenic test pattern.

Supplementation and Diet:

Follow QRG protocol for choosing P Supplements. Note: Sodium glycerophosphate is indicated under the Parasympathetic supplements, but, since that patient has a Ketogenic test pattern (even though we are not treating the Ketogenic test pattern) the sodium glycerophosphate gets an X.

The patient's Eating Plan must include Eat Well – Be Well, the Parasympathetic Diet, and the Prostaglandin Diet.

First Follow-Up (Day 7)

Analysis:

- 1) ES/EI? No.
- 2) D/A? No.
- 3) G/K? No.
- 4) S/P? Parasympathetic test pattern appears once again.
- 5) Ac/AI? No.
- 6) PG Diet.

The patient tests both Ketogenic and Parasympathetic on the follow-up test; per the QRG the patient will continue to be treated as Parasympathetic.

Supplementation and Diet:

Follow QRG protocol for choosing P Supplements.

Eating Plan requires no changes.

Since the patient's Imbalance has been confirmed and no new Imbalances have shown up, the patient will not need a Follow-Up test for 3 weeks.