

Table II - Office IV Protocols

Shrader's

New York

IV Push Protocols U All IV Infusions, sterile water as additive

| Protocols ⇨ | mOsm per mL | Gaby | Acute Asthma | Eczema ‡ | Headache, Migraine, muscle spasm, etc. | Chronic Asthma | Modified Asthma | Chronic Illness CFIDS, etc. | Acute Viral Illness | Super-immuno |
|--|-------------|------------------|------------------|------------------|--|------------------|------------------|-----------------------------|---------------------|------------------|
| Nutrients U | | 35 ⁰⁰ | 35 ⁰⁰ | 15 ⁰⁰ | 15 ⁰⁰ | 40 ⁰⁰ | 40 ⁰⁰ | 40 ⁰⁰ | 40 ⁰⁰ | 40 ⁰⁰ |
| Vitamin A 50,000 U/mL † 370 - 10 ⁰⁰ | 2.34 | | | | | 2 | 4 | 4 | 8 | 8 |
| Amino Acids (Travesol 8.5%) - 8.50 per 50cc | .09 | | | | | | | 50 | | |
| Ascorbic Acid 500 mg/mL | 5.8 | 4 | 3 | | | 12 | 10 | 20 | 100 | 50 |
| B-6 (Pyridoxine) 100 mg/mL | 1.11 | 1 | 3 | | 4 | 5 | 3 | 2 | 3 | 2 |
| B-12 (hydroxycobalamine) 1000 mcg | .30 | 2 | 5 | | | 5 IVP* | 5 IVP* | 5 IVP* | 10 | 15 IVP* |
| B-15 (dimethyl glycine) 50 mg/mL † | 1.50 | | (3-5) opt | | | (4-6) opt | (4-6) opt | | | |
| B-Complex 100 mg/mL | 2.14 | 1 | 2 | | | 2 | 2 | 2 | 5 | 1 |
| Calcium Gluconate 10% 100 mg/mL | .72 | 2 | 2 | | | 2 | 2 | 2 | 50 | 20 |
| Vitamin E 250 IU/mL † 4.00 | | | | | | | | (2)∇ | (2)∇ | (2)∇ |
| Folic Acid 10 mg/mL † | .20 | | | | | | | | | 10 |
| Germanium 100mg/mL † can't do | 11.50 | | | | | | | | | 20 |
| Glutathione 50 mg/mL † | 1.50 | | | | | 3 | 3 | 6 | | |
| Glyceron (glycyrrhizin) 8 mg/mL † | 1.50 | | | 6 † | | | | (6) opt | | (7) opt |
| Heparin 5,000 U/mL | .46 | | | 1 | | | | | | |
| HCl (hydrochloric acid) 2 mg/mL † | .11 | | | | | | 10 | | 10 | |
| Magnesium Sulfate 500 mg/mL | 4.06 | 2 | 4 | | 3 | 5 | 5 | 4 | 4 | 4 |
| Magnesium Chloride 200 mg/mL | 2.95 | (5) | (10) | | (7) | (12) | (12) | (10) | (10) | (10) |
| Mineral Mix ** † | .57 | | | | | 1 | 1 | 2 | | 2 |
| Molybdenum 500 mcg/mL † | .005 | | | | | 1 | 0.5 | | | |
| N-acetyl cysteine † | .50 | | (3-10) opt | | | | | | | |
| Nutripan (Pantothenic acid) 250 mg/mL | .85 | 1 | 2 | | | 2 | 2 | 3 | 3 | 3 |
| Procaine | .28 | | | | | | | | | |
| Taurine † | .50 | | | | | | | 6 | | 10 |
| Zinc 5 mg/mL | .50 | | | | | | | | | 1 |
| Additives | | 13 | 21 | 7 | 7 | 35 | 42.5 | 101 | 193 | 131 |
| Sterile Water | 0 | 20 | 39 | 3 | 23 | 250 | 250 | 500 | 900 Y | 950 * |
| Normal Saline, .9% | .31 | | | | | | | | | |
| Administration set (Syringe or IV set, in mL) | | 30 | 60 | 10 | 30 | 250 | 250 | 500 | 1000 | 1000 |
| Osmolarity (mOsm/L) | | 1135 | 765 | 346 | 554 | 385 | 348 | 339 | 563 | 326 |
| Office Visit (Minimal Service) 99211 | | | | | | | | | | |
| Catheter/Butterfly 36000 | | | | | | | | | | |
| IV Asthma: 90788 Other: 90780 | | | | | | | | | | |
| Extra Hour 90781 | | | | | | | | | | |

‡ This protocol contains glycyrrhizin, a non-FDA approved botanical that cannot be compounded. Use this protocol at your own risk.

† These items ARE NOT FDA-APPROVED, and should be compounded by a compounding pharmacy

* IVP agents not included in volume or osmolarity calculations, and are given IVP (IV "push") at end of the IV

** Formulation: Copper 1 mg/mL, chromium 50 mcg/mL, manganese 100 mcg/mL, molybdenum 250 mcg/mL, selenium 200 mcg/mL, vanadium 100 mcg/mL, zinc 5 mg/mL. (This formula compounded by College Pharmacy)

∇ Elective, and should be given IM ONLY

Y Remove 100 mL of water from the IV bottle before adding additives

* Remove 50 mL of water from IV bottle before adding additives

Numbers in parentheses not included in volume calculations, and will not alter osmolarity significantly MgCl is an alternative to MgSO₄; they are not to be used together.

NOTE: IF IV DONE IN CONJUNCTION WITH PHYSICIAN VISIT, ADD AN OFFICE VISIT TO COST OF IV, AND DO NOT BILL CODE 99211 (THAT IS A NURSING CODE)

REV. 4/8/96 Protocols developed by W.A. Shrader, Jr., M.D. (except "Gaby" Protocol) and have received extensive testing.

() = optional

District here is a start on protocols I will order supplies & get more protocols. I will order

TAHOMA CLINIC INTRAVENOUS PROTOCOLS

515 W. Harrison, Suite 200, Kent, WA 98032 (telephone: 206-854-4900)

Note: At Tahoma Clinic, most IV protocols are based on an osmolarity of 300 milliosmols/L; some of the solutions are hypertonic. The osmolarity of each individual vitamin and mineral is based on the stock we carry in our clinic and may need to be calculated differently in your clinic if your stock is different. If we can be of assistance to you in providing further information, please contact us.

Antiviral Treatment (Short)

| | |
|---------------------------------|-------|
| B-complex 100 | 2 ml |
| Dexpanthenol (250 mg/ml) | 2 ml |
| Hydroxocobalamin (1,000 mcg/ml) | 1 ml |
| Magnesium chloride (20%) | 5 ml |
| HCl (2 mg/ml; 1:500) | 5 ml |
| Ascorbic acid (500 mg/ml) | 10 ml |

In 100 ml of lactated ringer's, given over 30 minutes

can add selenium
 can liquify cancers too fast
 Activate cells white

Antiviral Treatment (Long)

| | |
|---------------------------------|--------|
| Ascorbic acid (500 mg/ml) | 100 ml |
| Calcium gluconate (10%) | 50 ml |
| B-complex 100 | 5 ml |
| Hydroxocobalamin (1,000 mcg/ml) | 3 ml |
| Pyridoxine (100 mg/ml) | 3 ml |
| Magnesium chloride (20%) | 10 ml |
| ACE | 6 ml |

In 450 ml of sterile water. Administer over at least 2.5 hours. Use large vein.

Add selenium

Antiviral IV for Hepatitis

| | |
|---|------------------|
| Ascorbic acid (500 mg/ml) | 150 ml (75 g) |
| Selenium (200 mcg/ml) | 2 ml (400 mcg) |
| Calcium gluconate (10%) | 50 ml (5 g) |
| Vitamin B-complex-100 | 5 ml |
| Vitamin B12 (1,000 mcg/ml) | 3 ml (3,000 mcg) |
| Magnesium sulfate (50%) | 4 ml (2 g) |
| Vitamin B6 (100 mg/ml) | 3 ml (300 mg) |
| Sodium bicarbonate (8.4%, if needed to relieve vein irritation) | 10-12 ml |
| Sterile water | 450 ml |

Infuse over 4-5 hours. Advise patient to maximize oral vitamin C intake between IV's.

Use 2-3x/week
 Now Adds Selenium
 within 10 days
 Normalizes SGOT/PT (ALT) etc

Take oral vit c also

glycerizin in licorice strongly antiviral

TRACE MINERAL IV's (Tahoma Clinic Protocols)

for chelation's

Note: All IV's are caculated to equal 300 mOsm/L

Left off in printing,

Trace Mineral IV #1

| | | |
|--------------------------|---------|-----------|
| Calcium gluconate (10%) | 50 ml | 36.3 mOsm |
| Magnesium chloride (20%) | 15 ml | 24.4 |
| Zinc (1 mg/ml) | 5 ml | 1.5 |
| Copper (0.4 mg/ml) | 2 ml | 0 |
| Chromium (4 mcg/ml) | 12.5 ml | 0 |
| Selenium (40 mcg/ml) | 5 ml | 0 |
| Manganese (0.1 mg/ml) | 1 ml | 0.3 |
| Sterile water | 125 ml | 0 |
| Total | 205 ml | 62.4 mOsm |

+
BORON
Lithium
Molybdenum
Ruthenium
Strontium
Vanadium
Cesium

Trace Mineral IV #2

| | | |
|--------------------------|---------|-----------|
| Calcium gluconate (10%) | 50 ml | 36.3 mOsm |
| Magnesium chloride (20%) | 15 ml | 24.4 |
| Zinc (1 mg/ml) | 10 ml | 3.0 |
| Copper (0.4 mg/ml) | 3 ml | 0 |
| Chromium (4 mcg/ml) | 12.5 ml | 0 |
| Selenium (40 mcg/ml) | 5 ml | 0 |
| Manganese (0.1 mg/ml) | 1 ml | 0.3 |
| Sterile water | 125 ml | 0 |
| Total | 215 ml | 64.0 mOsm |

Trace Mineral IV #3

| | | |
|--------------------------|---------|-----------|
| Calcium gluconate (10%) | 50 ml | 36.3 mOsm |
| Magnesium chloride (20%) | 15 ml | 24.4 |
| Zinc (1 mg/ml) | 10 ml | 3.0 |
| Copper (0.4 mg/ml) | 3 ml | 0 |
| Chromium (4 mcg/ml) | 12.5 ml | 0 |
| Selenium (40 mcg/ml) | 5 ml | 0 |
| Manganese (0.1 mg/ml) | 2 ml | 0.6 |
| Sterile water | 125 ml | 0 |
| Total | 215 ml | 64.3 mOsm |

Chromium now available 200 mcg/ml can use 1/2

Trace Mineral IV #4

| | | |
|--------------------------|--------|-----------|
| Calcium gluconate (10%) | 50 ml | 36.3 mOsm |
| Magnesium chloride (20%) | 15 ml | 24.4 |
| Zinc (1 mg/ml) | 10 ml | 3.0 |
| Copper (0.4 mg/ml) | 3 ml | 0 |
| Chromium (4 mcg/ml) | 25 ml | 0 |
| Selenium (40 mcg/ml) | 10 ml | 0 |
| Manganese (0.1 mg/ml) | 2 ml | 0.6 |
| Sterile water | 125 ml | 0 |
| Total | 225 ml | 64.3 mOsm |

Trace Mineral IV #5 and #6

| | | |
|--------------------------|--------|------------|
| Calcium gluconate (10%) | 100 ml | 72.5 mOsm |
| Magnesium chloride (20%) | 30 ml | 48.7 |
| Zinc (1 mg/ml) | 10 ml | 3.0 |
| Copper (0.4 mg/ml) | 3 ml | 0 |
| Chromium (4 mcg/ml) | 25 ml | 0 |
| Selenium (40 mcg/ml) | 10 ml | 0 |
| Manganese (0.1 mg/ml) | 2 ml | 0.6 |
| Sterile water | 280 ml | 0 |
| Total | 440 ml | 124.9 mOsm |

Glaucoma

Chromium (4 mcg/ml) 12.5 ml
 Thiamine (100 mg/ml) 1 ml
 ACE 6-10 ml

adrenal cortical extract

In 150 ml of lactated ringers given over 30 minutes. Increase the dose of chromium each time by 50 mcg (12.5 ml), to a maximum of 200 mcg in 200 ml of lactated ringer's. Administer weekly until chromium dosage has reached 200 mcg; then every two weeks for one month, then monthly.

Josephson protocol

Hypertension

Magnesium chloride (20%) 5-10 ml
 Pyridoxine (100 mg/ml) 4-6 ml

In 100 ml of lactated ringer's, given over 30 minutes

Macular Degeneration

Option #1:

Zinc (1 mg/ml) 10 ml
 Selenium (40 mcg/ml) 10 ml

> CORE RX

*50% get improvement in vision **

Option #2:

MTE-5 Concentrate 2 ml
 Selenium (40 mcg/ml) 8 ml

JW adds to trace mineral IV

This option provides about the same amount of zinc and selenium, but also provides copper, chromium, and manganese.

In 120 ml of lactated ringer's, given over 30 minutes. Give twice weekly for four weeks. May then double the dosage and give weekly as needed for maintenance.

Arrhythmias

Selenium 2 mg
 Manganese 2 mg
 Magnesium 2 mg
 Copper 2 mg

Start with #2 Mineral IV doses and increase weekly until #6 Mineral IV doses. Re-evaluate after 5th IV.

not for VTach (!) + does not work well for atrial Fibrillation

*one * ↓
 20/300 ↓ 20/400
 ↓ 20/40 + 20/50*

Intravenous Vitamin C Protocol

- 500 cc Glass bottle with sterile water
- 10 cc Calcium gluconate
- 50 cc Bottle of sodium ascorbate or other Vitamin C (500 mg/cc) This bottle contains 25 gram Vit.C . [Prefer Beet-Derived Vit. C, from College Pharmacy: 800-888-9358]

Mix 1 to 2 bottles of Vit C, the bottle of Ca-gluconate into the solution and infuse over 1 to 2 hours. The slower the better.

Possible problems:

1. IV-C makes people hypoglycemic. Patient has to eat before IV. If he/she gets pale, cold-sweaty anyway, know that your most likely problem is hypoglycemia. Use the dextrose from your emergency kit, draw up 20 cc and inject slow IV push through the same #23 butterfly that you already have in place
2. IV-C makes people thirsty. Have them drink plenty of water before, during and after. Use a mobile IV pole, so the patient can walk with the IV to the bathroom. Make sure that they have a cup full of water by their comfortable IV chair
3. IV-C causes a low-grade phlebitis in some people some of the time. This is not a dangerous event, but can be bothersome, worrisome and more in the wrong patient. Tell the patient this may happen before. Use a different vein with subsequent visits, even if your favorite vein looks o.k. after the first round. If the IV burns during the procedure, adjust the needle, the position of the arm, etc. If it still hurts, add 5 cc of Sodium bicarbonate 8.4% to the solution. If it still hurts, add 5-10 cc Procaine. If it still hurts, find another vein. If it still hurts, choose another treatment.
4. I usually use 1-1/2 bottle of C (37.5 grams). Anything from 25 to 100 grams is safe. The faster you go and the more C, the more problems. The more C you use, the better the effect on the patient's health
5. Use this protocol, often. Treat yourself every Friday night. It works best, before you get sick (as a preventative).

Modifications:

- Glutathione: 600 mg
- Insulin, Humulin: 3 to 5 units
- Other:
-

Additional instructions:

Supplies:

McGuff Company: 3524 Westlake Center Drive, Santa Ana, CA 92704
1-800-854-7220; 714-545-2491; fax: 714-540-45614

VIII. Macular Degeneration

Option # 1

| | |
|----------------------|-------|
| Zinc (1mg/ml) | 10 ml |
| Selenium (40 mcg/ml) | 10 ml |

Option #2

| | |
|----------------------|------|
| MTE-5 concentrate | 2 ml |
| Selenium (40 mcg/ml) | 8 ml |

In 120 ml of lactated ringer's given over 30 minutes. Give twice weekly for four weeks. May then double doses and give weekly for maintenance.