

Nutraceutical Synergy & Protocol Optimizer

Client Name: _____ Date: _____

Objective: To transition from a high-burden "supplement graveyard" to a targeted, synergistic protocol that maximizes bioavailability and minimizes pill fatigue.

Section 1: The "Supplement Graveyard" Audit

List the client's current supplements. Identify "lonely" nutrients (lacking synergies) or poor delivery systems (e.g., Magnesium Oxide).

Current Supplement	Form (e.g., Capsule, Liposomal)	Purpose/Goal	Synergistic Partner Missing?
1.			[] Yes: _____
2.			[] Yes: _____
3.			[] Yes: _____
4.			[] Yes: _____
5.			[] Yes: _____

Section 2: Bioavailability & Interaction Safety Check

Check for High-Risk Interactions (HDNIs): * [] Is the client on Statins/CCBs? (Avoid Grapefruit Seed Extract) * [] Is the client on SSRIs? (Avoid 5-HTP/St. John's Wort) * [] Is the client on Blood Thinners? (Monitor Vitamin K/High-dose Omega-3) * [] Other medications: _____

Delivery System Optimization: * **Liposomal:** Recommended for _____ (e.g., Vit C, Glutathione, Ubiquinol) * **Chelated:** Recommended for _____ (e.g., Magnesium Bisglycinate) * **Micellar:** Recommended for _____ (e.g., Fat-soluble vitamins for gallbladder issues)

Section 3: The Optimized "Rule of 5" Protocol

Consolidate the audit into no more than 5 high-impact, synergistic interventions.

Priority	Targeted Synergy / Combination Product	Dosing Strategy (Loading, Maintenance, or Pulse)	Timing (AM/PM, With Fat, Away from Food)
1			
2			
3			
4			
5			

Section 4: Precision Dosing & Sensitivity Strategy

Client Sensitivity Profile: [] **The "Sensitive Soul" (MCAS/MCS):** Use "Start Low, Go Slow" (1/4 dose, titrate every 3 days). [] **Acute Deficiency:** Use "Loading Dose" for _____ weeks. [] **Microbiome/Antimicrobial:** Use "Pulse Dosing" (e.g., 4 days on, 3 days off).

Observation Log (To be filled by client): *Did you experience a "Herx" (die-off) reaction or increased fatigue?*

Section 5: Practitioner Reflection & Score

Protocol Efficiency Score: * Total pills reduced: _ * **Synergies created (e.g., D3+K2):** _ * Estimated monthly cost savings for client: \$_____

Next Steps / Re-evaluation Date:

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