

Metabolic Engineering & Pulse-Dosing Protocol

Client Name: _____ Date: _____

Primary Goal: Autophagy/Longevity Neuro-Regeneration Metabolic Flexibility

Section 1: Metabolic State Assessment

Identify if the client is stuck in chronic mTOR (Growth) mode or lacks AMPK (Repair) activation.

Check all that apply: - [] Fasting Insulin > 7 ulU/mL (mTOR Dominance) - [] Brain fog or irritability after high-protein meals (Possible Ammonia/Urea Cycle issue) - [] Weight loss resistance / "Metabolic Stall" - [] Exercise intolerance or slow recovery - [] History of chronic inflammation or autoimmunity

Biochemical Strategy: - Primary Goal: _____ - Target Pathway: Activate AMPK/Sirtuins (Repair) Modulate mTOR (Growth)

Section 2: The Weekly Pulse-Dosing Tracker

Use this table to implement "Metabolic Pulsing." Do not stay on one phase for too long to avoid adaptation.

Day	Dietary Protocol (e.g., Keto, FMD, Carb-Refeed)	Protein Pulse (High, Low, or Fast)	Targeted Supplements (e.g., NAD+ boosters, Ornithine, Berberine)
Mon			
Tue			
Wed			
Thu			
Fri			
Sat			
Sun			

Section 3: Targeted Biochemical Interventions

Instructions: Fill in the specific "molecular switches" prescribed for this protocol.

1. **Ammonia Clearance:** If brain fog occurs after protein, take ____ mg of **L-Ornithine**.
 2. **The GABA Flip:** To counter glutamate excitotoxicity, take ____ mg of **Taurine/Magnesium**.
 3. **Sirtuin Support:** Take **NAD+ Precursor (NR/NMN)** at ____ am.
 4. **Autophagy Trigger:** Implement a 24-hour protein fast on (Day): ____.
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Section 4: Symptom & Momentum Reflection

Rate the following on a scale of 1-10 (10 being best) at the end of the week.

- **Mental Clarity / "Power-Washed" Brain:** ____ / 10
- **Energy Stability:** ____ / 10
- **Digestive Comfort (FODMAP/Sensitivity):** ____ / 10
- **Exercise Recovery:** ____ / 10

Practitioner Observations:

Next Steps:

- Maintain current pulse for 4 weeks
 - Shift to Fasting-Mimicking Diet (FMD) for 5 days next month
 - Adjust BCAA-to-Tryptophan ratio for mood support
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