VITAMIN, MINERAL & HERBAL SUPPLEMENT SCHEDULE

TIMING, DOSAGE BIOAVAILABILITY & 7-DAY COMPLIANCE LEDGER

WEEK OF: _____/_____ to _____/_____/20____ PRIMARY HEALTH FOCUS: _____ PRESCRIBING PHYSICIAN: _____ DAILY WATER TARGET: _____ OZ

BIOAVAILABILITY RULES: FAT-SOLUBLE (A, D3, E, K2, CoQ10) WITH HEALTHY FATS | MINERALS (Zinc, Iron) AWAY FROM CALCIUM & COFFEE | MAGNESIUM AT BEDTIME

#	SUPPLEMENT NAME & BRAND	CHEMICAL FORM & POTEN(	DOSAGE	OPTIMAL INTAKE PROTOCOL	MON	TUE	WED	THU	FRI	SAT	SUN	SYNERGIES & INTERACTIONS
1				[ ] AM [ ] Noon [ ] Eve [ ] Bed	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	
2				[ ] AM [ ] Noon [ ] Eve [ ] Bed	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	
3				[ ] AM [ ] Noon [ ] Eve [ ] Bed	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	
4				[ ] AM [ ] Noon [ ] Eve [ ] Bed	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	
5				[ ] AM [ ] Noon [ ] Eve [ ] Bed	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	
6				[ ] AM [ ] Noon [ ] Eve [ ] Bed	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	
7				[ ] AM [ ] Noon [ ] Eve [ ] Bed	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	
8				[ ] AM [ ] Noon [ ] Eve [ ] Bed	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	
9				[ ] AM [ ] Noon [ ] Eve [ ] Bed	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	
10				[ ] AM [ ] Noon [ ] Eve [ ] Bed	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	
11				[ ] AM [ ] Noon [ ] Eve [ ] Bed	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	
12				[ ] AM [ ] Noon [ ] Eve [ ] Bed	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	
13				[ ] AM [ ] Noon [ ] Eve [ ] Bed	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	

WEEKLY ADHERENCE SCORE: **PILL ORGANIZER REFILL: [ ] Completed on Sunday** **BOTTLES TO RE-ORDER: _____**

Days 100% Compliant: _____ / 7 Days | Weekly Adherence Rate: _____ % | Digestive Tolerance: [ ] Excellent [ ] Mild Nausea (Take with larger meal)

Physical Energy / Sleep Improvements Observed: _____

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