Scott's Antidote

Medical Information Disclaimer

1. Section 1. Credit: 1.1 This document was created using a template from SEQ Legal (https://seqlegal.com).
2. Section 2. No advice: 2.1 This page and those which may be attached contain general medical information. 2.2 The medical information is not advice and should not be treated as such.
3. Section 3. No warranties: 3.1 The medical information within this page(s) is provided without any representations or warranties, express or implied. 3.2 Without limiting the scope of Section 3.1, we do not warrant or represent that the medical information on this page(s): (a) will be constantly available, or available at all; or (b) is true, accurate, complete, current or non-misleading.
4. Section 4. Medical assistance: 4.1 You must not rely on the information within this page(s) as an alternative to medical advice from your doctor or other professional healthcare provider. 4.2 If you have any specific questions about any medical matter, you should consult your doctor or other professional healthcare provider. 4.3 If you think you may be suffering from any medical condition, you should seek immediate medical attention. 4.4 You should never delay seeking medical advice, disregard medical advice or discontinue medical treatment because of information on this page(s).
5. Section 5. Limits upon exclusions of liability: 5.1 Nothing in this disclaimer will: (a) limit or exclude any liability for death or personal injury resulting from negligence; (b) limit or exclude any liability for fraud or fraudulent misrepresentation; (c) limit any liabilities in any way that is not permitted under applicable law; or (d) exclude any liabilities that may not be excluded under applicable law.

Scott's Chlorine Dioxide Use Rational

1. My following chlorine dioxide (ClO_2) usages are not based solely on FDA approved studies or studies done by the pharmaceutical companies for purposes of human use. My usages are also based upon EPA, WHO and other studies done primarily on animals to determine toxicity levels of various ClO_2 concentrations and products destined for market, some of which have received approval for human oral use and veterinary wound care use. In addition, they are based upon the experiences of hundreds of ClO_2 users, including my own personal experiences. (Example of an animal toxicity study: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5369164/pdf/ijerph-14-00329.pdf)

Scott's Chlorine Dioxide Safe Use and Efficacy Theory

2a. Based on my experience, users of chlorine dioxide solutions use them for various infectious diseases; as an antibiotic and antiviral (similar to Azithromycin), as an antifungal, as an antiparasitic agent against microscopic parasites such as malaria (like Hydroxychloroquine), for cancers as a mild form of chemotherapy and as a mild oxidizer to neutralize dangerous toxins within the body that may accumulate especially during times of high bodily stress, such as in the conditions of sepsis and cancer. 2b. In general, users of chlorine dioxide do this based upon the theory that pathogens, microscopic parasites, cancer cells and toxins will be overcome by the oxidative stress that chlorine dioxide causes them, while at the same time the healthy cells of the body will be resistant to that same oxidative stress due to their much larger size and favorable disposition towards reactive oxygen species (ROS) in general. 2c. Based on this theory, the following are ways in which I would use ClO_2 to treat various diseases, always trying to keep the ClO_2 concentration as low as possible to avoid toxicity to my body, while at the same time high enough to stop bacterial, viral, fungal and parasitic infections, to kill cancer cells and to neutralize toxins. 2d. The parts per million (ppm) of ClO_2 concentrations shown below are my own best estimates of safe and effective concentrations based on my own experiences of 15 years and the reports of many hundreds of users representing hundreds of years of collective Chlorine Dioxide use. 2e. Much of this use has been based upon WHO and EPA safety studies, product studies and studies which are integral parts of the many ClO_2 based patents in the US and around the world. 2f. Therefore, once again, nothing written here should be construed as being medical advice for anyone – these are just the concentrations that I the author think would be best to use for myself. (Please see the Medical Information Disclaimer above.)

Scott's Antidote *(What is it?)*

3a. **Scott's Antidote** is ten drops (0.5ml) of 20 to 25% Sodium Chlorite that has been acidified with ten drops (0.5ml) of 4% Hydrochloric Acid for exactly 5 minutes in a container that is narrow enough or sealed in such a way, so as to not allow hardly any of the Chlorine Dioxide gas to escape during the acidification process. 3b. After 5 minutes, the 1ml solution will have a concentration of 30,000 ppm Chlorine Dioxide and should be immediately added to either:

- 100ml of water – to make a 300 ppm solution concentration
- 500ml of water or 0.9% sodium chloride IV solution – to make a 60 ppm solution concentration
- 1000ml of water or 0.9% sodium chloride IV solution – to make a 30 ppm solution concentration

4a. By immediately adding Scott's Antidote to water or 0.9% sodium chloride solution after 5 minutes, the acidification process is slowed considerably, leaving a small amount of Hydrochloric Acid unused, which plays a role in Scott's Antidote's effectiveness, especially if used intravenously (currently experimental). 4b. Besides Chlorine Dioxide and a very small amount of Hydrochloric Acid, Scott's Antidote will also contain approximately 66% of the initial Sodium Chlorite used, Chlorous Acid and Chlorate. 4c. All these components of Scott's Antidote have antiviral, antibacterial, antifungal, anti-parasitic (malaria) and anti-cancer properties and are what make it such a universal antidote.

5. Here are 5 advantages of **Scott's Antidote** over other ways of making and using chlorine dioxide products:

5a. It's freshly made and contains all of the same components as MMS which has been acidified for 30 seconds, but since it's about 25% more acidified than MMS, it's much easier on the stomach.

5b. When added to 1000ml of water it's the same CLO2 concentration (30 ppm) that many people currently take CDS at, but Scott's Antidote will more than double to 70+ ppm when it comes in contact with our stomach acid, making it far more powerful, yet still gentle on the stomach. It also contains other antimicrobials (mentioned above) that CDS doesn't.

5c. It provides a known CLO2 concentration after being made (30,000 ppm) and this allows us to know what ppm concentration of CLO2 we are using after we dilute it for any use.

5d. Since it's freshly made and to be immediately used, we don't have to worry about the strength decreasing over a period of time inside or outside of a refrigerator, or from opening and closing the bottle again and again.

5e. If used in an IV (experimental at this time), it will have a small amount of HCl; 0.001% in 500ml. This amount equates to the 0.05% HCl that was used in 10ml doses in the 1920s and 30s to successfully treat various infections and cancers. (Google "*Three years of HCl therapy*") In addition, it will also contain chlorous acid, sodium chlorite and chlorate – all of these are also antimicrobial.

Scott's Antidote *(How to make it?)*

(Also see attached instructions document)

6a. In a syringe or a sealed container or a small narrow container which keeps the drops from spreading out, (See picture below for some ideas of what to use) combine:

- 10 drops (0.5ml) 20 to 25% Sodium Chlorite (MMS is 22.4%)
- 10 drops (0.5ml) 4% Hydrochloric Acid (HCl)

6b. Wait exactly 5 minutes and then immediately add Scott's Antidote, which is 1ml of 30,000 ppm CLO2 by this time, to either 100ml, 500ml or 1000ml of water or IV solution to produce the following:

⇨ to 100ml of water – to make a 300 ppm solution concentration
⇨ to 500ml of water or 0.9% sodium chloride IV solution – to make a 60 ppm solution concentration
⇨ to 1000ml of water or 0.9% sodium chloride IV solution – to make a 30 ppm solution concentration

7. **Important:** Ideally the diluted concentrations above should be used immediately. If they are not used and instead immediately refrigerated or left unrefrigerated, the acidification process will continue, using up the remaining 25% of the initial Hydrochloric Acid in the process and causing the ppm concentration to increase gradually another 33%. This cannot happen though, if used within hours of being made. However, here's what the 33% increase would create:

- The 100ml of 300 ppm can increase to 400 ppm in about a day.
- The 500ml of 60 ppm can increase to 80 ppm in 1 to 2 days
- The 1000ml of 30 ppm can increase to 40 ppm in 2 to 3 days

8. If the concentrations are not refrigerated though, the tendency to increase is a positive since it will offset the natural tendency for the concentration to decrease from CLO2 slowly coming out of solution if not refrigerated, and so the ppm concentration will stay more constant. This is especially true for the 100ml, 300 ppm bottle which might be left out on a table, put in a purse or a pocket and carried around to be used for sanitation purposes during the day.

Scott's Antidote *(It's Usage)*

(Instructions for Viral, Bacterial, Fungal & Micro-Parasitic Infections (malaria), sepsis and cytokine storm, plus Cancer)

9. **Use 300 ppm** as a powerful disinfectant/sanitizer solution for wounds, hands, surfaces, etc. Not for eyes.

10a. **Use 60 ppm** as a nebulizing mist for throat, lungs and nose. As a gargle, a mouthwash, for brushing teeth. 10b. As an enema up to 120 ppm. 10c. (**Note:** If not all used on day 1 for nebulizing, gargle, mouthwash, etc., consider adding additional water to the remaining amount to bring the 80 ppm back down to around 60 ppm). 10d. **Scott, your Antidote** in an IV may prove very effective for viral, bacterial, and fungal infections, cytokine storm, sepsis and cancer **but is experimental now**. 10e. If you use it to save your life, be sure to choose a vein with good blood flow to avoid phlebitis and infiltration. It's suggested that you start with 500cc of 60 ppm using 0.9% saline and administer it at a rate of 14 drops/min. max., **HOWEVER,** only administer 100cc of this to test for tolerance first each time used. If well tolerated continue with the remaining 400cc. Always use 14 drops/min. max. 10f. You can also

increase the concentration to up to 90 ppm and this may be administered for up to 48 hours if needed and well tolerated. 10g. Hemoglobin should be monitored and treatment discontinued if it drops too low.

11a. **Use 30 ppm** for Viral, Bacterial, Fungal & Micro-Parasitic Infections (malaria), sepsis and cytokine storm, plus Cancer by making 1000ml of 30 ppm and drinking 100ml of this every 30 min. until finished. Pause 2 hours and then repeat with another liter. 11b. If very sick, make 1 liter and drink 100ml every 15 min. until finished. Pause 1 hour and then repeat. Then pause 2 hours and switch to 100ml every 30 min. with 3rd liter. 11c. Increases blood oxygen saturation, kills viral, bacterial, fungal & micro-parasitic infections and neutralizes toxins via oxidation to detoxify the body which helps your immune system. 11d. **For Post Viral and Bacterial Infections and Prevention - Prevention:** Drink 1000ml/day at rate of 100ml per hour for at least 14 days after contact with infected person. 11e. **Post Personal Infection:** Same as prevention but for 30 days. This is to reduce your chance of post infection complications.

12a. **Easy Prevention: You can use up to 5 drops** of the sodium chlorite alone (with no HCl) in each liter of water you drink during the day as a prophylaxis against infectious disease 12b. & to treat chronic infections. Start with 2 drops per liter & daily increase to 3 to 5 drops per liter. Your own stomach acid will acidify the drops internally & create the chlorine dioxide which will be absorbed. You can do this for a year or more if needed.

13. **Important Additional Information:** Do not take vitamin C, ascorbic acid or antioxidants until 2 hours after stopping **Scott's Antidote** at the end of the day. Avoid flour, sugars carbohydrates and dairy. Pause drinking for 1 hour after meals. Before and after medication stop for 1 hour. Stop for 30 min after coffee or tea. You might even fast for a few days and only drink your Antidote and water if really sick.

14a. Keep all concentrations out of direct sunlight. No need to refrigerate if used within a few days but refrigerate whenever possible. 14b. Tastes better cold. Drink from a bottle with small mouth to avoid smelling. 4 to 5 swallows are about 100ml. 14c. All the dosing here is for you Scott, as an average adult – reduce the amount of a dose proportionally if you lose a lot of weight or increase it if you gain a lot, but always keep the same ppm concentration.

15. **Remember!** DO NOT INHALE PURE CLO2 GAS. DO NOT allow undiluted concentration to get into eyes or on skin. Rinse with water for 10 min. Seek medical help especially if concentrated CLO2 gets into eyes.

16. Finally, this is only meant to be health information for the author himself. Please do your own research & always consult your doctor.

Scott's Antidote Formulation Instructions			
Step 1	**Fill your Acidification Container with: 10 drops Part A, plus 10 drops Part B = 1ml** *(Part A can be 20 to 25% NaClO2, Part B is 4% HCl)*		
Step 2	**Stir & wait 5 minutes for CLO2 generation (Keep the container standing straight up)**		
Step 3	**After 5 minutes add above CLO2 mixture to one volume of water below** ⬇	⬇	⬇
Bottled Water	**100ml Water**	**500ml Water**	**1000ml Water**
Final Concentration	300 ppm	60 ppm	30 ppm
Step 4	**Label your bottle with the ppm & use right away Refrigerate if possible & keep out of sunlight**		

Scott's Antidote Concentration Usage Instructions for Viral, Bacterial, Fungal & Microscopic Parasitic Infections (malaria) plus Cancer	
300 ppm	**Use 300 ppm** as a powerful disinfectant/sanitizer solution for wounds, hands, surfaces, packages, etc. (Not for your eyes)
60 ppm	**Use 60 ppm** as a nebulizing mist for throat, lungs & nose. As a gargle, a mouthwash, & for brushing teeth. In an enema use up to 120 ppm. **IV use is experimental**, but to save your life you can use it for viral, bacterial, fungal & micro-parasitic infections, cytokine storm, sepsis & cancer. Use 100-1000cc per day. 14 drops/min. max. in a large vein. You can increase it up to 90 ppm, for up to 48 hours but start with 60 ppm in 500cc & always do a trial with just 100cc first. If ok, continue treatment. Monitor hemoglobin & discontinue treatment if too low.
30 ppm	**Use 30 ppm for Viral, Bacterial, Fungal, & Parasitic Infections (malaria) & Cancer:** Make 1 liter of 30 ppm & drink 100ml every 30 min until finished. Pause 2 hours & then repeat with another liter. If very sick, make 1 liter & drink 100ml every 15 min until finished. Pause 1 hour & then repeat. Then pause 2 hours & switch to 100ml every 30 min with a 3rd liter. This will Increase your blood oxygen saturation, stop bacterial, viral, fungal & parasitic infections & neutralize toxins to detoxify your body to assist its immune system. **Post Viral & Bacterial Infections & Prevention: Prevention:** Drink 1 liter/day at a rate of 100ml per hour for at least 14 days after contact with an infected person. **Post personal Infection:** Same as prevention but do it for 30 days to reduce your chance of post infection complications.
Sodium Chlorite Drops	**Use up to 5 drops** of the sodium chlorite alone in each liter of water you drink throughout the day as a prevention against infectious disease. Start with 2 drops per liter & daily increase to 3 to 5 drops per liter. Your stomach acid will create the ClO2. May be done for a year or more if needed.
Important Please Read ⇨	**While taking Scott's Antidote** stop taking Vit C or antioxidants until 2 hours after you stopped the Antidote at the end of the day. Pause drinking it for 1 hour after meals. Before & after medication stop for 1 hour & stop for 30 min after coffee or tea. You might even fast for a few days & only drink Scott's Antidote & water if really sick. Keep all the concentrations out of direct sunlight & refrigerate Scott's Antidote whenever possible. Try to drink it cold since it tastes better & drink it from a bottle with a small mouth to avoid smelling it. (4 to 5 swallows are about 100ml) All the dosing here assumes you're at an average weight. Reduce the amount taken proportionally if you lose lots of weight & increase it if you gain, but keep the same ppm concentrations. **Use Scott's Antidote dilutions immediately** after making them, if you don't the concentration will gradually increase 33% like this: 300 ppm ↗ 400 ppm | 60 ppm ↗ 80 ppm | 30 ppm ↗ 40 ppm (after a day or two). Finally, **Scott's Antidote** is only meant to be health information for the author himself. Please do your own research. Remember! DO NOT INHALE PURE CLO2 GAS. DO NOT allow undiluted concentration to get into eyes or on skin. Rinse with water for 15 min. Seek medical help for eyes.

Scott's Antidote 1 page Instructions developed by Scott McRae for himself_ver. 1.03, Feb., 19th, 2021

How to use the Endmemo Dilution Calculator at the following link:

http://www.endmemo.com/bio/dilution.php

Go to the last calculator on the page as shown below and follow the instructions: