

Vaccine Procedure

To the best of my knowledge, based on 20 years of working with MMS, I believe that MMS can help avoid vaccine injuries when the process described below is followed. From all the thousands of people who have used MMS there is ample evidence that MMS removes poisons, toxins and kills pathogens that cause disease. According to information sheets included with vaccines, most vaccines contain these very things. Therefore it stands to reason MMS would be effective in neutralizing any possible negative side effects of vaccines, used within minutes, hours, or even several days after the vaccination. (However, doing it as soon as possible after the vaccination is best.)

Many people are concerned about possible vaccine injuries, and a growing number of parents do not want their children to be subjected to them. Therefore I want to present the following procedure. Included is the MMS1/DMSO Patch Protocol, which we have found to be very effective in neutralizing skin poisons and toxins.

Those of you in the US, and other countries where possible, may want to investigate how to claim *religious exemption* from vaccines. However, if you are in a position where you have no choice but to take a vaccination, you may want to try this protocol.

Note: *I suggest this procedure be followed using MMS1 drops mixed fresh hourly, not other forms of MMS (CDS or CDH).*

Instructions for Vaccine Procedure—Dosing for Adults

Two Weeks Before a Vaccination

- ❑ Do the Starting Procedure, followed by Protocol 1000 (see pages 79-87).

Day of the Vaccine

- ❑ Take 6 drops of MMS1 (activated MMS) every two hours, (for a total of 4 times) during an eight-hour period. Begin this dosing one to two hours before you get the vaccine.
- ❑ **Immediately after the vaccination** is injected (preferably when you get back to your car, or the moment you get home—though the sooner the better), do the MMS1/DMSO Patch Protocol (see page 135). The MMS1/DMSO Patch will help neutralize the toxins in the vaccine.
- ❑ Apply this patch 1 more time on vaccination day, three hours after the first application. If you feel the need to apply a third patch in another three hours you may do so. But three patches in total should be sufficient.

Note: *Please be diligent to closely follow the instructions for making an MMS1/DMSO patch on page 135. Add more water to the patch, or discontinue use if there is any burning or irritation. Keep a close watch.*

Day After the Vaccination

- ❑ Continue Protocol 1000 for one week to make sure all toxins are eliminated from the body.

Notes

- *If at any time while taking these doses you begin to feel nausea or diarrhea, lower your intake of MMS1. Cut the amount you are taking in half, then work back up from there when the ill feelings subside.*

- *There may be times when you have no warning before getting a vaccine. Sometimes when traveling, vaccinations can be required to enter various countries. If you do not have warning before getting a vaccination, simply start with "Day of the Vaccine" points listed above. In this case, depending upon how your body is reacting, you may want to continue Protocol 1000 for three weeks after the vaccine, instead of one week.*

- This same procedure applies to oral vaccinations, with the exception that there would be no need for the MMS1/DMSO Patch Protocol.

Instructions for Vaccine Procedure—Dosing for Children

The Vaccine Procedure for children follows a similar routine as for adults. That is, two weeks before a vaccine begin the protocol. Then there are specific dosing suggestions for the day of the vaccine and further instructions for the day after the vaccine, etc. The amount of MMS1 drops given to children, *must* be adjusted according to the weight of the child.

Adults follow the standard Starting Procedure and Protocol 1000 for much of this procedure for vaccines. In the case of children, I also suggest doing the standard Starting Procedure and Protocol 1000 for children (calculated according to the child's weight) which is listed on pages 256-258. This is as long as there is one or two weeks advance notice before receiving a vaccine. If there is less

than one week advance warning, dose the child according to the Vaccine Dosage Chart for Children (below) as many days in advance of the vaccine as possible. Or, if there is no warning you can start with the Day of the Vaccine Chart on the day of the vaccine.

Two Weeks Before a Vaccination

- Begin with the Starting Procedure followed by Protocol 1000 for children (pages 256-258), and stick with this until the day of the vaccine.
- If you are unable to start one or two weeks in advance, nevertheless begin dosing according to the Vaccine Dosage Chart for Children whenever you can, be it a week in advance, three days in advance, or whatever the case may be.

Vaccine Dosage Chart for Children	
Weight	MMS1 Dosage
Babies weighing less than 7 lbs (3.2 kg)	Start them on 1/4 drop per hour the first day, and then 1/2 drop an hour thereafter.
7-24 lbs (3.2-10 kg)	Start them on 1/2 drop per hour for the first day, and 3/4 drop per hour thereafter.
Above 25 lbs (11 kg), the basic rule of thumb is to give 1 drop of MMS1 (activated MMS) for every additional 25 lbs for a child.	
25-49 lbs (11-22 kg)	1 drop per hour
50-74 lbs (22-33 kg)	2 drops per hour
75 lbs (34 kg) and over	3 drops per hour

Day of the Vaccine

- ❑ Give the child the appropriate amount of MMS1 drops (activated MMS) according to the Day of the Vaccine Chart for Children (see below). Do this every two hours, (for a total of 4 times) during an eight-hour period. Begin this dosing one to two hours before the vaccine is administered.
- ❑ **Immediately after the vaccination** is injected (preferably when you get back to your car, or the moment you get home—though the sooner the better), do the MMS1/DMSO Patch Protocol (see following page). Or, in the case of a baby or children with very sensitive skin, follow instructions for adjusting the patch protocol for babies and people with sensitive skin (see following page). The MMS1/DMSO Patch will help neutralize the toxins in the vaccine.
- ❑ Apply this patch 1 more time on vaccination day, three hours after the first application. If you feel the need to apply a third patch in another three hours you may do so. But three patches in total should be sufficient.

Note: *Please be diligent to closely follow the instructions for making an MMS1/DMSO patch on page 135. Add more water to the patch, or discontinue use if there is any burning or irritation. Keep a close watch.*

Day of Vaccine MMS1 Dosages for Children	
Weight	MMS1 Dosage
Babies under 7 lbs (3.2 kg)	3/4 drop every 2 hours
7-24 lbs (3.2-10 kg)	1 drop every 2 hours
25-49 lbs (11-22 kg)	2 drops every 2 hours
50-74 lbs (22-33 kg)	4 drops every 2 hours.
75 lbs (34 kg) and over	6 drops every 2 hours.

Adjusting the MMS1/DMSO Patch Protocol for Babies and People with Sensitive Skin

Please read and have a good understanding of the instructions for the standard MMS1/DMSO Patch Protocol (page 135). This protocol is basically the same procedure, but the amounts of MMS1 drops/water and the timing for applying the patch is adjusted to accommodate sensitive skin.

- ❑ Start with 5 drops of MMS1 (activated MMS). Add 5 drops of DMSO and 10 additional drops of water to dilute the solution.
- ❑ For the very first application do not apply the patch for more than five minutes.
- ❑ When the patch is removed take note if there is irritation. If there is no irritation after five minutes with the first patch, in two hours apply another patch, this time leave it on for 15 minutes. If there is no skin irritation or burning on the next 15 minute application it is OK to continue with one more application (in the case of a vaccine) if you feel the need.
- ❑ If at any time there is skin irritation or burning, then double the additional amount of water beyond what was used on the last application.

Day After the Vaccination

- ❑ Continue dosing the child according to the Vaccine Dosage Chart for Children (page 176) for 1 week to make sure all toxins are eliminated from the body.

Notes

- *For instructions on how to measure a fraction of a drop, see the Starting Procedure, page 79.*
- **Never exceed the maximum amount of MMS1 per hour for each weight category.**
- *Remember, if at any time while taking these doses your child begins to experience nausea or diarrhea, lower the intake of MMS1. Cut the amount in half, then work back up from there when the ill feelings subside.*



Sinus Infection: I have had a sinus condition for years. My sinuses were always blocked up, particularly in the morning. I also got blood in the tissues fairly often when I blew my nose to relieve the blockages. Initially I was taking MMS because I was always hungry and because of that over weight. This was just a just a shot in the dark after reading other peoples success stories. The results of my taking MMS was that my consistent hunger went away and to my surprise the sinus condition also went away. I have had the sinus condition for so long that it seemed normal. In hindsight I believe both were caused by candida. —Chris, United States



Nephritis Recovery: Had nephritis and both my feet swelled up for over two years. Did Protocol 1000 and within 10 days the swelling receded and now my both my feet are back to normal. Thank you Jim. —Andy Z., United States