

FLCCC PROTOCOLS FOR COVID-19

**I-MASK+ PREVENTION & EARLY
OUTPATIENT PROTOCOL**

**I-MASS PREVENTION & AT-HOME
TREATMENT MASS DISTRIBUTION
PROTOCOL**

**MATH+ HOSPITAL TREATMENT
PROTOCOL**

**I-RECOVER MANAGEMENT PROTOCOL
FOR LONG HAUL COVID-19 SYNDROME**

TRANSLATIONS OF OUR COVID-19
PROTOCOLS

I-MASK+ Prevention & Early Outpatient Treatment Protocol for COVID-19



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Below you can download the I-MASK+ Prevention & Early Outpatient Treatment Protocol for COVID-19 with guidance on the timing and doses of each component medication. Further below please find more information on the I-MASK+ Protocol.

The I-MASK+ Protocol complements our > [MATH+ Hospital Treatment Protocol for Covid-19](#) from March 2020, which is intended for hospitalized patients. Both are physiologic-based combination treatment regimens developed by leaders in critical care medicine. All component medicines are FDA-approved, inexpensive, readily available and have been used for decades with well-established safety profiles. In October 2020, we added > [ivermectin](#) as a core medication in the prevention and treatment of COVID-19.

The protocol document is available in several languages (see below) – more translations are available > [here](#). This is not a medical advice, but a recommendation – please consult your doctor, share the information on this website with her/him, and listen. Please review our > [Disclaimers!](#)

Please check this page regularly for updates – new medications may be added and/or dose changes to existing medications may be made as further scientific studies emerge.



Current I-MASK+ protocol: version 11, updated on June 30, 2021.



[Prevention & early outpatient treatment for COVID-19](#)



[Prophylaxie et traitement ambulatoire précoce COVID-19](#)



[Profilaxis y tratamiento ambulatorio temprano para COVID-19](#)



[Profilassi e trattamento ambulatorio precoce per COVID-19](#)



[Profilaxia e tratamento ambulatorial precoce para COVID-19](#)



[Prophylaxe & frühe ambulante Behandlung von COVID-19](#)



For more translations please go to > [Translations of Selected Files.](#)

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About the I-MASK+ Protocol for COVID-19

In October 2020, the FLCCC Alliance developed a preventive and early outpatient combination treatment protocol for COVID-19 called I-MASK+. It's centered around ivermectin, a well-known, FDA-approved anti-parasite drug that has been used successfully for more than four decades to treat onchocerciasis

unique and highly potent ability to inhibit SARS-CoV-2 replication and to suppress inflammation, prompted our team to use ivermectin for prevention and treatment in all stages of COVID-19. Ivermectin is not yet FDA-approved for the treatment of COVID-19, but on Jan 14, 2021, the NIH changed their recommendation for the use of ivermectin in COVID-19 from “against” to “neutral”. (see our [press release](#)).

Our life-saving [MATH+ Hospital Treatment Protocol for COVID-19](#) (available in several languages), created in March 2020, is intended for hospitalized patients. The recently developed **I-MASK+ Prevention & Early Outpatient Treatment Protocol for COVID-19** (this page) is designed for use as a prevention and in early outpatient treatment, for those who test positive for COVID-19. The protocols complement each other, and both are physiologic-based combination treatment regimens developed by leaders in critical care medicine. All the component medicines are FDA-approved (except ivermectin), inexpensive, readily available and have been used for decades with well-established safety profiles.

Please download and share our [I-MASK+ Prevention & Early Outpatient Treatment Protocol for COVID-19](#). (It is currently being translated into several languages).

Below are a list of links to our one-page summary of the latest evidence for the protocol, plus videos of FLCCC Alliance doctors discussing the emerging evidence for the use of ivermectin in the prevention and treatment of COVID-19, and a short list of up-to-date studies and clinical trials on this topic.

I-MASK+ Prevention & Early Outpatient Treatment Protocol for COVID-19

I-MASK+

PREVENTION & EARLY OUTPATIENT TREATMENT PROTOCOL FOR COVID-19

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PREVENTION PROTOCOL

Ivermectin¹	Prevention for high risk individuals 0.2 mg/kg per dose (take with or after meals) — one dose today, repeat after 48 hours, then one dose weekly*
	Post COVID-19 exposure prevention² 0.2 mg/kg per dose (take with or after meals) — one dose today, repeat after 48 hours*
Vitamin D3	1,000–3,000 IU/day
Vitamin C	500–1,000 mg twice a day
Quercetin	250 mg/day
Zinc	30–40 mg/day
Melatonin	6 mg before bedtime (causes drowsiness)

EARLY OUTPATIENT PROTOCOL³

Ivermectin¹	0.2–0.4 mg/kg per dose (take with or after meals) — one dose daily, take for 5 days or until recovered* Use upper dose range if: 1) in regions with more aggressive variants; 2) treatment started on or after day 5 of symptoms or in pulmonary phase; or 3) multiple comorbidities/risk factors.
Fluvoxamine⁴	50 mg twice daily for 10–14 days Add to ivermectin if: 1) minimal response after 2 days of ivermectin; 2) in regions with more aggressive variants; 3) treatment started on or after day 5 of symptoms or in pulmonary phase; or 4) numerous comorbidities/risk factors. Avoid if patient is already on an SSRI.
Nasopharyngeal Sanitation	Steamed essential oil inhalation 3 times a day (e.g. VapoRub) and/or chlorhexidine/benzylamine mouthwash gargles and Betadine nasal spray 2–3 times a day
Vitamin D3	4,000 IU/day
Vitamin C	500–1,000 mg twice a day
Quercetin	250 mg twice a day
Zinc	100 mg/day
Melatonin	10 mg before bedtime (causes drowsiness)
Aspirin	325 mg/day (unless contraindicated)
Pulse Oximeter	Monitoring of oxygen saturation is recommended (for instructions please see page 2 of this file)

For **optional medicines** and an overview of the developments in prevention and treatment of COVID-19, please visit www.flccc.net/optional-medicines.

* The dosing may be updated as further scientific studies emerge.

¹ The safety of ivermectin in pregnancy has not been established. A discussion of benefits vs. risks with your provider is required prior to use, particularly in the 1st trimester.

² To use if a household member is COVID-19 positive, or you have prolonged exposure to a COVID-19 positive patient without wearing a mask

³ For late phase — hospitalized patients — see the FLCCC's MATH+ Hospital Treatment Protocol for COVID-19 on www.flccc.net

⁴ Some individuals who are prescribed fluvoxamine experience acute anxiety which needs to be carefully monitored for and treated by the prescribing clinician to prevent rare escalation to suicidal or violent behavior.

Please regard our **disclaimer** and further information on page 2 of this document.

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Behavioral Prevention



WEAR MASKS

Must wear cloth, surgical, or N95 mask (without valves) in all indoor spaces with other household persons.

Must wear a N95 mask (without valve) during pre-exposure to non-household persons in any confined or poorly ventilated area.



KEEP DISTANCE

Until the end of the crisis, we recommend a minimum distance of approx. 2m/6 feet from people who are not from your own household.



WASH HANDS

We recommend, after entering and after exiting from home (shopping, way etc.), a thorough cleaning (20–30 sec. soap), or also to use a disinfectant in between.

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