

30-Day Jump-Start Check List:

DAYS 1-7

- Timeless™ Evergreen Formula
- NutriClean™ Fiber with L-Glutamine & Probiotics
- Isotonix OPC-3™ Plus
- Isotonix™ Multivitamin and Minerals
- Isotonix B-Complex Plus Powder
- Isotonix Calcium Plus
- Isotonix Digestive Enzymes Plus Powder

DAYS 8-30

- NutriShake
- Timeless Evergreen Formula
- NutriClean Fiber with L-Glutamine & Probiotics
- Isotonix OPC-3 Plus
- Isotonix Multivitamin and Minerals
- Isotonix B-Complex Plus Powder
- Isotonix Calcium Plus
- Isotonix Digestive Enzymes Plus Powder



From left: Timeless Evergreen Formula, NutriClean Fiber with L-Glutamine & Probiotics, Isotonix OPC-3 Plus, Isotonix Multivitamin and Minerals, Isotonix B-Complex Plus Powder, Isotonix Calcium Plus, Isotonix Digestive Enzymes Plus Powder, NutriShake

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Other Supplements That Can Support Your Journey



H&H™ Essential Omega III Fish Oil With Vitamin E

Provides 3 grams of fish oil to help maintain overall health and general well-being.

Select™ AloChoice Botanical Beverage Aloe Vera

A healthy and refreshing supplement that naturally contains nutrients, vitamins and minerals to maintain healthy body function.

Choice™ Astaxanthin 6mg

Provides antioxidant activity and promotes a healthy body.

30-Day Jump-Start Tracking Sheet:

Phase 1 Days 1-7



Name: _____

Date: _____

WAKE-UP	<input type="checkbox"/> Mix 1 serving of each Isotonix™ product (Isotonix OPC-3™ Plus, Isotonix Multivitamin & Minerals, Isotonix B-Complex Plus, Isotonix Calcium Plus) with 240 ml water, drink immediately and wait 20 minutes before eating or drinking anything else	Time _____
20 MIN. LATER	<input type="checkbox"/> Mix 1 scoop of the NutriClean™ Fiber with L-Glutamine & Probiotics in 240 ml water and drink immediately*	Time _____
	<input type="checkbox"/> Squeeze ½ lemon in 240 ml warm water and drink immediately	Time _____
BREAKFAST	<input type="checkbox"/> 1 serving fruit _____ <input type="checkbox"/> 1 serving protein _____ <input type="checkbox"/> 3+ servings vegetables _____	Time _____
MID-MORNING SNACK	<input type="checkbox"/> 1 glass (240 ml) water <input type="checkbox"/> 1 serving fruit _____	Time _____
SUPPLEMENT	<input type="checkbox"/> Take 2 Timeless™ Evergreen Formula capsules 30-45 minutes before lunch*	Time _____
LUNCH	<input type="checkbox"/> 2 glasses (240 ml each) water <input type="checkbox"/> 1 serving good fat _____ <input type="checkbox"/> 3+ servings vegetables _____ <input type="checkbox"/> 1 serving of Isotonix Digestive Enzymes Plus Powder with 60 ml water after lunch*	Time _____
AFTERNOON SNACK	<input type="checkbox"/> 1 glass (240 ml) water <input type="checkbox"/> 1 serving fruit _____ <input type="checkbox"/> 2+ servings vegetables _____	Time _____
DINNER	<input type="checkbox"/> 2 glasses (240 ml each) water <input type="checkbox"/> 1 serving protein _____ <input type="checkbox"/> 1 serving good fat _____ <input type="checkbox"/> 3+ servings vegetables _____	Time _____
EVENING SNACK (OPTIONAL)	<input type="checkbox"/> 1 glass (240 ml) water <input type="checkbox"/> 1 serving vegetable _____	Time _____

PHASE 1 RULES	<ul style="list-style-type: none"> • No coffee, soda or other caffeinated beverages • No dairy 	<ul style="list-style-type: none"> • No grains or starches • No alcohol 	<ul style="list-style-type: none"> • Avoid strenuous activity; rather, partake in walking, yoga or stretching.
DAILY FOOD SERVINGS	VEGETABLES: Unlimited FRUIT: 3 PROTEIN: 2 (1 serving = 85 g) GOOD FATS: 2		

Other Supplements? _____ Water: Sleep: _____ hours

Comments: _____

*As directed on label

30-Day Jump-Start Tracking Sheet:

Phase 2 Days 8-30



Name: _____

Date: _____

WAKE-UP	<input type="checkbox"/> Mix 1 serving of each Isotonix™ product (Isotonix OPC-3™ Plus, Isotonix Multivitamin & Minerals, Isotonix B-Complex Plus, Isotonix Calcium Plus) with 240 ml water, drink immediately and wait 20 minutes before eating or drinking anything else	Time _____
20 MIN. LATER	<input type="checkbox"/> Mix 1 scoop of the NutriClean™ Fiber with L-Glutamine & Probiotics in 240 ml water and drink immediately*	Time _____
BREAKFAST	<input type="checkbox"/> 2 glasses (240 ml each) water <input type="checkbox"/> 1 serving protein _____ <input type="checkbox"/> 3 servings vegetables _____	Time _____
MID-MORNING SNACK	<input type="checkbox"/> 1 NutriShake with 240 ml water <input type="checkbox"/> 1 serving fruit _____	Time _____
SUPPLEMENT	<input type="checkbox"/> Take 2 Timeless™ Evergreen Formula capsules 30-45 minutes before lunch*	Time _____
LUNCH	<input type="checkbox"/> 2 glasses (240 ml each) water <input type="checkbox"/> 1 serving protein _____ <input type="checkbox"/> 1 serving good fat _____ <input type="checkbox"/> 2 servings vegetables _____ <input type="checkbox"/> 1 serving Isotonix Digestive Enzymes Plus Powder with 60 ml water after lunch	Time _____
AFTERNOON SNACK	<input type="checkbox"/> 1 NutriShake with 240 ml water <input type="checkbox"/> 2 servings vegetables _____	Time _____
DINNER	<input type="checkbox"/> 2 glasses (240 ml each) water <input type="checkbox"/> 1 serving protein _____ <input type="checkbox"/> 1 serving good fat _____ <input type="checkbox"/> 3 servings vegetables _____	Time _____

EXERCISE	<input type="checkbox"/> Type: _____ Minutes: _____ For overall cardiovascular health, the American Heart Association recommends at least 30 minutes of moderate-intensity aerobic activity at least five days per week.** <i>Integrate our 30-Day Jump-start Exercise Plan, downloadable on unfranchise.com</i>
POST-WORKOUT SNACK	<input type="checkbox"/> 1 serving of protein within 30 minutes of exercise _____ <i>We highly recommend our NutriShake for a convenient and great tasting way to deliver the protein and amino acids to promote optimal body composition.</i>

PHASE 2 RULES	• No sugar	• No dairy	• No grains or starches	• No alcohol
DAILY FOOD SERVINGS	VEGETABLES: 8-12 FRUIT: 1 PROTEIN: 3-4 GOOD FATS: 2			

Download the NutriShake Recipes on unfranchise.com for some fun and tasty ideas. They can replace a meal and can be taken with a dairy alternative like almond milk.

Other Supplements? _____ Water: Sleep: _____ hours

Comments: _____

*As directed on label

**http://www.heart.org/HEARTORG/GettingHealthy/PhysicalActivity/FitnessBasics/American-Heart-Association-Recommendations-for-Physical-Activity-in-Adults_UCM_307976_Article.jsp