

# Treatments for COVID & Variants

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Dr. George Fareed, MD is a Family Medicine Specialist in Brawley, CA and has over 51 years of experience in the medical field. He graduated from Harvard Medical School medical school in 1970. He is affiliated with medical facilities El Centro Regional Medical Center and Pioneers Memorial Healthcare District.

Dr. George Fareed is an Imperial Valley frontline doctor fighting against the COVID-19 pandemic locally, he has treated over 6,000 COVID-19 cases, and fielding phone calls from across the nation helping those afflicted but unable to get early treatment from their medical establishments.  
385 W Main St, El Centro, CA 92243

Dr. Brian Tyson, Board Certified in Family Medicine graduated from the American University of The Caribbean School of Medicine in 2002, with 14 years being in the ER. His hospital and medical experience has been with All Valley Urgent Care in El Centro, California. He has treated over 1,700 COVID patients with therapeutics and medicines that work.  
2026 N Imperial Ave, El Centro, CA

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**HELPFUL RESOURCES**

**T-Cell Antibody Test:**

<https://www.t-detect.com/>

**Guide to Home-Based COVID Treatment PDF e-Booklet:**

<https://aapsonline.org/patient-booklet-download-page/>

- Direct Link to Patient Booklet Download Page

<https://aapsonline.org/covidpatientguide/>

**Also found here, The Patient Guide to Early COVID Treatment:**

<https://www.truthforhealth.org/patientguide/patient-treatment-guide/>

- Direct Link to Patient Guide E-Booklet Download Page

<https://www.truthforhealth.org/patient-guide-e-booklet-download-page/?>

- Dr. Vliet describes how to reduce your risk of getting sick from COVID-19

<https://www.truthforhealth.org/2021/06/covid-treatment/>

<https://rumble.com/vftrcj-dr.-vliet-covid-early-treatment-and-prevention.html>

**FLCCC Prevention and Treatment Protocols for COVID-19:**

<https://covid19criticalcare.com/covid-19-protocols/>

**Early Treatment Protocols:** <https://c19protocols.com/>

<https://c19protocols.com/treatment-protocols/>

- Physicians/Facilities Offering Early Treatment

<https://c19protocols.com/physicians-facilities-offering-early-treatment/>

- Long COVID Protocols

<https://c19protocols.com/long-covid-protocols/>

- Prevention Protocols

<https://c19protocols.com/prevention-protocols/>

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**Covid-19 Treatment Protocol - Dr. Vladimir Zelenko:**

<https://vladimirzelenkomd.com/zelenko-treatment-protocol/>

**Dr. Robert Malone, Inventor of mRNA technology discusses the Spike Protein:**

<https://www.youtube.com/watch?v=9E2UkhCWosg>

**Dr. George Fareed and Dr. Brian Tyson share early treatment protocol:**

[https://www.thedesertreview.com/news/dr-george-fareed-and-dr-brian-tyson-share-hcq-protocol/article\\_7728815e-3ca2-11eb-8a08-7b4b0156c181.html](https://www.thedesertreview.com/news/dr-george-fareed-and-dr-brian-tyson-share-hcq-protocol/article_7728815e-3ca2-11eb-8a08-7b4b0156c181.html)

**Dr. Geert Vanden Bossche & Dr. Peter McCullough Webinar:**

<https://www.youtube.com/watch?v=2LSMpuQcTSE>

**Dr. Peter McCullough, MD - COVID-19 Early Home-based Treatment 062321**

<https://www.youtube.com/watch?v=aQ7KB2W5dA4>

[https://www.dropbox.com/s/c7rzm5km6tw9yhs/Webinar\\_June\\_23\\_2021\\_Dr\\_Peter\\_McCullough.mp4](https://www.dropbox.com/s/c7rzm5km6tw9yhs/Webinar_June_23_2021_Dr_Peter_McCullough.mp4)

- A companion to the Guide to Home Based Treatment, Dr. McCullough Explains Treatment Protocol

<https://rumble.com/vay2vx-dr.-mccullough-explains-treatment-protocol.html>

**Peter McCullough, MD testifies to Texas Senate HHS Committee:**

<https://www.youtube.com/watch?v=QAHi3lX3oGM&t=906s>

**Dr. Sabine Hazan - The Microbiome and Fecal Transplant:**

<https://drsabinehazansteinberg.com/>

**Doctors story of Light and Life: the Covid-19 Darkness Overcome Part 1:**

[https://www.thedesertreview.com/opinion/columnists/doctors-story-of-light-and-life-the-covid-19-darkness-overcome-part-i/article\\_5ae16f0c-f614-11eb-8351-cf0d67e94c25.html](https://www.thedesertreview.com/opinion/columnists/doctors-story-of-light-and-life-the-covid-19-darkness-overcome-part-i/article_5ae16f0c-f614-11eb-8351-cf0d67e94c25.html)

[Physician Proposes Medical Strategy Using ‘HCQ’ ~ Calexico Chronicle](#)

After more than one year of treating COVID-19 on the Imperial Valley frontlines, which included the months the County was the virus epicenter of California, two doctors — Dr. Brian Tyson and Dr. George Fareed— have added to their effective treatment. The treatment changes are based on latest results by other frontline doctors and what they have observed personally.

**The following are the drug abbreviations:**

HCQ = hydroxychloroquine

IVM = Ivermectin

ZN = Zinc Sulfate

DOXY = Doxycycline

AZM = Azithromycin

ASA = Aspirin

D3 = Vitamin D3

C19 mAbs = Eli Lilly or Regeneron dual Covid-19 monoclonal antibodies

# Treatments for COVID & Variants

## Dosages

HCQ 200mg tabs # 16

ZN 220 mg (or zinc elemental 50mg) # 16

DOXY- 100 mg # 14 or AZM- 500mg # 5 or Z-pak)

IVM 3mg tabs # 12-20

ASA 325 mg tabs # 30

D3 5,000 iu # 30

## Tyson/Fareed COVID-19 treatment protocols:

- Day 1 — HCQ 2 tabs twice a day
- ZN capsule or tab twice a day with food
- DOXY capsule twice a day with food or AZM tab one per day
- IVM 12 - 18 mg on day 1 and on day 3
- ASA 325mg and D3 5000 iu daily
- Days 2-5 — HCQ tab 3 times a day
- ZN cap or tab 2 times a day with food
- DOXY capsule twice a day with food or AZM tab one per day
- C19 mAbs infusion from an ER/hospital or infusion center (once no later than 7 days after symptoms began)
- ASA 325mg and D3 5000 iu daily
- IVM 12 - 18 mg on day 5 if symptoms warrant

## If respiratory symptoms increase:

- Prednisone 40 - 60mg daily x 5-7 days or Dexamethasone 4 mg twice a day if Oxygen saturation less than 94% or wheezing or shortness of breath
- Budesonide 0.5-1mg/2ml via nebulizer 4 times a day
- Colchicine 0.6mg twice a day x3 days then 0.6mg daily x 10 days
- +/- Fluvoxamine 50 mg twice a day x 5 days
- D3 5000 iu daily
- Pepcid 20 mg daily
- Continue ASA325mg daily
- Singulair 10mg at bedtime

## Alternative C19 Early Treatment Regimen: Start if you get COVID-19

- Days 1-5 — HCQ tab (200 mg) twice a day for 5 days
- IVM 3mg tabs take 12-18 mg (5-6 tabs) by mouth daily for 2 days minimum and continue the same dose (12-18 mg) daily until recovered for up to maximum 5 days (take no more than 5 total doses of IVM)
- Fluvoxamine 50mg bid x 5 days
- C19 mAbs infusion from an ER/hospital or infusion center
- Take HCQ 1 tab every week on the same day until pandemic is over.

## Treatments for COVID & Variants

### **If respiratory symptoms increase (worsen):**

- Prednisone 40 - 60mg daily x 5-7 days or Dexamethasone 4mg twice a day if Oxygen saturation less than 94% or wheezing or shortness of breath worsening.
- Budesonide 0.5-1mg/2ml via nebulizer twice a day
- Colchicine 0.6mg twice a day x3 days then 0.6mg daily x 10 days
- D3 5000 iu daily
- Pepcid 20 mg daily
- Continue daily ASA 325mg
- Zinc 50mg daily

### [Dr. Fareed Talks Early Treatment at Re-Open Cal Now ~ Calexico Chronicle](#)

Telemedicine and help by us and many others around the country and beyond:

Many telemedicine services have been created and expanded to vastly improve the availability of early covid-19 treatment for Americans. This has been the result of conscientious and informed doctors wanting to help widely in this pandemic.

### **Telemedicine sites and access information for early treatment:**

<https://myfreedoctor.com/>

<https://speakwithanmd.com/>

<https://americasfrontlinedoctors.org/>

<https://synergyhealthdpc.com/covid-care/>

[www.covidoutpatientcare.com](http://www.covidoutpatientcare.com)

Since early March both in my Brawley clinic and Dr. Brian Tyson's The All Valley Urgent Care Clinic in El Centro (where I also work), over 25,000 fearful people were screened, over two thousand four hundred were COVID-19 positive and we treated successfully many hundreds of the high risk and symptomatic ones.

We have always used a triple HCQ cocktail: HCQ (3200 mg over 5 days), azithromycin or doxycycline and especially zinc, which is often left out in the studies. The cocktail is best given early within the first 5 to 7 days while the patient is in the flu stage ( I have had success treating even as late as 14 days when patients have been sent home untreated from the ER). The timing of the drug is when the virus is in the period of maximal replication in the upper respiratory tract My goal is to prevent hospitalization which was achieved by reevaluating high risk patients every 2-3 days. I blend in corticosteroids and prolong the HCQ treatment for 5 to 30 more days if symptoms warrant but they generally do not. I use it especially in high risk individuals (over 60 or with co-morbidities and anyone with moderate to severe flu symptoms)---the healthy do not need the treatment.

I used this regimen to successfully treat 31 elderly nursing home residents in an outbreak in June and 29 recovered fully.

The drug works mechanistically through multiple actions: the ionophore HCQ (the "gun") and zinc ("the bullet"), HCQ blocks the sigma 1 receptor and has several other direct antiviral effects---the antibiotic also has anti-viral effect and potentiates the action of the HCQ and zinc. As additional anti-covid agents become available they can be added to this regimen to enhance its efficacy. I am routinely now combining Ivermectin in a quadruple HCQ/IVM cocktail with excellent results since Ivermectin is safe and has a different anti- covid action. Monoclonal antibodies from Regeneron and Lilly will be suitable also when readily available.

## Treatments for COVID & Variants

- The results are consistently good, often dramatic, with improvement within 48 hours
- I have seen very few hospitalizations, and only a few deaths in patients that were sick to begin with and received the medication late while hospitalized.
- I have not seen a single negative cardiac event and few other side effects, despite what we hear in the media

My experience is in-line with all the studies regarding early use of the HCQ cocktail

**LET ME BE CLEAR: THIS IS ONLY ABOUT THE SCIENCE----THE SCIENCE OF VIRAL REPLICATION, THE SCIENCE OF THE STAGES OF COVID, AND THE SCIENCE WHY EARLY TREATMENT WORKS.**

· AND THE SCIENCE TELLS US THAT EARLY treatment would be an effective strategy to use on a national level, which motivated me and a few of my colleagues to write a letter to the President, a letter to my congressman, a letter to California health department, an Open Letter to Dr. Fauci, and a National Plan for COVID-19.

This is not about an opinion of an “expert”- this is about science and data.

· As we describe in the National Plan, this approach would be the solution to the pandemic---protect the vulnerable, and if high risk individuals get sick, there is a solution for them with early treatment with the antiviral cocktail. If early treatment was available, people would be much more confident going back to work and sending their kids back to school.”

### **NATIONAL PLAN FOR COVID-19: GENERAL OUTLINE**

- Protect the vulnerable (e.g. nursing home residents, elderly, those with chronic illnesses)
- No jurisdiction (local, state, or federal) can lockdown public schools, businesses, places of worship, etc.
- Low virulence and morbidity in children and young adults preclude mass isolation and lockdowns of public schools and college campuses. Campus support staff can wear PPE and have confidence in prophylaxis and/or rapid treatment for concerning symptoms
- Diagnosis of COVID-19 based on symptoms with confirmatory testing after initiating treatment with HCQ cocktail, especially for high-risk patients
- Emphasis on outpatient treatment initiated immediately on high-risk patients based on well-established characteristic symptoms
- Treatment with HCQ cocktail is most effective when prescribed within the first five days of symptoms
- Disrupt viral replication with the HCQ cocktail to prevent disease progression, hospitalization, and consumption of human and material resources
- Establish community clinics for public access to early treatment of symptomatic COVID-19 infections
- Massive education program to emphasize early diagnosis and treatment, independent of test results
- Federal fiscal support for outpatient treatment of symptomatic COVID-19 patients
- Educate Primary Care providers on outpatient treatment protocol for symptomatic COVID-19 infections
- Vulnerable teachers can wear PPE, use prophylaxis, or provide distant teaching option
- Online schooling is an option for those unable to participate in in-person learning
- Vulnerable individuals need to exercise caution with attendance at public events
- Masks can be encouraged, especially for indoor spaces with compromised social distancing

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<https://internetprotocol.co/covid-19/2020/07/21/yale-harvard-professors-support-zelenko-protocol/>

[Doctors pen National Plan for SARS-CoV-2/COVID-19 | News | thedesertreview.com](#)

Saudi Arabia with its universal health care established fever clinics widely to provide standardized diagnosis, treatment and monitoring with centralized medical records for the pandemic. Their work with HCQ in these fever clinics established a nationwide corroboration for its efficacy in Covid-19.

We should learn from the success in the Imperial Valley of California with the courageous work at the All Valley Urgent Care Clinic and in the future we should model nationwide US fever clinics after it for the sake of saving hundreds of thousands of lives, preventing hospitalizations and reducing the spread of the pandemic by early treatment. Aggressive early antiviral treatment should be given through these fever clinics. The whole pandemic could have been ended without the need for mass vaccinations as could any future threatened pandemic..

If Dr. Zev Zelenko's protocol had been followed from May 2020, the pandemic would have been over in November 2020 or earlier:

## **Zelenko Protocol<sup>[1]</sup>**

### **Treatment Plan for Patients with Covid-19 symptoms**

#### **Prehospital Management**

**Dr. Vladimir Zelenko**

**Twitter: @zev\_dr**

#### **Fundamental Principles**

Treat patients based on clinical suspicion as soon as possible, preferably within the first 5 days of symptoms. Perform PCR testing, but do not withhold treatment pending results.

#### **Risk Stratify Patients**

Low risk patient - Younger than 60, no comorbidities, and clinically stable

High risk patient - Older than 60, younger than 60 with comorbidities, or clinically unstable

#### **Treatment Options**

##### **Low risk patients - over the counter options:**

1. Elemental Zinc 50mg 1 time a day for 7 days<sup>[2]</sup>
2. Quercetin 500mg 2 times a day for 7 days<sup>[3]</sup> **or**  
Epigallocatechin-gallate (EGCG) 400mg 1 time a day for 7 days<sup>[4]</sup>
3. Vitamin C 1000mg 1 time a day for 7 days
4. Rest, oral fluids and close follow up with doctor

##### **High risk patients**

1. Elemental Zinc 50mg 1 time a day for 7 days
2. Hydroxychloroquine (HCQ) 200mg 2 times a day for 7 days  
If HCQ not available, Quercetin 500mg 3 times a day for 7 days **or**  
EGCG 400mg 2 times a day for 7 days
3. Azithromycin 500mg 1 time a day for 5 days **or**  
Doxycycline 100mg 2 times a day for 7 days
4. Vitamin C 1000mg 1 time a day for 7 days
5. Rest, oral fluids and close follow-up with doctor

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**Additional treatment options. Should be uniquely custom tailored for every patient.**

1. Ivermectin 6mg 2 times a day for 1 day<sup>[5]</sup>
2. Budesonide 1mg/2cc solution via nebulizer 2 times a day for 7 days<sup>[6]</sup>
3. Dexamethasone 6mg 1 time a day for 7 days<sup>[7]</sup>
4. Blood thinners (i.e. Lovenox)<sup>[8]</sup>
5. Home Oxygen
6. Home IV fluids

**IF POSSIBLE, KEEP PATIENTS OUT OF THE HOSPITAL**

**The doctors most important to Tyson and Fareed in their pandemic early treatment work have been Dr. Peter McCullough and Dr. Harvey Risch.**

[1] <https://www.preprints.org/manuscript/202007.0025/v1>

[1] <https://www.sciencedirect.com/science/article/pii/S0924857920304258> [peer reviewed]

[2] <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7365891/>

[3] <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7318306/>

[4] <https://pubs.acs.org/doi/10.1021/jf5014633>

[5] <https://www.sciencedirect.com/science/article/pii/S0166354220302011>

[6] <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7392554/>

[7] <https://www.nejm.org/doi/full/10.1056/NEJMoa2021436>

[8] [https://www.onlinejacc.org/content/76/1/122?\\_ga=2.33698596.423106752.1597365568-1776897998.1597365568](https://www.onlinejacc.org/content/76/1/122?_ga=2.33698596.423106752.1597365568-1776897998.1597365568)

Delta Variant and Solutions for COVID

I hope you find this post informative. All any of us want is transparency and full disclosure! The way things have been handled leaves us with a sense of deceit and being strong-armed. No doubt, early treatment would be perceived by many Americans as an alternative to a vaccine, and are being lead to believe that there are no alternatives.

The information on this page is data collected from Dr. George C. Fareed, MD & Dr. Brain Tyson, MD, and is for educational purposes only.

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Ivermectin Dosing

Ivermectin dosing 0.2 mg/kg per dose (take on an empty stomach with water). Example for a person of 60 kg (body weight): 60 kg × 0.2 mg = 12 mg

Note: this is in kilo not lbs, so you will have to convert.

\* I weigh 75kg which is 165lbs, so my dose is 15mg.