Skip it Out

90 DAYS. YOUR BIOLOGY. YOUR PROOF

The Complete 90-Day

Journal & Protocol Guide

You don't need a gym. You need a rope and a reason.

Name: _____

Start Date	Day 30	Day 60	Day 90

Cancer Type	Nodes Removed
Country	Testing Tier

This guide contains everything on the website — printed, bound, and yours to write in.

NOT MEDICAL ADVICE · CONSULT YOUR ONCOLOGIST

My Reason

“I am my reason. My kids are my reason. Living is my reason.”

Before you pick up the rope, get clear on your reason. A 90-day protocol requires commitment through days that feel heavy, painful, and impossible. Your reason is the thing that carries you through those days. It is not motivation — motivation fades. It is intention. Write it below. Be specific. Come back and read it on the days you do not want to move.

A rope and a reason.

You have already done the hard part.

The waiting rooms, the scans, the devastation of hearing the diagnosis. Then came the surgery. The chemo. The radiation. Finally the day the doctor said 'you're in remission' and sent you home to work out what to do with the rest of your life.

You came through it. You are here. You are alive — and from the moment you heard that diagnosis, the value of your life has been permanently ingrained in you.

Nothing is being done to your body any more. You are the one deciding. You are in control. Control of what you eat, how you move, how long you sleep, the emotions you carry, and everything else in between in the 24 hours you get each day.

Take the opportunity to formally meet this body in its new skin. Not the one you had before — this one. The body and biology that carried you through cancer. With Skip It Out you get to meet your biology as something you can see, in numbers on a page, that move when you move.

This is the good part.

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WHY THIS WAS CREATED

My experience with cancer began with a surgery to remove a suspicious 'blocked milk duct' lump post pregnancy which turned into a diagnosis of triple negative breast cancer and every test under the sun for the next couple of weeks to prepare for the course of treatment.

Throughout treatment the regular blood tests and scans continued.

Then one day I was told "Congratulations, you are clear and in remission. If you have any symptoms or questions please contact us."

And that was it. The scans and blood work finished and I was meant to go back to my normal life.

But life after going through a cancer experience is radically different to 'normal life.' It is a mixture of joy that I am in the clear, gratitude that I have been given a second chance at living my life, fear that it may come back one day, and anxiety that how I am living day to day may trigger a reoccurrence. The roller coaster of these thoughts and emotions is quiet some days and chaotically loud others.

I took it upon myself to run a panel yearly through my GP but aside from the CA-125 the other tests were very stock standard and generic.

Cancer rips away any shred of 'control' you think you have on your biology and body, and post treatment when we are left to fend for ourselves it is hard to gain that sense of control back.

Gaining some self control was the reason I started to deep dive on what panels I could and should run, what could have been affected by treatment, what the prime version of my biology should look like and how I can get myself to that point.

This is how Skip It Out was created.

I am taking control back on my own biology. My first action is drawing the specially curated list of blood panels for my Day 0 baseline.

My second action is picking up the skipping rope and wholeheartedly believing in my reason every day for the next 90 days.

You don't need a gym. You need a rope and a reason.

HOW TO USE THIS JOURNAL

This journal is designed to be read cover to cover before you begin, then used daily throughout your 90 days. Here is the order of operations.

1. Read the whole journal first

Before you do anything, read through every section from start to finish. Understand the science behind the protocol, the exercises, the fasting window, the supplements, and the testing panel. Knowledge is the foundation — the exercise comes second.

2. Get your kitchen, home, and life aligned

Go through the 360° Input Changes section at the back of this journal. Start making the swaps: glass containers, copper water bottle, corded headphones, mineral sunscreen, rooibos tea. Stock your kitchen with the anti-inflammatory foods and TCM ingredients listed in the Daily Non-Negotiables and recipes sections. You do not need to do everything at once — tick them off as you go.

3. Book your blood panel

Use the GP or oncologist letter from the website (or write your own based on the testing panel section in this journal). Book your Day 0 blood draw. If you still have a menstrual cycle, aim for Day 2–4 of your period for hormone accuracy. Post-menopausal: any fasting morning.

4. Get your bloods done and enter Day 0 results

Once your results come back, enter them into the Lab Results Tracker tables in this journal and into the downloadable xlsx spreadsheet or the My Results tab on the website. These are your baseline numbers — every future result gets measured against them.

5. Record your body measurements

Fill in the Body Measurements table. Surgery side versus reference side. Waist, hips, chest, weight. These are on the tracking pages starting in this journal.

6. Take your Day 0 photos

Front, back, left side, right side. Same lighting, same position. Print them out and stick them into the photo pages in this journal. You will thank yourself at Day 90.

7. Do your Day 0 vibe check-in

Score yourself 1–5 on the eight questions in the Vibe Check-In section. Energy, sleep, gut, mood, body, surgery side, skin, hydration. This is your subjective baseline.

8. Pick your start date

Write it on the cover page. Fill in your Day 30, Day 60, and Day 90 dates. This is the day you pick up your skipping rope.

9. Start your 90-day journey

Day 1. Foundation phase. Three rounds. Skip, burpee, connector skip, squat. Sixty skips, eight burpees, thirty connector skips, fifteen squats. Rest ninety seconds between rounds. Approximately eighteen minutes. Mark it off in the Completion Grid. Do it again tomorrow.

You don't need a gym. You need a rope and a reason.

WHAT CANCER TREATMENT DOES TO YOUR BODY

Chemotherapy targets rapidly dividing cells — cancer cells, but also gut lining, hair follicles, bone marrow, and immune cells. After chemo, white blood cell count is suppressed, gut microbiome disrupted, liver has processed months of cytotoxic drugs, and glutathione reserves are depleted.

Radiation damages DNA in the target area — both cancer and healthy tissue. Creates localised inflammation, fibrosis (scar tissue), and can damage lymphatic and blood vessels. Fascia becomes stiff and restrictive, compressing lymphatic channels underneath.

Surgery + lymph node removal creates lifelong consequences. Every node removed is a junction permanently closed in your lymphatic network. The remaining nodes must compensate. Lymphedema risk is lifelong, not temporary.

Hormone therapy (tamoxifen, aromatase inhibitors) deliberately suppresses oestrogen. Side effects: joint pain, bone density loss, weight gain, mood changes, hot flashes. These affect quality of life for years.

The 90-day experiment exists to give that body a structured path back to strength, measured with real data.

YOUR LYMPHATIC SYSTEM

Your lymphatic system is a network of vessels, nodes, and organs running parallel to your circulatory system. It carries a clear fluid called lymph — which is approximately 95% water — that collects metabolic waste, toxins, dead cells, and pathogens from your tissues and delivers them to lymph nodes for filtering. The filtered lymph eventually returns to your bloodstream through the thoracic duct.

What lymph nodes actually do

Lymph nodes are not just passive filters. Each node contains millions of lymphocytes — white blood cells that actively scan the lymph fluid passing through for pathogens, cancer cells, and cellular debris. When a node detects a threat, it triggers an immune response: lymphocytes multiply, antibodies are produced, and the node swells as it works to neutralise the threat. This is why your lymph nodes swell when you are fighting an infection. Removing lymph nodes does not just slow drainage — it removes immune surveillance checkpoints from that region of your body.

The numbers

The human body contains approximately 600 to 700 lymph nodes. A typical axillary clearance (the most common procedure in breast cancer surgery) removes between 10 and 30 nodes. That may sound like a small percentage of the total, but those specific nodes handled all lymphatic drainage from one arm, one breast, and one side of the chest wall. It is not about the percentage of nodes removed — it is about the territory they served. The remaining nodes in other parts of the body cannot compensate for that specific drainage region.

How lymph moves (the pump problem)

Unlike your circulatory system, which has a powerful central pump in the heart, the lymphatic system has no pump at all. Lymph moves through one-way valves powered entirely by four mechanisms:

- Muscle contraction — when you move, your muscles squeeze the lymphatic vessels running alongside them, pushing lymph forward through the one-way valves
- Gravity — vertical movement such as jumping and bouncing creates gravitational loading and unloading that opens and closes the valves in rapid succession
- Breathing — deep diaphragmatic breathing creates pressure changes in the thoracic cavity that move lymph through the thoracic duct, the largest lymphatic vessel in the body

• Fascia mobility — healthy, hydrated connective tissue allows lymphatic vessels to function freely, while stiff or fibrotic fascia compresses and restricts them

The thoracic duct

The thoracic duct is the largest lymphatic vessel in your body. It runs from the cisterna chyli (a lymphatic reservoir in the abdomen) upward through the chest and drains into the venous system near the left collarbone. This is where all lymph from the lower body and left upper body eventually returns to the bloodstream. For breast cancer survivors, post-surgical scarring and radiation fibrosis in the chest area can restrict the thoracic duct and reduce its flow capacity. This is one of the reasons the burpee was chosen for this protocol — the up-down movement creates thoracic pressure changes that flush lymph through this critical vessel.

The fascia connection

Radiation therapy creates fibrosis — stiff, scarred connective tissue in the treatment field. Lymphatic vessels run through fascia (the web of connective tissue that surrounds every muscle, organ, and vessel in your body). When fascia becomes fibrotic and rigid, it physically compresses the lymphatic channels running through it, restricting flow. This is why dry brushing and movement-based fascia hydration are part of the daily protocol — they keep the connective tissue around your lymphatic vessels supple and functional.

Signs of lymphatic sluggishness

Not every symptom is lymphedema, but these signs indicate your lymphatic system may need more support: a feeling of heaviness or fullness in the surgery-side arm or leg, puffiness that was not there before, clothing or jewellery feeling tighter on one side, recurring infections on the surgery side (the reduced immune surveillance means less local defence), and slow wound healing on the affected side. If the circumference difference between your surgery side and reference side exceeds 1.5cm, consult a lymphoedema physiotherapist for assessment. Early intervention makes a significant difference.

Daily movement, specifically chosen for lymphatic mechanics, supports a system that has been surgically compromised and needs consistent help to keep flowing.

HOW NODE REMOVAL AFFECTS LYMPHATIC FLOW

Axillary nodes (armpit) — Left or Right

This is the most common site for breast cancer surgery. Axillary lymph nodes drain the arm, breast, chest wall, and upper back on that side. When they are removed, lymph fluid from the arm has fewer pathways to return to the bloodstream. The affected arm may feel heavier, tighter, or more fatigued than the other side. A circumference difference of more than 1.5cm between arms is a clinical flag that warrants assessment by a lymphoedema physiotherapist. The website adapts automatically: if you select left axillary removal, your left arm becomes the surgery side for weekly measurements. Right axillary flips all labels. Bilateral tracks both.

Axillary — Bilateral (both sides)

When nodes have been removed from both sides, both arms are affected and lymphatic drainage is compromised across the entire upper body. Both arms need weekly monitoring. Exercise becomes even more critical because there are no compensating nodes on the other side to pick up the load.

Inguinal nodes (groin)

Groin lymph nodes drain the legs, lower abdomen, and pelvic region. Their removal creates a risk of leg lymphoedema, typically affecting the thigh and lower leg on the affected side. The app switches all measurements from arm to leg when you select groin node removal during onboarding: mid-thigh and above-knee circumference replace elbow and mid-bicep measurements.

Cervical nodes (neck)

Neck lymph nodes drain the head, face, and neck. Their removal can cause facial or neck swelling and may affect thyroid drainage. The app switches to neck circumference measurements and adjusts all warnings accordingly when you select cervical node removal.

WHY EXERCISE IS THE KEY TO RECOVERY

Inflammation

Regular exercise directly lowers hs-CRP and IL-6, which are the two most important inflammatory markers for cancer survivors. Chronic inflammation is a key driver of recurrence risk, and these markers are measurable in the free testing tier.

Immune function

Exercise increases NK (Natural Killer) cell count and activity. NK cells are your body's primary surveillance system against both cancer cells and viral reactivation, including EBV.

Lymphatic drainage

Without movement, lymph stagnates. Each skip opens and closes lymphatic one-way valves through vertical bounce. This is not cardio for fitness — it is mechanical pumping of a system that has no other engine after node removal.

Autophagy

Exercise activates autophagy, your body's cellular cleanup system. Combined with the fasting window in this protocol, this creates a daily repair period where damaged proteins, dysfunctional mitochondria, and cellular debris are recycled.

Oestrogen reduction

Exercise reduces adipose tissue, which reduces aromatisation — the conversion of androgens to oestrogen in fat cells. For ER-positive breast cancer survivors, this directly lowers a key driver of recurrence.

Mental health

Exercise reduces cortisol output, increases endorphin production, improves sleep quality, and reduces the fatigue that is the number one complaint of cancer survivors post treatment.

Bone density

Weight-bearing exercise such as squats and burpees directly combats the bone density loss caused by aromatase inhibitors and chemotherapy.

Gut health

Exercise increases gut motility and microbial diversity, both of which are significantly disrupted by chemotherapy and the antibiotics commonly used during treatment.

THE SKIP IT OUT PROTOCOL

Three exercises. Three phases. 90 days. One daily commitment.

1. SKIP (60 reps) **2. BURPEE** (8 reps) **30 connector skips** **3. SQUAT** (15 reps)

Rest between rounds. Repeat for 3 rounds (Foundation) building to 5 rounds (Peak). Around 11 minutes at Foundation, rising to about 18 at Peak.

If you leak when you skip

This is the reason women quit skipping, and almost nobody says it out loud. Skipping is one of the most provocative activities there is for stress incontinence, and if you have had children you already know that. What you may not have been told is that treatment stacks a second risk factor on top: chemotherapy-induced menopause and aromatase inhibitors both drop oestrogen sharply, and low oestrogen thins urogenital tissue and weakens the support around the bladder. Women who were completely fine before treatment can find they are not now.

It is common. It is not your fault. And it is not something you have to accept — it is treatable.

Get your technique checked. Pelvic floor muscle training has good evidence behind it, but a large proportion of women cannot perform a correct contraction from written instructions alone, and for anyone whose pelvic floor is already overactive, more squeezing makes things worse. So the single most useful thing is not an exercise written in a journal — it is a pelvic floor physiotherapist watching what your muscles actually do. Ask your GP; in Australia this can sometimes sit within a chronic disease management plan.

Practical things that help now. Empty your bladder before you start. Do not cut your fluids to compensate — concentrated urine irritates the bladder, and it works directly against your daily water target. Build impact gradually rather than starting at sixty skips.

And drop a level rather than stopping. This is exactly what Modified exists for: seated bouncing on an exercise ball, a mini trampoline, calf raises with a bounce. All of it still creates the vertical movement that opens and closes your lymphatic valves, at a fraction of the impact, while you build strength back. Step up to Beginner, then Standard, as your pelvic floor allows. Leaking is a reason to change how you move. It is never a reason to stop moving.

Choosing your rope

Start with a beaded rope. The click as the beads hit the ground gives you audible rhythm, and that is how you learn timing without staring down at your feet. A light PVC

speed rope is the easier option once your timing has settled. Both are inexpensive.

Length: stand on the middle of the rope and the handles should reach roughly to your armpits. Longer is more forgiving while you are learning, so if you are between sizes, size up. A rope that is too short is the single most common reason people conclude they cannot skip.

Skip the weighted ropes, at least to begin with. A heavy or weighted rope loads your shoulders and arms on every rotation, which is the last thing you want if you have had axillary clearance, have cording, or are managing lymphoedema risk. The lymphatic benefit here comes from vertical bounce, not arm resistance — a heavier rope adds load without adding pump. Revisit it in a later round if you want to, and speak to your lymphoedema physiotherapist first.

Surface and shoes matter more than they sound. Skip on wood, rubber matting or short grass rather than concrete, and wear cushioned shoes. Aromatase inhibitors and chemotherapy both affect joints and bone density, so protecting your knees and ankles is part of the protocol rather than an optional extra.

And if your rope has not arrived yet, start anyway. Bounce on the spot. The valve mechanism is the bounce, not the rope.

SKIP — The Lymphatic Pump

The only common exercise that creates rapid vertical bounce. Each jump opens and closes one-way valves in lymphatic vessels. After node removal, skipping IS the pump.

Standard: 60 skips with rope. Single bounce, comfortable pace.

Beginner: 30 skips, or bounce on the spot without a rope. March with high knees if joints hurt.

Modified: Seated bouncing on exercise ball. Gentle rebounding on mini trampoline. Standing calf raises with bounce.

Advanced: 100 skips. Double-unders. Alternating feet.

BURPEE — The Thoracic Flush

Up-down movement creates thoracic pressure changes that flush chest lymphatics. Directly relevant post breast surgery — the thoracic duct runs through the chest.

Standard: 8 burpees. Down, chest touches, push up, jump up.

Beginner: Walk-out burpees — step hands out, step back, stand. No push-up needed.

Modified: Wall burpees — hands on wall, walk feet back to leaning plank, walk back.

Advanced: 12 burpees. Add tuck jump. Add push-up.

SQUAT — The Abdominal Bellows

Deep squats compress the abdominal cavity, creating a bellows pump that moves lymph through the cisterna chyli. Keeps fascia hydrated and mobile.

Standard: 15 bodyweight squats. Feet shoulder-width, parallel at bottom.

Beginner: Chair squats — lower to seat, stand up. Half squats. Hold doorframe for balance.

Modified: Wall sit — back against wall, hold 90° for 15–30s.

Advanced: 20 squats. Pulse at bottom. Jump at top. Hold weight.

THE THREE PHASES

FOUNDATION PHASE — Days 1–30

3 rounds · 90 seconds rest · approximately 11 minutes

Each round consists of 60 skips, followed by 8 burpees, then 30 connector skips to keep lymph moving, and finally 15 squats. Rest for 90 seconds between rounds, then repeat. Three rounds total.

The first 30 days are about building the habit, not the intensity. Your body is learning to move daily again. Your lymphatic system is being primed and your fascia is beginning to hydrate and mobilise. Most importantly, you are generating your first data point — the Day 0 baseline that everything will be measured against. Your skin is completing its first full renewal cycle. The first 2–3 weeks are detox initiation, and your sweat may smell different as real excretion begins. Do not skip the baseline data.

BUILD PHASE — Days 31–60

4 rounds · 75 seconds rest · approximately 14 minutes

Each round increases to 60 skips, 10 burpees, 40 connector skips, and 18 squats. Rest for 75 seconds between rounds, then repeat. Four rounds total.

By Day 31, the habit is set and your body has adapted to daily movement. Now we increase the volume — one extra round, slightly more reps per exercise, and slightly less rest between rounds. Your Day 30 blood results are in and you can see the first signals. Your hs-CRP should be trending down and your lymphocyte count should be stabilising. This is the phase where the science starts to show in your numbers. Your second full skin cycle is complete and your red blood cells are approximately 50% turned over. This is where people quit — check your Day 30 labs versus baseline, because numbers move people.

PEAK PHASE — Days 61–90

5 rounds · 60 seconds rest · approximately 18 minutes

Each round consists of 60 skips, 12 burpees, 50 connector skips, and 20 squats. Rest for 60 seconds between rounds, then repeat. Five rounds total.

The final 30 days are maximum volume with minimum rest. Your body has been moving daily for 60 days and has fundamentally adapted. Your red blood cells are approximately 75% renewed, meaning the blood flowing through your veins is largely new since Day 0. Your skin has replaced itself three complete times. Your Day 60 bloods show the trend clearly. Day 90 is the proof — the full before-and-after comparison across every marker you tested. You are biologically not the same person you were on Day 0, and your lab results will show it.

DAILY NON-NEGOTIABLES

2–3L water daily

Lymph is 95% water. Dehydration thickens lymph fluid and slows drainage through the remaining vessels and nodes. Your body is trying to flush metabolic waste, dead cells, and toxins through a compromised network — water is the transport medium. Glass or stainless steel bottles only (plastic leaches BPA and phthalates, which are endocrine disruptors this experiment specifically tests for).

Good fats every day

Avocado, extra virgin olive oil, salmon, sardines, walnuts, hemp seeds, flaxseed. Lymphatic vessels are fat-dependent — their walls require healthy fats to maintain flexibility and permeability. The chyle (fat-carrying lymph from your gut) travels through the largest lymphatic vessel in your body, the thoracic duct. Starving yourself of fat starves the lymphatic system.

Anti-inflammatory foods daily

Leafy greens, berries, fatty fish, bone broth, fermented foods (kimchi, sauerkraut, kefir, yoghurt). These restore gut microbiome diversity disrupted by chemotherapy and antibiotics, and provide the polyphenols and antioxidants that directly lower hs-CRP — the inflammation marker at the centre of this protocol.

Mānuka honey + fresh lemon

Mānuka honey is antimicrobial (methylglyoxal), anti-inflammatory, and supports immune function. Fresh lemon in warm water first thing is alkalising, supports liver detox pathways, and provides vitamin C for collagen repair. Together they make a simple morning ritual.

14–16hr overnight fast

Autophagy — your body's cellular cleanup — activates around 12–14 hours of fasting. Do your morning circuit fasted to compound the effect. Build up gradually: 12hrs first, then extend. See the Fasting Window section for the full protocol.

Daily dry brushing

Natural bristle brush, light pressure, long strokes toward the heart. Uses the same directional principles as manual lymphatic drainage. Brush gently over healed scars to keep fascia mobile. Before your evening shower, or anytime you feel tight or heavy. See the Dry Brushing section for full technique.

Reduce processed food, alcohol, seed oils

Let the 90-day experiment be clean data. Every processed ingredient, every drink of alcohol, every inflammatory seed oil is a variable that muddies the results. You're running an experiment on your own biology — control the inputs.

Swap coffee for rooibos or chrysanthemum tea

Coffee contains ochratoxin A (WHO-classified possible carcinogen and immunosuppressant) and caffeine that drives cortisol. Rooibos has unique anti-inflammatory antioxidants (aspalathin, nothofagin). Chrysanthemum clears liver heat and calms the nervous system. Both are caffeine-free, mycotoxin-free, and won't break your fast. See the Coffee section for full science.

THE FASTING WINDOW

What is autophagy?

Autophagy (from Greek: auto = self, phagein = to eat) is your body's cellular cleanup system. During autophagy, cells break down and recycle damaged components: misfolded proteins, dysfunctional mitochondria, and cellular debris. For cells that have been through chemotherapy and radiation, this daily cleanup window directly supports regeneration. Yoshinori Ohsumi won the 2016 Nobel Prize in Medicine for discovering the mechanisms of autophagy.

When does it activate?

Autophagy begins to activate around the 12–14 hour mark of fasting and rises significantly through 16–24 hours. It is not a binary switch — it ramps up gradually. The longer the fast (up to a point), the deeper the cellular cleaning.

Why it matters for this protocol:

- The 90-day timeline is aligned to red blood cell and skin cell renewal cycles. A daily fasting window means every day includes a dedicated repair period.
- Weight loss from time-restricted eating reduces aromatisation in adipose tissue, lowering circulating oestrogen — a key driver of ER-positive breast cancer recurrence.
- Growth hormone rises during fasting (tissue repair) while IGF-1 stays suppressed (no cancer-promoting signal).
- Exercise while fasted compounds the autophagy activation from both fasting AND exercise simultaneously.
- Multiple clinical trials are underway specifically for BC survivors using intermittent fasting (NCT04330339, NCT04691999, NCT04560439).

Example daily timeline:

7:00 PM — Last meal. Fasting window opens. Insulin begins to drop.

11:00 PM — 4 hours. Digestion completing. Body transitioning to fasting state.

7:00 AM — 12 hours. Insulin at baseline. Glycogen stores depleting. Mild autophagy beginning.

9:00 AM — 14 hours. Circuit time. Exercise while fasted amplifies autophagy. Growth hormone elevated.

10:00 AM — 15 hours. Significant autophagy. Cells actively cleaning damaged components.

11:00 AM — 16 hours. Break fast with first meal. Repair nutrients in. Eating window opens (11am–7pm).

Build up gradually (do not start at 16 hours):

- Week 1–2: 12 hours (dinner 7pm breakfast 7am). Just a normal overnight fast. Most people already do this.
- Week 3–4: 14 hours (dinner 7pm first meal 9am). Push breakfast back by 2 hours.
- Week 5+: 16 hours (dinner 7pm first meal 11am). Full 16:8 protocol.
- Optional: one 24-hour fast per week (dinner to dinner). Autophagy markers can double at 24h vs 16h. Not required.

What breaks a fast:

Any calories. Plain tea (rooibos, chrysanthemum, green) and water do not. Black coffee technically doesn't break a fast calorically but contains ochratoxin A — swap to rooibos. Mānuka honey breaks a fast — save it for your eating window.

What doesn't break a fast: Water, plain tea, sparkling water, black tea (without milk), apple cider vinegar in water, electrolytes without sugar.

ENCOURAGED SUPPLEMENTS

These are not prescriptions and should not be interpreted as medical advice. They are supplements with published research relevant to cancer survivors. Always discuss with your oncologist before starting any supplement, particularly if you are on active treatment, hormone therapy (tamoxifen, aromatase inhibitors), or immunotherapy (checkpoint inhibitors). Some supplements may interact with medications or be contraindicated for your specific situation. Your oncologist knows your history and will advise what is appropriate — particularly if you are on active treatment or hormone therapy.

PRIORITY — Clinical trial evidence for BC survivors:

Turkey Tail (Trametes versicolor) — 3–6g/day as extract or capsule

The strongest evidence of any supplement for BC survivors. PSK (polysaccharide-K), the active compound, is an approved adjuvant cancer treatment in Japan and has been used alongside chemotherapy since the 1970s. A 2012 randomised trial found BC patients taking Turkey Tail had faster immune recovery post-radiation, with significantly increased NK cell activity. The Mayo Clinic is currently running a BC-specific trial. Mechanism: boosts NK cells, increases lymphocyte count, modulates immune response. Do NOT use if on immunotherapy (checkpoint inhibitors) or if you have an autoimmune condition — it upregulates the immune system and could worsen either.

NAC (N-Acetylcysteine) — 600–1200mg/day

Precursor to glutathione — your body's master antioxidant and the primary detox molecule in your liver. Chemotherapy significantly depletes glutathione stores. NAC replenishes them. It also directly inhibits pro-inflammatory cytokines IL-6 and TNF-, both of which are elevated in BC survivors. Supports liver function during the sweat protocol (as toxins mobilise from adipose tissue during exercise, the liver processes them). Cheap, well-studied, excellent safety profile. Take on an empty stomach for best absorption.

Vitamin D3 — 2000–5000 IU/day (test first — target 75–150 nmol/L)

Critical immune modulator. Vitamin D receptors exist on virtually every immune cell. Low Vitamin D is associated with worse BC outcomes across multiple studies. It is a co-factor for NK cell function — the cells this experiment is designed to boost. Most Australians are deficient (especially post-treatment when outdoor activity drops). Always test at Day 0 before supplementing — the free tier includes Vitamin D testing. Take with food containing fat for absorption. Pair with Vitamin K2 (MK-7) if supplementing above 2000 IU to support calcium metabolism.

Omega-3 (EPA/DHA) — 2–3g/day fish oil or algae oil

Cell membrane health and the most studied anti-inflammatory fat. EPA and DHA are incorporated into cell membranes throughout the body, including immune cells and lymphatic vessel walls. An Omega-3 Index >8% is associated with significantly lower all-cause mortality. Most people are at 4–5%. The Omega-3 Index is available through private labs (it's a finger-prick dried blood spot test). Fish oil: choose molecularly distilled for purity. Algae oil: vegan alternative with equivalent EPA/DHA.

Zinc — 15–30mg/day (always with copper 1–2mg)

Immune and lymphatic health. BC treatment commonly depletes zinc stores. Zinc is required for NK cell function, T-cell maturation, and wound healing. It also supports thymus gland function (where T-cells mature). ALWAYS supplement copper alongside zinc — zinc depletes copper over time, and copper deficiency causes its own immune problems. The free testing tier includes both zinc and copper. Take away from iron supplements (they compete for absorption).

SUPPORTING — Good general evidence:

Selenium — 100–200mcg/day (test first)

The cofactor your body needs to make glutathione peroxidase — the enzyme that actually puts glutathione to work. NAC supplies the raw material; selenium builds the machine that uses it. Australian and New Zealand soils are genuinely low in selenium, so dietary intake here is lower than in much of the world. Two things to know. Selenium has a U-shaped curve — too much is actively harmful rather than merely wasteful, and the gap between enough and too much is narrower than for most nutrients. Stay at or under 200mcg unless a test says otherwise. And choose a selenium-only product: in the large SELECT trial the vitamin E arm did worse rather than better, so a combined selenium-and-vitamin-E capsule is not the form to reach for. Two brazil nuts a day is a genuine food alternative.

Milk Thistle (Silymarin) — 150–300mg/day standardised extract

The best-studied liver support herb there is. Silymarin is antioxidant and anti-fibrotic in liver tissue, and your liver has processed months of cytotoxic drugs with depleted glutathione reserves. It is also working hard during this protocol as toxins mobilise out of adipose tissue during exercise. Worth knowing before you start: silymarin shows weak oestrogenic activity in cell studies. Whether that matters clinically is unclear and probably not at these doses, but if you are ER-positive or on tamoxifen or an aromatase inhibitor, that is a question for your oncologist rather than a detail to skip past. Milk thistle can also affect how some drugs are metabolised — take your full medication list to that conversation.

Probiotics — Multi-strain, 10–50 billion CFU/day

Chemotherapy and the antibiotics that came with it flatten microbiome diversity, and it does not simply bounce back on its own. Your gut lining is also where a large share of immune activity happens. This one connects directly to your own data — if you are running CDSA or zonulin in the Go Deeper panel, this is the intervention those tests are measuring. Look for multi-strain with Lactobacillus and Bifidobacterium, and keep eating fermented food alongside it: kimchi, sauerkraut, kefir and live yoghurt do the same job with more variety. IMPORTANT: probiotics are not recommended if you are neutropenic, immunocompromised, or have a central line — live organisms in a compromised host have caused bloodstream infections. If you are in active treatment, ask your oncology team first.

B-Complex — Only if your panel shows a deficiency

This one is deliberately conditional. B12 and folate are both on your free-tier panel, which means you can answer the question instead of guessing at it. If you are low — common after treatment, and more so if you are on metformin, a proton pump inhibitor, or eating little animal protein — correcting it matters for energy, nerve function and red cell production. If you are not low, the honest answer is that you do not need it. Two reasons to stay conditional rather than take it daily by default: high-dose B6 and B12 have been associated with increased cancer risk in at least one large cohort study, and the role of folic acid in existing lesions is genuinely debated. Test, then decide. That is the whole method.

Magnesium Glycinate — 200–400mg/day (evening)

Sleep, muscle recovery, stress response. Glycinate form is best absorbed and least likely to cause digestive issues. Magnesium is depleted by stress, exercise, and many medications. Serum magnesium is unreliable (only 1% of body magnesium is in blood) — RBC magnesium through private labs gives the true cellular level. Take in the evening as it supports sleep quality.

Silica (orthosilicic acid) — 5–10mg/day

Collagen production, connective tissue repair, and fascia health. Post-surgical scarring, radiation fibrosis, and general connective tissue recovery all benefit from silica. Supports skin, hair, and nail regrowth post-chemo. Available as liquid orthosilicic acid (best absorbed form) or bamboo extract capsules.

Quercetin — 500mg/day

Anti-inflammatory flavonoid and natural antihistamine. Enhances absorption of other supplements (particularly curcumin). Found naturally in onions, apples, and berries. Supplemental quercetin provides a concentrated dose. May support immune modulation and has shown anti-proliferative properties in vitro.

Curcumin + Piperine — 500–1000mg/day

The active compound in turmeric. Directly lowers CRP and IL-6 in clinical studies. Must take with black pepper extract (piperine) which increases absorption by 2000%. Note: concentrated curcumin supplements are different from culinary turmeric — they deliver a much higher dose. If you have a damp-heat TCM presentation (night sweats, feeling of heat), discuss with your practitioner as curcumin is warming. Take with food.

360º INPUT CHANGES

Preserve your body in the best quality biological position that is going to carry you through till your last breath on this planet. Life is a gift, and those of us who have faced cancer and come out the other end know the finiteness and fragility of every day we are blessed to still be here.

The changes below are not about perfection. They are about reducing the inputs that work against your biology and replacing them with inputs that support it. Each one connects directly to the markers in your blood panel — make the change, and the data will show it.

WATER

Lymph is approximately 95% water. Dehydration thickens lymph fluid and slows its movement through your remaining vessels and nodes. Post-treatment, your lymphatic network is already compromised from node removal, so adequate hydration is not optional — it is the transport medium for the entire system. Plastic bottles leach BPA and phthalates into the water, both of which are endocrine disruptors that this experiment specifically tests for in urine at Day 0 and Day 90. If your urine BPA is elevated at Day 0, switching to glass, stainless steel, or copper is one of the simplest interventions that will show a measurable change by Day 90. Copper vessels have additional antimicrobial properties and provide trace copper ions that support immune function.

Changes to make:

- [ ] Glass/stainless/copper water bottle
- [ ] Water filter installed
- [ ] 2L+ daily consistently
- [ ] No plastic bottles
- [ ] Using copper bottle, plates, or cutlery

COFFEE

Coffee beans commonly contain ochratoxin A, a mycotoxin classified by the IARC as a Group 2B possible carcinogen. One study found 91.7% of green coffee beans were

contaminated with moulds, and 45% of brewed coffee contained OTA. OTA is also an immunosuppressant that directly suppresses NK cell activity — the exact immune pathway this experiment is designed to boost. Additionally, approximately 50% of the population carries a slow CYP1A2 gene variant that extends caffeine half-life to 8–12+ hours, keeping cortisol elevated throughout the day. Elevated cortisol suppresses immune function, disrupts sleep, and drives inflammation — all of which show up in your blood panel.

Changes to make:

- [ ] Switched to rooibos/chrysanthemum tea
- [ ] Coffee limited or eliminated
- [ ] No coffee on empty stomach

ORAL HEALTH

Gum inflammation is a genuine source of systemic inflammation, and hs-CRP and IL-6 — the two markers at the centre of this protocol — are exactly what it raises. You could run a perfect 90 days and watch your hs-CRP refuse to move, because the source was never your training. Chemotherapy also commonly causes mucositis and dry mouth, and saliva is what buffers acid, clears debris and repairs early enamel damage — when it drops, decay and gum problems climb quickly. Get a dental check before Day 0 so you know what your baseline actually reflects. IMPORTANT: if you are on or about to start a bone medication (a bisphosphonate such as alendronate or zoledronic acid, or denosumab — commonly prescribed alongside aromatase inhibitors), these carry a risk of medication-related osteonecrosis of the jaw. Standard guidance is to complete invasive dental work BEFORE starting them. Tell your dentist you are on or starting one, and tell your oncologist you are due dental work. The habits that matter: an electric brush (oscillating-rotating types reduce plaque and gingivitis more than manual, and the timer fixes the real problem — almost everyone brushes for less time than they think), soft bristles and gentle pressure, a new head every three months, and cleaning between your teeth daily because that is where gum inflammation starts. Two cheap swaps: sodium lauryl sulfate (the detergent that makes toothpaste foam) is linked to more frequent mouth ulcers and can aggravate mucositis, so an SLS-free paste often settles a sore mouth within days; and alcohol-based mouthwash dries the mouth, which is the last thing you want if treatment has cut your saliva — alcohol-free, or warm salt water, which costs nothing.

Changes to make:

- [ ] Dental check-up booked before Day 0

- [ ] Told my dentist about my cancer treatment
- [ ] Bone medication + dental work timing checked with my team
- [ ] Switched to an electric toothbrush
- [ ] Soft bristles, gentle pressure
- [ ] Brush head replaced (every 3 months)
- [ ] Cleaning between teeth daily
- [ ] Switched to SLS-free toothpaste
- [ ] Alcohol-free rinse or salt water only
- [ ] Tongue scraping daily
- [ ] Dry mouth managed — water, sugar-free gum, no sipping sweet drinks

FOOD & STORAGE

Heating food in plastic releases BPA, phthalates, and microplastics into your food. These are endocrine disruptors that mimic oestrogen — for ER-positive breast cancer survivors, this directly adds to the hormonal environment that drove the original cancer. BPA has been detected in breast tumour tissue. Non-stick cookware releases PFAS (forever chemicals) when heated — persistent pollutants that do not break down in the body. PFAS are testable in blood through private labs. The dirty dozen produce list consistently tests highest for pesticide residues including glyphosate, classified by the WHO as a probable carcinogen.

Changes to make:

- [ ] Glass food storage containers
- [ ] No microwave in plastic
- [ ] Stainless/cast iron cookware
- [ ] Organic for dirty dozen produce
- [ ] Removed non-stick cookware

SKIN

Your skin is your largest organ and absorbs a significant percentage of what is applied to it. Sunscreen chemicals are detectable in blood after a single day of use. Parabens have been found in breast tumour tissue. Fragranced products contain phthalates as fragrance carriers — the same endocrine disruptors measured in the urine testing panel. Switching to mineral sunscreen, paraben-free skincare, and fragrance-free products removes a daily source of endocrine disruption. The changes you make to what goes on your skin will show up in your urine BPA and phthalate levels at Day 90.

Changes to make:

- [ ] Daily dry brushing
- [ ] Mineral sunscreen (zinc oxide/titanium dioxide)
- [ ] Audited skincare ingredient lists
- [ ] Removed fragranced products
- [ ] Paraben-free shampoo and body wash

EMF

The U.S. National Toxicology Program found clear evidence of cancer in rats exposed to mobile phone radiation. Italy's Ramazzini Institute independently replicated these findings at exposure levels equivalent to living near a cell tower. Documented health effects include disrupted melatonin production, increased cortisol output, and DNA strand breaks. For this protocol, which tracks sleep quality, cortisol, immune markers, and inflammation, removing a known disruptor of all four is consistent with the experiment. Lloyd's of London excluded EMF harm from all coverage in 2010, comparing it to asbestos.

Changes to make:

- [ ] Phone out of bedroom at night
- [ ] Corded headphones (not Bluetooth)
- [ ] Wi-Fi router off overnight
- [ ] Speakerphone for calls

- [ ] Phone not carried against body

SLEEP

Sleep is when your body does its deepest repair work. Growth hormone is released primarily during deep sleep, driving tissue repair and immune cell production. Melatonin is not just a sleep hormone but a powerful antioxidant with direct anti-cancer properties. The glymphatic system (your brain's waste clearance) is 60% more active during sleep. Poor sleep directly shows up as elevated cortisol, elevated hs-CRP, reduced NK cells, and impaired HbA1c. For cancer survivors, optimising sleep is a measurable input that directly affects the markers this experiment tracks.

Changes to make:

- [ ] Consistent bedtime within 30 minutes
- [ ] Bedroom fully dark (blackout)
- [ ] No screens 30 minutes before bed
- [ ] Room temperature 18–20°C
- [ ] Phone out of bedroom

FASTING

Time-restricted eating activates autophagy, which begins around 12–14 hours of fasting. During autophagy, cells recycle damaged components from chemotherapy and radiation. Fasting also reduces circulating insulin and IGF-1 while increasing growth hormone. Weight loss from time-restricted eating reduces aromatisation — directly lowering a key driver of ER-positive breast cancer recurrence. Your blood panel tracks this through HbA1c, fasting insulin, and hs-CRP. The full fasting protocol is covered in the Fasting Window section.

Changes to make:

- [ ] 12-hour overnight fast achieved
- [ ] 14-hour fast consistently
- [ ] 16:8 protocol

- [ ] Doing circuit fasted
- [ ] Tried a 24-hour fast

COFFEE, CAFFEINE & MYCOTOXINS

Coffee beans commonly contain ochratoxin A (OTA), a mycotoxin produced by Aspergillus and Penicillium moulds during storage and processing. The World Health Organisation states that OTA is often found in coffee beans, and the IARC classifies it as a Group 2B possible carcinogen. It is also an immunosuppressant.

One study found 91.7% of green coffee beans were contaminated with moulds, and 45% of brewed coffee samples contained measurable levels of OTA. For a cancer survivor running a protocol specifically designed to boost NK cells and clear inflammation, drinking an immunosuppressant every morning directly works against the experiment.

The caffeine question is separate

Approximately 50% of the population carries a slow CYP1A2 gene variant that extends caffeine half-life from the normal 3–5 hours to 8–12+ hours. This means a morning coffee keeps cortisol elevated well into the evening, disrupting sleep architecture, suppressing immune function, and driving the inflammation markers this experiment tracks. A second gene (ADORA2A) controls anxiety sensitivity to caffeine. If caffeine makes you anxious, it is genetic, not weakness.

The swap

Rooibos tea contains aspalathin and nothofagin — unique anti-inflammatory antioxidants not found in any other plant. Chrysanthemum tea clears liver heat and calms the nervous system in TCM. Both are caffeine-free, mycotoxin-free, and will not break your fast.

TCM DAMP-HEAT CLEARING

What is damp-heat?

In Traditional Chinese Medicine, the body exists in a balance of hot and cold, dry and damp. Cancer treatments — chemotherapy, radiation, and surgery — can push the body into a state called damp-heat: internal inflammation (heat) combined with fluid stagnation and sluggish metabolism (dampness). Signs include fatigue with a heavy feeling, bloating, brain fog, skin breakouts, joint stiffness, night sweats, and a coated tongue.

The TCM approach is to clear the heat with bitter and cooling foods, drain the dampness with diuretic foods, and support the spleen without adding more heat. This aligns with Western anti-inflammatory nutrition — the mechanisms differ but the foods overlap.

Key ingredients

Bitter Melon: Strongest heat-clearing vegetable in TCM. Contains momordicin.

Mung Beans: Heat-clearing and detoxifying. Drain dampness.

Watercress: Bitter and cooling. Clears heat from the blood.

Winter Melon: One of the strongest damp-clearing foods. Reduces swelling.

Job's Tears (Yi Yi Ren): Most prescribed damp-draining ingredient in TCM.

Chrysanthemum Flowers: Clear liver heat. Calm nervous system.

Dandelion Greens: Clear liver heat. Support detox pathways.

Fresh Ginger (Sheng Jiang): Mildly warm. Supports spleen gently. Always use fresh root, not dried.

Recipes

Bitter Melon & Egg Stir-Fry: Thin-slice bitter melon, salt 15 min, rinse. Stir-fry in sesame oil 5 min. Push aside, scramble 2–3 eggs. Combine with soy sauce and white pepper.

Watercress & Mung Bean Soup: Simmer mung beans 30 min in 1.5L water. Add 2 bunches watercress, dried tangerine peel, fresh ginger. Simmer 15 min. Sea salt.

Adzuki Bean & Job's Tears Porridge: Soak overnight. Simmer 35–40 min. Add red dates for sweetness.

Chrysanthemum & Goji Berry Tea: Steep 4–5 dried chrysanthemum flowers + 8–10 goji berries in hot water 5 min. Refill 2–3 times.

Rooibos Chai Latte: Brew rooibos 5 min. Add oat milk, cinnamon, cardamom, Mānuka honey. Zero caffeine, zero mycotoxins.

DAILY DRY BRUSHING

Dry brushing uses the same directional principles as manual lymphatic drainage (MLD), which has Cochrane-level evidence for breast cancer related lymphoedema. Board-Certified Oncology Physiotherapist Kelly Sturm (Mayo Clinic trained, CLT-LANA certified) actively recommends dry brushing for lymphoedema patients.

The technique

1. Start at your feet. Long strokes up the legs toward your torso.

2. Then hands. Long strokes up the arms toward your torso.

3. Always brush toward your heart. Every stroke goes toward the torso.

4. Light pressure — lighter than you think. You are moving lymph, not exfoliating.

5. Brush gently over healed scars. Scar tissue tightens and adheres to fascia, restricting lymphatic channels underneath. Gentle brushing keeps the connective tissue mobile.

6. Use a natural bristle brush, not synthetic.

When to brush

Before your evening shower is ideal — it becomes part of your wind-down routine. If you are feeling tight, heavy, or blocked up during the day, dry brushing anytime can help get things moving. There is no wrong time. The consistency matters more than the timing.

YOUR TESTING PANEL

The testing panel below is for discussion with your doctor. Your doctor decides which tests are clinically appropriate for your individual situation.

How to get the request written

Start with your oncologist or treating specialist. In most health systems a specialist request carries fewer restrictions than a GP request, so the whole panel can usually go on one form. If you are still attending follow-up appointments, this is the easiest route by a wide margin.

If that is not an option, ask your GP. Please note that because this is a long list, a GP may need to split it across two or three requests written over separate appointments in order to keep it bulk-billed or funded.

If your GP declines, that is not a refusal of you. Ordering a large panel without documented clinical justification can expose a GP to a funding compliance review,

and some will understandably decline on that basis. Ask for a referral to your oncologist instead — that is the correct route anyway, and a good GP will write one on the spot.

One that is not a blood test

DEXA bone density scan. The surveillance item most consistently recommended for this group and the one nobody thinks to ask for, because it is imaging rather than pathology and never appears on a blood form. It matters here because this circuit is weight-bearing by design — squats and the landing phase of every skip load bone directly, and without a baseline you have no way of knowing whether that is doing anything.

What it involves: a low-dose X-ray at a radiology practice. You lie on an open table for about ten minutes — no injection, nothing enclosed. Two sites are measured, usually lumbar spine and hip, and you are given a T-score.

The funding part: in Australia bone densitometry is not automatically rebated. There are specific MBS items and the referral must state which clinical indication applies. Common ones for this group are aromatase inhibitor therapy, premature or treatment-induced menopause, risk-reducing oophorectomy, prolonged corticosteroids, or a previous minimal-trauma fracture. If none applies you can still have the scan as a private patient for a modest fee. Other countries fund it differently — ask what applies where you are.

It is referred to a specialist rather than ordered like a blood test, and the report must be written by one — so it is a separate referral, not a line on your pathology form. There is a dedicated request page for it in your downloads.

One thing that makes DEXA different from everything else in this journal: do not book a repeat at Day 90. Bone density cannot meaningfully change in 90 days, and the scan carries a precision error large enough that a short repeat would show noise you would read as signal. Funding rules generally allow monitoring only once in a 24 month period anyway. So treat DEXA as a round-boundary measure — baseline now, repeat at 12 to 24 months, which is roughly your first round against your fifth.

If you want a bone answer on a 90-day timescale, that is what the bone turnover markers are for. CTX reflects how much bone is being broken down and P1NP how much is being laid down, and unlike density they respond within weeks to months because they measure activity rather than the accumulated result. Falling CTX alongside steady or rising P1NP is the direction you want. Both need a fasted morning draw at the same time each checkpoint, both are usually self-funded, and the evidence that exercise shifts them inside 90 days is suggestive rather than settled. They sit in Go Deeper.

You do not need every test on this list to run the protocol. A partial panel, tested consistently at the same four checkpoints, is still real data.

My country: My health system:

FREE — Through your health system

25+ blood tests for $0 that provides a tailored snapshot of your biology post cancer treatment. Inflammation, immune, thyroid, hormones, liver, vitamins, EBV, tumour markers.

GO DEEPER — Private labs

Additional testing depending on your budget. NK cells, heavy metals, gut health, environmental toxins, Omega-3. Order as many or as few as you like through independent labs.

Cycle timing: Book Day 0 bloods for **Day 2–4 of your period** (early follicular). Post-menopausal: any fasting morning.

Take the pathology discussion sheet to your appointment. It groups every test by how straightforward it is to justify, gives the reason for asking, and leaves a yes/no/note column your doctor fills in as you work down the page — plus separate pages for the allied health request and the bone density referral, which is imaging and cannot go on a blood form. Free to download at skipitout.com.

DAY 0 — YOUR BASELINE

- [ ] Set start date
- [ ] Book blood tests (use GP/oncologist letter from the website)
- [ ] Complete Day 0 blood draw (Day 2–4 of cycle if applicable)
- [ ] Enter Day 0 results into the xlsx tracker and/or My Results on the website
- [ ] Record body measurements (surgery side vs reference side)
- [ ] Take Day 0 photos (front, back, left, right)
- [ ] Do Day 0 vibe check-in (8 questions)
- [ ] Start daily non-negotiables

Body Measurements

Measurement	Day 0	Day 30	Day 60	Day 90
Weight (kg)				
Body Fat %				
Waist (cm)				
Hips (cm)				
Chest (cm)				
Surgery Side — Pt 1				
Surgery Side — Pt 2				
Reference Side — Pt 1				
Reference Side — Pt 2				
DIFFERENCE — Pt 1				
DIFFERENCE — Pt 2				
Resting Heart Rate				
Blood Pressure				

Day 0 — FRONT

Print your photo and stick or tape it below. Same lighting, same position at each milestone.

Day 0 — FRONT — stick photo here

Day 0 — BACK

Print your photo and stick or tape it below. Same lighting, same position at each milestone.

Day 0 — BACK — stick photo here

Day 0 — LEFT SIDE

Print your photo and stick or tape it below. Same lighting, same position at each milestone.

Day 0 — LEFT SIDE — stick photo here

Day 0 — RIGHT SIDE

Print your photo and stick or tape it below. Same lighting, same position at each milestone.

Day 0 — RIGHT SIDE — stick photo here

VIBE CHECK-IN SCORES

Score each 1–5 (1 = poor, 5 = excellent).

Question	Day 0	Day 30	Day 60	Day 90
Energy				
Sleep				
Gut Health				
Mood				
Body				
Surgery Side				
Skin				
Hydration				
TOTAL (/40)				
PERCENTAGE				

Day 0 Notes:

Day 30 Notes:

Day 60 Notes:

Day 90 Notes:

LAB RESULTS TRACKER

FREE TIER — Through Your Health System

These tests are available for free (or minimal cost) through your GP, oncologist, or public health system with cancer history as clinical justification. This alone is a powerful before-and-after snapshot of your biology.

Blood

Measurement	Day 0	Day 30	Day 60	Day 90
FBE/FBC/CBC — Hb				
WCC				
Lymphocytes				
Platelets				
HbA1c				
Fasting Glucose				
Fasting Insulin				
Ferritin				
LDL				
HDL				
Triglycerides				
Calcium				
Uric Acid				
LDH				
Homocysteine				

Inflammation

Measurement	Day 0	Day 30	Day 60	Day 90
hs-CRP (opt <1.0)				
ESR				

IL-6				
Adiponectin				
SAA				
MPO				

Hormones

Measurement	Day 0	Day 30	Day 60	Day 90
TSH				
Free T3				
Free T4				
Thyroid Antibodies				
Cortisol AM				
Oestradiol				
FSH				
DHEA-S				

Nutrients

Measurement	Day 0	Day 30	Day 60	Day 90
Vitamin D (opt 75–150)				
B12				
Folate				
Zinc				
Copper				
Omega-3 Index				
RBC Magnesium				

Immune

Measurement	Day 0	Day 30	Day 60	Day 90

NK Cells				
IgG				
IgA				
IgM				
EBV EA IgG				
CA 15-3 (opt <30)				
CEA (opt <5)				
CA-125 (opt <35)				

Environmental

Measurement	Day 0	Day 30	Day 60	Day 90
BPA				
Phthalates				
Glyphosate				
Heavy Metals				
PFAS				
CDSA				
Zonulin				

Track these across all four rounds. The Skip It Out panel tracker spreadsheet carries your Day 0 forward and charts every marker automatically — pick a marker, see the line. Free to download at skipitout.com.

Day 30 — FRONT

Print and tape. Compare with Day 0.



Day 30 — BACK

Print and tape. Compare with Day 0.

Day 30 — BACK

Day 30 — LEFT SIDE

Print and tape. Compare with Day 0.



Day 30 — RIGHT SIDE

Print and tape. Compare with Day 0.



Day 30 REFLECTION

How I feel at Day 30:

What changed since last checkpoint:

My reason today:

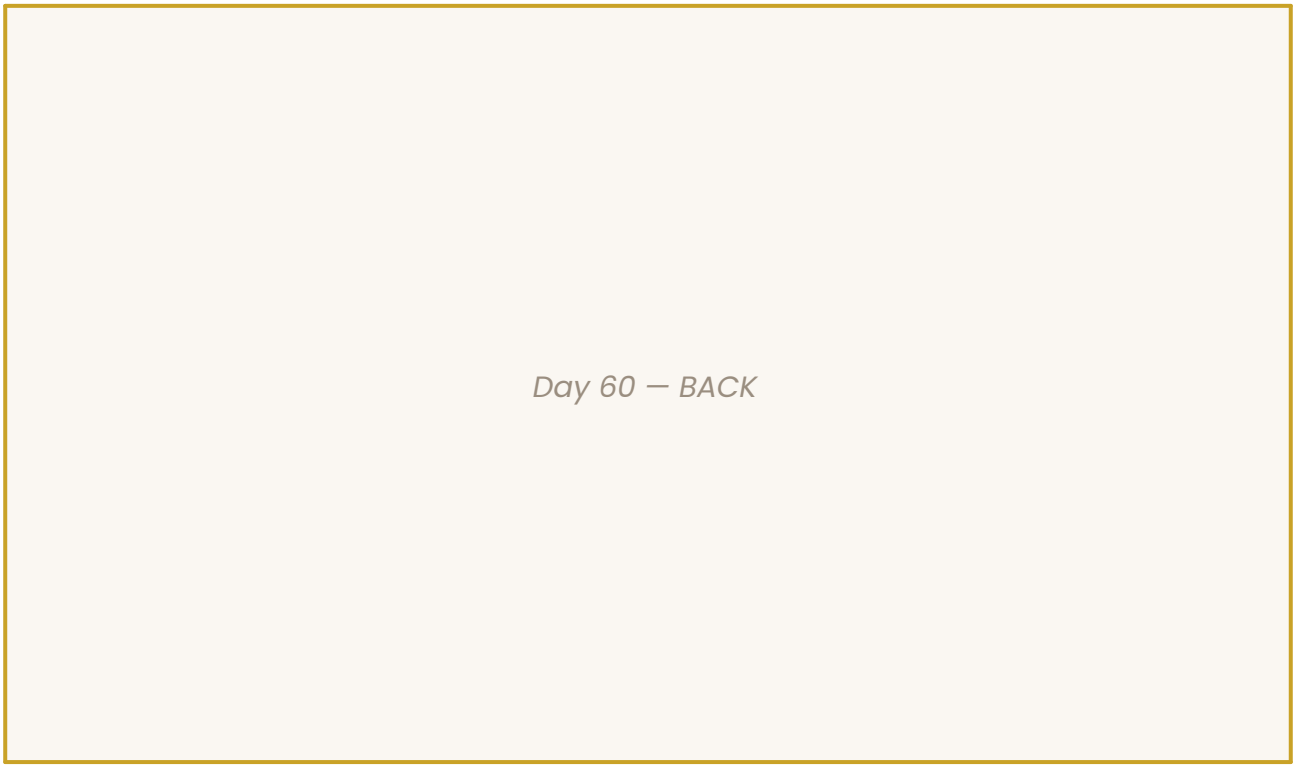
Day 60 — FRONT

Print and tape. Compare with Day 0.



Day 60 — BACK

Print and tape. Compare with Day 0.



Day 60 — LEFT SIDE

Print and tape. Compare with Day 0.



Day 60 — RIGHT SIDE

Print and tape. Compare with Day 0.

Day 60 — RIGHT SIDE

Day 60 REFLECTION

How I feel at Day 60:

What changed since last checkpoint:

My reason today:

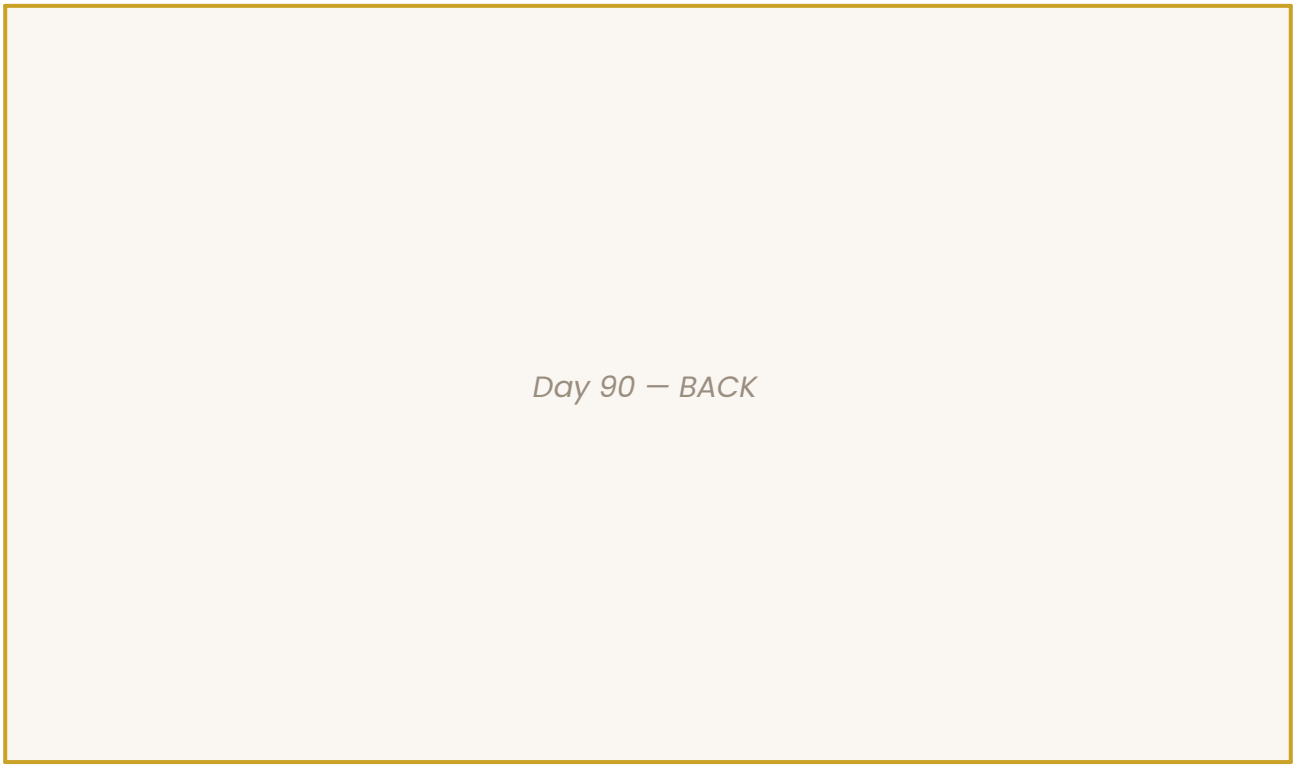
Day 90 — FRONT

Print and tape. Compare with Day 0.



Day 90 — BACK

Print and tape. Compare with Day 0.



Day 90 — LEFT SIDE

Print and tape. Compare with Day 0.



Day 90 — RIGHT SIDE

Print and tape. Compare with Day 0.

Day 90 — RIGHT SIDE

Day 90 REFLECTION

How I feel at Day 90:

What changed since last checkpoint:

My reason today:

90-DAY COMPLETION GRID

Rest days are part of the protocol. Blanks are not failures.

☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6	☐ 7	☐ 8	☐ 9	☐ 10
☐ 11	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17	☐ 18	☐ 19	☐ 20
☐ 21	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26	☐ 27	☐ 28	☐ 29	☐ 30
☐ 31	☐ 32	☐ 33	☐ 34	☐ 35	☐ 36	☐ 37	☐ 38	☐ 39	☐ 40
☐ 41	☐ 42	☐ 43	☐ 44	☐ 45	☐ 46	☐ 47	☐ 48	☐ 49	☐ 50
☐ 51	☐ 52	☐ 53	☐ 54	☐ 55	☐ 56	☐ 57	☐ 58	☐ 59	☐ 60
☐ 61	☐ 62	☐ 63	☐ 64	☐ 65	☐ 66	☐ 67	☐ 68	☐ 69	☐ 70
☐ 71	☐ 72	☐ 73	☐ 74	☐ 75	☐ 76	☐ 77	☐ 78	☐ 79	☐ 80
☐ 81	☐ 82	☐ 83	☐ 84	☐ 85	☐ 86	☐ 87	☐ 88	☐ 89	☐ 90

Total Sessions: _____ / 90

LISTEN TO YOUR BODY

Your body can feel extremely heavy, blocked up, and sore from exercise — especially if you are just starting out post lymph node removal. Some days will feel painful and next to impossible. Do not force the workout. Use that day as a stretch day instead: put on a yoga stretch or stretch over an exercise ball, go for a walk in the sunshine, ground your feet in the earth. Do something that lets your body relax and unwind. Rest days are part of the protocol. Blanks in this grid are not failures — they are your body telling you what it needs. Pick it up again tomorrow. Remember your reason.

GO DEEPER — PRIVATE LAB PANEL

Additional testing through independent labs depending on your budget.

These tests go beyond what your public health system covers. Order as many or as few as you like. Each adds a deeper layer of insight into what the protocol is changing.

IMMUNE — DEEP

Measurement	Day 0	Day 30	Day 60	Day 90
NK Cell Count + Lymphocyte Subsets (cells/µL) — opt >100				
IL-6 Interleukin-6 (pg/mL) — opt <7				
Serum Amyloid A / SAA (mg/L) — opt <10				
Adiponectin (µg/mL) — opt >10				
Myeloperoxidase / MPO (pmol/L) — opt <620				

NUTRIENTS — DEEP

Measurement	Day 0	Day 30	Day 60	Day 90
Omega-3 Index (%) — opt >8%				
RBC Magnesium (mmol/L) — opt 1.65–2.55				
ApoB / Apolipoprotein B (g/L) — opt <0.9				

BONE TURNOVER — the 90-day bone answer

Measurement	Day 0	Day 30	Day 60	Day 90
CTX — bone breakdown (fasted, morning, same time each draw)				
P1NP — bone building (fasted, morning, same time each draw)				

HEAVY METALS & TOXINS

Measurement	Day 0	Day 30	Day 60	Day 90
Urine Toxic Metals — 14 panel (Pb, Hg, As, Cd + 10 more)				
Blood Metals (Pb, Hg, As, Cd)				
BPA + Phthalates (urine)				
Glyphosate (urine)				

PFAS Panel / Forever Chemicals (serum)				

GUT ECOSYSTEM

Measurement	Day 0	Day 30	Day 60	Day 90
CDSA — Comprehensive Digestive Stool Analysis				
PCR Multiplex Stool Panel				
Zonulin / intestinal permeability (ng/mL) — opt <107				

Costs vary by provider and country. The app shows providers for your location. Ask about bundle pricing for Day 0 + Day 90 repeats.

Track these across all four rounds. The Skip It Out panel tracker spreadsheet carries your Day 0 forward and charts every marker automatically — pick a marker, see the line. Free to download at skipitout.com.

SUPPLEMENT TRACKER

Supplement	BUY	W1	W2	W3	W4	W5	W6	W7	W8	W9	W10	W11	W12	W13
Turkey Tail	☐													
NAC	☐													
Vitamin D3	☐													
Omega-3	☐													
Zinc	☐													
Selenium	☐													
Milk Thistle	☐													
Probiotics	☐													
B-Complex	☐													
Magnesium	☐													
Silica	☐													
Quercetin	☐													
Curcumin	☐													

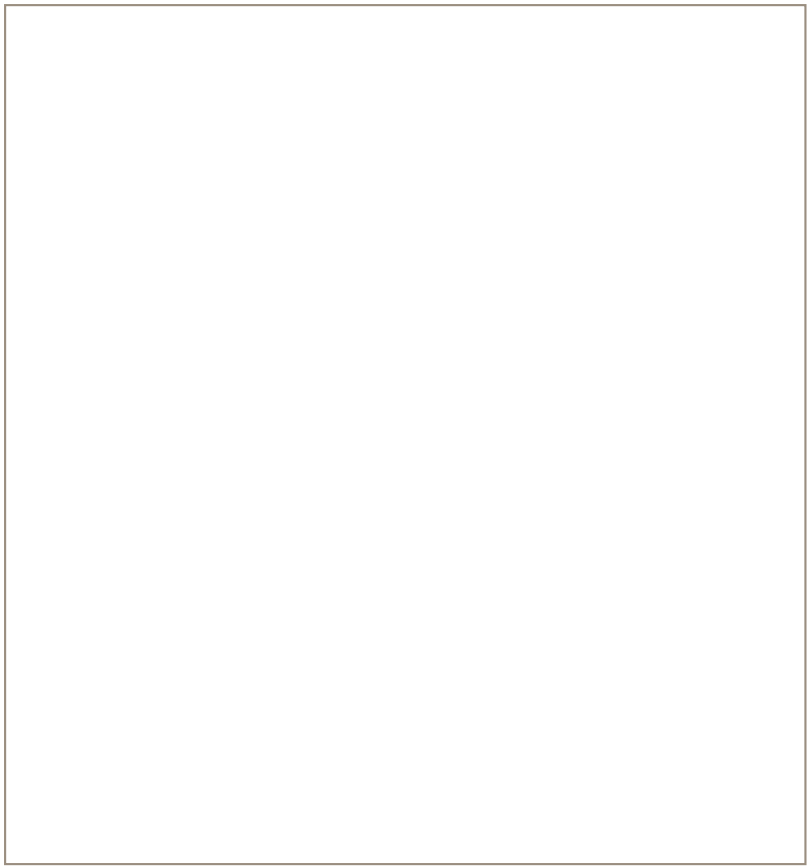
Day 90 — The Finish Line

You did it. Stick your favourite Day 90 photo here.

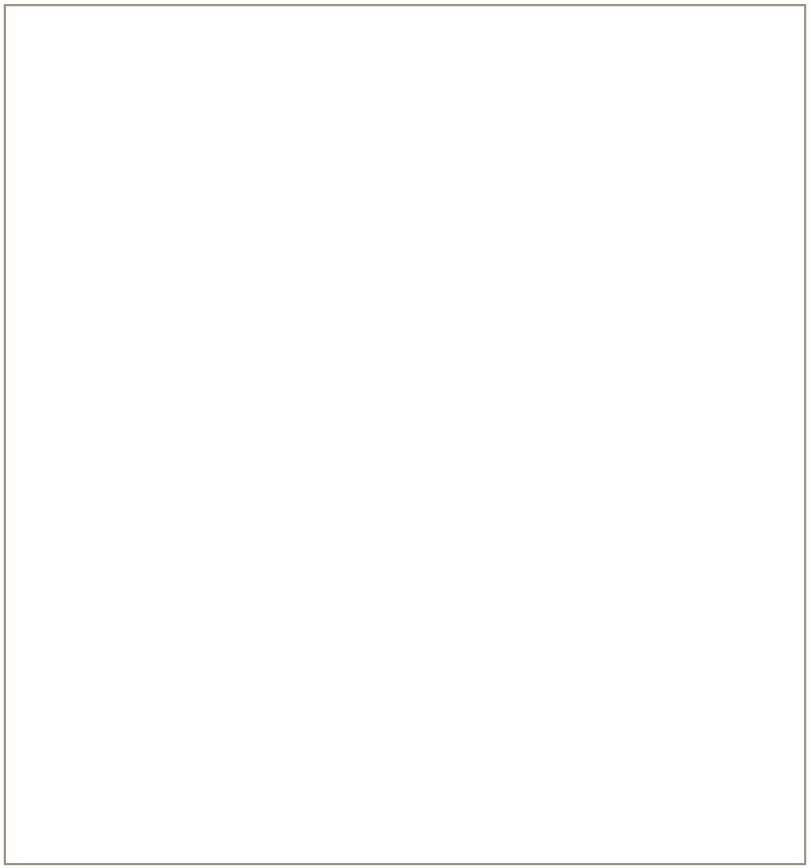
Your Day 90 Photo

FACE TO FACE

Day 0 and Day 90, side by side.



Day 0



Day 90

The bloods are your evidence.

The selfie is a timestamp of history for you to look into your own eyes and feel the growth in your internal presence.

Try to take it in the same light, same time of day, no filter, both times.

Not a measurement. Just a record.

Appendix

The Kitchen Reset

Clean inputs make clean data.

Restock list · Grab-and-go snacks · Scanning the aisles

Do the restock once, before Day 0. You do not need all of it in week one — tick things off as you go. The point is not a perfect pantry. It is removing the moment at 3pm where the only thing in the house is a biscuit.

THE RESTOCK LIST

Everything below is a supermarket item unless marked otherwise. Tick as you go.

The Fridge

- [ ] Eggs — free range, a dozen minimum
- [ ] Plain Greek yoghurt or kefir — unsweetened, live cultures
- [ ] Coconut yoghurt — check it is not just sugar and thickener
- [ ] Avocados — buy at different ripeness so they land across the week
- [ ] Smoked salmon or fresh salmon fillets
- [ ] Fresh ginger root — a big knob. Always fresh, never dried
- [ ] Fresh turmeric root, or a good organic powder
- [ ] Lemons — a bagful
- [ ] Leafy greens — spinach, rocket, watercress
- [ ] Cucumber, celery, carrots — the things you cut into sticks
- [ ] Berries — fresh when cheap, frozen when not
- [ ] Kimchi or sauerkraut — refrigerated section, not shelf-stable
- [ ] Tahini or hummus — check the oil (see Scanning the Aisles)
- [ ] Olives
- [ ] Tofu, for the TCM recipes

The Freezer

- [ ] Frozen mixed berries — the best value item in the shop
- [ ] Frozen wild salmon or white fish fillets
- [ ] Frozen edamame
- [ ] Frozen spinach and broccoli — single ingredient, no sauce
- [ ] Bone broth, frozen in portions
- [ ] Smoothie pucks (see Grab and Go)

The Tea Shelf

- [ ] Rooibos — the everyday coffee replacement
- [ ] Dried chrysanthemum flowers
- [ ] Goji berries
- [ ] Green tea
- [ ] Peppermint or ginger tea for the evening

The Cupboard

- [ ] Extra virgin olive oil — dark glass bottle
- [ ] Tinned wild salmon, sardines, mackerel — olive oil or spring water
- [ ] Tinned chickpeas, cannellini, lentils — beans, water, salt
- [ ] Rolled oats — plain, not the flavoured sachets
- [ ] Chia seeds
- [ ] Flaxseed — buy whole, grind as you go
- [ ] Hemp seeds
- [ ] Walnuts, almonds, brazil nuts — raw or dry-roasted
- [ ] Pumpkin and sunflower seeds — the whole seed, not the oil
- [ ] Nut butter — ingredients: nuts. Maybe salt
- [ ] Tahini — ingredients: sesame
- [ ] Medjool dates
- [ ] Mānuka honey
- [ ] Apple cider vinegar, with the mother
- [ ] Tamari or good soy sauce
- [ ] Toasted sesame oil — for finishing, not frying
- [ ] Tinned coconut milk, full fat — coconut, water
- [ ] Sea salt, pepper, cinnamon, cumin, smoked paprika
- [ ] Dark chocolate, 85% or higher

THE TCM SHELF

Asian grocer, not the supermarket

This is the one trip the big three cannot do for you. An Asian grocer will have all of it, cheaply, and it keeps for months. One visit covers the whole 90 days.

- [ ] Dried tangerine peel (chen pi)
- [ ] Job's Tears (yi yi ren / coix seed)
- [ ] Mung beans
- [ ] Adzuki beans
- [ ] Dried red dates (jujube)
- [ ] Bitter melon — fresh, in the veg section
- [ ] Winter melon — fresh
- [ ] Dried chrysanthemum and goji — cheaper here than the health aisle

TCM dietary practice is traditional and is not a substitute for medical nutrition advice from a qualified dietitian or your treating physician.

GRAB AND GO

Nine things to batch on a Sunday so the fridge answers the question for you.

Your eating window is roughly 11am to 7pm. That is two meals and a couple of snacks. The snacks are where most people fall over, because hunger at 3pm does not negotiate — it takes whatever is closest. So make the closest thing the right thing. Ninety minutes on a Sunday covers the week.

1. Chia pudding jars

3 tbsp chia seeds to 1 cup coconut milk per jar. Stir, wait five minutes, stir again — that second stir is what stops it clumping. Cinnamon, a splash of vanilla. Refrigerate overnight. Top with berries when you eat it, not before.

Makes 5 jars · Keeps 5 days

2. Boiled eggs

A dozen, nine minutes, straight into ice water. Leave them in the shell — they keep better and peel easier cold. Sea salt and cracked pepper.

Keeps 7 days

3. Ginger turmeric bliss balls

1 cup walnuts, 1 cup pitted medjool dates, 1 tbsp grated fresh ginger, 1 tsp turmeric, a pinch of black pepper (it is what makes the turmeric absorbable), pinch of salt, 2 tbsp desiccated coconut. Blitz to a coarse paste, roll into balls, roll in extra coconut.

Makes about 16 · Keeps 2 weeks in the fridge, 3 months frozen

4. Sardine pâté

2 tins sardines in olive oil, oil and all. Juice of a lemon, a handful of parsley, cracked pepper, a spoon of Greek yoghurt or tahini. Mash with a fork. Do not overthink it.

Keeps 3 days · Eat on cucumber rounds, celery, or seeded crackers

5. Cut veg in water

Carrot, celery and cucumber sticks in a container with a splash of water at the bottom. This is the trick — the water keeps them crisp for days instead of going bendy by Tuesday.

Keeps 4 days

6. Lemon tahini dip

cup tahini, juice of a lemon, a crushed garlic clove, cold water added a tablespoon at a time until it loosens, salt. It will seize first — keep going, it comes back. Optional cumin.

Keeps 5 days · Your hummus replacement with no mystery oil in it

7. Smoothie pucks

Muffin tin. Into each hole: a handful of frozen berries, a handful of spinach, a tablespoon of hemp seeds, a slice of fresh ginger. Freeze solid, pop out, bag them. One puck plus coconut milk in a blender is a 40-second breakfast that breaks your fast well.

Keeps 3 months

8. Roasted chickpeas

A tin of chickpeas, drained and dried properly on a tea towel — wet chickpeas steam instead of crisping. Toss in olive oil, cumin, smoked paprika, salt. 200°C for 30–35 minutes, shaking halfway.

Keeps 4 days in a jar on the bench — not the fridge, it softens them

9. Chrysanthemum and goji iced tea

A big jug. Steep a handful of dried chrysanthemum flowers and a scattering of goji berries in hot water for 10 minutes, then chill. No caffeine, no mycotoxins, and it will not break a fast unless you add honey.

Keeps 3 days · Reach for this instead of the afternoon coffee

The five-minute version

If Sunday got away from you: boiled eggs, a tin of sardines, an avocado, a handful of walnuts, dark chocolate, an apple. All of it is grab-and-go already. A missed prep day is not a failed week.

These nine are examples, not the whole menu. The Nourish Handbook has the full set — breakfasts, mains, sides, snacks and drinks — with the evidence behind each one.

SCANNING THE AISLES

The front of a packet is advertising. The back is information. Almost everything you need to know is in the ingredients list — and the ingredients list is legally required to be honest.

The six rules

1. Flip it first

Never buy off the front. “Natural”, “wholesome”, “gut-friendly” and “immune support” mean nothing legally. Flip the packet before you read a single word on the front.

2. Count the ingredients

Under five is usually fine. Over ten and you should be able to explain why. A packet of almonds has one ingredient. If yours has six, something has been done to them.

3. Scan for seed oils

Sunflower, safflower, canola, soybean, cottonseed, rice bran, grapeseed, and the catch-all “vegetable oil”. These turn up in dips, crackers, dried fruit and roasted nuts — things with no business containing oil at all.

4. Learn the sugar aliases

Anything ending in -ose. Any syrup. Fruit juice concentrate, rice malt syrup, agave, invert sugar, maltodextrin, molasses, barley malt extract. Sugar gets split across three or four names so none of them has to appear first. Add them up in your head.

5. The first-three test

If a sugar or a seed oil appears in the first three ingredients, put it back. That is the whole test. Three seconds, and it removes about 80% of the snack aisle.

6. “No added sugar” is not “no sugar”

It usually means fruit juice concentrate or dates instead. Sometimes that is genuinely fine — a date-based bar is a different thing from a glucose-syrup one. Flip it and see which you are holding.

Walking the shop

Produce — start here, spend the most time here

Nothing to read. Buy what is in season, buy the dirty dozen organic if the budget stretches, and buy more than you think you need of the things that become snacks: carrots, celery, cucumber, apples, berries.

Deli and seafood

Smoked salmon should read: salmon, salt, maybe smoke. Olives in brine, not vegetable oil. Check the marinated vegetables — this is where "antipasto" quietly becomes canola oil with a vegetable in it.

Dairy and eggs

Plain yoghurt only. Flavoured yoghurt is a dessert with a health halo — a single fruit tub can carry four teaspoons of sugar. Buy plain and add your own berries. Butter over margarine every time; margarine is structurally a seed oil product.

The health food aisle — proceed with suspicion

The highest concentration of the best and the worst products in the shop, sitting right next to each other. The tahini, the good nut butters and the tinned fish are here. So are $6 bars with 22 ingredients. Apply the first-three test ruthlessly, because this packaging is designed for people who have already decided they are being healthy.

Nuts, seeds and dried fruit

"Roasted and salted" usually means roasted in vegetable oil — check. Dried fruit: look for fruit only. Sulphur dioxide (preservative 220) is what keeps dried apricots bright orange; the brown ones are the better buy. Buy the big bag — nuts are one of the few things where bulk genuinely saves money.

Tinned fish and legumes

The most underrated aisle in the shop and the cheapest omega-3 in the country. Sardines, mackerel, wild salmon in olive oil or spring water. Skip anything in vegetable oil or a sauce. Legumes: beans, water, salt. Three ingredients.

Oils and condiments

Extra virgin olive oil in dark glass — light degrades it, which makes the clear plastic bottles a false economy. Australian olive oil is excellent and often cheaper than imported. Skip canola, rice bran, "vegetable", and "light" olive oil (light in flavour because it is refined, not light in fat).

Tea and coffee

Rooibos, green tea, peppermint. If you are keeping some coffee, single-origin high-altitude specialty beans carry a lower mycotoxin risk than cheap commodity blends — altitude and careful processing are what reduce mould exposure.

Freezer

Frozen berries, frozen fish, single-ingredient frozen vegetables. Frozen produce is snap-frozen at ripeness, so it is frequently better than tired fresh produce three days off the truck. Avoid anything in a sauce, crumbed, or sold as a steam-bag meal.

The snack aisle

Walk it once, on purpose, reading three packets with the first-three test. Then you will know why you do not need to walk it again. The exceptions worth knowing: plain rice crackers, seeded crackers with a short list, 85%+ dark chocolate, and plain popcorn kernels popped at home in olive oil — microwave popcorn bags are lined with PFAS.

The big three

What each shop is actually good at. Buy accordingly rather than loyally.

ALDI

Best for: nuts, seeds, frozen berries, olive oil, tinned fish, eggs, oats, dark chocolate. The price gap on nuts and frozen berries is large enough to matter across 90 days. A smaller range also means fewer decisions, which is genuinely easier on a tired day. The catch: limited specialty and organic range, and the good things in the middle aisle are there this week and gone next.

Coles

Best for: the organic range, the health food aisle, and a reliable deli and seafood counter. Own-brand tinned legumes and tinned fish are usually clean — flip them anyway, formulations change.

Woolworths

Best for: the Macro range, which is the own-brand line worth knowing. Macro nut butters, oats, nuts and frozen produce are generally short-ingredient and well priced. Still apply the rules — a health-positioned own-brand line is not a free pass.

Ranges and formulations change constantly. Treat any product name as a starting point, not a guarantee — the six rules will outlast every one of them.

The three-second checkout test

1. Flip it.
2. Read the first three ingredients.
3. Sugar or seed oil in there? Put it back.

That is the whole system.

MY WEEKLY SHOP

Photograph this page, or tear it out and take it with you.

Produce

Fridge & deli

Cupboard & tinned

Freezer

Snacks to batch this week

Supplements to refill

What is running low. Check the supplement tracker before you shop.

DISCLAIMER

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The Skip It Out protocol is a self-directed experiment on your own biology. It is not a treatment plan. Results will vary between individuals based on cancer type, treatment history, fitness level, adherence, and many other factors. No specific health outcome is promised or implied.

Before beginning any exercise program, fasting protocol, or supplement regimen described in this journal, consult your oncologist or treating physician. If you experience unusual pain, swelling, shortness of breath, chest pain, dizziness, or any symptoms of lymphedema, stop immediately and seek medical attention.

The supplements listed in this journal have published research relevant to cancer survivors but are not prescriptions. Always discuss supplements with your oncologist, particularly if you are on active treatment, hormone therapy (tamoxifen, aromatase inhibitors), or immunotherapy (checkpoint inhibitors). Some supplements may interact with medications or be contraindicated for your specific situation.

The blood testing panel and GP/oncologist letter templates are provided as patient-prepared discussion documents to facilitate informed conversations with your care team. They are not clinical recommendations. Your doctor will determine which tests are clinically appropriate for your individual situation based on your medical history.

Health system coverage, item numbers and billing information vary by country and change over time. What is funded in one health system may not be in another. Always confirm current eligibility and cost with your provider before testing.

The TCM (Traditional Chinese Medicine) dietary recommendations are based on traditional practice and are not a substitute for medical nutrition advice from a qualified dietitian or your treating physician.

The EMF (electromagnetic field) information presented reflects published research from the U.S. National Toxicology Program, the Ramazzini Institute, and other sources. This is an evolving area of research and does not represent a consensus position of all scientific bodies.

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Skip it out

90 DAYS. YOUR BIOLOGY. YOUR PROOF

Day 90.

New skin. New blood. New data.

How I feel now vs Day 0:

The one thing I'm most proud of:

What I'm taking into the next 90 days:

Day 91.

First and most importantly — CONGRATULATIONS! You did it. You skipped your way to the end. You now have ninety days of your own data: four blood draws, plus body measurements and photos from Day 0 to today.

Now keep going.

The rounds in Skip It Out don't stop. Round 2 picks up where Round 1 finished — the same three exercises, higher numbers, the same four checkpoints. The panel tracker carries your Day 0 forward, so every round is measured against your own results. Four rounds is a year. A year to see real progress in the bloods, physically and mentally.

But if you never open this journal again, you have a memento and a new headspace that you can take forward in life. Any movement is good movement.

You get one body in this life, through till your last breath. Looking after it is a privilege.

All the best for your long, vibrant life ahead,

Lily x