

Camp Supplement Protocol

Sample document — fictional athlete, illustrative numbers

Two-week training camp · Prepared for a professional boxer, 71 kg, no competition inside this window

How to read this

This is a shortened, anonymised example of the supplement section of a camp plan. Names, dates and figures are invented. A real document is built from the athlete's bloodwork, training schedule, weigh-in date and testing status, and it runs to considerably more pages.

What it is meant to show is the structure: a fixed daily base, a load-dependent layer that moves with the training week, hard rules where two products interfere with each other, and a review point with target values rather than a vague instruction to "see how you feel".

Working rules

1. Nothing enters camp uncertified. Every product is listed on Informed Sport or NSF Certified for Sport, and the specific batch is checked before it is opened.
2. Everything is logged. Product, batch number, dose, date. Packaging and receipts are kept for the duration of camp and beyond.
3. Oral only. Intravenous infusions above the threshold set in the Prohibited List are a prohibited method at all times — in and out of competition — regardless of what is in the bag. This protocol does not use them.
4. Every declared ingredient is checked on Global DRO before the product is bought, not after.
5. Nothing new inside the final week. If it has not been used in camp, it does not appear in fight week.

Daily base — unchanged for the whole camp

These do not move with training load. They are the floor.

Product	Form	Daily dose	When
Omega-3	EPA+DHA, triglyceride form	2000 mg EPA+DHA	Split: breakfast and lunch
Vitamin D3 + K2	D3 with K2 MK-7	4000 IU + 100 mcg	Morning, with a meal containing fat
Magnesium	Glycinate or malate	300–400 mg	Evening, before sleep
Zinc	Picolinate or bisglycinate	15–25 mg	Evening, with food
Electrolytes	Sodium-based, no added sugar	2 servings	Session and evening

Load-dependent layer

This layer moves with the week. Hard days carry the top of the range, rest days the bottom.

Day type	Creatine	Beta-alanine	Carbohydrate around session
Hard — two sessions or sparring	5 g	3–4 g, split	Top of phase range, timed pre and post
Moderate — one session	5 g	3 g, split	Middle of phase range
Rest — recovery only	5 g	3 g, single dose	Bottom of phase range

Creatine does not cycle with load — it is maintained daily because the muscle store, not the day's dose, is what matters.

A day laid out

Time	What
On waking	Electrolytes. Creatine 5 g.
Breakfast	Vitamin D3 + K2. Omega-3, first half.
30–45 min pre-session	Beta-alanine, first dose. Carbohydrate per day type.
Post-session	Protein and carbohydrate. Electrolytes if the session was long or hot.
Lunch	Omega-3, second half.
Evening meal	Zinc.
Before sleep	Magnesium.

Interactions that actually matter

These are the ones that change whether a product works at all. They are not optional detail.

Rule	Why
Zinc and iron are taken apart	They compete for the same absorption pathway. If both are indicated, one goes to morning and the other to evening.
Iron is taken with vitamin C	Vitamin C substantially increases absorption. This pair is the single highest-yield timing rule in the protocol.
Coffee and tea 1–2 hours away from iron	Tannins bind iron and block most of it.
Iron away from dairy and calcium	Calcium competes directly.
Vitamin D with a meal containing fat	Fat-soluble. Taken on an empty stomach, most of the dose is wasted.
Magnesium at night	Better tolerated, and it does not interfere with the daytime stack.

Review point

The protocol is not set once and left alone. It is reviewed at the end of the block against how the athlete actually trained and recovered — session quality, sleep, how the weight moved, and any bloodwork the athlete's own physician has ordered.

Where medical markers are involved, they are read by a doctor, not by me. My part is adjusting the nutrition and supplement plan around what the physician reports back. That division is deliberate and it does not move.

What this protocol deliberately does not include

Fat burners and multi-ingredient pre-workouts. Contamination rates are highest in exactly these categories, and the measurable benefit is small enough that no serious plan depends on them.

Diuretics in any form. Prohibited at all times under the Prohibited List, and they strip electrolytes from an athlete who is already managing weight.

Intravenous infusions above the threshold. A prohibited method regardless of contents, with narrow exceptions for hospital treatment, surgery and clinical diagnostics.

Anything bought locally during an away camp without checking the registry first.

Sample document. Educational material, not medical advice. For adults 18+. A real protocol is built from an individual athlete's bloodwork, schedule and testing obligations, and is not transferable between athletes.