

# PHOTON STUDY

(Daniel F. Royal, DO, CTP, JD)



**TURTLE HEALING BAND CLINIC**

**2112 East Flamingo Road • Suite 112 • Las Vegas • NV • 89119  
(702) 562-1454 (o) • (702) 902-2862 (f) • [droyal@royalmedicalclinic.com](mailto:droyal@royalmedicalclinic.com)**

# Amway

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Amway  
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# INDIGENOUS MEDICINE DEFINITION

“Indigenous medicine (a.k.a. “traditional medicine”) is the sum total of the knowledge, skills, and practices based on the theories, beliefs, and experiences indigenous to native cultures, whether explicable or not, used in the maintenance of health as well as in the prevention, diagnosis, improvement or treatment of physical and mental illness ***including, but not limited to alternative, complementary, holistic, and integrative approaches.***”

## References

1. Declaration Recognizing the First Nation Medical Board (July 17, 2018).
2. U.S.C. Title 25, Section 1680u (2010).
3. “General Guidelines for Methodologies on Research and Evaluation of Traditional Medicine,” World Health Organization (2000).

# IMIRB PURPOSE

Establishes an Institutional Review Board (IRB) to monitor clinical research for natural products and treatments used in the practice of *indigenous medicine* (“IM”).



# IMIRB INTENT

IMIRB is necessary to approve, modify, or reject research in IM. IM **diagnostics, treatments, and substances** will be studied in a consistent manner to provide documentation for validity and safety of IM therapeutics via statistical analysis.





# IMIRB ORGANIZATION

IMIRB primarily reviews and monitors **biomedical products and treatments** used in subjects who are members of the “Turtle Healing Band (THB).” Such review serves an important role in the protection of the rights and welfare of human research subjects used in **non-interventional clinical studies**.



# IMIRB OBJECTIVES

The Indigenous Medicine Institutional Review Board (“IMIRB”) will assist the First Nation Medical Board (“FNMB”) and Crow Nation in defining, clarifying, and understanding the scope of practice for Indigenous Medicine (“IM”). The following objectives will be pursued:

- Guidelines for research submissions will be established;
- ***Applications will be accepted only from FNMB licensees;***
- Safety and efficacy of IM diagnostic devices, substances, and modalities will be assessed;
- Availability of IM therapies will be published;
- Clinical outcomes of IM research studies will be reviewed;
- Social impact of IM research studies will be evaluated;
- Economic impact of IM research studies will be studied; and
- Means for developing an integrative relationship between IM and other healthcare concepts will be explored.

# IMIRB RESULTS

Indian Tribes and THB Members will have access to medical alternative devices, therapies, and substances that might otherwise be unavailable. As information becomes available, tribal providers will better understand IM from **non-interventional studies** conducted under IMIRB jurisdiction. Industries supporting IM may seek to affiliate with IMIRB and establish facilities on Indian Lands/Indian Land Trusts thereby increasing employment for Indian Tribe(s).



# IMIRB OUTCOME

Establish model guidelines for efficacy, benefits, and safety of IM.



# IRB PHASE 1 vs PHASE 2

## Phase 1

A phase of research to describe clinical trials that **focus on the safety of a drug**. They are usually conducted with healthy volunteers, and the goal is to determine the drug's most frequent and serious adverse events and, often, how the drug is broken down and excreted by the body. These trials usually involve a small number of participants (e.g., 20 to 80).

## Phase 2

A phase of research to describe clinical trials that gather preliminary data on whether a drug works in people who have a certain condition/disease (i.e., the drug's effectiveness). For example, **participants receiving the drug may be compared to similar participants receiving a different treatment, usually an inactive substance (called a placebo) or a different drug**. These trials involve 100's of participants and can last for several years.

# NON-INTERVENTIONAL IRB

## Interventional IRB

“A clinical study in which **participants are assigned to groups that receive one or more intervention/treatment (or no intervention)** so that researchers can evaluate the effects of the interventions on biomedical or health-related outcomes. The assignments are determined by the study's protocol. Participants may receive diagnostic, therapeutic, or other types of interventions.”

## Non-Interventional IRB

“A clinical study in which **participants receive one intervention/treatment used in a provider's practice that is already known to be safe**. Participants are not assigned to multiple groups, but rather receive one standard protocol where selected measurements (e.g., biomarkers) are monitored in a prospective manner as part of the provider's routine practice. No new drug or new device approval is being sought from U.S. FDA.”

# TEXAS ADMINISTRATIVE CODE

## (Rule 193)

(b) Prior to the administration or provision of an investigational drug, biological product or device, physicians must have their proposed use either included in an FDA/NIH approved protocol/study or approved by an IRB. The IRB must:

- 1. be affiliated with an academic setting or a Texas licensed hospital;***
2. be accredited by the Association for the Accreditation of Human Research Protection Programs, Inc. (AAHRPP);
3. be registered by the U.S. Department of Health and Human Services Office for Human Research Protection, pursuant to 21 CFR Part 56; or
4. have received national accreditation by an organization acceptable to the TMB.

# APPLICABLE CLINICAL TRIAL (“ACT”)

## Questions

1. Is the study interventional (a clinical trial)?
2. Do ANY of the following apply:
  - a. Is at least one study facility located in the United States or a U.S. Territory?
  - b. Is the study conducted under a U.S. FDA Investigational New Drug application (IND) OR Investigational Device Exemption (IDE)?
  - c. Does the study involve a drug, biological, or device product that is manufactured in and exported from the U.S. (or a U.S. territory) for study in another country?
3. Does the study evaluate at least one drug, biological, or device product regulated by the United States Food and Drug Administration (U.S. FDA)?
4. Is the study other than a Phase 1 trial of a drug and/or biological product or is the study other than a device feasibility study?

***If “Yes” is answered to all 4 questions***, and the study was initiated on or after January 18, 2017, the trial would meet the definition of an ACT that is required to be registered under 42 CFR 11.22 with ClinicalTrials.gov.





# PHOTON STUDY

PSB

PEMF

MINERALS

*(Calcium, Magnesium, Potassium)*





**Clinical Study**



# PHOTON STUDY

**OBJECTIVE:** Observe laboratory responses in subjects treated with: (1) Photon Sound Beam ("PSB"); and (2) Pulsing Electromagnetic Field ("PEMF").

## **SUBJECTS:**

1. Patients who have active Epstein-Barr Virus ("EBV");
2. Patient who have active cancer; and
3. Patients who have elevated Nagalase and/or Anti-Malignin Antibody Serum ("AMAS") tests without EBV or cancer.

# PHOTON STUDY

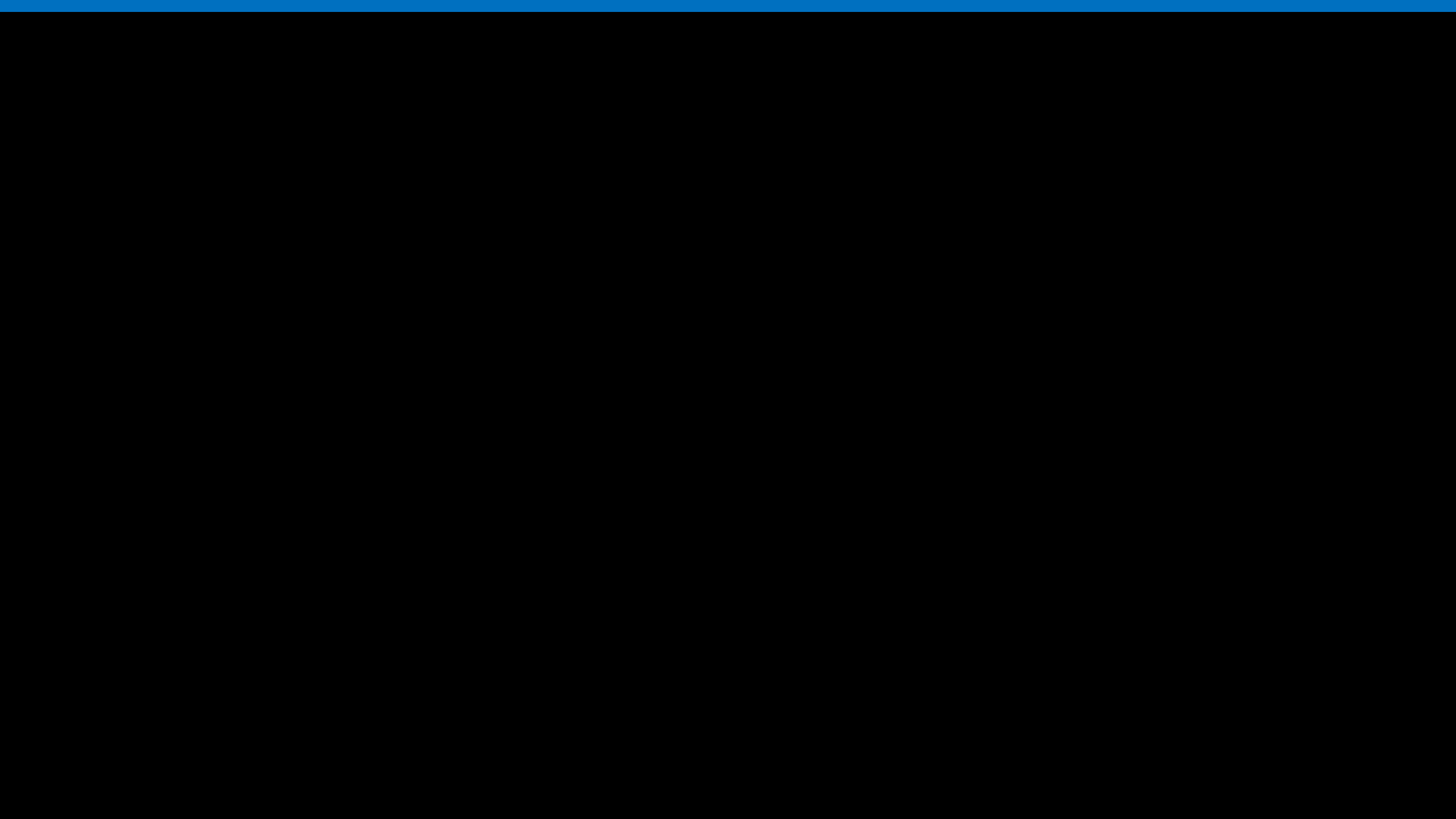
**PROTOCOL:** Written instructions given to patients on how to take liquid minerals.

## One-Month Supply

Calcium

Magnesium

Potassium



# AMAS RESULTS

(Patient: #1: Lung Cancer)

February 15, 2019

## Component Results

AMA ug/m	S-TAG	F-TAG	Net TAG
700-			
500-699	549		
400-499		414	
300-399			
135-299			136
100-134			
25-99			
0-24			

May 1, 2019

## Component Results

AMA ug/m	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499			
300-399	348		
135-299		179	169
100-134			
25-99			
0-24			

June 14, 2019

## Component Results

AMA ug/m	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499			
300-399	338		
135-299		206	
100-134			132
25-99			
0-24			

August 17, 2019

AMA ug/m	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499			
300-399	320		
135-299		202	
100-134			118
25-99			
0-24			

Normal Net-TAG = <100



# AMAS RESULTS

(Patient: #2: Prostate Cancer)

February 20, 2019

June 19, 2019

August 4, 2019

## Component Results

AMA ug/m	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499	424		
300-399			
135-299		222	202
100-134			
25-99			
0-24			

## Component Results

AMA ug/m	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499			
300-399	316		
135-299		149	167
100-134			
25-99			
0-24			

## Component Results

AMA ug/m	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499			
300-399			
135-299	278	164	
100-134			114
25-99			
0-24			

Normal Net-TAG = <100

# AMAS RESULTS

(Patient: #3: Hydrocephalus)

July 18, 2018

AMA ug/ml	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499			
300-399	364		
135-299		177	187
100-134			
25-99			
0-24			

August 10, 2018

AMA ug/m	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499	410		
300-399		317	
135-299			
100-134			
25-99			93
0-24			

May 10, 2019

AMA ug/m	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499			
300-399	323		
135-299		235	
100-134			
25-99			88
0-24			

Normal Net-TAG = <100

# AMAS RESULTS

(Patient: #4: EBV)

August 24, 2018

AMA ug/m	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499	433		
300-399			
135-299		243	190
100-134			
25-99			
0-24			

August 17, 2019

AMA ug/m	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499			
300-399	306		
135-299		249	
100-134			
25-99			56
0-24			

Normal Net-TAG = <100

# AMAS RESULTS

(Patient: #5: EBV)

August 8, 2019

AMA ug/m	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499	450		
300-399			
135-299		258	192
100-134			
25-99			
0-24			

September 26, 2019

AMA ug/m	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499			
300-399	345		
135-299		271	
100-134			
25-99			74
0-24			

Normal Net-TAG = <100

# AMAS RESULTS

(Patient: #6: EBV)

December 24, 2019

AMA ug/m	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499			
300-399	354		
135-299		221	
100-134			133
25-99			
0-24			

April 17, 2019

AMA ug/m	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499	482		
300-399			
135-299		259	223
100-134			
25-99			
0-24			

May 17, 2019

AMA ug/m	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499			
300-399	341		
135-299		210	
100-134			131
25-99			
0-24			

July 3, 2019

AMA ug/m	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499			
300-399	338		
135-299		214	
100-134			123
25-99			
0-24			

Normal Net-TAG = <100

# AMAS RESULTS

(Patient: #7: Ureteral Cancer)

August 8, 2019

AMA ug/m	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499			
300-399	338		
135-299		214	
100-134			123
25-99			
0-24			

September 26, 2019

AMA ug/m	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499			
300-399	350		
135-299		230	
100-134			120
25-99			
0-24			

Normal Net-TAG = <100

# NAGALASE RESULTS

(Patient: #7: Ureteral Cancer)

August 7, 2019

Royal		
8/7/19		
11:50 AM		
244120		
	<i>Unit</i>	<i>Ref. Range</i>
<b>1.54</b>	U	0.32 - 0.95

September 4, 2019

Royal		
9/4/19		
02:48 PM		
244845		
	<i>Unit</i>	<i>Ref. Range</i>
<b>1.00</b>	U	0.32 - 0.95

Normal Nagalase = <0.95 U

# AMAS RESULTS

(Patient: #8: Breast Cancer)

June 27, 2019

AMA ug/m	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499			
300-399			
135-299	295	147	147
100-134			
25-99			
0-24			

July 19, 2019

AMA ug/m	S-TAG	F-TAG	Net TAG
700-			
500-699			
400-499			
300-399	338		
135-299		206	
100-134			132
25-99			
0-24			

Normal Net-TAG = <100



# NAGALASE RESULTS

Patient: #8: Breast Cancer)

June 26, 2019

July 9, 2019

Royal		
6/26/19		
09:32 AM		
243409		
	<i>Unit</i>	<i>Ref. Range</i>
<b>1.55</b>	U	0.32 - 0.95

Royal		
7/9/19		
09:32 AM		
243410		
	<i>Unit</i>	<i>Ref. Range</i>
<b>1.49</b>	U	0.32 - 0.95

Normal Nagalase = <0.95 U

# PHOTON STUDY

## PRELIMINARY RESULTS

1. Decrease in S-TAG for 75% of patients with an average reduction of 89.5 ug/m;
2. Decrease in F-TAG for 38% of patients with an average reduction of 27.6 ug/m; and
3. Decrease in Net-TAG for 86% of patients with an average reduction of 62.9 ug/m.

**NOTE:** 100% positive lowering of AMAS levels for cancer patients who used oral Glycome for 2 or more months.

# PHOTON STUDY

**CONCLUSION:** The combination of PSB and PEMF appear to have a synergistic effect upon lowering the Anti-Malignin Antibody in Serum when elevated in patients with or without cancer.





### Journal Description

Proceedings of ACIM Research is a peer-reviewed medical journal and the official journal of the Academy of Comprehensive Integrative Medicine, dedicated to exploring the multifaceted and multi-disciplined world of medicine. Throughout history the pioneers of medicine have often initially been held to scorn and rejection. Over time, many of these pioneers have been proven right. What we do know is that the medicine of today will not be the medicine of tomorrow. Proc ACIM Research will endeavor to bring the medicine of tomorrow to today through the thoughtful words, practices, and research of today's most advanced thought leaders.

### Latest Articles



#### Case Report: Treatment of Lateral Epicondylitis with PEMF

Alfaro S.

Case Studies | 2019-11-12



#### A Closer Look at Lazy Eye Issues and Treatment with Exosomes: A Case Report

Miller R.

### Latest Issues



#### Volume 1: Issue 1



July 2019

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# CELLVITAL-PULS

## Treatments

Urinary/Fecal Incontinence  
Post-Prostatectomy Incontinence  
Pelvis Pain Syndrom  
Post-Partum Recovery  
Erectile Dysfunction (in men)/Libido Disorder (in women)  
Hip Pain and Osteoarthritis  
Cardiovascular Disorders

## Benefits

Must not undress  
Non-invasive  
Painless  
Results noticeable after a few sessions

## Warnings

Patients with pacemakers/implants  
Epileptics  
Women during pregnancy

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**Dr. Daniel F. Royal DO, CTP, JD**  
**Osteopathic Physician/Certified Tribal Practitioner**  
**Licensed Attorney/Tribal Attorney**

**2121 E. Flamingo Road, #112**  
**Las Vegas, NV 89119**

**(702) 562-1454 (MAIN)**  
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**Email: [droyal@royalmedicalclinic.com](mailto:droyal@royalmedicalclinic.com)**