Table 1 The mass interactive quine dose auto designer

Body weight (kg)	60		Loading dose	Loading days if	Maintenance	Post-protect	Durations	Load/Maint	Protective nadir (mcM)	5
C rise/tab (mcM)	0.386	Target levels	Computed	6	7	5.0	Give to stay on	6		
Half-life: T 1/2	22.4	Level in mcM	Tablets to load	Tablets used/d	Tablets/wk	Post-last-dose	peak doses for	Doses Ratio	Maintenance interval (d)	1
Well indications		1 Tab = $200 \text{ mg} = 155 \times 0.74$		2 tablets /6 h						
Protection		5.0	14	2.3	2.5	0	Until becomes immuno-	5.5	Protective peak (mcM)	5.2
Community helper		6.0	17	2.8	3.0	6	protected or the pandemic ends	5.5		
Exposed but well		7.0	20	3.3	3.5	11	2 wk	5.6	First dose (200 mg tablets)	13.4
Unwell indications										
Low Infection		8.0	23	4	4	15	2 wk	5.7	Maintain dose (tablets)	0.4
Medium infection		10.4	30	5	5	24	2 wk	5.8		
High infection		13.3	40	7	7	32	2 wk	6.0	PostCourse protected days	1.0

Assuming these doses for weights 40-60 kg: Each 600 mg or 3 tablets is replaced by: Child < 40 kg dose = 12 mg/kg or Adult > 60 kg idealised 3 tablets equivalent = kg/20 Tablets; Micro finger-prick testing (Volumetric Absorptive Micro-Sampling, VAMS) can be used to confirm or guide dosing; All red numbers are editable, so that user's can tailor to the needs and evolving data on effective inhibitory concentrations; Durations: For symptomatic infections, Quine (virostatic) should cover until immune system is able to inactivate the virus; C rise/tab (mcM): Drug concentration rise per tablet in micro-moles/L (mcM).