PUREPRO
RESTORATION

FOR MEDICAL PROFESSIONALS

Mold Remediation for CIRS, Mold Illness & Environmentally Sensitive Clients

Remediation with small-particle cleaning and independent third-party post-remediation verification — done to the standard mold-literate physicians expect for their patients.

Independent 3rd-Party PRV

Built for medically sensitive clients

Serving the Denver metro and Colorado Front Range

1 WHO WE WORK WITH

- Patients with CIRS or mycotoxin illness under active treatment
- Patients following Shoemaker Protocol, ISEAI-aligned approaches, functional or integrative medicine plans, and other clinician-directed treatment protocols
- Immunocompromised, chemically sensitive (MCS), and environmentally reactive individuals
- Patients whose prior remediation failed clearance testing or whose treatment stalled after re-occupancy
- Families making remediation-vs-relocation decisions who need an objective scope and cost picture before they act

2 WHY THIS MATTERS CLINICALLY

Mold-illness treatment can fail when the environment is not objectively verified before re-occupancy.

Standard remediation targets visible growth. The inflammatory load driving symptoms lives at the small-particle level — fragments, spores, and mycotoxins.
Dead mold is still inflammatory.

Independent verification before re-occupancy confirms the environment is no longer working against your treatment protocol.

Continued on reverse — our process, warranty, and referral path

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OUR PROCESS

1 Containment

Before anything else, the work area is sealed off from the rest of the home using poly barriers, negative air pressure, HEPA filtration, and — for larger jobs — decontamination chambers. Containment comes first because the moment tear-out begins, contamination becomes airborne.

2 Source Removal

Contaminated materials are physically removed per IICRC S520 principles — drywall, insulation, carpet, subfloor, and affected structural elements. Never fogging, ozone, or encapsulation as a substitute.

3 Sanding and Wire Brushing

Structural materials that remain in place — framing, joists, and subfloor — are mechanically abraded to physically remove the contaminated top layer. Cleaning alone cannot address surface contamination embedded in wood.

4 Small-Particle Cleaning

All remaining surfaces and salvageable contents are cleaned using HEPA vacuuming, damp-wipe sequences, and specific protocols targeting the fragments and mycotoxins that carry the inflammatory load.

5 Independent Third-Party Verification

Post-remediation testing — air sampling, surface sampling, moisture verification, and visual inspection — is performed by an IEP of the patient's choosing, never by us. Clearance criteria are agreed in writing before work begins.

OUR CLEARANCE WARRANTY

If our work does not pass the pre-agreed third-party PRV, we return and re-remediate at no additional cost until it does. In writing, on every job.

WHAT WE DON'T DO

- ✕ Fog-and-encapsulate remediation
- ✕ Ozone treatment as a substitute for source removal
- ✕ Our own clearance testing — verification is always independent and third-party
- ✕ Wipe-only substrate remediation — remaining wood surfaces require mechanical abrasion, not just cleaning

THE REFERRAL PATH FOR YOUR PATIENTS

1 Your patient contacts PurePro and books a Remediation Assessment.

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2 We review any existing IEP report and evaluate the full scope — structure, contents, and clearance criteria.

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3 We deliver a written remediation protocol — scope, containment plan, and clearance criteria — ready for your clinical review.

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4 The protocol belongs to the patient whether or not they choose to work with us.

Wade Annibal — Owner & Lead Remediator, PurePro Restoration
Specialized in remediation for mold-illness clients
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IICRC MRS | ACAC CMR | CIRSx MIR 101

Available for a 15-minute call or in-person visit to walk your team through our process. Same-day response to referrals.