

1. The following table defines and explains aspects of the protocol:

Name:

Category:

Description or Physical Indicator.

Visual assessment and possible Condition

Possible Cause

Correction suggested

Not Applicable: Stated when the section is not relevant.

Name: Listed in alphabetical order.

Category:

1. Anatomical description.
2. Initial Observation.
3. Protocol.
4. First Correction.
5. Evaluation of correction.
6. Second correction.
7. Second evaluation.
8. Protocol check.
9. Correctional tools.
10. Information sheet.
11. Assessment sheet.

Physical Indicator or Description:

1. The observed physical condition eg. strabismus, rough skin etc.
2. The Cardinal frequency that has malfunctioned
3. Description of the particular organ.
4. Name of condition.

Visual assessment, Possible Condition or Associated tools.

Description of the observations and the technique used to effect a correction.

Possible Cause and/or Instructions.

Description of the possible cause of condition and may include instructions for either the patient or the practitioner.

Correction

Suggested correction and technique.

Name: Amygdala Gland

Category: Anatomical.

Item Description

The amygdaloid body is a small ovoid complex of nuclei partly covered by the pyriform cortex; the body is within the tip of the temporal lobe, anterior to the inferior horn of the lateral ventricle of the brain; it is part of the limbic system and is classified as a part of the basal nuclei. It has olfactory connection and is reciprocally connected to the limbic cortex, and projects fibres to the hippocampus, the septum, the thalamus, and especially to the hypothalamus.

Possible Condition

The patient has an unrealistic attitude towards a particular circumstance.

Possible Cause

An experienced trauma at a particular moment in the past.

Correction

1. Identify the circumstance.
 2. Determine the frequency to be used to correct the negative programming. (often the Spleen meridian is used to correct this programming.)
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Name Atlas

Category Anatomical.

Description

First vertebra of the spine described as C1 (Cervical one)

Visual assessment and Condition.

1. An observation of the patient’s head position. The relationship of the occiput to the atlas can be observed from a frontal position, laterally and posteriorly. It is a generally accepted observation that the statement be made that the atlas has moved in relation to the static position of the occiput. In fact it is the occiput whose position alters in relation to the atlas, however, we will maintain tradition and assume that the occiput is the static body.
2. The atlas can be observed to be to the patient’s right or left, anterior or posterior of an imaginary body centre line. The atlas can be rotated also.
3. Identify for the patient the misalignment of the Atlas by using a movie camera and by measuring approximately the lateral movement of the atlas with the index fingers on the transverse processes of the Atlas
4. Test the degree to which the Atlas has translated/rotated using kinesiological questioning, and therefore identifying the severity of the spinal cord restriction.

The Atlas is translated:- to the right by 1mm, 5mm, 10mm, 15mm etc
to the left by “ “ “ “ “
anteriorly by “ “ “ “ “
posteriorly by “ “ “ “ “

The Atlas is rotated to the right through 10, 20, 30, degrees etc.

The Atlas is rotated to the left through 10, 20, 30, degrees etc.

Trace when the Atlas was in its correct position:	5 minutes before birth
Then identify the moment of change.	5 minutes after birth
	1 month from birth etc

5. The patient may experience severe or mild headaches (possible migraine). Check for tyramine or other chemical intolerance, which may aggravate the severity of the headache e.g. alcohol, drugs, odours or other intolerances. Muscle tension in shoulder, neck and head area may cause the atlas to misalign creating blockage to the blood flow and resulting in headaches.

Possible Cause

- Emotional shock
- Forced physical dislocation
- Tension, stress
- Chemicals

Correction

- Correct through the main correction
- Correct through a 39'er series associated with the spine and sacrum
- Another specific correction that may be relevant e.g. one of the 3 nervous systems affecting the spine through negative feedback.
- Many bodily conditions affect the relation of the atlas to the occiput and therefore the total structure of the spine.

Name Auric Fields

Category Protocol.

Description

The seven auric fields are the radio-radar tele-visual transmitter receivers, which are the protectors of the human body. Six auric fields form at the moment of first breath from the Kundalini. Each field has a specific purpose in identifying danger from substances to physical potential danger to the identification of thought patterns in other human beings and animals. Meridian malfunctions can be transported to other people and affect them through auric fields 6 and 4 primarily.

See Auric Fields Colour diagram.

Possible Conditions: Anxiety in all its forms

Auric field 1

Kundalini maybe at low function, maybe reversed, major lowering of life force.

Auric field 2

Direction of electrical field on skin and on skin of bone facia maybe reversed, this could apply to both or just one of the above, check individually. The correct skin direction should be from head to toe.

Correct individually .

Effects; extreme sensitivity and dislike of being touched and stroked. The cause is shock, most commonly incorrect birth procedure, breach birth, caesarean, electric shock.

To correct use auric field bell 2 (the cricket) Beware that sometimes a huge somatic emotional release may occur.

Auric field 3

Identification of substances deleterious to human body.

To correct use 3rd auric field, the conch.

Auric field 4

Personal space.

To correct use 4th auric field bell.

Auric field 5

Identification of any form of danger to individual, physical, mechanical, human or animal.

To correct use auric field 5, the conch.

Auric field 6

Global.

Communication with family members to 5 generations and to any other individual by specifically endeavouring to do so.

To correct use 6th auric field, the conch.

Auric field 7

Infinity.

Communication with infinity, cosmos, deity.

To correct use 7th auric field horns, or gongs of many cultures.

Possible Cause

- Birth trauma.
 - Emotional shock
 - Toxic shock
 - Electric shock
 - Physical shock
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Correction

- Correct through main correction
- Correct through an Auric Field frequency.
- Patient management may be required due to possible severe emotional release. This may occur if the 2nd Auric Field requires correction.
- If any auric field is malfunctioning, its correction will with intent correct the auric fields of a lower number than itself plus charkas and meridians. E.g. if the seventh auric field is malfunctioning its correction will correct itself, 6 other auric fields, all meridians and charkas. Another example: If all auric fields are functioning correctly except the Kundalini, the correction of the Kundalini will correct itself, its polarity direction and any chakras or meridians that may be malfunctioning.
- The chakras have another dimension 100% down to 0% of emotional function. These can be corrected at the same time as the other corrections with intent.

Name - Behavioural Problems

Category: - Initial Observations and Protocol.

Description

Most aberrant behavioural problems are caused by brain pressure from cranial bone misalignments compounded by chemical imbalances, food and drink imbalances, organ malfunctions e.g. glands low heart function, low kidney function. Other causes are brain damage glandular and mental programming.

The results of brain pressure of cranial plates can be described in broad term as follows:

Right temporal misalignment always causes depression to a greater or lesser extent, often causing the following:

Alcohol and drug dependence or addiction. Gambling fixation. Wild sexuality. Workaholic tendencies. Control freak behaviour. Inability to visualize the future leading to constant directional changes and inability to see reason for endeavour or reason for living.

In children depression and clinginess to mother, inability to conceive of future concepts e.g. mother leaving therefore this is perceived as permanent and a tantrum follows.

- Depression (right temporal)
- Pressure on brain from cranial plates causing incorrect brain function.(primarily sphenoid temporal occipital and frontal
- Inability to perceive future or to reason consequences from circumstances (right temporal)
- Difficulty in comprehending reason (right temporal)
- Difficulties in seeing consequences of own actions.(right temporal)
- Specific right temporal misalignment and sphenoid bone tilted high left. This combination of the cranial plate misalignments may cause severe depression possibly leading to suicidal tendencies.
- Restlessness, particularly with children who cannot sit in one place for any period of time. See also Sacro-occipital pump malfunction, which can create need for adrenalin to flow to compensate the lack of blood sugar and insulin reaching the brain cells.
- A sphenoid tilt can be identified by palpating a lateral bone ridge on skull on a line between brow and top of ear. (Superior pterion suture of sphenoid bone overlapping frontal and parietal bones.)
- Cloudy thought patterns
- Rotational movement of eye restricted at outer limits usually indicates sphenoid bone fixation high on opposite side. Restricted movements of both eyes at outer limits indicate a sphenoid fixation upwards on both sides. Restricted upper movement of eyes indicates a frontal bone depressed inferiorly.

Possible Condition to be identified

- Right temporal plate misaligned – behavioural problems.
- Right temporal plate misaligned and Sphenoid bone fixated. Behavioural problems.
- Right temporal plate misaligned and Sphenoid bone tilted high left. Severe depression possible suicidal tendencies
- Left temporal plate misaligned. Learning difficulties, sphenoid high right added learning difficulties especially maths. Sphenoid high left, added depression leading to suicidal tendencies, possible behavioural problems such as, control freak, drug addiction, alcohol, gambling, wild sexuality, workaholics, inability to be reasoned with.
- Hypoactivity, cause adrenalin flow.
- Sacro-occipital pump malfunction (see Sacro-occipital pump).
- Thyroid and or para-thyroid gland malfunction
- Meridian malfunction emanating from somebody else or deceased person
- Substance intolerance
- Check for amygdala to be reprogrammed.
- Check left/right brain for mental reflux.
- Check for anxiety state requiring correction.
- Check for a phobia.

Possible Cause

- Toxin intake; food intolerances, vaccination damage.
- Emotional shock.
- Toxic shock.
- Meridian malfunction
- Meridian malfunction from somebody.
- Residual meridian malfunction.
- Adrenalin rush (see Thyroid and or para-thyroid glands malfunction or see Sacro-occipital pump malfunction)

Correction

Correction of cranial misalignments will be effected by identification together with the main correction, from whatever source is necessary.

- Correct residual meridian.
- Correct meridian malfunction from some other person.
- Correct meridian malfunction or main general correction
- Correction to spinal subluxation.
- Check for Substance intolerance.
- Correct amygdala (usually spleen meridian).
- Correct mental reflux (usually spleen meridian).
- Correct anxiety state (usually spleen meridian)
- Correct phobia (usually kidney meridian)

Name Biological Time Clock and cell alignment to hemisphere.

Category Protocol

Description

The body's biological time clock regulates the body's function to the 24 hour day/night cycle and to seasonal cycles. This can be affected by rapid travel to another time zone. (jet lag)
Cells of the body are attuned to the hemisphere i.e. Northern, Tropical or Southern. A change of hemisphere by fast travels, airplane or slower, ship or over land will result in a need to change cell attunement to the new hemisphere. Sometimes people can be in another hemisphere for many decades without the cells changing (home is where the heart is).

Visual assessment and Possible Condition

- Jet lag.
 - Tiredness
 - Fatigue
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Possible Cause

Fast travel to another time zone generally by aeroplane.

Correction

- To correct jet lag play the relevant two meridians as indicated on the traveller's disc as per instructions to align the body's clock to the new longitude (time zone).
 - To align the cells to the new hemisphere lay the bladder meridian number fifteen with intent.
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Name: Blood Sugar Imbalance Also see Thyroid and para thyroid p 51-52

Category: Observation and Protocol

Description.

Blood Sugar imbalance occurs when the blood sugar levels within the blood stream become either too high or too low for the body's cells to maintain normal metabolic function.

Blood sugar is, very basically, energy as a result of the digestion process (carbohydrates and fats) required by the cells within the blood stream.

In a healthy person the endocrine and nervous systems carefully controls the balance of blood sugar in a highly complex manner. They alter the hormones secreted into the blood stream releasing the specific amount of blood sugar required by the cells of the body within seconds.

If the endocrine system is not functioning effectively then blood sugar levels become imbalanced causing a range of symptoms of which one of the most sever is Diabetes.

Physical Indicators.

Please note not all these indicators may be observed.

- Red Face and red flushes up neck
 - thirst
 - Tight skin in women
 - Excessive sweet tooth
 - After intake of sugar a short boost of energy followed by abnormal bouts of tiredness or lethargy
 - Over weight,
 - Belly button muscle test for adrenaline is weak
 - 12th Rib on LHS is tender : May indicate pancreas is not functioning correctly.
 - Parathyroid may be slightly swollen and muscle test is weak
 - C3,C4,C5 muscle test weak or are misaligned.
Note If C3 : there may be little evidence of parathyroid swelling
If C4 :Potentially more thyroid swelling than parathyroid
C5 : most common
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Possible Causes

- Dietary inadequacies
 - Emotional stressors
 - Meridian failure ,especially Kidney as well as lesser effect from lung, spleen and gallbladder meridian
 - Potentially C3-C5 subluxation
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Possible Conditions

- Over weight,/underweight.
- Lethargy tiredness
- Severe symptoms: Diabetes.1 and 2 **MUST REFER back to Clients own Medical Practitioner**

Correction suggested

- Correct meridian failure if required through main correction procedure
- Muscle test for need for lemon
How much and how often.
(some cases may require sugar esp if C3 is subluxated or potentially clients with speech impediments ie lisp or stutter)
- If necessary dissolve stale thyroxin through quad 4

Notes :

Lemon Juice is a simple trigger to aid in balancing the blood sugar levels of the body.

When placed on the back of or under the tongue lemon switches on the hypothalamus to instantly address the body's blood sugar needs.

If C5 is misaligned the lemon could taste sweet as the stimulus that produces blood sugar is immediate.

Name Body check points

Category Protocol

Description

- Body points, together with muscle checking used to identify the presence of a bacterial, viral or Rickettsial infection or of parasites, toxins, or other substances in the body.
- Points on the body that can be used to identify possible organ problems.
- Point on the body that can identify exposure to drugs – medically prescribed or self administered.

Visual assignment

Use patients own hand to identify position and then muscle check.

Negative MC indicates a presence or a problem.

Key:

DV = Deep seated Virus.

B = Bacterial point – in hollow of shoulder and collarbone.

R = Rickettsial point – in episternal notch (hollow between collarbones).

AV = Avian Virus derived from Birds.

M = Mould

H = Heart – at the tip of Zyphoid process (end of the sternum).

D = Drug point – point of lowest rib in this position.

A = Adrenalin point – fingers 20 mm on either Side of the navel.

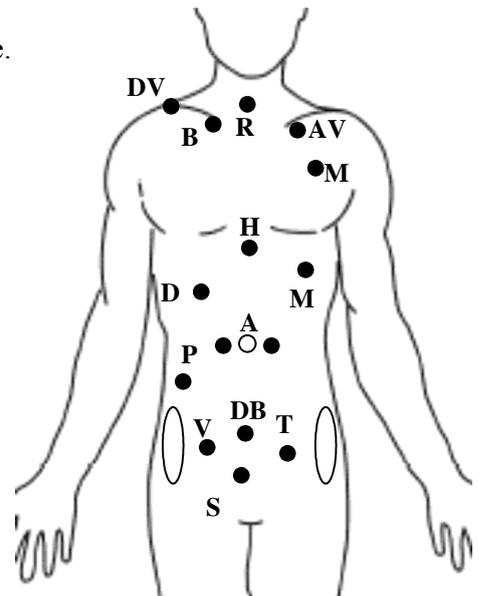
P = Intestinal Parasite Test point – at right side of body above Iliac crest.

V = Viral point – one hand span from hip; direction of Pressure: in, gently.

DB = Deep seated Bacterium.

T = Toxic point – one hand span from hip; direction of Pressure: in, gently.

S = Systemic Parasite – position two finger thicknesses above middle of right groin just above pubic bone.



Teeth

- check left/right maxilla with intent, finger on gum line for specific meridian malfunction in area affecting teeth.
 - for infection check with intent on gum line at root of tooth.

Name Cell Malfunction

Category Protocol

Description and Physical Indicator

- Cell malfunction is caused primarily by an inadequate supply of life force energy to cells during their divisional process causing them to malfunction. Cells in their normal function divide instigating the change of the DNA through the seven stages of mitosis to create two new cells of DNA with a primitive cytoplasm (called a stem cell). To fully develop as a new cell the two DNA cells require sufficient nutrients to build the cytoplasm with the organelles that designate the cell as a duplicate of the original mother cell. If insufficient life force is present there is not enough energy to allow the DNA to gather the nutrients to build the complete cell. The cells remain in their undifferentiated state. The cells then duplicate again as stem cells without achieving the full cell development. The multiplication of these undifferentiated cells creates tissues that are called tumours.
- Cell malfunction often occurs when the Chakras have been malfunctioning for a long period of time, which can be years or that the charkas have been entering or minor charkas existing at incorrect points. Plus many other circumstances.

Present state of investigation indicates that there are six causes of cell malfunction.

1. Low life force. Chakras and auric fields must be functioning emotionally at 100%.
2. Chakras or minor Chakras entering or existing in incorrect positions.
3. Insufficient nutrient supply.
4. Damage to cell e.g. toxicity, sunlight, and smoking, intestinal damage through incorrect intake of substances.
5. Low will to live, including subconscious sabotage.
6. The body has been affected by some other person.

Visual assessment

- Patient symptoms: pallor, anxiety rings in eyes.
- Depressed and angry attitude.
- Chakra plasma not evident at correct entry points.
- Kinesiological investigation.

Possible Cause

- Emotional shock
- Physical shock
- Toxic shock
- Incorrect nutrition
- Low life force function caused by the above.
- Possible conscious or subconscious sabotage.

Correction

- Correction of body frequencies through main correction. Usually Arron's Breast Plate for best results.
 - Use Frequency book and Quads.
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Name: Cerebrospinal Fluid: Reflux / Massing / Crystallisation of CSF fluid toxins.

Category: Anatomical

Description or Physical Indicator.

The Cerebrospinal Fluid (CSF) circulates through the space under the Arachnoid mater meningeal membrane of the skull and is pumped by the alternating Sacro-Occipital pump around the brain and down the spinal column supplying nutrients and removing toxins from the brain tissue. The CSF is created from lymph by the choroid process in the four ventricles of the brain. The CSF enters the subarachnoid space from the fourth ventricle and at the base of the spine via the spinal canal. After fulfilling the nutrient supply and toxin removal function the fluid returns to the lymph system via the Arachnoid granulations in the skull sinuses. Also through foramina in the ethmoid bone to the nasal sinus and through the spinal nerve sheaths travelling down the nerve sheaths of the torso, limbs and neck supplying nutrients and clearing toxins to returning to the lymph system in the limbs and torso. The stagnation in the system of removal of fluid from the brain can be visually observed by puffiness in the tissue of the forehead, nose area and sometimes beside the eyes.

If the Sacro-occipital pump is not functioning correctly, movement of the CSF may reduce frequency or stop. Over long periods of stagnation the fluid can form pockets of toxins which can gel into crystallisation, which causes many conditions not least of which is motor neurone disease, multiple sclerosis, a contributing cause to Parkinsons disease, partial paralysis or nerve malfunction, mental seizures and many other condition including skin conditions.

Possible Condition and Visual Assessment.

- Reflux in the CSF is caused by shock most often, but not exclusively, by vaccine shock
 - The same shock can often cause the Dura Mater through which the CSF has to pass to become impermeable thus blocking the toxins within the brain and spinal column. Evidence of this condition is a puffy forehead also another indicator is hyper-activity as blocked CSF prevents the absorption of blood sugar and insulin into the brain cells, the body's only recourse is to pump adrenalin, which can pass the blood/brain barrier and enter into the brain cells rapidly The problem is that adrenalin causes wild behaviour and sleeplessness.
 - The crystallisation of toxins within the CSF is often due to reflux, the impermeability of the dura mater and malfunction of the Sacro-Occipital pump.
 - Muscle spasm.
 - Memory problems.
 - Seizures
 - Immobility and nervous ticks
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Possible Cause

- Vaccine shock
 - Physical shock
 - Chemical shock
 - Emotional shock
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Correction

- Determine correction for Sacro-occipital pump function.
 - Correct reflux in the CSF. Total or partial, if partial trace carefully and correct.
 - Correct impermeability of dura mater, usually through Gall Bladder meridian (Rage)
 - Correct Crystallisation by using relevant Quads.
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Name Chakras

Category Protocol

Physical Indicator

- There are seven Chakras with twelve entry points. Chakras generate life force which creates life in animals and plants. In humans the Chakras create the energy which enters the body at 12 specific points, charging the Kundalini with energy which in turn energised the meridians which in turn energises the organs which in turn energises the cells. The Kundalini also energises the Auric fields, which must also be connected through to the cells. The energy created by Chakras is a harmonic of white light and is created from the ether surrounding a creature and is returned to the ether after function via the minor charkas. The Chakra function may be observed visually by those skilled in the art and identified as functioning correctly or not. Both Charkras and minor Charkras can also be identified by sense of touch.
- Charkas frequency has been identified at 77.6788 Mz when functioning correctly and any lower frequency than this is malfunction, which can be Kinesiologically, identified.
- The Charkas have another function and can be kinesiologically measured at 100% emotional content or less.
- Chakra entry points can fail to specific positions as can the minor Chakras.

View Colour Chakra chart in Attachments.

Possible Condition

- Low vital energy caused by incorrect frequencies.
- Incorrect entry points.
- Auric Field and Meridian malfunction
- A sense of personal anxiety.
- Organ malfunction
- Cell malfunction

Possible Cause

- Emotional shock
- Toxic shock
- Physical shock
- Vaccine shock

Correction

- Once identified, correct through main correction
- Correct through a Chakra frequency.
- Bowls/Bells in tantric order

Bowls/Bells in Tantric Order:

Bass – Crown – Reproduction – Brow – Hara – Thyroid – Heart.

Name Coordinative development between Left/Right brain

Category Protocol

Description

The Left and Right conscious brains function as two separate entities, each having its own specific and different functions. The brains are connected by neurones through the Corpus Collosum. After the age of four months to seven months there is a polarity change between the two brains to allow them to work as one unit and communicate through the Corpus Collosum. The development of neurones through the Corpus Collosum is complete if everything is functioning in a normal fashion by the age of six years. The co-ordination between the two brains can be inhibited by the polarity change not occurring at the correct time or by the polarity being changed back by shock. This affect to the polarity can be created by the cranial plates becoming misaligned through physical or emotional shock. These specific bone structures which cause what is known as homolateral function (incorrect or opposite polarity) are sphenoid, occiput and one or both temporal bones. Polarity change can be created also by electrical shock and can occur separately from cranial bone misalignment but it is not usual. The effect of Left/Right brain lack of co-ordinative process can be observed in eye function. The development of the neurone connection between the brains is inhibited when homolateral state occurs but can be re-grown using Dawson Program quads.

Coordinative function is that which allows the Right and Left brains to evaluate information and combine the ideas to maintain balance in thought and movement.

Visual assessment

- Eye function - divergent or convergent.
 - Poor physical coordination.
 - Limited ability to reason in certain areas (is very variable).
 - Inability to display a balanced thought pattern.
 - Anxiety.
 - Difficulty handling the learning process.
 - Reading difficulties.
 - Hearing difficulties.
 - Writing difficulties.
 - Poor musical skills.
 - Speech difficulties (varying from no speech development in young children to minor speech impediments).
 - Some difficulty with walking and running movements may be observed.
 - Ball skills may be poor.
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Possible Cause

- Emotional shock.
 - Toxic shock.
 - Vaccine shock.
 - Birth trauma.
 - Physical trauma.
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Correction

Once identified correct through main correction

Name Duramata Permeability - See Cerebrospinal Fluid

Name - Eating Problems :Overweight, Underweight, Bulimia, Anorexia.

Category - Initial Observation and Protocol

Description

Over weight can be a direct relationship between skull plate sutures being fixated (immovable) and the digestive system. Most often the sagittal suture is fixated although the coronal and lambdoid sutures may cause the same problem of permanent hydrochloric acid flow into the stomach cavity.

Subluxation to thoracic 9 affecting T7 and T8 and sometimes subluxations to T7 and T8 themselves can cause impingement on nerve structure affecting the function of the acid pockets in the stomach lining, creating a constant flow of hydrochloric acid into the stomach cavity, which is the problem.

When breast feeding a baby, the mother cups the baby's skull in such a manner that pressure is applied to the skull plates. These plates are pressed together forcing the closure of a number of cranial sutures. This pressure will cause messages sent via the dendrones located within the sutures to the central nervous system advising the baby's subconscious mind to prepare the body for food intake. This message also generates saliva in the mouth; and releases acid from pockets in the stomach lining into the stomach cavity in preparation for the alkaline food, which is rendered Ph neutral by stomach acid.

This same effect will occur to a person whose cranial sutures are locked together permanently by shock or other accident. Messages are sent via the dendrones to the person subconscious advising them that food is coming on a permanent basis (24 hours a day). The body's reaction here is to continue to supply acid into the stomach cavity causing damage to the stomach lining, duodenum, small intestine, large intestine and encouraging the growth of intestinal parasites which enjoy an acid environment. Hunger pangs occur, as the body requires food to absorb the acid and limit damage. The physical result of this is one of three conditions - over weight, bulimia or anorexia of which over weight is by far the healthiest although it may not appear to be so. The correction of all three conditions is occasioned by correcting the cranial suture fixations allowing the correct movement of cranial plates and removing incorrect messages to the body's digestive system. Sometimes spinal corrections also need to be undertaken to correct subluxations to T9, T8 and T7.

That the same root cause is responsible for a condition of overweight, bulimia and anorexia is puzzling. It would appear that the body uses food to sob up the acid to limit damage as one response to the physical subluxations causing the acid flow. Another response is a conscious response to avoid overweight by eating food to sob up the acid and then emptying the stomach by inducing vomiting (bulimia). The third response is to mentally switch off all need for food thereby also switching off the production of hydrochloric acid in the pockets of the stomach lining (anorexia). Anorexia is not an aberrant mental, emotional or behavioural state. It's a response to physical cranial bone fixation and spinal subluxations.

Physical Identification

- Obvious over weight or underweight.
 - Physical appearance of nutritional problems
 - Bulimic or anorexia behaviour.
 - Identify possible fixation of skull plates, by gently placing your hand across the sagittal suture of the patient, a warm to hot feeling will be felt along the midline of the head at the suture line rather than be dispersed evenly over the head.
 - Low biodynamic frequency and organic function of stomach and small intestine.
 - Parasitic infestation (these parasites thrive in an acidic environment).
 - Possible T7 – T9 subluxation.
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Possible Cause

- Vaccination
 - Emotional shock, anxiety, self sabotage, adoption of negative thought patterns regarding weight
 - Toxic shock.
 - Physical shock
 - Potentially associated with reversal of 2nd Auric field
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Correction

- Correction of cranial plate fixation through a cardinal frequency or as part of general correction.
 - Correct spinal structure an all organs – check feedback series.
 - Discussion on food intake and nutritional value.
 - Discuss the need for repair of damaged intestines.
 - Check for substance intolerance.
 - Correction of parasitic infestation with colour frequencies and quads. Sometimes chemicals are required specifically to medicate domestic pets and other members of the family to inhibit parasitic infestation in the environment of the patient
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Name Fronto-nasal Point (Nasion) The articulation of the frontal and nasal bones.

Category Anatomical

Physical Indicator

- Bladder problems, frequency of urination or blockage through bladder sphincter
 - Bowel problems, tightness or looseness of inner or outer bowel sphincters.
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Visual assessment

Not applicable

Possible Cause

- Emotional shock.
 - Physical shock.
 - Toxic shock.
 - Chemical shock.
 - Vaccination
 - Bedwetting is a common result of fronto-nasal fixation. Often compounded by problems with L5 pelvic nerve and sometimes fear - often of father and sometimes fear of sexual abuse.
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Correction

- Once identified correct through main correction
 - Correct through a cardinal frequency if separately identified after main correction.
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Name Genes Attuned to their Correct Hemisphere - See Biological Time Clock

Name - Heart : Low life force

Category: - Protocol

Description

Low life force of Heart

Coronary episodes can occur around 12 out of 77.6MHz or 15% of optimal heart life force function

Life force can be further lowered if person enters an area with a geographical residual

Physical Indicator and Visual assessment:

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Please note these are symptoms that precede those of acute coronary occlusion or other serious heart diseases:

- Double swelling (puffiness under the eyes)
- Creases through earlobes
- Creases in middle of tongue
- Reddish colour to eyelids
- Zygomatic process can be sore /test weak
- Pale face
- Lower back pain especially in men
- Exhaustion /Chronic fatigue (often in women)
- Viral symptoms ie: glandular fever , mumps

Kinesiology Assessment indicators

- T1 (between shoulder blades) subluxation.
 - With full assessment protocol note any date of heart incidents (often 3rd incident can be serious)
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Please NOTE :

If your client presents with chest pain, sudden shortness of breath and pain down the left arm call your emergency ambulance number immediately

Possible Cause

- Poor diet and lack of exercise
 - Meridian malfunction esp kidney and or lung and to lesser extent spleen, heart and gall bladder meridians
 - 1st Auric field malfunction
 - Exacerbation from geographic residual
-

Correction

Corrections will generally occur through main correction

Burn out virus with quad 5

Refer client to own Medical practitioner for further follow up if symptoms present seriously

Name - Initial Observations

Category: - Protocol

Description

Initial visual observation of an individual or individuals within family group.

Visual assessment:

- Individual's general appearance
 - Clothes worn (neat tidy or scruffy and perhaps dirty)
 - Jewellery worn (poor quality mismatched or expensive, etc.). Observe and note religious significance of jewellery and/or clothes. Observe significance of rings (wedding, engagement having been moved etc.). Note all connotations.
 - General demeanour
 - Family 'pecking' order
 - Weight - over or under
 - Head tilt
 - Puffiness on forehead
 - Strabismus
 - Redness in eyes - note where
 - Nystagmus,
 - Facial bone misalignment
 - Swelling (bags) under eyes - note type
 - Speech - note impediment, fast, slow, anxious etc.
 - Odour on breath - note type
 - Teeth - status and shape of palate
 - Lateral and AP position of mandible
 - Skin texture
 - Colour of skin
 - Swollen para-thyroid or thyroid glands
 - Shoulder height and rotation
 - Hip rotation
 - Knee position
 - Stance - pigeon toe or Charlie Chaplain stance.
 - Observe motion when walking - leg movement etc.
 - Note lines and creases and their equality on the face (left/right side)
 - Weight, height and growth for age, sex and pubescent development
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Possible Cause

- Observation gives an observer an indication of the patient's demeanour, business, family, professional status, class background, employment, employment status, religion, marriage status etc.
- Observations of voice, speech, gesture, accent and use of vocabulary indicate the educational level of the person and what could be expected of that person.
- Speech can give strong leads to possible mental problems affecting hearing, sight, vertebra alignment, etc.
- Misalignments of body structures, swellings or bodily odours can indicate health conditions due to cranial plate/spine misalignment/disease, digestive problems, etc.

- Skin hue and texture can indicate many things including possible substance intolerance.

Correction

The conditions that require correction will be undertaken as part of the general corrective procedure.

Name Lacrimal bones

Category Anatomical

Physical Indicator

- Tears or weeping eyes.
-

Visual description

The tear duct vent passes through foramina created between the lacrimal and maxilla bones. A subluxation to the lacrimal bone will cause a blockage to the tear duct creating the condition.

Possible Cause

- Emotional shock.
 - Lacrimal bone misaligned with maxilla – some shock
-

Correction

- Once identified correct through main correction
 - Correct through a Cardinal frequency (generally spleen meridian).
-

Name - Learning Difficulties - See also Behavioural Problems

Category - Initial Observation and Protocol

Description

- Pressure on brain causing restriction to brain function.
 - Difficulty with short term memory
 - Difficulty learning new subject or using instructions.
 - Strabismus or lazy eye.
 - Cloudy thought patterns.
 - Restlessness, inability to sit in one place for any period of time.
 - Difficulties with reading, writing, mathematics, concepts, short attention span, clumsiness, general lack of coordination, inability to catch balls, behavioural problems, odd bodily movements when walking, running, hearing difficulties.
-

Possible Condition to be identified

- Left temporal plate misaligned.
 - Left temporal and occiput plates misaligned.
 - Homolateral eye function
 - Sacro-occipital pump malfunction (see Sacro-occipital pump).
 - Thyroid and / or para-thyroid gland malfunction
-

Possible Cause

- Vaccination
 - Emotional shock.
 - Toxic shock.
 - Meridian malfunction
 - Meridian malfunction from some other person
 - Residual meridian malfunction.
 - Adrenalin rush (see Thyroid and or para-thyroid gland malfunction, also see cerebrospinal fluid)
-

Correction

- Correct residual meridian.
 - Correct meridian malfunction from some other person.
 - Correct meridian malfunction.
 - Correction to cranial and spinal subluxations.
-

Name Magic button

Category Protocol

Description

The words “magic button” are used in the Dawson Programme to describe a specific Cardinal frequency correction, which may be used to correct one and many other frequencies in the one correction.

Cardinal Frequency Protocol

Any multiple frequency correction can be achieved by using a frequency of higher order.

The Auric fields are the highest order from 7th auric field to the 1st Auric field (Kundalini) in that order.

The Chakras are the next highest order from Base Chakra to Crown Chakra in that order.

The Meridians are the third cardinal frequency order but the priority order for the meridians is in Tantric order, and this priority may not mean that the Kidney meridian being the first of the Tantric order is necessarily the highest order for correction. (for Tantric order see Meridians)

Possible Cause

- Not applicable
-

Correction

A magic button correction means for example if all 28 cardinal frequencies are malfunctioning, a full correction can be achieved using the 7th Auric field. If Auric fields are malfunctioning a full correction can generally be effected by using the frequency of the highest Auric field that has failed and so on down to the Kundalini. After the Kundalini the Base Chakra will correct all Chakra (major and minor) and all Meridans. If all Meridans are malfunctioning but no Chakras or Auric fields, then the Base Chakra will generally effect a full correction. The biggest magic button of all is Aaron’s Breastplate.

Name Malfunctioning Meridian

Category Protocol

Description

- Meridian malfunction within self.
 - External, Meridian malfunction emanating from another person.
 - External, Residual Meridian emanating from a deceased person.
 - External, phobia, thought pattern or emotion from another person affecting self.
-

Possible Condition

- See Meridian affirmation sheet. Identifying the particular emotion involved will identify the meridian and thereby allowing the root cause to be determined. Identify time of malfunction and this will confirm the intent and therefore secure a strong correction when the frequency is applied.
 - If meridian malfunction emanates from a person still alive, trace and correct in that person.
 - If the meridian malfunction emanates from a deceased person, identify who, when and where if possible. Usually a family member, sometimes as below.
 - Residual meridian locked in to a particular room or house or building frequented by the patient.
 - Residual meridian locked into 10.5 km radius site of death.
-

Possible Cause

For meridian malfunctions within the person:

- Emotional shock
- Toxic shock
- Physical shock from some other person

For meridian malfunctions emanating from another live person identify the cause in that person and correct as below.

For meridian malfunctions emanating from deceased individuals, identify and correct as below.

Correction

- Personal malfunction corrected separately within person.
 - External influences corrected separately and will be the first correction to do but not the main correction.
 - A residual meridian correction will have to be corrected at the site.
 - **To correct the residual meridian:** Identify the deceased person, measure and identify the misalignment in the body of the patient. In the majority of situations it will be a Lung meridian malfunction.
 - ❖ If the residual meridian malfunction in the place of residence or workplace show the measurement change by measuring the patient inside the building and then outside the building. This will be proof to the patient of the effect of the problem from the residual Meridian.
 - ❖ Use the large cymbals or no. 48 (old) 49 (new) on the Practitioners Disc to clear the residual meridian malfunction whether within the building or emanating from outside the building.
 - ❖ Repeat (3times)....."I am clearing the residual meridian emanating from a deceased person residing in this 'place'...(use meridian affirmation, for this example we will use the lung meridian) ...the deceased person is humble ..is tolerant...is modest" have the patient
-

repeat this 3 times with intent to clear the residual meridian.....then clash the cymbals three times.

Measure the patient's body and identify that the residual meridian has been neutralised and that the deceased persons malfunctioning meridian is no longer affecting the patient.

Name Memory of a Bacteria or Virus or Thought Form or Phobia or Emotion

Category Protocol

Description

Body cells can hold memory, sometimes causing the original symptoms to appear in the body although the original cause is not present. Some people can take the physical illness from another person and exhibit the symptoms when the cause is actually within another person.

Visual assessment or Possible Condition

Sometimes the symptoms of a disease cannot be traced. Look elsewhere in another person.

Possible Cause

Memory of illness in self or taken from another person.

Correction

Identify clearly and carefully and clear through relevant meridian or meridians.

Name Meridians (also see malfunctioning meridians)

Category Protocol

Description or Physical Indicator

There are 14 Meridians 7 are controlled by the right (feminine) brain on the left side of the physical body, 7 are controlled by the left (masculine) brain and are the right side of the physical body. When the frequency of a meridian fails, the meridian contracts and the subconscious of the individual will use muscle and bone structure to realign the physical structure exactly to the position of the electrical structure, which has been altered by the meridian malfunction. All misalignments of the body are as a result of meridian and shape field malfunction undertaken by the subconscious to maintain integrity of physical structure and electrical form.

Each meridian represents a controlling emotion that can alter the physical shape of the body when shock causes a malfunction to occur. The physical alteration of the body shape occurs due to the subconscious adjusting the skeletal structure with muscles.

Attached to each meridian are shape fields. These fields can suffer malfunction and alter shape thus affection the shape of the body and organs. The shape fields are controlled by the individual DNA of the person involved. This controlling factor (shape fields) builds cells, organs, bones in the exact position that is designated for them by the DNA and the genes on the meridian structure (see Shape Fields). For example a heart will always be formed in the correct position near the middle of the chest cavity on the left hand side with a space created by an altered shape to the left lung to allow the heart space to grow.

One circumstance causing physical deformation is the effect of malfunctioning meridians from other members of the family often affecting family members and can affect a growing foetus in utero. External meridian malfunctions may result in the malformation of the electrical fields of the foetus and depending on the number may result in physical malformation during development. Another way that physical malformation can occur is through the intake of toxins by the mother or father before conception and the mother during gestation.

Visual assessment

- With the patient in a standing position visually identify a high shoulder.
- With the patient in a standing position visually identify a head tilted to the high shoulder.
- With the patient in a standing position visually identify a rotated hip.
- With the patient in a standing position visually identify an incorrect stance or walk.
- With patient supine measure leg length at heels - note longer leg, verify that no true anatomical differentiation occurs in tibia or femur of both legs, thereby confirming pelvic tilt.
- With patient supine measure arm length - note longer arm, verify no anatomical variation in arm bone lengths.
- Check kinesiologically. Identify malfunctioning meridians and correct either individually or as part of a major correction, whichever action is required.

Possible Cause

- Vaccination
- Emotional shock
- Toxic shock
- Physical shock

Correction

- Once identified correct through main correction
- Correct through a Meridian frequency.

Meridians in Tantric order:

**Kidney – Governing – Large Intestine – Lung – Gall Bladder – Spleen – Liver –
Bladder – Conception – Small Intestine – Circulation Sex - Thyroid - Heart –
Stomach**

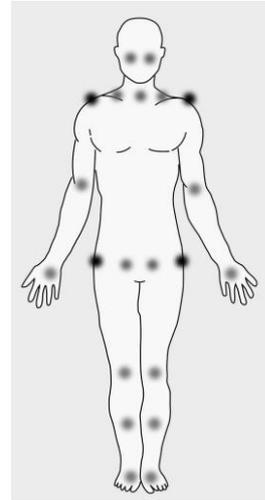
Name Minor Chakras

Category Protocol

Physical Indicator

- Energy originally created by the cardinal chakras from the ether exiting from the physical body and creating the circuit back to the ether. A similar circumstance to the an electrical circuit requiring earthing.

28 Minor Chakra Exiting points
See attached minor Chakra illustration.



- Visual observation of coloured light emanating from points on the body, some people call this the Aura.
-

Possible Condition

- Low vital energy from initial incorrect chakra frequencies.
 - Incorrect exiting points.
 - Check kinesiologically.
-

Possible Cause

- Vaccination
 - Emotional shock
 - Toxic shock
 - Physical shock
-

Correction

- Once identified correct through main correction
 - Correct through a Chakra frequency - generally Base Chakra.
-

Name Negative Spinal Feedback.

Category Protocol

Description and Identification

Identify kinesiology in this order:

Negative feed back is being experienced from:

- Spine to glands
- Glands to spine
- Spine to organs
- Organs to spine
- Spine to one of three nervous systems
- One of three nervous systems to the spine

If negative feed back is experienced in all six above, it will be found generally to be one of the three nervous systems affecting all six, the correction of that system will often correct all six.

- Identification of low organ function or malfunction.
- Patient symptoms aligned to combinations of organ/gland/nervous system problems.

Visual assessment or Possible Condition

As per Description and Identification above.

Possible Cause

- Vaccination
- Emotional shock
- Toxic shock
- Physical shock

Correction

- Correction through main correction
 - If main correction is not effective identify specific reason and correct through a cardinal frequency.
 - Always use this series of questions after the main correction and when undertaking rechecks
-

Name Organ Function

Category Protocol

Description

An organ function can be described in two ways:

1. As a function of frequency of the organ called the biodynamic frequency of an organ expressed in Mega Hertz. The maximum frequency of life is 77.67888 Mhz and this is maximum biodynamic function. Any lower function down to zero is malfunction.
 2. As an organic function (or mechanical function) of the organ. This can be represented as a percentage of correct function 100% being maximum function.
-

Visual assessment and or Possible Condition

If organs are malfunctioning their correction will be part of a general correction usually.

Possible Cause

- Vaccination
 - Emotional shock
 - Toxic shock
 - Physical shock
-

Correction

- Generally correct through main correction.
 - Correct with Chakra bowls/bells.
-

Name Palatine Bones - See Ethmoid Vomer and Palatine Bone Misalignments

Name Perpetuating Gene Faults and Perpetuating Faults

Category Protocol

Description

- A perpetuating gene fault can be passed from family members for up to five generations.
 - The method of transmission is the 6th auric field.
 - A perpetuating fault is similar but different and must be kinesiologically questioned separately.
 - This is a gene fault that is not related to hemisphere displacement
-

Visual assessment or Possible Condition

A known family trait that appears to have been inherited from past family members.

Possible Cause

- A gene fault passed from family members and can be investigated to five generations. It can be an active gene or recessive gene.
 - A fault passed from family members and can be investigated back to five generations.
 - An example may be CF (Cystic Fibrosis). Certainly lung, breast, heart, liver and kidney problems leading to disease in these areas are well known in our investigations. There are probably many more conditions awaiting identification. In correction the body will identify if there are such problems. The meridian or meridians that will correct such problems have all been corrected in all members of the family. One person can correct the whole family.
-

Correction

- Correct through a cardinal frequency after the main correction.
 - To correct the perpetuating GENE FAULT or FAULT emanating from an ancestor; trace the GENE FAULT or FAULT through a family tree and identify the ancestor and which cardinal frequency is needed to undertake a correction. (Use the family tree chart on the Protocol Sheet.)
 - With the patient supine in a relaxed position use the semi-precious stone relevant to the cardinal frequency, place your hands on either side of the patients head, call in the white light and feel the warmth between your hands and the patients head. This being the amplification of the white light from the DNA, this will aid the patient to open their auric field communications to contact the ancestor if alive from whom the gene fault originates and to correct the whole family of the problem.
 - If the ancestor who originated the gene fault or fault is deceased the correction is as follows: With the white light amplification warming your patients ears and face from your hands, ask them to repeat....."I am correcting the perpetuating gene fault or perpetuating fault emanating from 'the ancestor name'...(use meridian affirmation for this example we will use the lung meridian) ...he/she 'ancestor name' is humble ..is tolerant...is modest have the patient repeat this 3 times.....play the particular meridian to correct the fault. You will feel a glow of heat in the 4th chakra area surrounding the patient. That is 50 cm from the body around the patients kundalini when the gene fault is being corrected
 - Identify that the perpetuating gene fault or perpetuating fault emanating from an ancestor has been corrected.
 - It is important at this time that the patient understands that by correcting a gene fault or perpetuating fault from the family ancestry that a release may be experienced by the eldest remaining relation in the family tree, they may experience a toxic release or emotional release
-



Protocol Notes

Part 7

or an illness. Identify the type of release and possibly the severity of the release so the patient will be prepared.

Name Puffiness under eyes

Category Protocol

Description

- Possible Heart Condition
 - Possible Kidney Condition (blue eyed people will exhibit green eyes of varying hues depending upon the state of their kidney function)
-

Possible Condition

- Low energy.
 - Tiredness.
 - Sometimes exhibiting strange mental states due to low heart function
 - T1 subluxated and painful, impinging on nerves associated with heart.
-

Check

- Pain experienced at tip of zyphoid process.
 - Low energy under rib when touching and pointing towards heart.
 - Kinesiologically negative response at heart point under left rib.
 - Tender heart point on sole of left foot.
-

Correction

- General correction with intent.
 - Correction of a specific cardinal frequency.
 - Generally corrected through main correction.
-

Name Reflux (see cerebrospinal fluid)

Category Protocol

Description and Physical Indicator

- Reflux by definition indicates a reversal of flow.
 - Reflux is caused by anxiety. Identify the why, when and where of the situation.
 - Reflux occurs in areas of the body where fluid flow can be reversed.
 - Reflux occurs in mental processes, causing opposite reaction to normal response.
 - Reflux occurs most commonly in the four sections of the alimentary canal - colon, small intestine, stomach, asophagus. It can also occur in the common bile duct. Often in conjunction with the alimentary canal sphincters being either locked opened or closed i.e. asophageal, duodenal, illio-caecal and the two anal sphincters.
 - Reflux also occurs in fallopian tubes, vas deferens, ureters, urethra, kidneys, pancreas, CSF and nerve sheets emanating from spine.
 - Reflux has been known to occur in the portal vein. A general kinesiological question is necessary to identify (i) there is physical reflux within the body – if so, identify where and when in detail and (ii) there is mental reflux – if so, identify.
-

Possible Condition

- Organ malfunction – diarrhoea, sometimes in association with constipation – possible reflux in ileocecal valve and colon.
 - Patient complaining of a need to struggle to think.
 - Patient complains of fuzzy feeling in the brain.
 - Many unexplained physical conditions and sensations can be identified as reflux in a particular area. E.g. cerebrospinal fluid, either as a total system (investigation indicate this is the source of multiple sclerosis) or partial (investigation suggests that reflux in the cerebrospinal fluid in parts of the nervous system emanating from the spine is the cause of motor neuron disease).
-

Possible Cause

- Anxiety
 - Lack of confidence in life situation unable to evaluate own situation. In children look for right/left brain coordinative development, may be very low to 0 %, causing inability to reason. Mental reflux.
 - Vaccination
 - Emotional shock
 - Toxic shock
 - Physical shock
-

Correction

- Correct separately through spleen meridian, using intent on reflux in organs.
 - Correct separately through spleen meridian, using intent on reflux of mental process.
-

Name: Reproduction difficulties and Pregnancy maintenance

Category: Protocol

Description or Physical Indicator.

Inability or difficulty for female to conceive and maintain pregnancy

Visual and kinesiology Assessment

Prior to Conception:

- Observe for pelvic rotation
- Check for Meridian Malfunction from family member including ancestors
- Check Life Force of ovaries, testicles, uterous, and lining of uterous
- Check for reflux in fallopian tubes in female vas deferens in male
- Check if oestrogen levels are sufficient in female
- Check if progesterone levels are sufficient in female

Visual and kinesiology Assessment

Pregnant Women

- Observe for pelvic rotation
- Check life force for small intestine, colon and placenta to ensure mother is providing sufficient nutrients for self and baby and producing sufficient progesterone to maintain pregnancy
- Check zinc levels high/low/ideal **IMPORTANT** : refer client back to their own medical practitioner/naturopath/nutritionalist for further assessment if findings are abnormal

Note

Problems can occur in 2nd or subsequent pregnancy when progesterone levels are low in conjunction with cranial bone misalignment. This can possibly accentuate depression type symptoms leading to potential post natal depression.

Correction :

Ensure both male and female have had full correction prior to any further correction work

Check mothers body will

- accept correction
- hold pregnancy
- nourish to full term

Baby

- request permission from mother to correct
 - check it is safe to correct
 - check if emotion or toxin is affecting baby
 - check life force
-
-
-
-

Name - Sacro-occipital pump (See also Cerebrospinal fluid)

Category: Anatomical

Description:

The sacro-occipital pump moves the CSF by contracting and releasing the dura mater approximately 26 to 27 movements per minute in deep sleep reducing to 13 to 14 movements in active mode. The Sacrum and the Ilium-Ischium contract at the same rate as the cranial plates, but in an opposing manner, as the cranial plates contract the pelvic bones release. By this method the CSF circulates around the brain and the spinal column.

Physical functions

- In deep sleep the sacro-occipital pump should operate between 26/27 movements per minute.
 - In active mode the sacro-occipital pump should operate between 13 to 14 movements.
 - The Biodynamic frequency of the CSF and the brain cells should be 77.6788 Mhz.
 - The cerebrospinal fluid must function at its correct pressure.
-

Observations when not functioning correctly

- Stagnation of the cerebrospinal fluid is often indicated by puffiness on forehead.
 - Clouded thought patterns.
 - Possible condition resembling MS and or motor- neurone disease in conjunction with CSF reflux
 - Sleep patterns generally affected by adrenalin in the blood stream used to give energy to brain cells deprived of blood sugar and insulin by the stagnation of and toxins in the CSF.
-

Possible Cause

- Dura mater being impermeable (Rage).
 - Reflux in cerebrospinal fluid returning fluid from extremities along neural pathways leaving toxins within and therefore damaging neural sheaths (Generally anxiety – spleen meridian)
 - Stress affecting movements of the cranial and sacral bones.
 - Meridian malfunction from other person.
 - Residual meridian.
-

Correction

- Correct residual meridian.
- Correct impermeable dura mater; gall bladder for rage.
- Correct reflux in the cerebrospinal fluid; correct with Spleen meridian.
- Determine correction for cranial bone or spinal vertebra misalignment; correct through meridian identified or as otherwise identified.

Name Scoliosis.

Category Anatomical

Visual Indicator

- Curvature of the spine.
 - Uneven shoulders.
 - Uneven leg length.
 - Rotation of hips.
 - Generally all the above in varying degrees.
-

Possible Condition

- Perpetuating gene fault or fault
 - Meridian malfunction from some other person
 - Multiple subluxations.
 - Many other causes, gland, organ and nervous system malfunctions affecting the spine and causing a scoliosis to a greater or less extent.
 - There are basically two forms of scoliosis. One, where the vertebrae are not malformed, and a complete correction is therefore possible. The second is where vertebrae have been misaligned and malformed in utero and later after, particularly if through MM's from some other person or persons. Sometimes the body will over a period of time rebuild the vertebrae in their correct shape. Sometimes this does not occur.
-

Possible Cause

- Vaccination
 - Physical shock.
 - Emotional shock
 - Toxic shock.
 - Malfunctioning meridian from some other person.
 - Residual meridian from a deceased person
 - Perpetuating fault or fault.
-

Correction

- Correct residual meridian
 - Correct perpetuating fault or fault.
 - Correct meridian malfunction from some other person.
 - Correct through a cardinal frequency.
 - Often corrected through main correction
 - Correct through a 39'er track correct muscles associated with the sacrum.
 - Correct through feedback system of questioning.
-

2. The following table defines and explains aspects of the protocol:

Name: Sub-conscious Sabotage and related conditions. Embarrassment, Loss of self love, Amygdale gland requires reprogramming, Anxiety state requires correction.

Category: Protocol

Description or Physical Indicator:

Sub-conscious sabotage is a primary correction and should be corrected initially when identified if patient management allows.

Quite often this correction is too confronting so early in the session and should be postponed until an appropriate stage in the consultation. As an example, after the main correction. Sometimes the condition will not surface until the second or third appointment when corrections are found not to be holding, sub-conscious sabotage may reveal itself as the cause.

Visual assessment and possible Condition:

A lack of self worth is also a condition often associated with sub-conscious sabotage. Both conditions may also occur independently. The condition of 'lack of self worth' often reveals itself by a reluctance to be photographed or to look ones own eyes in the mirror. To confirm a lack of self love have the client look in a mirror at their own eyes and muscle check, if negative have them make the statement 'I like myself', if also negative identify when the situation occurred. Other signs may be observed such as not looking straight ahead, or hiding under a cap or hair or not wanting to make eye contact, head held down and/or sideways etc. To identify sub-conscious sabotage make the statement, 'There is a condition of sub-conscious self-sabotage in X(name)' and check. If positive you have identified the condition. Then check the circumstances that created the condition. Following this identification routine, a priority order of correction has to be established. Quite often a correction for self sabotage will act as a magic button. Sometimes self love correction will correct two or more of the conditions. TAKE NO CHANCES, THIS IS TOO IMPORTANT. Check well and establish priority order for correction.

Possible Cause:

Sub-conscious sabotage is generally caused by embarrassment at some time in the past. The depth of emotion felt programmes the sub-conscious mind to carry out the instructions to 'get rid of ones-self'.

'I was so embarrassed I just wished I could disappear. I wished the ground could have opened up and swallowed me'.

The sub-conscious is therefore programmed to carry out the task of getting rid of oneself as the emotion is so strong at the time. The sub-conscious uses many means to carry out the instructions, e.g. creating permanent ill health, the creation of malfunctioning cells and many other means of carrying out the order to disappear. This type of reprogramming often occurs in the surviving partner after the death of their spouse of long standing 'Oh well I suppose there is not much use in going on after the loss of X, there is not much left for me now' or words to that effect. Check for the appropriate meridian to correct the sub-conscious sabotage, for embarrassment use governing meridian for loss use lung meridian.

Correction:

Sub-conscious sabotage mostly can be corrected through the governing meridian. Use the G.M. sound, the stone haematite, the meridian scent and the statement 'I am not embarrassed, I have no need to be embarrassed, I am proud of myself, I want my sub-conscious to support me, I am not embarrassed'. Repeat three times and recheck

Quite often the condition of 'anxiety state' will have been detected and often also the need to re-programme one or both amygdale glands. Often the loss of self love may reveal itself as well.

The existence of an anxiety state is detected by the statement 'there is an anxiety state that needs to be corrected'. Muscle check, if positive identify when the anxiety occurred and which meridian and stone is needed, generally spleen meridian and malachite stone.

To identify the need to re-programme one or both amygdalae glands make the statement 'an amygdale gland requires re-programming' and muscle check. If positive, check which gland right or left and when affected. The correction can generally be made through the spleen meridian.

If the condition of loss of self love has been detected using the technique of mirror and statement as described above in - Visual assessment and possible Condition- the correction can be effected using the following technique.

Have your patient place both hands on breasts-pectorals while the practitioner places the spread fingers of both hands above left and right clavicals. Have your patient repeat the following statements while you slowly and heavily draw your fingers down to the level of the top of breasts-pectorals, repeat three times.

'ALTHOUGH I do not like myself, I SINCERELY AND PROFOUNDLY accept myself EXACTLY AS I AM.

As a reminder, always ask permission of women for this procedure as it involves an invasion of privacy, minor but never-the-less an infringement that requires agreement. The procedure physically draws the lymph system downwards and will become increasingly painful. Advise your patient accordingly. Use pressure carefully as older people and women are hugely more sensitive and can bruise easily. This is a very important procedure and should be executed with skill and delicacy.

Name Shape Fields

Category Protocol

Description and Physical Indicator

- Shape fields are energy fields generated by DNA. These fields surround each meridian in fine detail and create the individual shape of organs, facial appearance, height, gender, in fact every fine detail of our physical construction. The DNA forms at the moment of conception and the base stem cell contains the knowledge to create the individual in all their individual aspects. This knowledge is passed on from cell to cell as growth occurs. Shape fields can malfunction on meridians and they do so in meridian tantric order although not all the shape fields on a particular meridian may malfunction at the same time generally only certain areas on the meridian. For instance the first meridian of tantric order is the kidney meridian, so therefore, it is the first to fail and generally only from K20 to K27 on the right hand side. The governing meridian being the next of the tantric order and the most common area of failure is from an area in the back of the neck to G24 (the top lip). To identify shape field malfunction, simply ask the question: There are shape fields malfunctioning in this body. If positive trace where on the body and when it failed in time and on what area of the meridian and which meridians in tantric order. For instance ask the question: on how many meridians are there shape fields that have failed. If the answer is 4, then the meridians are: Kidney, governing, large intestine and lung.
-

Visual assessment or Possible Condition

- Shape field malfunction may be as obvious as a sunken, or pigeon chest. But more often it has to be identified kinesiologically. Identify on how many meridians the shape fields are malfunctioning. The number of meridians will tell you the exact meridians to be corrected in tantric order.
-

Possible Cause

- Vaccination
 - Birth trauma
 - Emotional shock
 - Toxic shock
-

Correction

- Shape fields may be corrected at the main correction if identified or may be corrected by Meridians in tantric order.
-

Name - Sphenoid bone

Category: Anatomical

Description

The Sphenoid bone is a most important cranial plate in relation to the mobility of all cranial plates as it acts as the keystone in the construction of the skull. The pituitary gland is cradled in an area of the Sphenoid bone called 'Turkish Saddle' (Sella Turcica). When the Sphenoid bone is misaligned or tilted it affects many other cranial structures e.g. the occiput. The Sphenoid and the occiput articulate at the Sphenobasilar symphysis acting as the cephalic cerebrospinal fluid pump. The Sphenoid articulates with both temporal bones and when misaligned in conjunction with the occiput and one or both temporal bones is the cause a number of conditions described elsewhere (see under behavioural problems and learning difficulties). Muscles of the eyes are affected by a misaligned Sphenoid bone. A misaligned Sphenoid bone can also affect growth as the pituitary gland may be affected (see pituitary gland).

Visual assessment

- Lazy eye - Strabismus, convergent / divergent (see strabismus)
- Nystagmus (see nystagmus)
- Astigmatism - (see sphenoid bone and facial bones) – alteration of focal point (see dyslexia article).
- Restriction to eye movement – superior and peripheral
- Problems with glare
- Myopia (short or long sighted)
-
- A misaligned sphenoid may be identified at the superior pterion suture on right or left side as a lateral ridge found between the edge of the brow and the top of the ear.
- Hormonal and behavioural swings (pituitary and other glands)
- Red rims and blood shot eyes (red blood vessels in sclera, particularly close to canthus of one eye).
- Hearing problems
- Balance problems.
- Extreme behavioural problem.
- Physical growth may be affected
- Learning difficulties in all forms.
- Depression

Possible Cause

- Vaccine shock
- Emotional shock
- Physical shock
- Birth trauma

Correction

- Correction with the main correction.
 - Correction with one of the Cardinal frequencies.
-

Name Strabismus (Lazy eye)

Category Protocol

Description

According to Collins English dictionary “**Strabismus** n. abnormal alignment of one or both eyes, characterized by a turning inwards or outwards from the nose thus preventing parallel vision: caused by paralysis of the eye muscle, etc. Also called: squint”.

The first section of this statement describes this condition accurately. The second section describing the reason being the paralysis of the eye muscle is totally wrong and is the reason that learning difficulties are not understood by the western medical or educational systems. There are total hospital industries anesthetising children removing the eyeball and sectioning eye muscles. This dangerous procedure which amounts to a massive industry world wide, is totally useless. The reason Strabismus occurs is not paralysis of the eye muscle but the lack of co-ordination between the left and right brain.

The left/right brain coordinative process should take place at between four and seven months from birth. However if this normal development does not take place, Strabismus is the result as the left and right brains are not integrated from birth, but are in fact in strabismus from birth until integration. Therefore, strabismus is a natural state until integration takes place. The cause of strabismus has nothing to do with the eyes. It has to do with initially bones of the skull been misaligned principally the Sphenoid, the occiput and the one or both temporal bones (see learning difficulties and behavioural problems).

The condition of left/right brain lack of co-ordination causing Strabismus is known as homolateral function. See Dawson programme paper (Dyslexia). The correction of strabismus is a complicated process to understand, however, the procedure to correct, once understood, is a matter of seconds – painlessly and without any danger. Compare this with the butchery and danger of the eye operation industry.

Visual assessment

- Eyes not coordinated in parallel sight.
 - Eyes appear to be divergent.
 - Eyes appear to be convergent.
 - The lazy eye has eyelids more widely open.
 - Problems with glare while driving.
 - Learning/reading difficulties.
 - Sore eye rims and red eyes.
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Possible Cause

- Birth trauma.
 - Vaccine shock.
 - Emotional shock.
 - Toxic shock.
 - Physical shock
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Correction

- Correct with main correction with intent to correct cranial plates.
 - Corrected using a Cardinal Frequency.
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Name Subluxation

Category Anatomy

Description

A subluxation means something less than a dislocation of a joint. In Chiropractic terms a subluxation indicates a misalignment of a joint. When referring to the spine a subluxation means the misalignment of spinal vertebrae, thus causing the associated vertebrae to become misaligned. Subluxations create pressure on nerves emanating from spinal foramina, causing problems with nerves, nerve ganglia, therefore muscles, ligaments, circulatory system, organs, in fact the whole of bodily functions become disturbed in some form.

Possible Condition

- General illness. All illnesses originate from some form of spinal misalignment i.e subluxations.

Possible Cause

- Vaccine shock
- Emotional shock
- Physical shock
- Electric shock
- Toxic shock

Correction

- Correction through main correction
 - Can be corrected separately through a cardinal frequency.
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Name: Substance Intolerance (Allergic reaction)

Category: Protocol

Description

A **FOOD ALLERGY** involves an immune response to ingested food. In a true food allergy the body's immune system mistakenly identifies a component in food as harmful & produces antibodies against it. Symptoms include tingling mouth, hives, swelling of lips, faces, tongue & throat, trouble breathing & dizziness or fainting, low blood pressure.

True food allergies include peanuts, shellfish, soy, shellfish & wheat.

Generally allergic reactions get more severe with each exposure to the offending substance.

About 4% of adults & 8% of children under 3 are affected.

SUBSTANCE INTOLERANCE. In the case of food, it is a digestive response to an ingested food substance. Generally the severity of the symptoms is proportional to the amount ingested. Symptoms may include nausea, stomach cramps, heartburn, diarrhoea, vomiting and headaches.

Visual assessment

- Nasal congestion (Very variable).
 - Lung and bronchial congestion
 - Eczema
 - Psoriasis.
 - Roughness of skin.
 - General problems of skin including acne.
 - Body weight under or over weight.
 - Body shape bloated.
 - Obvious nutritional problems.
 - Behavioural problems (food dye)
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Possible Cause

- Food intolerances e.g. Gluten, Egg, Milk, Deadly night shade group of plants, Tyramine, alcohol, Food dyes, Seafood, Dust mite, Sodium Laurel Sulphate, Dioxin and many more, see substance intolerance sheet of Assessment.
 - Vaccination (must vaccination use raw egg as the culture medium. Vaccinations are injected into the blood stream therefore brain and brain stem of new born babies. No intolerance test is undertaken to establish intolerance reaction. 62% of SID occur within forty eight hours of the first vaccination.
 - Chemicals in drinking water.
 - Air born chemicals.
 - Foods intolerable to specific racial groups (e.g. Chinese cannot tolerate dairy products).
 - Hereditary factors.
 - Possible learnt intolerance.
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Correction

- Use Auric Field 7 with token to allowing tolerance to substance in small amounts.
 - Avoid intake and contact with substances that are intolerable.
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Name Thyroid and Para-thyroid glands.

Category Anatomical

Description

The function of the Thyroid and Para-thyroid glands are to produce a hormone called Thyroxin. This hormone has the function of entering the blood stream when commanded to do so by the subconscious brain and acts as a messenger to the liver commanding the release of insulin and glycogen (blood sugar) into the blood stream. Both glycogen and insulin have the ability to cross the blood brain barrier and to enter into the brain cells. The insulin opens the brain cells and the glycogen energises the cells. These substances are made initially in the pancreas and are stored in the liver awaiting the release stimulus of thyroxin. If a subluxation is present in the spine affecting cervical 3, 4, or 5 a problem occurs with the manufacture and release of thyroxin. Subluxation of C5 causes impingement on the sympathetic nerve emanating from C5 inhibiting the brain from sending the correct message to the Thyroid and Para-Thyroid glands. The result is a lowering of the production of Thyroxin, the gland swells in an attempt to produce the hormone and if untreated becomes what is known as a goitre. The brain requires glycogen and insulin and if it is not available due to the lack of Thyroxin the brain uses the emergency supply (adrenalin), creating the well known roller-coaster ride swings of emotion typical of the condition often known as hypoglycaemia (not enough blood sugar).

Visual Assessment

- Swelling on both sides of neck and tender to touch.
- Swelling in throat.
- Hyper activity preceded by and followed by exhaustion.
- Sleeplessness.
- Sugar/fats craving.
- An obvious misalignment of cervical vertebrae.

Physical Assessment

- MC of umbilicus will be negative indicating adrenaline flow. This adrenalin flow appears to compensate for the lack of release of blood sugar and insulin. This is in fact the emergency supply. This is one of the reasons why so many children are hyperactive.
 - MC of tip of 12th rib on the left side will be negative and tender to touch. This would appear to indicate that the pancreas has ceased to produce insulin. The pancreas will commence to produce insulin immediately the stored insulin in the liver is released.
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Possible Cause

- Vaccine shock.
 - Physical shock.
 - Emotional shock.
 - Scoliosis.
 - Subluxation in C3/C4/C5
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Correction

- Scoliosis corrected often through main correction.
 - Post scoliosis correction, glands drained with quad track 4 holding the Para-thyroid gland with intent – feel the gland drain and vibrate.
 - Check for lemon or other trigger (bitters or sugar) to turn off adrenalin flow and to release
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stored blood sugar and insulin. If the primary subluxation has been C3 the release trigger may well be sugar on the tip of the tongue and the swelling in the throat will not be evident, although the adrenalin point on the navel will register that adrenalin is flowing, so it would appear that the thyroxin has been produced but not released, which is accomplished by the sugar as a release trigger. If the primary vertebral subluxation is C4, it would appear the same situation as the above although the release trigger would seem to be bitters at the back of the tongue. If the primary vertebral subluxation is C5 there would be swelling in the parathyroid particularly attempting to produce the correct hormone. A sour trigger (e.g. lemon juice on the sides of the tongue) will release the flow of insulin and glycogen from the liver and again the pancreas will now begin to re-function. This condition is the precursor to a type of diabetes.

- Check for time period that the release trigger will need to be taken. Example every waking 45 minutes / or 1 hour / or 1 ¼ hours / or 1 ½ hours for how many days? Seven or seventeen?
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Name Valves connecting organs and or vessels (See Reflux).

Category Anatomy

Description or Physical Indicator

- Inability to obtain complete function of organ(s).
 - Ileocecal valve: E.g. a combination of diarrhoea and constipation if Ileocecal valve remains open. Particularly if the colon and / or small intestine are in reflux. This is a common combination.
 - Duodenal valve
 - Esophageal valve
 - Houston valve of sigmoid colon
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Visual assessment or Possible Condition

Not applicable

Possible Cause

- Vaccination
 - Physical shock
 - Anxiety.
 - Emotional shock
 - Toxic shock
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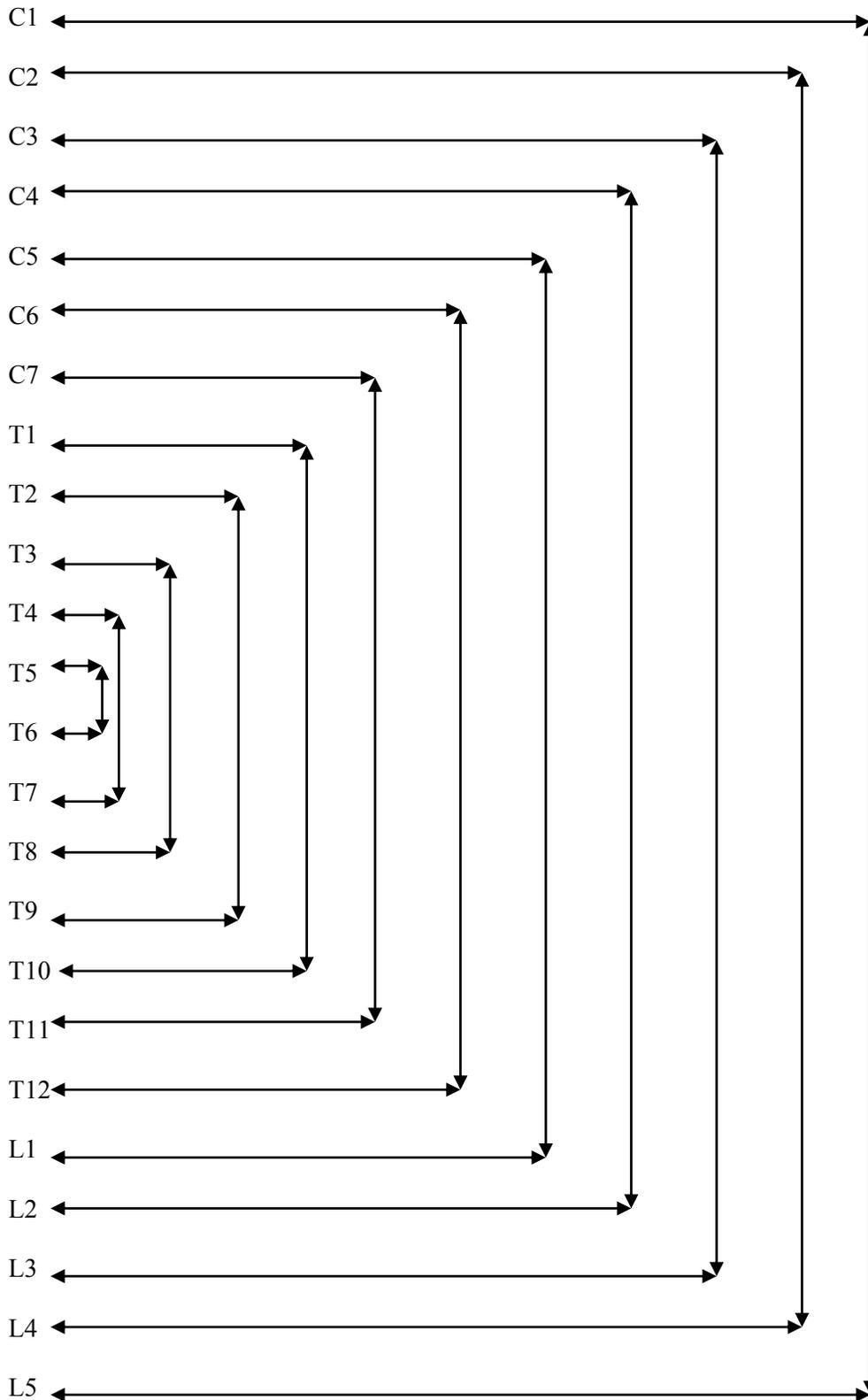
Correction

- Correction through main correction if identified
 - Correction through a cardinal frequency (generally spleen – anxiety)
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Name Vertebral relationships

Category Anatomical

Diagram of basic relationship of vertebrae to each other.



Example of the relationship of the vertebrae to each other caused by subluxations in turn being caused by meridian malfunction or other affects to spinal structure.

Example Kidney Meridian.

A kidney meridian malfunction on one side of the body alone will cause the following subluxation pattern, C1, L5, T5, C5, L1, T1, T10,

The extension to the simplified chart is to know that when specific meridian malfunctions occur a standard pattern of subluxation will follow.

If the only malfunction is the kidney meridian, the above will be the pattern of primary subluxation.

This effect can be seen as hugely damaging to the body's nerve structure emanating from vertebrae, therefore to the function of organs.(eg T1 heart)

The effect of meridian malfunction, single or multiple upon vertebral structure will create pressure on the nerve structure leading to organ malfunction, skeletal structure will always adapt to the altered mould position causing illness.

Vertebral subluxation and affect on other vertebrae.

If C5 is displaced C4 and C6 will be pressured.

If C4 is pressured it also affects C3.

If C6 is pressured by C5 it also affects C7

If C3 is pressured by C4 it also affects C2 (Axis)

If C7 is pressured by C6 it also affects T1

If C2 is pressured by C3 it also affects C1 (Atlas) etc.

Go to chart above for Basic relationship.

If one vertebra is displaced it affects all vertebrae to varying degrees.

Name Vomer (see ethmoid and palatine bones)

Category Anatomy

Physical Indicator

A misalignment of the Vomer is usually associated with the Ethmoid bone and the left and right palatine bones. They are generally misaligned inferiorly, causing symptoms of sneezing, nasal congestion, symptoms similar to hay fever, asthma and rhinitis. Visually a swelling on the roof of the mouth can be observed. The point will be tender and will MC negatively. After correction, swelling and tenderness disappear.

Possible Condition

See above symptoms.

Possible Cause

- Anxiety.
 - Emotional shock
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Correction

- Once identified correct through main correction
 - Correct through a cardinal frequency (Generally spleen).
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Name Viral infection (See body check points)

Category Protocol

Physical Indicator

Swelling and tenderness in submaxillary glands, at K27, gland under the arm and glands in the groin.

Possible Condition

Extreme tiredness and chronic fatigue symptoms.

Possible Cause

- Low heart function (the body often chooses a viral infection to inhibit the individual from over exertion so that the heart will not be strained).
 - If the primary problem of vertebral pressure on nerves affecting the heart is not corrected then the next condition after a viral infection is generally an anxiety state or panic attack.
 - The final stage if unattended is often Schizophrenia.
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Correction

- Once identified correct through main correction
 - Correct through a cardinal frequency.
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