

Integration Class 5: The Emergency Mode

1. Opening Brain Integration Exercises

Key Learning Points:

- Always begin sessions by switching the brain on
- Eye movements integrate the brain hemispheres
- These exercises benefit both practitioner and client

Procedures:

- **Eye Rotations:** Move eyes around in all directions
- **Thinking Caps:** Unroll ears to activate auditory centers and energy flow
- **Thymus Thumping:** Activates stress clearing
- **Temporal Tapping:** For anchoring corrections

"When I do this before teaching, I teach better. So it's for my good as well as your own. When you move your eyes around, you're integrating your brain hemispheres."

2. Eye Position Stress Release Technique

Key Learning Points:

- Specific eye positions can reveal where stress is locked in the brain
- Looking down accesses feelings (NLP principle)
- Weak spots indicate stored stress

Procedure:

1. Have the client look around slowly in a circle
2. Test muscle strength in different eye positions
3. When you find a weak spot, have them:
 - Look in that direction
 - Hold frontal eminences (forehead stress release points)
 - Breathe deeply
4. Retest to confirm it's now strong

Key Quote:

"When you look in that certain direction, it accesses something in the brain where maybe something is stored. And that again is why we do the eye rotations when we're programming in affirmations as well as new beliefs."

3. Hand/Finger Modes vs Emergency Mode

Key Difference:

Hand/Finger Modes:

- Specific to whatever you're testing
- Used for individual issues (weak muscle, ileocecal valve, TMJ, etc.)
- Answers: "What do we do for THIS specific thing?"

Emergency Mode:

- Global/systemic assessment
- Shows what affects the whole being
- Answers: "What is the overall priority?"

Key Quote:

"Hand modes are specific to whatever you're testing. Emergency mode says globally, what is it we need to do? And the most common I find is diet deletion."

4. Testing Supplements with Finger Modes

Procedure:

1. Find a weak muscle
2. Touch thumb to index finger (physical/structural)
 - If strong: needs neurolymphatics, origin/insertion, etc.
3. Touch thumb to middle finger (nutrition)
 - If strong: check diet addition, diet deletion, supplement addition
4. Touch thumb to ring finger (emotional)
5. Touch thumb to little finger (electrical/energy)

Confirmation Methods:

- **Bottle Testing:** Hold the supplement, retest the weak muscle
- **Riddler Points:** Touch specific facial points for each vitamin
- **Multiple Muscle Testing:** Check all muscles associated with that nutrient

Key Quote:

Sheldon Deal said, "A good kinesiologist will have one way to figure things out. A great kinesiologist will have a second and a third way to confirm it."

5. Emergency Mode Positions & Meanings

Position 1: 20° Below Horizontal (Biochemical/Nutrition)

- Points downward toward plants
- Most common: Diet deletion
- Also: Diet addition, supplement addition/deletion

"Think of the nutrition position as pointing down at the plants."

Position 2: Straight Out Horizontal (Structural)

- Like girders of a building
- Muscle balancing, ileocecal valve, TMJ, cranial, scars, injury recall

Key Quote:

"Think of a building... this position is the girders that hold the structure."

Position 3: 20° Above Horizontal (Emotional & Energy)

- **Points upward toward head/power lines**
- If weak, differentiate by testing:
 - Emotional mode (ring finger)
 - Electrical mode (little finger)

"For this position, think of energy as pointing up towards the power lines... and you feel your emotions up in your head."

6. Emergency Mode Testing Procedure

Basic Protocol:

1. Client lies supine (or stands for practice)
2. Test strong leg muscle (TFL or quadriceps)
3. Have the client place their arms in each position:
 - 20° below horizontal
 - Straight out
 - 20° above horizontal
4. Test the muscle in each position
5. When the position tests weak, that's the emergency priority
6. If emotional/energy position is weak:
 - Add emotional finger mode - does it change to strong?
 - If not, try electrical finger mode.

"It's saying, this is, I'm in an emergency state, handle this right now... It gives you great information. The local things are what you want to handle after the general."

7. Diet Deletion Protocol (Most Common Finding)

Foods That Commonly Test for Deletion:

- Spicy foods (irritate the ileocecal valve)
- Sugar
- Coffee (check amount and type)
- Gluten
- Processed foods

Testing Method:

- State "Delete [specific food]."
- If a weak muscle goes strong = yes, delete that food

Key Quote:

"The American Diet, it's SAD - the Standard American Diet... I go to the market and see what people are putting in their baskets."

8. Supplement Testing

Priority: Diet First, Then Supplements

Key Quote:

"You always want to think diet first because that is where you want people really eating food, rather than supplements."

Categories to Test:

- Vitamins
- Minerals
- Essential fatty acids (Vitamin A, F, and methionine for muscles)
- Fiber
- Amino acids
- Herbs
- Glandular

Chewing Is Critical:

"Chew your food until it's liquid, there's RNA, some kind of tagging system that, from your saliva, it tags the nutrients to tell it where to go in the body."

9. Ileocecal Valve Correction

Importance:

When the Ileocecal valve is out, it's out for a reason. You may have parasites, candida overgrowth, or leaky gut.

Procedure:

1. Locate: halfway between the umbilicus and the ASIS (hip bone)
2. Gently push in
3. Pull up toward your shoulder, then down toward your hip
4. Whichever direction feels better, hold that direction
5. Optional: Add frontal eminences with the other hand
6. Take 4 deep, intentional breaths
7. Release and retest

Any symptoms you have, even if they're unrelated to the ileocecal valve, when your ileocecal valve goes out, the symptoms are worse.

10. Injury Recall Technique

When to Use:

- One of the first things to do in structural sessions
- For any pain or injury
- Clear before other corrections

Standard Procedure:

1. Client circuit locates an injury (touches a painful or problem area)
2. Test muscle - may go weak/indicator, but could be strong
3. Have the client extend their head back
4. If it changes in strength, weak to strong, or strong to weak = injury recall is needed
5. Correction:
 - The client keeps their hand on the area
 - Lift their head forward and back several times as they breathe deeply
 - An option is to pull on the foot on the side you are clearing to open up the ankle joint
 - Let your head drop forward, then push back up
 - Repeat several times with breathing
 - If you are correcting yourself, put your other hand on your forehead
 - Let your head drop forward, then push back up
6. Temporal tapping to anchor in the correction and tap St 1 on both sides as an option
7. Retest to see if the tests that were originally weak are now strong

Self-Application Ankle Technique (Krystal's Method):

- Place the heel of one foot on top of the other foot
- Pull the knee up while the heel holds the ankle down
- Creates traction on the ankle joint

"Injury recall is actually one of the most important things to do when you're starting to work with a client... before you even do anything else, especially in a physical thing."

11. Neurotransmitter Balancing

Four Main Neurotransmitters:

- **GABA** - calming, like natural Xanax
- **Acetylcholine**
- **Dopamine** - depleted with loss
- **Serotonin**

Testing:

- Touch each point with a strong muscle
- Whichever goes weak = deficiency

Correction:

- Tap the deficient point
- Can combine with frontal eminences for the emotional component

"Dopamine deficiency is usually related to loss... whenever you have a loss, your dopamine goes down, and you're just literally down in the dumps."

12. Chakra Balancing (Solar Plexus Example)

Procedure Demonstrated:

1. Screen with spleen 21 (if weak = chakras needed)
2. Have the client hover their hand over each chakra
3. Test - weak chakra found (solar plexus = yellow = earth)
4. Check associated muscles (lats tested weak)
5. Have the client say "I can" - if weak, needs balancing
6. Correction:
 - Hand over chakra
 - Say affirmations: "I can [desired outcome]."
 - Visualize the color (yellow)
 - Use a pitch pipe for frequency
 - Can add ESR points

"Her body was spot on. I'm just asking her body to tell me. And her body said, Okay, we'll tell you the truth. And that's the beauty of kinesiology."

13. General Session Guidelines

Important Principles:

- Emergency mode may be the entire balance or the starting point
- Don't have to correct the emergency finding immediately
- Use it to guide session focus
- Clear general/global issues before local issues
- Blood sugar balancing (SP 21, K 27) is often a priority

When the Emergency mode shows, the body is saying, "I'm in an emergency state, handle this right now." But you don't always have to correct them right away. You can address these systemic issues that are affecting their whole being during the session.

14. Key Reminders

- Always ask permission to test
- Make statements, not questions ("vitamin A is needed" not "Do you need vitamin A?")
- Have 2-5 go-to techniques in each domain, rather than trying to know everything right now
- Trust the body's wisdom
- Keep emergency mode forms handy for reference

Final Wisdom:

"A good kinesiologist will have one way to figure things out. A great kinesiologist will have a second and a third way to confirm it."