

Kinesiology Integration Course — Day Two: Emergency Modes, Five Element Balancing, and Beginning/End Points

A comprehensive class guide covering energy balancing, emergency mode assessment, five-element command points, beginning and end acupuncture point protocols, and straight arm muscle testing.

Morning Energy Routine

Each class day begins with a full-body energy activation sequence. This routine primes the meridian system and prepares both practitioner and client for accurate muscle testing.

The Morning Sequence:

1. Rub Kidney 27 points
2. Unroll the ears (also good for stiff necks and resetting the body clock)
3. Cross crawl
4. Eye exercises
5. Thymus thumping
6. Back brain points (C1)
7. Zip up the Central and Governing meridians
8. Run through all 14 meridians: Stomach, Spleen, Heart, Small Intestine, Bladder, Kidney, Circulation-Sex, Triple Warmer, Gallbladder, Liver, Lung, Large Intestine, Central, Governing
9. Spleen 21 for body clock reset
10. Governing Vessel 20 tapping
11. Three neurolymphatic hugs

Learning Point: Consistency with this routine directly affects sleep quality and digestion. As John noted: *"The more balanced you are, the better you sleep, the better you digest."*

Self-Testing Techniques

Before diving into partner work, students learn how to self-assess using finger testing and quadriceps testing — methods that can be practiced anywhere, even while exercising.

Finger Testing Method

- Use the index finger pressing against the middle finger
- The hand must be held in extension (bent back at the wrist)
- Tuck the ring and pinky fingers out of the test to remove extensor muscle interference
- Touch various neurolymphatic points while maintaining the finger press to identify what is out of balance

Quadricep Self-Test

- Keep the foot somewhat raised to engage the vastus lateralis muscles (not the rectus femoris)
- A slightly straighter leg position gives a better test
- The line of drive is toward the heel

Learning Point: Either method can be used as a morning self-check. Rub any neurolymphatic points that test weak. This practice alone can resolve chronic issues over time.

Student Testimonial (Pam): *"I was having some GI disorders, and it was bothering me for months. I took the class and thought, I'm in bed, I can't fall asleep — I'll run my neurolymphatics and neurovascular points. After about 4 days, I woke up in the morning without GI issues. I continued it, and it takes care of it for me."*

Sleep Enhancement Protocols

Three techniques, used in sequence, can typically induce sleep within 30 seconds to two minutes.

Technique 1: Bladder 1 Tapping for Serotonin

- Tap Bladder 1 (inner corner of the eye) at the rhythm of a ticking clock
- Breathe slowly from the belly to stimulate the vagus nerve
- Tap up to 100 times
- As you approach the higher numbers (at least past 50), slow down gradually — like a train coming to a stop

Why it works: Bladder 1 stimulates serotonin production. Serotonin is a neurotransmitter that calms the brain. When serotonin is low, you experience ruminating thoughts and a racing mind.

Technique 2: Large Intestine 20 Tapping for GABA

- Tap LI-20 (beside the nostrils) to stimulate GABA production
- GABA is one of the most prominent inhibitory neurotransmitters in the brain
- When GABA is deficient, anxiety increases

"When you have low GABA, they have a drug for it called Xanax. So if you're feeling anxiety, tap Large Intestine 20. But also it helps before you go to sleep."

Technique 3: 4-6-8 Breathing Pattern

1. Inhale through the nose for a count of 4 (complete belly breath)
2. Hold for a count of 6
3. Exhale through the mouth for a count of 8

Repeat this cycle at least twice. The extended exhale stimulates the vagus nerve and activates the parasympathetic nervous system.

Technique 4: Frontal Eminence Hold

After performing the above three techniques, lie down and place fingers on the frontal eminences (the bony prominences on the forehead). Continue belly breathing. You can fall asleep with your hand against the pillow or mattress while lying on your side.

"If I do those three things anytime I'm not falling asleep, I'm generally asleep within 30 seconds to two minutes."

Nutritional Note: Calcium-magnesium deficiency can also prevent sleep. John shared, *"When I had the calcium-magnesium combo, I found out I sleep so much better. I could fall right asleep. Take my cal-mag and then boom, within 20 minutes, I'm out."*

Wake-Up and Energizer Techniques

Sagittal Suture Separation

Procedure:

1. Bring feet into dorsiflexion (toes pulled toward shins)
2. Inhale while pulling the sagittal suture apart (hands on either side of the top midline of the skull)
3. Exhale and relax
4. Repeat 4 times

Why it works: The dorsiflexion stimulates cerebral spinal fluid movement during inhalation. This technique also activates weak abdominal muscles (as documented in the Touch for Health book).

Historical Note: *"Sheldon Deal used to work out at Gold's Gym with Arnold Schwarzenegger. He got Arnold on the table, jammed his sagittal suture, and then pushed him back — Arnold went flying. He couldn't hold his muscles. Arnold said, 'Do that again! Do that again!' He was blown away."*

Additional Energizers

- **Ear unrolling** — boosts qi entering the body
- **Thymus thumping** — especially valuable under stress
- **Triple Warmer 3 tapping** — stimulates the adrenals
- **Adrenal neurolymphatic rubbing** — located two inches (five centimeters) above and two and a half inches out from the navel
- **Hydration** — always the first priority

Learning Point: Slow, congested chi contributes to jet lag. Avoid alcohol on planes; drink plenty of water instead. Avoid cow's milk as it can clog the lymphatic system.

The Hair Pull Test for Hydration

This should be the very first test in any client session.

Procedure:

1. Establish a strong indicator muscle
2. Optionally verify it will go off with a pinch test
3. Have the person tug on their hair and hold
4. Retest the indicator muscle
5. If the muscle weakens, the person is dehydrated

"Almost every other muscle is weak or three-fourths of the muscles — everything's weak, weak, weak. What's the probable cause? They're not hydrated. So that's why I like to test this first."

Hydration Tips:

- Keep a glass of water by the bedside; sip first thing in the morning
- Drink 6–10 ounces of water upon waking
- Sip water throughout the day
- Use a solid container, not plastic — plastics accumulate in the brain
- After drinking 4–6 ounces, retest to confirm improvement

The Emergency Mode Assessment

The Emergency Mode was developed by Dr. Beardall, one of the original "Dirty Dozen" of Applied Kinesiology assembled by Goodheart. It reveals the body's systemic priority — what it needs most, independent of the client's presenting complaint.

Background: How Modes Were Discovered

Beardall noticed that when a client's thumb accidentally touched a finger during testing, the muscle response changed. He connected this to the homunculus (the brain's sensory-motor mapping, which has a disproportionately large area for the hands and jaw) and to yogic mudras (hand positions that access different states of consciousness).

The Three Emergency Mode Positions

The client extends both arms while a previously strong indicator muscle is tested:

Arm Position	Mode	Memory Cue
Arms straight out (like airplane wings)	Structural	Think of a building's structural girders
Arms angled upward (~20° above horizontal)	Emotional / Electrical	Pointing up to electrical lines; emotions are experienced in the head
Arms angled downward (~20° below horizontal)	Biochemical / Nutritional	Pointing down to the plants (nutrition)

Testing Procedure

1. Establish a strong indicator muscle (fasciae latae is preferred)
2. Have the client extend both arms into each of the three positions
3. Test the indicator muscle in each position
4. Whichever position produces weakness reveals the priority mode
5. If the mode is Emotional/Electrical, further differentiate by either:
 - Touching the emotional finger mode vs. the electrical finger mode and seeing which changes the response, OR
 - Verbally stating "emotional" or "electrical" and seeing which restores strength

Putting the Mode in Circuit

Once you identify the weak mode, you can retain it by:

- Touching your own fingers in the identified mode position (practitioner holds it)
- Or having the client separate their legs (circuit-retaining mode)
- Or transferring the information into the client's circuit by touching them while holding the mode

This allows you to switch to an easier muscle (like the arm) rather than retesting a leg muscle 20 times.

Reading the Menu

With the mode in circuit and a weak indicator, read through the appropriate checklist. The item that strengthens the muscle is what the body needs.

Structural Menu (Page 7): Injury recall, muscle balancing, lymphatic release, ileocecal valve, hiatal hernia, TMJ, cranials, scar clearing, pitch/roll/yaw, dural torque, myofascial release, aerobic muscles, PNF stretching

Biochemical Menu (Page 3): Diet addition, diet deletion, supplement addition

Emotional Menu (Page 8): Emotional quick fix, video technique, six human needs, HeartMath, tapping protocol, neurotransmitters, affirmation technique, belief technique

"I love doing this. Almost every session I do priority head points and I do the emergency mode. I kind of start with the emergency mode, then go into the priority head points."

Diet Addition and Deletion Protocol

When the biochemical emergency mode reveals a need for diet changes, use the following systematic approach.

Diet Addition Procedure

1. With the biochemical mode in circuit, state "Diet addition" — if the muscle goes strong, the body needs foods added
2. Test categories: vegetable proteins, animal proteins, vegetables, healthy fats and oils, fruits, grains, nuts and seeds, herbs and spices, water, eggs
3. For each category that tests strong, drill down into specifics
4. For animal proteins: test grass-fed, organic, pasture-raised vs. commercial/grain-fed
5. For vegetables: test leafy greens, nightshades, etc. individually

Diet Deletion Procedure

1. With the biochemical mode in circuit, state "Diet deletion" — if the muscle goes strong, there are foods to eliminate
2. Test categories: unhealthy fats and oils (especially seed oils like canola), grains, commercial-grown foods
3. Test specific items the client currently eats
4. Determine duration: "Eliminate rice for at least one month? Two months? Three months?"

"Food can be your medicine or it can be your poison. Stop poisoning yourself."

Testing Frequency of Problem Foods:

- Ask the body: "Is it okay to eat [food] once a week? Twice a week?"
- This is not a permanent sentence — after detoxing and rebalancing, the body may handle previously problematic foods

Practical Tip for Clients: Even without muscle testing, pay attention to how you feel after eating. *"Do you feel energized? Or do you say, 'Oh God, I gotta go to sleep'? Your body's always signaling. You just don't connect that it's the food you eat that produces the feeling. Food to feeling — get them starting to be aware."*

Riddler Points for Nutritional Testing

Riddler points are specific body locations that, when circuit-localized, reveal nutritional deficiencies.

Key Riddler Points Mentioned:

Nutrient	Location
B-complex vitamins	Below the navel, fingers angled down ~45° on both sides
Vitamin E	Right side, under the clavicle
Calcium	Above the left clavicle

Memory Acronym for Calcium: BEG — B1, Vitamin E, Vitamin G, which is B2 (riboflavin), the nutrient calcium itself. "Beg for calcium."

Procedure: Touch the Riddler point and test an indicator muscle. If it goes weak, that nutrient is deficient.

Priority Head Points and Five Element Command Points

This is described as one of the most powerful single-point balancing techniques available.

Step 1: Find the Priority Under-Energy Meridian

Touch each of the five-element head points while testing an indicator muscle. The point that causes a change (weak to strong or strong to weak, depending on baseline) reveals the priority under-energy meridian. If more than one shows, use the priority finger mode to determine which to address first.

If nothing shows initially, have the client focus on an intention or goal (health, performance, financial, situational), then retest.

Step 2: Find the Priority Over-Energy Element

Have the client touch their navel (umbilicus) and tug in the pattern of the five elements:

- Up = Fire
- Right = Earth
- Down = Metal
- Left = Water
- Up-right area = check for additional imbalances

The direction that produces the change reveals the over-energy element.

Step 3: Identify the Command Point

Using the chart of five-element command points (Page 5 of the handout):

Rule: Find the color/dot of the OVER-energy element on the UNDER-energy meridian. That is your treatment point.

Practice Examples:

Under-Energy Meridian	Over-Energy Element	Command Point
Spleen	Fire	Spleen 2
Lung	Fire	Lung 10
Kidney	Metal	Kidney 7
Heart	Water	Heart 3

"It's not rocket science. You're only looking for the color of the over-energy element in the meridian that is under-energy."

Step 4: Confirm and Treat

- Circuit-localize the command point — it should test weak (confirming it needs work)
- You can also test related muscles — they will go weak, then go strong when the command point is touched
- Hold or stimulate the point
- Add neurolymphatic work and any other corrections indicated by finger modes
- Retest to confirm clearing

The Sheng Cycle and "Beaver Dam" Concept

Energy flows through the five elements in a specific order: Fire → Earth → Metal → Water → Wood → Fire. When energy is blocked between one element and the next, everything downstream becomes under-energized — like a beaver dam blocking a stream.

"Think of it like a street. This house is partying and pigging out — they're gluttons, they're feasting — and everybody down the street is not getting fed. As soon as you open the flow, then this neighbor feeds the next, and the next feeds the next."

Key Insight: The block doesn't always follow the standard Sheng cycle. It may appear on the superficial energy flow (the 24-hour clock), the Ko cycle (the five-pointed star), or other energy pathways. The beauty of the command point system is that **you don't need to know which cycle is involved** — you simply find the under-energy meridian and over-energy element, and the point handles the rest.

Demonstration Results

During the class demonstration, a student (Guts) presented with adrenal exhaustion:

- Priority under-energy: Spleen (Earth element)
- Over-energy: Metal
- Multiple muscles downstream tested weak: lats, subscapularis, quadriceps, psoas, gluteus medius, circulation-sex
- Command point: Spleen 5 (the metal point on the spleen meridian)
- After stimulating the point plus neurolymphatic work and chakra clearing, ALL previously weak muscles tested strong

"My vision got a lot clearer just when we were doing that correction. And I've had lots of energy moving upwards."

Beginning and End Acupressure Points

These points unblock meridian energy flow and can be used as standalone techniques or integrated into larger balancing sessions. The system was refined by Wally Schmitt based on Goodheart's original findings.

"If you only had this technique and maybe a couple others out of this whole integration course, you could help a lot of people tremendously."

Application 1: Pain Relief

Procedure:

1. Have the client touch the area of pain
2. Test an indicator muscle (it should go weak)
3. Touch each beginning/end point one at a time while retesting
4. The point that restores strength is the treatment point
5. Have the client tap that point while breathing deeply

6. Add eye rotations to help the correction scan through the brain
7. Rate pain on a 0–10 scale before and after

Key Principle: Pain along a meridian pathway indicates blocked energy in that meridian. The beginning/end point of that meridian unblocks the flow.

Example: Pain on the midline of the body → tap Central Vessel points. Pain along the gallbladder meridian path → tap Gallbladder 1.

Case Study: *"I had a woman come to me with four and a half years of stiff neck and pain. Chiropractors, acupuncturists, physical therapists, massage therapists — no results. We tested, and it came up biochemical, diet deletion. We found four foods: chicken, eggs, cow's milk, and cow's milk cheese. She eliminated them for a week, and for the first time in four years, her neck was totally free."*

Application 2: Clearing Upsetting Emotions

Procedure:

1. Have the client think about the upsetting emotion
2. Test the indicator muscle — it goes weak
3. Option A: Have the client step out (separate their legs) to hold the emotion in circuit so they don't have to keep thinking about it
4. Option B: Have them continue thinking about it during testing
5. Touch each beginning/end point to find which restores strength
6. Stomach 1 is the most common clearing point for emotions
7. Have the client tap the identified point while breathing deeply and (ideally) thinking about the emotion
8. Rate the emotional distress on a 0–10 scale and track the reduction
9. If the emotion doesn't fully clear, identify additional techniques needed (video technique, affirmation technique, belief technique, etc.)

Application 3: Clearing Food Sensitivities

Procedure:

1. Have the client hold the problem food against their body (solar plexus area or bottom of the breastbone is ideal)
2. Test the indicator muscle — it goes weak
3. Touch each beginning/end point to find which restores strength
4. Have the client tap the clearing point(s) while holding the food
5. Add eye rotations (open both directions, closed both directions)
6. Take a deep breath
7. Remove the food and retest — the muscle should now stay strong
8. Ask the body how long to avoid the food (typically 4–72 hours)

"I had one woman who couldn't eat eggs without being nauseous for years. We cleared it with the vial, and she had to stay away for 24 hours. Two days later, she ate eggs — no more reactions. And ever since then, she's not had reactions."

Bioenergetic Vials: These contain the vibrational frequency (not actual substance) of foods and can be used in place of real food samples. Organized into categories: vegetables, fruits, meats, seafoods, dairy, grains, beans, sweeteners, nuts and seeds, beverages, oils, and condiments.

Application 4: Organ Support

Procedure:

1. Circuit-localize the organ's neurolymphatic point — if it goes weak, the organ needs support
2. Find the beginning/end point that clears the weakness
3. Tap the point while breathing deeply
4. The practitioner (or client) can simultaneously hold the alarm point for that meridian to enhance the correction

Tip: *"When they're tapping, you can hold the alarm point. That gets more energy flowing into that meridian and clearing it out."*

Application 5: Neurotransmitter Balancing

Key acupressure points correspond to specific neurotransmitters:

Point	Neurotransmitter	Deficiency Symptom
CV-24 (below lower lip)	Dopamine	Low motivation, low libido
GB 1 - outside the eye	Acetylcholine	Various cognitive issues and memory issues
LI-20 (beside nostrils)	GABA	Anxiety, depression, insomnia
Bladder 1 (inner eye)	Serotonin	Ruminating thoughts, insomnia, depression

Procedure: Touch each neurotransmitter point and test. If the muscle goes weak, that neurotransmitter is deficient. Tap the point to stimulate production.

Application 6: Reducing Medication Side Effects

While never advising clients to stop medications, beginning/end points can be tested while the client holds a medication against their body. The point that clears the weakness may help reduce side effects.

"When all else fails and you've done every kind of balancing, do the beginning and end points."

Switching: When Results Don't Make Sense

Critical Concept: Whenever your test results seem to contradict your expectations, suspect neurological switching.

Procedure:

1. Check for switching using your standard switching tests
2. Correct the switching
3. Retest — results should now be accurate

"Anytime that comes up in balancing that's opposite — 'I didn't think that was right' — that's when you suspect switching."

Straight Arm Muscle Tests

Four key muscles are tested with the arm in a straight (locked elbow) position.

1. Anterior Deltoid (Lung Meridian)

- Arm forward, thumb up
- Push down toward the opposite hip
- Can also be tested as the Gall Bladder meridian when positioned directly over the thigh and pushed inward

2. Supraspinatus (Central Vessel)

Meridian Association: Central Vessel

Function: A rotator cuff muscle; its primary job is to hold the shoulder in its socket. Key for shoulder separation issues.

Test Position:

- Arm out to the side approximately 15 degrees
- Slightly forward
- The line of drive is toward the groin
- Stabilize at the opposite shoulder or the same-side shoulder

Indications (from Touch for Health): Brain fatigue from desk work or thinking-intensive tasks; learning problems in children; anxiety and emotional stress.

Helpful Nutrients: Spirulina, bee pollen

Neurolymphatic Point: Located on the head (as referenced during demonstration)

Neurovascular Point: Also on the head

3. Pectoralis Major Clavicular (Stomach Meridian)

Test Position:

- Arm adducted close to the midline
- Internal rotation
- Push down and out at approximately 45 degrees away from the clavicle
- Standing: stabilize doesn't matter (can't recruit against the push direction)
- On the table: stabilize the opposite shoulder or the same shoulder

Neurolymphatic: Left side, intercostal space 5-6

Clinical Note: Often associated with emotional stress and allergies (especially emotion-related allergies).

Supplement Testing Tip: Test this muscle at various angles. When you find the angle at which it goes weak, use that angle to test supplements — the supplement that restores strength is indicated.

Bilateral Pec Test for HCl Deficiency: Test both PMCs simultaneously, pushing down and out. If both go weak together (but are individually strong), this indicates a deficiency of hydrochloric acid.

4. Pectoralis Major Sternal (Liver Meridian)

Test Position:

- Internal rotation
- Push up and out (away from the sternum)
- Standing: stabilize the SAME shoulder (prevents recruiting by leaning)
- On the table: stabilize the OPPOSITE hip

Neurolymphatic: Right side, intercostal space 5-6

Clinical Note: When this muscle tests weak, the liver organ is often under stress or challenged.

5. Latissimus Dorsi (Spleen Meridian)

Test Position:

- Arm at the side, internally rotated
- ELBOW MUST BE LOCKED STRAIGHT — this is the most common error
- Pull straight out (abduction)
- Stabilize at the shoulder

Critical Error to Avoid: If the client bends the elbow even slightly, they recruit the biceps and brachialis, invalidating the test.

Neurolymphatic: Both points on the LEFT side only, at intercostal space 7-8

Postural Sign: A high shoulder on the side of a weak lat (the lat holds the shoulder down; when weak, it rises)

Origin Insertion Work:

- Origin: Spinous processes of the thoracolumbar spine — rub along the side of each spinous process; also, the iliac crest and lumbar dorsal fascia
- Insertion: Upper medial humerus — reach into the armpit area with the thumb

Opposing Muscle Theory:

"Rather than working on the tight muscle, ask: what's the opposing muscle that switched off, causing that muscle to be tight?"

The upper trapezius is the opposing muscle to the lat. Tight upper traps are frequently caused by weak lats — not by overworked traps.

6. Anterior Serratus (Lung Meridian)

Test Position:

- Arm extended forward and slightly up, as if holding a large beach ball
- Push straight down

Function: A shoulder girdle muscle that attaches from the ribs to the scapula (does NOT attach to the arm). It holds the scapula flat against the ribs. The arm is used in testing because it moves the scapula.

Historical Significance: This is the muscle that launched kinesiology — Goodheart's original discovery involved a patient with a winging scapula caused by an inhibited anterior serratus.

Origin Insertion Work:

- Origin: Serrated edge along the ribs (rub along the rib attachments)
- Insertion: Under the scapula — have the client place their arm behind their back to wing the scapula out, then reach underneath with your fingers

Heavy Metal Screening Test

A simple cross-midline test can screen for heavy metal toxicity.

Procedure:

1. Test any strong muscle in its normal position — confirm it holds
2. Now move the limb across the body's midline and retest
3. If the muscle that was strong now goes weak when crossing the midline, heavy metals are likely present

Confirmation: Check priority mode — if the cross-midline weakness tests as a priority (priority mode changes the response), heavy metal detox should be addressed.

"Heavy metals often make people more sensitive to EMFs and other environmental stressors."

The Big Picture: Think Systemic First

The overarching philosophy of this approach is to assess the whole system before zeroing in on the presenting complaint.

"Wally Schmitt says, 'Think systemic first.' Think overall systemically first, then go in and look at the pain area. Pain is the puddle on the floor — you want to see what it's coming from."

The Traffic Report Metaphor

Think of assessment like a helicopter traffic report:

"You're in Copter ABC7 hovering over — 'Oh, we see a SIG alert on the 405. It's backing up traffic onto the 10, and the surface streets are getting backed up.' You get the whole view. That's what you're doing with the body. You're getting the overview: 'Oh, we need to do some stuff in the electrical. There's a jam on the heart meridian going into the spleen.' You're getting a big picture."

Session Flow Summary

1. **Hydration** — Hair pull test first
2. **Emergency Mode** — Determine structural, biochemical, or emotional/electrical priority
3. **Priority Head Points** — Find the under-energy meridian
4. **Navel Tugging** — Find the over-energy element
5. **Command Point** — Identify and treat the five element balancing point
6. **Additional Corrections** — Use finger modes to determine what else is needed (neurolymphatics, chakras, origin/insertion, beginning/end points, etc.)
7. **Retest** — Confirm all previously weak indicators are now strong

When to Use Emergency Mode:

- Recommended for the first few sessions with any client
- Not mandatory every session, once you know what works for them
- Especially useful when the presenting complaint doesn't match what you'd expect

"If biochemical comes up and they're coming in for back pain, or emotional comes up and they're coming in for back pain — I know I'm definitely going to check that too."

Remember: Where You Think It Is, It Ain't

Goodheart's principle reminds us that the source of a problem is rarely where the symptom appears. A neck pain lasting four years turned out to be food sensitivities. Debilitating headaches were caused by dietary triggers, including caffeine. Heart palpitations were caused by EMF sensitivity.

"It can come from living, eating, and thinking. And the problem with Western conventional medicine... keeping yourself balanced through the whole picture is key."

Key Takeaways for Practice

1. **Always hydrate first** — test with the hair pull before anything else
2. **Emergency mode gives you a session roadmap** — even if you don't fix everything it reveals, you know where to focus
3. **The command point system is a powerful single-point balance** — one point can clear an entire cascade of muscle weaknesses
4. **Beginning/end points are your Swiss Army knife** — pain, emotions, food sensitivities, organs, neurotransmitters, and medication side effects
5. **Switching explains contradictory results** — when something doesn't make sense, check for switching immediately
6. **The opposing muscle theory saves time** — don't chase the tight muscle; find the weak one on the other side
7. **Food is often the hidden culprit** — diet addition and deletion testing can transform cases that have resisted all other treatment
8. **Practice self-testing daily** — finger testing or quadricep testing during routine activities builds skill and keeps you balanced