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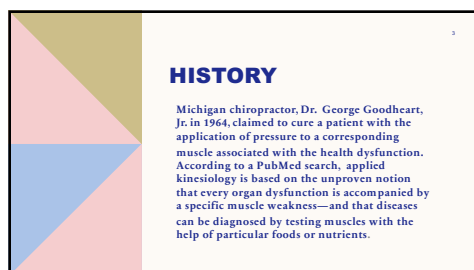
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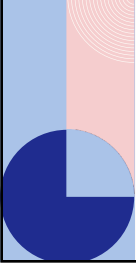
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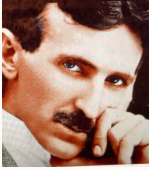
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**NIKOLA TESLA**



Serbian scientist who first proposed that all matter, including human beings, are comprised of energy, frequency, and vibration

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**EVERYTHING IS ENERGY WITH VIBRATORY STATES**

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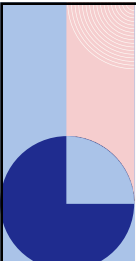
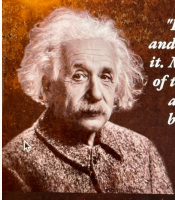
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*"Everything is energy and that's all there is to it. Match the frequency of the reality you want and you cannot help but get that reality."*

- Albert Einstein

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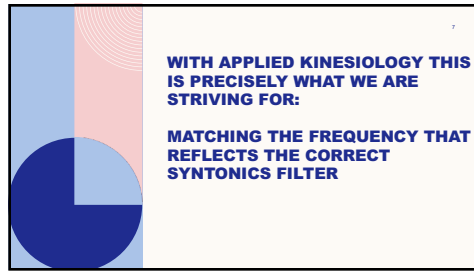
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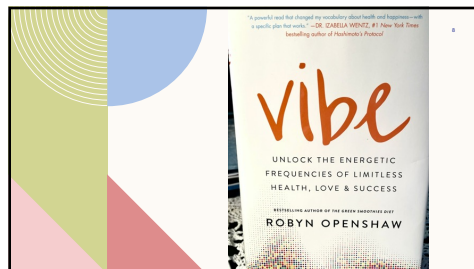
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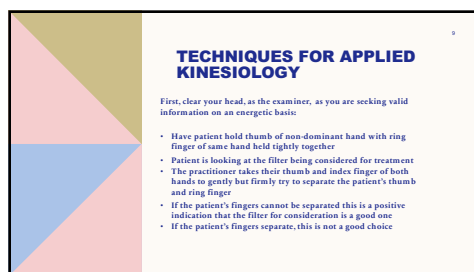
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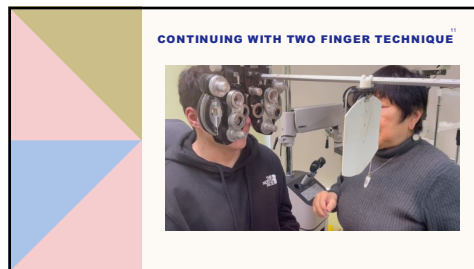
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#### CONTINUING WITH TWO FINGER TECHNIQUE

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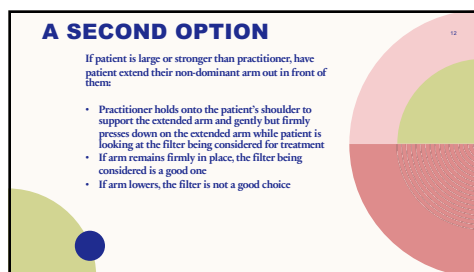
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#### A SECOND OPTION

If patient is large or stronger than practitioner, have patient extend their non-dominant arm out in front of them:

- Practitioner holds onto the patient's shoulder to support the extended arm and gently but firmly presses down on the extended arm while patient is looking at the filter being considered for treatment
- If arm remains firmly in place, the filter being considered is a good one
- If arm lowers, the filter is not a good choice

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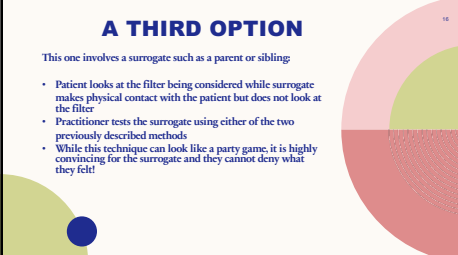
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### A THIRD OPTION

This one involves a surrogate such as a parent or sibling

- Patient looks at the filter being considered while surrogate makes physical contact with the patient but does not look at the filter
- Practitioner tests the surrogate using either of the two previously described methods
- While this technique can look like a party game, it is highly convincing for the surrogate and they cannot deny what they felt!



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### SURROGATE TESTING




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### ANOTHER BLOOPER WITH A HUNGRY AND UNINTERESTED 12 YO




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## RESPONSES

- With young children, a surrogate is often much more reliable as a child's ability to consistently hold their fingers together are unreliable
- An incredulous look from patients unfamiliar with applied kinesiology (those familiar with applied kinesiology have often had a chiropractor or complementary health care provider perform applied kinesiology on them) but the subject cannot deny the difference in strength when the filter is the correct one versus the incorrect one!

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## CASE OF CHANGE IN FILTER NEEDED

A seven year-old child with left exotropia who tested with applied kinesiology the need for alpha omega followed by mu upilon (the conventional formula for exotropia) but at the progress visit, no changes in kinetic visual fields were noted.

Upon retesting for the right filters, the child tested the need for alpha omega as before but the second filter needed was mu delta!

Further questioning revealed the patient's grandmother had passed away the week after her visit with me and the little girl had been very close to her grandmother!

In this case, the recent emotional trauma preempted mu upilon because the loss of her grandmother was a more immediate need to restore balance to her autonomic nervous system

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## AN ADDITIONAL TOOL FOR HOW LONG TO PRESCRIBE A FILTER FOR A CHILD OR FRAGILE TBI

1. Examiner clears their head to be objective
2. Examiner mentally (silently) asks the question as to how much time for each filter, 20 mins, 10 mins, or 5 mins
3. If none of the above is positive, then start with 1 minute and keep moving up in time to determine the optimum treatment time for each filter
4. Applied kinesiology may also be used to determine how many home sessions are needed if practitioner unsure how long to prescribe the filters if case does not appear straightforward to use regular protocol of 2-3 weeks which would be 10-15 sessions at home

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### Practice Management Results:

- Patients often feel "at home" when applied kinesiology is used as they were seeking a more alternative health solution than Big Pharm Rx or eye muscle surgery
- Patients unfamiliar with Applied Kinesiology can still be appreciative of this additional probing for the best treatment options as long as practitioner gives an explanation that the patient can understand and appreciate this as evidence of a more complete evaluation



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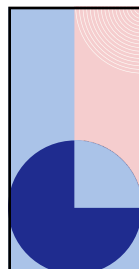
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### IN SUMMARY



- As, Dr. Henry Hofstetter, Former Dean of the Indiana University School of Optometry, once advised: *"Confidence before Competence"*

Just do it! Practice with staff members and family members until you become more confident of your ability to use this new, powerful tool as an important adjunct to all your other clinical tools!



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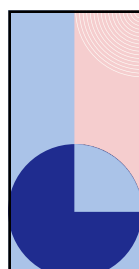
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### BE BOLD, NOT REGULAR



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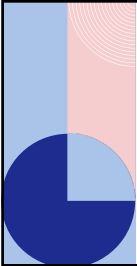
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## IN CONCLUSION



If any questions, contact me at:

- [dr@ryanhov.com](mailto:dr@ryanhov.com)

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