

## Sympathetic/Parasympathetic Support System Analysis Table

(Pa-P1)	Resp. Rate	Arm Dermo	Leg Dermo	IMBALANCE X = Eliminators	Edema	SUPPLEMENTS
-4 -	18 +	R2 → W3	0 → W4	Alpha 1- Adrenergic X Pa = 64- X Warm Hands X Small Pupil = (unless cataract)	0 → 1	<b>Actvtr (2,2), IS XF (2,2), Comp S (-,3);</b> Pa-P1 -6- = Comp S (2,3), K Cit (½, -); <b>Resp Rate 20+</b> = Comp S (2,3), K Cit (½, -); <b>Arm R2</b> = MgCl2 (1,-), Proton Plus (-,2); <b>Edema 1+ or Leg W3+</b> = Oxy D (-,2), Oxy D+ (-,10), E Tonic (¼,¼), Oxy-Max (1,1); <b>Pulse Pressure &gt;50</b> = Comp S (2,3), K Cit (½,-); <b>Pupil Large</b> = Comp S (2,3); <b>Diarrhea</b> = Comp S (-,2), Glutamine (2,-); <b>Body Temp Low</b> = Comp S (-,2), Oxy A (2,-), E Tonic (-,½), NaGP (-,1), MgCl2 (1,-); <b>Obesity</b> = Comp S (-,2); <b>Ventral Forearm Cooler than Dorsal</b> = Comp S (2,3); <b>Diabetes</b> = Taurine (2,2), Adapto-Max (2,-), Oxy-Max (-,2); <b>Sneezy/Itchy</b> = Oxy D (-,2), Oxy D+ (-,10), Oxy-Max (1,2), MgCl2 (-,1); <b>Mean BP &gt;120</b> = K Cit (½, -); <b>Insomnia</b> = Oxy D (-,2), Oxy D+ (-,10), Oxy-Max (-,2), E Tonic (-,½), MgCl2 (-,1)
6 +	14 -	R4 → R1	R3 → W1	Alpha 1- Adrenergic Insufficiency  X Pa > 77	1 +	<b>Actvtr (2,2), IS PW (2,2), Comp P (2,2);</b> Pa-P1 8+ = Comp P (3,2), NaGP (2,-); <b>Resp Rate 12-</b> = Comp P (3,2), Phenylalanine (3,-), Phos Drops (10,10); <b>Arm R3+</b> = Comp P (3,2), Form EI (1,1); <b>Leg R2+</b> = Comp P (3,2), Oxy A (2,-), Oxy Tonic (½,-); <b>Edema 3+</b> = Comp P (3,2), Phenylalanine (3,-), Oxy D (-,2), E Tonic (-,½), Phos Drops (10,10); <b>Edema 2+ &amp; Leg W1+</b> = Oxy D+ (-,10); <b>Diarrhea</b> = Oxy D (-,2), E Tonic (-,½), Glutamine (2,2), IS XF (2,2); <b>Constipation</b> = Oxy Tonic (1,-), MgCl2 (-,1), NaGP (2,-), <b>Ventral Forearm Warm</b> = Comp P (3,2); <b>Pulse Pressure &lt;30</b> = Comp P (3,2), Form EI (2,2), E Tonic (½,½); <b>Low Body Temp</b> = E Tonic (½,½), NaGP (1,-), Phos Drops (-,10); <b>Somnolence</b> = Oxy A (2,-), Oxy Tonic (1,-), NaGP (1,-), Phenylalanine (3,-); <b>Arm R1+ Persists 8+ Mins</b> = Oxy A (2,-), Oxy Tonic (1,-), Sunlight
5 +	18 -	R4 → R1	R2 → W2	Vagotonia  X Pa > 77	1 +	<b>Actvtr (2,2), IS PW (2,2), Comp P (2,2);</b> <b>Resp Rate 12-</b> = Comp P (3,2), Phenylalanine (3,-), Phos Drops (10,10); <b>Leg R2</b> = Oxy A (2,-), Oxy Tonic (1,-), Taurine (1,1); <b>Asthma</b> = Comp P (3,2), Adapto Max (3,-), Oxy-Max (-,3) Phenylalanine (3,-), MgCl2 (½,½); <b>Pa-P1 7+</b> = Comp P (3,2); <b>Arm R3+</b> = Comp P (3,2), Form EI (1,1); <b>Edema 2+</b> = Comp P (3,2), Phenylalanine (3,-), Oxy D (-,2), E Tonic (-,½); <b>Edema 2+ &amp; Leg W1+</b> = Oxy D+ (-,10); <b>Sneezy/Itchy</b> = Comp P (3,2), Phenylalanine (3,-), Phos Drops (10,10); <b>Diarrhea</b> = Oxy D (-,2), E Tonic (-,½), Glutamine (2,2), IS XF (2,2); <b>Constipation</b> = Oxy Tonic (1,-), MgCl2 (-,1), NaGP (2,-); <b>Arm R1+ Persists 8+ Mins</b> = Oxy A (2,-), Oxy Tonic (1,-), Sunlight
				β1, β2, β3 Adrenergic		ATP → cAMP = cAMP → Vasodilation of Skin plus Edema? = Need NaHCO3/Citrate; ↑ Th2 = IL-4, 5, 6, 10; ↓ Th1 = IFN, TNF, IL-2; LPS - induced IL-6
-4 -	18 +	0 → W4	0 → W4	β2 - Adrenergic X Pa = 64- X Asthma X Sneezy/Itchy	0 → 1	<b>Actvtr (2,2), IS XF (2,2), Comp S (-,3), Taurine (2,2), Form ES (3,3);</b> Pa-P1 -6- = Comp S (2,3); <b>Resp Rate 20+</b> = Comp S (2,3); <b>Mean BP &gt;120</b> = K Cit (½, -); <b>Constipation or Food Sticks in Esoph</b> = Comp S (1,3), MgCl2 (1,-); X <b>Caffeine</b>
-4 -	18 +	R1 → W4	0 → W4	β1 - Adrenergic X Pa = 64- X Constipation	0 → 1	<b>Actvtr (2,2), IS XF (2,2), Comp S (-,3), Taurine (2,2), Form ES (3,3);</b> Pa-P1 -6- = Comp S (2,3); <b>Resp Rate 20+</b> = Comp S (2,3); <b>Arm R1/0</b> = IS PW; <b>SpH2 75+</b> = Comp S (1,3); Na Cit (1,-); "Stomach Growls" or "Hunger Pains" = Comp S (2,2), Na Cit (½, ½); <b>Mean BP &gt;120</b> = K Cit (½, -), X Na Cit;
-3- → 3	16 +	R2 → W3	0 → W4	β3 - Adrenergic X Low Temp X Obese	0 → 3	<b>Actvtr (2,2), IS XF (2,2), Comp S (-,3);</b> Pa-P1 -6- = Comp S (2,3); <b>Resp Rate 20+</b> = Comp S (2,3), Na Cit (1,-); <b>Arm R1+</b> = IS PW; <b>Edema 2+ or Leg W3</b> = Oxy D (-,2), Oxy D+ (-,10), E Tonic (¼,¼); <b>Pupil Large</b> = Comp S (2,3); <b>Insomnia</b> = Oxy D (-,2), Oxy D+ (-,10), E Tonic (-,½), MgCl2 (-,1)
-3 → 3	16 +	R2 → W3	0 → W4	Alpha 2- Adrenergic (*opposes β1, β2, β3) X Diarrhea X Hypoglycem	1 → 4	<b>Actvtr (2,2), IS XF (2,2), Comp S (-,2), Taurine (2,2), Form ES (2,2);</b> <b>Edema 3+ or Leg Dermo W3+</b> = MgCl2 (-,1), Oxy D+ (-,10), E Tonic (¼,¼); <b>Edema 2+ &amp; Leg W1+</b> = Oxy D+ (-,10); <b>T1 Diabetes</b> = Comp S (-,3), Oxy K (2,-); <b>Constipation or Food Sticks in Esoph</b> = Comp S (1,2), MgCl2 (1,-)
0 +	16 -	R4 → R2	R4 → W2	Histamine Excess &/or PGEI Insufficiency	2 +	<b>Actvtr (2,2), IS PW (2,2), Comp P (3,1), Phos Drops (-,10);</b> <b>Resp Rate 12-</b> = Comp P (2,2), Phenylalanine (3,-), Phos Drops (10, 10); <b>Leg R2+</b> = Oxy A (2,-), Oxy Tonic (1,-), Taurine (1,1); <b>Low Body Temp</b> = Comp P (2,2), Phenylalanine (3,-), Phos Drops (10,-), Proton Plus (-,2), E Tonic (-,½); <b>Sneezy/Itchy</b> = Phos Drops (10,-), Proton Plus (-,2), Phenylalanine (2,-); <b>Ms Cramps</b> = Phos Drops (10,-), Proton Plus (-,2), Form EI (1,1), MgCl2 (½,½) <b>Insomnia</b> = Proton Plus (-,2), E Tonic (-,1); <b>Caffeine</b> = OK; <b>X Aspirin;</b> <b>Pa &lt; 64</b> = Form EI (2,2), E Tonic (½,½); <b>Arm R2+ Persists 8+ Mins</b> = Oxy A (2,-), Oxy Tonic (1,-), Sunlight

(Pa-P1)	Resp. Rate	Arm Dermo	Leg Dermo	Eliminators	Edema	SUPPLEMENTS
0 → 4	14 → 18	R4 → R2	R4 → W2	PGD2 X Pa > 77 X Insomnia X High BP X Constipation	0 → 2	<b>Actvtr (2,2), IS PW (2,2), Comp P (3,-), Oxy A (2,-);</b> <u>Leg R2+</u> = Oxy A (2,-), Oxy Tonic (1,-), Taurine (1,1); <u>Pa &lt; 64</u> = Form EI (2,2), E Tonic (½,½); <u>Somnolence</u> = Comp P (3,1), Oxy A (2,-), Oxy Tonic (1,-), Form EI (1,1), Phenylalanine (3,-); <u>Asthma</u> = Comp P (3,1), MgCl2 (½,½); <u>Low Body Temp</u> = Comp P (2,2), MgCl2 (½,½), E Tonic (¼,¼); <u>Diarrhea</u> = Comp P (2,2), Glutamine (2,2), E Tonic (½,½); <u>Obese</u> = Oxy A (2,2), Oxy Tonic (1,-), Phenylalanine (3,-); <u>T2 Diabetes</u> = IS RE
0 → 4	14 → 18	R1 → W2	R2 → W3	PGE2 X GI Ulcers X IBD X Low Temp X Sneezy/Itchy	2 +	<b>Actvtr (2,2), IS RE (2,2), Comp P (2,-), Comp S (-,2), Adapto-Max (1,-), Oxy-Max (-,1), Taurine (1,1);</b> <u>Leg R2</u> = Oxy A (2,-), Oxy Tonic (1,-), Taurine (1,1); <u>Insomnia</u> = Oxy D (-,2), E Tonic (-,½); <u>Fibromyalgia/“Ache all over”</u> = Adapto-Max (3,-), Oxy-Max (-,3), Taurine (2,2); <u>Arm R1+ Persists 8+ Mins</u> = Oxy A (2,-), Oxy Tonic (1,-), Sunlight
0 +	X	R4 → 0	R2 → W4	LTB4	2 +	<b>Actvtr (2,2), IS PW (2,2), Comp P (3,-), Adapto-Max (1,-), Oxy-Max (-,1), MgCl2 (½,½);</b> <u>Leg W2+ &amp; Edema</u> = Oxy D (-,2), Oxy D+ (-,10), Proton Plus (-,2); <u>Asthma</u> = Comp P (3,2), Adapto-Max (3,-), Oxy-Max (-,3), Taurine (1,1), Phos Drops (10,10); <u>Arm R1+ Persists 8+ Mins</u> = Oxy A (2,-), Oxy Tonic (1,-), Sunlight; <u>Pa &lt; 64</u> = Form EI (2,2), E Tonic (½,½)
0 → 4	14 → 18	R4 → 0	R2 → W2	Adenosine (opposes NorEp) X High BP X Sneezy/Itchy X Arrhythmia	0 → 2	<b>Actvtr (2,2), IS RE (2,2), Comp P (2,-), Comp S (-,2), Oxy A (2,-);</b> <u>Edema 2 &amp; Leg W1+</u> = Oxy D+ (-,10); <u>Somnolence/Yawning</u> = Comp P (3,-), Comp S (-,1), Phenylalanine (3,-), Oxy Tonic (1,-); <u>Asthma/Bronchitis</u> = Comp P(3,-), Comp S (-,1), Adapto-Max (1,-), Oxy-Max (-,1), MgCl2 (½,½); <u>Nausea</u> = Phos Drops (10,10), E Tonic (¼,¼); <u>Caffeine</u> = OK; <u>Arm R1+ Persists 8+ Mins</u> = Oxy A (2,-), Oxy Tonic (1,-), Sunlight, IS PW
-3 → +	18 -	R4 → 0	R4 → W2	CRH Stress	2 +	<b>Actvtr (2,2), IS PW (2,2), Comp P (3,1), Phos Drops (-,10);</b> <u>Resp Rate 12-</u> = Comp P (2,2), Phenylalanine (3,-), Phos Drops (10, 10); <u>Leg R2+</u> = Oxy A (2,-), Oxy Tonic (1,-), Taurine (1,1); <u>Low Body Temp</u> = Comp P (2,2), Phenylalanine (3,-), Phos Drops (10,-), Proton Plus (-,2), E Tonic (-,½); <u>Sneezy/Itchy</u> = Phos Drops (10,-), Proton Plus (-,2), Phenylalanine (2,-); <u>Ms Cramps</u> = Phos Drops (10,-), Proton Plus (-,2), Form EI (1,1), MgCl2 (½,½); <u>Insomnia</u> = Proton Plus (-,2), E Tonic (-,1); <u>Caffeine</u> = OK; <u>X Aspirin</u> ; <u>Arm R1+ Persists 8+ Mins</u> = Oxy A (2,-), Oxy Tonic (1,-), Sunlight
0 +	12 - 17	R1 → W4	R1 → W4	PGI2 Deficiency/ cAMP Deficiency	1 +	<b>Actvtr (2,2), IS RE (2,2), Comp P (3,-), Adapto-Max (2,-), Oxy D (-,2), Oxy D+ (-,10), E Tonic (¼,¼);</b> <u>Check Thyroid</u> ; <u>Caffeine</u> = OK
5 +	17 -	R4 → R1	R2 → W1	Parasymp + Anaerobic	0	<b>Actvtr (2,2), IS PW (2,2), Comp P (2,-), Oxy A (2,-), Oxy Tonic (½,-), Phos Drop (-,10);</b> <u>Resp Rate 12-</u> = Phos Drops (10,10), MgCl2 (½,½), Oxy K (-,2); <u>Somnolence</u> = Oxy Tonic (1,-), Phenylalanine (3,-), <u>Constipation</u> = Oxy Tonic (1,-), MgCl2 (-,1)
5 +	16 -	R2 → W1	W1 → W4	Parasymp + Dysaerobic	1 +	<b>Actvtr (2,2), IS XF (2,2), Comp P (2,-), Oxy D (-,2), Oxy D+ (-,10), E Tonic (¼,¼);</b> <u>Resp Rate 12-</u> = Phos Drops (10,-), Proton Plus (-,2); <u>Diarrhea</u> = Oxy D+ (10,20), E Tonic (½,½), Glutamine (2,2); <u>Constipation</u> = NaGP (1,-), MgCl2 (-,1); <u>Fatigue</u> = NaGP (1,-), Phenylalanine (3,-), Glutamine (-,2);
0 -	16 +	R1 → W4	0 → W4	Glucogenic	0 → 4	<b>Actvtr (2,2), IS XF (2,2), Oxy G (2,2), NaGP (1,1), NaCit (½,½);</b> <u>Pulse Pressure &gt; 50</u> = KCit (½,-), X NaCit; <u>Mean BP &gt; 120</u> = KCit (½,-), X NaCit, Form ES (2,2); <u>Body Temp Low</u> = E Tonic (½,½), X NaCit; <u>Insomnia</u> = Oxy D (-,2), E Tonic (½,1), Oxy D+ (-,10)
√	√	√	√		√	<b>Actvtr (2,2), IS Per Selection Criteria, [Oxy Tonic, E Tonic, Oxy D+ per BALANCING PROCEDURE],</b> <u>Individualized DNP</u> --- OR --- <u>Age 33+</u> = DP AM (1,-), Taurine (1,-), DP PM (-,1), Oxy A (1,-), Oxy D (-,1); <u>Age 53+</u> = DP AM (2,-), Taurine (1,1), DP PM (-,2), Comp P (1,-), Comp S (-,1)

## **CRUISING THROUGH YOUR SYMPATHETIC/PARASYMPATHETIC SUPPORT SYSTEM ANALYSIS**

Your S/PSS is extraordinarily broad in scope. It gives you a window through which to view not only your patients' acute phase ImmunoNeuroEndocrine responses via the Autonomic Nervous System, but offers as well a solid look at where each patient stands with regard to Electrolyte Imbalance, Anaerobic/Dysaerobic Imbalance, Glucogenic/Ketogenic Imbalance, Acid/Alkaline Imbalance, and Prostaglandin-Nitric Oxide Imbalance.

Here are your instructions for moving smoothly from your Dual Purpose Test Results Form into the S/PSS Analysis Table:

1. You will cruise through the Analysis Table considering each of the 17 potential Imbalance Test Patterns in turn --- stopping only when you find a perfect match.
2. Have your brain grab ahold of the first 4 tests (Pa – P1, Respiratory Rate, Arm Dermo, and Leg Dermo) and carry them to the Analysis Table. So, your brain will latch onto 4 numbers such as these --- **5, 16, R2, W1**.
3. Moving in order through the sequence of Imbalance Patterns, scan your Analysis Table for a perfect match.
4. Points of Clarification:
  - (Pa-P1) = “5+” means subtracting P1 from Pa gives a difference of 5 or more = 5, 6, 7, 8, 9 →
  - (Pa-P1) = “-4-” means that subtracting P1 from Pa gives a difference that is a negative number of -4 or more negative than -4 = -4, -5, -6, -7, -8, -9 →
  - Think of the Arm & Leg Dermographics as a scale measured left to right, from most Red to most White = R4, R3, R2, R1, 0, W1, W2, W3, W4.
    - So --- “R2 → W3” means all findings within that range --- from as Red as R2 through as White as W3.

5. When you locate a perfect match to those 4 tests, pause for a moment to consider the “Eliminators” column. These are signs or symptoms that eliminate this Imbalance Pattern from further consideration. --- If there are no Eliminators, then go on and check the Edema column to see if you still have a perfect match. If you do not come up with a perfect match, then continue on your scan to the next Imbalance Test Pattern.
6. When you have your perfect match, then move to the right to choose your patient’s Supplements ....
  - The first thing you will see are some Supplements listed in bold face. These are the foundational Supplements indicated for that patient. ----- However --- you can be far more specific in individualizing your NUTRI-SPEC regimen for each patient. Continue through the Supplement section considering each underlined item ....
  - If an underlined item does not apply to that patient just skip right on to the next. When you find an underlined item that does apply to this patient, then Supplements will be listed that either add to or change the Supplements already tentatively chosen. Each time you come to an underlined item that applies to your patient, you will either add to, delete from, or modify the dosage of Supplements already chosen.
7. Write your final Supplement selections on that patient’s Test Results Form, as these constitute the recommendations you make today, and that the patient will follow until some future follow-up test date.
8. Explanation of Supplement Doses:
  - Each Supplement name is followed by two numbers in parentheses. The first number represents the quantity to take at breakfast, and the second number represents the quantity to take with the evening meal (or at bedtime, for evenings when supplements cannot be conveniently taken with the evening meal).
  - For powdered electrolytes, the numbers in parentheses refer to scoops or fractions of a scoop.
  - For Oxy D+ and Phos Drops, the numbers refer to the number of drops.

- For Electro Tonic, the numbers refer to teaspoons or fractions of a teaspoon.

9. Illustration: Suppose the numbers you pull off the Dual Purpose Test Results Form for (Pa – P1), Respiratory Rate, Arm Dermo, and Leg Dermo are --- 6, 16, R2, W1. As you carry those 4 numbers on your quick scan of your Analysis Table you hit a perfect match for Vagotonia. None of the Eliminators apply to this patient, so you check the Edema and sure enough, you have an Edema of 1, which gives you a perfect match. Tentatively, you note the primary Supplements for this patient as Activator (2,2), IS Immune Power (2,2), and Complex P (2,2).

Cruise through the rest of the Supplement selection process and you find ....

- the Respiratory Rate of 12- does not apply,
- the patient does not have Asthma,
- the Arm is not R3+,
- the Leg is not R2+,
- Edema is not 2+,
- the Edema 2+ and Leg W1+ does not apply,
- the patient's complaints do not include being Snezy or Itchy ---
- --- However, the patient does complain of somewhat frequent Diarrhea. So, to the tentative Supplements you will add Oxy D (-,2), Electro Tonic (-,½), Glutamine (2,2), and you will change the Immuno-Synbiotic from Immune Power to Immune X-Flam (2,2).

Moving on ....

- the patient does not complain of Constipation,
- the Arm Dermographics does not persist more than 8 minutes ---
- --- So, you are finished.

Your patient will need Activator, IS Immune X-Flam, Complex P, Oxy D, Electro Tonic, and Glutamine.

10. The 17 IMBALANCES listed in the Analysis Table below are consistent with the test results indicating that Imbalance. However, you will find that often these Imbalances are transient, and subsequent test results will be consistent with an entirely different Imbalance. At that time, fine-tune the Supplements in consideration of the new Imbalance Test Pattern.