



Advanced Video Course DVD Curriculum

**Bio-Resonance Testing: Simplified yet more effective.
Practice. Strategies. Clinical work.**

Disc 1 of 9

[Ch 3]

Introduction.

Incredible accuracy of FCT[®] testing. Example of patient that was tested blind. Why we don't normally test blind. Bio-resonance testing under FCT[®] is not a mere mechanical act, but mandates intelligent and critical clinical assessment of the findings. Limitations of patient's self-knowledge and its clinical/testing implications.

Case analysis: Clinical judgment. How bio-resonance testing can be both accurate and deceptive. Correct sequence of treatment. Acute vs. chronic states.

Remote testing. Use of Hypothalamus filter to assess therapeutic response.

Section One: Student Case Presentations & Advanced Questions.

[Ch 4]

Parkinson's patient. Aluminum. Issue of number of organs treated.

Case of fibroids & papilloma virus. Weak prey: Why chronic infections are inevitable and cannot be terminated through products while terrain is soiled.

Ways to address this.

New sarcodes: nasal mucosa. Troubleshooting. Making new moves.

Vaccine side effects. Case of eczema & asthma. How and what key immune organs vaccines often affect. Thimerosal vs. vaccine itself. Discussion of different treatment approaches, e.g. whether to use a vaccine isode, metal isodes, sarcodes, classical homeopathic remedies as Thuja or Silica. Asthma & eczema.

Simplifying the testing while making it more productive.

Section Two: Radical New System of Deep DNA/RNA Treatment.

A considerable leap: Combining sarcodes with DNA therapeutically, raising the sarcodes potencies. New methodology is (i) very effective; (ii) time-saving; (iii) much deeper. Which toxins can and cannot be released, why and how?

[Ch 2]

Pushing boundaries of sarcodes potencies. Current limits. Typical and max. DNA potency. Useful sarcodes in Parkinson's.

Investigated use of DNA imprinting for healing/recharging purposes.

Advantages.

Depth of treatment and its impact on therapeutic regimes.

RNA. Combining it with DNA. RNA potency range.

Case examples of new system:

#1: Human Papilloma Virus. Cervix pathology. Intercourse as a vehicle for toxic invasion. EMFs in bedroom. DNA healing potencies. Time gap between sarcodes and body processing time. Importance and testing of lymphatic system. Tuberculinic miasm and its impact on the immune and endocrine systems. Do we repeat very high DNA potencies? Testing on Multi-Energetic Level: MELs. Their "stretch" and current uses.

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#2: Excruciating arm pain. Cause and management.

Understanding principles of stress response and corresponding clinical implications to evaluate patients' symptoms. Understanding a paradox of intensified symptoms reflecting changing and better health.

#3: Lymphocytic leukemia. Bone Marrow filter. Blood autoisode and autoimmune disease, spectacular response.

Full DNA/RNA scraping procedure. Advantages and limitations of limited subliminal testing. DNA: Understanding order of detoxification. Use of very high DNA potency for this purpose.

#4: Depression, low thyroid, allergies, etc., in a patient in his 70s. Use of RNA/DNA for detoxification. Dramatic progress. Precautions for excretory organs and understanding length of action of high potency sarcodes.

#5: Interstitial cystitis. Cause. Severe photophobia. Excellent response.

#6: Peripheral neuropathy [PN]. Leg-swelling. Tinnitus. Multiple Chemical Sensitivities (MCS).

#7: Bone Marrow.

#8: Chronic pain. Gall bladder, bile ducts.

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#9: Severe respiratory complaints.

#10: Example where MEL splitting was necessary. Combining infectious isodes in the same regimen with organic xenobiotics.

Section Three: New Cases Tested Live with DNA/RNA Methodology.

Case #1: Systemic Lupus Erythomatosis, presented by FCT[®] student.

Joint pain; rash; headaches; fatigue; depression; insomnia; low blood count. Amalgams. Antibiotic residues in foods. New filters: Computer Rays; Digital EMF; Blood. Initial test steps: Vitality. Masking by prednisone! EMF: severe. TV in sleeping area. Contemporary bedroom: rocket launching pad! Caution in the use of phones and other sources of EMFs in the course of treatment. EMFs – the formidable obstacles to cure. LI-Lymph: Penicillin isode. Antibiotics: effects; sources. Testing for and how not to miss parasitosis. Blood. Lymph, Bone Marrow.

Time interval following previous remedy.

Why one cannot do any business with a poisoned immune system: Don't recruit drunken police officers to do work! Brain. Pain and its energy-draining effect. DNA-sarcodes, a fire hose: expected toxic releases. Importance of robust and timely kidney support. Lifelong effects of mercury on kidney function.

Sick organs: begin with the one that is drowning the most. Lack of discharges.
Candidiasis. Adrenal Cortex, importance.
Remedy intervals & sleep. Bile ducts and agents that invade it. Lymph.
Hypothalamus, potency implications. Pituitary. Pineal.
Why classical C and LM potencies are unsuitable for FCT[®]. Inherent deficiency
of classical homeopathic method; inability to prevent aggravations, reasons for.
Skin. Pancreas. Large Intestine Mucosa.

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Spleen. Hair Follicle.

How to test for Stressed Organs. Confused immune system: organ's I.D. card
distorted by toxicity. Capillary. Liver. Determining need for probiotics and
precautions.

Assessing amalgam release and determining replacement priorities.

Final steps. Treatment sequence. Prednisone dependency and future plans.

The necessity for a prompt follow-up. EMF issue. Glandulars for organ repair.

Fillings. Totality. How patients can best approach their doctor in order to reduce
medications when making progress.

[Ch 3]

(Sectn 1 contd) FCT[®] student presentation. Background in Autonomic
Response Testing (ART). History of FCT[®] use on difficult patients resistant to
other forms of treatment. MS (multiple sclerosis) case who had been
worsening, and her excellent progress on FCT[®]. Metals in nerves. Candidiasis
and metals in bone marrow.

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(Sectn 3 contd) Case #2: Autism since 3 years of age (young boy). Case
history. Antibiotics. Vaccines: Extreme reaction to MMR & Meningitis. Many
previous treatment attempts. Chernobyl link.

Consultation with parents. Speech absent; little eye contact; hyperactive.
Connection to amalgam fillings and candidiasis. Vaccine-induced encephalitis & possibly meningitis. Brain & pancreas connection of mercury, antibiotics. Brain-sugar link: dietary considerations. Assessing an intolerance locally vs. systemically.
Bone Marrow. Frontal Lobe. Brain. Pancreas. Kidney. Lymph. Spleen. Spinal Cord.
Checking RES (reticulo-endothelial system) in case of radiation damage.
Screening for brain trauma.

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Discussion of other unsuccessful autism treatments received so far.

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Caution in applying consumer electronics to a child's head that is full of mercury (same with adults). Addressing causes. Vaccine side effects are greatly under-reported since being concealed by pediatricians.

Section Four: Many Miscellaneous Advanced Topics & Issues.

[Ch 4]

Multi-layer testing in infections.

Explosive constitutions & universal reactors – recognition & management.

Tuberculinic miasm. Allergies. Concept of blocked channels – full barrel – and intense washouts. Patients who react even to test vials.

Recurring symptoms: “What could I be missing?” Practical checklist. “Doctor, how long will it take me to get well?” Varying derivative factors. Constitutions.

Environment/lifestyle. Factors that drain or sustain energy.

Practical examples: Premature demise of the Pope, John Paul II (in spite of robust constitution) due to allopathic treatments.

But much older patient (and very sick for a long time, much frailer constitution) doing well on FCT®.

Ways of handling sudden acute situations rapidly. What FCT® can offer to cancer patients. Case examples.

FCT® management of dental infections. Fundamental mistakes in handling dental and other local infections: commonly overlooked systemic background.

The significance of "skipped" most stressful organ(s).

Trojan Horse effect: Other infectious agents may also store and release metals.

Importance of mental "software" in bio-resonance testing. Sound algorithm – great outcomes vs. superficial, "How to" approaches – flip flop results.

Regulation of blood sugar & organs involved.

Routine check of certain filters for antibiotics. Case of runner. Relationship of candida and reappearing old antibiotics. Antibiotics in diet. Antibiotic potency ranges.

Common side effects from use of other supplements. Chlorella.

Caution of combining other therapies with FCT®.

Overuse in treatment of scars. Scars, injuries and classical homeopathic remedies for. Trauma as a hammer, metals as nails.

Use of RNA/DNA sarcodes following autoisodes.

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(Sectn 3 contd) Case #3: Depression & anxiety. History. Role of electric shock therapy, amalgams, antidepressants, antibiotics. Chelation therapy & naturopathic therapies that led to severe deterioration and hospitalization with acute liver crisis. Poor diet. Analysis.

Summary of prior FCT[®] treatments. Antibiotics, emotional center; autoisodes; skin; slow progress, signs of improvement. Blocks in the course. Differentiating true psychogenic depression from toxic one.

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Testing and analysis of the findings.

[Ch 4]

Case discussion. A role of and ways to address blocks if patient is not improving.

Positive experience in treatment of depression/anxiety and panic disorders.

Schizophrenia; patient's cooperation.

Energy and bone marrow. Splitting bone marrow, importance. "Gang of Four"; MELs.

Depression and amalgams. Severe iatrogenic effect of Sanum remedies in history; a sophisticated world famous alternative medicine clinic: a stockpile of weapons does not necessarily amount to a capable army.

Danger of suppressing discharges, even dandruff. Human gut and exposure to agricultural toxins; additives; packaging; pollution. Organic food and safety.

Colloidal silver, beware, tests adversely.

Allergies as the offshoot of toxicities and chronic infections. The role of lymphatic system and inflammation. Practical tips on management.

Steroids/shampoo and beehive of candidiasis. Organic farming practices.

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(Sectn 1 contd) Advanced questions: Combining sarcodes.

Why don't we treat the elimination organs first?

Student case: acute infection.

Key safety issue of covering all key organs or repercussions, otherwise.

Emergency treatments: using very high potencies. The spirit of life.

Electric shock therapy. Detection of and addressing damaged brain through DNA sarcodes.

Drinking water: fluoride and aluminum.

Caution in repeating regimens. Autoisodes: potency guidelines, safety guidelines, anticipation of secondary fallouts; safeguards.

Tapering off supplements, beware of developed dependency on. Autoisodes for various conditions: blood vs. urine. Washouts. Aggravations. Differences between the two.

Mad Cow Disease. Source of blood for therapy. Legality.

Importance of always addressing underlying state even if takes longer vs. suppressing symptoms with fixes.

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(Sectn 3 contd) **Case #4: Hay fever. Low energy, amalgam tattoo. Depression; anxiety; social phobia; panic attacks; indecisiveness.** Colon polyps. History of numerous antibiotics. Mild eczema, osteoporosis, infertility. Desire for fruit. Vitality. Bone marrow tests normal on superficial level, yet yields underlying toxicity upon MEL testing. Lymph, (hay fever, eczema). Parasitosis, refrain from premature treatment or will fail. Addressing immunity first. Caution with probiotics in parasitosis. Kidney. Lymph. Bone. Supportive Apparatus, others.

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Polyp surgery. Frontal Lobe. Adrenal Cortex.

Splitting an organ afterwards: Emotional Center. What is beneath the toxic layer? Emotional assaults? Interrogation with MEL filters. Ascertaining the assaults and their timing: loss (recent); a fright (prior). Classical emotional remedies, case examples. Types of assaults. A case of resolved nightmares for 70 years of being lost in the forest. Case of Alzheimer's triggered by old emotional assault. Case of killed poodle. Life memories as recordings on a hard drive disk, their accessibility. The testing indicates that the patient's

previous treatments for emotional injuries helped only superficially and did not resolve the problem.

Capillary. Offering other relevant sarcodes at end. Checking the supplements (test adversely). Addressing cholesterol level the best – never check it! The cholesterol theory as one of the biggest medical fallacies ever.

Mercury tattoos since amalgams gone. Gums; Lymph; Capillary. Hair loss & worms.

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Student cases: Presentation of Parkinson's case subsequently tested on Disc 9. FCT[®] treatments that she already received. Symptoms: shakes; voice; emotional traumas; insomnia/need for melatonin.

[Ch 4]

Case of depression & urethritis. His course of FCT[®] treatments and immense improvements. Possible classical homeopathic side to the case: discussion of Medorrhinum, inherited miasm of gonorrhoea (sycosis). Medorrhinum & Rolling Stone's Mick Jagger.

Classical homeopathy & FCT[®]. Recommended books.

Classical remedies to be used before or after detox.

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(Sectn 3 contd) **Case #5: Assessment of vitality, bone marrow.** Use of MELs.

Emotional Center: stress identified, trauma, long-term – dating back to childhood. All together three layers: mercury, loss, abuse. The patient confirms all of these.

Basal Ganglia (motor movements), Kidney, Pineal, Hypothalamus, Lymph.

Cerebellum. Adrenal Cortex. Thymus.

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Case #6: P/H: liver disease; diabetes; ulcerative colitis; bone pains; joint/back stiffness; gout; hemorrhoids; antibiotics. Now: hair loss; low energy; swollen nodes; edema; poor memory/word recall; excessive weight; loose stools; poor sleep. 12 amalgams gone.

Bio-resonance testing: Vitality poor. Regulation: off. EMF: mild. Large Intestine-Lymphatics: Tetracycline (yes, patient confirms), Ameba. Bone marrow: yes. LI Mucosa. The toxic agents remain. Supportive Apparatus. Liver.

Kidney. Strong carbonic constitution. Adrenal Cortex. Pineal. Hypothalamus. Lymphatic Vessels. Frontal Lobe. Thyroid. Hair Follicle. Assessing sequence of therapy. Priorities vs. what can and has to be postponed. Pancreas vs. insulin resistance. Diet.

Conclusion of seminar; comment about exams and certification to come.

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