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Quantum Techniques Teleseminar

Advanced Techniques for Healing Yourself and Others: How to Use the
QT Manual *Taking EFT and QT to the Next Level* to Heal Yourself and
Others

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Content of Teleclinic: How to Use the QT Manual *Taking EFT and QT to the Next Level to Heal Yourself and Others*

1. To show you how to most effectively use this manual as a healing tool to take you to the next level of health and wellness in your life today.
2. To show you how to find your core issues blocking your healing or the healing of others by using this manual.
3. To use this manual as a springboard to finding deeper layers on these core issues that is blocking healing.
4. To teach you how to create and use affirmations to support the healing process.
5. To show you how to clear the issues that you find with codes, etc.
6. Participant questions that come in prior to the event or during the webinar will be answered.

Steve: This is Stephen and Beth Daniel the founders of Quantum Techniques. We want to introduce you to this teleclinic which is our third and final one on using the manual *Taking EFT and QT to the Next Level*.

Beth: This evening we have a live demonstration with Nick on some physical and structural issues that he's been dealing with. We're going to go through the manual and show you how to use it to work with physical issues. Are there some underlying issues and beliefs that are somehow contributing to the physical symptoms for Nick or for others? We're encouraging you to test along as we work with Nick and use the affirmations and the code that we'll provide for Nick to clear any of your own blocks to healing that come up as you go through this process. If you find different information than we do when you're testing, that's okay. As we said last week, don't assume that you're wrong and we're right. Interactions between you and the person that you're testing can change the outcome of your answers. If you have a resonating field with Nick you may find something different from us because it's an interaction of energy fields that gives you the answers. Simply go with what you're finding and that will be the right answer for you. I also want to share a little bit from last week's teleclinic. We did a session with Julie live on the phone and we were working largely on trauma issues in her life today and in the past and some real difficult life situations that she's dealing with right now. Subsequent to the live session she gave us some feedback that we wanted to share: "Steve and Beth, Many thanks for your help tonight. We both just said the codes,(she and her husband), it was an odd yet familiar sensation of shaking, the same way that I or John did when we would have to be with my mother (we worked with Julie on childhood issues and fears with her mother). It was a huge release of adrenaline. Then tonight I got freezing cold. It was as if all that old adrenaline had frozen in those fields and it just thawed and was finally released and the sensation that I felt was the movement of all this old stuff leaving finally. Lots of yawning all of a sudden (smiley face) so perhaps I will actually get a good night's sleep after reading the insomnia code. I'm so grateful to you! In gratitude, John and Julie." It will be interesting to see how Julie is doing now that it has been one week since her session. Let's go ahead and move forward with tonight's demonstration with Nick. Nick, are you on the line?

Nick: Hi Beth!

Beth: Hi, how are you?

Nick: I'm good, doing very good. How are you doing?

Beth: Good! Thank you for your willingness to do this. We appreciate it! It helps demonstrate the work and it helps many people work on their own process.

Nick: You're very welcome. I think this is a win/win situation for both of us.

Beth: Yes.

Nick: Thanks for working with me on this.

Beth: Yes, no problem, it is our pleasure. Nick has been a client with Quantum Techniques and has done good healing work, much of it on his own, and has had good success with it. There are a couple of stubborn structural and pain issues that we want to talk about in this evening's teleclinic. We asked Nick to join us to see if there was something we could do to help him with some of these issues by using the *Taking EFT and QT to the Next Level Manual*. Nick, have you done any work with that manual yourself?

Nick: No, not yet.

Beth: Actually that is probably good because then we have a fresh set of eyes looking at this.

Nick: I've gone through the first teleclinic but I have not finished going through the live demonstration from last week.

Beth: That is okay. We are having some revisions made to the manual. I think some of the changes have already been incorporated into the manual that is currently on our web site. Remember, it's helpful to review the manual again in one or two months because energy fields shift and things occur in life that can bring up some of these issues in a different light. For Nick there are three different areas that we will look at tonight. These all are structural and pain related. The first issue that he would like to address is the neck and the thoracic vertebrae, which is basically right under the neck (T1 and T2 which are at the base of the neck). Nick says that these parts of the spine have been misaligned ever since he started working with computers 12 years ago. "I have received dozens of chiropractic adjustments but the alignment doesn't stick for longer than two or three months. When the misalignment occurs, T1 or T2 become inflamed, pain runs up the back of my head, and it's very difficult to even hold my head up straight and turn it from side to side. In the past month my left upper ribcage has consistently misaligned causing pain in the back of the neck and through my left clavicle (collarbone). Again chiropractic puts it back in place but it doesn't hold. I have not been successful with exercises he gave me." I talked to you briefly last week about an exercise to try and that isn't working so we want to find out why. Nick, is there anything else you want to add?

Nick: Yes. I have found in the last 12 years it starts subtly where the T1 and T2 will give out maybe twice a year. It will be hard to hold my head up and I have to go to a chiropractor and I'd be fine for maybe six to eight months.

Beth: Okay.

Nick: The problem has grown in the last five years as my stress level has grown with my job. I've had to spend more time in front of a computer to either analyze contractual issues or client issues. I'm finding that the pain has stayed longer and it takes longer for the chiropractic adjustments to do any good. This last time it took three chiropractic adjustments to get things back in place to where I feel comfortable. It will likely stay that way for a couple months.

Beth: Okay, so it's consistently gotten worse over time?

Nick: Yes, it has consistently gotten worse. We have not worked on this issue with QT; this is the first time I brought it up to you.

Beth: Yes, thank you.

Nick: Absolutely, we've had other issues before this.

Beth: Right, but this is good to work on to get you in even better shape. So what you feel in your body is increased stress at work and also increased computer time?

Nick: Yes, that is part of it. I'm also wondering if the way I'm sitting is structurally incorrect.

Beth: Yes, it is.

Nick: I've been to a couple exercise physiologists and one gave me something to do which I tested and it tested harmful.

Beth: Oh wow, interesting.

Nick: His idea was to put one of my legs on top of something underneath the desk so it supports my back. The idea was to help the back straighten but that didn't test well and it started bothering my hips.

Beth: That doesn't test helpful; you're right on there. You're testing is good, so you know to trust that. Steve's doing some structural testing right now too.

Nick: Okay.

Beth: Let's bring that in. It definitely has something to do with how you're sitting. That tests true.

Nick: Okay. I have no doubt we are going to heal this with Quantum Techniques but I've had to deal with so many other structural things in the last year. Now I'm down to this layer.

Beth: Yes.

Steve: When I check it there is not an EMF field. It's from leaning your head forward. If your head is straight up then the pressure on T1 is straight down. When you're leaning your chin forward like you are going to lean into a punch it puts much more pressure there. So you'll need to learn to tuck your chin in. Many times a physical therapist would recommend doing exercises to strengthen the muscles in the neck. I had a similar issue when I was a psychologist because I was always sitting down leaning toward people versus sitting with my shoulders back and my chin tucked down where it straightens out the spine. You need to train yourself to do that instead of leaning your head forward.

Nick: Okay.

Steve: The other thing is with any kind of chronic pain, we want to control the inflammation. So even if nightshades and sugar are not toxic for you, they will add to the overall level of inflammation of the body. I would get on some curcumin. Have you tried curcumin?

Nick: I have not.

Steve: The one I found that was the most cost effective was on the website www.tumeric-curcumin.com. It was two or three times more potent than other brands. If I remember right you can get 200 capsules for \$38. Take one each in the morning and evening. Are you off of all nightshades?

Nick: Yes I am.

Steve: Good. How long have you've been off of those?

Nick: The first time you told me about it, probably over one year ago.

Steve: Okay.

Nick: And in that year I probably had three bouts of cheating by eating pizza.

Steve: Right.

Nick: It is hard not to eat pizza in over a year since I grew up eating it.

Steve: With most foods if you get off them for a week the effects are over. With nightshades I found that you can eat them and the inflammation they cause can take six to eight weeks to recover from that one exposure. Nothing else that I'm aware of is like that. If we look at these structural issues...

Beth: Should I finish going through the symptoms?

Steve: Sure, go ahead.

Beth: The second symptom that Nick has listed is left front shoulder pain and this is dull pain in front of the shoulder off and on throughout the year. The pain started about 20 years ago

during heavy bench pressing. An MRI in 2008 revealed calcium deposits over the labrum. When calcium appears it is assumed that the labrum has been torn. The third symptom is dull pain under the right knee cap off and on throughout the year. This pain started about 25 years ago. X-rays and orthopedic review at the time did not reveal any damage. Nick, is there anything else on the left front shoulder pain or the knee pain that you would like to add?

Nick: The pain actually started in my right shoulder when I was playing baseball. I got tendonitis in it several times, then had to use my left shoulder much more to compensate.

Beth: Okay.

Nick: The left shoulder has been the one that's hurt the most over the last three to five years.

Beth: Okay.

Nick: My chiropractic office has a laser treatment that they use for torn labrums that has a 60% success rate. I tested that for me and it didn't test well.

Beth: Okay.

Nick: So I wanted to get your opinion on that. It would be like 20-30 treatments.

Beth: Yes, through your field from talking to the chiropractor about it, it doesn't test helpful. Additionally it does not test truthful; it tests neutral.

Nick: Okay.

Beth: It would be one of those things if you tried it once, then you could test it and probably get better information because your body then would have a memory of it.

Nick: Yes I can do that.

Beth: Okay.

Nick: I've done everything to not inflame the left and right front shoulders in terms of working out. I enjoy lifting weights, but I don't bench pressing anymore and I use dumbbells differently. I've been an athlete my whole life weightlifting is something I don't want to give up.

Beth: Right.

Nick: The pain has ranged from none at all to excruciating.

Beth: Okay.

Nick: I interviewed two doctors. They wanted to do a surgery where they put a metal connector on the labrum and I don't want any metal in my body.

Beth: Yes.

Nick: I finished getting all the metal amalgams out of my teeth this year.

Beth: Right, so you're not excited about putting more metal in your body.

Nick: No more frequencies in my body.

Steve: Let's look at that shoulder for a minute, remembering that the labrum is cartilage. If you say labrum, labrum I want to be healthy, labrum I want to be sick? It tests okay. Let's go through the tissue and joint on your shoulder: ligaments, ligaments I want to be healthy, ligaments I want to be sick? It's okay. If you say, tendons, tendons I want to be healthy, it is reversed.

Beth: Yes.

Steve: I've already done this testing for cartilage, nerve tissue, vascular tissue, muscle and bone, and the only thing that shows an issue is tendons. I think that's why the chiropractic is not testing well. I don't think it is a labrum issue. I think it's an inflamed tendon in there.

Nick: Yeah, it makes sense.

Beth: I think there's a tendon weakness in your whole body.

Steve: I think that's where like the curcumin could knock down overall inflammation. We're going to show you some things energetically where if you have something that knocks down the inflammation it won't hurt your stomach. It's a simple spice that would be helpful.

Nick: I'm definitely going to get that.

Steve: So do you want me to run a structural scan?

Beth: Yes. Nick you wanted to ask something before we start?

Nick: Yes, I wanted to say in terms of the only major relief I have received from the pain in both shoulders is having a deep tissue massage of the right bicep tendon.

Beth and Steve: Okay.

Nick: It is extremely painful but for months afterwards it feels a ton better.

Beth: Have you had that done on the left side also?

Nick: Yes.

Beth: The bicipital tendon is right there in that same area.

Nick: The same area.

Beth: Okay, so let's pull that in to the field.

Steve: Something that you might want to check out is to see if there is someone there that does what is called an active release technique. This is where they take a sharp instrument and they strip along the tendon and they break the adhesions along it. It is painful. I've had that done in a couple areas and it released the tissue from old weight lifting injuries similar to yours. That might be worth a couple treatments to see if that would help your condition. It is a chiropractic technique.

Nick: Okay.

Beth: Steve's going to do the structural and the physical scan and I'm going to talk about the manual that we're working on this evening. The other thing to check is calcium. Touch a tendon and say my calcium,

Nick: My calcium.

Beth: Calcium I want to be healthy.

Nick: Calcium I want to be healthy.

Beth: See it goes weak right there. So there is a calcium deposit issue also. So I think we can pull that into the physical scan and try to get his body to take the calcium out of the crystallized form back into a liquid form in the body as it's supposed to be.

Steve: That's one of those non-physical issues to check, whether it's kidney stones, gall bladder or calcium. We need to ask the question, what is going on when things that are normally in solution are solidifying and going into crystalline structure in a person's life. Where do they need to be more fluid and let go of some rigidity? I'm not saying that's an issue but that's something to consider as we move through this on a non-physical level.

Nick: That makes sense to me.

Steve: When you said that you had an exercise, which exercise was that? You hadn't had a chance to see much change yet. On the bottom paragraph it says, "I have not been successful with the exercise that you gave me."

Beth: We were doing a session with his daughter and I had him touch over the left rib under the

clavicle and do the parasympathetic recovery. But from what I'm hearing now it's much bigger than this rib.

Steve: Right, I didn't know what that was referencing. When I'm looking at structural issues I check four or five things and one of them is unilateral muscle. In the work that we do if the back is going out it is because there's a muscle that for some reason is weakened and many times even before I scan for pathogens, I'll go in and find out what muscles and organs are weakened. Because then before I do my scan, I am telling the body I want a tight microscopic look at these organs and glands so that it will be more cost effective. When I check that for you it shows unilateral muscle weakness. If I go through and ask which organs or glands are involved the first one that comes up is the small intestine, which is controlling a couple of muscles along the quads and one in the hand. The bladder controls the erector spinae muscle that runs up and down the side of the spine, so I want to pull that in. The adrenals control the back of the calf; the groin controls the piriformis muscle. There are several others but I am hitting the main ones. The muscles running down the side of your neck are controlled by the kidneys. I know that there is something going on with those organs or glands causing you to not be able to hold the structural treatments. If I check the cranial sacral is not out right now but you do have something called tenesgrity which is out on one side. So what I am going to do now is go and look at those organs and glands by running our regular Physical Scan Level II.

Beth: For people that are listening, tenesgrity means what we're testing for is spinal misalignment. Steve was saying there was something there and he is going to pull that into the code when we do that at the end so that will clear that for you.

Steve: Often if you find what's going on in the glands and organs and correct it, for example hidden viral fields, the unilateral muscle is gone and tenesgrity is gone. It is another confirmation of why these things keep popping out. If this doesn't hold, then we need to look further, but I am going to do a scan and look a little further for now. So, against this field of inflammation, the structural issues, I would have Nick say, "I want to be healthy."

Nick: I want to be healthy.

Steve: "I want to be sick."

Nick: I want to be sick.

Steve: Nick is not reversed. I'll say this and check the statements for him just to save time; I have an open, blocked, lost, incomplete treatment? All my treatments are 100% complete? That's testing true that there's nothing knocking anything off. But then again this is a chronic field so I want to make sure we don't have a toxin that is impacting these. It may be something that's not normally even testing as an energy toxin but it may impact this in some way like we talked earlier, perhaps the nightshades. So, just say "all ingestants."

Nick: All ingestants.

Steve: "All ingestants I want to be healthy."

Nick: All ingestants I want to be healthy.

Steve: "All ingestants I want to be sick."

Nick: All ingestants I want to be sick.

Steve: Nothing tested badly. I'm going to do the other ones that way; I just wanted to show you how we test those. So against these fields, all inhalants, all inhalants I want to be healthy, all inhalants I want to be sick. That's testing clear. All contactants, all contactants I want to be

healthy, all contactants I want to be sick. All injectants, all injectants I want to be healthy, all injectants I want to be sick. If I check for EMF that's clear, again we didn't find it in Nick because he knows better. But in the people I see that come to me the first time with chronic upper back and neck tension; it's their laundry soap or their fabric softener. Now I'm going to check for curtains for the spine, for vertebrae, for discs. I want to make sure that we don't have any viral fields that are hidden - bacteria, fungal or parasites. That's one of our newer more advanced things and I wanted to make sure that that wasn't a factor for Nick. So Nick say, "I am fighting a virus."

Nick: I am fighting a virus.

Steve: I get a yes to that. More than one, more than two, more than three? I'm getting three viruses. None of them are brain viruses, but then if we check for glands or organs, I do show it coming out in the adrenals. That's one of the muscles that we found was weakened. So we put that in the field. The small intestine, okay that's another muscle that we found. The bladder, the liver, and the kidney, so if we check here...

Beth: Also pull in the colon.

Steve: Okay and if I check we're not getting viral tissue, we aren't getting a cranial nerve virus. Are all 25 immune pathways online with these viral frequencies? Yes. Let's check, thinking about the viral fields specifically tendons, tendons I want to be health. That tests badly. So there's a viral field in the tendons blocking those from healing. We're going to think about those various areas of the body. All I've done so far is address virus. If I go back and say, tendon, tendon I want to be healthy, tendon I want to be sick. It's not reversed now. So we know that that viral frequency in that tendon is one of the things that kept the inflammation alive. If I check are you fighting bacteria, that's clear, Nick's not showing a fungal infection, he's not showing a parasite or protozoa. I'm doing the things we teach in our DVD set. If I go back is there more here now? I don't get that. I'm going to come back to something: if I check Nick right now for unilateral muscle that tests clear. If we check for tenesgrity, that's clear, so the reason that this was chronic is the body, had three hidden viral fields that it wasn't seeing. That was causing sustained weakness in those glands or organs controlling the structural balance in the muscle.

Beth: Will you check him for DNA damage in the tendon especially that left front shoulder, the bicipital tendon?

Steve: Do you have a blood sample on you, Nick?

Nick: I do.

Steve: Good, let me grab that.

Beth: Wow, he's well trained!

Steve: Most married guys get that way eventually. If we do the Master scan, we do show DNA damage and if I check, it's not in a gland or organ. It's not in the brain, but it does show in tissue, and for him it would be the motor cortex that is involved and then checking those tendons for both shoulders. We want to go back to that knee and the spine. I want to pull that in a little tighter to find more specifics. Okay, it doesn't show again in a gland or an organ. It doesn't show in the brain, and it's not showing in the tissue. We are showing some bone in that knee, so if we again touch the knee and the motor cortex and tap above the ears, we're going to put that in the code. If we check more, I'm not getting more than that. Are you picking

something up?

Beth: I was thinking about calling the calcium into the field.

Steve: The calcium deposits.

Nick: There's something I could add to it too if it might make a difference.

Beth: Okay.

Nick: On the right shoulder, I would say twenty years ago, I had a derivative of cortisone added to it, introducing a toxin to my body. Additionally, last April I was in Florida and got bit by a jellyfish...

Beth: Oh.

Nick: ...which introduced other toxins on my right pinkie.

Beth: Okay, that's good information. So Steve can you check the jellyfish sting and the derivative of cortisone infections as a curtain?

Steve: I didn't get that but vaccinations are a curtain and one of the things they are finding out now is vaccinations can cause inflammatory responses 10, 20, and 30 years later. So let me clear those injectant fields as a curtain because again if something is not healing you are either losing a treatment and/or we don't have the full treatment field. If I check that now fighting an additional viral frequency, fighting a bacterial frequency, that's clear but I think what that's going to bring up is a better picture of that DNA issue. Is what it's bringing up underneath the curtain? Yes, it is here. Okay so, now that we do that we can get some tissue damage in that knee. Okay, if I check it again, is there more here? No, okay can we put that into the treatment code? Yes. So I think that's going to give the body the information in terms of where the viruses are, what glands or organs, where the DNA damage is and you can explain that we stripped away the curtain around the vaccination residue.

Beth: Yes, I'm picking up both of the injectants that Nick talked about, the cortisone and the jelly fish sting. They're not curtains but they're blocking the self service receptors in the body so pull that in too. So for demonstration obviously we're getting the physical field first. We're getting the physical and structural field and many times doing that gives the body information to start releasing the physical blocks and also then to release some of the non-physical blocks that are held in the body. So doing the physical scan also helps to clear many of the non-physical aspects. For those of you who have been doing this work for awhile you will notice that in yourself or in other people that is the truth, so clearing that physical field first is what we recommend in terms of your scanning. Steve, are we ready to move on from that?

Steve: Yes, I'm actually doing some other more advanced scans on a physical level.

Nick: Are you checking the calcium too, Dr. Daniel?

Steve: In which way?

Nick: I thought Beth mentioned to check the calcium?

Beth: Yes, it's testing weak.

Steve: Yes, if we check it in general it's not an energy toxin but against your tendons it is. So you are laying down a calcium deposit there. That's part of that inflammatory process and that's where some of the scientist's products might be helpful. That's what they're designed for, the Medicardium.

Beth: Okay.

Steve: So you can talk about that at the end.

Beth: Okay.

Steve: I'm working on his pain signal in his shoulders.

Beth: Alright, so while you're doing that what we would ask then is: Do we have 100% of the physical information? Yes, and then I often ask with structural issues: Do you have 100% of this structural field? Yes. Good. Then: Do you have 100% cooperation in releasing all of this? Your body says no. That's why we're moving into the non-physical field. So now we're going into *Taking EFT and QT to the Next Level* manual so as we're going along people can follow along and test through this with us at the same time. We know Nick isn't reversed; Steve has gone through all of that, so we're going to jump right in here. Since Nick has not used this manual before we'll start at the beginning and go through it. In the beginning where we talk about *Issues About Abandonment* it is very helpful to ask: Does 100% of me know I'm an adult today and that it's 2010? That tests no, that's weak. So we want to clear this, in the name of Divine light and love we command any energies that block you from being able to see the truth of who you are today to leave and never return and we ask that all parts of you, all your unconscious self be present today looking through your eyes, accessing all of your senses and being here now to see who you are. We know many of these things are held in a time warp in our bodies and they get frozen like a frozen shoulder or a frozen emotional field somewhere in the body where all of you cannot see who you are today. So we want to start with that and now let's ask again, does 100% of Nick know who he is today, that he's an adult and that it's 2010? Now it tests okay. Many times simply bringing that up to the unconscious field of the person that you're talking to will clear that. I believe this whole section is clear for you but let's go through and test. Does 100% of your conscious and unconscious know that your partner/family will stay with you when you are completely healthy? Yes.

Nick: Yes.

Beth: That tests good. I can't read that Steve; he is holding up something.

Steve: I ran a scan and there's a frozen rage field in those shoulders.

Beth: Okay.

Steve: It's not his rage.

Beth: Do you know where it's coming from?

Steve: Yes. One of the things that I'll eventually hold a teleclinic on is called The Genesis Technique. Is this a frozen emotional field for Nick on the shoulders? I get a yes. Okay I went through different emotions and I tested that rage is present. If I ask how old were you when you first started stuffing that emotion there? Between the ages of one and two. At that age we don't know that we're separate from other people; we're not verbal yet. What % of that rage was created inside of Nick? Between five and six percent. Does the rest belong to somebody else? Yes. A male? No. Was it mom? Yes. So you know under age two you took on your mom's disturbed emotions and held them in your body to try to make the world safe. The problem with us guys is when we start doing that it's on automatic pilot. When we're around any females that are holding discordant emotions our job is to take that emotion and fix it so they don't get in touch with that. Unfortunately we stuff it in our bodies and eventually it starts wearing us down. So that's part of what you're going to get to in this. It's a frozen emotional field and then teaching Nick how to recognize it, test for it, and release it with an affirmation.

Beth: Your affirmation there is simply, I quit.

Nick: I quit.

Steve: When you are feeling that body pain, test to see if this is a frozen emotional field and who does it belongs to. There are going to be females in your life today at work, maybe your wife, it could be a sister, and you might even talk to them but all of a sudden you have this pain in your body, so see if it's a frozen rage field and who it belongs to. Then once you recognize that say, "I quit, my job, I'm resigning as that job, my body is only a receptacle for all the light, love, joy, and abundance the creator has made." You will find the ability to stop much of that pain from being in your body.

Beth: Taking on someone else's rage doesn't help either. It's not lessening someone else's rage because you're carrying it around. So it's not helpful for them or you. Some of us have the misperception when we're little if we take on other people's emotions it will protect us from them in some way and it simply doesn't work.

Steve: As you move into hopefully some semi-spiritual quest you realize even if you could do that, the very rage that you take from them is what they need for their own next spiritual step. Even if I could do that, it would be stealing something from them that they need to have, and then whether or not we know it, that makes us very controlling. It may be in a very nice way but then we don't let somebody else get angry at us.

Beth: Right.

Steve: Beth and I have done this dance. This was an area I had to work through some deals from my mom.

Beth: Yes, and it's interesting because you've had much pain and structural issues too.

Steve: Right.

Beth: You take away some of the opportunity to learn if you take on all their stuff but it becomes automatic pilot. So that's what we're trying to get to, and as you're going through this manual you will get to some of these statements that test weak. Many times you do need to know more and that's when you ask, is there a frozen emotion in this field? Is there a blocked emotion? So you can get it to come up that way. It will be interesting to see as we go through this more in which categories the rage shows up. Whatever comes up as you're going through this process or any other testing process, follow your intuition. Like Nick said, "Okay I need to tell you guys I had this derivative of cortisone and a jellyfish sting." That came up into his conscious awareness for a reason. So any time that happens follow that intuition and put that into your treatment field. Continuing on with these issues about abandonment, #2: Does 100% know of Nick know how intrinsically lovable he is and that he won't be abandoned when he's completely healthy? That one's testing weak right now and I don't think it was testing weak until Steve brought up that field about holding rage from your mom when you were little.

Nick: Yes, it tests for me that way too.

Beth: Good, so you're testing along. That's good. Like I said before Nick you are well trained. So if we ask about that one, do we need to know more to clear this? Your body says we don't need to know more on that one. I think we know from this field that Steve brought up, so we're going to pull that information in about the frozen rage and about that starting with your mom, taking on that energy, I think especially from females throughout your life.

Nick: Very true.

Beth: Choosing to release that and knowing that you are lovable exactly the way you are and that you are lovable even if you don't choose to take on other people's unhealed emotions. You'll still be lovable if you say no; I'm not taking this on anymore. Steve is smiling because I think this is resonating for him, big time. Is that right?

Steve: I had a funny thought but I'm not going to go there.

Beth: That's probably a smart choice.

Steve: I feel myself slipping. I had a terrible picture of Nick walking outside a PMS rally and then taking on so much rage he exploded all over the place.

Beth: Well, I'm glad you're finding humor in it.

Nick: Oh, my.

Beth: So we have the information we need on that one. For the third one, does 100% of Nick know he can be himself and others will want to love him and give to him? What do you get on that one Nick?

Nick: That one was positive before, it's neutral to not true right now.

Beth: Exactly. So I want people to see how these fields shift. See how Steve simply bringing up this situation changes these answers? That doesn't mean Nick's healing is going backwards or that he's lost ground. It doesn't mean any of that. All it means is something is here underneath this field and it's bringing this up for healing. So it's an opportunity to heal, it's not a bad thing. If you think about that statement, do we need to know more to clear this? No, and that goes back to what we're talking about in #2 that you are intrinsically lovable and others that love you will see that even if you stop carrying around their unhealed emotions. #4: Does 100% of Nick know he will be intrinsically lovable even if everyone would abandon him? That actually tests okay. That Nick and God's spirit will still love him? Yes, does that test okay for you Nick?

Nick: Yes that's good.

Beth: Yes, that is strong, we like that.

Nick: We like that one.

Beth: Does 100% of Nick know he would be safe even if everyone abandoned him? That is testing weak.

Nick: Yes.

Beth: This makes sense as it is bringing up many young child issues. Your adult self in your life today, tests strong but if we think about that little self that Steve talked about last time under the age of five, then it's weak and I think it would be for any of us. So again, that's letting our internal world know, especially parts of us under the age of five, who we are today; you're an adult, you're strong, you are safe and you're held in a field of love with the Divine in all moments of your life no matter who's in or out of your life. So that's all we need to know to clear that one. Do we need to know more? No. #6: Does 100% of Nick know he can fully love and accept himself even if no one else does? No, so do we need to know more? Yes, there's a belief there.

Nick: Yes.

Beth: Are you aware of what's coming up on that one Nick?

Nick: Yes, I'm testing the lifelong scenario with the so called role I played not just with family but with relationships in general. I don't mean it in a cocky way, but I'm the one that they come for rational answers, especially during very highly intense trauma situations.

Beth: Okay.

Nick: I've always had that role and it's happening right now actually.

Steve: So your job is to shoulder those responsibilities.

Nick: Yes, the shoulder, exactly.

Steve: I loved weight training for years and where it hit me was the elbows. I had injectants and a bunch of other stuff I had to do to heal. But there's also a real conflict in my life because the message that I had through my childhood with my mom who was bi-polar and schizophrenic, and then in my adult life with my ex-wife who probably had the same conditions as my mom but wasn't medicated, was that it was unsafe to reach out for love. Many times when a joint won't heal, you look at how you use that joint. What's the metaphor in that? So for me it was the elbow reaching out for love. For you maybe there's some internal conflict about always being the guy that has to shoulder this responsibility.

Beth: Yes.

Nick: Yes.

Beth: Is it okay for you to have to have needs if you're always the one who has to shoulder everybody else's stuff? No it's not.

Nick: Right.

Beth: So others' expectations of you have been important. That's part of your identity. You can love yourself...

Nick: It has to be part of my identity, so I started working with you on chipping away at this in a small way this year. I've said no four times this year.

Steve: Was anybody else around when you said it?

Nick: Absolutely.

Steve: Maybe I'm wrong but I'm seeing that your weight training is one of the very few times in your life that you're not somewhat trapped in a role dictated expectation.

Nick: It's a wonderful way of saying it. Yes, for me there is freedom in a gym and I could work out there whether it's 7:00 AM or 3:00 AM and I don't have a work-out partner because I don't want anyone around me.

Steve: Yes, that's the one place in your life you don't have to take care of anybody; you just lift your own weight.

Nick: Yes.

Steve: Okay.

Beth: Do we need to know more on that field? No, good. For #7, which is essentially the same field: Does 100% of you know you can choose to be free from the prison of others expectations? Given this conversation we know that that one is weak right now.

Nick: That one is weak and that would be a wonderful statement to believe right now.

Beth: Okay, so if we think about that do we need to know more to release this? No, we've got the information we need on this and I think this needs to be a priority for you in your healing. It's interesting when we start to speak our truth and we start to let go of old roles we notice that some of the people in our lives don't necessarily like it.

Nick: Oh, yeah.

Beth: That's an understatement I guess but that happened with me on my healing journey. I stopped being the one that planned everything. I stopped being the one that was always the

helper for everybody else. I never had my own needs. I stopped all of that and family members, friends and others didn't like it. They were saying who is this person? This isn't how you've always been. No, but who I had always been was causing me pain and suffering and killing me.

Nick: Absolutely, I hear you.

Beth: Others get used to it.

Nick: The retraining.

Beth: If you can speak your truth and say why you are making these changes people will understand. This is something that you need to do for your health and your life and feeling good to be able to be around and have fun with your daughter and your family. That this is a shift you need to make and it will benefit everybody and allow them to have opportunities to change some of the things in their own lives. They won't be real interested at first but it gives them a chance to see some truth and give them an opportunity to do some shifting on their own. With Steve and I, we've had some issues that are somewhat similar to what we're talking about right now. When I first heard that Steve no longer wanted to be the rock in this marriage I wasn't very happy about that and I threw a fit to be quite honest.

Steve: Is that one long one or several small ones?

Beth: Several small fits. None of them were too big but there were several small ones. In looking at that and myself and saying, what is my part in this, and what is my opportunity in this to heal and be free from this box that I put myself in? Why is this working for me? It ends up being a freeing thing for everyone involved. They may not feel that way at first but I do think it's something you and your loved ones can grow through and see that you feel so good and you're free of all this. Hey, what's he doing? Look at him now; there's something there that's working.

Nick: Absolutely.

Beth: It's not fun to give up the old role for people at first, especially if they're benefiting from what you've been doing. But it does free everybody and it takes you to a different level in your relationship and then it's wonderful. It's not easy to make the conscious choice to make the decision but it pays off.

Steve: I have two adult daughters and there were times as a parent that I chose to work through and confront things in those relationships that I'd probably would not have bothered with except for I didn't want my daughters to have that model.

Beth: Yes.

Steve: I wanted them to at least see how somebody is trying to make it work.

Nick: Absolutely, I agree with that totally.

Beth: So if we look at #8: Does 100% of me know he doesn't have to be perfect to be safe and loved? I'm getting that tests okay.

Nick: Yes.

Beth: #9: Does 100% of Nick know his truth will always be expressed one way or the other, consciously or unconsciously with shoulder pain? I can choose to consciously express my truth and solve my problems so that I can heal? What do you find on that one Nick?

Nick: This one has gone back and forth for me through the conversation because I looked at this but the field is very true to me right now.

Steve: Yes.

Nick: It wasn't so much like this five or 10 minutes ago.

Beth: So you're feeling stronger on that one now?

Nick: I'm feeling much stronger; the first statement is the truth has always expressed itself because I've been in pain since at least the fifth grade. That's the earliest I can remember it so it is expressing itself now. I have for the first time said no to several scenarios this year where in the past I would have taken on the role which would have taken the energy out of me and taken time away from my family to do something that I didn't want to do. The people got mad at first and then they grew out of it.

Beth: That's right, you gave them an opportunity.

Nick: Yes, I got the guilt trip. Then I got the 'they can't function without this' line. They will function just fine and learn how to function differently.

Beth: Did everyone survive?

Nick: Everyone lived.

Steve: One of those great statements for all those things is "Oh, well,"

Nick: Right.

Steve: Oh, well.

Nick: I admit that making that break was very challenging the first couple days. I received guilt from it and at the same time I still love the person and don't want to see them in pain. Yet their pain is a source of their own healing too.

Beth: That's right.

Steve: It's also their own creation.

Nick: Absolutely.

Beth: Yes, you didn't create it.

Nick: No, I'm not into taking on anyone's karma anymore.

Steve: Good.

Beth: This is on a recording Nick!

Steve: We're going to get it notarized so we can hold Nick to it.

Nick: That's right.

Beth: Okay this is great. So the affirmation tests good for you there. The affirmation at the end of that section would be very helpful to you so we'll use that as well. If we look at *Issues About Safety*: Does 100% of Nick see he's an adult today, that he's physically and emotionally safe? Yes. Does 100% of him see its 2010 and that he's here now? Yes, that's all testing good I think because we just did a lot of work on that section.

Nick: Yes.

Beth: So #11: Does 100% of Nick including his internal parts know who his wife is today and that he's safe with her? How does that test for you, Nick?

Nick: This is neutral to no at this point.

Beth: Yes, that's what I got.

Nick: I think because we're both going through changes in who we've been.

Beth: Okay.

Nick: And that's where that one is.

Beth: Yes, you're right, it's not that. I was testing to see if there was somebody from the past or childhood that your internal parts are confused about. It's like you said, there are many changes going on. So the question that is coming up is who is this?

Nick: Right.

Beth: Who is she and who am I?

Nick: Yes, absolutely.

Beth: And how is that coming together?

Nick: I can give you an example. When I first talked with her about bio-identical hormone replacement my wife questioned that even though she is into energy work. Now we're going to start "playing with nature" then we had a whole talk about how it's not part of nature. It is actually giving back what you're losing out of nature right now, and stuff like that happens to me often.

Beth: Okay if we ask about that, do we have 100% of the information that we need to clear this? The body says no, there is something else we need to know on that one. It's an emotion. Does this belong to you? Yes, it's fear.

Nick: Yes.

Beth: I think it's a fear about your relationship.

Nick: About many things that that I'm personally carving away at. I'm consciously doing it and it goes back to the previous ones about abandonment too. It is like a snake drastically shedding its skin. This year I have had friends who haven't seen me in five years and while having a conversation they say, "Did you talk like this five years ago or is this somebody else?"

Beth: Yes.

Nick: That's happened quite a bit so there is some concern about growing together and making sure that cooperation, trust and closeness sticks.

Steve: Yes, that you find a way to hold sacred space for yourself and each other and that you have a complete journey and they don't have to be in the exact same space as you.

Beth: Right.

Nick: Right.

Steve: But they're on the journey. That makes such a difference.

Nick: That makes a huge difference because my wife's on the journey, but I'm more into different areas than she is. But I have friends that aren't on the journey so they're much more challenging to deal with than my wife.

Steve: This is out of a good teaching by Guy Finley called *Liberate Yourself* and one of the things he says is here are the words to end all fear, "Who you knew yourself to be yesterday is of no use to you tomorrow."

Nick: Hmm.

Steve: If you think about that most of our fear is who we've known ourselves to be and that we will somehow lose that as we move forward in time. Every time you outgrow a part of yourself there's been a new larger, more complete self that showed up the next day and that process never ends. For most of us we realize that we can be comfortable with that process versus trying to resist the very process that we're embracing.

Nick: Yes, very good point.

Beth: So if we check on this one do we need to know more? No, so #11 a, b, and c: Can 100% of Nick's parts see out of his eyes that he's safe, hear out of his ears that he's safe, feel through his skin he is safe here today? That test's okay.

Nick: Yes.

Beth: Can 100% of Nick see that it is safe to let someone else fully love and accept him? No, is that one testing weak for you Nick?

Nick: Yes, very weak.

Beth: Is anything coming into your awareness about that?

Nick: Yes I'm aware of a specific changing of my role from who I've been for 40 years and who I'm choosing to be this year and beyond. I would say for many of the characters in play are the people in my life up until now that I provided them a very good service for 30 years.

Steve: Right.

Nick: I was very good at it but it was to my detriment through the body pain and emotional challenges we've worked on. I am no longer content and I don't want to do this anymore.

Beth: Right.

Nick: In this new way of living is it safe for someone else to love me since I'm still in the process of developing right now?

Beth: Yes.

Nick: Abraham Hicks said, "The whole point of your whole day should be focus on joy for yourself and then everything else falls into place."

Steve: You and I have several similar characteristics. Beth used the word "the rock" and I prided myself on being "the rock" then I started thinking about what happens to a rock? Nothing, you either throw it away, or you break stuff with it, or it gets worn down. I said, maybe I should find a different metaphor. Instead of being "the rock" for everybody else, what do you do with a rock? You break windows or you can prevent a car from rolling down a hill. What if instead of that I attach my identity to always being present in that moment knowing that I'm always changing and becoming comfortable with that fluid process and attaching my core identity to that process. I know I can choose to show up in this moment right now and connect with the Divine and everything that's there and trust that who is made anew in me in that moment is who I really am.

Nick: I like that.

Beth: I think this goes back to the calcium deposits, which are rocks too and on a physical level they need to move into solution and be fluid with movement.

Steve: And that your shoulder tendon's that are chronically inflamed so you can't carry everybody else anymore.

Nick: To add to that which is the same scenario, the muscles across my side and back and underneath my traps in the back and my traps themselves I get such muscle hardness that the massage therapist literally has to use their elbows to go through them. At times the muscles are spasming so much, and these pockets are spasming so it bounces the massage therapist fingers right off them.

Beth: You and Steve must be related!

Nick: Yeah.

Beth: For years in association with his migraines he had hard muscle knots in that area.

Steve: Let me show you the metaphor in that though. I want you to think that you're sitting across from someone. If I'm sitting straight and I've got my chin tucked in so that my spine is straight, then that's a good position. But if I'm leaning forward with my upper body and my head instead of sitting up straight and being balanced, I'm leaning forward to balance the

energy there between me and them because I'm doing more than my 50% share. Sitting in that prolonged position puts those very muscles into that spasm and that was what I was talking about earlier. The key point to leaning forward where your back is arched and your chin is pushed out is it is a metaphor that you lead with your chin through life taking care of everybody else, and that's going to be reflected in that chronic pain presentation in the back. Been there and done that.

Beth: It's like the weight of the world on your shoulders and we talked about that being all tied up in that field. So if we ask do we have 100% information to clear #12? Yes. For #13: Does 100% of Nick know that it's safe to live in this universe and share all of his truths, health, and creative abilities? That one is strong now.

Nick: That's okay.

Beth: Good, I'm glad you can test well. That makes this more helpful for you. Does 100% of Nick know that he can be abundantly healthy and still be safe physically and get his needs met in the world? The second half of this one is weak which is the next section, *Issues About Getting Needs Met*.

Nick: Yes.

Beth: The first half of that statement is strong.

Nick: Right on.

Beth: Yes, we'll look at the *Getting Needs Met* section in just a minute. Okay, #15: Does 100% of Nick know that he can fully love and accept himself even if no other human being does? That tests strong.

Nick: Yes.

Beth: Does 100% of Nick know it's safe to fully love and accept himself? That tests good.

Nick: Yes.

Beth: Does 100% of Nick know he's completely safe from any original abuser in his life? That tests fine. #18: I'm completely safe from any generational abuses? That tests good. Does 100% of Nick know he's completely safe from a punishing God? That's good.

Nick: Yes.

Beth: Does 100% of Nick know he's safe in allowing himself to heal? What do you get on #20, Nick?

Nick: A challenge.

Steve: Yes.

Beth: Do you see something on that Steve? Do I need to know more?

Steve: If you woke up tomorrow and all these pain issues were completely gone and you could not even remember having them, then what is the first thing you would do different?

Nick: The first thing I would do different is reorganize my week to exercise more and get involved more heavily with playing drums and martial arts. I've started playing drums this year. I did martial arts many years ago but because of pain I had to stop. I would get back into doing that and the last thing I would do is to get more physical exercise with my eight year old boy.

Steve: Is the ongoing pain we're referring to in #20 giving a no to someone? Yes. Is it someone in your life today? No. Let's ask a different question, is it someone in your life prior to the age of five? Yes. Does the five year old part of you know that you're 100% safe in completely healing? No. Does the today adult? Yes. So there's something in which pain or illness provided safety or

allowed you to set a boundary with someone. To say no to someone before the age of five, does anything come to mind, memories or family history?

Nick: Yes, it's very true. Prior to age five I had a very strong defense mechanism I used. There was an interaction with a certain family member where I was given a lot of responsibility for that age to assist another family member because of an acute weakness they had and it was too much for me.

Steve: Yes.

Beth: Yes, that's true; you don't need to say more about that.

Steve: So what we want to do is show the younger than five year old inside of you who you are today and who you live with today and what you do today and then we'll retest that question. I'm 100% safe in allowing myself to heal now? That shifted to a yes.

Nick: Yes.

Steve: In other words that part still felt like if you were completely healthy you wouldn't be able to say no to some family expectation and you would have to be taking care of somebody.

Nick: Correct.

Steve: Yes.

Nick: Which I don't feel today.

Beth: Yes, so let's pull in that affirmation there as well after #20 and then looking at this next section. I think this is an important one for you the *Issues About Getting Needs Met*. Does 100% of Nick give himself permission to rest without being sick or in pain? No.

Nick: I can tell you the answer to all these right now will be no.

Beth: So when you say that, many of them in this section are testing weak?

Nick: Yes.

Beth: I'm getting that same thing. Again and we can group these together. It's the same field #22: Does 100% of me know I can ask for my needs to be met in the world without having symptoms? No.

Nick: No.

Beth: Does 100% of Nick know he doesn't have to create a crisis to get his needs met or to get attention? No.

Nick: Not quite there yet.

Beth: # 24: Does 100% of Nick know he'll be able to get all of his physical and emotional needs met without this pain and be healthy? No. Does 100% of Nick know, or is 100% of Nick willing to give up all the physical and emotional symptoms and be healthy and pain-free right now today? No, not quite.

Nick: Not quite there.

Beth: Okay we're getting there at warp speed.

Nick: Absolutely.

Beth: Does 100% of Nick know you can never be sick enough to make someone love him? What do you get on that one?

Steve: That's true; I get a yes to that.

Beth: Nick what do you find there?

Nick: That one initially tested as true. Consciously I believe that I can't be sick enough to make someone love me but I've also played the role in the last 40 years of having some ailment where I got preferential treatment with gifts, etc. especially while growing up.

Beth: Okay let's pull that one in as well and then #27: Does 100% of Nick know truth will always be expressed, one way or another, consciously or unconsciously? This one is a repeat, so we've already cleared that one.

Nick: Yes.

Beth: #28: Does 100% of Nick know he's 100% willing to give up illness and symptoms as his expression of being creative in the world? That one's weak. There's still something there and I think some of that goes back to the old pattern that you're talking about in childhood and that you're wanting to stop that and become creative through martial arts and other things.

Nick: Yes.

Beth: #29: Is 100% of Nick willing to give up illness and symptoms as his way of being unique and special in the world? I'm still finding a little bit of weakness there.

Nick: Yes, it feels so wonderful to hear that but it's not resonating as true.

Beth: Okay, so these issues about getting needs met is a hot spot for you. They are mostly testing weak right now. So, if we ask about needing to know more in order to clear this? Yes. There's a blocked emotion in this field. It's rage. Is this yours? No, so are we back to the beginning of the conversation. Is this mom's rage? Yes. Is there someone else's rage you're holding in this field? No. It was rage at herself and it was about some hardships that other family members of yours were having, an illness.

Nick: Very true.

Beth: So you took that on.

Nick: Completely.

Beth: So it wasn't okay for you to have needs.

Nick: No, not the three, four or five year old. It is not resonating as completely true today even as it comes up as now. I feel much further along than when I was four or five, but I'm not there yet, as you can see.

Steve: Not in a sense with full peace and acceptance. But enjoy it; it's okay for you to be a human being with normal human being needs that everybody else has.

Nick: Right and its okay that even if I get my needs met completely I'm not preventing other people from getting their needs met.

Steve: Right.

Beth: Let's see what else is there. It's a specific trauma that's locked in at a cellular level under age five and it's all tied in with this same field with your mom holding onto anger. So we're going to pull that in and clear the trauma specifically.

Steve: Nick do you have any associations to the idea of being Superman and wearing a superman suit?

Nick: Putting on the power suit you talked about in the past?

Steve: I'm thinking of when you were a kid, the whole character of Superman?

Nick: I never got into Superman; my favorite was Aquaman, underwater.

Steve: I can remember being set up in that role very young in my family and I remember pinning a towel on my t-shirt and jumping off the roof of the house.

Nick: I used to do that too.

Steve: At the time I lived in Phoenix and I landed on a cactus, so besides it hurting I was amazed that I couldn't actually jump off a building. I was told I could always do whatever I wanted to. I needed to get my fix.

Nick: Yes.

Steve: Jumping off and not being able to fly was finding out your human and learning about gravity and all the other things apply to you is a real challenge.

Nick: It's like I labeled it in the last couple years while doing work for Jesus Christ, I didn't come here to be Jesus Christ. None of us did.

Steve: Yeah, well he was perfect and we killed him for it. I don't want the job.

Nick: Yes, absolutely and I do firmly believe in my heart we come here to find joy in each person no matter what their challenges are.

Steve: Yes.

Nick: And you can't take that from them, they're missing their learning.

Steve: That's right.

Nick: It's like being bred to do that your whole life and then saying I'm going to reverse that now because this way isn't working.

Steve: Yes.

Nick: Just like you, Beth. You changed your role and you can see people's heads turn 360 degrees until they get used to it.

Beth: That's right.

Nick: But with the core of getting needs met, I'm not completely at peace with that yet.

Steve: Yes.

Beth: Well, I think that's because you felt like that's who you had to be.

Nick: It was my identity.

Beth: Yes, that's who you had to be to survive and it's who you had to be to keep the peace in your family.

Nick: Yeah, and I got real good at it too.

Beth: That's right.

Nick: Real good does not mean a good thing in this situation because the better I got at it the more pain I felt.

Beth: That's right. You're an expert in this field but we'd like you to take on a new expertise.

Nick: Absolutely.

Beth: We'll see if there is anything else there. It tests that we have 100% of the information we need on that. Do you have 100% internal cooperation in releasing this? You do. Can 100% of you see who you are today in your life and that you have survived? Yes, you've used these tools to survive but life isn't about survival anymore for you.

Nick: Right.

Beth: It's about transformation and joy and love that you did survive. It was difficult, you took this on but it's over and with who you are today you can release this and be a person and be a human being and have needs maybe for the first time in your life.

Nick: Yes, it feels good.

Beth: That tests good. So that affirmation there after #29 tests real good for you.

Nick: Okay.

Beth: How are we doing for time? Should we do more?

Steve: Because of the length of the recording we probably need to stop for now.

Beth: Nick with your ability to test I think you're set to go through the rest of this on your own and see what you come up with. Let me know if you get stuck or if you need more information. I'd be happy to help you find the field if you're having trouble with something, but I think you're on the right track here. I'm excited I think this is going to be great for you.

Nick: Me too, thank you very much!

Steve: I think you can pull out this structural stuff when we give you the code.

Beth: Yes. We're pulling in all the physical and non-physical aspects.

Steve: Nick have you ever tried those patches?

Nick: I ordered the patches for my brother-in-law who has extreme pain and they worked very well for him. I have not tried the patches on me yet.

Steve: I've never seen something like that be so effective. What we're talking about are LifeWave patches, specifically the IceWave one (www.lifewave.com/708893). You can wear those patches up to four days to make them last longer.

Nick: How do you test where on your body they should be placed?

Steve: They're a little round patch with a split backing and they have a brochure that shows where to put them on your body. They show you how to move it around without even adhering it to find the best spot. There are several ways to wear them and you can muscle test that. But you can reuse them by only using half of the sticky side each time. Some of my fibromyalgia and cancer patients have done remarkably well controlling their pain with this. So I think it might be very helpful for you.

Beth: The other thing that's going to be a challenge for you Nick is the *Issues About Deserving*.

Nick: I know it will.

Beth: That's a place that you will want to focus on as you continue to go through the manual.

Nick: Will do, yeah, I know that very well.

Beth: So let's go ahead and give you a code.

Nick: I'm ready.

Beth: Good. Okay Nick, say I want to be over this.

Nick: I want to be over this.

Beth: The code for this is: G50 SH G50 SH EB E G50 SH IF E MF LF LIVER G50 SH E G50 SH G50 SH EB E G50 SH IF OE A C 9G UN SH UN Chakra pattern #1 two times and hold your fingertips over the pain areas when you read the code. I would do that four times now and then four times in a row three times a day. Those of you who are listening can go ahead and use that code as well to clear anything that's coming up in this field.

Steve: Good. Let us know how that goes.

Nick: Will do, thanks so much for your time, I certainly appreciate it.

Beth: We'll be talking and I'm excited for you. I think this is a good dynamic process.

Nick: Me too.

Steve: Blessings!

Nick: Blessings to both of you and have a great rest of the day!

Beth: Thanks Nick, take care.