

Review Module C1 Demographics

Level Quantum Biofeedback Practitioner

Remember to record your hours and score for your IMUNE Qualification Application.

	<i>Function and Intent</i>		Ans
1.	QBP	Demographics is time consuming and a waste of time	
2.	QBP	Demographics is one method for the client and practitioner to become really focused on lifestyle	
3.	QBP	If lifestyle is not considered then the device will do everything necessary	
4.	QBP	Lifestyle changes can be the MAJOR factor in clients regaining health	
5.	QBP	Demographics is in the program just for fun	
6.	QBP	Demographics is in the program because Prof. Nelson, who has considerable expertise as a natural health professional, recognises the tremendous benefits of lifestyle in health	
7.	QBP	Demographics only needs the client's name to be entered	
8.	QBP	Demographics only needs to be used on the first visit	
9.	QBP	Demographics can be done in less than 5 minutes	
10.	QBP	On a first visit the client may wish to be heard and time should be allowed for this	
11.	QBP	The session may be made more efficient by using a questionnaire	
12.	QBP	Often clients will put in writing things that they will not talk about face to face	
13.	QBP	Using demographics will enable the practitioner the right to tell off the client	
14.	QBP	Demographics is a guide to helping the client identify lifestyle obstructions	
15.	QBP	Demographics is the first location and possibly the most important location to begin the client's education on lifestyle changes necessary for their improved health.	
16.	QBP	Demographics information can help the technician and the client to understand what has happened and what is happening in their life	
17.	QBP	Demographics should be reviewed & updated during second or further visits. It allows the client to see the improvements or additional stressors that the client has in their lifestyle	
18.	QBP	Demographics is the entry to the Patient Data page where all client data is stored. Within the Data page is an area to list the current complaints and easy access for return visits for each client	
19.	QBP	Using the demographics when reviewed each visit can assist	

		the client and therapist in identifying lifestyle change effects	
20.	QBP	Demographics has locations to change the standard human category to other options; dog, cat, horse, cow, pig (and split hoof animals), Reptiles, Birds and even inanimate objects	
21.	QBP	Demographics has locations for detailed information on your client; items and areas which they may not understand and which are much more detailed than the 20 questions in green	
		<i>SOC stands for:</i>	
22.	QBP	Serious Obstacles of Cure	
23.	QBP	Societies Overall Concerns	
24.	QBP	Suppression and Obstruction to Cure	
25.	QBP	Standard Obvious Causes	
26.	QBP	Sod off client.	
27.	QBP	SOC is derived from a homeopathic lifestyle assessment system and stands for “suppression and obstruction to cure”.	
28.	QBP	The SOC panel gives the practitioner clues about the client’s lifestyle.	
29.	QBP	The SOC panel <u>cannot</u> tell us the possible source of health problems.	
30.	QBP	It’s OK for you to fill in any old answers to the SOC panel for the client since they don’t matter.	
31.	QBP	The SOC panel has no influence on any of the programme selections for therapy.	
32.	QBP	If you were the computer programme making decisions about the client’s health and therapy would you use all available sources of information?	
33.	QBP	Is it possible for a client to have such a good lifestyle that they have a negative SOC value?	
34.	QBP	Can a negative SOC value produce some screwy scores in the test matrix?	
35.	QBP	Do you have to re-enter the SOC information for a client on the second visit.	
36.	QBP	If the SOC information on a second visit does not show is it possible you have not saved the client information.	
37.	QBP	Is the client demographic information scored in a table in patient data.	
38.	QBP	Demographics is the location where you must select a non-human or alternative subject such as athlete, animal, inanimate object, plant (other).	
39.	QBP	There is no need to undertake any review of the SOC value for a client on a second visit.	
40.	QBP	It is possible to use changes in demographics entries to recalculate the SOC and illustrate the benefits of a client changing their lifestyle.	
		<i>The process for entering a new client includes the following steps <u>as a minimum:</u></i>	

41.	QBP	Completion of the full demographics table	
42.	QBP	Completion of all information outside the green table	
43.	QBP	Selection of client's sex	
44.	QBP	Selection of pregnant if client is pregnant	
45.	QBP	Completion of wellness inventory	
46.	QBP	Completion of impairment data	
47.	QBP	Completion of top class athlete	
<i>The top class athlete selection is used for:</i>			
48.	QBP	Any fit client	
49.	QBP	Every client	
50.	QBP	Sports person only	
51.	QBP	Providing access to specialist sports functions	
52.	QBP	Enable a fully accurate health test	
53.	QBP	Focusing on those items that are athletic performance related	
<i>Animals:</i>			
54.	QBP	It is very important to enter the accurate animal's name and date of birth	
55.	QBP	Entering the animal's name and approximate date of birth is sufficient for animal testing	
<i>The QXCI/EPFX is likely to be most effective if:</i>			
56.	QBP	The client's SOC is below 50	
57.	QBP	The client's SOC is over 200	
58.	QBP	It doesn't matter what the client's SOC is	
<i>The QXCI/EPFX-SCIO/EPFX-usb alone:</i>			
59.	QBP	Will not be effective in isolation when working on babies/animals	
60.	QBP	May be effective in isolation when working on babies/animals	
61.	QBP	Will not be effective alone with working on a person with a very good lifestyle	
62.	QBP	May be effective alone with working on a client with a very good lifestyle	
63.	QBP	Lifestyle changes often have a quite dramatic effect on client wellbeing	
64.	QBP	Foods and digestion are a quite major influence on well being	
65.	QBP	A supplementary questionnaire is very useful in illuminating this and other areas of client lifestyle	
66.	QBP	The number for the SOC should be in the same range for very healthy clients and for clients with poor health	
67.	QBP	Demographic information is a waste of time to fill in, just put in the name and birth date and make up the other answers so that the SOC comes to 50	
<i>Values used in the SOC table:</i>			
68.	QBP	Demographics has some information which changes the SOC score	
69.	QBP	Demographics changes the outcome of the therapies	

70.	QBP	Influences the numbering and color of the test matrix.	
71.	QBP	Affects the numbering and color listing of the test matrix so that these show differently for someone who has had more traumas and illnesses in their lives. Someone who has had very few stressors should not have as high or low numbers on the test matrix as someone who has been under severe stress.	
72.	QBP	Have <u>no</u> effect on the test process	
73.	QBP	Have <u>no</u> effect on the order of results in the test process	
74.	QBP	Have an effect on the scores in the test process	
75.	QBP	Affect certain values in calibration	
<i>Entries in the demographics screen:</i>			
76.	QBP	In the main green panel relates to practitioner opinions	
77.	QBP	In the main green aspect relate to client information	
78.	QBP	Entries outside the green panel are critical	
79.	QBP	Entries outside the main green panel are for practitioner and client's perspective and understanding	
80.	QBP	The two questions below the demographics entry table should always be used	
81.	QBP	The two questions should be used gently in appropriate circumstances	
<i>SOC Values and actions</i>			
82.	QBP	If the client has an SOC>400 then they it is smart to establish how long they have had this lifestyle.	
83.	QBP	Lifestyle issues are probably the most important area to address when there is a high SOC	
84.	QBP	It poor lifestyle is longstanding then the client may find it hard to change it	
85.	QBP	An option to a longstanding poor lifestyle is to agree some small changes	
86.	QBP	Device and remedy support are worth considering to support making lifestyle changes	
87.	QBP	It is smart to explain to the client that the device will help to make the changes easier but may not have a visible effect on their health issues until they have made some lifestyle changes	
88.	QBP	Referral to a specialist health care professional to work on issues outside your experience may be in the client's best interests	
89.	QBP	At a SOC <50 lifestyle is sound and device therapy alone is likely to have a noticeable effect	
90.	QBP	At an SOC <100 minor changes in lifestyle would be supportive but QXCI/EPFX –SCIO/EPFX-usb therapy should be effective	
91.	QBP	At SOC<200 lifestyle changes are important to optimise device therapy	
<i>If a client has an SOC of <~20 then:</i>			

92.	QBP	If a client has an SOC of <~20 then device therapy in principle should be effective	
93.	QBP	If a client has an SOC of <~20 then device therapy will be effective no matter what the condition may be	
94.	QBP	If a client has an SOC of <~20 then it is possible that the client may still have a debilitating disorder	
95.	QBP	If the client has an SOC of 1 but a severe pathology the QXCI/EPFX will be totally effective	
96.	QBP	A negative SOC value is possible	
97.	QBP	A negative SOC value may result in “unusual” scores in some areas	
98.	QBP	An option is to compliment the client on lifestyle and correct the SOC to a small positive value	
<i>Demographics Steps: first visit, new client, basic steps</i>			
99.	QBP	Always do the 2 bottom of screen questions	
100.	QBP	Always do the inherited disorder and negativity boxes	
101.	QBP	If you wish to use the body fat determination (values displayed in info grid) there is <u>no</u> need to complete the Anthromorphic table in demographics?	
102.	QBP	Is demographics information stored and available if you just enter the data	
103.	QBP	Does the save button in patient data store the patient data in the record files	
<i>Demographics Steps: first visit, new client, option steps</i>			
104.	QBP	Medical Astrology in Biorhythms will be available with no further entries	
105.	QBP	Medical astrology access requires only the time of birth	
106.	QBP	Medical astrology access requires only the place of birth	
107.	QBP	Medical astrology access requires both the place and time of birth	
108.	QBP	1pm in nautical time is 1300 hours	
<i>Second Visit (no change in SOC):</i>			
109.	QBP	If relevant discuss lifestyle changes with client	
110.	QBP	Re-enter the client name	
111.	QBP	Load the client from patient data	
<i>Second Visit (change in SOC)</i>			
112.	QBP	Make changes to SOC table	
113.	QBP	Discuss changes with client	
114.	QBP	To save the SOC changes it is only necessary to change entries in the demographics table	
115.	QBP	To save the SOC changes it is necessary to re-access the patient data screen, modify and save	
116.	QBP	If the client date of birth etc. needs changing in patient data then the modify button must be used first before saving	
<i>SOC table Entries</i>			

117.	QBP	When the mouse is moved over an entry a hint displays	
<i>Fat quantity- What is the target % of fat in a healthy diet</i>			
118.	QBP	20%	
119.	QBP	30%	
120.	QBP	40%	
121.	QBP	If the diet contains 50% is 50 entered	
122.	QBP	If the diet contains 50% is 5 entered	
<i>For the Personal stress question</i>			
123.	QBP	10 is the max value	
124.	QBP	10 is a balance point	
125.	QBP	7 is the target point	
126.	QBP	A value >7 will display a stress table to help focus on the stress origin(s)	
127.	QBP	>7 means stress is has the possibility to affect health	
128.	QBP	<10 means stress is not affecting health	
129.	QBP	A certain amount of stress is necessary for healthy function	
130.	QBP	The value is an external perspective	
131.	QBP	The value is the client internal reference	
132.	QBP	A street cleaner may have a higher internal stress than a high powered business man	
<i>Allergies</i>			
133.	QBP	Known allergies are anything that the client thinks they might possibly have sensitivity to.	
134.	QBP	Known allergies are anything that the client has a definite reaction to.	
135.	QBP	Known allergies are anything that a client thinks they may have any sort of reaction to	
136.	QBP	An occasional mild stomach discomfort is a significant known allergies	
<i>Organs</i>			
137.	QBP	Teeth are a major organ	
138.	QBP	The missing organs refers to organs that are fundamental to good health	
139.	QBP	Removal of appendix is significant	
140.	QBP	Removal of tonsils is <u>not</u> significant	
141.	QBP	Removal of stomach is <u>not</u> significant	
142.	QBP	Removal of thymus is significant	
<i>Injuries and Infections</i>			
143.	QBP	Major injuries are just physical	
144.	QBP	Major injuries do not include mental trauma	
145.	QBP	Major injuries include emotional trauma	
146.	QBP	Major injuries should be entered even if they appear to have been totally resolved	
147.	QBP	Major infections would typically include 2 day flu	
148.	QBP	Pneumonia is an example of a major infection	

149.	QBP	A good benchmark for a major infection is 1 week substantially disabled in bed	
150.	QBP	A good benchmark for a major infection is hospitalisation for infection	
<i>Unresolved Mental Factors</i>			
151.	QBP	Unresolved mental factors could show in feelings or thoughts that the client experiences often	
152.	QBP	Unresolved mental factors could show in the feelings that are the main theme in the client life	
153.	QBP	Unresolved mental factors have no effect on health	
154.	QBP	Unresolved mental factors are a good hint for assessing if the clients emotional world may be a significant factor	
155.	QBP	No unresolved mental factors may indicate a lack of awareness	
156.	QBP	If a client indicates a score less than 10 in responsibility for their health then it may be interesting to ask who is responsible for the other points	
157.	QBP	If unresolved mental factors remain after several visits it may be advisable to ask the client the two questions at the bottom of the demographics page	
158.	QBP	Getting the client to write on a page titled “My Life” may be quite revealing about the clients mental-emotional world and inner relationship and help assess the relevance of emotional work	
<i>Effect of entries</i>			
159.	QBP	The number of mercury fillings entered will affect the R value in calibration.	
160.	QBP	The number of cigarettes entered will affect the A value in calibration.	
161.	QBP	A table of the effect of entries on SOC value is available on www.qxcisynergy.co.uk	
<i>Relevance of SOC values to Test scores: you may wish to do an exercise using different SOC values to understand the case below</i>			
162.	QBP	Test matrix reactivities below 40 and above 85 are significant items independent of the SOC values	
163.	QBP	It is possible <i>in theory only</i> to have a perfect organism where every score is 50	
164.	QBP	An ideal organism in perfect health and balance would have an SOC of 1 and a score range of 40-80	
165.	QBP	Typically a well child would have an SOC of <10 and perhaps 2-4 red, red test scores 110-120	
166.	QBP	If this same child became ill the SOC would change?	
167.	QBP	If this same child became ill the test score red band would increase	
168.	QBP	Typically a well adult may have red band test scores 110-130	
169.	QBP	If you have client with SOC 250, showing 30 red band items with test scores to 250 if you make an error and give tem an	

		SOC if 1 the number of reds will substantially <u>decrease</u>	
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If a question or the answer is unclear please discuss with colleagues/your trainer. It will not be possible for IMUNE to respond to individuals for clarification. If after discussing as above clarification is required then please do contact OBP@imune.net.