How to Use This Manual

Volume 1 gives you the reference material: foundations, marker interpretation, system protocols, etalon suggestions, Meta-Therapy guidance, imprinting, intake/follow-up forms and the general scan priority map. This manual sits beside it and answers the practical question: what do I do with that information when a client is in front of me?

The central rule Do not chase every finding. Build a coherent pattern, decide what matters today, use the matching Volume 1 protocol as a guide, and reassess the same question.

- Use Volume 1 as the source of protocol content and this manual as the reasoning pathway.
- Work from the client's purpose for the session, not from the most dramatic-looking screen.
- Treat device outputs as practitioner observations and energetic pattern information, not medical diagnoses.
- When a device term, button, score or display differs, apply the principle rather than forcing identical software steps.

Device Note Hunter 4025 NLS, Bioplasm, Biophilia and related NLS platforms may use different menu names, databases, graph displays, comparison scores and therapy functions. The walkthrough therefore teaches the underlying reasoning first.

Professional Scope & Safety

- NLS/bioresonance findings do not confirm disease, infection, deficiency, toxicity, allergy, psychiatric diagnosis or laboratory values.
- Do not advise clients to stop or change prescribed medication.
- New, severe, sudden, progressive or medically concerning symptoms require appropriate conventional assessment.
- Emergency symptoms take priority over continued scanning.
- Use local scope-of-practice, consent, privacy and record-keeping requirements.
- Where Volume 1 uses condition names, treat them as protocol/navigation labels and educational contexts unless the condition has been diagnosed independently by an appropriately qualified clinician.

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1. Set the Session Purpose

Before you scan, decide what question the session is trying to answer. A scan without a question becomes a hunt for abnormalities.

Volume 1 cross-reference: Volume 1: Introduction / Scope & Target Audience; Client Intake forms; General Bioresonance Scan Priority.

Start with one sentence

ACTION	Ask the client what they most want help understanding or supporting today.
LOOK FOR	Symptoms, functional limitations, timing, triggers, recent changes and what has already been medically assessed.
REASONING	This gives the scan context. Without it, every coloured marker can look equally important.
DECISION	Write one session purpose, e.g. 'Explore patterns associated with fatigue and poor recovery.'
CAUTION	Do not convert the client's symptom into an NLS diagnosis before scanning.
NEXT STEP	Choose a starting system or use the general scan priority route if the presentation is broad.

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Good session-purpose examples

- 'Explore the pattern associated with poor sleep and daytime fatigue.'
- 'Review digestive-system patterns associated with bloating and irregular bowel habits.'
- 'Reassess the same cardiovascular-support targets reviewed at the previous session.'

Avoid

- 'Find the cause of everything.'
- 'Prove whether the client has X disease.'
- 'Scan every organ and every database because the client has many symptoms.'

Sam's Practitioner Reasoning You are not trying to make the software answer every health question. You are deciding what information would actually change today's practitioner decision.

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2. Intake, Safety and Baseline

Volume 1's intake forms are not paperwork to complete after the interesting part. They are part of the interpretation.

Volume 1 cross-reference: Volume 1: Client Intake & Follow-Up Forms, pp. 207-212.

Minimum intake

- Client's own words for the main concern
- Known medical diagnoses made outside NLS
- Current medicines and supplements
- Recent tests, procedures, acute illness or major changes
- Sleep, stress, digestion, energy and relevant lifestyle context
- Pregnancy and device-specific cautions
- Red flags or symptoms needing conventional assessment

Create a baseline

ACTION	Record the client's subjective starting point before intervention.
LOOK FOR	Volume 1 uses 0-10 ratings for systemic energy, stress/HPA, detox burden, GI health, immune/inflammation and sleep quality.
REASONING	A baseline lets you compare the client's experience with later device trends instead of relying on memory.
DECISION	Choose only the baseline measures relevant to the session goal.
CAUTION	A subjective score is not a clinical measurement and an NLS score is not a laboratory value.
NEXT STEP	Write the baseline in the session record before scanning.

Red-flag gate

- If symptoms are acute, severe, sudden or rapidly worsening, medical assessment may be more appropriate than further energetic investigation.
- Examples include chest pain, stroke-like symptoms, severe bleeding, acute breathing difficulty, sudden major neurological change, suicidal intent or other emergencies.

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3. Prepare the Device and the Scan Plan

Preparation is about reducing avoidable variability and deciding your route before the software starts generating data.

Volume 1 cross-reference: Volume 1: Introduction / Navigation of the Protocol Database; Meta-Therapy & Remedy Recommendations; General Scan Priority.

Device preparation

- Use the manufacturer's setup, calibration and client-positioning instructions for your specific system.
- Confirm the correct client record and date.
- Note anything that could make today's comparison different from the previous session.
- Open only the databases or modules needed for the planned scan.

Choose the route

ACTION	Choose either a focused system scan or the broader top-down route in Volume 1.
LOOK FOR	For a broad new-client review, Volume 1 proposes clearance/regulation areas, then GI/absorption, then a high-level external-stressor review.
REASONING	A planned route prevents random switching between databases.
DECISION	If the client has a clear local concern, start with the relevant system instead of forcing a general scan.
CAUTION	The Volume 1 'general priority' map is a framework, not proof that liver/kidney/lymph must always be the cause.
NEXT STEP	Write the planned first system and one backup system only.

Sam's Practitioner Reasoning If I cannot say where I am starting and why before I press scan, I am already at risk of letting the software lead the whole session.

Practitioner Checkpoint

- Prepare the correct client/device context
- Choose focused versus general route

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