Preliminary Study on the Effects of the MRS 2000 as seen by the EPI/GDV and the ES Teck Complex

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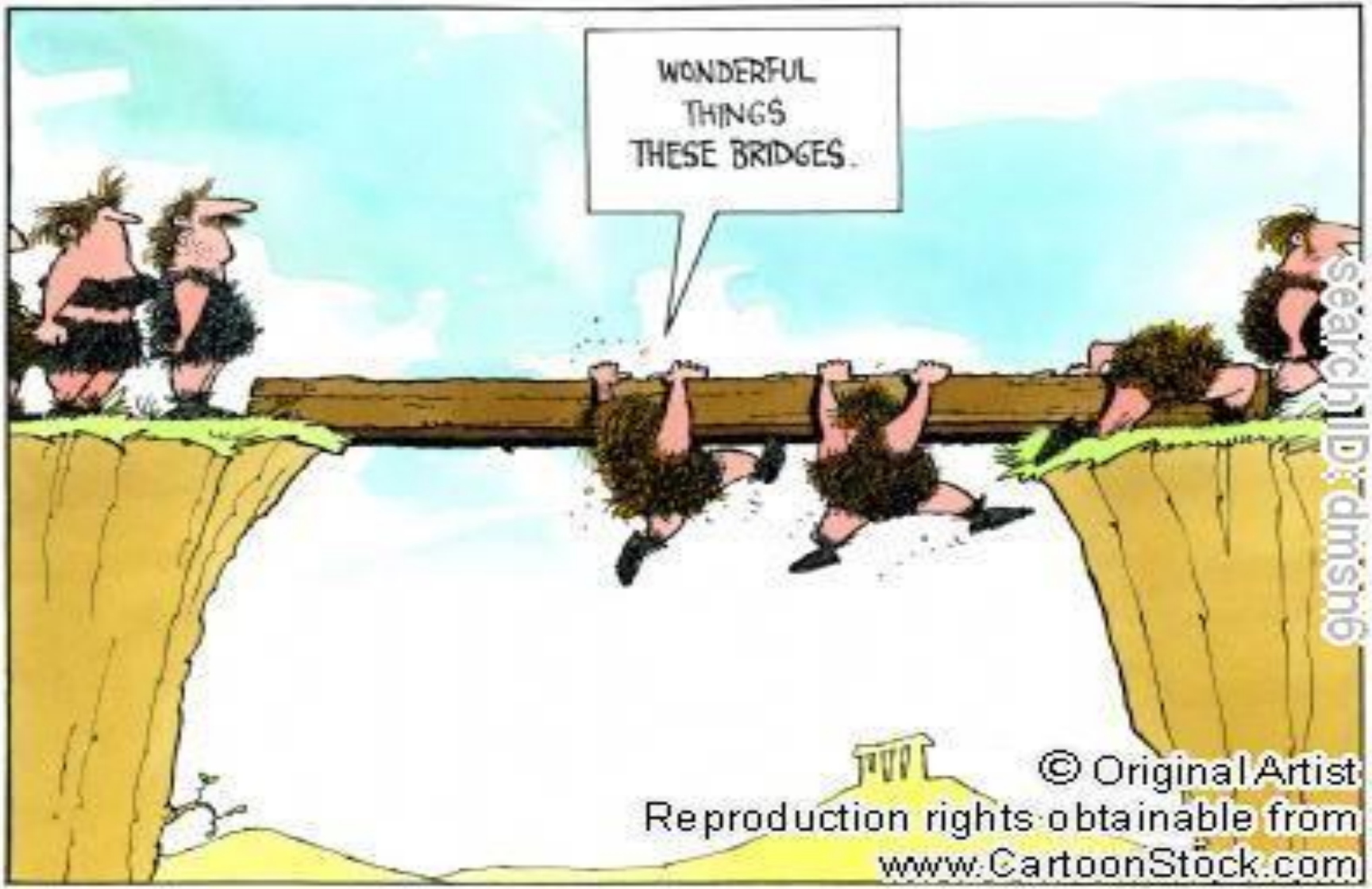
WONDERFUL THINGS THESE BRIDGES.
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Psy-Tek Offerings

- Research:
  - Psy-Tek provides companies, individuals and health practitioners who have new devices or products or offer services in need of scientific validation with the expertise to validate the effectiveness of their new devices or products or services through rigorously designed research studies.

- Services:
  - Psy-Tek provides health practitioners with health assessment reports that are complementary to allopathic diagnostic tests using innovative and non-invasive technology (EPI/GDV, ES Teck Complex and thermography).

Purpose of the Study

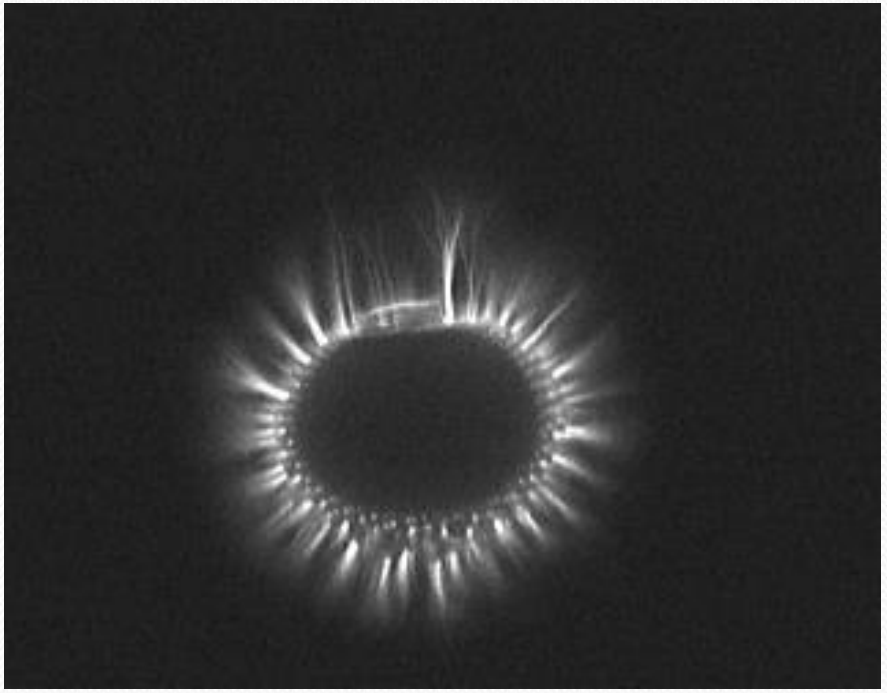
- To see what the MRS 2000 can do to help people with a moderate level of pain using sensitive and non-invasive instruments.
- People with pain were chosen because of good results reported previously.
- Instruments used were:
  - EPI/GDV
  - ES Teck Complex.

Protocol

- Min use: one week
- Min one and max 3 sessions per day
- Min 16 minutes each session
- Design: Test – retest.

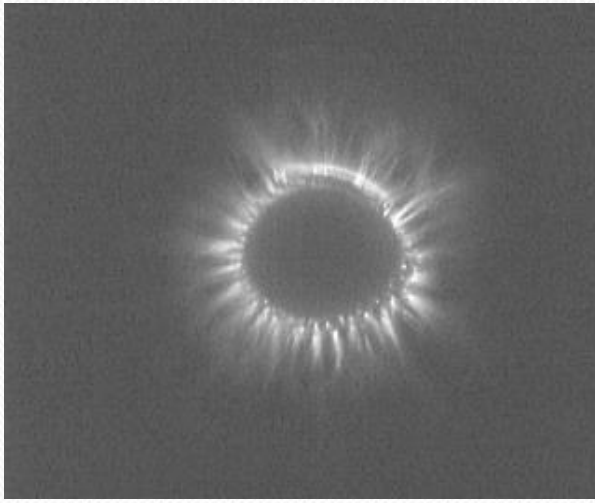
EPI/GDV

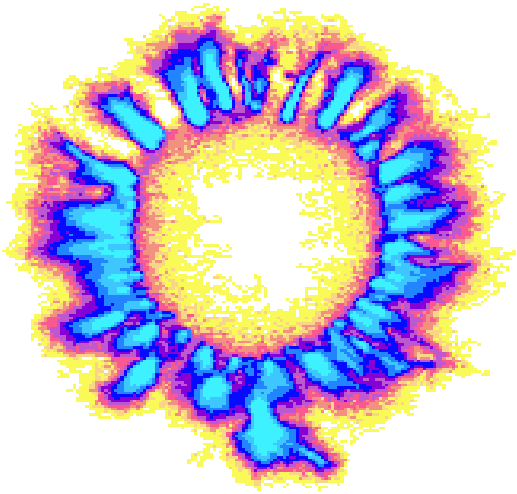
- The Electro-Photonic Imaging system (also called the Gas Discharge Visualization system).
- Based on Kirlian Photography.

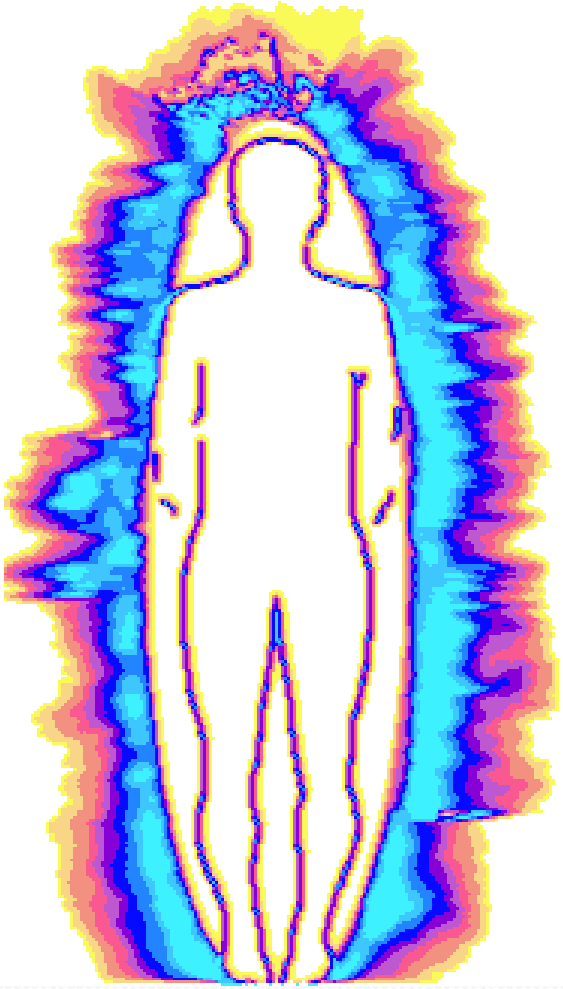


GDV Pro and 10 Finger GDV

Image Processing

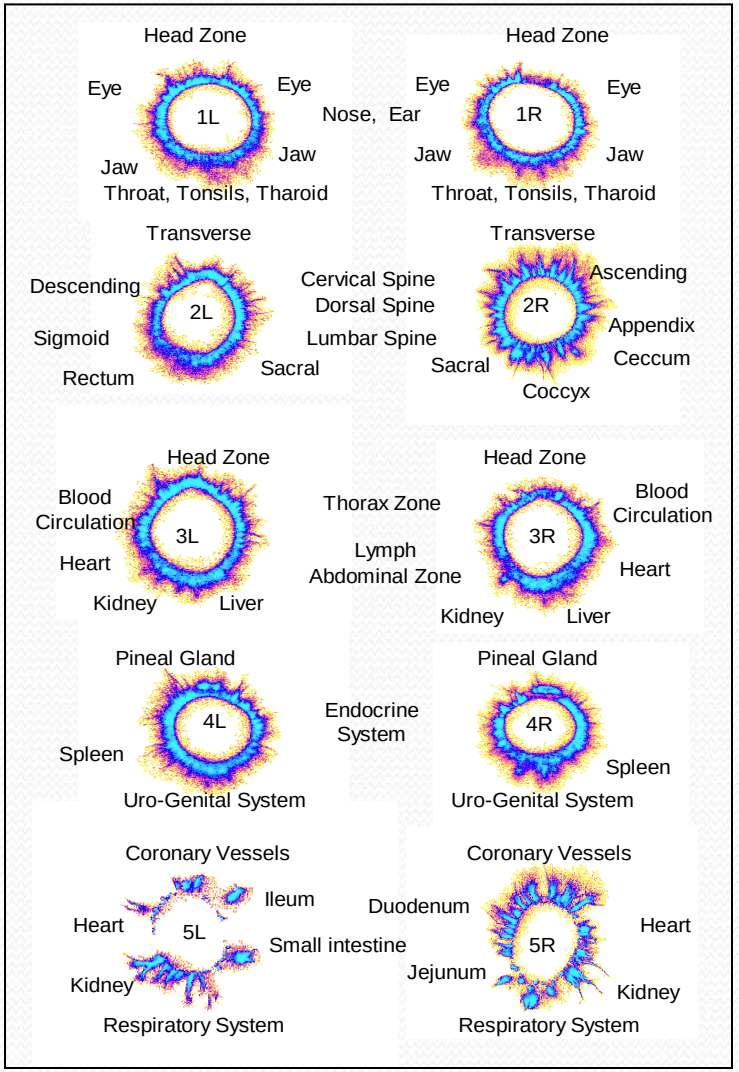




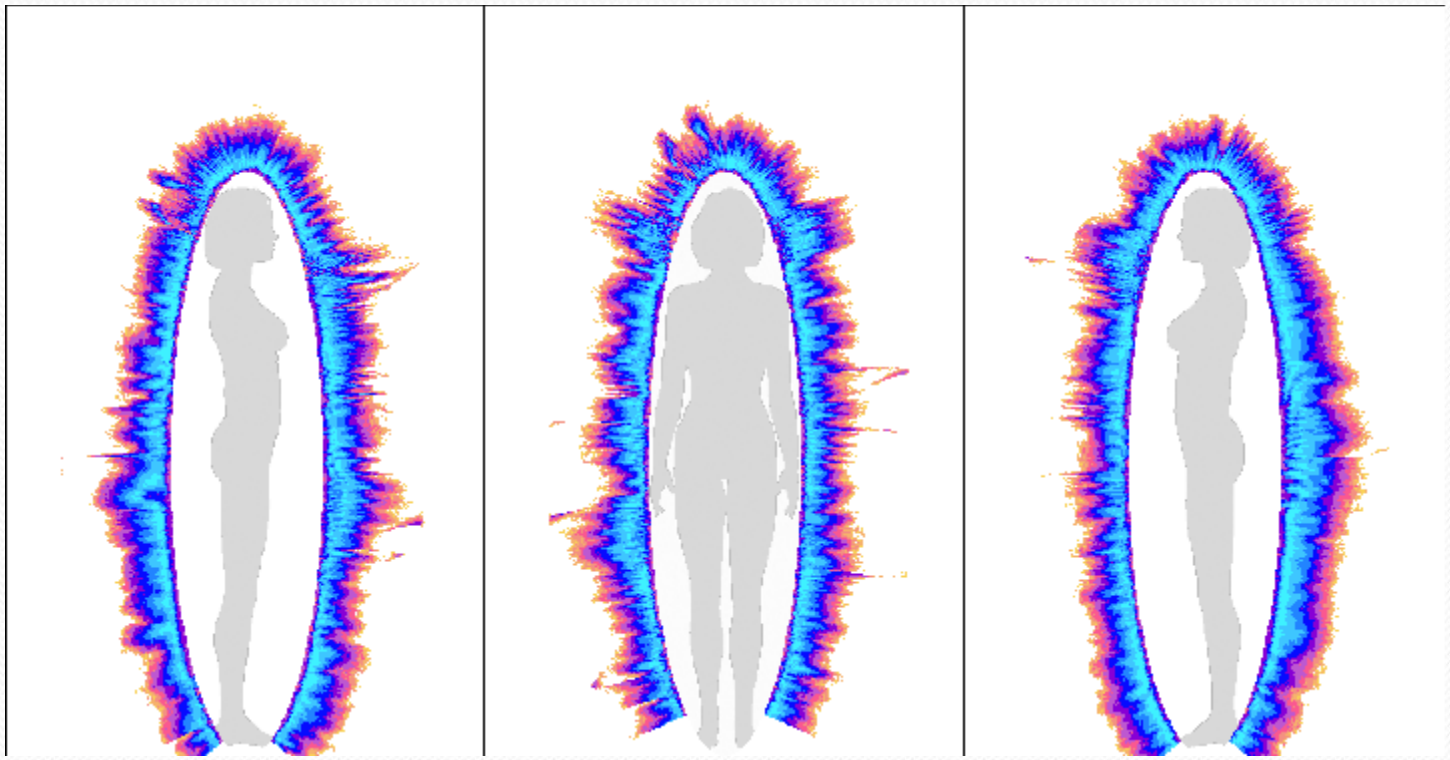


Finger sectors Analysis

Modified Su Jok meridian system



Energy Field Representations

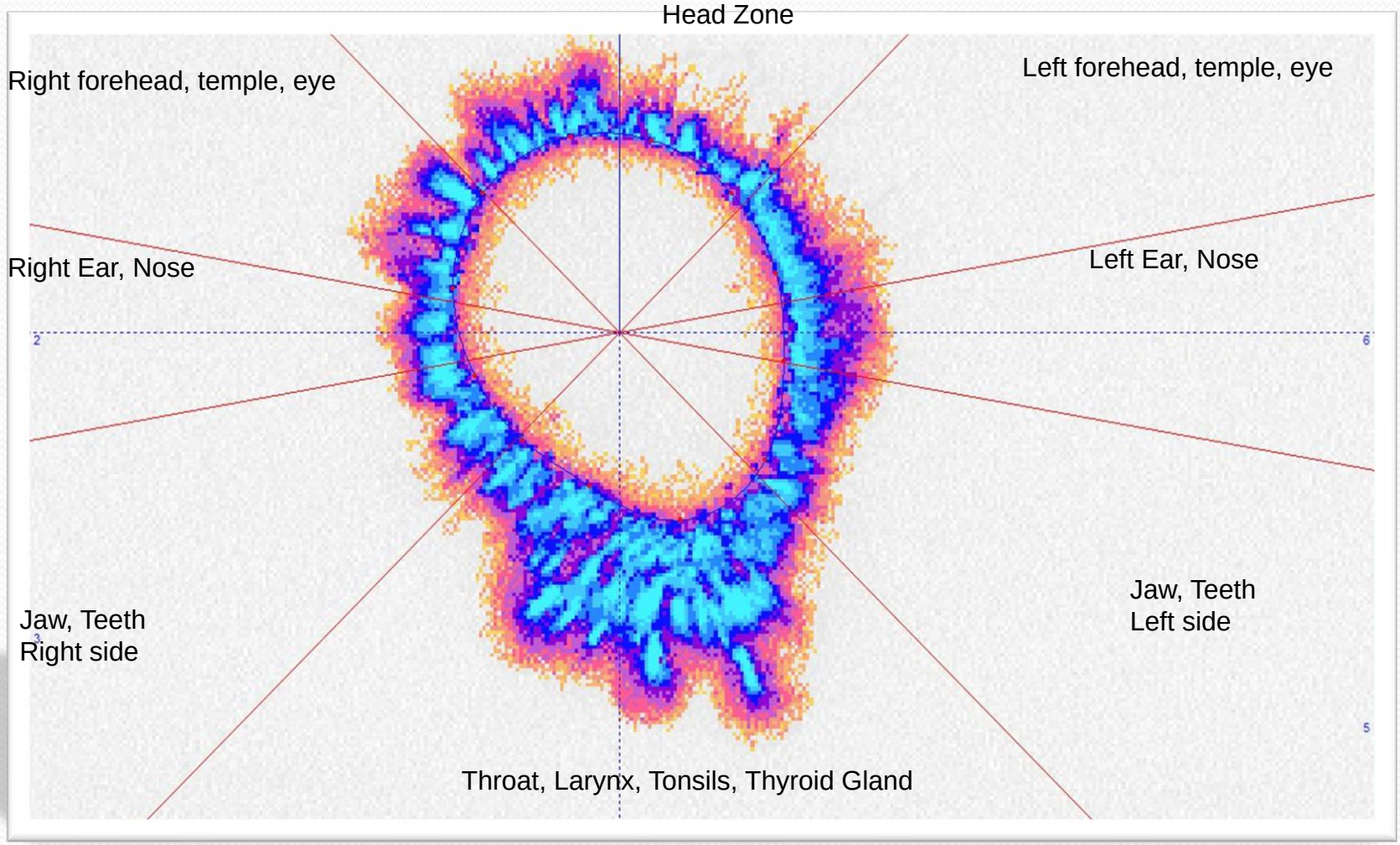


Area=21524

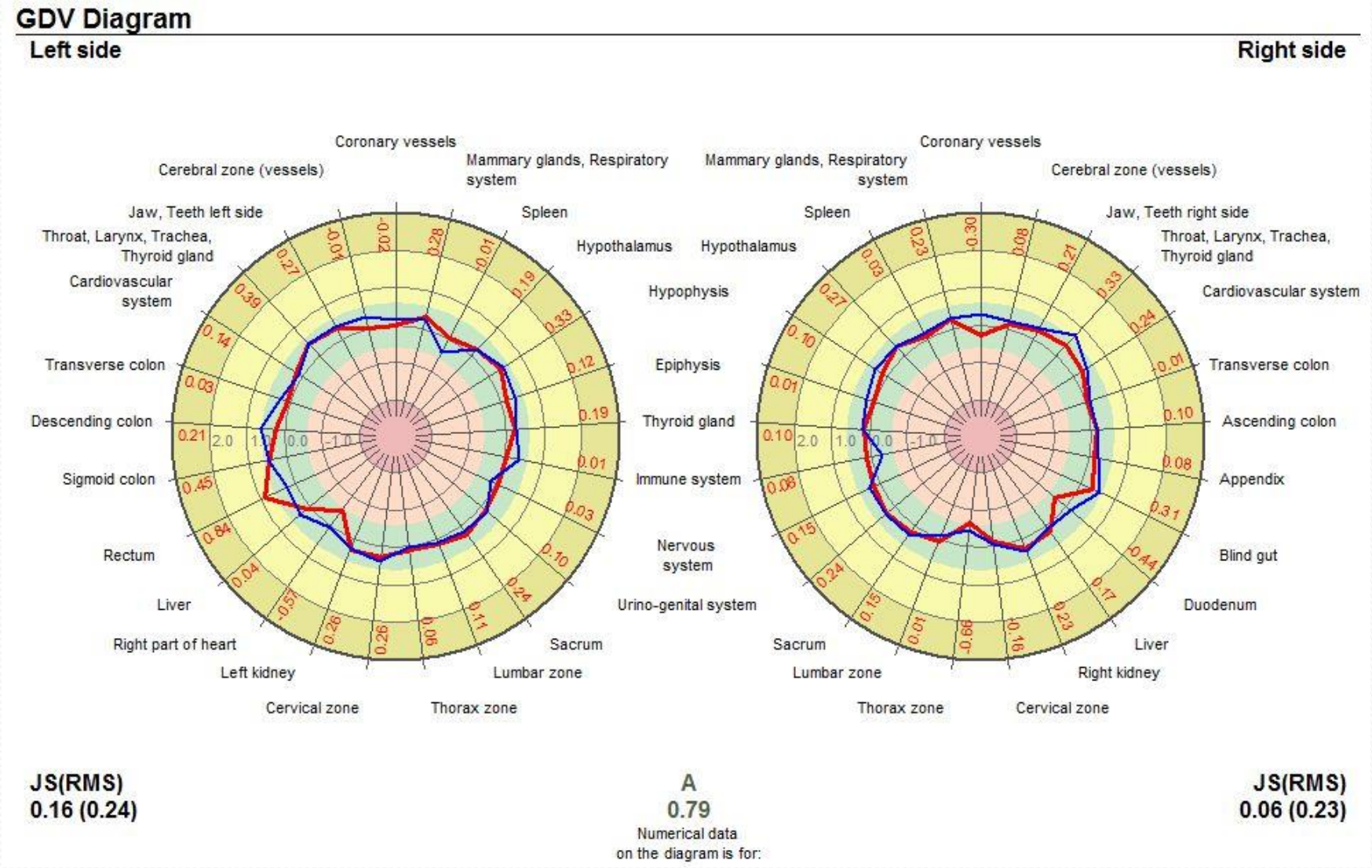
Area=20661
Symmetry=89%

Area=22536

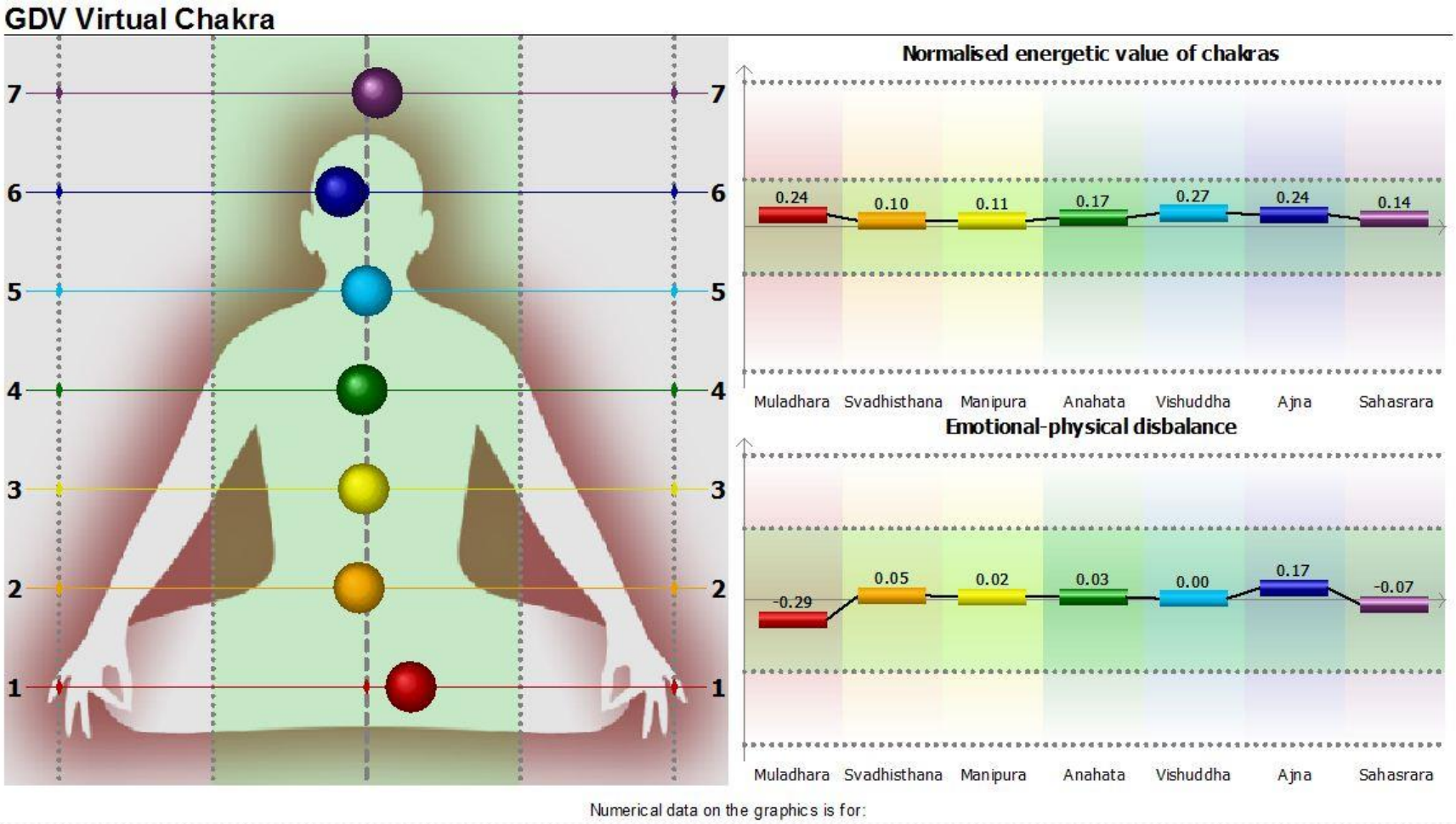
Corona Discharge of the left thumb of a person with a known pathology



Radial Charts



Virtual Chakras

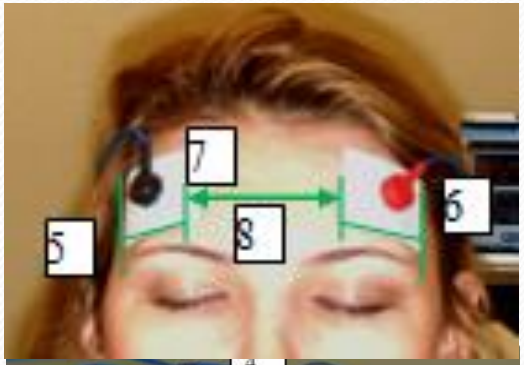


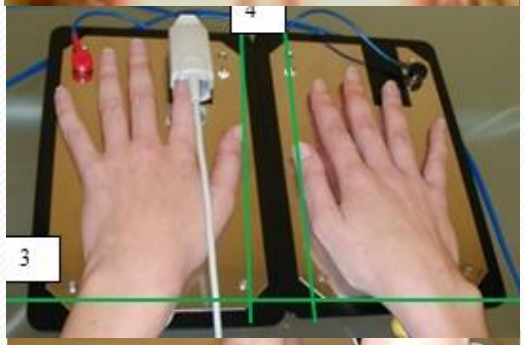
ES Teck Complex

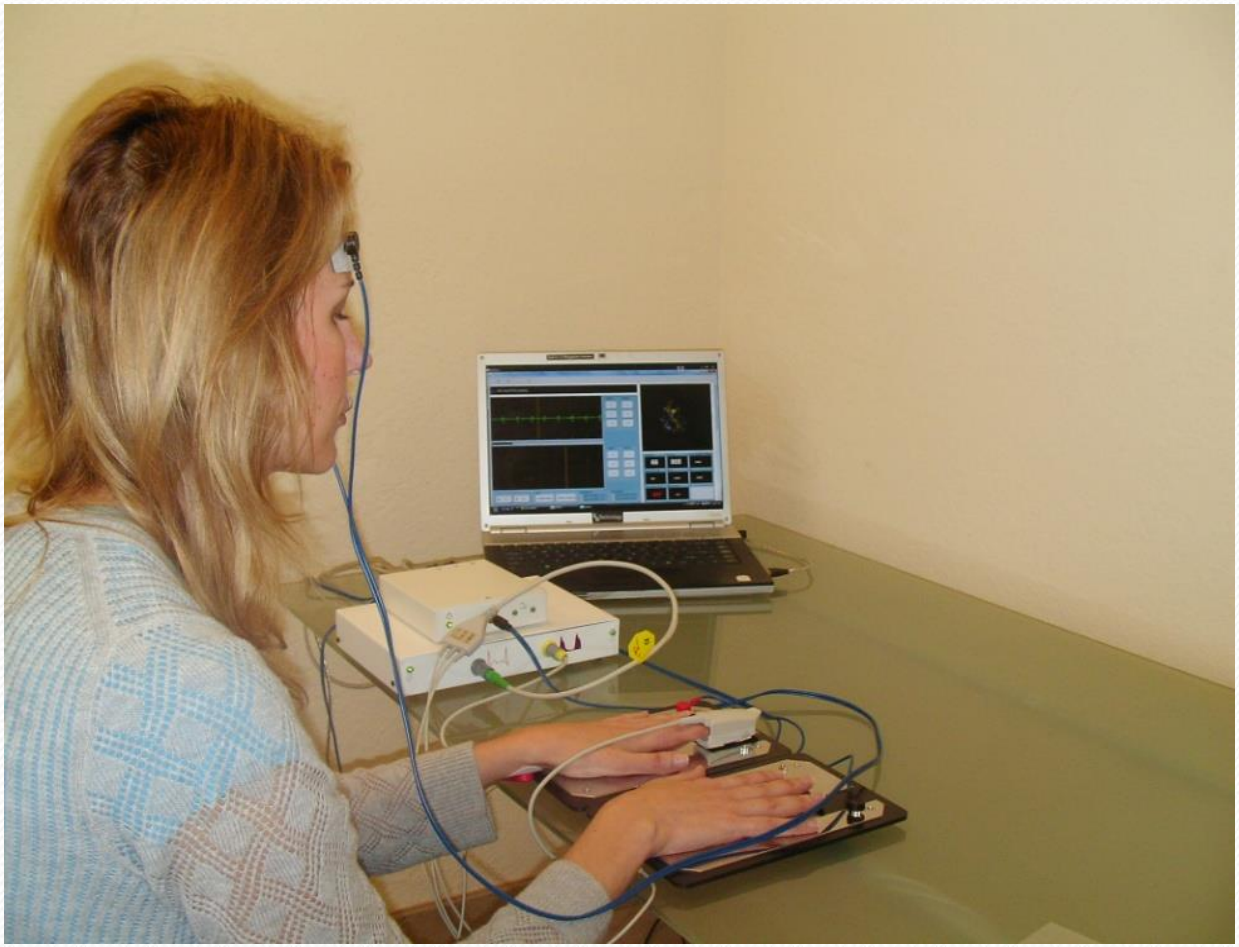
ES Teck Complex

- Electro-Sensor Technology Complex
- Includes 4 instruments:
  - EIS (Electro-Interstitial Scan) technology (DC, 100 to 700 Hz)
  - BIA (Bio-Impedance Analysis) Technology (50kHz)
  - Photoplethysmograph (heart rate + HRV)
  - Oxymeter (% hemoglobin oxygen saturation)

Connections







Electro-Interstitial Scan & Bio-Impedance Analysis

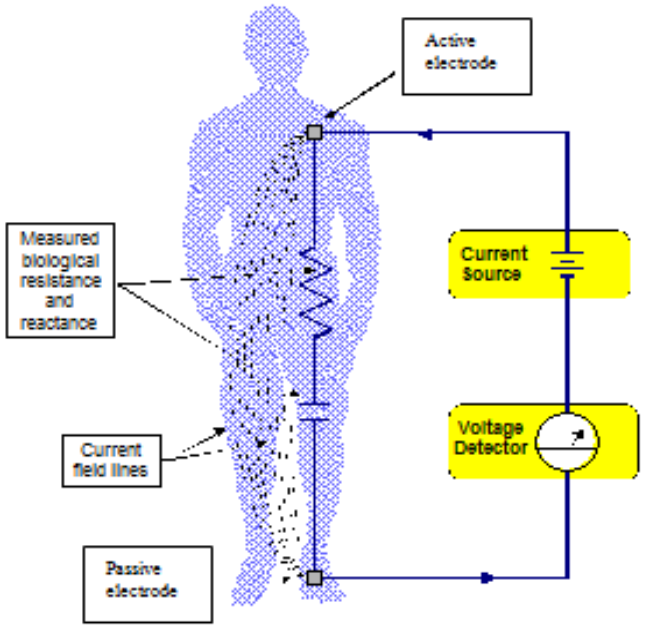
EIS: Main indicators: Hand, Foot and Forehead
SDC + : Electrical conductivity from anode to cathode related with the tissue oxygen level.
Delta SDC+-SDC-: related to interstitial chloride ions.
Alpha parameter: Electrical Dispersion related to the morphology of the fluid between the cells.

Bio-Impedance Main indicators: Body Composition
Fat Mass (FM)
Fat Free Mass (FFM)
Intra-cellular water (%)
Extra-cellular water (%)
Body Mass Index (BMI)

ESG Values

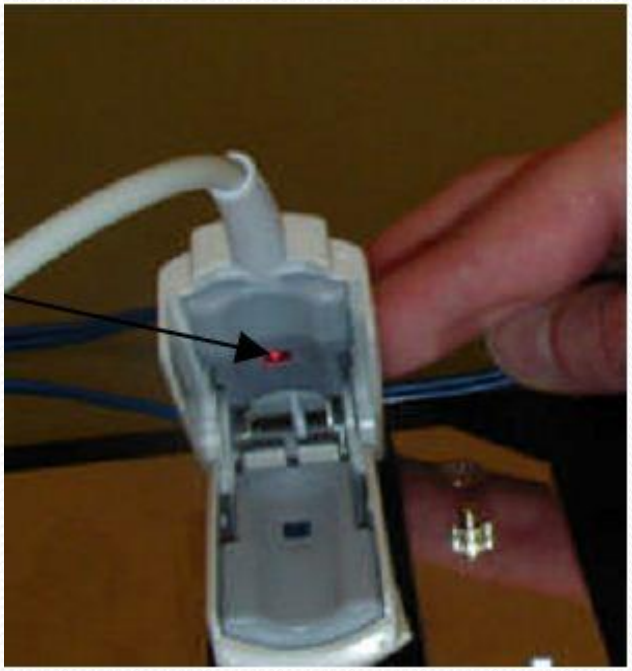
Indicators	Under	Normal	Over	Values	Norms	Units
alpha parameter (Dispersion EPA-SPA)				0.650	0.670 - 0.700	C.U
15 Right Hand <---> 16 Left forehead						
SDC+ (Anode to Cathode)				34.97	6.67 - 10.00	muSi
SDC- (Cathode to Anode)				5.38	3.03 - 4.27	muSi
Delta SDC+ - SDC-				42.00	5.00 - 11.00	C.U
alpha parameter (Dispersion EPA-SPA)				0.680	0.590 - 0.690	C.U
17 Left Hand <---> 18 Right Forehead						
SDC+ (Anode to Cathode)				26.32	6.67 - 10.00	muSi
SDC- (Cathode to Anode)				10.68	3.03 - 4.27	muSi
Delta SDC+ - SDC-				21.00	5.00 - 11.00	C.U
alpha parameter (Dispersion EPA-SPA)				0.700	0.670 - 0.714	C.U
19 Right Foot <---> 20 Left Hand						
SDC+ (Anode to Cathode)				12.38	10.68 - 15.87	muSi
SDC- (Cathode to Anode)				13.44	6.67 - 10.00	muSi
Delta SDC+ - SDC-				-2.00	5.00 - 10.00	C.U
alpha parameter (Dispersion EPA-SPA)				0.690	0.670 - 0.696	C.U
21 Left Foot <---> 22 Right Hand						
SDC+ (Anode to Cathode)				11.90	10.68 - 15.87	muSi
SDC- (Cathode to Anode)				10.68	6.67 - 10.00	muSi
Delta SDC+ - SDC-				3.00	7.00 - 10.00	C.U
alpha parameter (Dispersion EPA-SPA)				0.650	0.660 - 0.696	C.U
ESG Frequency domain or spectral analysis						
EIS HF (0.1875- 0.50 Hz)				91.34	22.00 - 34.00	%
EIS LF (0.05-0.1875 Hz)				7.52	22.00 - 46.00	%
EIS VLF (0.0-0.05 Hz)				1.14	22.00 - 50.00	%
EIS HF / VLF ratio				80.16	0.44 - 1.54	C.U

Bioimpedance values / ESG geometric analysis / Follow Up

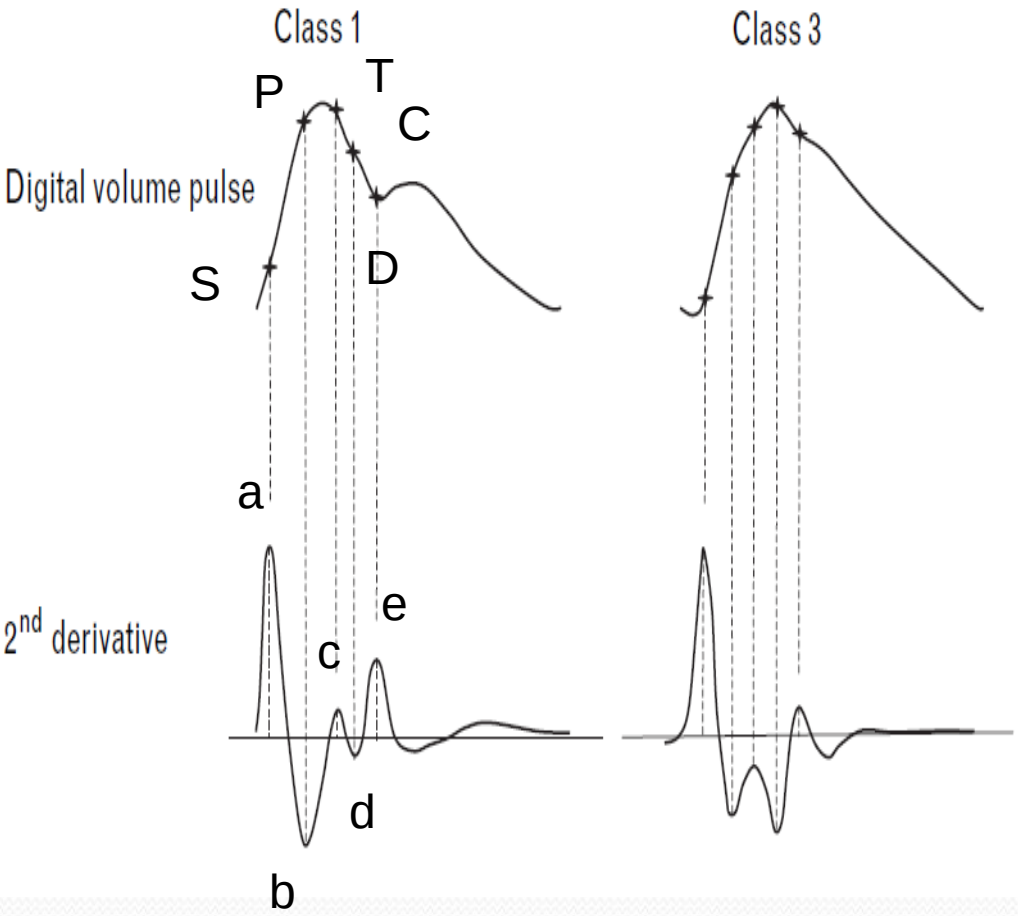


Photoplethysmograph & Oximeter

Using Red and Infra-Red light technology this biosensor:
a) Measures hemoglobin saturation in oxygen in % (SpO2%)
b) Perform Digital Pulse Analysis (DPA)
c) Detect heart rate and calculate parameters in time domain and frequency domain of the heart rate variability (HRV).



Digital Pulse Analysis*



S (Starting point)
Starting point of arterial pulse-wave.
Aortic valve opens and the blood of the left ventricle is discharged.

P (Percussion wave)
Wave caused from LV ejection that increase the arterial wall linearly.

T (Tidal wave)
Reflected wave from the small artery.

C (Incisura)
End-point of systolic phase, then aortic valve is closed.

D (Dicrotic wave)
Reflective oscillatory wave occurred from the blood crash into aortic valve by blood pressure of aorta.

Millasseau SC, Guigui FG, Kelly RP, Prasad K, Cockcroft JR, Ritter JM, Chowienczyk PJ. Noninvasive assessment of the digital volume pulse. Comparison with the peripheral pressure pulse. Hypertension 2000; 36:952–956.

Parameters Measured

- Tissue oxygen diffusion (SD Cond.)
- ATP production (SD Cond.)
- Int. fluid sodium ions (SD Cond.)
- Inters. chloride ions (Delta SDC)
- Int. fluid volume (Alpha param.)
- Heart rate
- HRV (ANS)
- Stress Index (left ventricle stress)
- Valsalva ratio (cardio health)
- Cardiac output (Q)
- Systemic Vascular Resistance (SVR)
- Mean arterial pressure (MAP)
- Large arteries Stiffness Index (SI)
- Smaller arteries Stiffness Index (RI)
- Vasoconstriction (DEI)
- Oxygen Uptake (Estimated VO_2)
- Oxygen delivery (Estimated Do_2)
- Hemog. oxygen saturat. (SpO_2%)
- Fat mass (FM)
- Fat Free Mass (FFM)
- Total body water (TVW)
- Intra-Cellular Water (ICW)
- Extra-Cellular Water (ECW)
- Body Mass Index (BMI)
- Basal Metabolic Rate (BMR)

Parameters Calculated

- TSH
- Insulin
- PTH
- Adrenaline
- Noradrenaline
- Cortisol
- Hepatic enzymes
- Leptin resistance
- ACTH
- Renin secretion
- Free Ionized Ca^{+}
- Int fluid phosphate
- Int fluid magnesium
- Arterial pH
- Arterial $PaCO_2$
- Arterial PaO_2
- Body tissue pH
- Immune System
- Blood Glucose Control
- Brain serotonin
- Brain Dopamine
- Brain Adrenaline
- Acetylcholine
- Superoxide Anion
- Hydrogen Peroxide
- Hydroxyl Radical
- Hypochlorous Acid
- Peroxynitrite

Diseases Screened

- Coronary Heart Disease
- Dyslipidemia
- Hear Failure
- Metabolic Syndrome
- Insulin Resistance
- Beta Cell Function
- Tissue Hypoxia
- Vascular Swelling
- Tissue inflammation
- Hypothyroidism
- Hyperthyroidism
- Postgaglionic Production
- Hepatic Fibrosis
- Digestive Disorders
- Kidney Function Disorders
- Adrenal Medula Activity
- Respiratory Disorders
- Depression
- ADHD (children)

Output Example

Homeostasis score values: Maximum score = 30; Very Good = 27-30; Good = 24-27; Normal = 20-24; Warning = 17-20; Low = 10-17; Poor < 10.

Results

- Subject EK (Female, 55 years old)
- Subject GK (Male 66 years Old)
- Subject LF (Female 55 years old)

Subject EK Complaints

Subject EK (Female, 55 years old)

Date	5/11	6/1 (3 weeks later)
Complaints	Left tendon severed Create imbalance in hips and back. Came in with some hip pain and back pain	Came in saying she had a rough day at work and with her teenage son. Hips are less painful and no back pain. Feeling a little more energy.

Subject EK Basic Info Before

WARNING!

All results should be considered in the clinical context of the patient's case history, symptoms, known diagnosis, current medications, treatment plan and therapies. Final status report is the sole responsibility of the practitioner.

Subject ID	***Practitioner***
First/Last Name: 2EK25	Address:
Weight : 145.0 Pounds	
Height: 5 Feet 6 Inch	Title:
Date of birth: 8-25-1955	
Gender: Female	
	Telephone / Fax / E-mail:
Measurement conditions	Name : Administrator
Examination performed at: 5-11-2011 17 : 03	Physician's notes:
Registration method: A1 (63,0,100,40,0) N1 (53,0,100,40,0)	
Clinical context	
Symptoms :	
Medications :	
Daily Activity Level: Moderate: walk 20 minutes a day / 1-2 hours sport a week Systolic / Diastolic pressure: 114 / 75	
Reason for consultation:	Signature of the practitioner :

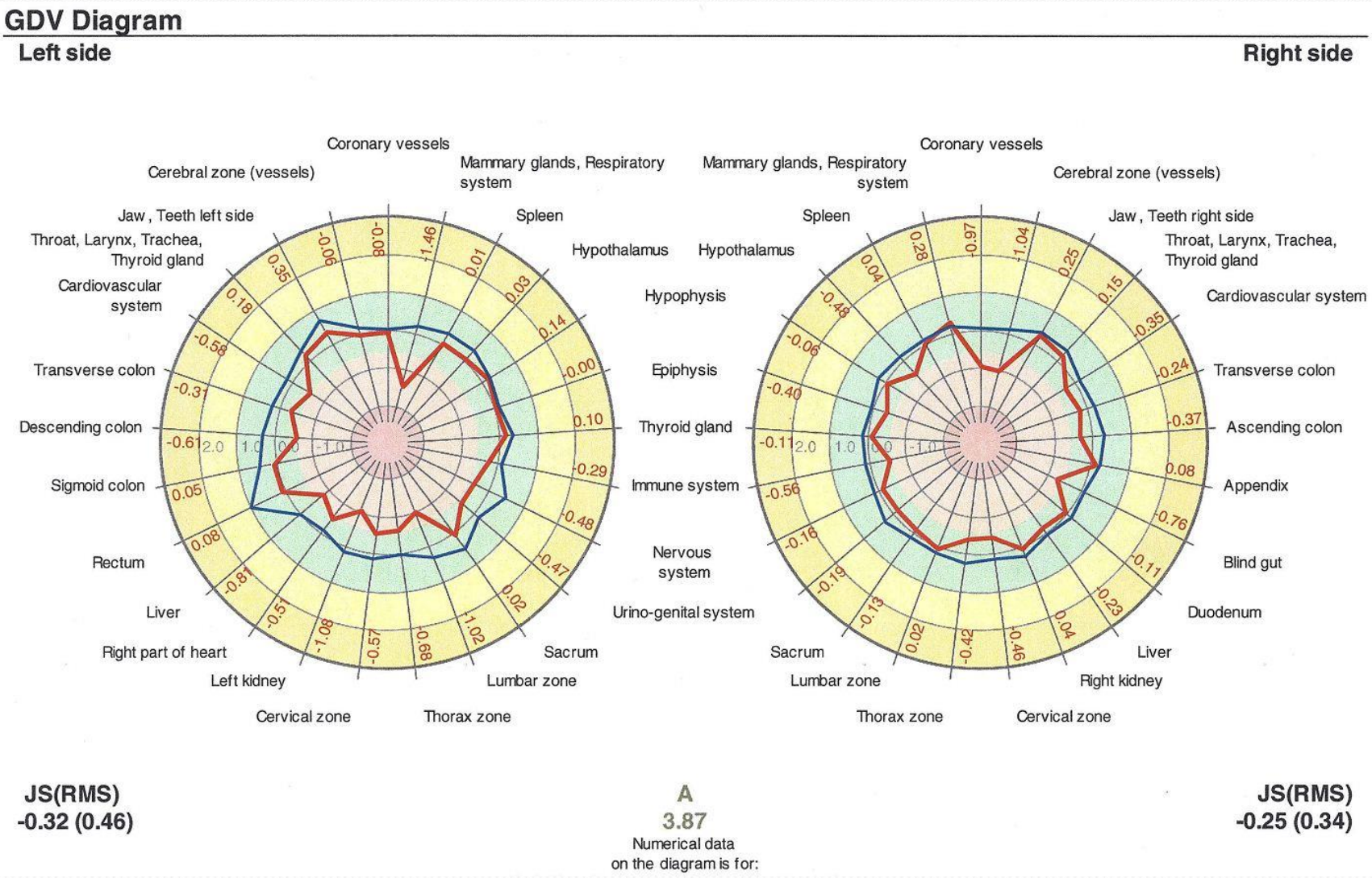
Subject EK Basic Info After

WARNING!

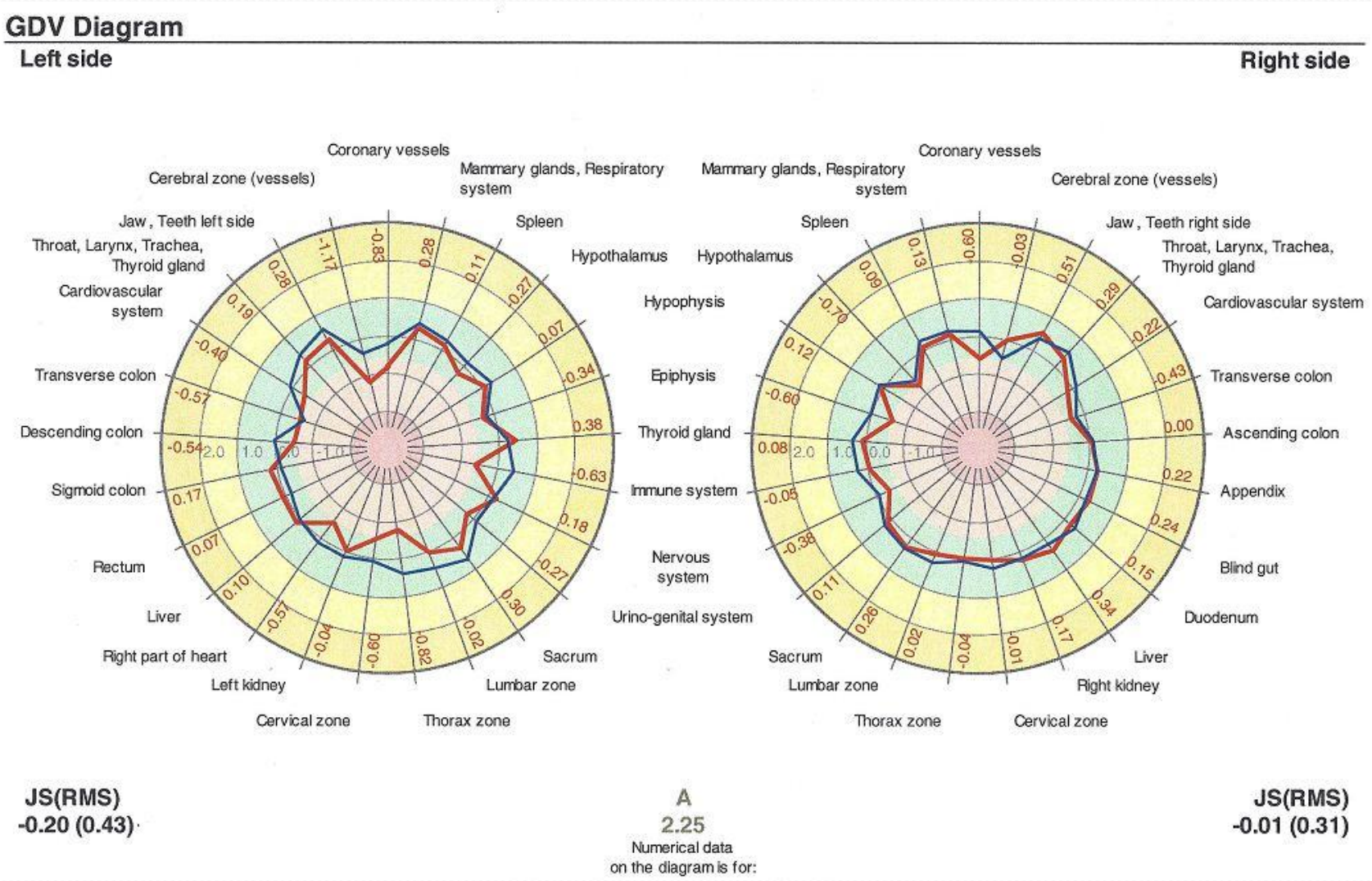
All results should be considered in the clinical context of the patient's case history, symptoms, known diagnosis, current medications, treatment plan and therapies. Final status report is the sole responsibility of the practitioner.

Subject ID	***Practitioner***
First/Last Name: 2EK25	Address:
Weight : 145.0 Pounds	
Height: 5 Feet 6 Inch	Title:
Date of birth: 8-25-1955	
Gender: Female	
	Telephone / Fax / E-mail:
Measurement conditions	Name : Administrator
Examination performed at: 6-1-2011 17 : 16	Physician's notes:
Registration method: A1 (60,0,100,60,0) N1 (53,0,100,60,0)	
Clinical context	
Symptoms :	
Medications :	
Daily Activity Level: Moderate: walk 20 minutes a day / 1-2 hours sport a week Systolic / Diastolic pressure: 106 / 76	
Reason for consultation:	Signature of the practitioner :

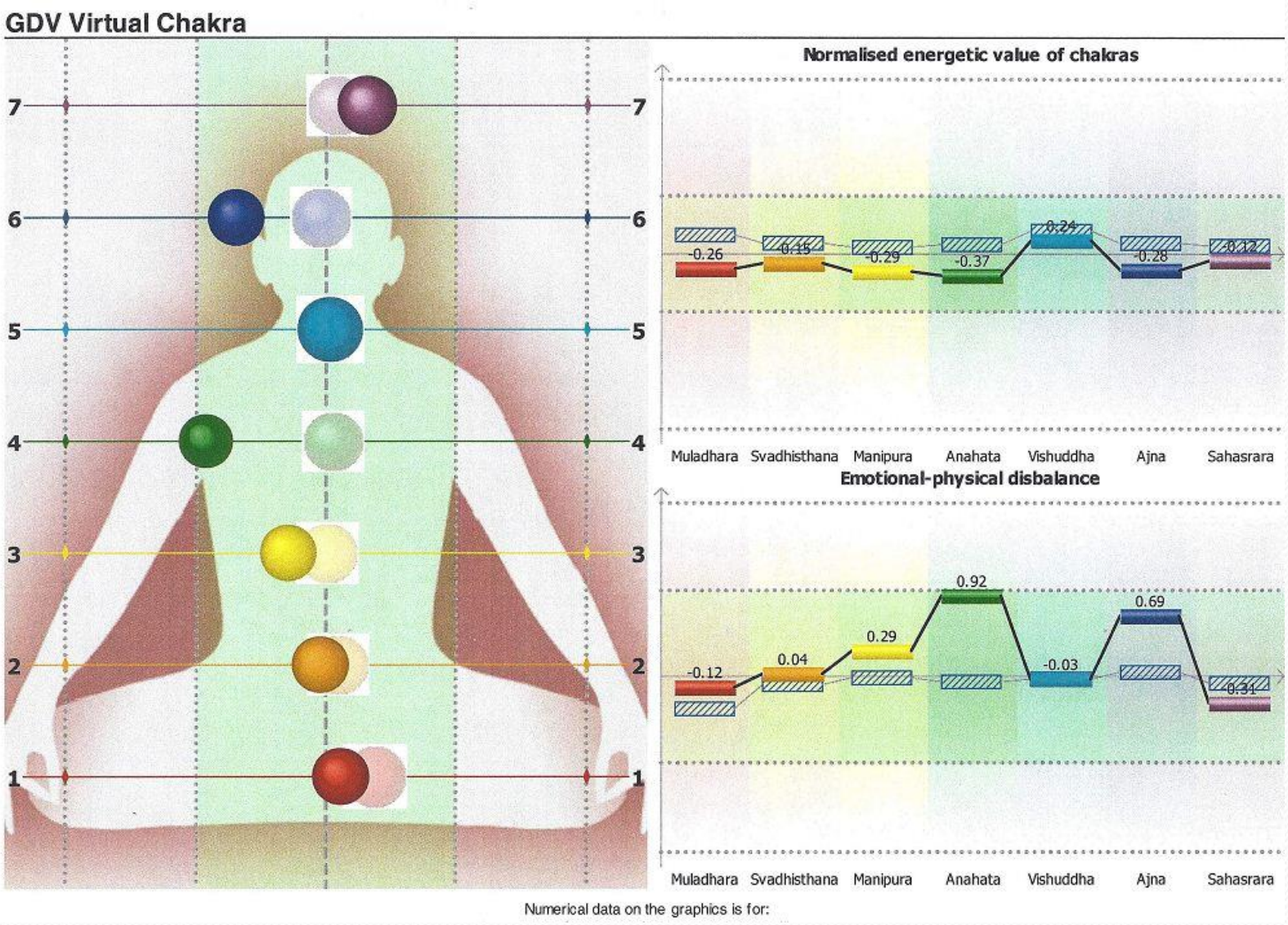
Subject EK Radial Charts Before



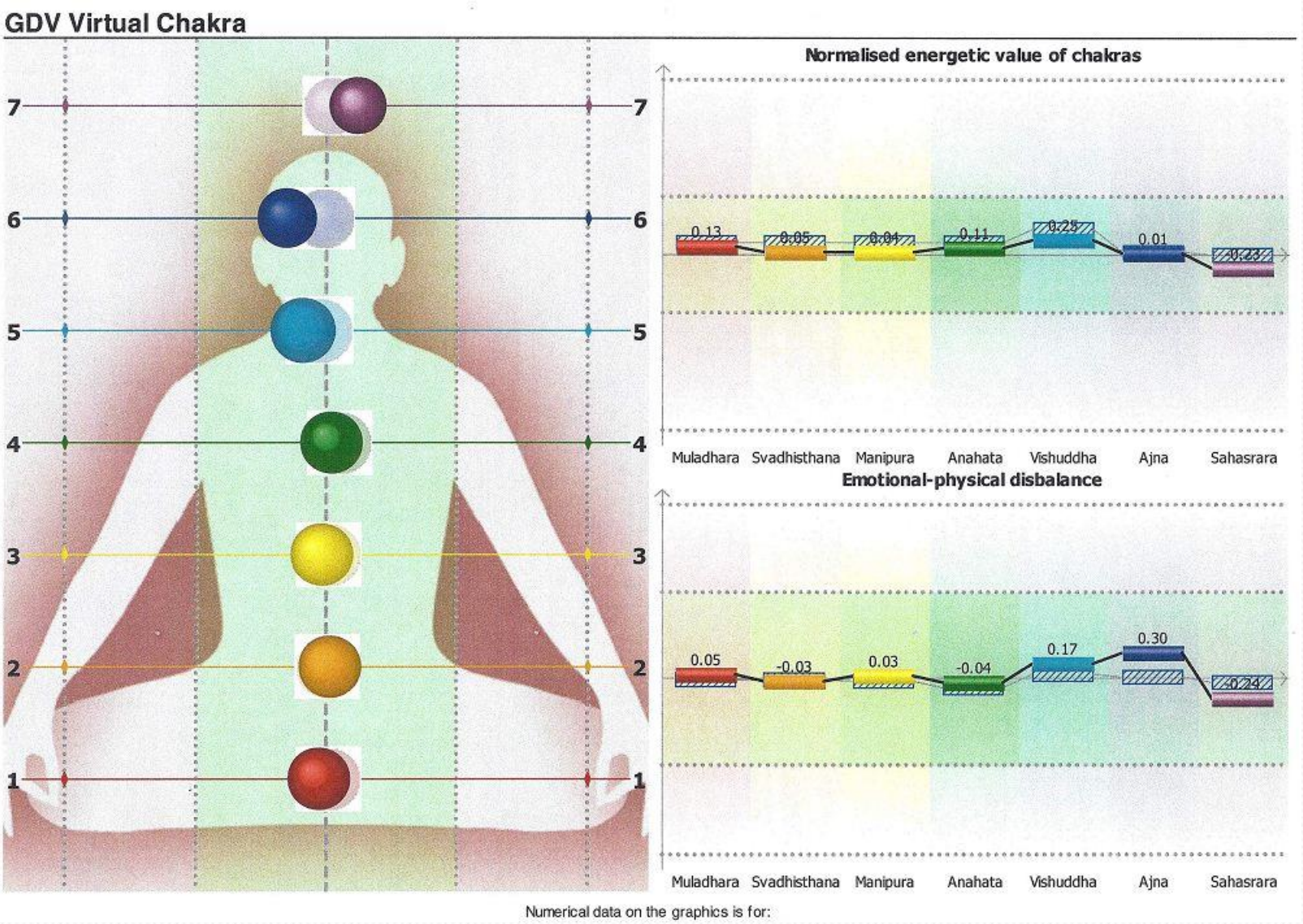
Subject EK Radial Charts After



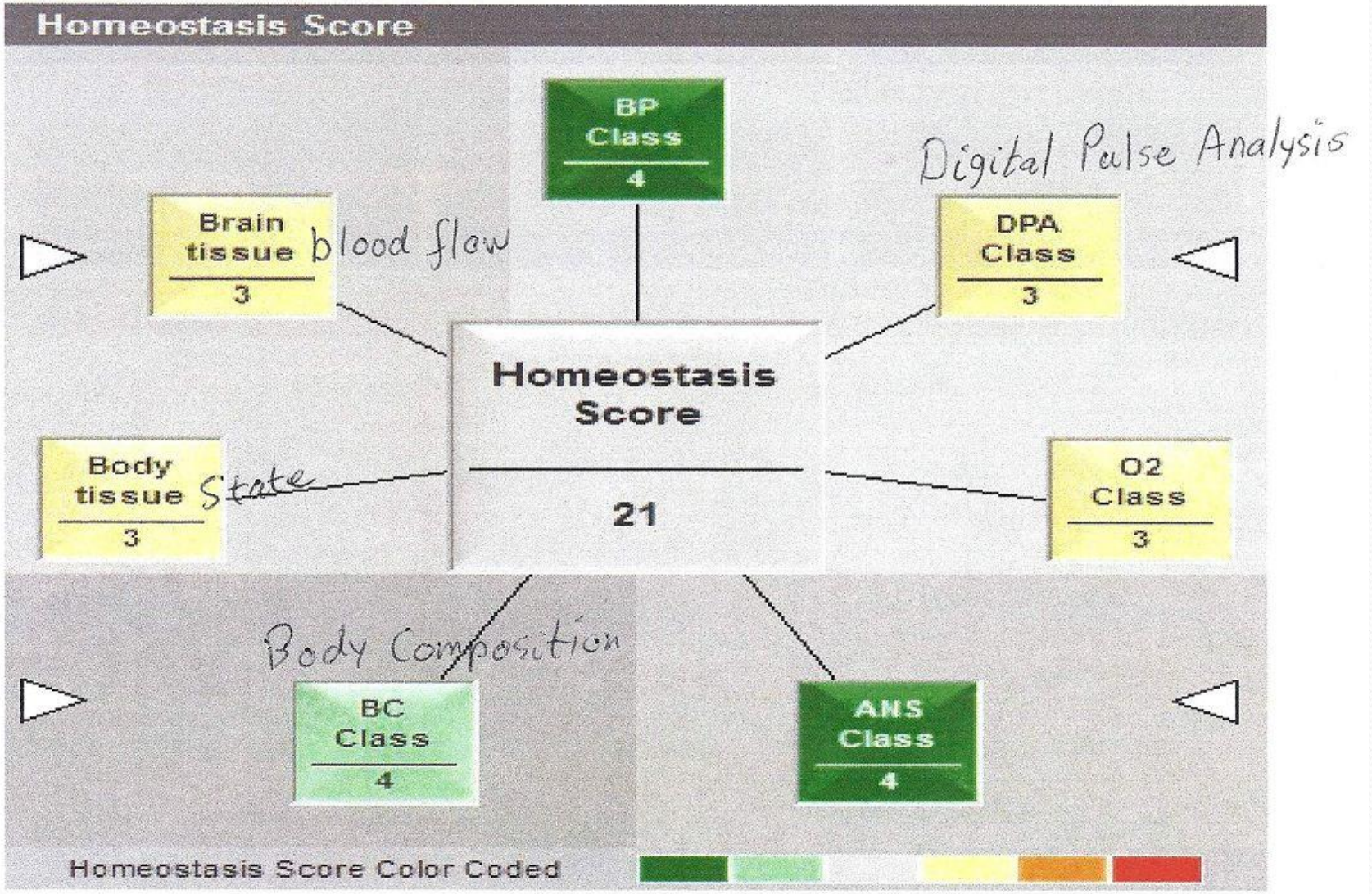
Subject EK Virtual Chakras Before



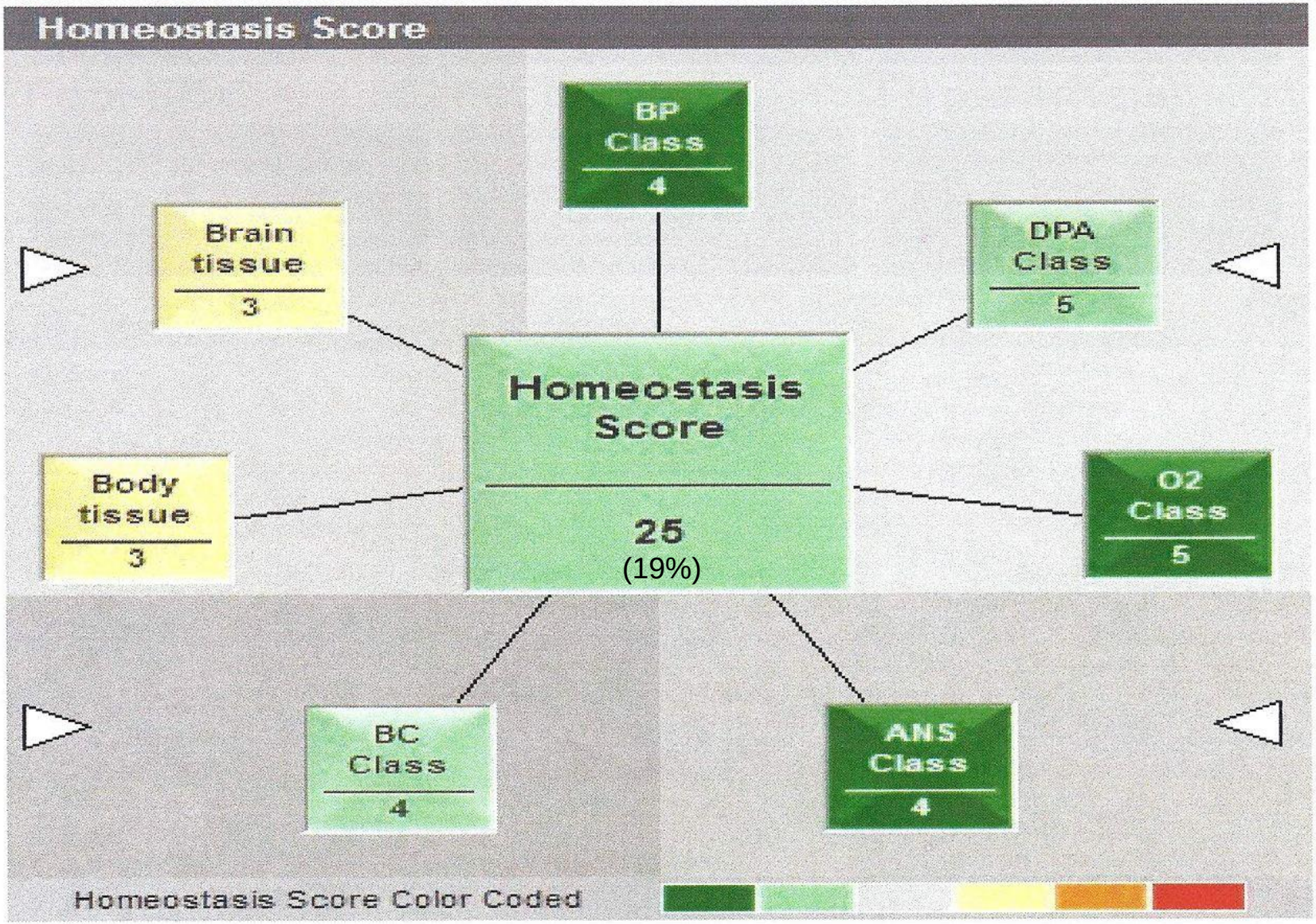
Subject EK Virtual Chakras After



Subject EK Homeostasis Score Before



Subject EK Homeostasis Score After



Subject GK Complaints

Subject GK (Male 66 years Old)

Date	5/17	5/25 (1 week later)
Complaints	Huge level of stress over income + partner's health Right shoulder pain due to injury mainly due to javelin throwing Last 1.5 years → lower energy, lower reserves Sarchochemia → muscles shrinking Hands tend to cramp easily when grasping Sometimes feet cramp painfully	Last week was better than the week before in term of stress Right shoulder is worse due to weight lifting (but generally his shoulder was getting better before weight lifting) No change with the hands Feet cramping did not happen.

Subject GK Basic Info Before

WARNING!

All results should be considered in the clinical context of the patient's case history, symptoms, known diagnosis, current medications, treatment plan and therapies. Final status report is the sole responsibility of the practitioner.

Subject ID	***Practitioner***
First/Last Name: 1G04	Address:
Weight : 186.0 Pounds	
Height: 6 Feet 0 Inch	Title:
Date of birth: 7-4-1945	
Gender: Male	
	Telephone / Fax / E-mail:
Measurement conditions	Name : Administrator
Examination performed at: 5-17-2011 15 : 30	Physician's notes:
Registration method: A1 (67,0,100,24,0) N1 (54,0,100,24,0)	
Clinical context	
Symptoms :	
Medications :	
Daily Activity Level: Sport: more 2 hours / week Systolic / Diastolic pressure: 115 / 71	
Reason for consultation:	Signature of the practitioner :

Subject GK Basic Info After

WARNING!

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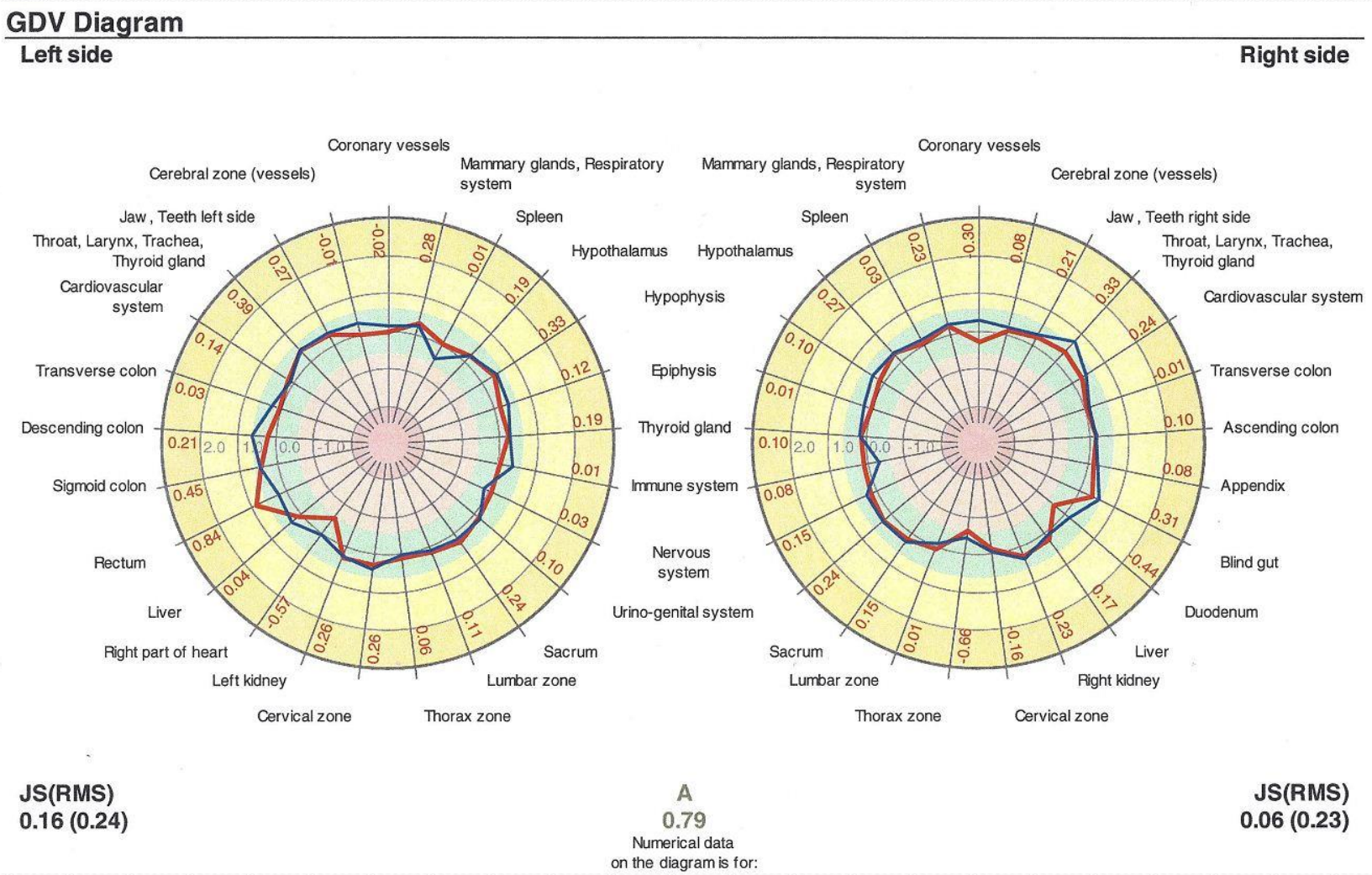
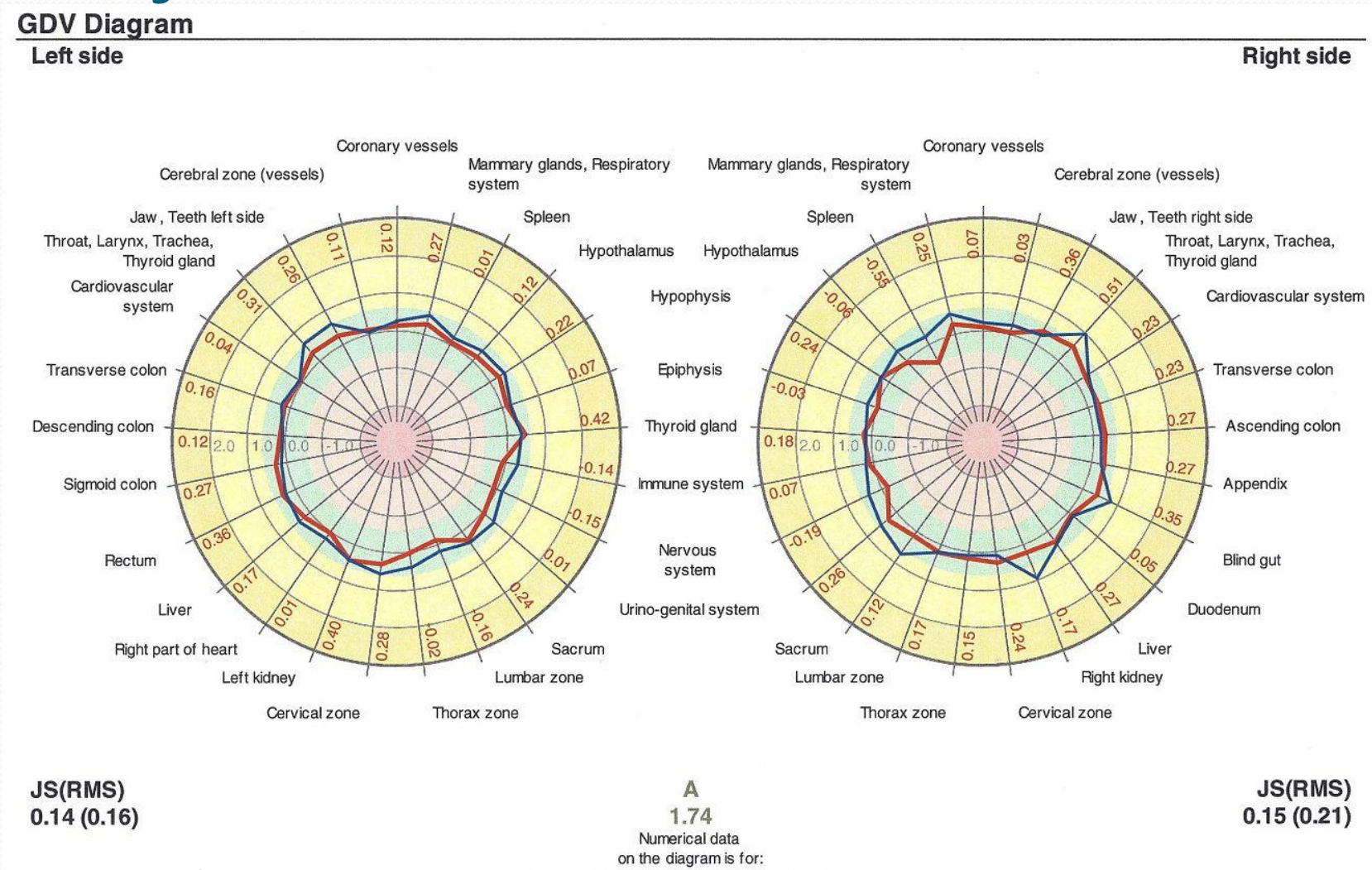
Subject ID	***Practitioner***
First/Last Name: 1G04	Address:
Weight : 186.0 Pounds	
Height: 6 Feet 0 Inch	Title:
Date of birth: 7-4-1945	
Gender: Male	
	Telephone / Fax / E-mail:
Measurement conditions	Name : Administrator
Examination performed at: 5-25-2011 16 : 10	Physician's notes:
Registration method: A1 (76,0,100,19,0) N1 (54,0,100,19,0)	
Clinical context	
Symptoms :	
Medications :	
Daily Activity Level: Sport: more 2 hours / week Systolic / Diastolic pressure: 123 / 74	
Reason for consultation:	Signature of the practitioner :

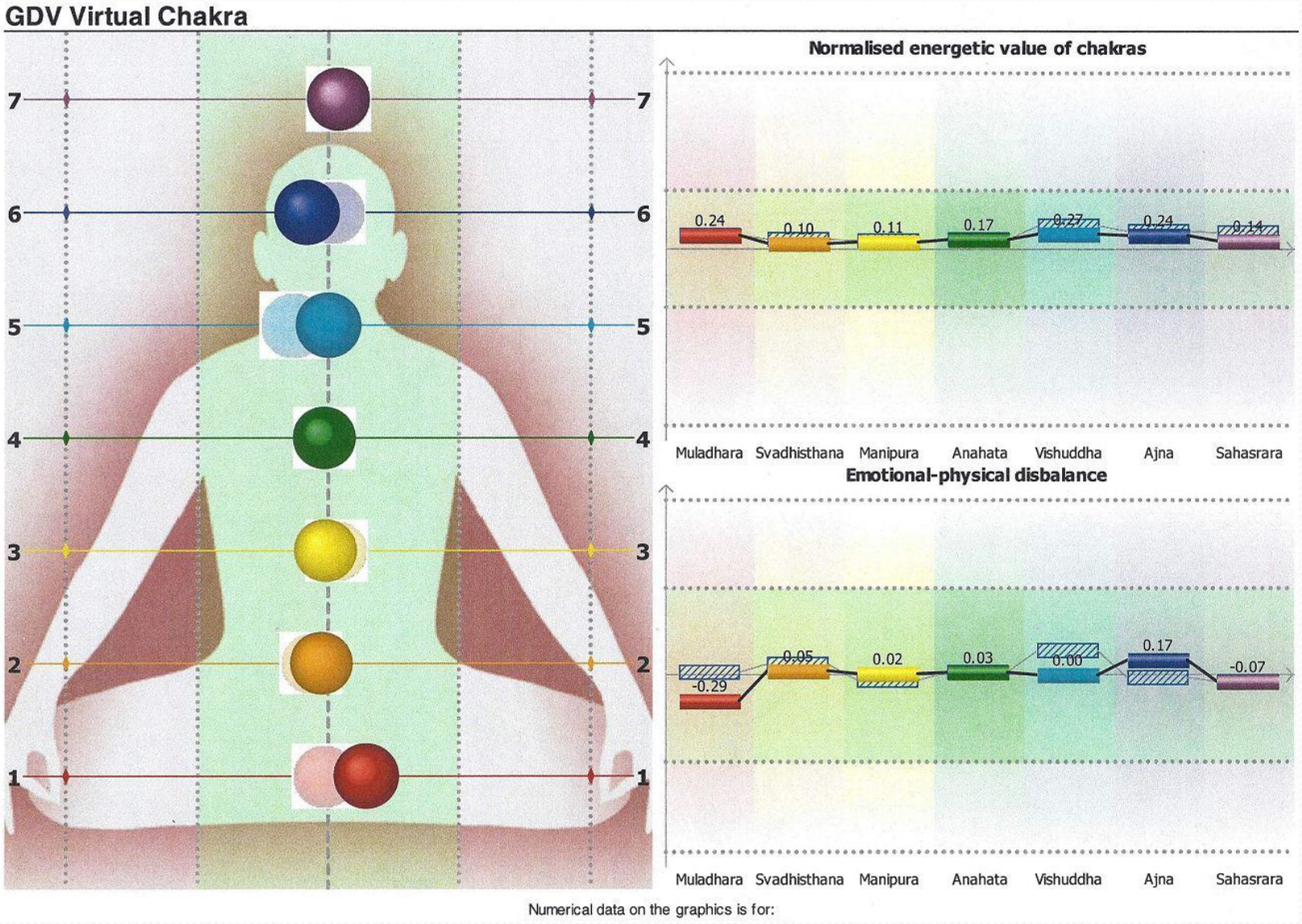
Subject GK Radial Charts Before



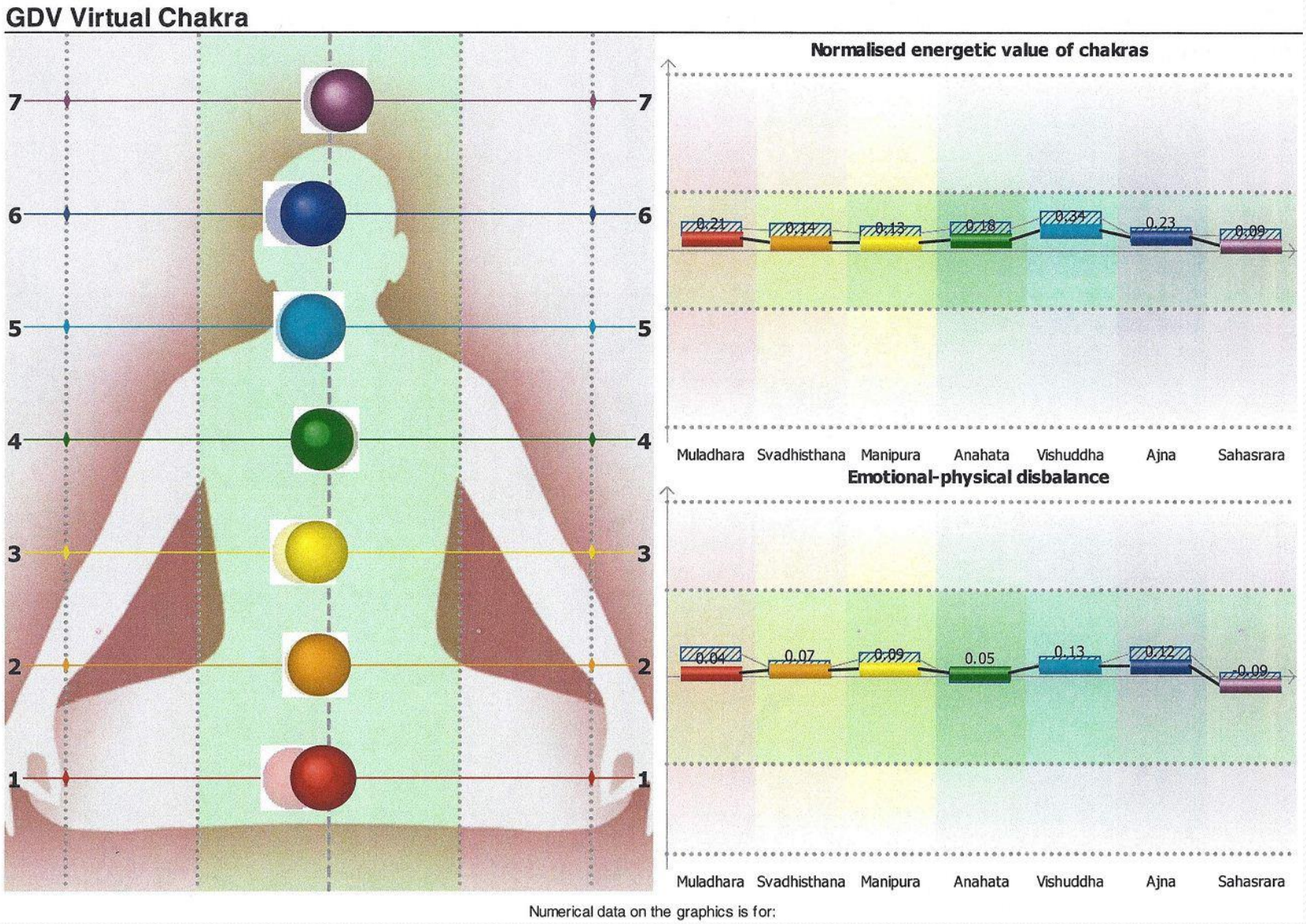
Subject GK Radial Charts After



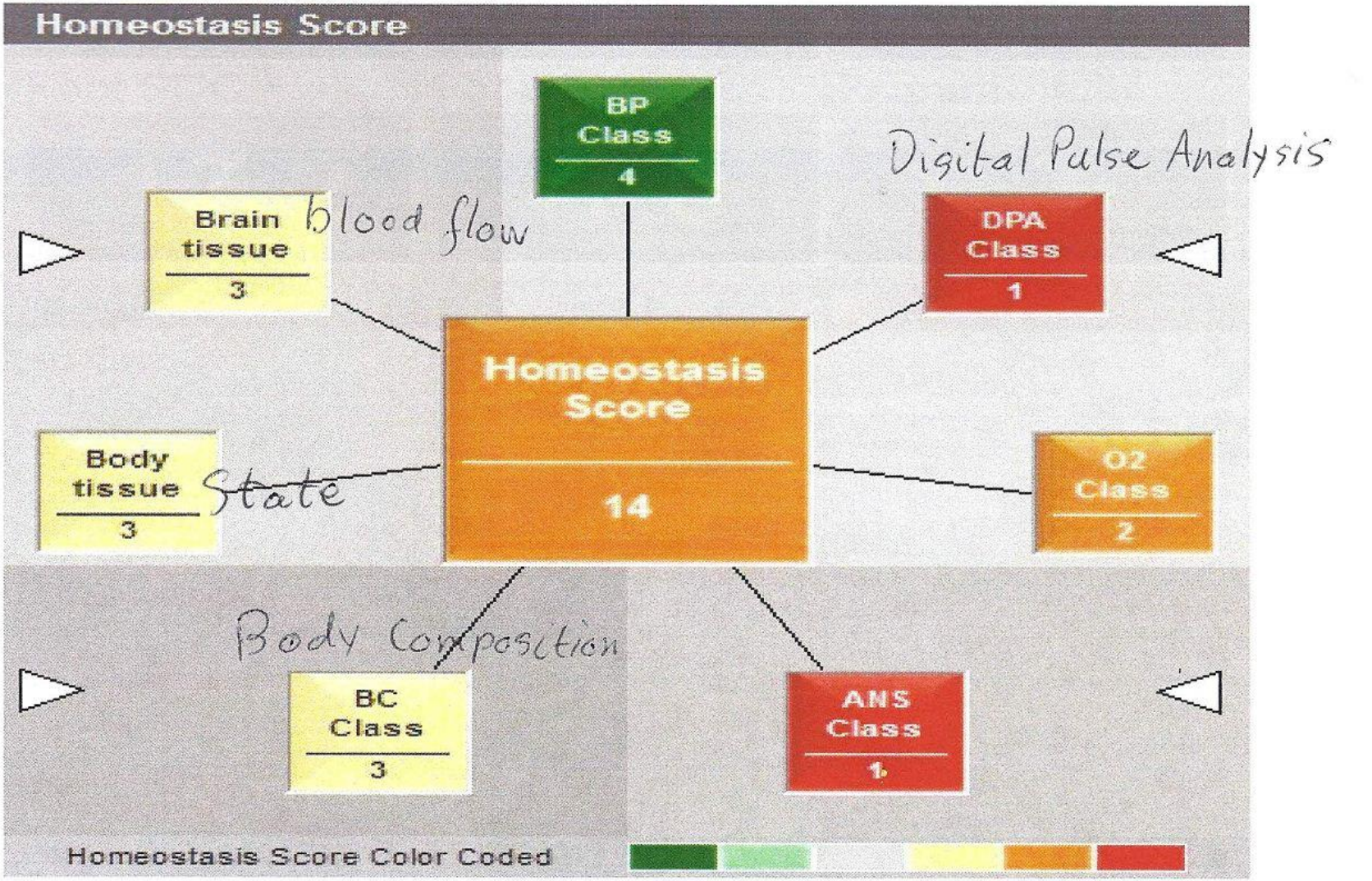
Subject GK Virtual Chakras Before



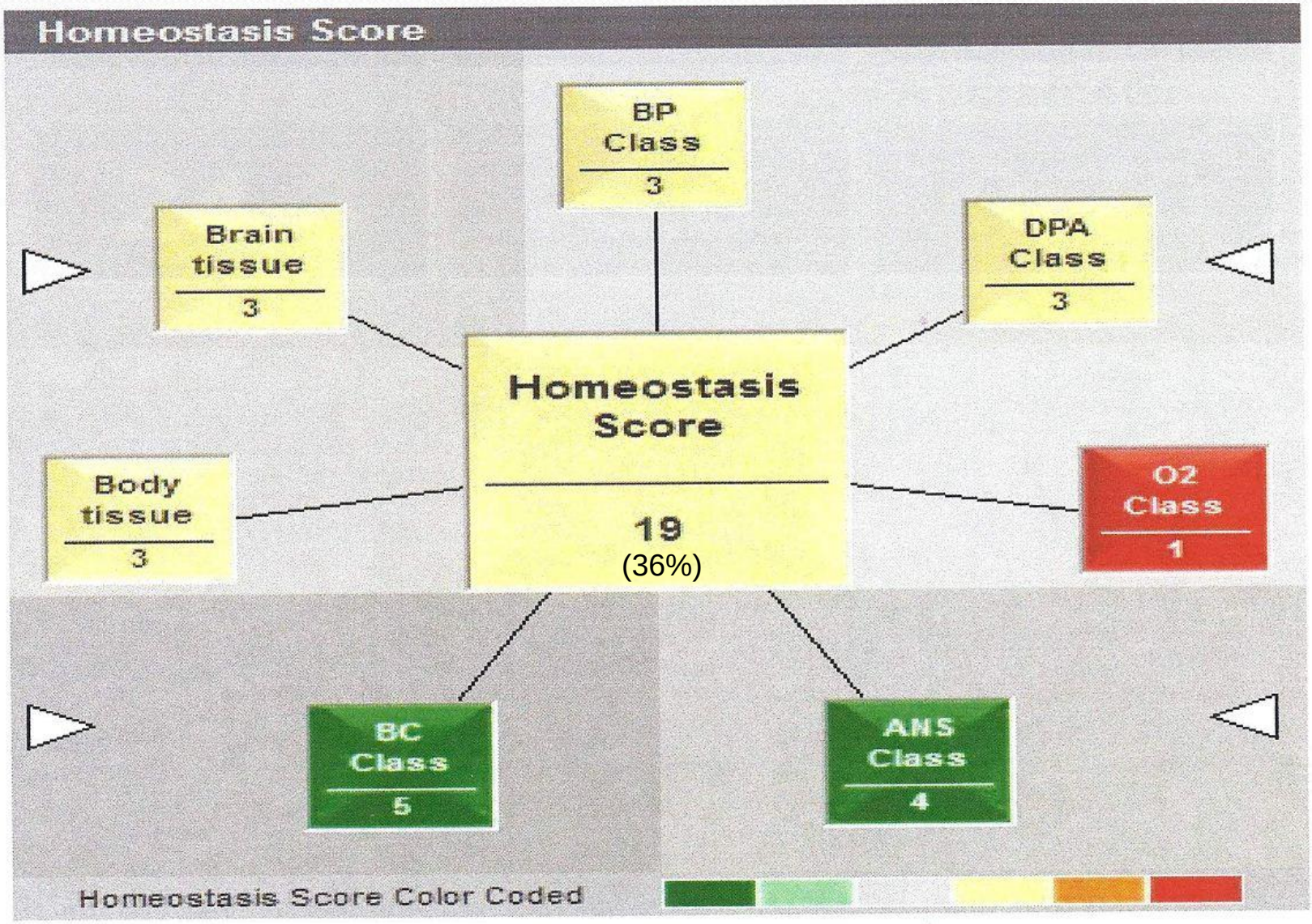
Subject GK Virtual Chakras After



Subject GK Homeostatic Score Before



Subject GK Homeostatic Score After



Subject LF (Female 55 years old)

Date	5/4	5/26 (3 weeks later)	6/1 (4 weeks later)
Complaints	Broke her back at 30. Still has back pain, digestive and reproductive problems because of that. Chest congestion. Vertical hernia problems. Tore knee tendon (ACL) in 1996 still give her problems. Low thyroid function since age 42 (had a stroke at 19). Crashed in 1997 with brain problems, could not remember what she was doing.	She had a very stressful week. One of her roommate crashed over alcohol abuse. Also has unresolved money problems (very stressful). Didn't eat today (1 apple). After 5 days on the MRS200 felt dehydrated so she started drinking water with salt added (just water did not do). Knee just popped again a few days ago while avoiding an accident; a little painful during the test. No back pain. Chest congestion improved. Brain feels like it functions better.	Obviously looked more relaxed. Major money problems resolved. Knee a little better but still out of alignment. She stopped using the MRS2000 most of last week over concerns about stress level increasing. Brain not as clear as the week before (thyroid linked to brain function) → the MRS2000 seemed to have help mental clarity. Hernia was improving during MRS200 use but not so good now. No back pain. Had upper back pain but put a rolled up socks in her upper back during today's session → pain disappeared.

Subject LF Basic Info Before

WARNING!

All results should be considered in the clinical context of the patient's case history, symptoms, known diagnosis, current medications, treatment plan and therapies. Final status report is the sole responsibility of the practitioner.

Subject ID	***Practitioner***
First/Last Name: 2LF02	Address:
Weight : 180.0 Pounds	
Height: 5 Feet 6 Inch	Title:
Date of birth: 6-2-1956	
Gender: Female	
	Telephone / Fax / E-mail:
Measurement conditions	Name : Administrator
Examination performed at: 5-4-2011 14 : 34	Physician's notes:
Registration method: A1 (75,0,100,37,0) N1 (54,0,100,37,0)	Use semi-natural hormone replacement called Armour Thyroid. Not the same as Biodynamic. The reason it is semi-natural is that it is harvested from commeccially raised pigs fed with high hormone and antibiotics.
Clinical context	
Symptoms :	
Medications :	
Daily Activity Level: Moderate: walk 20 minutes a day / 1-2 hours sport a week Systolic / Diastolic pressure: 100 / 67	
Reason for consultation:	Signature of the practitioner :

Subject LF Basic Info in The Middle

WARNING! All results should be considered in the clinical context of the patient's case history, symptoms, known diagnosis, current medications, treatment plan and therapies. Final status report is the sole responsibility of the practitioner.	
Subject ID	***Practitioner***
First/Last Name: 2LF02	Address:
Weight : 180.0 Pounds	
Height: 5 Feet 6 Inch	Title:
Date of birth: 6-2-1956	
Gender: Female	
	Telephone / Fax / E-mail:
Measurement conditions	Name : Administrator
Examination performed at: 5-26-2011 18 : 47	Physician's notes:
Registration method: A1 (73,0,100,58,0) N1 (54,0,100,58,0)	
Clinical context	
Symptoms :	
Medications :	
Daily Activity Level: Light: office activity Systolic / Diastolic pressure: 121 / 66	
Reason for consultation:	Signature of the practitioner :

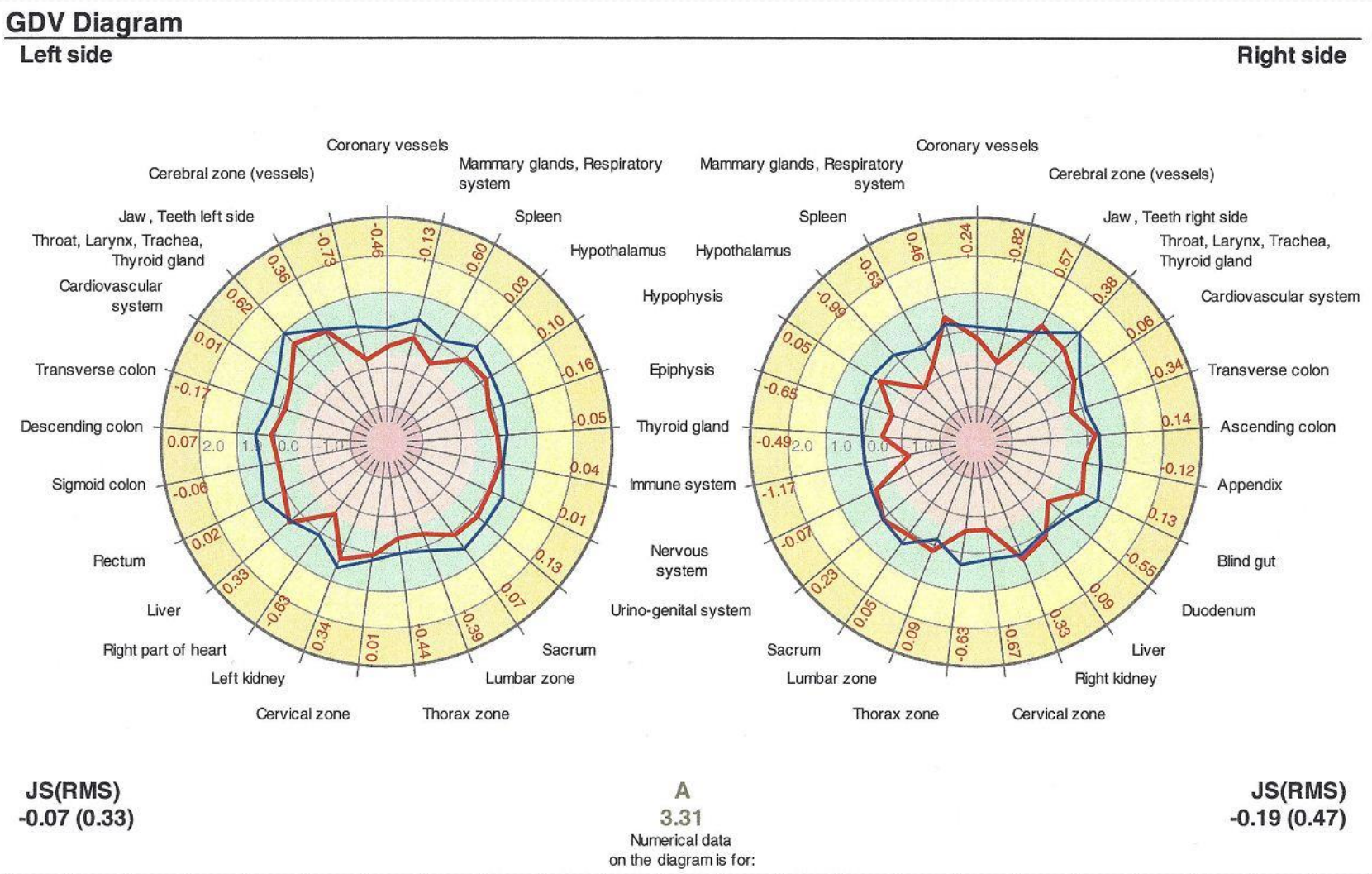
Subject LF Basic Info After

WARNING!

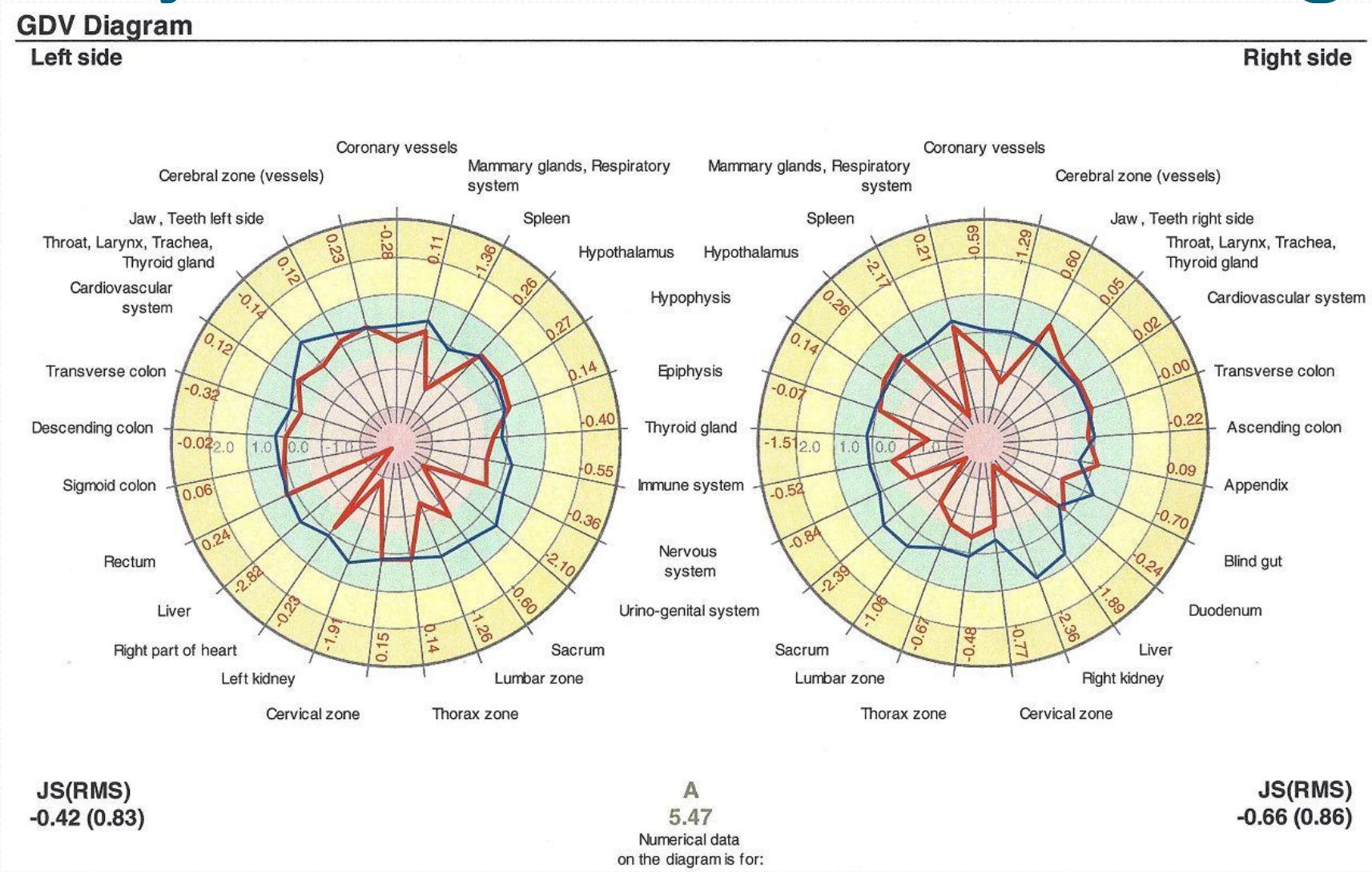
All results should be considered in the clinical context of the patient's case history, symptoms, known diagnosis, current medications, treatment plan and therapies. Final status report is the sole responsibility of the practitioner.

Subject ID	***Practitioner***
First/Last Name: 2LF02	Address:
Weight : 172.0 Pounds	
Height: 5 Feet 6 Inch	Title:
Date of birth: 6-2-1956	
Gender: Female	
	Telephone / Fax / E-mail:
Measurement conditions	Name : Administrator
Examination performed at: 6-1-2011 18 : 13	Physician's notes:
Registration method: A1 (74,0,100,70,0) N1 (53,0,100,70,0)	
Clinical context	
Symptoms :	
Medications :	
Daily Activity Level: Moderate: walk 20 minutes a day / 1-2 hours sport a week Systolic / Diastolic pressure: 114 / 68	
Reason for consultation:	Signature of the practitioner :

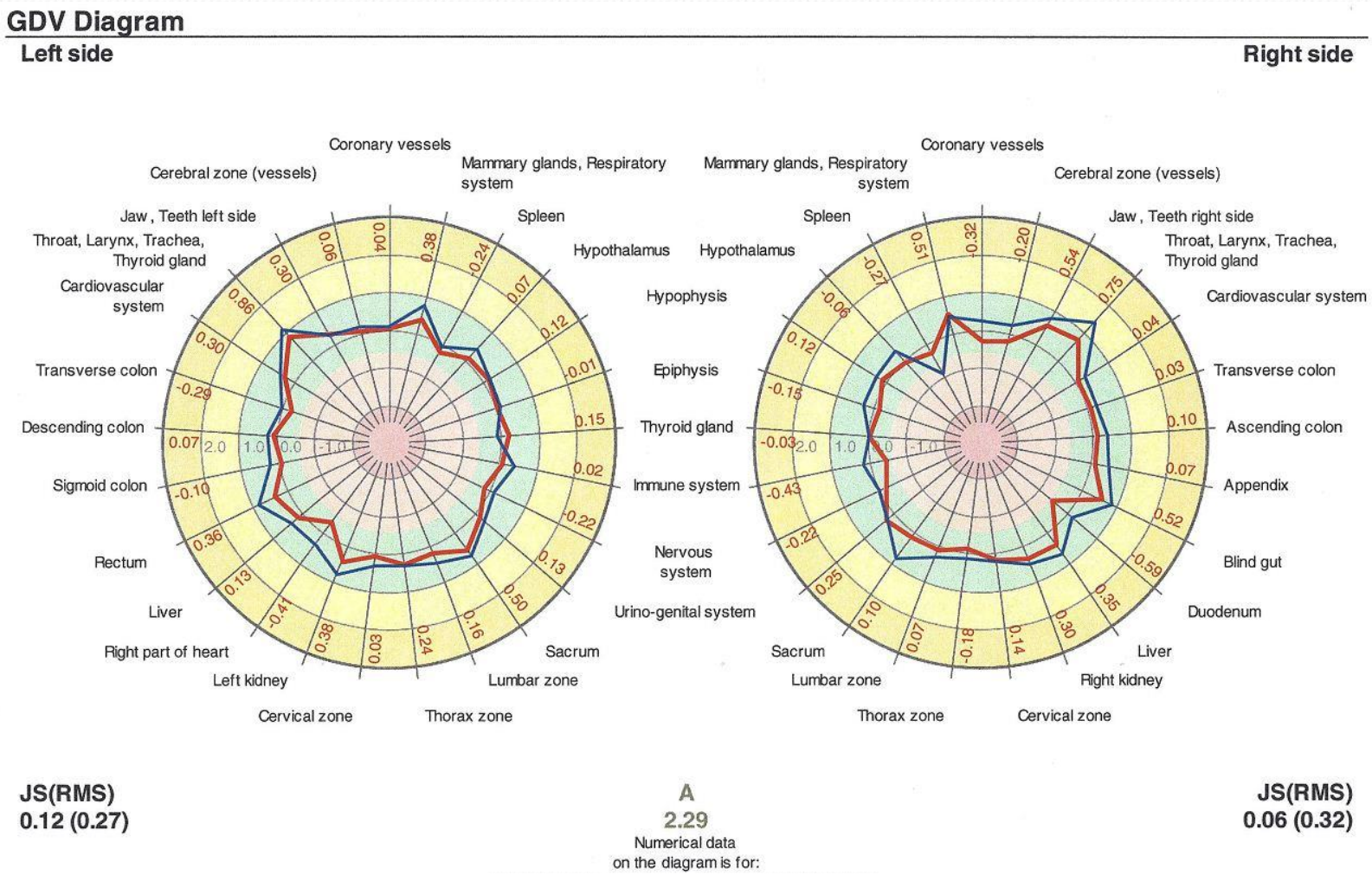
Subject LF Radial Charts Before



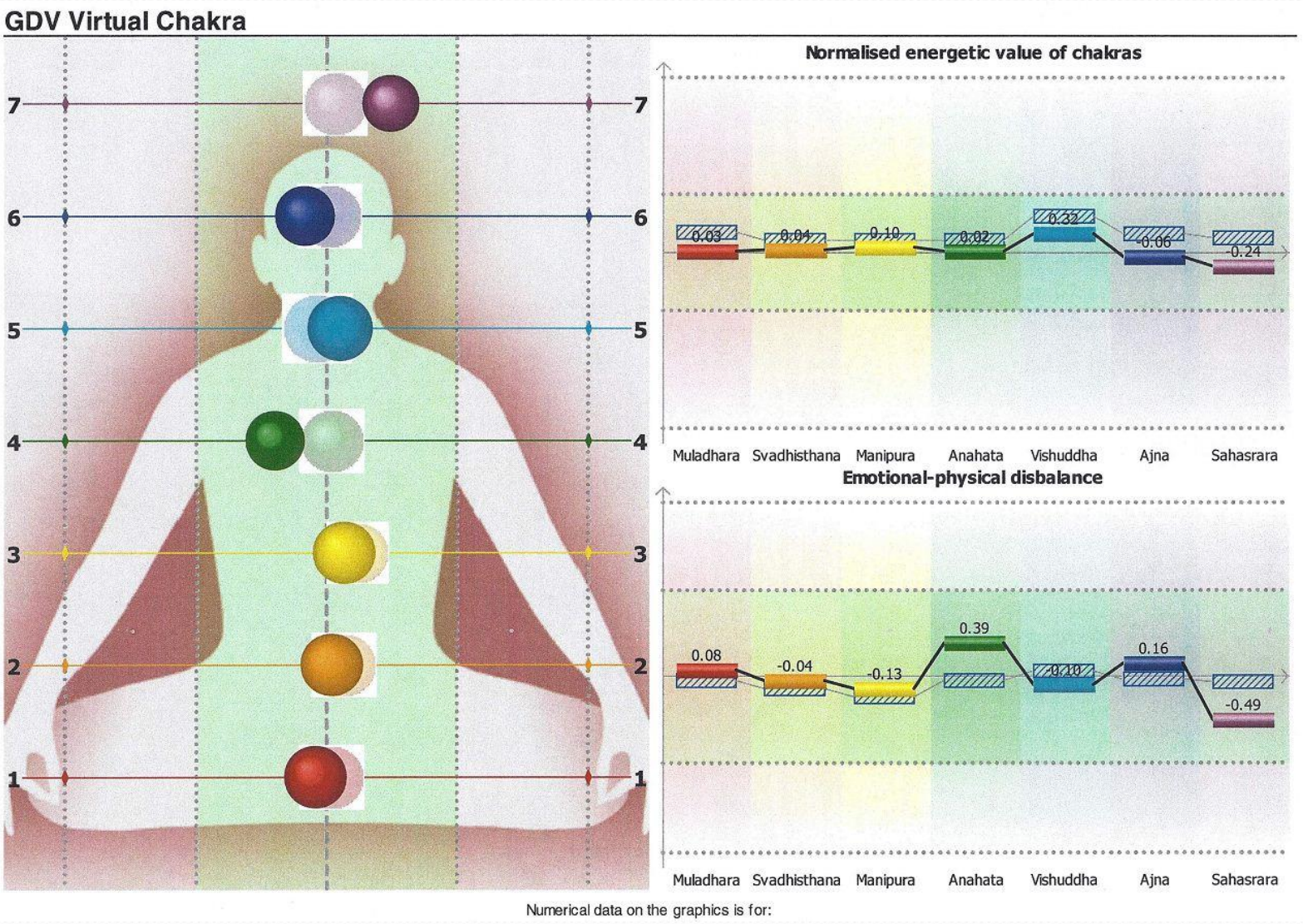
Subject LF Radial Charts During



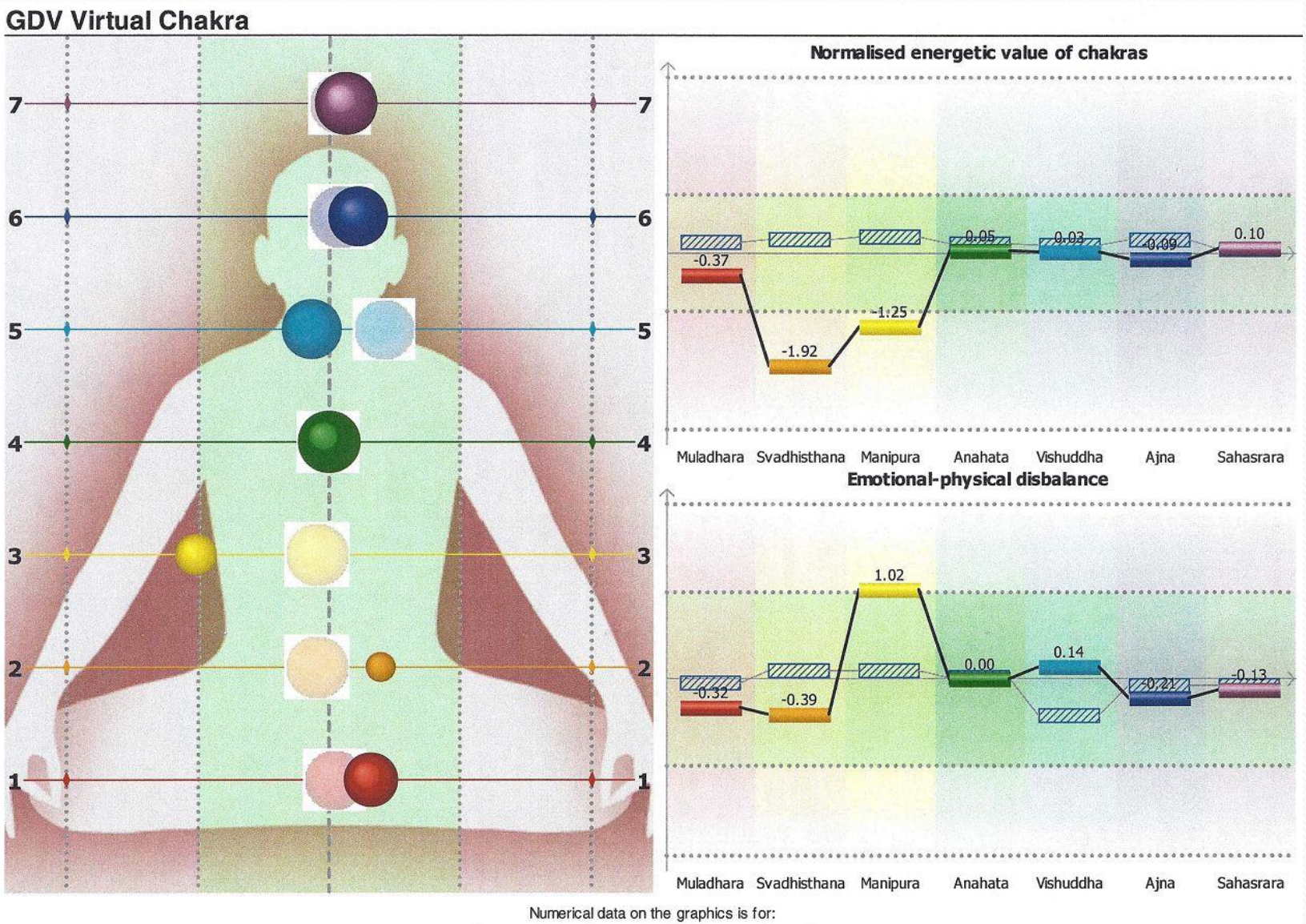
Subject LF Radial Charts After



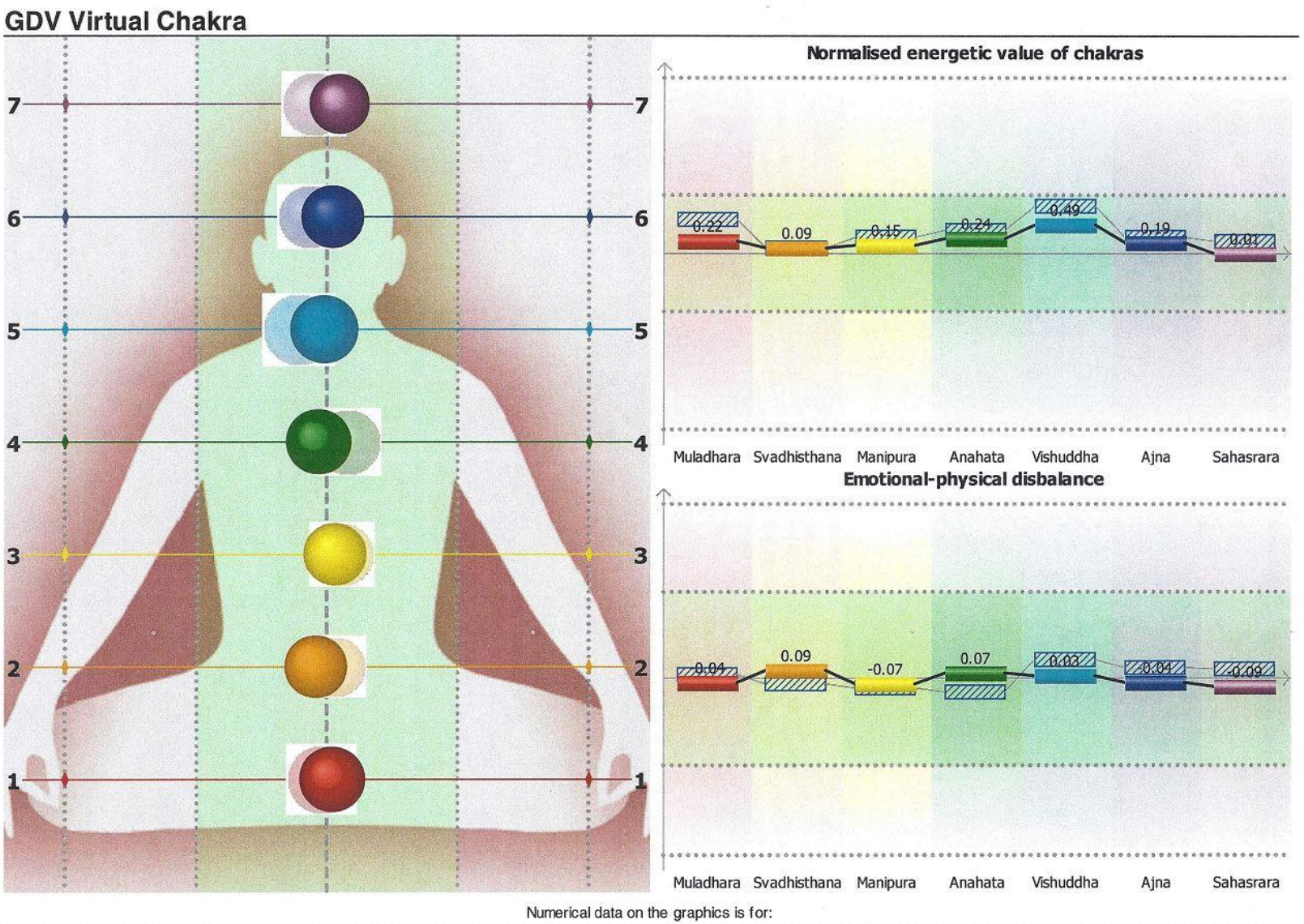
Subject LF Virtual Chakras Before



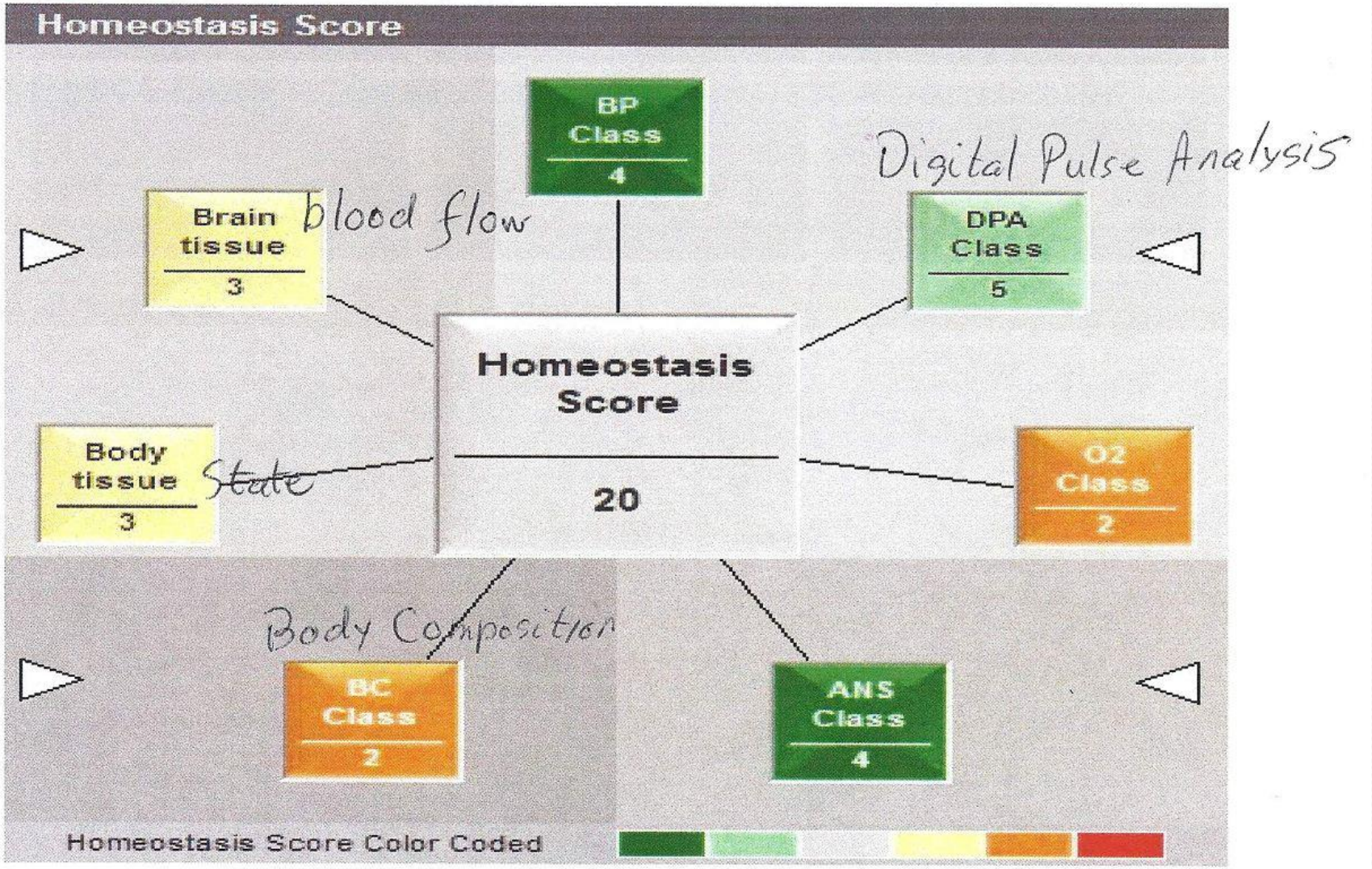
Subject LF Virtual Chakras During



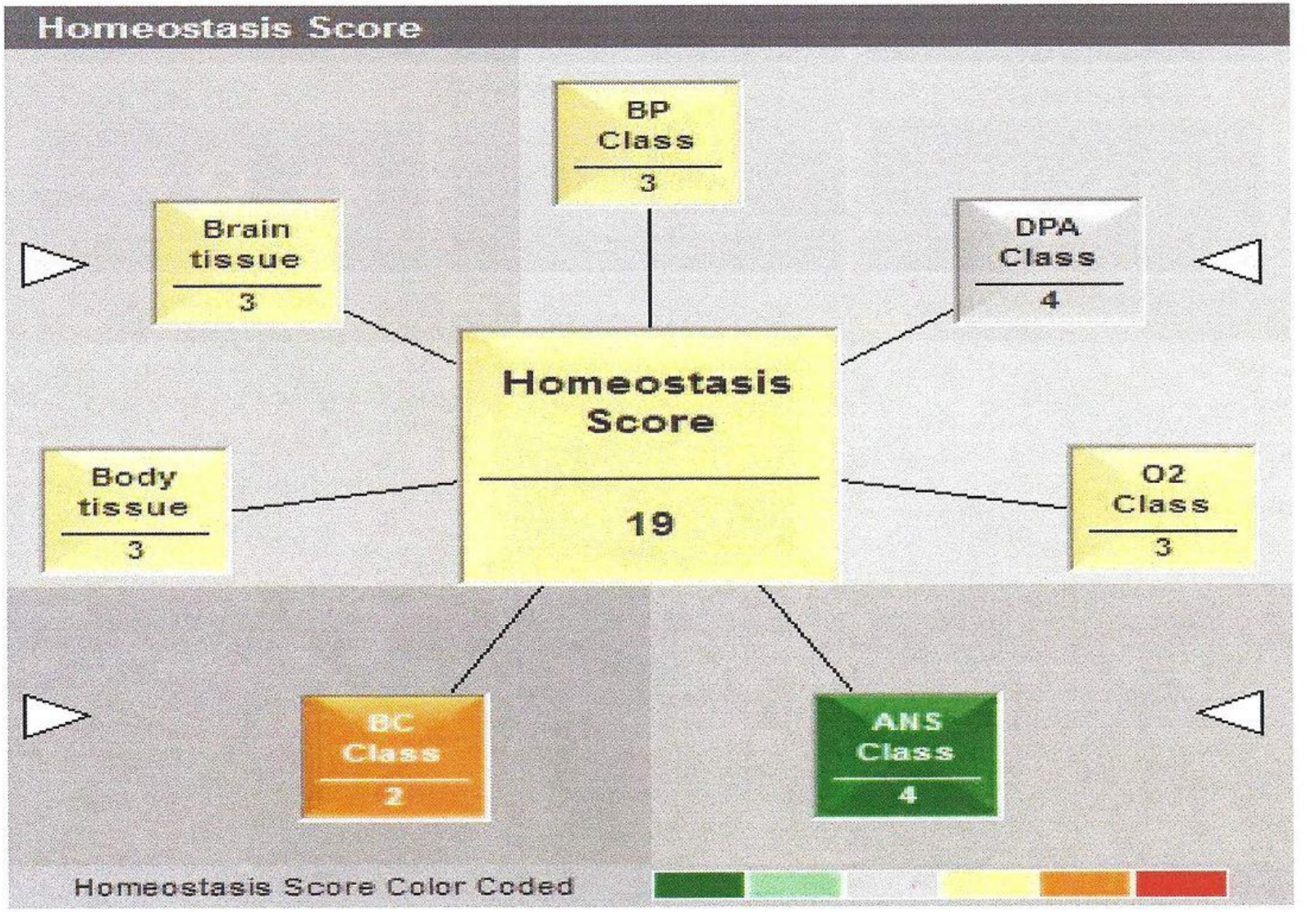
Subject LF Virtual Chakras After



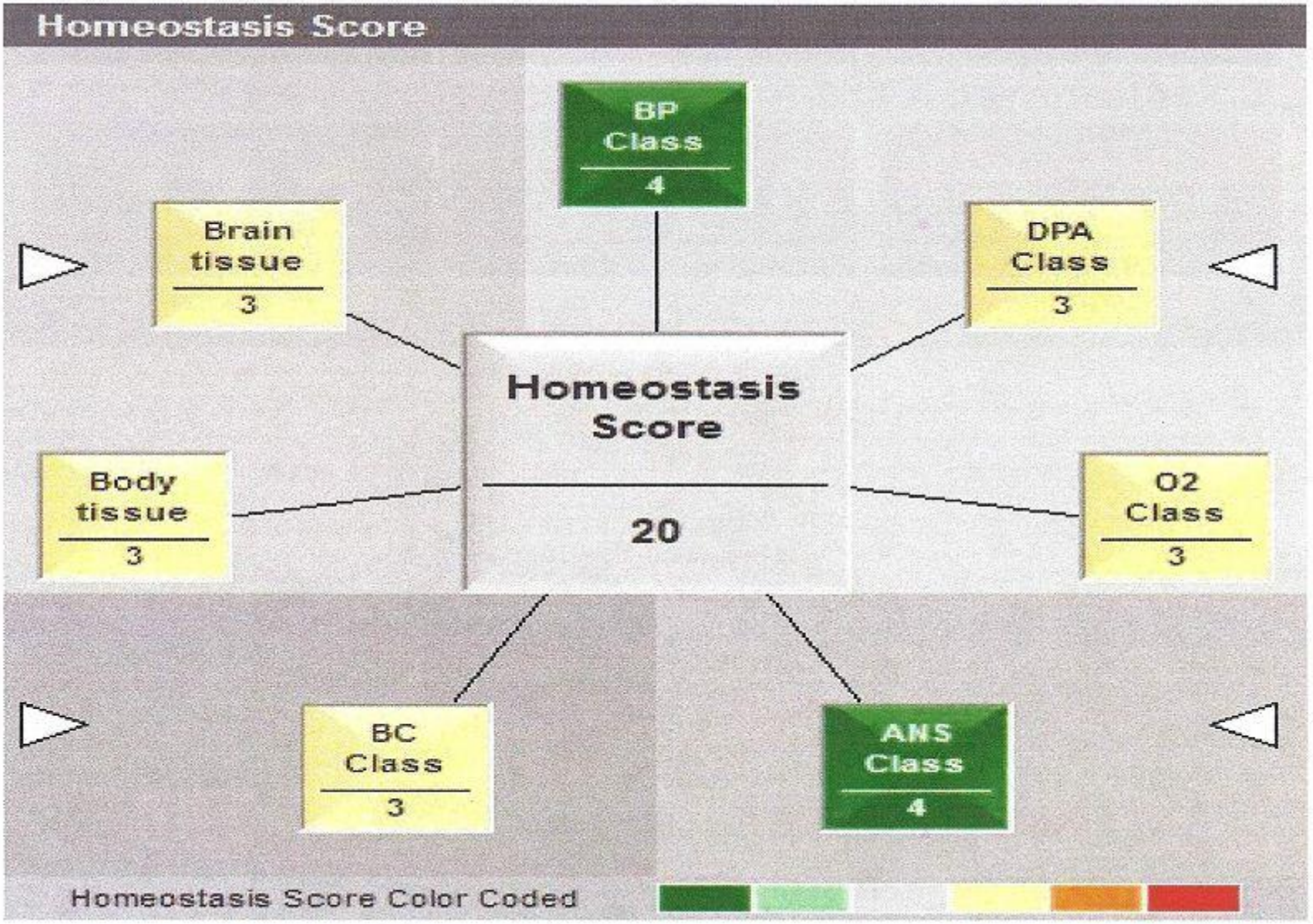
Subject LF Homeostatic Score Before



Subject LF Homeostatic Score During



Subject LF Homeostatic Score After



CONCLUSION

- MRS 2000 helped these people.
- More research is warranted.
- Because of new regulation big opportunity for MRS 2000 and new iMRS to go mainstream.
- The Patient Protection and Affordable Care Act signed by President Obama in March 2010
- Health Care and Education Reconciliation Act of 2010
- Accountable Care Organizations (ACR)
- Thank you.