NMT UC Toxin Pathway - Expanded (TP-E)

H-MB = human mind-body

M-MB = microbial mind-body

H/M-MB = human/microbial mind-body = H/M mind-body

1) TFS (transformed-from state) and TTS (transformed-to states) of the system:

a) **The TFS (transformed-from system state):** Create a brief statement that describes the subject system in terms of current undesirable conditions and behaviors. Emphasize system characteristics related to the subject matter of this NMT clinical pathway. The subject system is usually the mind-body of the person we are working with, but the concepts of any NMT pathway may be applied as a lens through which to observe and transform any system, e.g., we might view the conditions and behavior of some corporation or business through the lens of any NMT clinical pathway. Static MRT (muscle response test) for the total system burden (TSB) that this state seems to the body as a $\log_{10}1000$ metric.

b) **The TTS (transformed-to system state):** Create a brief statement that describes the subject system in an idealized, perfected, healed, and transformed state, with emphasis on characteristics related to the subject matter of this NMT clinical pathway. Static MRT for the TSB (total system burden) that this state seems to the body as a $\log_{10}1000$ metric.

c) Apply the following UCS (universal correction statement) with the intention to resolve any IFs (information faults) that may constitute an obstacle to manifesting the intended transformation: **"Shall the H/M-MB now: Project its awareness, attention, belief, and intention into all times and dimensions of the undivided universal field of consciousness and identify, accept, and release attunement to all events, IFs, and IFs-h (IFs that hide subject IFs from awareness) that compromise awareness of, or define into existence, the transformed-from system state? <MRT-S-a>, "Or, that cause this transformation to seem dangerous, undeserved, or impossible to achieve? <MRT-S-a>, "Create awareness, acceptance, attunement, and belief of all corrective events and TrIQs (transformative information quanta) to define into existence the transformed-to system state? <MRT-S-a>, "Create the intention to collapse the quantum potential of the field's reality quanta to**

manifest this transformation? <MRT-S-a>, "Create optimal attunement and coherence to the source of creation, innate intelligence, and the consciousness of healing and accept the role of co-creator of all experienced reality, NOW?" <MRT-D-c>,

2) **"Shall the H/M-MB now: Project its awareness, attention, belief, and intention into all times and dimensions of the undivided universal field of consciousness and efficiently survey subject system conditions related to the following queries? <MRT-S-a>, Identify, accept, and release attunement to all events, IFs, and IFs-h** (IFs that hide subject IFs from awareness) **that define into existence the transformed-from system state? <MRT-S-a>, "Or, that cause this transformation to seem dangerous, undeserved, or impossible to achieve? <MRT-S-a>, "Create awareness, acceptance, attunement, and belief of all corrective events and TrIQs to define into existence the transformed-to system state? <MRT-S-a>, "Create the intention to collapse the quantum potential of the field's reality quanta to manifest this transformation? <MRT-S-a>, "Create optimal attunement and coherence to the source of creation, innate intelligence, and the consciousness of healing and accept the role of co-creator of all experienced reality, NOW?" <MRT-D-c>,** Hold this MRT intention for each section that follows. Refresh this awareness and intention with each MRT pulse. The dynamic MRT end point signals that the survey is complete, awareness is optimal, and this transformation is to be informationally realized.

"Shall the H/M-MB now allow optimal awareness and correction of the following conditions with attention to CNS, Autonomous NS, and cell and cell network information processing?":

(autonomous N.S. = Sympathetic N.S., Parasympathetic N.S., Enteric N.S., Autonomous N.S. of the spinal cord, Autonomous N.S. of the spinal cord, Autonomous N.S. of the spinal cord, Autonomous N.S. of the heart, Lymphatic-Immune Information Processing System)

a) **"Conditions of mind-body orientation in present-time and present-space consciousness?" <MRT-S-a>, "Conditions of NMT practitioner – client therapeutic entanglement, mind-body dialog and response?" <MRT-S-a>, "Present-time awareness and autonomic response to environmental conditions of danger, safety, and opportunity for beneficial social engagement?" <MRT-S-a>, "Optimize present-time-space orientation, therapeutic entanglement, mind-body awareness, signaling dialog, and response and attunement to all TrIQs and corrective events required to manifest the transformed-to system state as experienced reality?" <MRT-D-c>,**

b) "Adverse mental and emotional posturing that contributes to the transformed-from system state with attention to: Pathophysiologically anchored or inappropriate emotional, psychological, spiritual, or intellectual tone or mode of the mind-body?" <MRT-S-a>, "Any pathophysiological trance state?" <MRT-S-a>, "Any adverse interpersonal or other entanglement or enmeshment that distracts from present-time consciousness?" <MRT-S-a>, "Habituation to a catabolic HPA axis stress mode?" <MRT-S-a>, "Adverse morphic field attunement to any exogenous consciousness entity that distracts from present-time consciousness?" <MRT-S-a>, "Optimize conditions of the sovereign H/M-M in this regard for optimal therapeutic efficacy to manifest and maintain the TTS?" <MRT-D-c>,

c) "Any compromise of awareness of the integrated arms of the neuroimmune system and their role in hypersensitivity, adversely increased sensitivity and reactivity to perceived antigens, including toxins?" <MRT-S-a>, "The innate immune system of every cell, the first line of immune defense, triggered by invading virus or toxin triggered "electron steal" producing an adaptive cell danger response defensive cytoplasmic oxygenation state?" <MRT-S-a>, "The role of the innate immune system to recognize biologically significant peptides or other pathogen and toxin antigen chemistries and present them on the host cell membrane to inform an efficient adaptive immune response?" <MRT-S-a>, "The categories of acquired immune responses: Type I hypersensitivity reactions - immediate allergic reactions of prior-sensitized cells, e.g., food and pollen allergies, asthma, anaphylaxis. Type II hypersensitivity reactions - tissue specific cytotoxic, cross-reactive and cell destructive antibodies (e.g., autoimmune hemolytic anemia, Goodpasture syndrome), Type III hypersensitivity - tissue damage caused by antigen-antibody complex deposition (e.g., many vasculitides and glomerulonephritides), Type IV hypersensitivity reactions (e.g., TB skin tests, contact dermatitis, systemic heavy metal hypersenitivity) – delayed, cell-mediated, only response involving sensitized T lymphocytes rather than antibodies, including pseudoallergies – initial exposure activation of unsensitized mast cells?" <MRT-S-a>, "The potential for hypersensitivity responses to toxins to multiply the biological impact of any toxic load (Type IV heavy metal hypersensitivity by 10X per Chris Shade)?" <MRT-S-a>, "Optimize H/M-MB awareness of the spectrum of neuroimmune resources and create an integrated, timely, appropriate, and proportional organization and management of H/M-MB neuroimmune physiology?" <MRT-D-c>,

d) "The presence in the body of exogenous and endogenous toxins, and benign chemistries that are metabolized into toxic form, interfering with physiological expression of genetic, immune, and metabolic biochemical systems?" <MRT-S-a>, "Toxins that disable body enzymes and disrupt their chemolytic and chemogenic cellular, immune, and metabolic enzymatic functions?" <MRT-S-a>, "Genetic chemistry damage including gene knockouts from pesticides, phthalates, improperly detoxified estrogens, and benzene and its derivatives, e.g., products of cooking food including benzopyrenes, and glycated proteins (caramelization)?" <MRT-S-a>, "Genetic chemistry damage from natural and synthetic organic chemistries with attention to plastics, agricultural poisons, volatile and/or halogenated organic compounds?" <MRT-S-a>, "Heavy metal toxicity causing injury to genetic chemistries including RNA and double strand breaks (DSBs) in DNA disrupting proteogensis?" <MRT-S-a>, "Cytotoxins that disrupt cell membrane integrity including toxins that disable or occupy membrane receptors including toxins that induce mitochondrial energy depletion or apoptosis, e.g. reptile and amphibian neurotoxins and myotoxins that produce muscle necrosis?" <MRT-S-a>, "Toxic long chain fatty acids that disrupt cell membrane geometry?" <MRT-S-a>, "Toxins that interfere with the absorption and utilization of nutrients?" <MRT-S-a>, "Biotoxins from fungal, microbial, plant, or animal source, typically toxic proteins and peptides, including neurotoxins from plant and animal sources that disrupt membrane ion channel conductance, with attention to toxins from insects, spiders, poisonous fish, snails, jellyfish, frogs, and many types of algae, cyanobacteria and dinoflagellates, and toxic body flora?" <MRT-S-a>, "Necrotoxins from spiders, insects, snakes, and necrotizing pathogens spread through the bloodstream, with attention to sensitive skin and muscle tissues?" <MRT-S-a>, "Toxins disrupting hormone, immune, and neurological signaling dialogue?" <MRT-S-a>, "Optimize H/M-MB awareness of exogenous toxins, their efficient biotransformation into transportable forms, and their elimination via emunctories (urinary, fecal, sweat, and respiration)?" <MRT-D-c>,

e) "Endogenous toxins including metabolic intermediates, reactive oxygen and reactive nitrogen species, products of metabolic malfunctions, including galactosemia, hyperlipidemia, porphyria, hemochromatosis and related conditions, transport and storage diseases involving lipid and protein of the brain, vascular system, and other tissues (Mad Cow disease, Tay-Sachs,

Niemann–Pick disease), gout (urates and oxalates, Pseudogout (calcium pyrophosphate), and the role of endogenous toxins in vascular disease, hepatic injury, asthma, rheumatism, colorectal cancer, reperfusion diseases, neurodegeneration and aging?" <MRT-S-a>, "Toxic products of genetic defect and DNA SNPs?" <MRT-S-a>, "Optimize mind-body awareness of metabolic and proteogenic processes to minimize production and maximize biotransformation and elimination of endogenous toxins?" <MRT-D-c>,

f) "The acute toxicity to organs and tissues that are part the toxin entry route to the body and/or target of tissue deposition, and the chronic toxicity of tissues that store toxins (fat, bone, brain, liver) or are emunctory organs of toxin elimination, e.g., liver, gallbladder, kidneys, GI tract, skin?" <MRT-S-a>, "Adaptation of H-M/MB cells to toxicant load including atrophy (decrease in the size of cells), hypertrophy (increase in the size of individual cells), hyperplasia (increase in the number of cells), metaplasia (cell conversion from one type of mature cell to another), dysplasia (deranged cell growth), anaplasia (failure of cell differentiation), and neoplasia (malignant or benign tumor)?" <MRT-S-a>, "H-M/MB conditions that affect the absorption and elimination of toxins including age, gender (oxidation reactions), genetic variability (rapid and slow acetylator genetic heritage), nutrition, disease, exposure to other chemicals causing a synergy of toxins?" <MRT-S-a>, "Optimize the integrated matrix of H-M/MB detoxification and healing resources for toxin biotransformation, transport, and elimination and to remediate toxin H-M/MB injury?" <MRT-D-c>,

g) "H-M/MB detoxification resources including: phase I producing intermediate toxicant modification by oxidation, reduction, hydrolysis, acetylation, and electron transfer reactions, typically producing hydroxyl (-OH), amino (-NH2), and carboxyl forms of the toxicant with improved hydrophilicity and transport characteristics?" <MRT-S-a>, "Phase II detoxification, toxicant conjugation into very hydrophilic and transportable forms including: glucuronide conjugation (#1 form), sulfate conjugation (#2), acetylation, amino acid conjugation, glutathione conjugation, and methylation. (glucuronide is the acidic form of glucose)?" <MRT-S-a>, "Phase III transport of hydrophilic toxins to emunctories that don't require chemical modification?" <MRT-S-a>, "Elimination of transported toxins via the primary emunctories: sweat glands of skin, GI-biliary, kidney and urinary bladder, and lung elimination of gaseous

waste?" <MRT-S-a>, "The liver as the primary site for toxicant biotransformation, kidneys and lungs at 10-30% of liver detox capacity, and a low detox capacity in skin, intestines, testes, and placenta?" <MRT-S-a>, "Organelles of toxicant biotransformation, the microsomes (small vesicles) of the endoplasmic reticulum containing the phase 1 detoxification enzymes and glucuronidation enzymes (mitochondria, nuclei, and lysosomes having low detoxification activity), and cytoplasmic non-membrane-bound free enzymes producing phase II transformations and some oxidation (cytochromes P450) and reduction reactions?" <MRT-S-a>, "Adverse biotransformation of toxicants causing bioactivation that increases their toxicity, e.g. vinyl chloride into vinyl chloride epoxide, a hepatocarcinogenic toxin?" <MRT-S-a>, "The potential for toxicant tissue injury to emunctory tissues when the rate of toxin delivery to the tissue exceeds the tissues' elimination capacity?" <MRT-S-a>, "Produce an optimally integrated, timely, and proportional application of all arms of the H-M/MB matrix of detoxification physiology?" <MRT-D-c>,

h) "Enterohepatic recirculation – colonic reabsorption of toxins secreted with the bile and recirculated by portal vein transport to the liver?" <MRT-S-a>, "Optimize GI membrane integrity to reduce unregulated transport of toxins from the gut to portal circulation and liver, and increase the selectivity of gut epithelial cell chemical transport to minimize toxin resorption?" <MRT-D-c>,

i) "The interaction of the human microbiome (M-MB) and toxins, direct microbiome metabolization of toxins, M-MB effect on expression of the host metabolizing genes and the activity of host enzymes, M-MB influence on biological effects of toxins on the human body, the rate and extent of toxin entry to blood circulation or their biological targets and receptors. "The potential of the microbiome to limit toxin absorption and to increase gut elimination of toxins and decrease injury to gut tissues, particularly in regard to heavy metals?" <MRT-S-a>, "The potential of toxins to alter the microbiome causing dysbiosis?" <MRT-S-a>, "Optimize integrated H-M/MB physiology to minimize toxin impact on the body and microbiome and maximize the safe rate of phase I, II, and III detoxification and elimination through emunctories?" <MRT-D-c>,

j) "Gut microbiome remote sensing and signaling mechanisms conferring regulatory influence on host cytochrome P450s enzyme system (phase II) in toxin biotransformation

organs such as liver, kidneys, and intestine?" <MRT-S-a>, "Microbiome metabolites, including secondary bile acids (BAs), short-chain fatty acids (SCFAs), and tryptophan metabolites, role as modulators of host toxin-sensing receptors?" <MRT-S-a>, "Optimize H/M-MB awareness and integration of opportunities for enhanced microbiome-host integrated detoxification physiologies?" <MRT-D-c>,

k) "Perpetuate H/M-MB monitoring and awareness of the presence of all exogenous and endogenous toxins and the application of the full spectrum of biotransformation and elimination physiologies to minimize toxin disruption of metabolic, immune and signaling operations?" <MRT-D-c>,

l) Use the TP-Worksheet to establish metrics and induce a more complete and accurate H/M-MB awareness of present-time conditions of toxicant challenge and molecular level sensory-motor response.

3) "Shall the mind-body now: Project its awareness, attention, belief, and intention into all times and dimensions of the undivided universal field of consciousness and identify, accept, and release attunement to all events, IFs, and IFs-h (IFs that hide subject IFs from awareness) that define into existence the transformed-from system state?" <MRT-S-a>, "Or, that cause this transformation to seem dangerous, undeserved, or impossible to achieve?" <MRT-S-a>, "Create awareness, acceptance, attunement, and belief of all corrective events and TrIQs to define into existence the transformed-to system state?" <MRT-S-a>, "Create the intention to collapse the quantum potential of the field's reality quanta to manifest this transformation?" <MRT-S-a>, "Create optimal attunement and coherence to the source of creation, innate intelligence, and the consciousness of healing and accept the role of co-creator of all experienced reality, NOW?" <MRT-D-c>. Refresh this awareness and intention with each MRT pulse. The dynamic MRT end point signals that the survey is complete, awareness is optimal, and this transformation is now informationally realized.

4) Optionally: **"After fully applying the therapeutic intention of this correction, mind-body projection of the TSB metric for the TFS is $\log_{10}$1000 L- ___?" <MRT-S-a>,**

a) If the resulting projected TSB is not acceptable: **"Would it be of benefit to now reapply the**

therapeutic intention of this correction 1000 times in the next 10 seconds?" <MRT-D-c>. If yes, make a correction, holding this intention and reapplying the UCS.

b) Recheck the question, **"After fully applying the therapeutic intention of this correction, mind-body projection of the TSB metric for the TFS is $\log_{10}$1000 L- ___?" <MRT-S-a>. If MRT suggests it would be of value, make the correction again. "Would it be of benefit to now reapply the therapeutic intention of this correction 1000 times in the next 10 seconds?" <MRT-D-c>**, and so on, until an acceptable level of correction has been reached.