# AlfaVue Regulation Thermometry Report



#### I. PATIENT INFORMATION

DECTONO

Patient Name: Sample Report Female Report #: R-000045560v2.0

Practitioner: Thermography Center of Dallas Algorithm Version: 1

Screening Date: 2 Apr 2019 11:01 AM Report Generation Date: 2 Apr 2019 3:03 PM Patient Date of Birth: 18 Jan 1967

Chief Complaints and Objective Findings: Dr.Candido; Concerns-low cortisol, low

bp,bacteria,fatigue,focus,weakness,headaches,pain,memory,thin hair,insomnia,thyroid,digestion,rash,hives,sore muscles;Hx-birth,gallbladder,tonsils,laminectomy,implants,tummy tuck,concussion,knee;Dental-crowns,veneers,fillings&wisdom removed;111-111-111

#### II. SIGNATURE RECOGNITION RESULTS

Over the last 40 years of international use by over 2000 clinics, patterns have been correlated with conventional laboratory and pathology results. Regulation Thermometry cannot replace diagnostic methods but can be a comprehensive enhancement to understanding the origins and contributing factors in chronic disease. In the first statements, the word 'disorder' means that in healthy patients a stress to the body includes a subsequent adjustment and return to the healthy state. If the reaction is one of disorder, there are possibly influences originating from disturbed systems that do not permit a normal recovery from the stress applied. A statement of health is "The disorder decreased", however, there may still be other factors that are in a different assessment category that may reflect disorders or factors of disease.

CICNATURES

REGIONS	SIGNATURES							
General identifier patterns (By Region)	There appears to be a MINIMAL deficit in detoxification capability (There are hints to metabolically challenged hepatic, renal filtration or other metabolic functions). There appears to be a MINIMAL signature for heavy metal toxicity. There appears to be a tendency for MODERATE vulnerability of the body tissues to physiologically compensated influence signature pattern. The adrenal function is MODERATELY stressed. There is a MODERATE global immune stress apparent. There is a MINIMAL suspicion of a circulatory or cardiovascular (hypo/hyper tension) signature.							
Head	The disorder remained high. There is a MINIMAL concern for an endocrine disorder. There appears a MINIMAL cranial or structural imbalance pattern identified. A SEVERE temporomandibular joint or neck disorder pattern identified. There is a MINIMAL degree of viral hint signature identified.							
Neck	The disorder DECREASED. There is a MINIMAL lymph block apparent. Investigate major source in the head region.							
Chest	The disorder DECREASED. There appears a MODERATE sternum block, -see chest and breast sections. There appears a MINIMAL left axilliary lymph problem.							
Upper Abdomen	The disorder DECREASED. There appears a MINIMAL indication for a pancreatic inflammation present. There is a possible Pancreas toxicity.							
Lower Abdomen	The disorder DECREASED. There appears a MINIMAL food intolerance or allergy.							
Lower Abdomen - Pelvis	There appears a MODERATE pattern for Uterine hypo function. There appears a MINIMAL signature for inflammation in the pelvis or uterine region.							
Kidney/Back	The disorder DECREASED. The kidney appears to be MODERATELY hypofunctioning. There is an apparent kidney function blockade or inflammatory event.							
<b>Cubital Fossae</b>	The disorder DECREASED. The region appears to be open and clear (ideal) .							
Dental	A SEVERE temporomandibular joint or neck disorder pattern identified.							
Breast	The disorder remained high in Right Breast, and Left Breast. There appears 5 blocked spot(s) in the right and 10 blocked spot(s) in the left breast. This may be benign. There appears a MINIMAL side-to-side difference (R-L).							

## **III. PRIORITIES FOR TREATMENT**

By placing disorder highest priority, blocked regulation second, and proximal radical differences (within the same region) third, priority for treatment can be established with providing the best strategies and patient benefits. Any therapies recommended are intended as general guidance for the physician and do not in any way represent qualified therapeutic decisions that may substitute for more appropriate directions of care determined by the treating physician or practitioner.

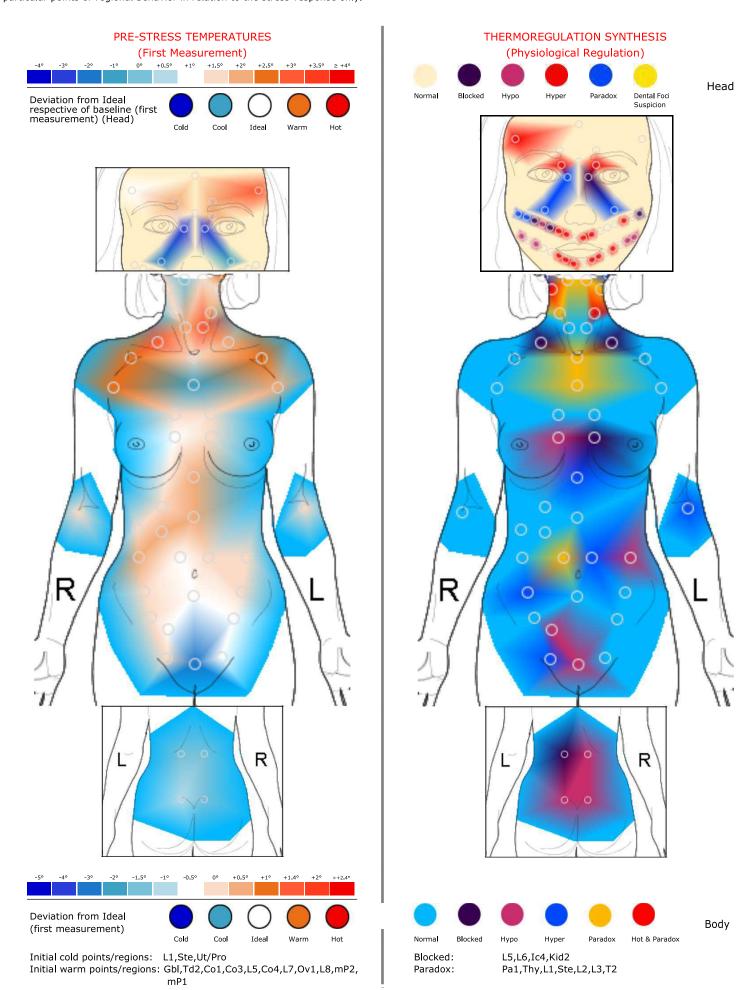
#	PRIORITIES	RECOMMENDATIONS FOR CONSIDERATION
1	TMJ, Vestibular or Neck	Consider dental evaluation for occlusion misalignment or temporomandibular joint degeneration. Evaluate by tmj specialist, osteopathic adjustment as well as magnesium supplementation.
2	Kidney Hypo-function	There are signs of a possible kidney insufficiency. Consider creatinine and sonography.; Evaluate for toxicity, protein metabolic disturbances, enzyme deficiencies, diabetes.
3	Kidney Block/Inflammation	Evaluate kidney function (creatinine, BUN and GFR testing). Apply drainage therapies as well as proteolytic enzymes to help assure correction to kidney function.
4	Physiological Degeneration	There are elements consistent with degenerative and tendencies toward future neoplastic conditions. Consider appropriate imaging, laboratory and physical examination as well as familial pattern analysis. Investigate terrain chemistry, alkalization of tissues, enzyme enrichment as well as addressing lymph and endocrine contributions.
5	Adrenal Index Elevated	Consider daily cycle evaluation of cortisol levels. Consider the use of glandular adrenal or phyto therapy such as Rhodiola and Ashwaganda.
6	Global Immune Stress	Consider CBC w diff, Immunology panel, lymph palpation/exam. In addition, apply immune-stimulation such as herbal immune supplementation, thymus extracts, lymph meds as well as probiotics.

This report consists of a rendering of gathered temperature and temperature behavior data only and does not represent any form of diagnosis for any disease or conventionally defined disorder. This report does not preclude or replace any known conventional diagnostic instrument or method such as mammography, X-Ray, CT, MRI, PET or laboratory findings. This serves as an adjunct to conventional means to arrive at a diagnostic theory or conclusion and must not be used as any form of sole resource for establishment of a true diagnosis. By utilization of this report the physician or practitioner has agreed to utilize his own training to interpret these results and to continue to refer to additional laboratory or conventional test methods in order to achieve a diagnostic goal.

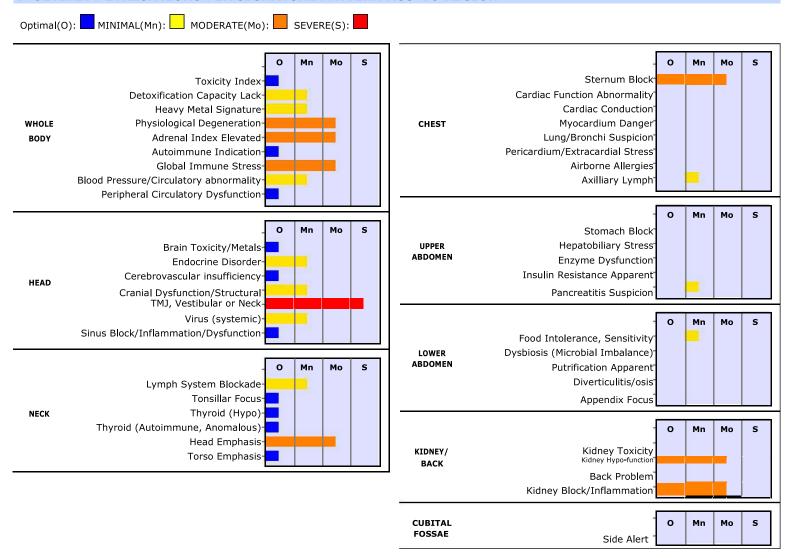
Thermography Center Of Dallas www.thermographycenter.com EMAIL: thermography@thermographycenter.com PHONE: 214-352-8758

## IV. GENERALIZED OVERVIEW OF SUSPICIOUS REGIONS

Indications for point behaviors (normal, hypo, hyper, blocked, paradox) are not referring to disease or other health states: They are descriptions of particular points or regional behavior in relation to the stress-response only.



## V. SEVERITY EVALUATIONS PER SIGNATURE PATTERN ACC. TO REGION

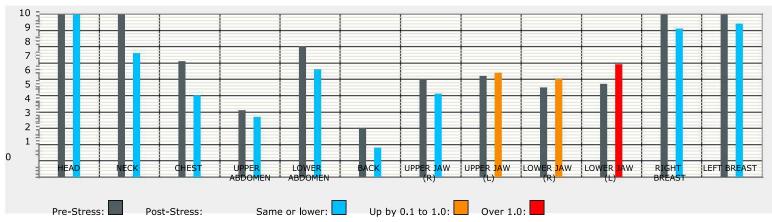


# **VI. CHAOTIC REGULATION**

To the extent by which the body tissues and viscera convey a response that is appropriate to achieve an eventual recovery from stress, any chaotic response will be minimized.

We can see this by the second measurement in relation to the first, with indications of initial deviations indicating initial dysfunctions. If Chaotic regulation increases, the tendency for a future pathology to occur locally increases. This is influential of the "Neoplastic Conditions" as is validated by conventions and accepted guidelines.

# CHAOTIC REGULATION PER REGION

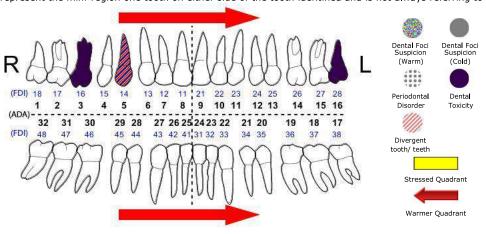


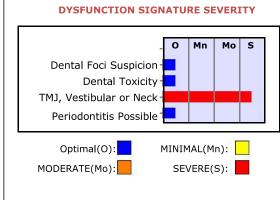
## Approved by Dr. Daniel Beilin, O.M.D., Certified IMAT Thermographic Interpreter

Note: Medical opinions expressed in this report in no way replace the level of pertinence met by the patient's physician when dinical examination and investigation may reveal permutations or reframing of the outcomes and results, leading to variance of conclusion. Thermometry reporting is intended as future and present guidance that reveals trends and suspicions, rather than being an 'absolute' diagnostic test. It functions best when corroborated with laboratory findings and normal imaging methods.

#### VII. DENTAL EVALUATION WITH CORRELATIONS TO ORGANS AND RELATED SYSTEMS

Blocked teeth indicate possible origins of disturbance fields affecting various organ systems. The teeth listed below are a) blocked and b) located in quadrants of maximum dysfunction. They may be cause to consider their relationship to organs and tissues involved in the case. Any tooth identified is meant to represent the mini-region one tooth on either side of the tooth identified and is not always referring to the exact location of the tooth identified.





#### IDENTIFICATION FOR FOCAL CONNECTIONS TOOTH-TO-ORGAN/MERIDIAN EVIDENCE

Tooth Number	Organ Correspondence	Meridian Connects to
tooth 5	Lung, Large Intestine	Right: Shoulder, Elbow, Hand (radial), Foot, Big Toe. Sinus: Paranasal and Ethmoid. Bronchi. Nose. Right Lung.
		Right side of Large Intestine.

				DENTAL CO	RRESPONDEN	CE REFERENC	E CHART WITH	HANATOMIC,	PHYSIOLOGIC	AND ALFASIO	GHT CORRELA	TIONS			G	alfa
Sense Organs	Inner Ear, Tongue/Taste	Sinus, Oro-ph, Pharynx, Tongue	Sinus, Oro-ph, Pharynx, Tongue	Ethmoid sinus, Nose	Eye, ethmoid, Nose	Eye (posterior), sphenoid sinus		Frontal Sinus, Nose	Frontal Sinus, Nose	Frontal Sinus, Nose	Eye (posterior)	Nose, Eye, Ethmoid	Nose, Ethmoid	Sinus, Oro-ph, Pharynx, Tongue	Sinus, Oro-ph, Pharynx, Tongue	Internal Ear, Tongue/Taste
Endocrine	Ant.Pituitary, CNS, Psyche,RFs	Parathyroid, Adrenal, Pineal	Thyroid, Adrenal	Thymus, Thyroid	Post. Pituitary, Thyroid	Int.Pituitary, Thyroid	Pineal gland	Pineal gland	Pineal gland	Pineal gland	Int.Pituitary, Hypothalamus	Posterior Pituit.,Thyroid	Thymus, Thyroid	Thyroid, Thymus	Parathyroid, Adrenal, Pineal	Anterior Pituitary
Organs	Heart (right) ileum, Duoden., adrenal. FIRE ELEMENT	Pancreas / Stomach WOOD ELEMENT	Pancreas / Stomach WOOD ELEMENT	METAL	Lung Colon METAL ELEMENT	Liver, Gall bladder, Heart WOOD ELEMENT	Kidney, Blad., Urogenit, Rect WATER ELEMENT	Kidney, Blad. Urogenital,rect WATER ELEMENT	Kidney, Blad, Urogenital, Rect. WATER ELEMENT	Kidney, Bladder, Rect. WATER ELEMENT	Liver, Heart, Biliary Ducts WOOD ELEMENT	Lung, Large Intestine METAL ELEMENT	Lung, Large Intestine METAL ELEMENT	Liver, Kidney, Spleen,stomac EARTH ELEMENT	Spleen, Stomach,Blad. EARTH ELEMENT	Heart, Duodenum, Jejunum, Ileum FIRE ELEMENT
Other Relationships	CNS, autonomic NS, seizures, vitality disord., headaches, edema, eczema,		Breast Nephrolithiasis hepatogenic cephalgia, crystallization hypothalamus, veins.	GB meridian, duoden. arterial venous dilatat/const., rhythmicity,	Eye diseases, schizophrenia, cell respiration, fermentation, enzymes, dyspepsia, dysbiosis.	Eye diseases, prothrombin, angina, blood viscosity, anger, depression, instability	Lymph system, blood regulation, hematopoiesis, sexual organs, defensive mechanisms	Mental dynamics, vitality, hormonal capacity, sterility, fear,	Mental dynamics, vitality, hormonal capacity, sterility, fear,	Lymph system, blood regulation, hematopoiesis, sexual organs, defensive mechanisms	Eye diseases, angina, blood viscosity, lacks concentration, anger, depressi on, sadness, instability	Eye diseases, vegetative dystonia, , schizophrenia, enzymes,stom achpancreas, colon.	Liver/gall, migraine, pyloric/duoden al stenosis, motility, peristalsis.	Breast Nephrolithiasis headaches (hepatogenic), crystal excretion, rheumatism	Breast Periarthritis, , osmolarity, edema, thermal dysreg., sleep disturb.	CNS, autonomic NS, seizures, vitality disorders, spinal tumors, headaches, eczema, tinnitus, sciatica, Limbic
Meridian(s)	SMALL INTESTINE	STOMACH	STOMACH	LARGE INTESTINE	LARGE INTESTINE	GB / LIVER	BLADDER	BLADDER	BLADDER	BLADDER	GB / LIVER	LARGE INTESTINE	LARGE INTESTINE	STOMACH	STOMACH	SMALL INTESTINE
ALFA POINT CONNECTION	M1,TOOTH 18/1	MS1,ST,BREAS T,L3	MS1, ST,BREAST,L3	CO1,3,5	CO1,3,5	Te1, LI1, LI3, GB	UT/PR,KD1,OV 1	UT/PR,KD1,OV 1	2	UT/PR,KD2,OV 2	Te2, LI1, LI3, GB	CO2,4,6	CO2,4,6	MS2,ST,BREAS T,L4	T,L4	M2,TOOTH 28/16
TOOTH NO. (INTL/US)	18/ <b>1</b>	17/2	16/3	15/4	14/5	13/6	12/7	11/8	21/9	22/10	23/11	24/12	25/13	26/14	27/15	28/16
				D		8	2	8	8	4	8	8	A	8	3	
	8	8	R	1	9		8	V	7	7	3	7	1	R	R	7
TOOTH NO. (INTL/US)	48/32	47/31	46/30	45/ <b>29</b>	44/28	43/27	42/ <b>26</b>	41/25	31/24	32/ <b>23</b>	33/22	34/21	35/20	36/19	37/18	38/17
ALFA PT. RELAT.	TOOTH 48/32, M1	TO1,LY1,ST	LY3, ST,	CO1,3,5,PA1	LY3, CO1,3,5,PA1	GB,LV1,3,OV1, UT/PR	KD1,OV1,UT,L YMPH	KD1,OV1,UT,L YMPH	KD2,OV2,UT,L YMP	KD2,OV2,UT,L YMPH	GB,LV1,3,OV2, UT/PR	LY4,CO2,4,6,P A2	LY4,CO2,4,6,P A2	LY4, ST	TO2,LY2,ST	TOOTH 48/32, M1
Meridian(s) Other Relationships	SMALL INTESTINE Energy metab. Periph. nerves, rheum & fascia, brain, vitality disorders, eye dis., vertigo, sm. Int. ,BP	STOMACH Lumbago, abdom. Pain, back, pelvis. Sleep disturb., osmotic problems. Arteries.	Legs, sacroiliac, crystallizations, urates, rheumatism, pituitary. Veins.	Breast Hip arthritis, hips, hernias, rhythmicity, motility of	LARGE INTESTINE Breast Spleen/pancre as, connective tissue respiration, fermentation, enyzmes.	GB / LIVER Thrombosis varicosities, esophagus, connective tissue blood density, thrombosis.	Mesenchyme. connective tissue, testes, lymph, epididymis, immune mechanisms,	BLADDER Urogenital adenoma, blad conn. tissue hormone metab Mental behavior.	Urogenital, myoma, prost. adenoma, blad. disorders, hormone metab. Mental behavior.	Mesenchyme. connective tissue, testes, immune syst. Lymph congest. lymphedema	Thrombosis varicosities, esophagus, connective tissue blood density, thrombosis.	Breast Spleen/pancre as, connective tissue respiration, fermentation, enyzmes	Breast arthritis,inguin hernias, rhythmicity, motility of small and large intestine.	Legs, sacroiliac, crystallizations, urates, rheumatism, pituitary and veins.	Lumbago, abdom. Pain, sacroiliac, pelvis and groin. Sleep disturbances, osmotic prob.	SMALL INTESTINE Energy/metabol. peripheral nerves, rheumatic & fascia brain, vitality disorders, eye disease, vertigo, sm. Intestine. BP
Organs	Heart, Small Intestine, FIRE ELEMENT	Large Intestine, Lung METAL ELEMENT	Large Intestine, Lung METAL ELEMENT	Pancreas EARTH	Stomach, Pancreas EARTH ELEMENT	Liver, Gallbladder WOOD ELEMENT	Bladder, Kidney, Gonads WATER ELEMENT	Bladder, Kidney WATER ELEMENT	Bladder, Kidney WATER ELEMENT	Bladder, Kidney WATER ELEMENT	Liver, Gallbladder WOOD ELEMENT	Stomach, Spleen EARTH ELEMENT	Stomach, Spleen EARTH ELEMENT	Lung, Colon METAL ELEMENT	Lung, Colon METAL ELEMENT	Heart, Sm. Intestine, Adrenal FIRE ELEMENT
Endocrine	Pineal	Pineal	Pituitary		Gonads	Gonads	Adrenals		Adrenals,Epid.	Adrenals	Gonads	Gonads	Thyroid	Pituitary	Pineal/append	
Sense Organs	ext. ear, tongue	Nose	Nose	Tongue	Tongue	Anterior eye	Frontal Sinus	Frontal Sinus	Frontal Sinus	Frontal Sinus	Anterior Eye	Tongue	Tongue	Nose	Nose	Ear, Tongue /Taste

The information reflected in this report does not replace or preclude conclusions made from other diagnostic tests such as mammography or other imaging methods.

## **VIII. BREAST ANALYSIS (BASELINE + DYNAMIC)**

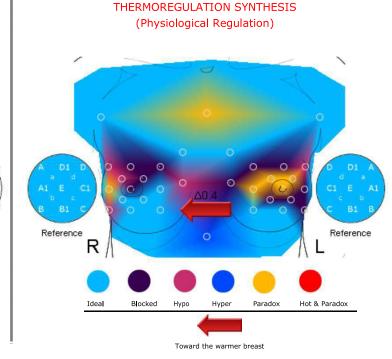
Initial analysis of the breast must consider first readings before cooling and then analysis of the dynamic response to the stress stimulus in order to facilitate signature analysis. Initial readings can be said to have significance if there are grouped points deviating from normal patterns. Readings taken

from mastectomized or recently operated breasts lose significance in the first readings, as well as in the presence of lactation.

When combined with the dynamic view incorporating both first and second measurements, a comprehensive picture can be drawn in a physiological way to perform functional assessments. This information must be combined with imaging such as mammography, ultrasound or MRI in order to create a true diagnosis, however physiological and neurophysiological factors that carry information cannot be under-valued.

# (First Measurement) D1 D1 Ε CI E A1 B1 B1 B Deviation from Ideal (first measurement)

PRE-STRESS TEMPERATURES





Initial measurement anomalies or potential regions of suspicion (Pre-Stress Deviation)

There appears to be three SEVERE (B-r,B1-r),(B-I,B1-I),(B1-I,C-I) and three MODERATE (A1-I,B-I),(B1-r,C-r),(C-I,C1-I) and one MILD (a-r,b-r) specific warm zones identified in the pre-test. Consider further investigation and reference to mammographic or other imaging methods, along with the remainder of the breast analysis (Thermoregulation Synthesis).

## **DYSFUNCTION SIGNATURE SEVERITY** Mn Mo Optimal(O) MINIMAL(Mn) Mastopathy/Inflammatory Fibrocvstic/Cvstic MODERATE(Mo) Physiological Degeneration Lymphatic Load SEVERE(S) **Endocrine Influence** Organ/Tissue Influence Heavy Metal Toxicity Distant/Related Focal Breast Blocked Spot Breast Side Difference

### **REGULATION ANALYSIS**

## **BREAST ANALYSIS SUMMARY**

- This 52 year old woman was referred to Thermography Center of Dallas. The overview appears as a/an Mastopathy/Inflammatory, Fibrocystic/Cystic, and Distant/Related Focal stress patient.
- There is Breast Blocked Spot and Breast R-L asymmetry apparent.
- According to the established 13 breast criteria, 7/13 were fulfilled. This leaves a concern for influences that could create challenges to breast health.
- Another thermogram should follow within 6 months in regards to the status after appropriate treatment and investigation. There is also a possibility an elevated suspicion may be due to hormonal cycles and therefore should be repeated at another phase of the menstrual cycle.
- These contributing organs and tissues are given in priority of severity of stress and form the basis for treatment or further tests:
  - 1. Breast abnormality (blocked spot, asymmetry) noted.
  - LyI and Terrain Index high
  - Sternum Block
  - 4. Lymphatic Index high
  - 2nd Molar possible

# **BREAST SUSPICION CRITERIA**

Sternum Block	Χ
Breast Blocked Spot	Χ
Breast R-L asymmetry	Χ
Liver warm/block	
Opp. Ovary Dysregulation	
LyI and Terrain Index high	Χ
Tonsil/lymph block	
Chest disorder elevated	
2nd Molar possible	Χ
Lymphatic Index high	Χ
Breast disorder elevated	
Stomach cold/blocked	
Pre-Stress Deviation	Х

Result: 7/13 criteria met for suspicion (X) (0-5 normal)

