

## Superficial Immune & Digestive System ~ continued

### UNIVERSAL JAW – (Organ Screening Evaluation)

#### III. Universal Jaw Complex:

Universal Jaw is an extremely useful diagnostic tool and represents the transition between immune system and the digestive system in this protocol. Perhaps in the future it will be placed elsewhere in the protocol however for now it will be included here. It is a protocol, however, that can be utilized anywhere and at any time during a patient evaluation/treatment.

**Description and Theory:** Universal Jaw complex essentially functions as the compensatory “circuit breaker” for organ stress and certain midline structural issues.

- Its relationship to structural issues commonly involves the diaphragm(s) (lung and perineum) and its related structures and is addressed in the extended universal jaw steps.
- Its relationship to organ dysfunction is essentially a *circuit breaker* reaction when there is *moderate* and or *severe* stress to an organ(s). This is an extremely helpful AK tool as one can use it to identify systemic conditions. It should be well understood as per classic AK that when an organ is severely distressed, there will be a corresponding bilateral weakness in the organ related muscle(s). When an organ is in moderate stress then the weakness in the organ related muscle(s) will only show up when adding something else in the circuit (NL, NV, TL of organ, etc.). For purposes of clarification, one can identify *mild* organ stress in the same way as moderate stress discussed above but it will not trigger the Universal Jaw reflex!
- Universal Jaw reactivity will correspond well with TSL and pulse evaluations.

**Note:** The most common causes of universal jaw activation are of course any active URI, all chronic illness, and stomach activation in emotional stress patterns. Many chronic illnesses will not trigger a corresponding breakdown of the Superficial Immune System in section I and II even though Universal Jaw is identified.

One can contemplate why this seemingly simple but important reflex has not been previously scrutinized in AK literature, thus one must come to the conclusion that there may be some energy medicine qualities to this protocol. It behooves the practitioner to thoroughly understand the above description in what one is attempting to evaluate in the Universal Jaw screening and become fully cognizant of its implications! Practice, practice, practice and make this unique screening tool work for you.

**Comments:** \_\_\_\_\_  
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**Evaluation:** Bilateral therapy localization of jaw with either the gluteus medius muscle itself or placing the gluteus medius in the circuit:

- Eyes open ...indicative of active systemic imbalance(s).
- Eyes closed ...indicative of a chronic systemic condition generally in length of three (3) months or longer.
- When both eye modes are identified then there is a need to do the extended universal jaw steps which involve the midline structural imbalances of the diaphragm and its corresponding structures.

**Correction:** Using appropriate finger cots and or gloves:

- Spread mandibular arch in eyes open mode, release imbrication of condyles bilaterally, spread maxillary arch maintaing same eye mode. If this is the only mode identified, protocol is complete.
- If eyes closed mode is found, repeat above with eyes closed.
- If eyes open and closed are completed then look for and correct left anterior homolateral gait (left ocular and left cloacal reflex in the usual fashion in both eyes open and closed).
- Rub K-27 bilateral.
- Spread maxillary arch.
- Lift parietals bilaterally.
- Rub *NL's* & *NV's* of diaphragm, psoas, abdominals, and quadriceps muscles.
- Correct if needed diaphragmatic impingement of stomach by pulling down adjacent to zyphoid and resetting diaphragm muscle insertions if involved.
- Facilitate lower pelvic floor muscles if needed by repetitive resistive abduction of adductor muscles and /or with perineal punch.



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