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Name/Email: Jane Doe
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Age: 46

Concern(s)/Intentions at Intake: Anxiety/Panic Attacks; Chronic Pain in Left Shoulder and right hip; allergies; eczema; fear of heights



Session Date: x-xx-xxxx

Concern(s)/ Intention(s): Request to focus on Chronic Pain in Left Shoulder

Recap:

- Emotion Code Only** (**abs** = absorbed from someone else; **inh**= inherited; **F**=father; **M**=mother); Definitions of all trapped emotions can be found here:
 - The Emotion Code Definitions of Emotions.pdf The following trapped emotions were identified in this session along with the age you were when the emotion originated.
 - Abandonment, age 40 (related to M)
 - Despair, age 9 (abs from F)
 - Failure, age 16 (in shoulder)
 - Worthlessness, age 15
 - Heartache, inh M
 - Panic, in utero
 - Overwhelm, age 45 (in shoulder)
- Body Code/Emotion Code** (**TE**=trapped emotion; **abs** = absorbed from someone else; **inh**= inherited; **F**=father; **M**=mother; **MIS**=misalignment; **InU**=in utero; **HWE**=heart wall emotion; **MER**=meridian Any # following a comma that you see listed is the age in which the exposure occurred.)
 - Type of Imbalance/Misalignment found: Physical-Emotional Shock** (age 19) - Physical-emotional shock energy is a vibrational frequency that may become stuck in the body during an emotionally shocking event that is severe enough to exert a shock or extreme stress on the physical body.
 - HWE of fear** (age 19) - A Heart-Wall is made of one or more trapped emotions that the subconscious mind uses to surround the heart as a protective barrier against emotional pain.
 - TE of anxiety** (age 19)
 - Type of Imbalance/Misalignment found: Memory Field** (age 22) - memory field is the energy of a memory stored in the energy body/field
 - Associated Imbalance:**excess stress hormone imbalance**
 - Broadcast Message** of "I am a victim" from age 22 - A broadcast message is a specific type of vibrational frequency that is stored in the body and continually sent out, similar to a message from a radio tower. Having a negative broadcast message could have a harmful influence on the (subconsciously formed) opinions of others about you, and could cause you to attract people, behavior or situations that you'd rather not.

- Physical Trauma** (age 22) - Physical trauma energy is a vibrational frequency that may become stuck in the body during an intense trauma that is physically shocking or stressful...
- Fascial distortion** - Fascia is the connective tissue that is found throughout the body, wrapping around the bones and organs like Saran Wrap. Fascia can become distorted or twisted due to emotional or physical stress or trauma of some kind.
 - Associated Imbalance: **Magnetic Field Distortion** - age 32 - This refers to a distortion in the body's magnetic field, resulting from an associated imbalance (e.g. a trapped emotion).
 - Energy of a Fungus** - age 46 - This indicates that only the energetic form of a fungal infection is present, not any physical organism.
 - No will to..."forgive self"** - age 28 - a unique frequency of energy when one loses the will to do something, even if this is experienced temporarily.
 - Associated Imbalance: **Water utilization**
 - Electrolyte absorption**
 - Heavy Metal Toxin**: Cadmium and Molybdenum - age 34
 - Associated Imbalance: **Excess stress hormone** production - age 17
 - Toxic sound** - age 18 - Toxic sound refers to any audible sound frequency that has become stuck in the body, usually in the brain.
 - Heart Imbalance** - age 18
 - Amygdala gland imbalance** - age 18 - amygdala is located deep within the temporal lobes of the brain. It is involved with the "fight or flight" reaction. If the amygdala senses that you are in danger, it communicates with the hypothalamus, which sends a signal to the pituitary gland, and then the adrenal glands. This chain of events produces stress hormones known as adrenaline, noradrenaline, and cortisol, triggering the fight or flight response.

- Opened/Balanced/Aligned Energy Centers and energetically grounded you**
- Chromatherapy (colored light)**
- Released specific energy blocks related to limiting beliefs/negative thoughts from the present and/or past (noted on table below)**
- Released energy blocks related to specific fears from the present and/or past (noted on table below)**
- Released **0** energy blocks related to other issues such as cultural beliefs holding you back and hormonal imbalances
- Did quantum touch to:** right hip; right hip
- Utilized sound frequencies during healing session:**
- Positive Frequencies Added to Energy Field (*Definitions of these terms can be found here:* [Positive Frequencies Defined Alphabetically.pdf](#)):**

	Limiting Beliefs/ Negative Thoughts "I (or he/she) will never..." (from present or past) A	Fears (from present or past; they could be your own or absorbed from someone else. "Abs" is used to show those that are absorbed) B
1	<input type="checkbox"/> Be Smart enough <input type="checkbox"/> Be Pretty/handsome enough <input checked="" type="checkbox"/> Be Successful <input type="checkbox"/> Be financially secure <input type="checkbox"/> Find Joy/Happiness <input type="checkbox"/> Be Good/Deserving enough in general	<input checked="" type="checkbox"/> Own Death/Dying <input type="checkbox"/> Someone Else's Death <input type="checkbox"/> Getting Sick <input type="checkbox"/> ____ condition (ie heart, cancer, anaphylaxis) <input type="checkbox"/> Of germs and/or dirt

	<input type="checkbox"/> Set/ Maintain good boundaries <input checked="" type="checkbox"/> Feel safe enough <input type="checkbox"/> Have a sense of humor	<input type="checkbox"/> Medical Treatment/injections <input checked="" type="checkbox"/> Aging
2	<input type="checkbox"/> Lose/gain weight <input type="checkbox"/> Heal from _____ illness <input type="checkbox"/> Heal from _____ trauma <input type="checkbox"/> Give/Feel love <input type="checkbox"/> Be able to communicate how I feel <input checked="" type="checkbox"/> Kick _____ Habit <input type="checkbox"/> Be different from my parents <input type="checkbox"/> Be youthful/old enough <input type="checkbox"/> Be fun	<input type="checkbox"/> Crowds <input checked="" type="checkbox"/> Socialization <input type="checkbox"/> Leaving home/ travel <input type="checkbox"/> Flying <input type="checkbox"/> Driving <input type="checkbox"/> Sleeping and/or Dark <input type="checkbox"/> Bridges <input type="checkbox"/> Vehicular Accidents
3	<input type="checkbox"/> Be content/ at peace with myself <input type="checkbox"/> Sleep soundly <input type="checkbox"/> Love/ accept myself unconditionally <input type="checkbox"/> Love other(s) unconditionally <input checked="" type="checkbox"/> Forgive myself <input type="checkbox"/> Forgive other(s). <input type="checkbox"/> Manage money effectively <input type="checkbox"/> Go with the flow <input type="checkbox"/> Be good at _____ (ie. sports, job skill, etc..)	<input type="checkbox"/> Being alone <input type="checkbox"/> Being uncomfortable and/or different <input type="checkbox"/> Being vulnerable <input type="checkbox"/> Humiliation <input type="checkbox"/> Claustrophobic (small spaces) <input type="checkbox"/> Separation from loved one <input type="checkbox"/> Commitment
4	<input type="checkbox"/> Trust myself/ intuition <input type="checkbox"/> Trust other(s) <input type="checkbox"/> Allow myself to be vulnerable <input type="checkbox"/> Take a chance <input type="checkbox"/> Exhibit courage <input checked="" type="checkbox"/> Conquer _____ fear (heights) <input type="checkbox"/> Feel needed/wanted or valued <input type="checkbox"/> Discover/Use my talents <input type="checkbox"/> Exercise Regularly <input type="checkbox"/> Be able to do that (I can't)	<input type="checkbox"/> Public Speaking <input type="checkbox"/> Taking tests/exams <input type="checkbox"/> Failure <input type="checkbox"/> Disappointing or Being Disappointed <input type="checkbox"/> The Unknown <input type="checkbox"/> Imperfection <input type="checkbox"/> Being Overwhelmed <input type="checkbox"/> Initiating tasks
5	<input type="checkbox"/> Care for myself <input type="checkbox"/> Care for other(s) <input type="checkbox"/> Make healthy food choices <input type="checkbox"/> Choose friends/romantic partners that support my healthy growth as a person <input type="checkbox"/> Be able to act selflessly <input type="checkbox"/> Make good choices in general <input type="checkbox"/> Let go <input type="checkbox"/> Be physically fit <input type="checkbox"/> Stop procrastinating	<input checked="" type="checkbox"/> Heights <input type="checkbox"/> Thunderstorms <input type="checkbox"/> Natural Disasters and/or weather <input type="checkbox"/> Water <input type="checkbox"/> Fireworks <input checked="" type="checkbox"/> Loud Noises in general <input type="checkbox"/> Past repeating itself <input type="checkbox"/> Falling
6	<input type="checkbox"/> Land the job of my dreams <input type="checkbox"/> Achieve good grades <input type="checkbox"/> Accomplish _____ goal. <input type="checkbox"/> Be able to pay attention/focus <input type="checkbox"/> Be Socially acceptable <input type="checkbox"/> Be secure enough to not play the victim role <input type="checkbox"/> Be independent/ self-reliant <input type="checkbox"/> Be able to show gratitude <input checked="" type="checkbox"/> Be worthy	<input type="checkbox"/> Spiders <input type="checkbox"/> Snakes <input type="checkbox"/> Dogs <input type="checkbox"/> Cats <input type="checkbox"/> Bees/wasps <input type="checkbox"/> Other bug/insect or animal <input type="checkbox"/> Vomiting

7	<input type="checkbox"/> Be motivated <input type="checkbox"/> Display grit <input type="checkbox"/> Exercise <input type="checkbox"/> Think positively about a situation(s) <input type="checkbox"/> Get approval/love from _____. <input type="checkbox"/> Establish a positive work ethic <input type="checkbox"/> Be okay making/learning from mistakes <input type="checkbox"/> Acknowledge my own accomplishments <input type="checkbox"/> Be good at a specific subject in school	<input type="checkbox"/> Fear of an Emotion (use chart) <input type="checkbox"/> Divorce <input type="checkbox"/> Marriage <input type="checkbox"/> Birth/having children <input type="checkbox"/> Moving <input type="checkbox"/> Communicating one's feelings <input type="checkbox"/> Transitions/ Change
8	<input type="checkbox"/> Relinquish control <input checked="" type="checkbox"/> Find my soulmate <input type="checkbox"/> Be enthusiastic <input type="checkbox"/> Be full of energy <input type="checkbox"/> Be free of the feeling of _____ (use chart) <input type="checkbox"/> Be honest/loyal <input type="checkbox"/> Be sexually pleased <input type="checkbox"/> Be confident <input type="checkbox"/> Feel fulfilled	<input type="checkbox"/> Of Another Person or Persons <input type="checkbox"/> Gaining/Losing Weight <input type="checkbox"/> Eating <input type="checkbox"/> Rejection <input type="checkbox"/> Intimacy <input type="checkbox"/> Giving/ receiving love <input type="checkbox"/> Losing money/ not enough \$/ poverty