

<b>Term</b>	<b>Definition</b>
<b>Balanced Indicator Muscle</b>	A muscle in proprioceptive homeostasis used for bio-feedback muscle monitoring.
<b>Clear</b>	When the challenge no longer gives a change of indicator muscle.
<b>Circuit Locating (CL, CL'ing)</b>	Either practitioner or client uses Neutral Polarity (e.g. thumb or index and middle fingers of the same hand together) to contact monitoring or reflex points.
<b>Challenge</b>	To CL or activate a reflex or acupoint or a verbal statement while monitoring a 'Balanced Indicator Muscle'.
<b>Contraction</b>	A position in which the muscle fibres are shortened, and isolates the muscle as a prime mover.
<b>CV8</b>	The eighth acupoint on the Central Vessel acupuncture meridian, located at the umbilicus (navel).
<b>CV24</b>	The twenty-fourth acupoint on the Central Vessel acupuncture meridian, located in the inferior labial groove (between the tip of the chin and the centre of lower lip).
<b>Extension</b>	A position in which the muscle fibres are lengthened to monitor it's antagonists as a group.
<b>GV1</b>	The first acupoint of the Governing Vessel acupuncture meridian, located inferior to the Coccyx (tip of the tail bone).
<b>GV26</b>	The twenty sixth acupoint on the Governing Vessel acupuncture meridian, located in the superior labial groove (between the base of the septum of the nose and the centre of upper lip).
<b>Hydration</b>	A challenge to determine the presence of a stress due to an inadequate water content.
<b>K27s</b>	The twenty seventh acupoint on the Kidney acupuncture meridian, located inferior to the Medial end of the clavicle where it joins the sternum.
<b>Lock</b>	When a muscle maintains its state of contraction or extension when pressure is applied in the direction of contraction to extension or extension to contraction.

<b>Term</b>	<b>Definition</b>
<b>Unlock</b>	When a muscle moves in the direction of contraction or extension when pressure is applied in the direction of contraction to extension or extension to contraction
<b>Manual Sedation</b>	Using finger pressure to squeeze the Spindle Cells in the belly of the muscle together to unlock the muscle in contraction
<b>Manual Tonification</b>	Using finger pressure to stretch the Spindle Cells in the belly of the muscle by pulling the fibres in the belly of the muscle apart to re-lock the muscle in contraction.
<b>Muscle Monitoring</b>	Assessing the biofeedback from a muscle response, alternatively called muscle testing or muscle checking.
<b>Proprioceptive</b>	Refers to the subconscious sensory feedback to the Central Nervous System from the receptors monitoring muscle tension, length, changes in length and joint position.
<b>Homeostasis</b>	A state of muscle balance in which the muscle will lock when manually monitored in contraction, unlock after sedation and then re-lock when tonified.
<b>Reactive Muscle Response</b>	When the activation of one muscle causes an imbalance in another muscle when the second muscle is monitored immediately after the activation of the first muscle.
<b>Switching</b>	<p>Neurological disorganisation is evidenced by muscles on the opposite side of the body showing imbalance to the side affected or by the positive CL of specific test points e.g. K27's, CV24 and GV26.</p> <p>Walther claims Neurological disorganisation is most often caused by distress in the cranial-sacral primary respiratory system, the second most common cause is foot dysfunction.</p> <p>Following this, more common causes include Cloacal desynchronisation, pitch / roll / yaw / tilt (PRYT), gait organisation and dural tension.</p> <p>Basically anything could be a cause of switching / neurological disorganisation.</p>