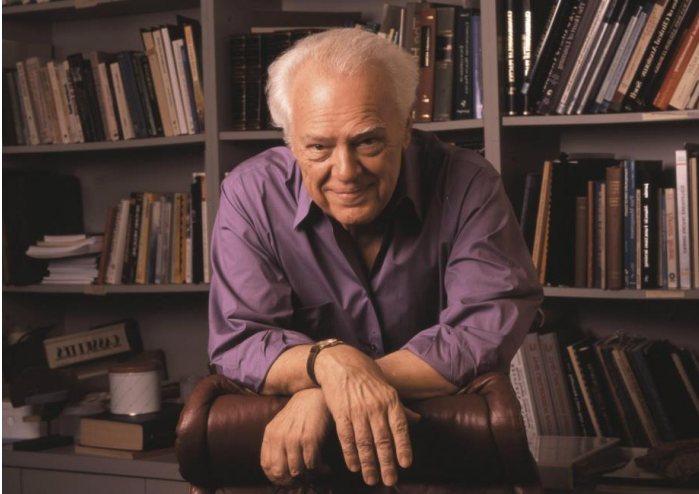


# THERAPEUTIC PULSE

2013

Ui

UPLEDGER  
INSTITUTE  
UNITED KINGDOM



## Dr John E. Upledger 1932 - 2012

2012 was the year that Dr John chose to move on. His job in body is done, but boy how his work is living on. There are many people who are finding that he / his energy / call it what you will is helping their treatments and that some profound things are happening in sessions for both practitioners and clients. Whatever your beliefs may hold about the likelihood of what is going on, the legacy, energy and intention of the CST work is clearly alive and blooming. Both UI International and UIUK would like to assure you that we will continue to do our very best to share his work and its essence.

We were invited to share a moment of silence honouring him during the memorial service in Florida on Saturday December 15th at 5.30 EST (10.30pm our time). However, if physics is right and time is in fact more fluid than we are lead to believe, you can of course join in that moment whenever you choose, because there is only now!

If you haven't already seen it, John Page wrote a personal account of the day which you can find on the website's blog page.

***Enjoy this edition of the Therapeutic Pulse.***

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[www.upledger.co.uk](http://www.upledger.co.uk)

## Up and Coming Courses in 2013...

We are noticing a definite shift towards people booking onto courses later than they used to. While we really understand this, can I put forward our corner that it is harder to know numbers for smaller course venues if it is left too late, so there is the risk that we may pull one only to find that people say 'oh I was going to book on that...' We don't know that unless you tell us! So please think about letting us know even if you are not ready to pay completely. Thanks!

### Core Curriculum News

**CST1:** We have one scheduled for Perth in February, which is full; London in April and September at a new venue in Borough and one in July in Shipham, just south of Bristol. And the CST1 and 2 review and clinic day in June.

**CST2:** Also London in April and September and in July subject to demand - so please let us know in good time which ones are of interest.

**SER1:** Just had one in London, next one will be in September, London again, at the new venue.

**SER2:** This was not scheduled in the last newsletter but I had quite a few people asking so I have put one in for Shipham in July. Stan Gerome is going to grace us with his teaching and holding of the space.

**Advanced 1 and 2:** We have enough interest - no, passion I'd say!- for two Advanced 1 courses and an Advanced 2. One space may become available on the 1 and we have a wait list for the 2. We did not get quite enough takers for the Advanced 3 so we will look to run that one next year instead.

### CST & the Immune Response

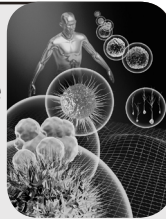
Finally! I have been assuring you I will run this course towards the end of this year and although I am still finalising dates we will be having it in November. This is the blurb they put about it on the Ull website and seems to cover the gist of it:

The goal for this class is to teach you how to better help the immune system perform its magic. To accomplish that, you'll learn how to communicate with different cell types to find out how you can help them improve their performance - especially when invading microorganisms gain a foothold.

You'll study and 'communicate' with the many glands and organs involved in the immune system: the liver, spleen, thymus, lymph nodes and others; and explore the production of various communication molecules, including gamma globulins and other protein molecules.

So, interested? I will keep you updated by email - but if you know you are interested then please do drop us an email to let me know.

November (TBC) 2013, Bristol



### NEW: CORE PACK PAYMENT PLAN

We are also introducing a CORE PACK PAYMENT PLAN for those who want to sign up for CST1-SER2 and stage their payments. Details on the website.

**AND...** we are also happy to arrange payment plans for any of the courses if that makes it easier for you - as long as you are able to set up regular standing orders or post-dated cheques all reasonable staging suggestions will be considered!

## Remember Some Techniques to Treat Yourself from Time to Time

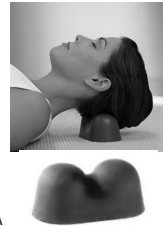
Life keeps us pretty busy most of the time. There are some people around who seem to have mastered a gentle sway from day to day, letting the stresses pass gently over their head. I am not really one of them at this time in my life! So I have been forced to look at what I can do to take the stress out of my system - body and mind - and have remembered that some of what we offer to others in our treatments can indeed be used to help ourselves. These all come from CST1. Have a go....

### Cranial Pumping

This gentle method of connecting to the craniosacral rhythm from the head or the legs or wherever is convenient, and gently emphasising or nudging the end of ranges, is very easy to do. If you think you could use a bit of extra flushing of your cerebrospinal fluid or want to clear your head, give it a go. Nudge the flexion... nudge the extension... repeat a few times, take that full breath and relax... Ahhhhh.

### Still Points

You learned in CST1 about the tennis balls in the sock to induce a still point at the occiput, (not always great as they can slip apart!); many of you also use the purposely designed still point inducer. Whichever is your choice, 10-15 minutes lying on these does indeed bring you to still point; your system may give itself a few still points in this time (I have monitored my rhythm while lying on it to watch when it goes into still point and comes out again). Only word of warning - don't fall asleep on it! Remember why we do still points? They reduce sympathetic tone and have been shown in a recent piece of research to improve health of a number of variables in elderly people. A shotgun approach to relaxation... or is that a misnomer?!



### Parietal Lift

This is mentioned in CST1 too and is an interesting route into the membrane system and dural tube. If you feel in the need for an internal stretch and maybe even a dural tube unwind then gently connect to your parietals, and initiate an up to 5 gms lift (as little as it takes to get the tissues responding). You don't need to do the compression first although you can if you like. As you get to the lift you can listen, feel and follow what the membranes are doing in response to the technique. Sometimes you might feel some other movements wanting to happen... follow your body gently and let it do what it needs to release. Its also a useful way of observing the technique's potential for yourself.

### TMJ Decompression

The decompression of the TMJ can also be done for ourselves very easily. You may recall that you can use a correctly sized stick as a fulcrum between your back teeth; it is suggested to use it for a few minutes, a couple of times a day to decompress the joint. Or, with elbows resting on a table or a big pillow if you are sitting on the couch or in bed, use your finger pads on the body of the mandible to gently carry out the decompression of the mandible from the temporal bone - 5gms or less. Watch what happens either side until you get the feeling that it is open, rebalanced and released on both sides. At this point you can also follow it into the response of the temporal bones, the temporoparietal suture, the parietal bones and even the falx. (See the brown book '*CranioSacral Therapy*' p. 200 for a great description of this.) Then sit back and relax....



# Getting to Unconscious Competence

## Why Repeating Seminars Makes You a Better Therapist.

## Why Participating in Study Groups Makes you an Even Better Therapist.

## Why Being a Teaching Assistant Makes You One of the Best Therapists!

*by Dawn Langnes, UII*

*Dawn sent this to the UI satellites to help us explain the value of repeating seminars, participating in Study Groups and becoming a Teaching Assistant. No one gets it all the first time. Dr. Upledger spent his entire professional careers studying his subject and anatomy on a regular basis...*

The Learning Pyramid was developed way back in the 1960s by the NTL Institute in Bethel, Maine. To summarise the numbers (which sometimes get cited differently) as a learner you retain approximately:

- 5% of what you learn when you've learned from lecture.
- 10% of what you learn when you've learned from reading.
- 20% of what you learn from audio-visual.
- 30% of what you learn when you see a demonstration.
- 50% of what you learn when engaged in a group discussion.
- 75% of what you learn when you practice what you learned.
- 90% of what you learn when you teach someone else or use it immediately.

So why do you retain 90% when you teach someone else or when you implement it immediately?

When you implement or teach, you instantly make mistakes. As soon as you run into difficulty and start to make mistakes, you have to learn how to correct the mistake. This forces your brain to concentrate.

But surely your brain is concentrating in a lecture or while reading? It is, but it's not making any mistakes. What your brain hears or sees is simply an abstract concept. And no matter how clearly the steps are outlined, your brain does not retain a large amount of the information. There are two reasons why.

Reason 1: Your brain gets stuck at the first obstacle.

To prove this, pick up a book and read it for about 10 minutes. Now go back and re-read it; you'll find you've missed a few of the concepts in just the first few minutes. It's hard to believe, but as you keep reading the same chapter over and over, you'll find more things that you've missed.

This is because the brain gets stuck at the first new concept or obstacle. It stops and tries to apply the concept but struggles to do so. But you continue to read the book. The brain got stuck at the first point, but more points keep coming.

Reason 2: Your brain needs to make the mistake first hand

No matter how good the explanation, you will not get all of it right the first time. You must make the mistake. And this is because your interpretation varies from the writer or speaker. You think you've heard or read what you've heard or read. But the reality is different. You've only interpreted what they've said, and more often than not, the interpretation is not quite correct. You can only find out how much off the mark you are by trying to implement or teach the concept.

So how do work to retain 90% of what you've learned? Write things down, discuss them, practice them, review them, and teach them.

## Four Stages for Learning Any New Skill

The theory was developed at the Gordon Training International in the 1970s. The Four Stages of Learning provides a model for learning. It suggests that individuals are initially unaware of how little they know, or unconscious of their incompetence. As they recognize their incompetence, they consciously acquire a skill, then consciously use that skill. Eventually, the skill can be done without consciously being thought through, and the individual is said to have unconscious competence.

### Unconscious Incompetence

This is where 'you don't know what you don't know'. You do not understand or know how to do something and do not necessarily recognise the deficit. You must recognize your own incompetence, and the value of the new skill, before moving on to the next stage. You are in this stage before you have started studying a new modality.

### Conscious Incompetence

In this stage you do not understand or know how to do something, but now you recognise the deficit, as well as the value of a new skill in addressing the deficit. You attend a new modality seminar, and see a whole new world of evaluation and treatment. The making of mistakes can be integral to the learning process at this stage.

### Conscious Competence

You have been practicing what you learned in the seminar and are able to apply much of the information. You are able to recall things, or know where to look them up in your textbook or study guide. You understand how to do something; however, demonstrating the skill or knowledge requires concentration.

### Unconscious Competence

This is the level you reach when you have had so much practise with a skill that it has become "second nature" and can be performed easily. As a result, the skill can be performed while executing another task. You have created strong enough cellular memories that you know and understand without having to consciously search your brain for information. This is the level to strive for to become an excellent therapist.

The fastest way to reach Unconscious Competence is to repeat the seminars, participate in Study Groups, and become a Teaching Assistant at the seminars!

## Talking of TEACHING ASSISTING...

There are still previous requests that we are waiting to fulfill for TAing but we are getting there; thank you to those who have TAd - we really do appreciate it - and thank you for your patience those who have not yet had the opportunity.

Please do keep letting us know if you would like to become a TA. Please note that you must be available for the whole course, from the start of registration each morning, and if you do commit we would really appreciate you being sure you can make it. Of course life happens, but last minute gaps can be challenging to fill. We are going to book more people 'in reserve' from now on so if you can keep particular weekends free let me know!

# Dr John E Upledger DO OMM 1932-2012

I 'fell in love' with John Upledger while reading 'Your Inner Physician and You', and I was not the only one! It is a truly inspirational book worth reading over and over again.

Fourteen years later I feel both privileged and saddened that whereas in my lifetime, I was able to attend three of his four-day classes and two Symposia, others who are beginning or still exploring Dr Upledger's work now will not have that opportunity.... so this article is for them.

Dr John (as he was affectionately known) taught through his books and his teaching, but overwhelmingly he taught through demonstration. I must have seen and participated in up to 50 demonstration treatments that he gave. I attended his 'Brain Speaks' and 'Immune' classes in Florida, which came to be documented in the book, 'Cell Talk' and the advanced immune class where he delved into the inflammatory response and its affect on the body's pathogenic processes. I say 'delved' because he would provide us with great tomes of material and always begin with some latest up to the minute research he had found, fully attributing it to its author.

I found he had a deep humility like that, and will always remember how at the end of the first 'Immune' class he turned to the 80 or so people in the room and began to talk to us about how he worked with his Guides. He explained how he would suspend his own rational intellect and tune in to allow them to lead the treatment session.... every time. Then it worked! When I get bogged down in 'symptoms' and 'techniques' and begin to feel a bit 'stale' I remember him saying, 'I do nothing without my Guides' and I am on track again.

Every day he would open the class with some new material and then we would immediately get down to the demonstrations: 3 or 4 each day. Several times he brought in a professional cellist to work with him and would ask her to play just the very vibration that the client needed to shift their pattern. Sometimes, he worked on his gardener, the man who mowed his lawns. He joked that he got them mowed free for treatments from Dr Lisa and himself, and we had the delight of meeting him. On dialysis for years, his bladder had entirely stopped working but after several treatments he found himself (to his amazement) taken short in the middle of town!

Often we were all called upon to help in the treatments, by placing our hands on the back of the heart of the person in front and then the nearest person to Dr John would place his hand on him. The person on the table could not but shift with 80 hands of energy being directed with such focus.

There were no boundaries to his creativity and innovation if it was for the patient's highest good. He would work from exactly where the patient was, using their own concept of how they could receive help from their higher power and spiritual guidance. After my second immune class around the inflammatory response, my mind was bogged with the degree of scholarship that he brought to the work, knowing I could never emulate that. I sat in my chair a few feet away from him and wondered what had I really learned? What could I take away from this class? The answer from my own Inner Physician was swift: 'you can ask for anything for the patient's highest good'.



## A personal tribute by Ann Margaret Whittle

Dr John conceived and structured CranioSacral Therapy. Some commentators, in summing up his contribution, have attributed him solely with the 'bio-mechanical approach'. I am not a little mystified by this. Yes, indeed he was a Professor of Biomechanics: he did the footwork, wrote the books and co-ordinated the original research. But he didn't stop there!

For the man I saw at work, knew that the body-heart-mind-spirit were one and that they were underpinned and nurtured by the great universal laws of Nature. He continually made reference to Mother Nature and how much smarter she was than any one individual. He treated the whole person as he found them and laid his emphasis where the Inner Physician of that person called to him.

For me the great and abiding gift he brought to this work was his concept of the 'Inner Physician' as the non-conscious aspects of the body-heart-mind-spirit, which in treatment could be 'conversed with' through imagery and dialogue, easing the resolution and dissolving of stored, emotional stress and shock. Where this may have been preventing the tissues from fully healing, such a resolution can bring a major shift of pattern.

Just a few months before Dr John died, the publishers, Forgotten Books, republished two of the major works of Dr Andrew Taylor Still, the founder of Osteopathy and the 'grandfather' of CranioSacral therapy. He set up the first ever College of Osteopathy in 1892 in Kirksville, Missouri. He was a doctor of the people, a visionary and maverick who realised early on in his life that surgical instruments and drugs were far less effective in restoring health and healing, than the knowledgeable and compassionate hands of the dedicated practitioner.

I soon realized while reading his books that Dr Still's concept of 'the triune man,' composed of an integrated body-mind-spirit, as creation's perfect self-healing mechanism, subject to unnamable yet harmonious laws, had amazing similarity to Dr John's concept of the Inner Physician.

A sad fact but true, in 1910, the American Medical Association intervened with new specific standards for medical institutions, resulting in osteopathic colleges distancing themselves from Dr Still's enlightened philosophy. The central concepts of his teaching: the triune man and the conviction of the perfect self-healing mechanism subordinate to a higher power were expelled from the Osteopathic curriculum of the day.

For me, Dr John recovered that wisdom, and brought it back into our consciousness as a new and deep understanding of the amazing biological intelligence and wholeness of the human body-heart-mind-spirit. Quantum physics would call it 'coherence', the body's amazing capacity to co-operate with all of its parts at the highest level of quantum order.

There is an ancient Amerindian blessing and greeting which I learned from a shaman of the Seneca tradition. It trans-literates something like 'niakaskino'. It means 'thank you for being'. I find it beautiful and all-embracing.

Dr John Upledger, thank you for being!

*Ann Margaret Whittle*





# UIUK Special Articles: Record Keeping



By **David Balen Cert PFS**

Managing Director, Balens,  
Specialist Insurance Brokers

*Thanks to Balens for permission to share this!*

Record keeping - how long should you keep your notes? What happens if you work in a clinic who owns the notes? What happens if you leave a clinic or stop your practice? What about the Data Protection legislation?

The reality is that there can be overlaps or contradictions in the different types of law. Data Protection legislation, Contract Law, the Criminal Law and Human Rights legislation are there to prevent abuse but they can cause confusion especially with regard to what you should do as part of your contract with the insurance company in complying with policy terms and conditions.

The Data Protection Act says you should keep records for no longer than necessary (although they don't define how long that is!). The core purpose of the Act was to stop people abusing data held and using it for unethical purposes. On the other hand, we could say that you have a human right (protected by law), to have a livelihood and it is a condition of your policy (Contract Law) that records be kept in order to defend you. Similarly the statute of limitation (Civil Law or Tort) extends the possibility of an action against you beyond the time limits of the data protection act as well as dictats of the Criminal Law - so which one should you obey?

We recommend that you keep patient records indefinitely, particularly those for minors. This applies even when you have referred the patient on, or you have left the practice where you administered the treatment. Although in most cases the statute of limitation that applies for late discovered situations leading to an allegation of negligence could be 3 or 6 years from the date of discovering a problem, there are certain situations where the limitation period could be much longer.

In the case of minors, there is no statute of limitation, for when a case may be brought. Even if the policy

only requires 7 years, clearly in some cases this may not be enough, and in the case of people with learning difficulties and in certain other situations, there is no statute of limitation and the Courts can overturn limitation periods.

Your patients' case notes and records are your property, and you must retain them even if you move to another practice. If, as a clinical supervisor, you oversee a student's work under your professional practitioner insurance, the patient's records are yours. Although a patient can by written application seek access to notes, they have no legal rights of ownership. However, if a patient requests a copy of their notes, you must follow the procedure laid out in the Data Protection Act 1998 and keep a record of this on the file. Your Insurance policy may require you to keep records for 7 years, so it is important that you know where they are at any time in order to fulfil the requirements of your insurance to defend an allegation against you.

Think ahead! You may want to appoint someone in your Will or any Power of Attorney arrangement you may have set up to be able to have access to the records if you are too ill, disabled or incapable of accessing them. Your Will should include such information so that if your Estate was challenged after your death, the policy would be called upon to defend it and would be able to do so.

On selling or otherwise transferring your practice, you may pass on the original records if (a) the new owner will be subject to the same or similar rules to those referring to Case Notes above and (b) the patient is informed in writing in advance of the transfer and given the opportunity to object, in which event you must retain the original records.

You must also ensure that patients are kept fully informed and offered appropriate choices about their continuing care and the safe keeping and location of their original records. As it will be your policy that will defend you for previous work performed, you must ensure that the notes can be easily accessed or that you have copies, in order to fulfil the terms of the policy and in any event to allow yourself to be defended whether by the insurers or anyone else.



## **CST 1 & 2 Review and Clinic Day 22 - 24 June Shipham, Somerset £240**

We have been asked for a while by a number of you for reviews of the CST 1 & 2 work so we have put these 3 days together, more a big study group than a formal course, to give us lots of time to get stuck in!

Primarily we will aim to address what you want to know. We will go over the techniques of the 10 step protocol and make sure you understand why we are doing each one, the core intent and the correct hand placements. We will review Sutherland's sphenoid lesions and the techniques of the hard palate.

Our focus will then be to explore what we are actually feeling when we are doing the work, how we can extend our field of awareness and palpation further afield, how we can listen more acutely to a client's tissues, meld more deeply and blend with neutrality. We will play with our palpation skills and how we connect to a client's body and hear their inner wisdom. This will take us gently into a review of the full body evaluation techniques which you learned in CST2 and we will practise using our intention to switch easily and effortlessly between the different 'wavelengths' of information it is possible to pick up.

The third day will be a clinic day and we will have 'real' (!) clients to work on to put our explorations and insights into practise.

*To be taught by Caroline Barrow CST MCSS*



*A childlike (and trusting!) approach to learning...*

## **SER 1 & 2 Review and Clinic Day 22 - 24 June Shipham, Somerset £240**

The SER and dialoging part of Upledger CranioSacral therapy is a hugely important and unique piece of thiPPs work. Yet, maybe because it is so unique, it can be a challenge for many of us to really be clear when the significance detector is telling us something is important and then to actually get dialoguing! This review class will help.

We will spend a little time reviewing the 'Avenue of Expression' mouthwork covered in SER1 to ensure you are comfortable with and clear about these additional techniques.

We will then focus on the essence of what the dialoging is there to do and from that understanding see how Dr John utilised and incorporated insights from other therapeutic approaches. We will use our time to practise instigating and following the conversation that the client's process directs and, while we do this, to stay melded and blended with them, sharing the journey and being willing to go with them wherever they need to go. These are skills that take time and practice but can really benefit from an injection of experiential review.

The third day will give you the chance to practise on clients and with support and reflective time afterwards.

*To be taught by Nikki Campbell CST-D MCSS*

# Support

## Study Groups

Here is the current list of Study Group Leaders. There is a very reasonable charge of £15-£25 depending on the length of the meeting and often a prearranged topic for discussion and practice. An updatable list of the dates, locations and topics of the groups Study Group Leaders are holding (as far as I have been let know!) is on the 'Training Calendars' page of the website. Please let the group leader know in advance if you are coming.



We really do encourage you to **get in touch and get involved**, both to support the leaders who are giving their time and to support your own practise and development – it would be a rare thing not to learn anything or gain from getting stuck into a session!

Group Leader	Location	Telephone
Nikki Campbell CST MCSS	Marlow, Bucks	07989 416237
Jo Crill CST MCSS	Wandsworth, London	020 8674 9901
Fiona Gilbraith CST MCSS	Perth, Scotland	01738 551682
Maggie Gill CST MCSS	Rottingdean, E Sussex	07967 046943
Joe Gore CST MCSS	Redruth, Cornwall	01209 315701
Rachel Harrison CST MCSS	Edinburgh, Scotland	0131 6698966
Janet Hiller CST MCSS	Abbots Langley, Herts	01923 265370
Sheila Hoy CST MCSS	Banbury, Oxfordshire	01295 780027
Lea Miller CST MCSS	Preston, Lancashire	07970 633160
Mags O'Brien CST MCSS	Telford, Shropshire	07939 049218
Carolyn O'Neill CST MCSS	Holsworthy, Devon	07717 400152
Kiera Petersen CST MCSS	Wimbledon, London	07853 370933
Mary-Clare Scragg CST	Ulverston, Cumbria	01229 586000
Carol Wells CST-D MCSS	Long Ashton, Bristol	01275 463769
Ann Whittle CST MCSS	Frimley Green, Hants	01252 834784
Alison Williamson CST MCSS	Chelmsford, Essex	01245 283251

### Peer Support Group within Facebook

Please do join our UK Peer Support Closed Group via Facebook. In order to join you need to have done at least an Introductory Course. You need to be a member of Facebook (though you don't necessarily need to use it for anything else); then to join find the group '**UK Student Support Group**' by typing in the search bar or follow the link: <https://www.facebook.com/groups/406792339341732> It is a closed group so information is kept confidential. There is also an Upledger Alumni group that is well used and raises a range of great questions and ideas to ponder. The idea behind both is that we offer our support and experience to each other, it is not 'teacher lead'.



**INTERNATIONAL ASSOCIATION  
of HEALTHCARE PRACTITIONERS**

Everyone who has done courses are listed on the IAHP or International Association of Healthcare Practitioners database site (unless they request not to be). This can be found at [www.iahp.com](http://www.iahp.com)

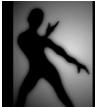
It has in the past proven tricky to locate practitioners in the UK and it is not unusual for us to get calls saying people cannot find themselves! Especially when the search gets too narrow. They have been working to update it and make it more user friendly but have encountered a few challenges along the way over the past few months. These seem to have been addressed...

But because the format is now different for us to give them updates when people do courses, some of last year's are not yet updated. We hope to have this completed very soon. So you are not lost but you may be a little outdated for another few weeks!

*Thank you...*

*...to everyone who has contributed to this Therapeutic Pulse. We welcome input from any of you that is newsworthy, relective, helpful and interesting in any way to our community. Please continue to contribute.*

*Also, let me know what you like and what you want more and less of. This is to support you and keep you in touch with us and each other so let me know what works best for you.*



**College of  
Body Science**

**LOVE ANATOMY**

**Inside the Cranium for the CranioSacral Therapy Student  
The Anatomy You Need to Know**

- the bones, details of the ways they articulate, the foramina, fissures and fossas (holes, crevices and dips!);
- the meninges, connective tissue and inter-related fascial features;
- blood supply to the head and its drainage, along with production and reabsorption of cerebrospinal fluid and its function;
- how the cranial nerves exit the skull and spine and the structures they supply;
- complete the picture with the attachments and actions of the muscles of the jaw, hyoid and upper neck.

Then have a day in the Dissection Lab looking at all these structures in real specimens!

**Hear it, see it, feel it, learn it, know it... and all that jazz.**

Have a great time, learn **a lot** in a small amount of time and understand it **in relation** to what you do in CST; **get inspired** to keep learning so you have it when that certain client needs you to know it... .

**26 - 28 February or 1 - 3 October 2013 London Bridge £350**

**Interested? Questions? [www.collegeofbodyscience.com](http://www.collegeofbodyscience.com) or call 0845 108 1088**

# Workshop Programme 2013

Course	Date	Location	Fees
CST1	8 - 11 February 2013	Perth, Scotland	£610
Advanced 1	18 - 22 March 2013	Somerset	£1050 + accom
Advanced 2	18 - 22 March 2013	Somerset	£1050 + accom
CST1	17 - 20 April 2013	London	£610
CST2	17 - 20 April 2013	London	£610
CST1 & 2 REVIEW & CLINIC DAY	22 - 24 June 2013	Shipham, Somerset	£240
SER REVIEW & CLINIC DAY	22 - 24 June 2013	Shipham, Somerset	£240
CST1	5 - 8 July 2013	Shipham, Somerset	£610
CST2	5 - 8 July 2013	Shipham, Somerset	£610
SER2	5 - 8 July 2013	Shipham, Somerset	£610
CST1	11 - 14 September 2013	London	£610
CST2	11 - 14 September 2013	London	£610
SER1	11 - 14 September 2013	London	£610
CST & the Immune Response	TBC November 2013	Bristol	£610
CST1	4 - 7 December 2013	Launceston, Cornwall	£610

Above prices all include VAT at 20%.

## Other things to remember:

**Resits** of CST1 - SER2 or other 4 day courses are £300.

**Exams:** It is £250 to sign up for either exam, which covers admin, marking of the essays and the practical exam. If you have signed up for your Techniques Exam you can resit CST1 or 2 for £200 and if you have signed up for the Diplomate you can resit SER1 or 2 for the same.

The latest version of the **Practitioner Networking Directory** is online and can be reached from the Finger on the Pulse page of the website. The password is UIUKPND. It is updated regularly.

**Please** be aware that it is really helpful if you can let us know if you are intending to come on a course in good time, or if you want to organise stage payments of a course. Please also do let us know if you move house or change email but still want to be in touch with us - or if you no longer do!

***What will 2013 be about for you...?***



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### Therapeutic Pulse

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