

HUBBARD COMMUNICATIONS OFFICE

Remimeo
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HCO BULLETIN OF 3 JULY 1969

Health Form and Somatics

The compilation of the Health Form is an AUDITING action. Its purpose is to find THE Somatic which is most available to be run (by meter read and interest) on this case at this time.

It is a skilled action and presupposes an auditor who knows his business and who knows what a SOMATIC is.

We have seen Health Forms done by medical officers and other personnel not technically qualified and done off a meter, which lists resulted in a compilation of enough narratives to fill half a dozen science fiction books without yet rendering one single usable somatic.

By the time the auditor waded through one of those lists once and dug out and found the runnable somatics the list looked like a clown's carnival. To use the term "Easter egg" to describe that list after 2 or 3 further runs would be an understatement.

22.7.69 HCOB

THE PRACTICE OF HEALTH LIST COMPILATION OUTSIDE THE SESSION MUST CEASE IMMEDIATELY AS IT LOSES METER READS IRRETRIEVABLY AND LEADS TO UNWORKABLE LISTS AND NEEDLESS AND DANGEROUS RESTIMULATION OF NARRATIVE CHAINS.

SOMATICS

Unbelievable complication and additive has been brought into the realm of finding the somatic. HCOBs 23.4.69 BASIC DEFINITIONS and 19.1.67 MANIFESTATIONS OF SECONDARIES AND ENGRAMS FURTHER DEFINED tell the auditor very clearly what a somatic is.

THERE ARE NO OTHERS, THERE NEVER WILL BE ANY OTHERS, THEY ARE THE ONLY ONES WHICH APPLY STANDARDLY TO EVERY CASE.

Somatics consist of PAIN and SENSATION, and these are subdivided as per the 19.1.67 Bulletin.

EVERY SYMPTOM CAN BE BROUGHT BACK WITHIN ONE OF THOSE CATEGORIES (pain, heat, cold, electrical, sharp hurting, motion, the whole scale of misemotions, dizziness, pressure, sexual sensation, emotions, disorientation, being blown upon, and bank beefing up.)

The auditor knows those STONE COLD, and he knows that when the pc says he feels "seasick" that he now does NOT have a somatic. So he now gets the somatic, the pain, ache, unwanted sensation or what-have-you and the pc says "nausea". Hooray! He has landed a fish! Easy. Simple. Very easy in fact. Nothing to it.

22.7.69 HCOB

Barbers, barmen, taxi drivers, and mothers of young children have done this for millenia. Little Johnny comes in screaming and Momma says "What happened Johnny?" Johnny, sniffing, says "Dick gave me a kick Momma." "Where does it hurt Johnny?" Johnny says, already brightening up somewhat, "My bottom hurts Mommy, it really does." If Momma had had Johnny on a meter she would most probably also have had half a dozen blowdowns on this one.

The pc who gives you as the "somatic", "it's like I'm flying", has just sold the auditor a narrative. The auditor is to get the somatic, and this can be motion, dizziness, fear, etc. etc. etc., BUT IT WILL BELONG IN ONE OF THE ABOVE CLASSES. We can repeat it over and over and over again that there is no substitute for understanding. But even if one does not fully understand one can learn the somatics and get the exact one in every case. Top flight Dianetic auditors ALWAYS find and run THE SOMATIC for the case at that particular time and ALWAYS find them classified under one of the groups which Ron originally discovered somatics to consist of. TRULY THERE ARE NO OTHERS. Buy anything else and you've bought a goof. Stick to the Standard and you'll score Well Dones.

ENDING OFF

Earlier Bulletins clearly state when you can end off. However, the point missed by student auditors was here also "there is no substitute for understanding."

Student auditor says "Yes, of course I continued. It was only a lock that F/Nd". Inspection of the session discloses that the pc's somatic blew, that there was no indication of key in, that the pc was happy, so what is the auditor doing heavily trying to key something in that was blown????!!!

THE AUDITOR SHOWS NOT TO UNDERSTAND THE PURPOSE OF DIANETICS, NOR DOES HE UNDERSTAND THE COMPOSITION OF CHAINS OR THE KEY IN - KEY OUT MECHANISM.

As Ron says, the chain that keyed out may key in, but also it may not key in for even centuries, and the purpose of Dianetics is not accomplishment of erasure of ALL chains on the case. Its purpose is a Well and Happy Being. A chain which keys in can always be picked up and completed when it occurs. But to key in a chain on a being happy to have blown a particular somatic, solely and only to stick to the form of R3R, "we must erase, we must erase, we must erase", not only shows assininity but complete lack of understanding of the purpose of Dianetics and auditing.

In fact in practice one finds that with the chain blown, even if only by key out, you cannot just bulldoze ahead and run it again for the simple reason that it doesn't read and surely doesn't have the pc's interest. It F/Nd and blew, didn't it?

ADDITIONAL SOMATICS

After completion of listing, or after completing a chain, the pc may suddenly blurt out other somatics. What happens here is that merely by listing or assessing or the process being run his confront and awareness have already started to come up, so he suddenly makes new discoveries.

The auditor does now NOT just ignore those originations, nor does he veer off the action he's engaged upon. Instead he alertly adds them to the Health Form INCLUDING THEIR READS. And if he was in the middle of listing or assessing and one of the newcomers gave an LFBD he immediately checks it for interest.

This goes to the extent of the pc who comes in and starts on an automaticity, giving off somatics before the auditor could even say "We are going to do a Health Form". Here again the auditor must know what the purpose of a session is, and he'll see that it is not the sticking to mere rote admin procedure, but the finding and eradication of the somatic chain that's on the case. So he takes the somatics and their reads and he gets on with them.

UNDERSTANDINGNESS

One must understand that basic is EARLIEST. The preclear spotting earlier incidents is "continuing toward basic". The main line of the process is the pc moving earlier. This then shows why trouble is always EARLIER--it is the earlier beginning, or it is the earlier incident, or, when overrun occurs, it is the earlier (un-unburdened) chain the pc falls into. Hence the seriousness when goofing the extremely simple procedure of Dianetics. The pc gets jammed into the earlier charge and gets clobbered by its heaviness.

For some peculiar reason it has been missed by most of the students that the beginning of an incident is earlier, is closer to basic, than the end. In other words, the end of the incident is that part of the incident that is closest to pt, so that when the pc goes through it he is moving forward in time, whereas of course the OVERALL procedure of chain running takes him earlier. Training Dianetic students showed that virtually without exception they all moved their pc through an engram backwards, resulting in a multitude of misunderstands. Set it up with a bit of clay as described in other bulletins and suddenly you'll see the simplicity and vast magnitude of Ron's latest development of modern STANDARD Dianetics.

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for

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