

B O A R D T E C H N I C A L B U L L E T I N

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Issue II

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Remimeo

Ex Dn C/Ses

CANCELS

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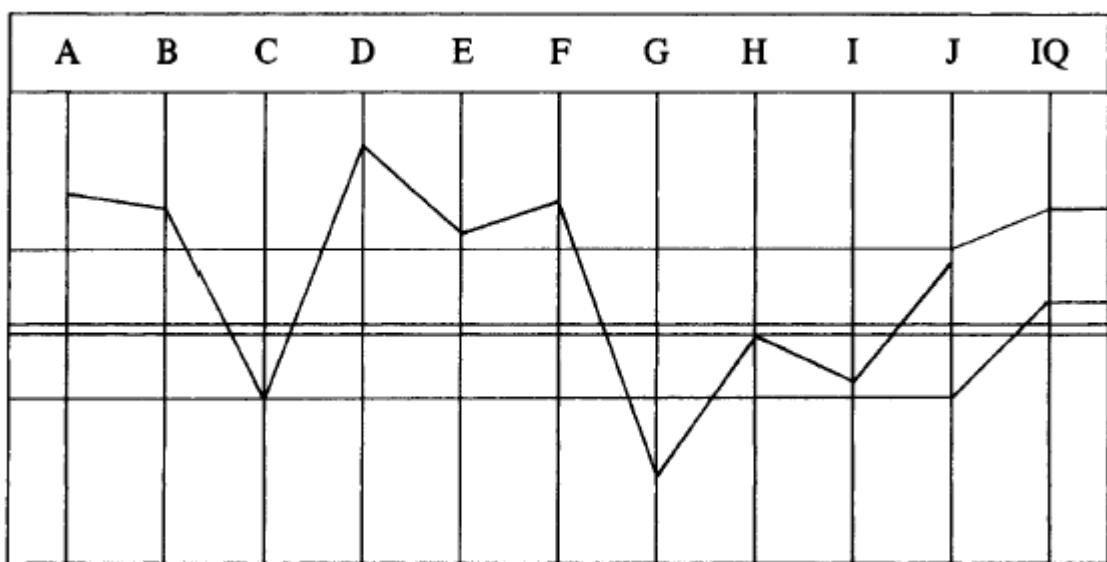
Issue III

***Expanded Dianetics Series 9***

(Series Number Amended)

**EXPANDED DIANETIC CASE B**

(Note: This case was made well, but not sane. This is a research case and is one of the subjects of HCO B 13 Sept 72. It is included to show how a case can become physically well, yet be by-passed.)



CASE NOTES—Chronic illness, glib auditing history, had upper level auditing over very unflat Dn. Won't run Dn as "Nothing there". Tone 1.1. Professed Grade OT III but actually not complete on lowest grade Dianetics.

EXP DN PROGRAM by Dn Specialist. Steps added by LRH. 1.4.72.

0. "Clear all words on a WC C/S 1 & WC Corr List." LRH.
1. Verify or complete Method 1 WC. Add: Processing, Tech, Commands, Study.
2. Clear all Dn definitions. Clear all R3R words. Clear L3B.
- 3a. 2wc PT Environment. Note all LF, BD items. Make a list of these.
- b. Assess attitudes, emotions on best read from a.
- c. List from best read of b. and exhaust.
- d. Repeat b. and c. until item F/Ns.
- e. Handle all items per b. c. d. and reassess to F/Ning list.

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- 4a. Assess for best read. Auditors, auditing, etc. Add pictures, R3R.
- b. Assess emotions, attitudes, sensations, on best reading from a.
- c. List from b. best read and exhaust, R3R Triple.
- d. Repeat b. and c. till item F/Ns.
- e. Reassess a., do b. c. d. e. till whole list F/Ns.

NOTE: If nothing comes up on 3 and 4 assess LX3, 2, 1, in b. of

each.

- 5a. White Form. Get all emotional stress incidents.
- b. R3R Narr Triple all from a.
- c. Handle attitudes to treatment, if reads well, by listing treatments, SEAs, to F/Ning list.
- d. Handle attitudes to illness, if reads as in c.
6. LX3, 2,1 general.
7. New OCA.

On 8.4.72 LRH added "Hav before and after body of session."

PROGRAM STARTED 1.4.72. The pc clears lots of words.

AUDITOR'S COMMENT—Pc started a little gripey about clearing words, but became interested when he discovered there were some he didn't know!

LRH—— "Very Well Done. Out WC MI probably helped cause his illness. Ethics action was indicated here; WC MI declared prior to 21.9.71 but you found the list hot. Some WCer couldn't WC. We will let it go; this was excellent."

Next session auditor does clearing of R3R and starts Env buttons.

Next session auditor finishes Env buttons. On the Class VIII C/S 6 assessment list it F/Ns and pc says, "No nothing on that."

AUDITOR'S COMMENTS—He's up out of fear into covert hostility—very smug and joke-cracking in session. Slightly snide. Hands no longer sweaty.

LRH—— "Very well done."

AUDITOR'S C/S—

1. Fly a rud.
2. Per program note. LX3, LX2, LX1 "while being audited" (omit those items already run).
3. Continue Pgm.

Next session pc does not seem to be interested in anything. Auditor checks "No Interest in the first place?" Pc says, "No, none at all. Actually no real interest in running Exp Dns. I'm not saying it's not going to work, but so far it hasn't got anywhere near what I want handled." LF.

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AUDITOR'S COMMENTS—Pc's in-session mannerism is a slightly covert amusement, deprecating attitude. Very interestingly this "Nothing there" is a recurrent pattern from his very first auditing. Had a lot of trouble on his XII Rundowns with the same thing. Good TA on those attitudes we have run. I feel this needs an undercut but don't know what to suggest.

LRH—— "Well done. But hey! Do you see the hidden standard on page 6 of your W/S. Now this is not beyond Exp Dn. It's great. It tells you a *fixated interest*. (He's also plenty out ethics by W/S comments.)"

LRH C/S—

- "1. 2wc MARK ALL READS AND BDs. Get it to F/N. 'What do you really want handled?'
2. Get the best read out of all this. It will be an item or attitude or emotion or some such thing. Probably a condition. Express it the way he says it and be sure that's what it is & the way he says it.
3. Put it into R3R chain of when he had or did it. Then chain of another had or did it. Then chain of others had or did it. If it's a doingness like a habit, it's a did it. If it's a condition like an emotion or attitude it's a had it."

Next session the pc answers 2wc with "To get rid of these somatics" F. "Started as

headache" LFsBD. "My knees hurt" LF. Auditor runs "The somatics" R3R Triple.

AUDITOR'S C/S—

1. Fly a rud if no F/N.
- 1a. Assess "getting the somatic handled", "The somatics".
2. Assess SEA connected with best read.
3. List from big read, exhaust, etc.

LRH—— "Very very well done! This one needs hav before and after. You chose the wrong next somatic. He F/Ned on 'The pain'. List is 'The pain' 'Headache' 'Knees hurt'. If you run 'The somatics' again you'd double run."

LRH C/S -

- "1. Can squeeze. Find a hav. Get an F/N.
2. Check with him if it's handled. If not ask, 'What remains to be handled?'
3. If he gives you anything add it to list, get best read and check interest and best read R3R Triple.
4. If he says all handled, then go to W/F (5a. of Pgm). Just assess.
5. Havingness."

Admin Note: (LRH) "If you use a list in session leave it in folder. I had to find one to get what it was."

Next session pc says handled so auditor assesses W/F.

AUDITOR'S COMMENTS—Strong pc interest in havingness. RSes pages 2, 3. A1, A5 of White Form, yet! Also 4 of program isn't actually complete.

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LRH COMMENT—

"Very well done. Hey look at that! Note any Evil Purp he comes up with. Don't try to handle. But get it on edge of Pgm."

AUDITOR'S C/S—

1. Hav to F/N.
2. Each rud triple including overts. Hav to F/N between each set. (3 way ARC X, Hav, 3 way PTP, Hav, etc.)
3. Assess LX2 "While being audited" and handle (omit "Shame" and "Boredom").
- 3a. Hav.
4. Assess LX1 as in 3 and handle.
5. Hav to F/N.
6. Recheck interest in LX3 reads from 6.4.72 session. Handle.
7. Hav to F/N.
8. Check interest in "No feelings" R3R Triple.
9. Assess attitudes, emotions to illness, list and handle R3R Triple.
10. If nothing runnable out of the above, do a touch assist to 1st EP.

(Added to program as 5e.)

Next session pc has no interest in LX items. A touch assist was given. Pc goes to the examiner after and says, "The same thing happened today as yesterday. Headache intensified as day went on. It's pretty bad now. That's all." 2.6-2.2 falling and clean, Med GIs.

AUDITOR'S COMMENTS—H. Std. remains. R/S on "contemptuous" on LX2. R/S on "unemotional".

LRH COMMENT—

"Well he hasn't made his hidden standard yet. Headaches are rough to run. Usually (from 1968 Tech) they are taken apart by finding what PSEA is

connected with the headache and run that.

Headache is *after the fact* of being hit in the head. There's a lot on this in earlier Dn.

He gave it to you and you ran it narrative. Well okay. If you recall the earlier materials however, it says a headache is *after* the fact of an injury so is not the beginning of the incident. Headache and this chain you ran all had E/B! You should realize that.

So now we know (though no real fault) that this pc:

1. R/Ses = Psychosis equals succumb.
2. A headache is usually *after* the engram of injury. Leaves an E/B.
3. That *aches* are taken apart for PSEA.
4. That the case is slightly misprogrammed and needs INTENTIONS not attitudes as the attitudes are *after* the fact of an evil purpose in a psycho case.

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So we repair this failed chain headaches. We get the intentions in the head by an L&N list or we look up old Ev Purps run (were wrong or he wouldn't R/S still).

We reprogram for *intentions*, not attitudes for reason of the R/S = Intention very strong to die. So pc won't get well until Intentions handled.

**BEWARE OF A WRONG LIST.**

An R/S pc is trying to die (evil purpose) and the auditor is trying to make him live. This gives you an intention counter-intention = problem, so all such pcs are *problems* to audit.

See C/S Series 22, 28 Nov 70, 'Psychosis'.

So change the program to include Intentions as a type of attitude.

Headache is common with *out-Int.* We have to know before we go."

LRH C/S—

" 1. Assess

- A. This headache is because of a misrun went-in chain
- B. This headache is after some injury
- C. This headache comes from an intention

2. We handle the best read. Use

A. = Int Ext Corr List.

B. = List somatics of injury.

C. = List Intentions to a BD/F/N Item and R3R it."

Next session pc reads on "This headache comes from an intention". The Item from the L&N step is "An intention to exteriorize". This is run 3 flows R3R.

**AUDITOR'S COMMENT**—Your C/S done. Pc really *with* session, very interested, truly amazing change. Proposed program written per your instructions.

LRH COMMENT—

"Very well done. (Brings in my VGIs. That was a slippery one and very well executed.)

Mark the goal on the Pgm to D&L later."

**AUDITOR'S NEW PROGRAM**—

1. LRH C/S 13.4.72 (above).
2. Complete handling of H. Std. (Headache).

3a. Assess: Work, Post, Flag, The Sea Org, Marriage, The Ship.

b. List intentions connected with best read. R3R Triple to F/Ning list.

4a. List intentions connected with Auditors, Auditing, etc, buttons and

R3R Triple to F/Ning list.

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b. List "What intentions have you had in auditing". Exhaust R3R Triple.

5a. Assess: Win, Victory, Achievements, Gains, Conquest, Triumph, Success, Mastery.

b. List intentions "that enable him to ...." and exhaust by R3R Triple to F/Ning list.

6a. Assess SEA, Your Intentions, Another's Intentions, Others' Intentions

Towards Others, "Your intentions for ...." on the following:

Self, sex, family, children, groups, nations, mankind, the White Race, other races, plants, animals, birds, fish, growing things, energy, matter, possessions, planets, stars, galaxies, thetans, spirits, art, music, God, Infinity.

b. List intentions by best read and exhaust R3R Triple to F/Ning list.

7. Attitudes from Expanded Gita, clear, assess, and run R3R Triple.

8. 2wc "Gains from recent auditing".

9. OCA.

AUDITOR'S C/S—

1. Hav to F/N.

2. Assess: The head, the body, gains, expansion, going OT.

3. List from best read and exhaust R3R Triple.

4. When H. Std. gone, go to step 3 of Pgm of 13.4.72.

Next session auditor did the above C/S and also a "Danger Assessment" ordered on all crew as part of a Danger Condition Program. On this assessment on the question "Are you doing something harmful" the pc says, "Holding on to whatever is making me ill." AUDITOR'S COMMENT—TA Moving. Lively pc interest! Hot item on page 3 of Danger Condition Assessment.

LRH— "Very well done."

AUDITOR'S C/S—

1. Test out current Hav process of pc. If no longer increasing can squeeze, find a new one.

2. Hav to F/N.

\*3. List to BD F/N item "What intention would make you hold on to whatever is making you ill?" R3R Triple on item.

4. If not now handled, do L3Exd on the area M5 1-80 to F/Ning list.

5. If not now handled, 2wc "What he wasn't able to do because of it".

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\*FOOTNOTE: This is a borderline L&N question as it lists a significance (intention) with a significance. This is explained in HCO B 28 Mar 74, Exp Dn Series 21. (TEAM C/S.)

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List all LF, BD items and R3R Triple times he was made to ..... times he made another . . . . . etc.

6. If not now handled, 2wc "What it got him out of doing". Handle as in 5.

7. If not now handled, 2wc "What it would cost to lose it", R3R Triple "Times he lost a . . . . .", on all LF, BD items.

8. When H. Std. blown go to 3 of 13.4.72 Pgm and handle.

Next session on 3 of the C/S pc's item on the Intention list is "To not get too powerful

so I can't do too much". The pc on flow 2 R3R says, "It's blown" and when after F3 the auditor asks if the thing handled, pc cognites, "I just realized where the last of what is left is just me looking to see if it's gone!" Wide F/N VGIs. The auditor leaves C/S steps 3-7 and continues the new Pgm at step 3.

**AUDITOR'S COMMENT** — We blew the H. Std.!! When we got on to the "Win, conquest" area, pc started R/Sing, and got protesty. TA froze and then rose, so just destimmed it and got out. Looks very good otherwise. He *sure* didn't want to know about area.

**LRH COMMENT** —

"Very well done. It was too heavy. Be alert now for out lists or out Int. (Ext Int may be out.)"

Next session on step 6 of the Pgm while auditor is writing list the pc itsas about how it shouldn't be called Dianetics and how great it is, the TA drops to 1.6. The auditor 2wc "Inval". This raises the TA to 1.8 but instead of continuing the 2wc the auditor changes to Hav process. Later pc talking about Ext.

**LRH COMMENT** —

"Well done by Exams. You should have continued the 2wc until the TA came up. Don't chop a TA off low. This has not F/Ned on the 2wc.

The low TA goes low when the person feels overwhelmed. An Out TR can do it. Usually it comes right on back up. You should have carried it on until it did. Don't spook on a low TA and don't end one off, anymore than you would a higher TA. Like on 2wc the pc's TA goes to 3.2, so you don't stop. You F/N it.

C/S is OK."

**AUDITOR'S C/S** —

1. Clear and assess Int Corr List and handle.

2. Continue Pgm.

Next session nothing is handled on Int Corr List and auditor continues Pgm. Pc redtabs at Exams. Auditor takes pc back in and handles with an L1C that leads to an L4B.

11 — "Have you thought of items that you did not put on the list" reads and auditor takes it up. The item "To put force into the body" LFBDS and F/Ns.

**AUDITOR'S COMMENTS** — (17.4.72) "Daring auditor rides wall of death to bring home bacon" (N. Y. *Times* 18.4.72). Pc has a *new* H. Std.

**LRH COMMENT** —

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" *Very* well done, C/S very OK."

**AUDITOR'S C/S** —

1. Hav to F/N.

2. R3R Triple (if interest) the purpose "To put force into the body".

3. Assess: "You are prevented from exteriorizing because of:

a. A misrun went-in chain.

b. An intention.

c. An opposing intention.

d. Times it was dangerous to leave.

e. Times it was dangerous to go out."

4. Handle

a. With an Int Corr List.

b. By listing "What intention would prevent you from exteriorizing?" to

BD F/N item. R3R Triple.

\*c. By listing "What intention would oppose 'an intention to exteriorize,'" (previous item pc gave) to BD F/N item. R3R Triple.

d. e. R3R Triple.

Handle a. first if reading, then by biggest read.

5. If H. Std. not blown, assess Cl VIII C/S list of "Exteriorization, death, leaving, etc". Triple assess for SEAs and exhaust.

Next session "To put force into the body" is R3Red 3 flows to EP. On the assessment "Times it was dangerous to go out" gave a F, and was R3Red 3 flows narrative.

"An opposing intention" (gave a sF and was listed to an LFBD item). "An intention to interiorize." This was R3Red 3 flows to a big EP. A later 2wc finished the pc off.

**AUDITOR'S COMMENT**—A product!!!

**AUDITOR'S C/S**—

1. *Exams*: Attest Exp Dn illness handling.

("Is your chronic illness now gone?")

LRH COMMENT—"Hurrah! Very well done!"

MED REPORT—Off MO lines, totally cool and well.

PC'S SUCCESS STORY—

Is my chronic illness handled? It is indeed.

I've had it going more aeons than I can easily remember. And now it's gone. No more, finished. Handled. And it feels great.

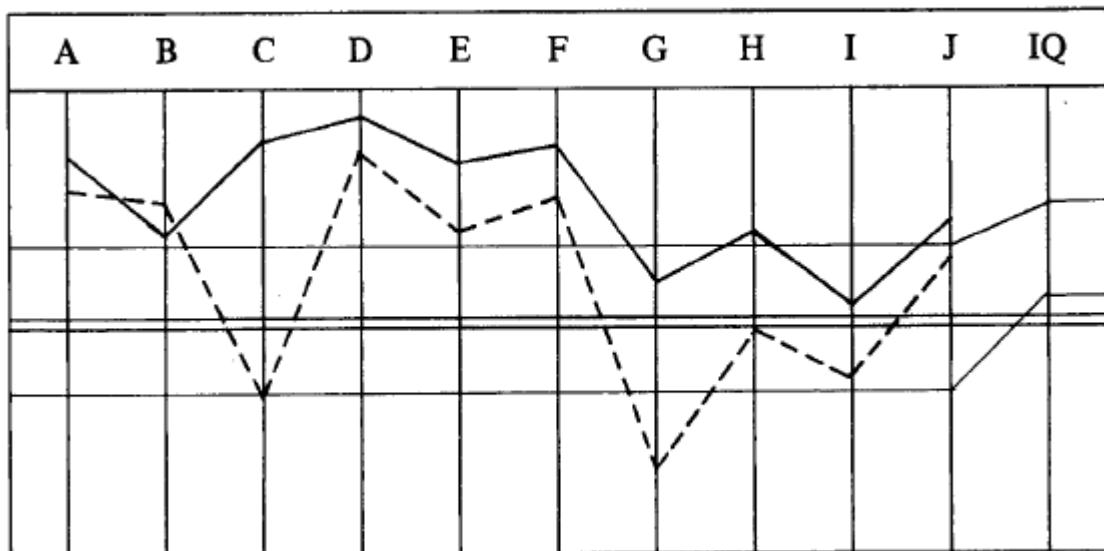
Thanks to my auditor for the application. Thanks to the Commodore for the Tech.

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\*FOOTNOTE: Listing an "Intention" opposing an "Intention" does violate HCO B Exp Dn Series 21. In another folder LRH says, "You are really only correctly Exp Dn if you run Intentions on TERMINALS." In this case the auditor got away with it but in the long run it tends to restim the bank and can spin a pc. (TEAM C/S.)

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GRAPH WHEN PC COMPLETE 18.4.72



Total No. of sessions 14. Total hours in chair 25 hrs 35 min.

LRH Final Note: Hidden behind all the effort to get the case moving was a completely untouched Drug Rundown. Since then the "No Interest" way of by-passing a case has been discovered, in part because of this case.

This pc was well when completed but not sane and he later blew. The "no interest" he kept putting out on items defeated a full recovery. A great many evil

purposes were left unrun, the listing questions (listing a significance from a significance) and failure to R3R drugs, by-passed the basic case. He got well, he didn't become sane. To repair and attain full recovery all "no interest" items would have to be run now.

CASE WAS SIMPLY INCOMPLETE.

LRH.

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Compiled by:  
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