

Master Choa Kok Sui Pranic Healing®

Documentation

Client: . . . m f date birth: _____ Pranic Healer: _____

Treatment - Nr: _____

Place: _____

Date: _____

Aura – Diagnose:

stronger / congested in area:

weak / depleted in area:

Energy quality: strong normal weak **Gen. Sweeping:** with lw

Chakras / Organs – Diagnoses:

Chakra/Organ	before Treatment:					/ afterwards:		
	BPH	APH	PPS	S with lw	E with lw	BPH	APH	PPS
Crown-chakra								
Forehead-chakra								
Ajna-chakra								
Temple minor-chakra ri/le	/	/					/	/
Jaw minor-chakra ri/le	/	/					/	/
Throat-chakra								
Throat minor-chakra								
Heart-chakra								
Solar plexus-chakra								
Spleen-chakra								
Navel-chakra								
Sex-chakra								
Perineum-chakra								
Backheadminor-chakra								
Heart-chakra back								
Solar plexus back								
Spleen chakra back								
Meng Mein Chakra								
Basic-chakra								

Anamnesis:

Medical Diagnoses:

Comments:

Notes:

Date:

Sign: