VISION

miccant

User Guide

www.miccant.com

About this Guide

People learn in different ways. Some like to see things working in order to learn. Some prefer to listen to explanations of how things work. Others want to read all about something before using it. And others just can't wait to get their hands on something to try it out!

Those that like to see and those that like to hear should start by watching and listening to the computer tutorials provided.

These can be accessed from the Miccant Control Centre, option Tutorials. These tutorials will guide you through the most important aspects of VISION.

Those that like to read should reference the Help information provided within Vision. This is available by clicking the Help menu. The Help files contain an explanation of every screen and feature Vision contains.

It will benefit every Vision user to read this manual. Of course those that learn 'hands-on' may never even get this far!

Please be aware that this is **not** a technical reference manual. It is a manual showing you how to use Vision in your homeopathic practice and study. It should be read as a book or guide. You do not necessarily need to be sitting in front of your computer to read this manual.

It is divided into sections that reflect how Vision can help in your homeopathic practice and development. You may dip into whichever section interests you at any time.

Enjoy this guide and enjoy Vision !

Introduction

By David Witko, Creator of Vision.

Time and time again I heard homeopaths telling me they simply couldn't use their current homeopathic software system. It was either too difficult to learn or too complex to operate. Often the homeopath felt it must somehow be their 'fault'. They saw their teachers whizzing around on their computer and clever things being demonstrated but they could never achieve the same fluency and results for themselves.

Vision has been created to help overcome this. It is my intention that you feel more confident in your practice and knowledge of homeopathy by using Vision. I want Vision to become a valuable friend in the coming months and years.

I feel many homeopaths give away their own power and knowing. We are conditioned to believe that if just follow the teachings of this homeopath or the latest thinking of that homeopath somehow we will become better. Everything seems to be solely in pursuit of finding the 'right remedy' through a bewildering variety of approaches.

Computer software is often portrayed as being the vehicle to attain homeopathic nirvana – that state in which we somehow know exactly the remedy a patient needs each and every time

through the application of our mental faculties and incisive approach to case analysis.

The reality for most homeopaths is very different. That rare and elusive case that yields to a fabulous new understanding of remedies is swamped by the overwhelming number of cases that do not.

Originally it took almost 3 years to give birth to Vision. Although I knew this was going to be a long path I didn't expect it to be quite so long!

In 2005 I then decided to improve the original Vision system even further by listening to the feedback our users gave us.

The result is Vision.

I choose to believe that you and I have the capability within ourselves to practice homeopathy well. Although new ideas are always welcome we can evaluate what we need for ourselves. I am quite prepared to say that for some homeopaths, computer software is not a good idea. In my heart, however, I know that good software has the potential to enhance the practice of most homeopaths.

It is my wish that Vision is the vehicle that allows you to become the best homeopath you can become. Consequently I have built into Vision great flexibility and expandability. You can supplement the system in many different ways – without being dependant on anyone else.

I fervently hope that you may choose to share your work with other Vision users and I have also tried to make this as easy as possible.

A project such as Vision is always the result of teamwork. It is appropriate that I acknowledge and give grateful thanks to the following people who helped me in this work.

First and foremost thanks to my family, especially Barbara and Adam for having to put up with me working day and night for many years. For allowing me the space and time to do this. Thanks to Mark, Jenny and Laura for helping in various ways. Also to Kiri and Krystal for being my constant companions and friends during the original Vision development and also the Vision development.

Secondly great thanks to Neil Turp our lead programmer. Neil remains an unfailing source of enthusiasm. He never said 'No' whenever I asked if we could do something new or change something for the 100th time. He is always helpful, available, and hard working. It has been a pleasure to work with him.

Next, due thanks should be given to our team of beta testers who have used Vision Vision for many months before its release. Thanks Rochelle, Colin, Heidi, Carolyn, Yolande, Neil, Tali L and Tali I, Frank, Patrick, Ian, Wendy, Pravin, Randeep, Loretta, Kim, Torleiv, Sue and Ajit.

Also without our team of representatives all over the world there would be no VISION. Special thanks to you all. And remember - everything starts with you!

Thanks to all those homeopaths, teachers and friends who have helped on my journey. No names are needed. Either you know who you are or you're not on the list!

I would also like to remember my friend and homeopath Victoria Hill who recently passed over after a long illness. I miss our chats.

Thanks to those who inspire me, seen and unseen.

And a final thanks to you for choosing Vision!

David Witko FSHom (Hon) UK

Start-up photographs

Each time Vision starts up it displays a different photograph. These photographs are all beautiful images of some part of the universe we live in.

You can add to or delete from the list of photographs Vision uses. Simply copying new images into the \vision\splash folder makes them available to VISION. Any images you don't like can be deleted from this folder.

All images must be in JPG format and must be of an appropriate size to fit on your screen. (Vision does not re-size them)

Vision randomly chooses a different image to display when you start up. You cannot choose which image is displayed or force any kind of order. Vision makes the choice randomly. Actually there is one way you can ensure the same image is displayed each time Vision starts. How? By deleting everything except the one image you want displayed! But that would be boring wouldn't it?

We live in a world of color, texture and beauty. Surrounding yourself with the beauty of the world we live in can only be good.

Starting Up

All of the options towards the right side of the screen start the various aspects of Vision.

Additionally the Miccant Support has 5 further choices which will be displayed if you hold your mouse over it.

Finally please note the version number that is displayed in the bottom right corner. This informs you which version of Vision Vision you are actually running and you will always need to provide this to Miccant staff when contacting us.

Preparing and Personalising VISION

Learning about the Vision screen

Vision is a beautifully integrated system. Almost everything you need to access can be viewed on one main screen. Working with everything in one place has the big advantage that you have less to learn!

Here is the Vision screen with the different areas indicated:
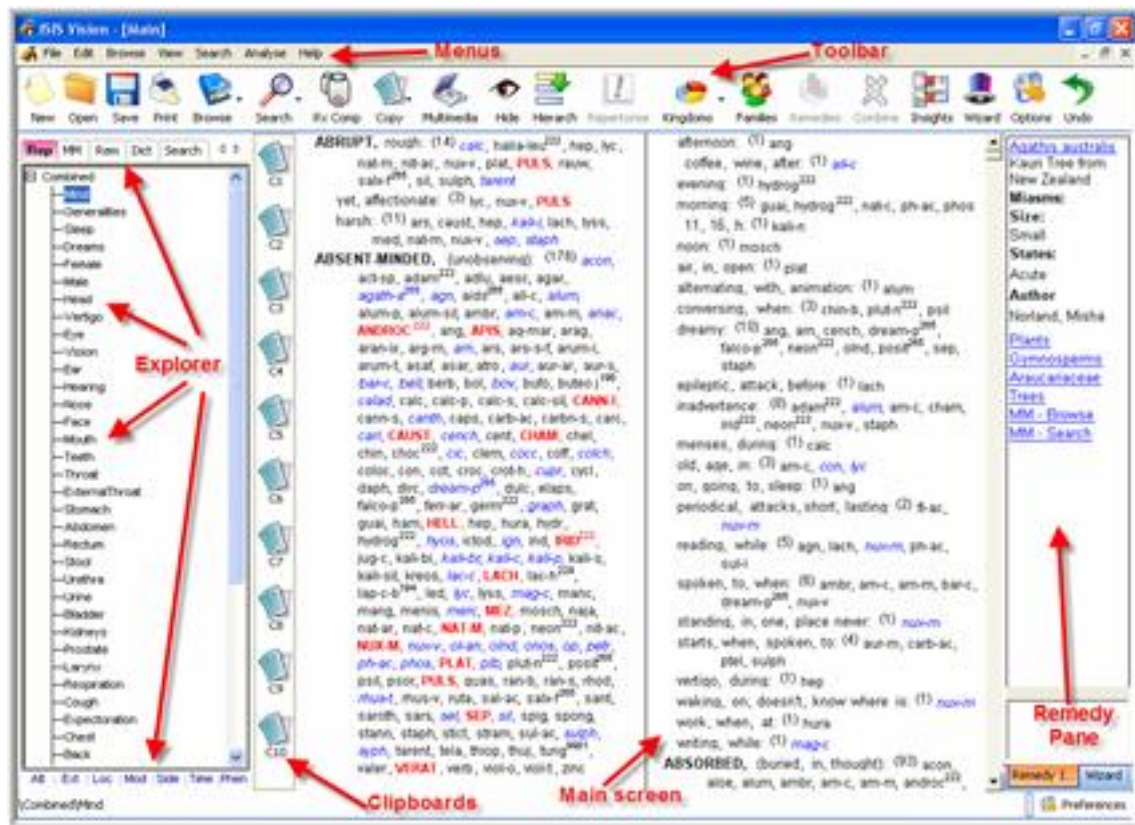
This is a screen shot with Vision running at 1024 x 768 resolution. You may prefer to run a higher screen resolution so that all screen areas are visible.

Whichever resolution you wish to work with one of the most important things is to make sure you can see everything as comfortably as possible. Dragging the grey divider bars with the mouse can change the width of most parts of the screen.

You can make the remedy pane larger or smaller by dragging the bar to its left. You can re-position the clipboard list in the same way. Make sure that you can always view the explorer tree, clipboard list and remedy pane at all times.

Here is a brief explanation of the purpose of each part of the Vision screen:

Menus

Clicking the mouse on any menu choice displays a drop down list of menu choices. Almost every function in Vision is available within the menus provided. Certain functions are *only* available by using the drop down menus.

Although many computer users like using menus they are not as easy and quick to use as other options, which are explained following.

Toolbar of icons

This row of icons performs the most common functions within Vision and provides quick access no matter what you are doing.
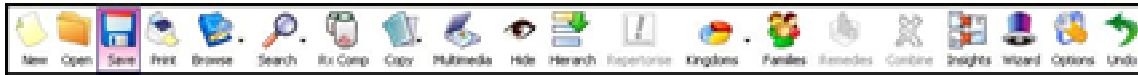
Clicking the mouse on an icon performs the associated action.

Explorer

This is where the library of books within Vision is accessed. The library is divided into Repertories, Materia Medicas, Remedies and the Dictionary. A 'tab' along the top of the explorer tree provides access to each category of books. On entry to Vision the Reps tab is automatically accessed for you.
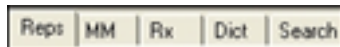
Clicking any tab opens up that appropriate section for you. A list of books will be displayed. Opening any books displays a list of available chapters (remedies) that you can read.
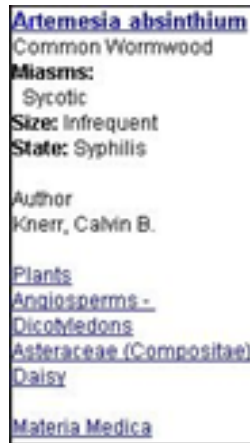

Clicking on a chapter causes its text to be displayed on the main screen.

Remedy pane

This is used to display quick-access information about remedies. Clicking a remedy abbreviation while viewing the repertory requests information about that remedy to be displayed in this pane.

If you clicked the mouse onto the remedy Absin while viewing the rubric Alcoholism in the repertory this is displayed:

Artemesia absinthium
Common Wormwood
Miasms:
Sycotic
Size: Infrequent
State: Syphilis

Author
Knerr, Calvin B.

Plants
Angiosperms -
DicotMedons
Asteraceae (Compositae)
Daisy

Materia Medica

Certain items of information displayed in the remedy pane are 'hyperlinks'. This means you can click on them to request more information. They are displayed in blue text and are underlined.

Of special importance are the remedy full name hyperlink and the materia medicas hyperlink. These take you directly into the library of information for the selected remedy without you having to click any of the tabs in the explorer tree and look for the information.

Main screen

The main screen area is where all book data is displayed, whether repertory rubrics, materia medica text, remedy information and dictionary definitions

If there is more information than can be displayed use the mouse to scroll down. If you have a scrolling wheel on your mouse this will prove especially helpful. One click of the mouse at the top or bottom of the screen scrolling bar will move you one line of text up or down as appropriate. Clicking in the screen scrolling bar itself while move you down approximately half a screen's worth of information.

Alternatively you may find using the keyboard easier. The keys marked Page Down and Page Up may be particularly helpful

Changing system options

Vision offers great flexibility in the way it displays information on the screen. Colors and fonts can be changed throughout.
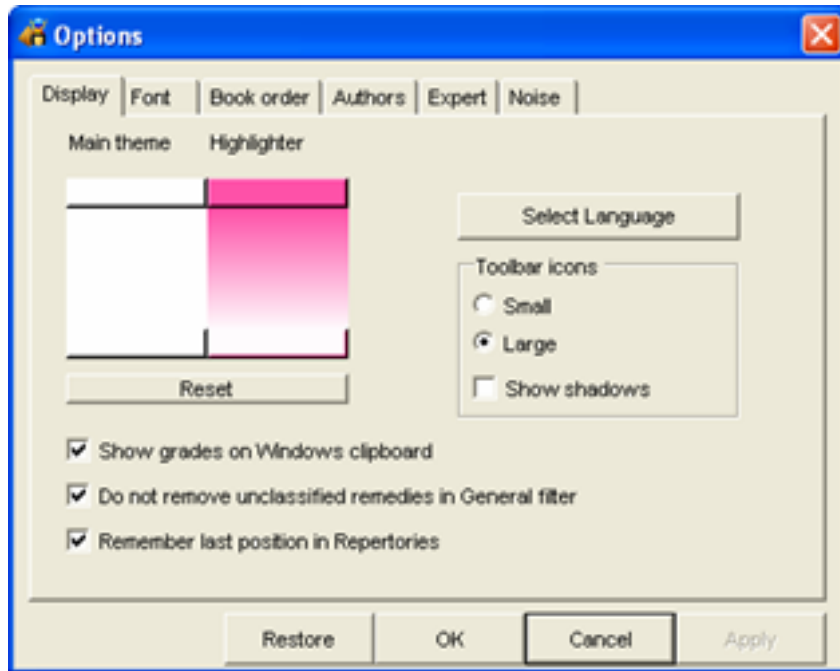
There are 2 ways to change the appearance of VISION:

1. Changing system-wide Options
2. Changing the appearance of one aspect e.g. the Repertory screen

Gaining access to the part of Vision where you can make system-wide changes is achieved by clicking this icon on the toolbar:

Options

and you will see the Options dialog

There are a series of tabs across the top of this screen that provide access to all the various parts of Vision you can customize. Consult the online help section of Vision for details of the use and meaning of each.

Here are some of the things you can change:

- Order of repertories in the explorer tree
- Create your own view of the repertory by excluding additions from certain authors
- Order of materia medicas in your library
- Any materia medicas to exclude from searching
- Change the values used in the Vision Expert system repertorization analysis

Changing display preferences

On every Vision screen there is a Preferences button you cab use to access and change the way that particular screen displays. The button is always displayed on the bottom right corner of the screen you are looking at and looks like this:

Getting familiar with the repertories

Unless you only plan to use Vision to reference materia medicas and remedy information you will need to use the repertory. Knowing repertory will serve you well throughout your homeopathic practice. It is important to understand the strengths and weaknesses of each repertory used in VISION. It is vital you understand the layout of the repertory you choose to work with every day.

Vision contains the classic repertories of Boericke, Phatak, Boenninghausen and Clarke. These need no explanation. You will already be familiar with these.

The contemporary repertories deserve special consideration and explanation. They are:

- Combined Repertory by Miccant Ltd
- Complete Repertory by Roger van Zandvoort
- Homeopathic Clinical Repertory by Robin Murphy

All of these repertories were originally derived from Kent's Repertory. In this manual we will compare and contrast the electronic software editions of these works, which may not be exactly the same as any printed book editions.

Combined Repertory

This is Miccant's own repertory. It started based on Kent's Repertory, Final General Edition in the late 1980's and was supplemented with data taken from the Synthetic Repertory of Barthel and Kluncker which added new information into the Mind, Generals, Sleep, Dreams, Female and Male chapters.

In the early 1990's the recommended additions of George Vithoulkas were added as were the published additions for the remedy Carcinosin.

Since that time only newly proven remedies have been added into this repertory. A conscious decision was taken not to expand the rubrics or remedies in existing rubrics greatly.

As other repertories grew and grew it was decided to keep the Combined Repertory like Kent, in a similar style to Kent, but with newly proven remedy additions.

There is one minor format difference between the Combined and Kent, namely that the Generalities chapter was moved to immediately follow the Mind chapter (Kent lists Generalities as the last chapter). This is a minor consideration in software form but it was considered beneficial to make it easier to reference the Generalities in this way.

Here is an example of the Combined Repertory taken at the very start of the Mind chapter:

ABRUPT, rough: (14) *calc*, halla-leu[222], hep, lyc, nat-m, nit-ac, nux-v, plat, **PULS**, rauw, sabe-f[266], sil, sulph, *tarent*

yet, affectionate: (3) lyc, nux-v, **PULS**

harsh: (11) ars, caust, hep, *kali-i*, lach, lyss, med, nat-m, nux-v, *sep*, *staph*

ABSENT-MINDED, (unobserving): (176) acon, act-sp, adam[222], adlu, aesc, agar, *agath-a*[266], agn, aids[266], all-c, *alum*, alum-p, alum-sil, ambr, *am-c*, am-m, *anac*, **ANDROC**[222], ang, **APIS**, aq-mar, arag, aran-ix, arg-m, *arn*, ars, ars-s-f, arum-i, arum-t, asaf, asar, atro, *aur*, aur-ar, aur-s, *bar-c*, *bell* berb, bol, *bov*, bufo, buteo j[196], *caled*, calc, calc-p, calc-s, calc-sil, **CANN-I**, cann-s, *canth*, caps, carb-ac, carbn-s, carc, *carl*, **CAUST**, *cench*, cent, **CHAM**, chel, chin, choc[222], *cic*, clem, *cocc*, coff, *colch*, coloc, con, cot, croc, crot-h, *cupr*, cycl, daph, dirc, *dream-p*[266], dulc, elaps, falco-p[266], ferr-ar, germ[222], *graph*, grat, guai, ham, **HELL**, hep, hura, hydr, hydrog[222], *hyos*, ictod, *ign*, ind, **IRID**[222], jug-c, kali-bi, *kali-br*, *kali-c*, *kali-p*, kali-s,

afternoon: (1) ang

coffee, wine, after: (1) *all-c*

evening: (1) hydrog[222]

morning: (5) guai, hydrog[222], nat-c, ph-ac, phos

11, 16, h: (1) kali-n

noon: (1) mosch

air, in, open: (1) plat

alternating, with, animation: (1) alum

conversing, when: (3) chin-b, plut-n[222], psil

dreamy: (10) ang, arn, cench, dream-p[266], falco-p[266], neon[222], olnd, posit[266], sep, staph

epileptic, attack, before: (1) lach

inadvertence: (8) adam[222], *alum*, am-c, cham, irid[222], neon[222], nux-v, staph

menses, during: (1) calc

old, age, in: (3) am-c, *con*, *lyc*

on, going, to, sleep: (1) ang

periodical, attacks, short, lasting: (2) fl-ac, *nux-m*

reading, while: (5) agn, lach, *nux-m*, ph-ac, sul-i

Note how the contemporary remedies additions have author numbers after the remedy abbreviation.

The Combined Repertory only exists in software, not in published book form.

So if you are looking for a Kentian format repertory that supplements Kent data with contemporary remedies the Combined is just what you are looking for!

Homeopathic Clinical Repertory

The 3rd edition of Robin Murphy's popular repertory was published in 2006 and this is the edition currently within Vision Vision.

Robin made some drastic changes in the layout of his repertory. Essentially he decided to

- Create additional, smaller chapters than in Kent
- Arrange rubrics strictly alphabetically (even Time modalities are alphabetized) ▪ Added brand new chapters

As a consequence there are 74 chapters in Murphy compared to 38 in Kent. Many, especially new homeopaths, appreciate the convenience of this. It's easy to go straight to the Shoulder chapter in Murphy than to wade through Kent's Extremities chapter looking for the same thing.

Being able to reference chapters on such things as Diseases, Constitutions, Emergencies and the like is also appealing.

There are other more controversial aspects to this repertory that you need to be aware of:

- Many additions to rubric remedies have been made. As this repertory does not show any remedy authors the homeopath has no idea of the source or origin of any additions.

- Also the grades of remedies have been changed in this repertory. What might have been a grade 1 in Kent maybe a grade 3, bold type in Murphy. According to Robin such changes have been made where homeopaths, including himself, have observed that a remedy is seen repeatedly in clinical practice for the rubric condition and merits a higher grade because of this.

Here is an example of the layout and content of Murphy's Mind chapter:

ABANDON, wild behavior, (5) alco, bell, hyos, med, stram

ABANDONED, forsaken feelings,, (105) abies-c, agath-a, aids, allox, alum, anac, androc, ange-s, anh, arg-n, arist-cl, ars, asar, AUR, aur-m-n, aur-s, bamb-a, bar-c, calc, calc-s, camph, cann-i, cann-s, carb-an, carb-v, carc, cench, chin, chin-b, choc, coff, coli, conch, cortico, crot-c, crot-h, cycl, dros, elaps, gels, gink, ham, hell, helon, hura, hydrog, hyosin, ign, ip, kali-br, kali-c, kali-p, keroso, kola, lac-d, lac-del, lach, LAC-H, lac-leo, lact, lam, laur, lil-t, lith-c, lyss, mag-c, mag-m, m-aust, MENY, merc, moni, naja, nat-c, NAT-M, neon, op, pall, phos, pip-m, pip-n, plat, plb, podo, PSOR, PULS, rhus-t, sabin, sac-alb, samb, sanic, sars, sec, sep, sil, spig, stram, succ-ac, sulph, symph, tab, thuj, valer, verat, vip, wye

ailments, from being,: (17) ARS, aur, calc, carc, ign, lac-h, lyc, NAT-M, phos, psor, PULS, rhus-t, sac-alb, sep, sil, sulph, thuj

camph, lac-h, lil-t, lyc, mag-c, moni, nat-m, plat, PULS, sep, sil, sulph, thuj

morning: (4) carb-an, carb-v, carc, lach

pregnancy, during: (2) puls, sep

waking, on: (4) arg-n, lach, lac-h, puls

wife, by: (4) calc, lach, puls, thuj

ABANDONS, forsakes, children, their own,: (4) lyc, med, sec, sep

relations: (2) lyc, sec

ABILITY, increased mental, (2) anh, coff

ABRUPT, behavior,, (32) anac, ars, aur-m, CALC, calc-p, carb-v, caust, cham, germ, graph, hecla, HEP, kali-c, kali-i, lach, lac-leo, luna, lyc, lyss, med, nat-m, nit-ac, nux-v, op, PLAT, PULS, rauw, sep, sil, staph, SULPH, tarent

affectionate, yet rough: (5) aur-m, lyc, nux-v, podo, PULS

harsh: (21) anac, ars, carb-v, CAUST, graph, hep, kali-i, kola, lach, lyss, m-aust, med, nat-m, nit-ac, NUX-V, pitu-a, PLAT, sep, staph, sulph, tarent

Compared to Kent and the Combined you will observe organisational differences. Abandoned rubrics appear here. In Kent, Combined and Complete they remain under Forsaken feelings.

There are no author numbers next to any remedies. This is because Murphy does not denote the sources of his additions or changes to the repertory.

Essentially if you plan on using Murphy's Repertory you must be prepared to accept that the changes Robin has made are trustworthy and reliable. Some homeopaths are unwilling to do this – but it must be your decision. We humbly suggest that if you use Vision to investigate and research the repertories yourself the opinion you form will be far more useful than blindly listening to what others say.

Complete Repertory
It is a little more difficult comparing and contrasting the Complete with the other repertories. This is because the electronic software version exists in several published editions, from v 4.5 through to 2018.

The Complete offers some attractive features:

- Many remedy additions taken from different sources have been made
- Most remedies have an author number associated with them
- It is reasonably up to date with modern remedies
- Many errors contained in Kent have been corrected and re-worked
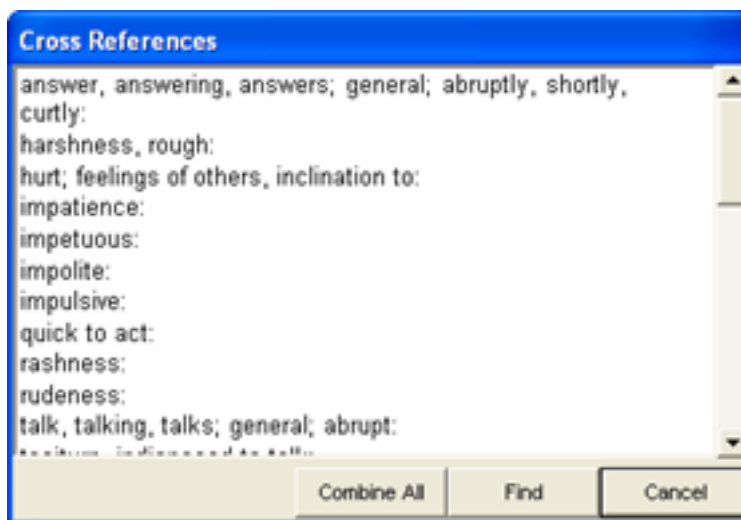- It contains rubric cross references

Consider the following example rubric:

Notice immediately how many more remedy authors are identified. See also that there is a special symbol after the rubric:

This symbol denotes that there are cross references to this rubric. Clicking the mouse on the symbol shows you all the available cross references

Whenever you see a cross reference like this and click on it with the mouse Vision will immediately jump directly to that position in the repertory. A great time-saver! This is a very significant feature and Vision makes full use of it!

Note that there are 36 remedies in the rubric Abrupt.

When additions to the repertory have been made an author number is displayed next to the remedy:

The author who made the recommendation for addition is clearly shown.
Looking a little more closely you can see that the remedy amet was added
by author 312.

To see further information about this remedy including the name of the author
you simply have to click the mouse on the remedy abbreviation and Vision

displays all available information in the remedy pane:

As with Murphy's repertory you have to trust that Roger van Zandvoort, the author of the Complete Repertory has verified that the addition is accurate and you have to decide whether you would accept such additions in your work.

In our opinion the Complete is a highly researched and reliable repertory.

Other repertory considerations

### Creating your own view of the repertory

Although seeing that authors of remedy additions are clearly shown in your repertory brings a certain re-assurance, in practice, they are of little interest.

Vision therefore allows you to remove them from the display of the repertory altogether. Why? Removing them offers a cleaner, easier to read display that is a little more relaxing on the eyes. It is very easy to switch this off and on and see for yourself the difference this makes. It also allows Vision to squeeze a few more rubrics on the screen due to the display saving made.

Use the Preferences button to suppress the display of ALL author numbers form the screen

If you are a repertory expert you may be unhappy with some of the additions made to the repertories. Vision allows you to suppress all additions made by certain authors.

This allows you the flexibility to decide *for yourself* which authors you accept and which you do not. This is available by using the Options setting in the toolabar.
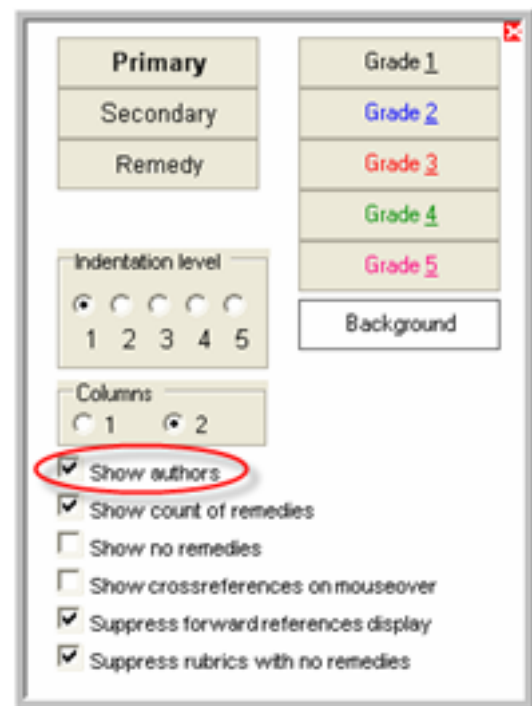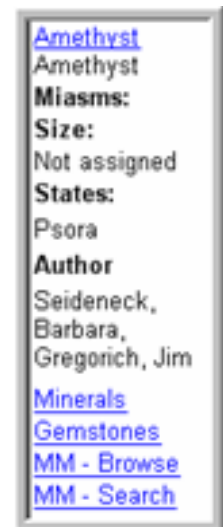
The First Visit

So….. You have watched the tutorials. You have tried using VISION. You have even read the on-screen Help information. You are ready!

Your first patient will arrive shortly. It is time to use Vision for real, with a real patient needing a real remedy.

So are you really ready? Well, not quite! There are still some things you need to decide before the patient even arrives.

When to use VISION?

First and foremost ask yourself. Am I going to use Vision while the patient is with me? Or am I going to use Vision only after the patient has left? The decision is yours!

Some homeopaths use computer software for each and every case they see, repertorising and reading about remedies while the patient is sat in front of them.

Others think that using a computer in front of the patient is distracting and inhibits their dialogue. Some attest that patients are impressed by the use of modern technology while an equal number attest that patients would be horrified if they used a computer.

This is your decision and only you can decide.

Recording patient details in VISION

This is an important decision. Vision enables you to record personal details and notes about your patients. Are you going to record these within VISION?

Please bear in mind that each country has different laws and regulations concerning the privacy and security of such information. Some countries have different legislation concerning handwritten and computer recorded notes.

Please do not start recording such information before you check the situation in your locality.

If you decide not to enter and retain patient records within Vision then you can still save details of repertorisations onto your computer hard disk – so long as these cannot be identified to any specific patient. You may skip the next 2 sections of this guide as they explain how to record patient records and notes.

Skip to **Taking the case**.

Inputting new patient details

From the Miccant Control Centre start the appropriate section of Vision by clicking on Patient Records and this is what you will see:

As you haven't started recording any patient details yet the list of names down the left side will be empty.

Click the **Create New Patient** button to input details about your new patient

Vision automatically generates a patient id number for the new patient. All you need do is type in any values you wish to record for this patient. The only item of information you **must** type in is the patient's **Last Name**. Click the OK button to save a new patient in your database.

Vision will then re-display the list of patient records including the new patient. By default Vision will order the patient records alphabetically using their Last Name.

Tip!
If you want to see your patient records in chronological sequence click on the top of the column which says **By ID**,

and your patient records will be re-displayed in ascending ID order.

To see personal details about a patient you have already input click the mouse on their name like this:

and you can view their details on the right side of the screen. If you made a typing mistake while typing in the patient details all you need to do is click your mouse on the item of information to change on the right hand side of the screen and overtype.

Having created a new patient record you are ready to move on!

Inputting information about a new consultation

Patients can come and see you many times. Each time they do it is best to create a new consultation record.

To set up a new consultation record make sure you have clicked your mouse on the desired patient on the left side of the screen and then click the **New Consultation** button.

Vision will display a consultation card for you to fill in, like this:

Check that the correct Patient Name is displayed at the top of the consultation record!

Now you can move across the record typing and selecting information as appropriate.

Vision defaults the Date and Time to today's date and time to get you started. Choose the Setting of the consultation by clicking on the little black triangle. Vision defaults the value to the most commonly used setting.

The rest of the consultation record cannot be completed until after you have taken and analyzed the case.

If you do not intend to analyze the case while the patient is with you then save the preliminary details of this consultation now. Click the Save Visit button.

If you have typed this information in while the patient is sitting in front of you – then it is time to push the screen to one side and focus on the patient.

Taking the case

This is up to you. Vision can't help you with this! Just take the case exactly as you have been taught.

Preparing to analyze the case

If you are not recording patients and consultations within Vision simply start Vision from the Control Centre.

If you have previously created a Consultation record for this patient within Vision then you need to get this record back on your screen. From the main Patient Records screen highlight the desired patient by clicking your mouse on their name.

The preliminary consultation record will be visible in the bottom left corner of the screen. Click your mouse on the consultation record and then click the View/Edit Consultation button.

> *Tip!*
> Double click a consultation to open it up

Vision will open the consultation record ready for you to use. Now click the Repertorise button. This will start up the main Vision system ready for you to use.

The current patient name will be displayed at the top of the Vision screen like this:

Choosing symptoms to use for analysis

Once the case has been taken you must decide how to approach the case. Use your training and experience to select what you wish to analyse. There are many ways to analyse a case.

In our experience it is always best to start with a simple repertorisation to find a few remedies that seem to cover the case well.

For the purposes of this guide we will use a sample case to illustrate how to use VISION. Here is the description:

A young girl presents with a chronic sore throat. She complains vociferously of a headache. She tells you it hurts 'here' with her thumbs pressed into both her temples. The pain can best be described as 'shooting'. The shooting pains never extend to any specific area. Her throat hurts when swallowing anything and the pain is burning. She continuously rubs her eyes and when you inquire about this she says the lids itch 'all the time'. You observe that her lips are dry and cracked. The girl says she has lost her normal appetite, as everything tastes 'too strong'. Her mother informs you that these problems all started after the young girl had fallen out with her first boyfriend and she had been very upset by this. Since then the girl has demonstrated temper tantrums and even taken to ripping her clothes in fits of temper.

The first thing you need to do is to determine the rubrics in the case record. In this brief sample case it is fairly easy to determine the rubrics. Normally it will be harder and take you much longer!

> *Tip!*
> A word of advice: some teach that you should be creative when considering which rubrics to use. This could be the use of dreams, delusions, polarities and so on. However for the first repertorisation of each and every case we suggest you start with the tried and trusted technique of selecting clear, understandable rubrics in the case. Work with these first of all. There is certainly a time and place for creativity – but   keep it simple to start with!
>
> The best advice I was ever given was this – 'only choose rubrics that other homeopaths would see and agree with 100% – never select one that is your interpretation of what is in the case'

Here are the case rubrics we can use:

1. Ailments started after a love disappointment
2. Headache temples shooting
3. Throat pain agg swallowing
4. Throat pain burning
5. Cracked lips
6. Itching eyelids
7. Sense of taste heightened
8. Rips clothing

These rubrics are all in the case and every homeopath could agree on their selection.

Now you can move on to analyze this case.

Finding symptoms and building the case

Before using the repertory make sure your preferred book is open and ready for use. Whenever you start Vision it always positions you to the book and chapter you were looking at when you *last* used the system.
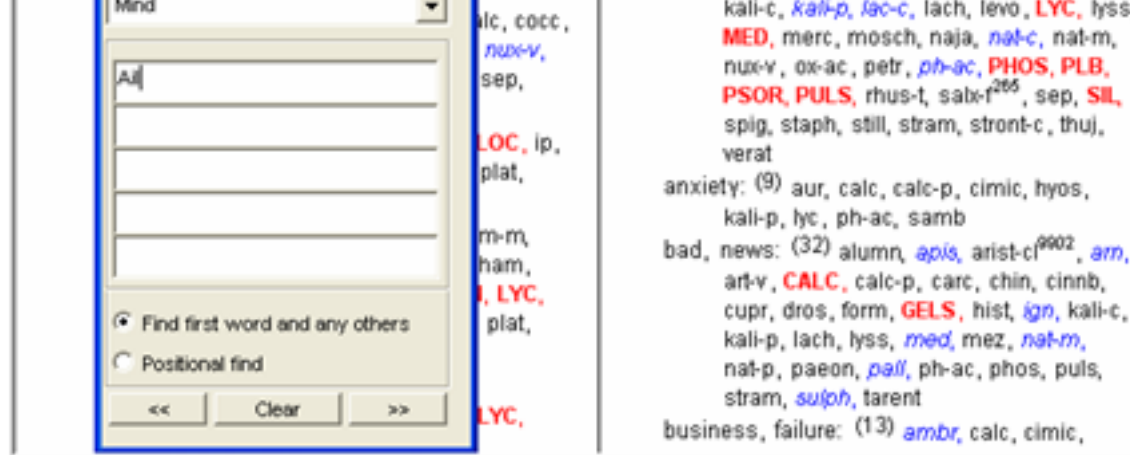
We will use the Combined Repertory extensively in our sample case as everyone receives a copy of this repertory with the Vision system. If you plan on working this case with your Vision system make sure this book is open and ready for use now.

You need to find the first rubric **Ailments started a after love disappointment.** This is in the Mind chapter of the repertory so make sure you are looking at this chapter.

Searching a repertory chapter

The easiest way to find rubrics in Vision is to simply type a few letters on the keyboard. A good start would be to type the letters **AI** (for Ailments) on the keyboard.
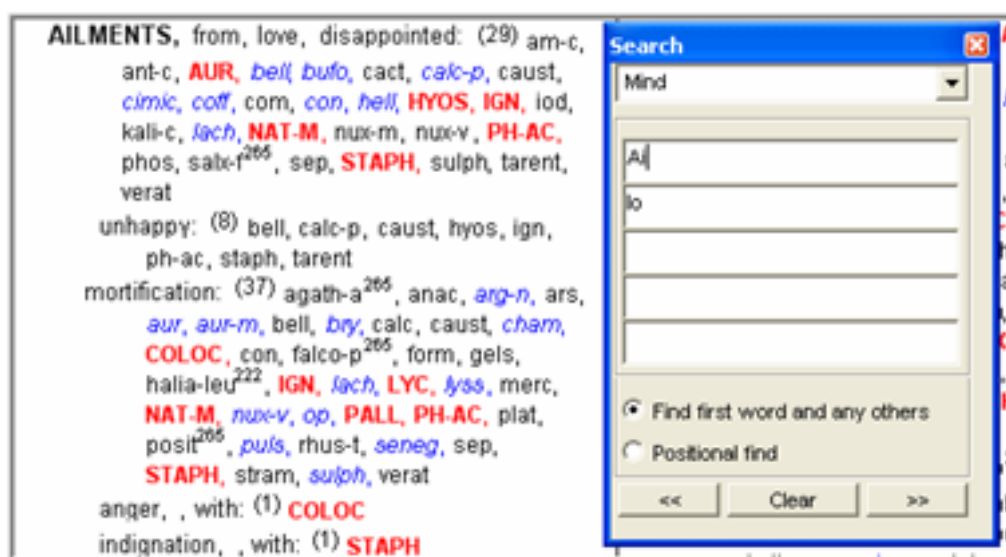
As the letters are typed, Vision jumps to the very first rubric that contains the letters typed into the first word position. Like so:

kali-c, *kali-p*, *lac-c*, lach, levo, **LYC**, lyss,
MED, merc, mosch, naja, *nat-c*, nat-m,
nux-v, ox-ac, petr, *ph-ac*, **PHOS, PLB,**
PSOR, PULS, rhus-t, salx-f[266], sep, **SIL,**
spig, staph, still, stram, stront-c, thuj,
verat

anxiety: (9) aur, calc, calc-p, cimic, hyos,
kali-p, lyc, ph-ac, samb

bad, news: (32) alumn, *apis*, arist-cl[9902], *arn*,
art-v, **CALC**, calc-p, carc, chin, cinnb,
cupr, dros, form, **GELS**, hist, *ign*, kali-c,
kali-p, lach, lyss, *med*, mez, *nat-m*,
nat-p, paeon, *pall*, ph-ac, phos, puls,
stram, *sulph*, tarent

business, failure: (13) *ambr*, calc, cimic,

Vision jumps to the first rubric in the Mind chapter of the repertory that contains the letters
Al. This is the rubric AILMENTS (and its sub-rubrics).

As the key expression of the rubric we are looking for is connected to a **love**
disappointment it is best to use the word **love** to further refine the search.

Vision now needs to told to use a second word. This done either by clicking the mouse in the
second line of the search screen or by pressing the TAB key. Typing in just **LO** will cause
Vision to immediately position to:

AILMENTS, from, love, disappointed: (29) am-c,
ant-c, **AUR**, *bell bufo*, cact, *calc-p*, caust,
cimic, *coff*, com, *con*, *hell*, **HYOS, IGN**, iod,
kali-c, *lach*, **NAT-M**, nux-m, nux-v, **PH-AC**,
phos, salx-f[266], sep, **STAPH**, sulph, tarent,
verat

unhappy: (8) bell, calc-p, caust, hyos, ign,
ph-ac, staph, tarent

mortification: (37) agath-a[266], anac, *arg-n*, ars,
aur, aur-m, bell, *bry*, calc, caust, *cham*,
COLOC, con, falco-p[266], form, gels,
halia-leu[222], **IGN**, *lach*, **LYC**, *lyss*, merc,
NAT-M, *nux-v*, *op*, **PALL, PH-AC**, plat,
posit[266], *puls*, rhus-t, *seneg*, sep,
STAPH, stram, *sulph*, verat

anger, , with: (1) **COLOC**

indignation, , with: (1) **STAPH**

Vision refines the search and finds exactly the rubric being looked for!

To recap:

The first letters you type in **must** be contained in the very first word of a rubric. Letters or
words you type in the second through fifth positions can appear anywhere in the rest of the
rubric text.

In the example above the word LOVE is actually the third word in the rubric and Vision found it.

> *Tip!*
>
> Always type in as few letters as possible.
>
> Don't get hung up on typing the exact rubric. Simply make sure the first letters
> you type in identifies the main rubric heading.

Typing in words like OF or FROM are a waste of your time and energy.

Copying to a Vision clipboard

When you have found a rubric to use you need to tell VISION. You do this by copying the rubric onto one of the ten clipboards Vision provides. There are a variety of ways you can do this. We suggest that dragging the rubric onto a clipboard and then releasing the mouse is the quickest and easiest method.

If you correctly drag then a special symbol will be displayed and the receiving clipboard will light up as you position the mouse like this:

When you are correctly positioned on a clipboard the clipboard background will change colour and be highlighted. This advises you to release the mouse. When you do the rubric will be copied to the clipboard and a little number 1 will be displayed in the clipboard icon as follows:

A bright red tick is also displayed next to the rubric in the repertory confirming it has been included in the case. Vision provides 10 clipboards for you to use. Rubrics can be copied to any clipboard. Some homeopaths like to repertorise the mind rubrics in a case separately to the physical rubrics in a case. Vision supports this by letting you copy the mind rubrics to one clipboard and the physicals to another by simply dragging and dropping between the clipboards.

Tip!

Clipboard number 1 is the **master** clipboard.

Whenever you copy a rubric to clipboards 2 to 10 Vision also copies the rubric to clipboard 1 automatically.

Changing repertory chapters

Moving on to the next rubric in the case. This is the shooting pain in the girl's temples. As you know this will not be found in the Mind chapter of the repertory. You need to change chapters!

But which chapter? This is where you really need a sound grasp of the layout of the repertory you will work with most often. In this sample case we are working with the Combined Repertory so you need to switch chapters to Head. This is simply done by clicking on the name Head in the left explorer tree of chapter names.

Now ask yourself : Is this rubric to be found under Temples or Pain or Shooting? Remind yourself that you need to learn the layout of the repertory you will use most often.

In Kent this rubric would be found under Pain, Shooting, Temples. The repertory most faithful to the style of Kent in Vision is the Combined Repertory.

Simply typing **PA** for Pain and then **SHOO** will make Vision instantly jump to the first rubric in this chapter that starts with these letters. The first SHOOTING rubric in the Head chapter will be displayed, namely, Pain, Shooting, afternoon.

Moving to the third search word position (by clicking the mouse there or pressing the Tab key) and typing in **TEM**. (remember : type as few letters as possible) causes this:
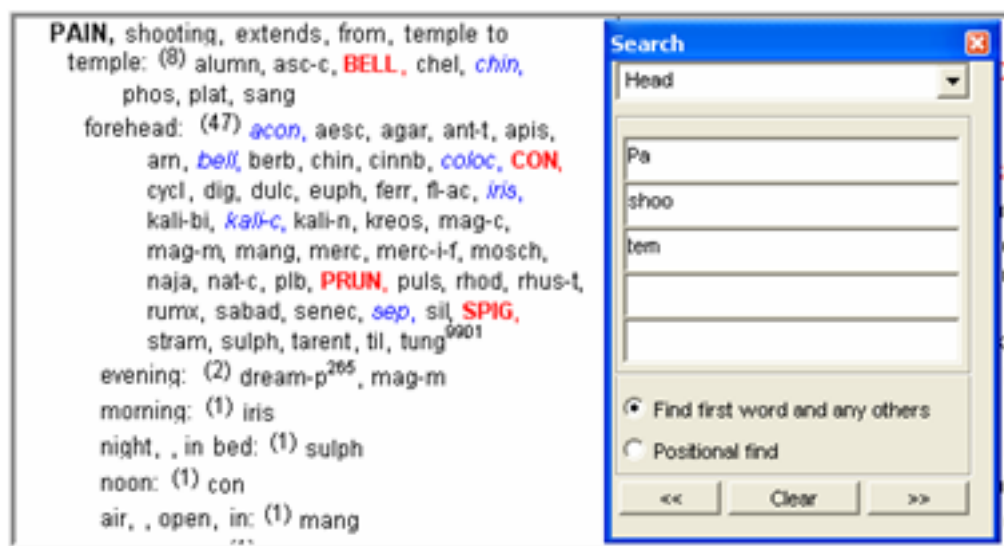
Vision positions to the first PAIN rubric it could find that begins with the letters SHOO and that also has the letters TEM somewhere in the rest of the rubric description.

This is very clever of Vision but this isn't the rubric we want to use! Vision needs to be told to find another rubric for consideration. This is done by clicking on the Next rubric symbol

Vision will then try and find another rubric for your consideration and will display this:

That's better! Exactly the rubric we are looking for.

Now Vision needs to be told to remember this rubric also. Although this could simply be achieved by dragging and dropping onto the clipboard an alternative way would be to click the right mouse button on the desired rubric:

Holding the mouse over **Copy to clipboard** and left clicking on **Clipboard 1** achieves the same result. You will quickly find the method you prefer.

Viewing the case clipboard

Now that 2 rubrics have been placed onto Clipboard 1 it would be a good idea to quickly check this has been successful. Clicking the mouse onto the Clipboard 1 icon will show its contents. Both rubrics will be displayed.

When you are satisfied they are both on clipboard 1 the clipboard can be closed down by clicking the little X in the top right corner of the clipboard screen (or by pressing the ESC key).

Now for the next two rubrics! These are both Throat pains i.e. < swallowing and burning pain. Once again it will prove easier to simply open up the Throat chapter in the explorer to quickly find these 2 rubrics.

Clicking Throat in the Combined Repertory quickly opens up the desired chapter. As both of the rubrics needed are Pains simply typing the letters PA will jump to the correct section.

Typing BURN as the second word takes us directly to the first rubric we want. Try and ignore the fact that Vision shows there are 176 remedies in this rubric! That's one of the big advantages of computer software – you don't have to worry about handling large rubrics. You simply drag and drop this rubric onto the case clipboard as before.

As the next rubric we want to find is also in the Pain section of the Throat chapter it would be nice not to have to re-type in from the beginning. Vision can be instructed to stay in the current repertory position by right clicking the mouse and selecting Find. Vision will then re-display the little search screen with the word PAIN already typed.

Moving to the 2nd word position and typing something like SWA will make Vision jump to the first pain rubric that *also* contain the word swallowing. But this is not the rubric wanted! As a hint to you type the letters ON as the 3rd word and then go forward finding *next* occurrences until you arrive at the desired rubric, which is Pain, Swallowing, on

Each repertory structures the rubrics slightly differently. You will save yourself countless amounts of time and frustration if you learn how your preferred repertory is organised!

Word Searching the Repertories

The next rubric in the case is Cracked lips. This poses an interesting dilemma!

Once again - how well do you know your repertories? Ask yourself first of all which chapter of the repertory Lips rubrics are contained in? In Complete they are in the Face chapter. The Combined and Boenninghausen also place them in the Face chapter. Murphy and Boericke however put them in the Mouth chapter.

If you knew the chapter to look in then locating the desired rubric would be straightforward. But what if you weren't sure? What if you weren't exactly sure if the word you had in mind was the correct repertory word?

Vision provides a word search facility on the repertories to help in such situations. Let's use this next case rubric to learn how to use the Vision word searching facility.

To tell Vision you want to perform a word search click this icon:

Search

Or press the F7 key. Or press the ? key (pressing SHIFT at the same time).

In the screen that is displayed click the Repertories tab (if it isn't already displayed).

Vision allows you to type in one or more words in the **Search for** box. Looking down the screen you will see that **For Keywords** is selected.

One thing to bear in mind is that Vision word searches all the repertories simultaneously. Every repertory, every chapter and every rubric will be searched!

So consider that we want to search and find Cracked lips. The different options available to you will now be explained.

Think a little longer about what to type in as a search word. Should the word **cracked** be typed in? If you search for the word **cracked** then ask yourself 'what if the rubrics themselves don't use this word? What if the repertories use the word **crack** or **cracks** or even **cracking**?'

Let's use the various options Vision provides to help you with this.

First of all, if the word CRACK is typed in with the default Vision settings, this is what Vision will display after the Search button is clicked:
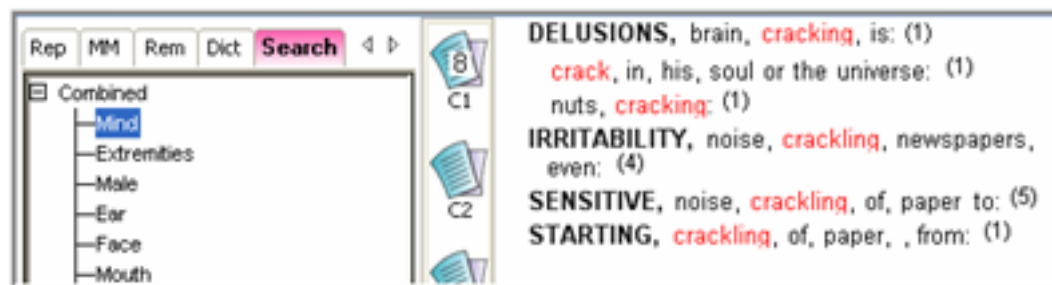
Note that the results have been placed under the Search tab in the explorer tree. All word searches of repertories and materia medica are displayed here. Word searching does not affect your previous browsing position in the repertory or materia medica. Clicking the appropriate tab in the explorer tree will take you back to the exact position you were previously at.

As the Combined is our preferred repertory Vision opens this up and displays those chapters that contain matching rubrics. Above is the Mind chapter as you can see. There are many other chapters that contain rubrics. Notice that even though we used CRACK as the search word Vision also found CRACKING and CRACKLING? This is because Vision automatically takes what you type in, uses it as a 'stem' and then looks for all other words that begin with the search word. Clicking on the Make chapter will also reveal rubrics with CRACKS (plural) and CRACKED in them.

This is a valuable time saving feature. Always try and type as few letters as possible as search words – let Vision find the related words for you.

Furthermore Vision also contains an invaluable Synonyms feature. This allows Vision to find all words related to the words you type in e.g. if you type in Alone Vision would also automatically

find words like Abandoned, Forsaken, Lost, Estranged etc for you.

The next rubric in the case is **Itching of the eyelids.** As this is quite obviously in the Eye chapter of the repertory normally you would open this chapter type ITCH and LID and jump right to that position. You could however click the Search icon to bring us back to the search dialog and then the words ITCH and LIDS to search all the repertories and chapters!

Whether you use the word search across all the repertories or you specifically choose your repertory chapter first is entirely your preference.

The points to remember from this are:

- Time you invest in learning your repertory structure will be repaid many times over
- If you know where to look for the desired rubrics it will probably be quicker to browse and jump to them
- If you want Vision to find everything for you use word searching.

As final practice in finding rubrics use whichever searching method appeals to find the rubric Taste, acute and add it to our case by dragging it the clipboard.

Actually this allows us to discover another important matter surrounding the structure of the repertories. If you word searched Taste, acute you would quickly find the desired rubric in the Combined Repertory. But you might be puzzled to see that no chapters and rubrics appeared in the Complete Repertory following this search!

This is because the Complete Repertory actually has a separate Taste chapter! So the word *taste* Is not included in the rubric name – and Vision cannot find it for you!

Using the repertory browse on the Complete reveals its structure:
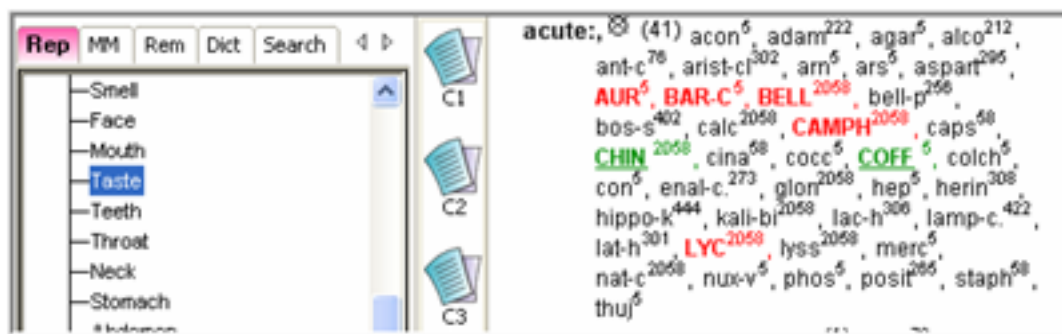
We cannot stress again that it is best for you to learn the structure of your preferred repertory – it will save you lots of time!

Searching Thematic Connections

The final case rubric is **Ripping clothes.** Do you know where this can be found in the repertory? If you are not sure then Vision could be instructed to word search for the word CLOTHES or CLOTHING and you could browse through all the rubrics related in some way to clothing.

Another possibility is to use the concept of **Thematic searching**. Vision contains a set of theme words provide by Dr Jose Mirilli. These words have been carefully compiled by examining the major proving sources i.e. Hahnemann, Allen and Hering, and distilling down the prover's expressions into themes.

Each theme word identified by Dr Mirilli has then been associated with repertory rubrics. The result is that you can search the repertory using these *theme words*.
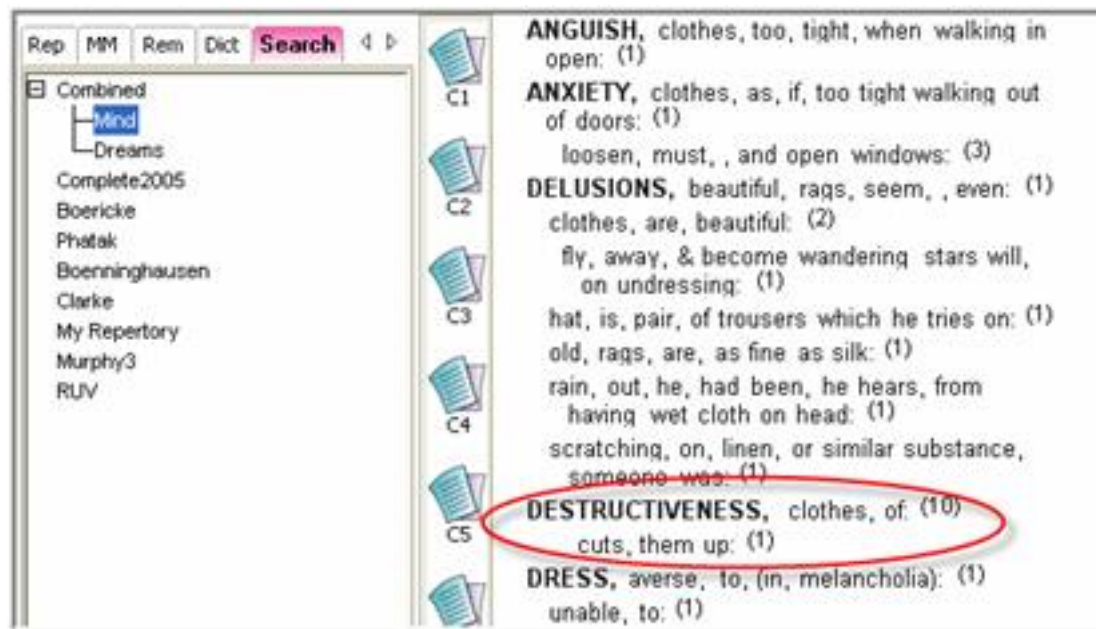
In the Vision search screen selecting For Themes provides a list of all available theme words.

Scrolling down the list reveals that there is indeed a theme word of **Clothes.**

This can be selected for searching by double-clicking it with the mouse.

Starting a search instructs Vision to find all rubrics associated with this theme word and display them for you.
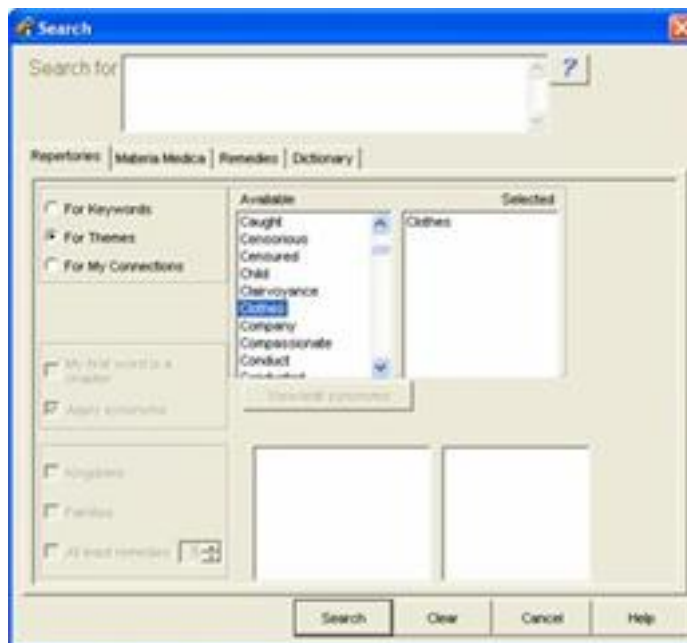
A quick glance down the list of thematically related rubrics reveals the rubric **Destructiveness, clothes of**. As this is exactly the rubric needed this can be copied to the case clipboard.

Thematic searching can often reveal rubrics you may not be familiar with or even aware of. Note that the Thematic search only works with Miccant's Combined Repertory. To read more about Miriilli's work why not visit:

http://www.irhis.nl/information-on-the-books.html

Our case is now ready to be analysed!

Repertorising the rubrics

Now that all of the case rubrics have been found and copied to the case clipboard Vision can analyse it for you and present indicated remedies.

The purpose of repertorisation is to give you a list of indicated remedies to work with.

In Vision the repertorisation process also provides a platform for you to read up on these remedies to help you make the decision on which to prescribe.

Repertorising the entire case is easily achieved by clicking the analyze icon:

Clicking this causes Vision to repertorise all of the case rubrics on Clipboard 1, presenting the results as follows:
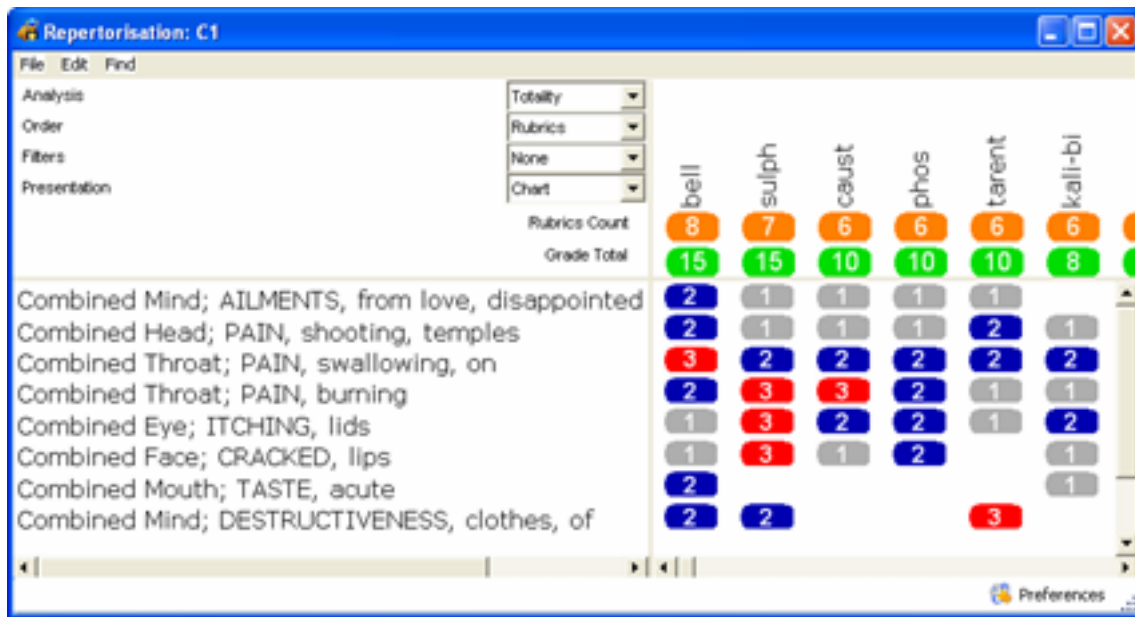
The default format of the repertorisation is always in the form a classical repertorisation chart – with the case rubrics down the left side and the indicated remedies across the top. Each time you repertorise, a classic Totality analysis is performed.

Looking at the list of remedies displayed Belladonna has covered the most rubrics in the case. It has a Rubrics Count of 8. Sulphur closely follows Belladonna. Your attention should focus immediately on these most indicated remedies, although it is perfectly possible (and often is the case) that a remedy further down the list may be called for.

The coloured grade cells underneath each remedy clearly show which rubrics a remedy is present in and which it isn't. Belladonna appears in every case rubric. Vision adds up the grades into a Grade Total for each remedy. If remedies occur in the same number of case rubrics then they are further ranked by this Grade Total. That is why Tarent is ranked higher than Kali-bi in the current analysis.

The current analysis settings are clearly visible at the top left corner of the repertorisation chart :

Any of the 4 parameters can be varied by clicking the mouse on the little black triangle at the sides of each. Selection is made from the drop down list that is offered

Note that by default remedies are primarily ordered by Rubrics. This is easily changed:
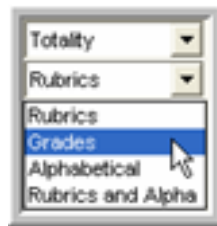
Vision contains an 'expert system' to provide an experienced opinion on every one of your cases. The expert is simply an analytical method of viewing your cases using settings proven over the years to give excellent results!

To consult the expert system simply choose the Analysis type of Expert:

and the Expert will instantly re-analyse your case.

The expert applies proven strategies to help you. Strategies such as compensating for the preponderance of polycrest data in the repertory, emphasising smaller remedies, detecting strange, rare and peculiar occurrences and so on.
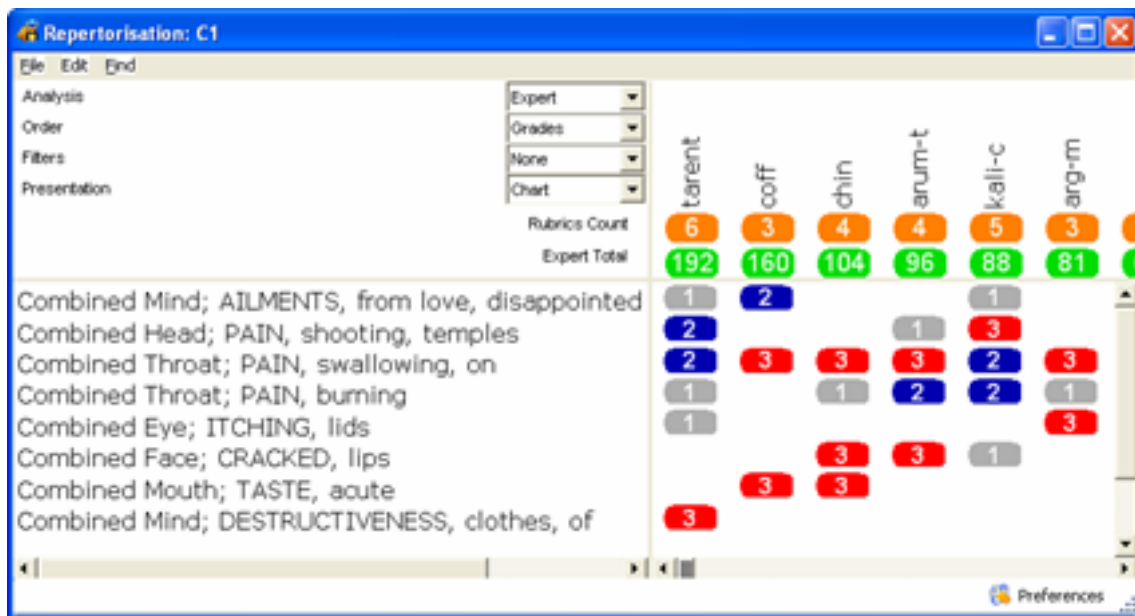
The Expert recommends you give due consideration to Tarent and even Coff in this case! Chin and Arum-t also get a mention. However the expert clearly thinks that Tarent is a very strong candidate for selection.

Is the expert always right? Of course not! Please read more about the Expert system in the Help files as there is much to learn.

However, once you understand how it works, it may be worth using on a regular basis simply to ensure you do not overlook a few good remedies that may be missed during normal repertorisation.

Please use the expert and all the other methods of analysis to determine a good small set of remedies that you can apply your knowledge and experience to.

Remember YOU are the best computer there is!

Vision offers many repertorisation features too numerous to be detailed here. Consult the online help and tutorials provided for a thorough understanding.

Differentiating between indicated remedies

Following repertorisation how are you going to choose which remedy to prescribe?

Remedies worth considering are Bell, Sulph, Caust, Phos, Kali bi, Tarent, and Calc

### Getting information quickly

Vision can help by providing access to information. Start by clicking the **right** mouse button onto any of the remedies you are considering:

Clicking **Remedy Information** for the selected remedy will take you directly to the remedy information in which you can view the keynotes, relationships and possibly listen to an audio lecture about the remedy.

Clicking **Materia Medica** will open up every book in the Vision library that has an entry for this remedy so you can read about it.

Clicking **Family Members**, as below for Calc, will display its associated kingdoms and families:
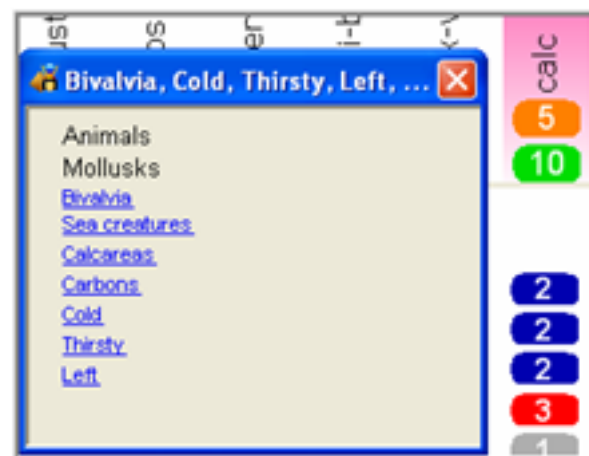
Any entry that is blue and underlined can be clicked to see other remedies in the same family. Many homeopaths like to contrast members of the same family when making a final decision, just to see if there any smaller remedies related to indicated remedies that may be called for.

Comparing remedies

Another technique that may prove useful is to compare and contrast a few indicated remedies by examining their differences in the repertory.

Assuming the decision rests between Tarentula and Calc carb in the current case, Vision could be instructed to show you the differences between the remedies. Armed with these difference you can re-examine the case looking for confirmation of one remedy over the other. Clicking this icon starts the process:

Rx Comp

Various settings can be made on this screen.

In this example we are going to find the differences between these remedies in the Mind rubrics. Only striking, grade 3 instances of the two remedies will be used:
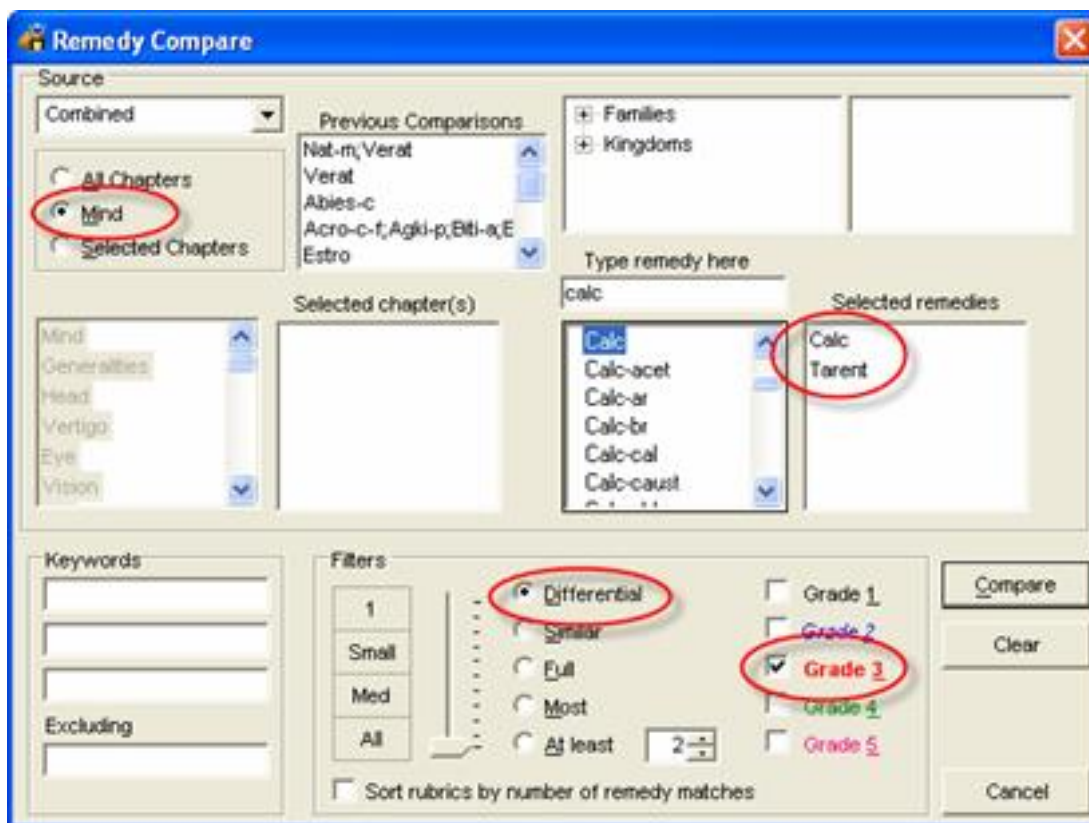
Here are the differences between the two remedies:

	colic	tarent
Rubrics Count	63	18
Grade Total	189	54
Mind; AVERSION, persons, to certain (13)	3	
Mind; CONFUSION (of mind) (313)	3	
Mind; DANCING (37)		3
Mind; DELIRIUM, fever, during (53)	3	
Mind; DELUSIONS, faces, hideous (17)	3	
Mind; DELUSIONS, faces, sees, closing eyes on (16)	3	
Mind; DELUSIONS, images, closing eyes, on (15)	3	
Mind; DELUSIONS, images, frightful (57)	3	
Mind; DELUSIONS, insane, people think her (4)	3	
Mind; DELUSIONS, sick, being (24)	3	
Mind; DELUSIONS, visions, has horrible (27)	3	
Mind; DELUSIONS, visions, has, closing the eyes, o	3	
Mind; DESPAIR (146)	3	
Mind; DESPAIR, recovery, of (49)	3	
Mind; DESTRUCTIVENESS, clothes, of (10)		3

Calcarea has many grade 3 occurrences that Tarentula does not. That is to be expected, as Calcarea is a large polycrest remedy. In these situations it is usually better to look at the smaller remedy and see those things it has that the large polycrest remedy does not.

The list of differences shows us that Dancing and Destructiveness of Clothing are grade 3 bold type instances of Tarentula that Calcarea is *not known to have*.

This should trigger interesting thought processes! We know for sure about the clothing being ripped – this could easily be a valuable confirmatory of Tarentula. But what about the Dancing? Did this come out in the case taking? Do you need to find about?

Comparing and contrasting remedies in this way is a great tool to stimulate your thought processes and to help make a final decision.

Recording your decision and saving the details

Assuming you have decided on which remedy to prescribe it would be sensible to save your case rubrics for future reference (and for further study at another time if required).

Saving the case rubrics

The case rubrics need to be saved to your computer's hard disk. This is done by clicking the Save icon on the toolbar:

Vision will then offer to save the case. The folder location on your computer's hard disk will always be the \cases folder within your Vision system – although you may choose to save your cases wherever you like.

A name will need to be given to each case saved. Over the months and years a patient may return and see you several times. Each time they come you may wish to save the latest set of case rubrics. It is sensible to name your saved cases in such a way that they can easily be located in the future.

A suggested format would be :-

Last Name, First Name, Date of visit

e.g. Bush George W 05032003.cdt

As Windows orders files on the hard disk alphabetically this will ensure that all the case rubrics of Bush George will be grouped together so you can more easily reference them.

Updating the patient record

If you started Vision from the Cases and Visits section then when you exit from Vision the screen will return to the same patients consultation record you were previously viewing.

Any comments, observations and notes can be recorded in the Case Notes section of the consultation screen. Click the Save Visit button to save and exit.

Finding Alternative Remedies (the second and other visits)

The patient is sitting in front of you again in one month's time. You recall that previously you prescribed Tarentula 200c and you are eager to find out what has happened.

Possible reactions

The ideal scenario is that the patient reports improvement, which is continuing requiring no prescription at this time. If so, breathe a satisfied sigh of contentment. However if you are maintaining patient records in Vision it would be a good idea to record this information in a second consultation record.

Another possibility is that the patient reports initial improvement, which did not hold. In this situation you will have to probe deeply to determine exactly what has transpired since the remedy was taken.

There may be no change at all. If this is truly so then you are going to have to re-take the case or you are going to have to analyse the case in a different way altogether.

In each situation when you decide to change the remedy what approach will you take? How will you analyze the case and choose an alternative remedy? Vision can help in a variety of ways.

Reviewing previous details

It will usually be a good idea to quickly refresh your memory with whatever case details you stored within VISION. Do you maintain patient records within VISION? If not skip to the next section. Opening up the Vision Cases and Visits allows you to locate the patient's details.

When the desired patient is clicked on the left a list of consultations is displayed on the bottom right. Select this consultation and click the **View/Edit Consultation** button to quickly review.

Clicking the **Repertorise** button would start the main Vision screen and automatically load up

the saved set of case rubrics. You would do this if you wanted to check the rubrics used.

Click the Cancel button to return to the main screen and click the **New Consultation** button to start a new consultation record for the patient.

From the main Cases and Visits screen click the **New Consultation** button to start a new consultation record for the patient.

In the new consultation record you may wish to take the opportunity to record any improvement or worsening of the patient's condition by selecting from the Well Being option on this screen. When the rest of this screen has been prepared pressing the Repertorize button starts Vision ready for you to begin a new analysis.

Evaluation and approaches

The fundamental question to ask yourself after reviewing the case is this. **Has the case changed**? If the case has changed markedly, even if the patient reports little or no improvement, then something happened! But it is time to re-work and re-analyse the case all over again. Maybe your case taking was not too good and it would be a good idea to start over anyway?

However if the case still looks pretty similar to the initial consultation and you decide that the remedy prescribed really does need changing then Vision can help you find good alternatives.

Here are just a few possibilities:

▪   You are convinced that the patient needs a remedy from the same family as the previous remedy.
▪   There is a central causation in the case. An alternative remedy that has this causation strongly should be found.
▪   The patient displays characteristics of mineral or animal remedies.
▪   The patient clearly shows a miasmatic state and possibly a state associated with a plant family.

There are many other possibilities. Vision offers a wide variety of approaches to help you and some are explained following.

Viewing remedies in the same family

Using the leading remedy, Bell, from the totality repertorisation in the example case we ned to tell Vision we want tT see other remedies of the same family.

This is achieved by clicking the Filter option and then choosing Families:
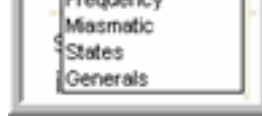
Vision will display a list of every homeopathic family:

Clicking the mouse onto a family's checkbox selects it. In this situation we can select the Nightshades family. Several families can be selected if desired by clicking on each in turn. Clicking the **Filter** button instructs Vision to display only Nightshade remedies in the current repertorisation:
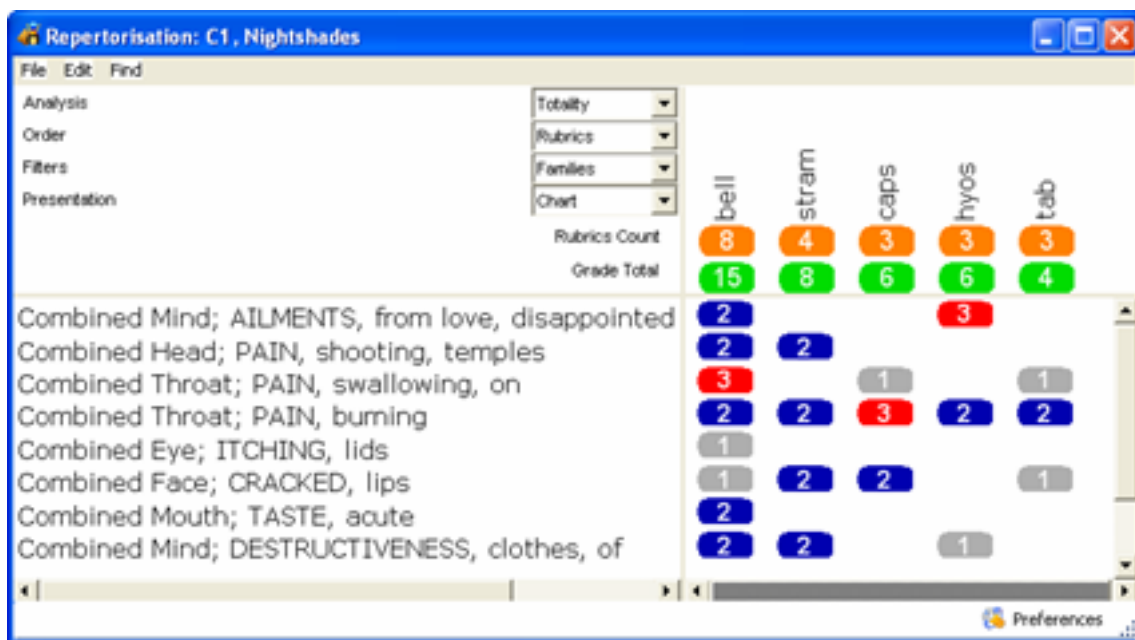
This allows you to see the Nightshade family remedies present in the current case.


Finding well represented families

Alternatively it may prove worthwhile to see which other families are well represented in the current case.

Clicking the Presentation option and Family Cones allows Vision to analyze the case for you and to display a chart of the most indicated families in the current case:

This informs you the Tree family is the most indicated in the current case, followed by the Carbons, Acids, Sulphurs and so on. Sometimes this will prove incredibly useful, as it will draw your attention to a group of remedies that guide you towards a good prescription.

As wonderful and exciting as this technology is, do not be too easily seduced by all of the beautiful charts and graphics! In the above example it might be easy by seize on the Tree family. Vision allows you to see the tree remedies very easily – simply double-clicking the mouse on any family cone shows you the leading remedies in that family:
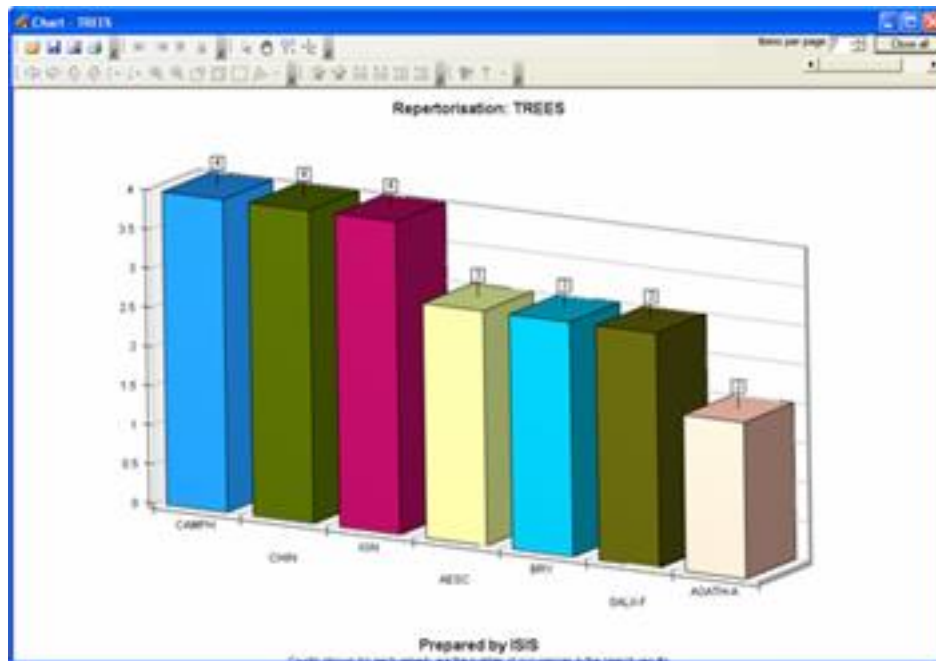
This shows you that Camph, Chin and Ign are the leading tree family candidates in the current case. But did you know that the Tree family has very many members in our homeopathic pharmacopoeia? It is a family created by homeopaths and has a very broad definition. This means that statistically the Tree family will very often be well represented. So always exercise your discretion when interpreting such charts.

Should a family of remedies be displayed near the top pf the graph then it is worthy of your further consideration.

Using the periodic table

There are a commonly held set of factors and themes that may guide you towards choosing a mineral remedy.

For instance : Issues connected to structure; their role in life, their relationships, how well they perform and so on. They feel they lack identity or completeness - unsure where they fit in - something is missing from their lives or they have fear that they will lose their place or role or position. Chronic issues. Slow onset.

If you see these factors Vision can help you examine the case using the periodic table. This offers you the possibility of working with the findings of Jan Scholten. The periodic table can be displayed by clicking on the Filter option and selecting Periodic

Vision allows you to select an element, entire row or entire column. Selecting an individual element and clicking the **Info** button provides the essence of the element as defined by Scholten:

Scholten refers to rows as series and columns as stages. His published works explain how you can determine whether a patient is in a specific series or stage or intersection i.e. element.

If you are clear about the approximate location in the periodic table your remedy needs to come from you can repeatedly select elements and examine the essence of each in turn to determine the best match.

Alternatively clicking the mouse before a series or at the top of stage selects the entire row or column.

Clicking the Filter button instructs Vision to re-analyse the case and display only those remedies in the current case contained in the selection. This can be a single element or an entire series/row.

Using Miasms

Many homeopaths use miasms as a primary indicator for the selection of a remedy. Vision classifies remedies in the classically tri-miasmatic way and expands upon this by introducing the definitions of Rajan Sankaran. These miasmatic definitions are called States, to distinguish them from Miasms. These States add 7 more miasmatic definitions e.g. Cancer, Leprosy, Ringworm and so on.

Vision provides analysis Filters on both the classic Miasms and the Sankaran States. These filters allow you to specify miasms or states and to repertorise only with these remedies.

Sankaran's Insights

The published works of Rajan Sankaran has evolved to incorporate the definitions of the **vital sensation** of different plant families and the remedies within them. Vision provides an analysis method based on this thinking.

Clicking the Insights icon on the toolbar opens this special form of anaylsis.

Note that you do not need to have repertorszed any rubrics at all in order to access and use this facility. It does not work with rubrics at all.

On entry to this analysis type there will be two lists available : a list of States and a list of Plant Families. Holding the mouse over any States or on any Family will display the essential 'feeling' associated with that States or Family.

Here is an example of the Sycotic feeling:
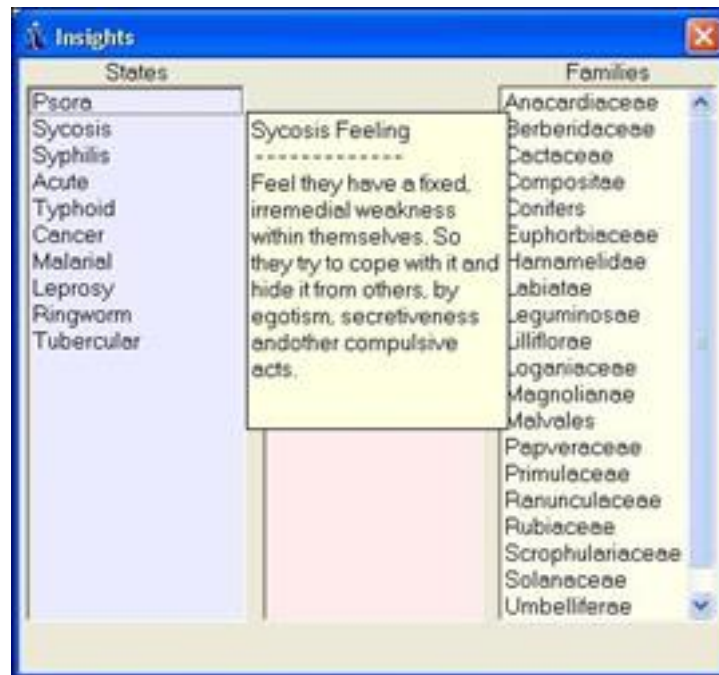
Here is an example of the feeling of the Anarcardaciae:
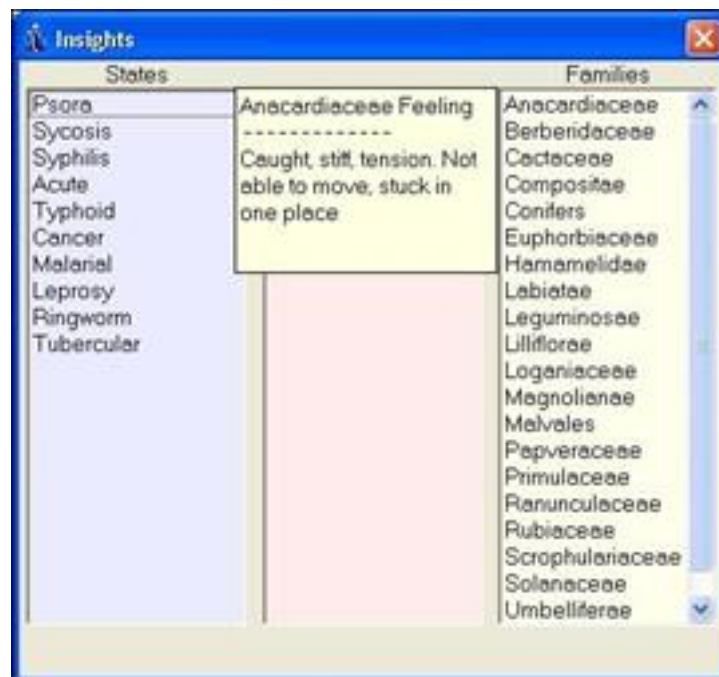
If your patient did indeed present with both of the feelings it would be nice if you could see which remedies fitted both! Vision provides you with this possibility!

Clicking the mouse on a Plant Family causes the members of that family to be populated in the central column. Clicking the mouse on a State causes the remedies associated with the State to be populated in the central column. Vision then 'crosses' the State with the family and only remedies that match **both selections** will remain.

Not only that but holding the mouse over the remedies remaining reveals the specific sensation associated with each remedy. If one of them fits your patient exactly then this remedy may be worthy of further investigation.

Studying and Learning Homeopathy with Vision

When studying homeopathy you will often be researching a specific remedy or group of remedies. Sometimes you will be investigating from a therapeutic standpoint, possibly trying to obtain information about a specific condition.

Accessing Materia Medica

Your first port of call will often be the library of reference works within VISION.

To open up your library of books click the MM tab in the explorer tree:

The list of available books will be displayed

Each book title contains the last name of the author of the book followed by the book's name. Apart from the My Notes entry listing (see later sections) all books are ordered alphabetically by the author's last name.

Use the mouse to quickly scroll down the list of available books. The books in your library reflect the version of Vision you have purchased.
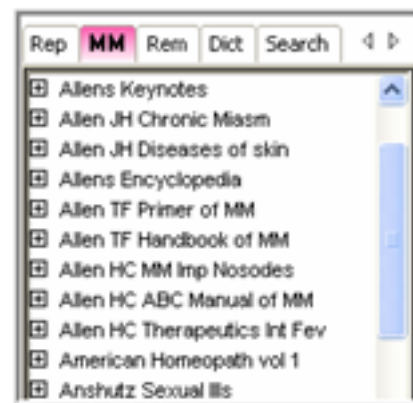
Tip!

In practice you will tend to use and reference certain books more often than others.

If this is the case then you should consider changing the order of books from the default alphabetical order into a personalised order that positions your favourites at the top of the list. Refer to the section of this manual entitled **Personalising Vision** for information on this.

Opening a book

To open up a book simply click the little + symbol in front of the book's name. Vision will then display all the chapters of the book for you to choose from.

Click your mouse on the desired chapter (or remedy name) and the text of the book will be displayed in the main part of the screen, like so:
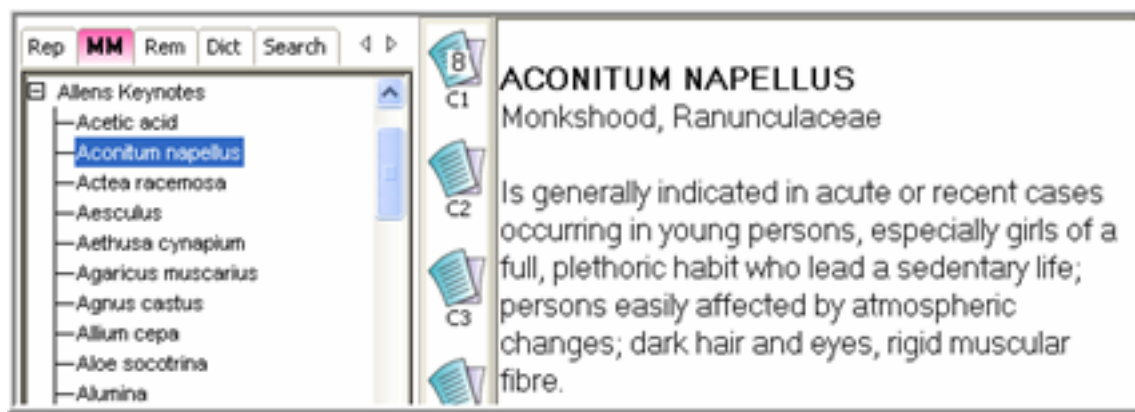
As always you can use the mouse to scroll down the displayed text.

> **Tip!**
>
> If your mouse has a scrolling wheel you can use this to quickly
> scroll down the displayed text.

Changing books

When you have finished reading the contents of a book you can close it by clicking the little –
symbol in front of the book name. Then you can scroll down the list of available books and
choose the next one you wish to open.

Learning about remedies

Often you will want to study a remedy or group of remedies. Let's use an example and work
through how you could do this with VISION.

Many of you love learning about the more recently proven remedies. So let us try and find
information about one such, the Carnegia gigantea, commonly known as Saguarro.

Where to start?

All information about remedies within Vision is ordered and accessed by the abbreviation of the
remedy. Ask yourself – do I know the abbreviation of the remedy I want to study? In our current
example that is Saguarro. If you do know the abbreviation of the remedy and are comfortable
finding it you can skip the next two sections and commence reading at **Using Remedy
Information**

Finding remedy abbreviations

If you don't know the abbreviation of a remedy how can you find it? Here are a few
suggestions:

1. Open the repertory to a rubric you know the remedy is present within. Browse all the
remedies in the rubric. Inspect likely candidates by clicking on them and viewing any materia
medica entries or remedy information until you find the desired abbreviation.

2. Open the remedy list and scroll down alphabetically looking for likely candidates (this is
likely to take some time as there are thousands of remedies!)

3. Search for remedies based on their family or classification.

The last option needs further explanation as it offers the best possibility for finding remedy
abbreviations.

Searching remedies

Vision provides a search that works on the remedies themselves. Clicking the Search icon.

or pressing the F7 key causes the Search screen to be displayed. Clicking the Remedies tab on the Search screen provides a screen that lets you search the list of remedies. You cannot search for words. The basic idea is that you tell Vision what kingdoms or families or miasms you want to search for and Vision will provide a list of remedies that match.

In our current example we want to find Saguarro. Now, the one piece of information we know for sure is that this remedy belongs to the **Cactus** family. Therefore if we search for the Cactus family we are sure to find Saguarro!

To search you firstly click the desired criteria, in this case Families. When you do Vision will display a tree of alphabetical list of all homeopathic families for you to select. Use the mouse to scroll down the list and you will soon see CACTUS. Double click the mouse on CACTUS to tell Vision this is the family you want to use. Vision will move BIRDS into the selected column on the right:

> *Tip!*
>
> Whenever Vision lets you search in this way you will always be able to choose multiple criteria. In the above example you could select several families and Vision will use them all.
>
> You can even select from different categories e.g. a Miasm and a Family. Thus you could search for all Syphilitic Mammals and so on !

When the Search button is clicked Vision will scan the database of remedies and create a list of remedies that match the search criteria. In the current example this would be all of the Bird remedies:

Now the task is much easier! All that is needed is to click on each remedy in turn reading the details until Saguarro is found (it is carn-g by the way)

Using Remedy Information

When you click on a remedy the information is presented in four quarters:

Top left   : Naming and categorization of the remedy
Bottom left   : Any keynotes available for the remedy
Top right   : Any relationships recorded for the remedy
Bottom right   : Any images, audio lectures or videos available for the remedy
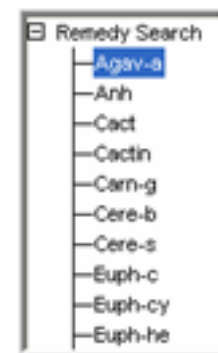
Using the current example of Saguarro you can see:

Top left

Its abbreviation is Carn-g and its full name is Canegia gigantea. Its common name is Saguarro Cactus

The lines below show you the kingdoms and families the remedy belongs to. Note that these are blue and underlined which means they are 'clickable'. If you do click on a kingdom or family Vision will display a list of other remedies which are members of the category you clicked on.

You can also see the Miasmatic association of any remedy (if any). If Rajan Sankaran has associated a remedy with his definition of miasms this is displayed next to the word State. For Saguarro Rajan classes this as a Typhoid remedy.

Vision uses the word State throughout to denote a miasmatic association defined by Rajan Sankaran. We have not mixed these in with the traditional tri-miasmatic definitions – these have been kept separate.

Tip!

Using families and kingdoms is a great way to compare and contrast remedies. In our experience it is better to learn the characteristics of a small group of remedies then trying to commit a single remedy to memory. Selecting a small list e.g. the Cactus remedies and studying each in turn to see any family characteristics as a whole is more likely to be remembered.

<u>Bottom Left</u>
If Vision contains keynotes they will be displayed here. You can amend any keynotes supplied or add completely new keynote information. Please refer to the section **Researching homeopathy with Vision** for more information.

<u>Top right</u>
If Vision contains relationships they will be displayed here. You can amend any relationships supplied or add completely new information. Please refer to the section **Researching homeopathy with Vision** for more information.

<u>Bottom right</u>
This contains any photograph or audio lecture or even video presentation for a remedy. In the current example you can see a nice photograph of the Saguarro.

If there are any multimedia entries for a remedy the words Image and Sound will be black and available. Click to see a little menu and click again to select.

When studying remedies listening to a teacher explain a remedy to you is invaluable! In this example what could be better than the proving supervisor, Dr Todd Rowe, sharing his thoughts on this remedy with you?

You can add your own images, audios or even video files for any remedy within Vision to build up your own homeopathic resources. Please refer to the section **Researching homeopathy with Vision** for more information.

Why photographs and lectures? Because many people learn best this way. Also because there is the possibility that we may become remote from the substances we use as homeopaths. Homeopathy is an energy medicine which uses the energy from living creatures and plants. What better way to stay in touch with our remedies than by knowing what they look like?

Enlarging remedy information

To examine an image more closely left click the mouse onto the image and Vision will expand the display for you in the centre of the screen.

Repeated left clicks will expand the image until it is displayed full screen. Right clicks of the mouse will shrink the image down in size.

Good quality images look quite beautiful displayed full screen – lesser quality images do not!

Reading books and articles about a remedy

To take your studies further you may find it useful to read anything contained within the Vision library of books and materia medicas. You could access each of your favourite materia medica in turn looking for a remedy. This would take quite some time and prove frustrating. Fortunately Vision provides a much easier way for you!

On the extreme right of the screen Vision provides a convenient way to access the library of books.

Simply click the word Materia Medica that is blue and underlined (remember this means it is clickable) and Vision will scan every volume of materia medica in its library looking for the currently displayed remedy.

Extracting Data from the Repertory

A further way to study a remedy is by looking at the rubrics it occurs in. Vision provides a helpful way for you to do this.

However a cautionary note is warranted here!

Newly proven remedies will often **not** be added into the repertories. Whether a remedy exists in the repertories also depends on which edition of a repertory you are using within VISION. So please bear this in mind if you decide to try and study a remedy with the repertory.

Extracting information about Saguarro from the repertory is started by clicking the mouse on this icon:

Rx Comp

and Vision will display this screen:

This is a very busy screen with lots of choices and options. Don't forget to consult the online help provided with Vision to learn all about these options.

At the simplest level extracting from the repertory requires you to specify which repertory you wish to use and which remedy or remedies you want to extract. The default repertory set each time you enter this screen is the Combined Repertory. This is because the Combined will be the repertory every user receives as standard with every Vision system

Towards the top left of this screen you need to select Combined in the box labeled **Source.** By default Vision is set to extract rubrics from all chapters of the repertory. Notice that you can select just the Mind chapter or you even specify specific chapters to extract from. Selecting single chapters makes the results easier to work with and is quicker to run (important if your computer is not the fastest!).

In this example we will choose to extract from only the Mind chapter – so this should be selected.

Finally Vision needs to be told which remedy should be extracted. You can choose to work with Families of remedies or you can select individual remedies. As we only wish to extract Saguarro this remedy should be chosen from the list of remedies provided. You need to use the remedy abbreviation (carn-g) to select it like this:

Saguarro should be selected from the box marked **Type Remedy Here**. This can be achieved either by scrolling down the alphabetic list of remedy abbreviations with the mouse or by typing in the abbreviation (as you type Vision will position automatically). When you see the abbreviation for carn-g double click the mouse on it to move it into the selected remedies list.
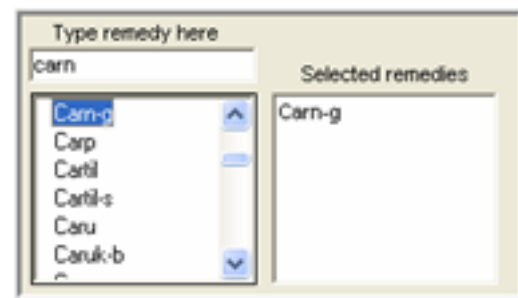
Just in passing please note that you can select as many remedies for extraction as you like. In fact you can select entire families in this way and have Vision extract them from the repertory for you. This is a great way to look for patterns in remedies in the same family.

Tip!

What if you select the wrong remedy or family by mistake? How do you remove wrong selections?

All you have to remember is that if you double click to place an item in a selected list anywhere in Vision you can always double click on the selected item to **remove** it from the selected list.

Leaving all the other settings on the screen as default and by clicking the Compare button the extraction starts. When Vision has finished extracting all the rubrics in the Mind chapter for Saguarro they will be displayed as follows:

You can see that there are a total of 42 Mind rubrics that contain Saguarro– the above example shows the first few. The grade of the addition to the repertory is shown next to each rubric extracted.

Repertory additions for newly proven remedies should always be added into the repertory with a grade of 1. Higher grades are only permissible if a remedy has been confirmed in clinical practice. Of course that is our view. The various repertory authors may have their own criteria when making additions. We have followed this rule (originated in Kent) in our Combined Repertory.

As a final pointer – when reading this list of rubrics containing Saguarro you can quickly see the other remedies contained in the rubric by selecting any rubric by clicking on it with the mouse. Then clicking the **right** mouse button and selecting the Show option provides a display of all remedies in the rubric selected.

There are many other options and settings availability when extracting and comparing remedies in this way. Please consult the help files for more detailed explanation.

Using information from Vision in presentations

Occasionally you will need to extract information from Vision to use in presentations or other written work.

Vision allows you to selectively copy or print information.

From the repertories

When browsing the repertory you can highlight any rubric by clicking on it. Clicking the right mouse button on the rubric and then Copy Windows causes the rubric data to be copied onto the Windows clipboard. The data may then be pasted into any other program.

To illustrate: If the rubric **ABRUPT, affectionate yet** in the Complete Repertory Mind chapter is highlighted and then pasted it into another system (for example Microsoft Word) this is what will be pasted:

Combined, Mind;
ABRUPT, rough yet affectionate, lyc[1], nux-v[1], puls[3]

Vision allows you to highlight several rubrics at the same time.

Please note that certain repertories may prohibit copying in this way altogether.

From clipboards

Highlight those rubrics you wish to use (or click Select All for everything) and then use the Copy and/or Print icons on the clipboard toolbar.

If you wish the remedies for each rubric to be copied or printed makes sure you are viewing them first by clicking the Show icon in the toolbar.

From repertorisation charts

After any repertorisation you can choose to copy or print the chart.

To copy the chart as an image for use in other software e.g. Powerpoint or Word, all you need do is click the Edit menu, option

Copy.

As a 'snapshot' image is created you need to make sure
the chart appears as you need it before you select Copy. You will be shown a confirmation of
the image created which will also been placed on the Windows clipboard for you. From this
confirmation screen you are also able to save the image to disk, rotate it, edit it with other
software and print it.

Often you will want to print a repertorisation chart for filing with your paper records. All you
need do is click the File menu, option Print and you will see the Print Preview screen:
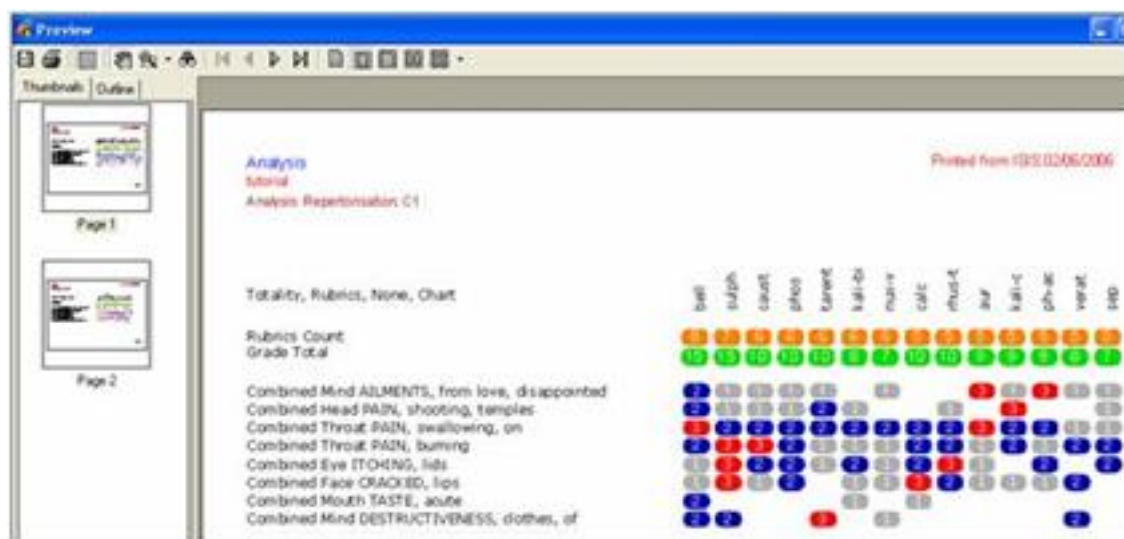
As most repertorisation charts have many hundreds of possible remedies in them the potential
for printed pages is quite high. The preview allows you to sell all the pages in the Thumbnails
column and then to print off whichever pages you wish.

From materia medica

While viewing materia medica you can copy and/or print portions of the text displayed.

First of all you should highlight the portion of text you wish to copy by positioning the mouse at
the beginning of the text. Then drag the mouse until the required text is highlighted. Finally
click the **right** mouse button on the text being viewed and the copy to Windows clipboard and
print choices will be available.

Tip!

Modern books do not allow you to freely copy and print information. There are
restrictions built into Vision that reflect the wishes of each author. Each author's
wishes may be different. Some are happy to let you copy text, some may let you
print, so long as you respect their work, and do not violate copyright and credit
the source. Some authors will not permit either.

Vision fully respects the wishes of each author

From remedy information

As keynotes, relationships and multimedia data for remedies are all under your control you may add to them and copy and print as you wish. You may copy or print any default-supplied data unmodified provided credit is given to Vision and for the sole purpose of supporting other written information.

From any graphs and charts

You may view various graphs on the repertorisation charts.

These graphs and charts are also available whilst browsing or after searching the repertories and/or materia medicas using these toolbar icons:

These graphs allow you to see which Kingdoms and Families are most represented in the current rubrics or search results. The Remedies icon gives you a quick visual summary of which remedies are the most represented following a repertory or materia medica search. Here is an example following a search of materia medicas for the words clothes and destroys:

You can use these toolbar icons to Print and Create a snapshot image (for use in Powerpoint or Word for example). You can even Save the graph to disk and re-open it subsequently.

Researching Homeopathy and Expanding your Vision system

Much, if not all, of the previous section applies should you plan to use Vision for research purposes.

So in what additional ways could you research homeopathy within VISION? How would you add into or expand the system?

Here are some ways (you will think of more)

- Pattern recognition
- Adding remedy multimedia
- Recording your notes
- Making repertory additions
- Making repertory connections for future use
- Enhancing the synonyms file to aid searching

Pattern Recognition

The practise of homeopathy can be thought of as pattern matching i.e. matching the pattern of a patient's disease (or even being) to pre-determined patterns produced by our remedies.

Skillful homeopaths learn to do this in different ways. When such practitioners can communicate how they do this then their approach to pattern matching becomes clear. When they can't it is often referred to as 'intuitive prescribing' !

Skilful communicators such as Jan Scholten and Rajan Sankaran are renowned for

formulating pattern matching by use of the periodic table and such concepts as 'central delusions', 'vital sensation' and so on.

Vision provides tools that allow **you** to look for patterns – and lets you see what only **you** are able to see.

Patterns will often be seen by comparing and contrasting data between groups of remedies. This is why the concept of homeopathic remedy families has grown in popularity. It is easy to understand that if you learn the common traits of, for example, the Spider family, you are more likely to consider such remedies when you see these traits presenting in future patients.

To support such use Vision carefully categorizes remedies. Wherever possible each remedy has been grouped according to the following criteria:

- Kingdom
- Homeopathic Family ▪ Miasm
- State
- Size (i.e. Frequency of use) ▪ Generals

Kingdoms

This is the botanic and taxonomic classification of the natural world. Vision divides remedies as belonging to the **Plant**, **Mineral** or **Animal** kingdoms. Those remedies that fall outside these categories are grouped into a special category called **Other energies**. The old fashioned term for these is 'Imponderables'. We have discarded that term as, in fact, many of these remedies are perfectly ponderable and in fact simply do not categorize quite so easily.

Each kingdom is further divided into sub-kingdoms. And each sub-kingdom is divided once more. To illustrate consider the Animal kingdom. This is divided as follows:

Using the Vision Kingdoms filter screen as an example you can clearly see that the Animal kingdom is divided into Amphibians, Arthropods, Cnideria and so on.

Furthermore the Mollusks sub-kingdom is divided into Bivalvia, Cephalopods and Gastropods.
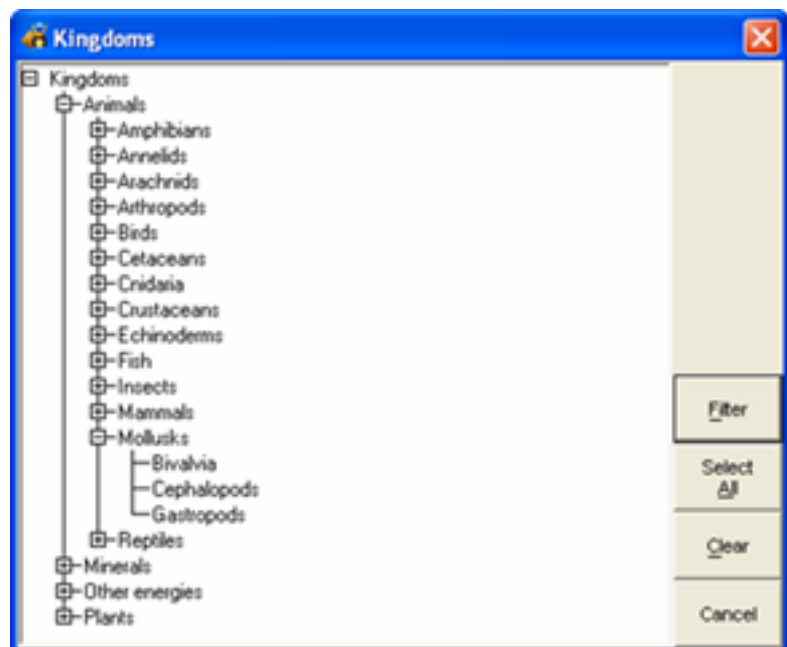
There is a further facility within Vision that offers you information about the different Kingdoms taken form a variety of sources. To access this information at any time click as shown here on the main toolbar.

Any of the kingdoms shown can be clicked on. So to access information on the Animal kingdom you would click the blue hyperlink underneath the animal image and this will be displayed:

Animals

Animal Kingdom

How they appear
Are usually focused on how attractive or not they are. Competition and striving are important features. Good eye contact. Alertness. Animated expressions. Passionate and ardent.

Competition

Features and Keywords
Strength and weakness. Persecutors or persecuted. Attractiveness. Sexuality. Connected. High and low. Conflict. 'I hate myself'

Families
Mammals • Insects • Arachnids • Reptiles • Birds • Mollusks

To view information on the sub-kingdoms ten you need to double-click on the name of the sub-kingdom from the main Kingdoms Information screen. If you wanted to choose the Bird kingdom you would click as shown and see:

Amphibians
Annelids
Arachnids
Arthropods
Birds
Cetaceans
Cnidaria

The Bird Family

Themes from their Natural Behaviour
Freedom with Responsibility. Bound and Free. Floating. Escape. Light. Soaring. Weightless. Desire for high places. Travel, migration. Atractiveness, dancing. Seperate from the world. Cruelty. Humiliation. Abuse.

Themes of their Attack and Defence
Chase. Hunt. Cutting, tearing, splitting. Mudrder. Violence. Claws. Trap. Controlled attack. Surpise. Power.

Miasm
Tubercular

Homeopathic Remedies
American Bald Eagle • Red tailed Hawk • Pigeon • Falcon • Hummingbird • Macaw • Raven • Seagull • Swan • Vulture

There are very many kingdoms, sub-kingdoms, sub-sub-kingdoms!   Please view this as a continual 'work in progress'. There will be many occasions when you click on something looking for information and nothing is there. Sorry in advance! We strive to bring you as much information as we can but will never be able to provide enough information on all kingdoms.

Homeopathic Families

These are our 'looser' groupings of remedies into relationships. Often they are exactly the same as the Kingdoms classification e.g. sub-kingdom Ranunculacea is the same as the Buttercup family.

Other times 2 or 3 sub-kingdoms are grouped by homeopaths into one family as they appear to have similar patterns. Some families bear no relation to the strictly scientific classification as reflected in their kingdoms but are related together due to their similar patterns.

Miasms

Relates strictly to the tri-miasmatic approach, i.e. Psora, Sycosis and Syphilis.

States

This Is the Sankaran definition of miasms and permits such definitions as Cancer, Leprosy and Ringworm. These are kept apart from the Miasm category to avoid confusion.

Sizes

Each remedy is classed either as a Polycrest, Frequent, Infrequent, Small or Tiny remedy. This does not denote the importance of a remedy but simply reflects its historic usage in practice as evidenced by its appearance in the repertories and materia medicas.

Generals

The use of physical generals can often be amazingly useful in practice. So we have classified many remedies according to whether they are Hot or Chilly, Thirsty and Thirstless, Right or Left and so on. We are pleased to acknowledge the contribution to homeopathy made by Dr Prafull Vijayarkar of Mumbai in this area.

Looking for those patterns

You can use Vision to look for new patterns throughout the system. Here are some examples :

The repertories can be searched by Kingdom or Family. To illustrate : You could use Vision to search all of the repertories for rubrics containing the word LOST and any synonyms that have 4 or more Animal remedies in them. This allows you to research families looking for common characteristics.
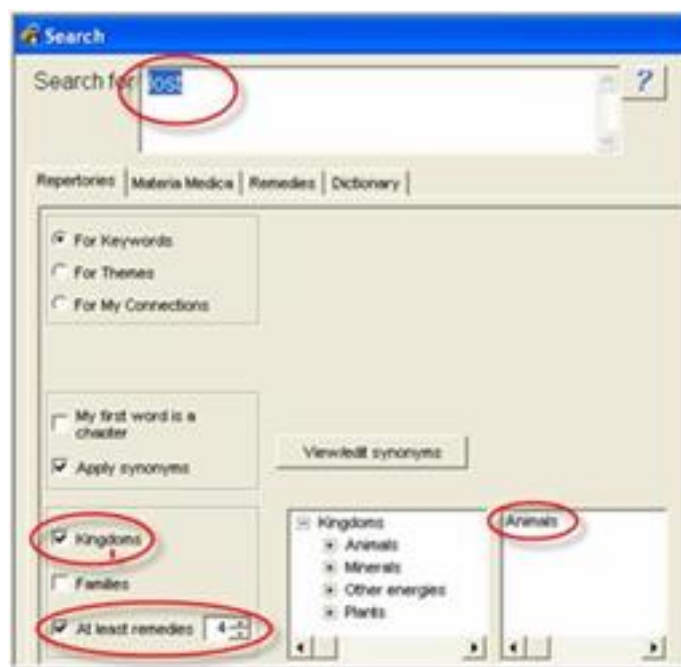
Searching in this way can admittedly take quite some time on even the fastest computer but the results are very interesting! How do you suppose our homeopathic teachers find all these relationships!

The repertory can be used to chart groups of rubrics.

To illustrate: Let's say you were browsing the repertory looking at the rubric Hatred. By simply clicking on the rubric and then the Kingdoms icon on the toolbar Vision will prepare a graph showing the kingdoms in this rubric.

You can double-click the mouse on any kingdom and drill down to the next level of detail.

Vision provides marvellous tools like this that you can use, easily and quickly.

You are limited only by your imagination. We want you to be inspired by Vision to improve your homeopathic knowledge and practice rather than you simply following the theories of someone else. For far too long homeopathy has been in the grip of 'guru worship'. Take control of your own knowing with VISION!

After a materia search see which families .

After any materia medica search (and repertory also) you can easily see which families occur most frequently. Once again this is a fabulous aid in finding those connections between remedies.

So, after a search for ANGER across all materia medicas you can see a Family graph as follows:

Materia Medica Search: Families anger
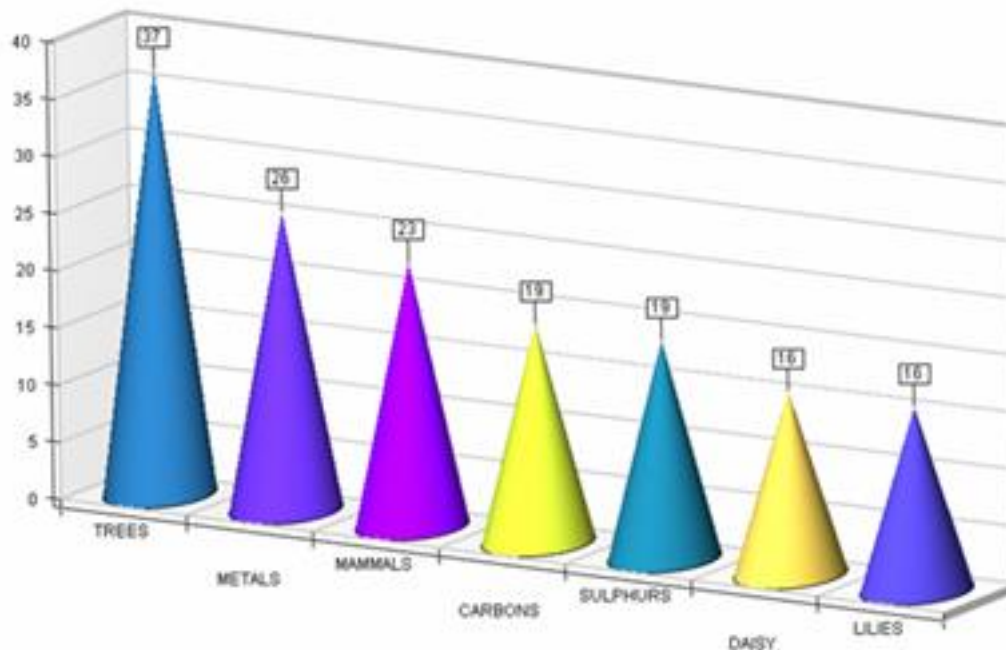
Did you know that the Metal family of remedies has so much hatred in it? Well you do now! And the next time you see patient with tremendous hatred inside them maybe your mind will start asking ' which metal remedy could they need?'

You can really build your knowledge of homeopathy in this way!

Adding remedy multimedia

Although Vision comes supplied with a large number of photographs and audio lectures the system is expandable!

You can add new entries to remedies that have no information or you can replace pre-supplied data with your own.

Think of the possibilities this offers! You could prepare your own audio files on computer and associate this with any remedy (you just need a microphone or computer headset plugged into your computer). Alternatively you could even shoot your own video about a remedy, either the substance itself, an illustrative case snippet or yourself talking about the remedy. Or you could build up a personal collection of remedy photos. In this digital age these things are not only possible they are simple and easy to do.

How do you do this? While viewing any remedy click the mouse in the bottom right quarter (where any multimedia would normally be displayed) on the Add/Remove button. Vision will offer a choice of Adding or Deleting a multimedia file.

If you choose to Add Vision will offer you a screen in which you can indicate the file you wish to appear for the current remedy. You may use a variety of file formats. For photographs your image could be in JPG or BMP format. Audio files can be in the WAV or MP3 format. Videos can be in AVI or MOV format.

If you do add new information Vision does not lose its default information – unless you delete it of course!

Recording your notes

Vision provides a special feature in the Materia Medicas section of the system. This is called **My Notes**. When browsing the materia medicas you will observe that the very first book position is always a special section called **My Notes**. This is an area reserved for your use. You can type or copy in any information you desire all in one central location for you to reference in the future.

As default Vision provides 4 sections to get you started. To use one of these pre-supplied areas just click your mouse on it and start typing!

You may also add an unlimited number of new books/chapters/remedies into **My Notes**.

To add another book (or section or area) click the right mouse button in the My Notes section of the left explorer tree as above, type in a name and voila!
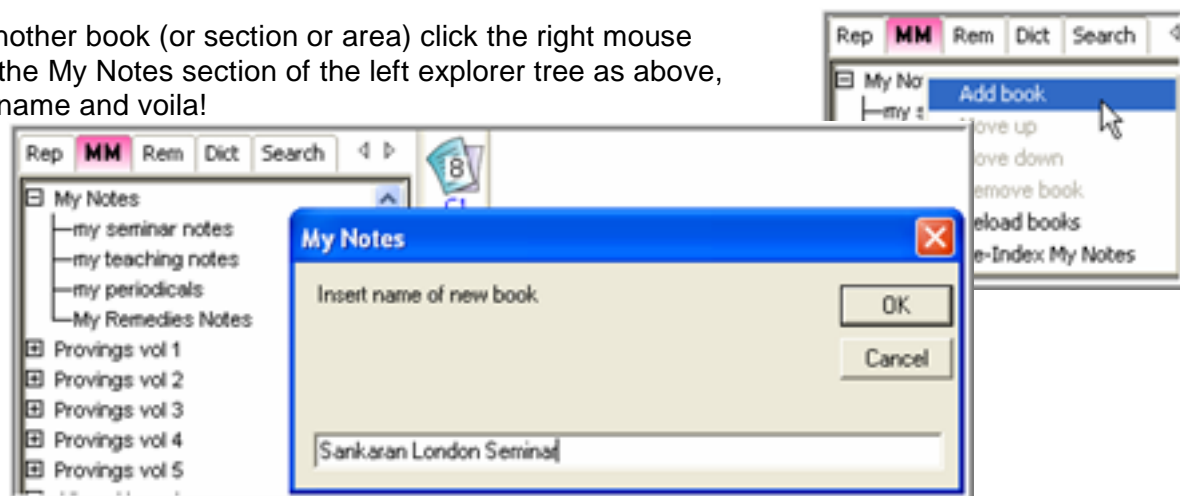
You may also change the position of any book by moving it up and down the list and you can also rename any new item. Remember to click the right mouse button onto MyNotes

When typing in new information you have full control over the appearance and size of the text. To vary the style of text click the right mouse button on it and choose Font or Colour as desired.

Similarly you may paste in any 'book' text or graphics from any other source e.g. Microsoft Word.

Each book slot in My Notes is actually a Microsoft Word document. You can use each book slot exactly as you would any Word document.

Just imagine how your personal collection of notes, seminar and lecture reports will grow over the years!

After you have added new information into My Notes you should take time to index all the words. This will then allow Vision to include you're my Notes entries whenever you perform a materia medica search in the future!

Vision should ways remind you to re-index MY Notes when you quit Vision – but it is good practice to do it yourself right away. After all what would happen if you suffered a power failure? Do this by right clicking the mouse on My Notes and choosing Re-index My Notes.

Making repertory additions

Although Vision provides several repertories to work with you can also create your own repertory of additions. This is called **My Repertory** in VISION.

You may copy rubrics from any other repertory into My Repertory. Alternatively you can save any rubric on a clipboard into My Repertory. This is a very interesting feature. It means that you can, for example, save any combined or virtual rubric you have created following a materia medica search into your own My Repertory. Then it will instantly available as a rubric for repertorisation.

You may amend any rubric by changing its name and you may add or delete remedies and their grades. You may create brand new rubrics. However *you cannot add new remedies into the Vision database of remedies*.

There is only 1 chapter position in My Repertory to contain all your rubric additions. This means you should make sure that the rubric names you type are nicely typedso that Vision can sort into alphabetical order for you.

Adding a brand new rubric into My Repertory

Click the menu Edit and choose item My Repertory. This will display:

Type the name of your rubric in the first line. We recommend the very first word you type in represents the part of the body related to the rubric e.g. MIND. As **My Repertory** is sorted alphabetically this will ensure all similar rubrics are displayed together for easy reference.

Choose the remedies to be included in the new rubric from the **Available** list in the left side using the mouse to scroll the list as needed. Double click a remedy to move it into the **Selected** list. Each remedy selected will be allocated a default grade of 1. To vary this highlight a remedy

in the Selected list by clicking it once with your mouse and use the left and right arrow grade incrementor to set the appropriate grade.

If you make a mistake and select a wrong remedy double click it with your mouse to remove it from the Selected list.
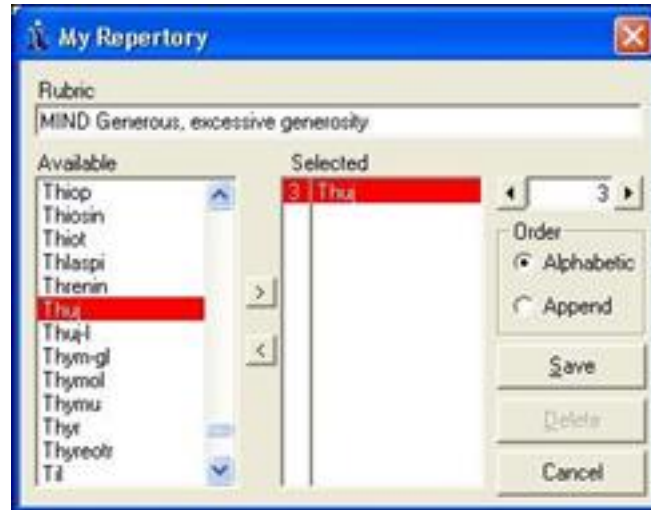
When the rubric is as desired click the Save button. Vision will then record the new rubric and will take a few seconds to re-order all of the additions alphabetically. Please be patient! If you have made a large number of additions it can take a while for Vision to sort them alphabetically.

Copying a rubric from another repertory

You may want to add more remedies into a rubric that exists in another repertory. Or you may want to amend grades of existing remedies.

This is done by identifying the rubric concerned and copying it into My Repertory ready for changes. You cannot amend any repertory data pre-supplied – you must first copy it into My Repertory.

Browse the desired repertory and chapter and have the desired rubric visible on the screen. Click your mouse on it to highlight it. Then click the right mouse button and choose My Repertory like so:

Vision will open up the rubric ready for you to make your changes:
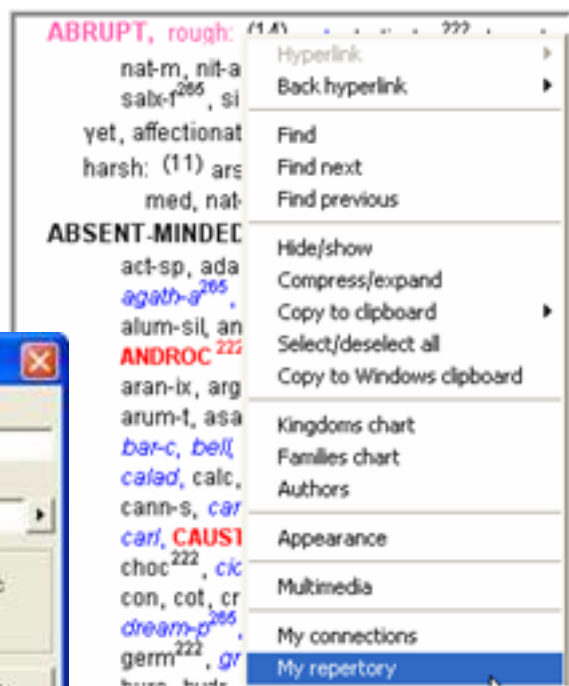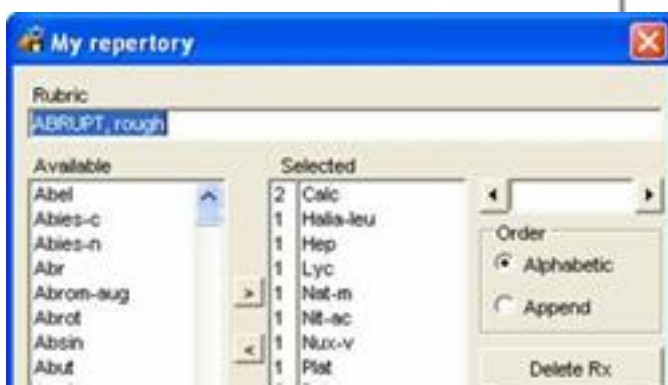
You may amend the rubric description itself (once again we suggest you always add the body part or chapter name in
front of the rubric) and you may amend the remedies currently present (selected) in the rubric. You may also add new remedies into this rubric.

When the rubric is as desired click the Save button to record this in My Repertory.

Copying a rubric from a clipboard
Simply highlight any rubric on any clipboard and right click it. Choose My Repertory and that rubric will be copied into My Repertory for you ready to be edited or saved.

Amending My Repertory
By browsing My Repertory and selecting a rubric you may amend or edit it. The process for doing this is exactly as described above. The only additional feature that will become active is the Delete button. This allows you to remove a rubric you previously created in My Repertory.

Making repertory connections
Vision provides different ways to search the repertories. As you know you can search for words and synonyms. You can search using Theme words.

Vision also lets you search the repertories using words or themes *you* setup. This is called **My Connections**.

Essentially you input words or terms that describe groups of rubrics. Then you tell Vision which rubrics are connected to which words. Once this is done you can search the repertories using these connecting words.

Creating new connection words
While browsing the repertory either click the right mouse button or click the Edit menu. Then choose the option **My Connections**. Vision will display a list of current connection words.

Click the Add new word button and type in your new word or term

Click Save to make the new connection.

Associating a rubric with a connection word
You may associate any rubric in any chapter of any repertory with any connection word. Rubrics can be associated with up 10 different connection words.

To make a connection browse the repertory and locate

a rubric. Highlight the rubric and click the right mouse
button and choose My Connections.

Vision will display the My Connections
screen. If the selected rubric has
already been associated with a
connection word then this word will be
displayed in the Selected Connections
list.

To associate the rubric with a
connection word first highlight the
desired word in the Available
connections list and then click the
Connect button. The new connection
will be listed under Selected
connections.
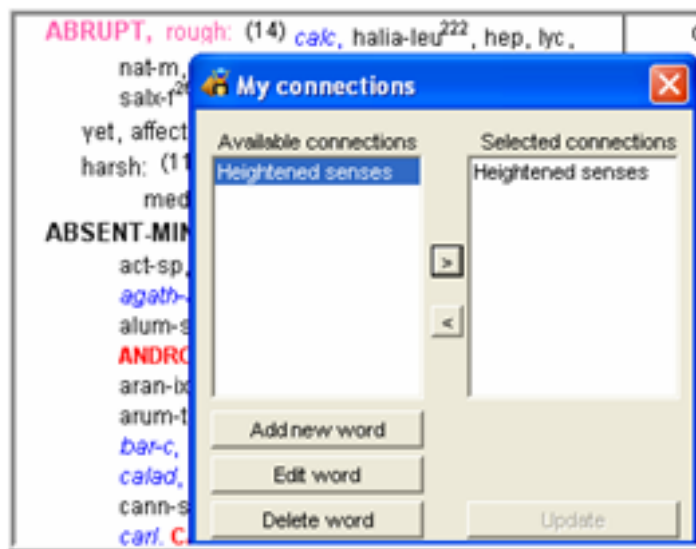
You may use this screen to add new words and to remove or create new
connections. Click Update to store.

Search using My Connections
Once you have set up some connections of your own searching with them is a breeze!

Using the normal search screen click the For My Connections option and Vision will display
a list of available connection words to search with:
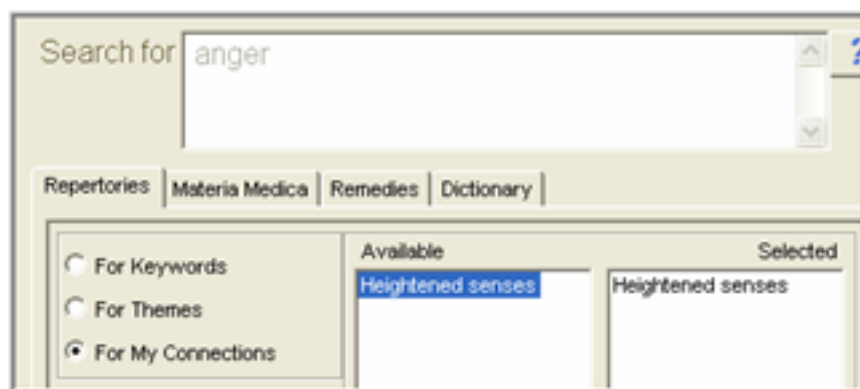
Select the connection word or words you wish to search with by double clicking the mouse on
them. You may select up to 10 connection words to search with at any one time.

Click the Search button and Vision will quickly find all rubrics connected to your selected

connections and display them for you.

Your imagination and creativity are the only limits on what you can connect!

Enhancing the synonyms file to aid searching

To help you search the repertories and materia medicas more effectively Vision uses cross-references and synonyms of words. This is very helpful. If you type in the word ALONE as a search word and tell Vision to use Synonyms then Vision will not only search for all entries of the word ALONE but it will also look for the words SOLITARY, ABANDONED and so on.

This is because Vision contains a huge list of repertory and materia medica words and a list of possible cross-references for **each word**.

Vision allows you to expand the list of cross-references and synonyms and build up your own super-efficient search engine!

You can do this from the Search screen. There is a button provided labelled **View/edit synonyms**.

Clicking this provides access to the long list of words Vision knows about:

Known words are listed in the left column. Clicking on a known word displays its list of cross-references and synonyms in the right column.

Interpret this screen as follows:

If I type a search word into Vision that exists in the left column of known words Vision will also search for all the words listed in the right column.

Therefore you may add completely new words into the left column. And for each known word you can add to or amend the list of its cross references in the right column.

You can improve and personalize your repertory search technique by setting up terms you use all the time! You could include modern medical terminology and cross reference these to rubric words saving yourself lots of time and energy!

Taking Care of your VISION

Backups

Vision is a very expandable system. Should you take advantage of this and make your own additions and amendments then you need to make secure copies on a regular basis.

If you do not take backup copies of your changes and your computer crashes you may lose all your work. Don't take a chance – backup regularly!

Taking a backup
Vision helps you take backups. All you have to do is click the File menu and choose the Backup/Restore option

Vision expects you to take backups of everything that may have changed – that is why everything is ticked in the top half of the screen. You may uncheck any box you like to make Vision only backup specific items.

When you click the Backup button Vision will take a copy of all items that have changed and compile them into a special archive file. This special file is called a ZIP file and is a computer industry standard format.

Vision prompts you for a location on your computer to store this archive file. It also allocates the file a default name. You may save the archive file to your hard disk, floppy disk, or any other removable media (e.g. CD drive) that is present on your computer. If you do save to your computer hard disk please ensure you take a regular backup copy of the file so it is stored safely.

Restoring data
Should you need to restore any file data we suggest you use Vision to do this for you. Use the Backup/Restore screen as described above. Check the items you want to restore and click the Restore button. When prompted by Vision locate the desired archive file you want to restore from and Vision will take care of the rest for you making sure files get restored and copied into their correct locations.

Caution! If you restore you will overwrite files currently in your Vision system.

Archive Files
The archive files Vision creates are standard ZIP files. You may use other zip software e.g. Winzip to inspect or modify the contents of an Vision archive file.

Exchanging information with other Vision users

Any changes or additions you make to your Vision system can be shared with other Vision users.

Here are some brief ideas for sharing and exchanging information with other Vision users:

- One person may attend a lecture and type some notes. These can be stored in the **My Notes** section of Vision and shared.

- A teacher may create a set of **remedy keynotes** or remedy information that replaces those supplied within VISION. These can easily be shared with other Vision users.

- An enthusiastic repertory user may create a set of **My Connection** words to search the repertory with and share this with colleagues.

- Another may create a set of rubric additions in **My Repertory** and share this with others.

- Someone may expand and refine the **cross references and synonyms** used within Vision and share it with colleagues.

- A school or college may compile a set of remedy teaching videos and distribute these to their students who use VISION.

There are many additional ways of creating and sharing information with other Vision users.

Having created new information within Vision the best way to share this information with others is to take a backup using the facility provided within Vision (see previous section). This will create an archive (zip) file. This file can be supplied to any other Vision user.

The recipient simply uses the restore function within Vision to load the new information into their system.

Easy!