

# Rosen Chiropractic

## Alternative Health Care

### WHY THE ACOUSTIC CARDIOGRAPH?

The ACG was developed in 1937 by Dr. Royal Lee, founder of Standard Process Nutritional Products. The ACG records the *sounds* of the heart as the blood moves through the various chambers, valves, and vessels. The “graph signature” reflects the opening and closing of the valves, the contraction and strength of the heart muscle, and the efficiency of the movement of blood.

These extremely accurate “signature graphs” of the ACG provide us with information showing us:

- Whether your heart function is optimal or less than optimal.
- If your body’s chemistry is balanced.
- If your body’s nutritional deficiencies are causing stress on your heart.
- What specific nutritional support your body is requiring.

In contrast, the electrocardiograph (EKG) records only the surface *electrical* impulse as it moves through the nerves of the heart tissue. The EKG primarily indicates if the heart tissue (or nervous tissue network) has undergone any trauma or permanent damage on an electrical basis. It will not discriminate valvular function, muscle efficiency, etc. The EKG’s sole purpose is to diagnose disease. In contrast, the ACG looks at function as a window to health and longevity.

***“THE HEART IS THE MOST REFLECTIVE MUSCLE OF BALANCED NUTRITION OR MALNUTRITION, SOMETHING THIS COUNTRY HAS A HARD TIME ACCEPTING.”***

**Dr. Royal Lee, 1939**

The ACG makes a picture of heart sounds and enables the doctor to “hear” by “seeing” heart *function* on the graph. We can measure the heart sound as a reflection of balanced body chemistry, nutrition, and overall function of your body’s systems.

In other words, the “graph signature” is a reflection of the heart sounds. The heart sounds are a reflection of the function of the heart. The function of the heart is affected by many of our systems, i.e., adrenal, liver and gall bladder, circulatory and kidney function, etc. Heart function is also affected by our nutrition, i.e., vitamins, minerals and essential fatty acids, etc.

Each system’s dysfunction and nutritional deficiency has a characteristic “graph signature”. By using this extremely accurate tool, the ACG, we can easily detect such dysfunctions and deficiencies thereby helping us make appropriate recommendations and monitor a practice member’s progress throughout care.

It is important to emphasize that the ACG reflects the *efficiency* of heart function. The doctor is now allowed to evaluate the practice member, focusing not on the degree of existing damage (i.e., with the EKG with completely different intent and purpose), but on *prevention* and supporting the practice member to achieve optimum health and well being.

## Why just survive when you can *THRIVE*?



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Ph (808) 878-8384 fax (808) 878-8385 59 Holomakani Dr. Kula, Hi. 96790  
Email [drrosen@rosencoaching.com](mailto:drrosen@rosencoaching.com) Visit our website at  
[www.rosencoaching.com](http://www.rosencoaching.com)

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