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cDESIGN, CDL process

select any option

1.for-You 2.your business 3.for-sports person/team 4.for health team 5. for Law& Order

PROCESS 1 ASSESSMENT

GENERAL

1. Location?,NAME OF PLACE, STATE, COUNTRY(all drop down menu)

2. Name (dropdown-Person,Business team, Sports team,, Health, Mental health, Law & order)

ACTIVITY

1.What kind of activity? Indoor, Outdoor, Office, Factory, business, Study, Sports, health, Law&order

2.Physical Activity, no of hours/day ?

3.Mental Activity, no of hours/day ?

STRESS

1.Stressful Physical Activity, no of hours/day?

2.Stressful Mental Activity, no of hours/day?

FOCUS

1.What affects more? People/Work/weather/environment?

2.Which one make stress? Work/Sports/Business targets ? no of hours/day ?

3.What makes divert/distract attention/focus/concentration? no of hours/day ?

4.Whether work/business/sports environment conducive? comfortable? Physically/Mentally? no of hours/day ?

FITNESS



1.Whether physical or mental fitness issues affecting your performance? no of hours/day ?

THOUGHTS WORDS DEEDS

1.Past/Present/Future thoughts affect your performance? no of hours/day ?

2.Past/Present/Future words affect your performance? no of hours/day ?

3.Past/Present/Future deeds affect your performance? no of hours/day ?

4.Whether you have so many thoughts going on one time? no of hours/day ?

5.Whether able to focus on singular beneficial thoughts for considerable amount of time? no of hours/day ?

6.Whether able to focus thoughts on challenging environment also? no of hours/day ?

MIND SENSES DESIRES

1.Whether able to control your Mind ? no of hours/day ?

2.Whether able to control your Senses ? no of hours/day ?

3.Whether able to control your Desires ? no of hours/day ?

4.Whether able to detach yourself from any material thing-people, devices etc certain amount of time and focus? no of hours/day ?

PROCESS 2

MEASURMENTS

BRAIN WAVES

1.Normal Brainwaves ?Frequency Time range, no of hours/day?

2.Abnormal Brainwaves ?Frequency Time range, no of hours/day?

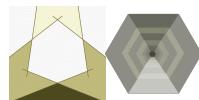
3.Brain Wave (abnormal)? Frequency 13-40 hz?, no of hours/day?

4.Brain Wave (normal) Frequency 0-13 hz? Time-No.of hours/day?

HEART RATE

1.Normal Heart Rate? Time range, (No of Hours/day)

2.Abnormal Heart Rate ? Time range, (No of Hours/day)



3.Heart Rate Normal 60-100 (beats/min) ?Time-No.of hours/day

4.Heart Rate Abnormal above 100 (beats/min)? Time-No.of hours/day

BLOOD PRESSURE

1.Normal Blood pressure? Time range (No of Hours/day)

2.Abnormal Blood pressure? Time range (No of Hours/day)

3.Normal Blood pressure 90 60 , 140 90 mmHg? Time range (No of Hours/day)

4.Abnormal Blood pressure, less than 90 60, More than 140 90 ? Time range (No of Hours/day)

BLODD OXYGEN

1.Normal Blood Oxygen Sp02 ? Time range (No of Hours/day)

2.Abnormal Blood Oxygen Sp02? Time range (No of Hours/day)

3.Normal Blood Oxygen Sp02 95-100% ? Time range (No of Hours/day)

4.Abnormal Blood Oxygen Sp02 Below 89%? Time range (No of Hours/day)

PROCESS 3 ANY SMART SYSTEM USED?

1.Efficiency -Mental/Physical Improvement? any measures used, no of hours/day ?

2.Any Yoga, Meditation or any other similar things practised daily or regular basis? no of hours/day ?

3.Any Smart App/System? used no of hours/day ?

4.Mind/Thought control ? measures any no of hours/day ?

(For Calculations, ME (mental efficiency)- 25-50%,

less than50% of time/day, ME=50%,more than 50% of time/day, ME=25% ,

if question is yes, ME=50%, No-25%

12 hour, threshold, benchmarks,