BATHROOM EMERGENCY GUIDE / BOOK 11 OF 11

The Copper Book — Reference

Find the stable address, source, map, figure, formula, or index.

Actual emergency?
Stop reading and use the local emergency number. In the EU, call **112**. If calling is unsafe, get to a safer place or ask a trusted person to call.

What this book is for

- What resource am I locating?
- What owns it?
- Which source or stable ID verifies it?

What this book does	What it hands off
Locate stable references, figures, forms, services, fields, formulas, sources, and build evidence.	Reference material supports a route; it is not an emergency reading queue or a substitute for action.

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Use **R — Reference** when you need an address, a map, a formula, a figure, a form, a service, a field, a source, or a complete text route. It exists to shorten a search, not to become a corridor you have to walk down before doing anything. In an emergency use the owning route or service first, and come back here when you need to find, compare, cite, or check something.

Stable references — addresses that survive editing [ref.1.1]

Canonical references use the form **`[BEG:<guide>:<kind>:<sequence>]`**. For example, `[BEG:C:S:004]` names a Body and First Aid section, `[BEG:T:F:003]` names a detachable Grey Book template, and `[BEG:T:G:006]` names the deployer-completed Location and access figure. In the online guide the reference itself is also the permanent fragment: `#BEG:C:S:004`, `#BEG:T:F:003`, and `#BEG:T:G:006`. Every printed/readable reference is a link to that canonical fragment. The older lowercase anchors such as `#beg-c-s-004` remain compatibility aliases for links already in circulation.

Page numbers and labels such as “calm 1.1.3” remain useful navigation aids, but they are not canonical addresses: inserting a section would silently rename everything after it. Stable IDs stay attached to the resource; retired IDs are kept in the registry rather than recycled for a different thing.

KIND	RESOURCE
S	section
F	template: reusable writable page
G	figure: read-only depiction or deployer-completed local reference
C	professional contact or service
D	deployment field
W	glossary word or term

The source of truth is `src/data/reference_ids.json`; the generated complete view is `src/data/content_index.json`.

Route identity key — code, colour, pattern, and glyph

Use the code and title first. Colour accelerates scanning; the printed pattern and written glyph name carry the identity when colour is unavailable.

ROUTE	PATTERN	GLYPH	SCOPE	DELIBERATE BOUNDARY
O — The Green Book — Body Owner's Manual	pulse	∿	Body observation, ordinary inputs, medication context, fainting prevention, and choosing the next book.	Diagnosis, emergency clearance, and personal dosing.
A — The Amber Book — Responsibility	diamond	◆	Separate immediate harm, repair, consent, dependency, and continuing care.	Does not decide legal liability or replace medical, safety, or social-service routes.
B — The Teal Book — Calm Guide	wave	≈	Reduce alarm and overload enough to notice, choose, and complete one safe action.	Does not explain away bodily red flags, active threats, or unsafe environments.
C — The Red Book — Self Ambulance	cross	+	Route injury and illness and support the body while professional help is arranged.	Does not replace dispatch instructions, clinical diagnosis, or hands-on training.
D — The Blue Book — Safety & No Place	shield	■	Name the unsafe person or place and move toward a confirmed destination with a backup.	Does not provide tactical confrontation advice or treat a suggested destination as confirmed.
H — The Orange Book — Hazards & Disasters	zigzag	⚡	Room, building, air, wiring, and substance hazards, area-scale natural events, and official-warning response.	Does not authorize re-entry, improvised chemical treatment, or work on live systems. It cannot predict a live hazard.
Z — The Olive Book — Zombie Guide	crosshatch	╳	Keep essential household functions visible, assigned, backed up, and reviewed during disruption.	Does not replace official warnings, clinical device plans, or local evacuation instructions.
P — The Indigo Book — Professional Support	dots	•	Match a named problem to the service able to change it, then prepare a usable handoff and backup.	Does not guarantee service availability, accommodation, treatment, legal outcome, or response time.

ROUTE	PATTERN	GLYPH	SCOPE	DELIBERATE BOUNDARY
S — The Purple Book — Social Field Guide	speech	◤	Social absence, communicatio n scripts, re-entry, boundaries, and graceful exits.	Active threats and clinical treatment; those hand off to Blue, Red, or Indigo.
T — The Grey Book — Templates & Forms	form grid	▦	Externalize facts, plans, logs, and handoffs that should not depend on working memory.	A completed form does not prove safety, competence, consent, or current local accuracy.
R — The Copper Book — Reference	solid	▬	Locate stable references, figures, forms, services, fields, formulas, sources, and build evidence.	Reference material supports a route; it is not an emergency reading queue or a substitute for action.

Template catalogue — write when needed

A template is a reusable working page. Every template carries a title, stable reference, and short description before its writable content.

TEMPLATE · WRITE [BEG:T:F:003]

Emergency call card

A writable launch pad for the facts a dispatcher needs.

Privacy: shared-safe

Related: [BEG:A:G:005] Four responsibility clocks separate live harm, continuing effects, repair, and ongoing care.
[BEG:P:G:002] Six-field professional call packet: where, what, when, current state, danger, and callback number
[BEG:C:G:001] First-aid triage overview

TEMPLATE · WRITE [BEG:T:F:005]

Feedback and field-note sheet

Corrections, failed routes, local adaptations, and useful inventions.

Privacy: do-not-send-private-medical-data

Related: [BEG:R:G:001] Evidence labels used throughout the guide
[BEG:R:G:002] Two-pass guide topology with dependency modifiers

TEMPLATE · WRITE [BEG:T:F:006]

Five-minute values bridge

One value translated into one bounded next action.

Privacy: private-or-shared

Related: [BEG:A:G:004] Five-step repair sequence: stop, stabilize, tell, repair, and follow up.
[BEG:A:G:003] Four-part boundary map for requested support, refusal, uncertain capacity, and immediate danger.
[BEG:B:G:004] Overload control map showing intrinsic, avoidable, and stress loads with the headroom inequality

TEMPLATE · WRITE [BEG:T:F:011]

Observation and vital-sign log

Changes and actions recorded for a clinician or dispatcher.

Privacy: private

Related: [BEG:O:G:002] First 90-second body, room, and attention scan
[BEG:C:G:001] First-aid triage overview

TEMPLATE · WRITE [BEG:T:F:012]

Quiet activity sheet

Low-demand drawing, building, and folding prompts.

Privacy: shared-safe

Related: [BEG:B:G:002] Three optional breathing patterns

TEMPLATE · WRITE [BEG:T:F:013]

Blank remarks and handoff sheet

Blank space for observation, action, result, and next handoff.

Privacy: private-or-shared

Related: [BEG:A:G:004] Five-step repair sequence: stop, stabilize, tell, repair, and follow up.

TEMPLATE · WRITE [BEG:T:F:015]

First-aid figure usability review

Usability test for action, sequence, geometry, and limits.

Privacy: anonymous-or-consented

Related: [BEG:C:G:001] First-aid triage overview
[BEG:C:G:004] Adult chest-compression location using head, chest, hips, and feet as landmarks
[BEG:C:G:003] AED action sequence: turn on, attach pads, clear for analysis or shock, resume CPR
[BEG:C:G:005] Five-step recovery-position orientation

TEMPLATE · WRITE [BEG:T:F:016]

Installation and wet-room audit

Wet-room readability, reach, privacy, glare, and physical handling.

Privacy: shared-safe

Related: [BEG:R:G:002] Two-pass guide topology with dependency modifiers

TEMPLATE · WRITE [BEG:T:F:017]

Maintenance and replacement inspection

Damage, stale facts, used supplies, and replacement actions.

Privacy: shared-safe

Related: [BEG:Z:G:002] Household continuity systems and ownership fields

TEMPLATE · WRITE [BEG:T:F:018]

Route drill and timing log

Calm-time timings and friction from finding to handoff.

Privacy: do-not-use-real-private-crisis-details

Related: [BEG:R:G:002] Two-pass guide topology with dependency modifiers

Deployment customization index

STABLE REFERENCE	GROUP	FIELD	REQUIRED	PRIVACY	EXAMPLE
[BEG:T:D:001]	safe-place	Accessible / powered safe destination	when relevant	permission-required	Confirm mobility, communication, power and care needs
[BEG:T:D:002]	location	Street address, city, country	yes	shared-safe	Example Street 12, 52000 Exampletown, Germany
[BEG:T:D:003]	continuity	Charged light, phone charger, power bank locations	yes	shared-safe	Top shelf in labelled pouch
[BEG:T:D:004]	access	Preferred and backup communication channels	when relevant	permission-required	Speech, writing, sign, yes/no card, relay
[BEG:T:D:005]	location	Coordinates	when relevant	shared-safe	50.0000, 6.0000

STABLE REFERENCE	GROUP	FIELD	REQUIRED	PRIVACY	EXAMPLE
[BEG:T:D:006]	identity	Copy/site name	yes	shared-safe	Upstairs bathroom / family copy
[BEG:T:D:007]	support	Local psychiatric crisis / social psychiatric service	when relevant	shared-safe	Name, number, hours, access channel
[BEG:T:D:008]	location	Safe door-unlocking or key handoff instruction	when relevant	context-sensitive	Unlock front door if dispatcher asks; do not print hidden key locations
[BEG:T:D:009]	location	Height above sea level	when relevant	shared-safe	180 m
[BEG:T:D:010]	continuity	First-aid kit and AED location	yes	shared-safe	Hall cupboard; nearest public AED
[BEG:T:D:011]	location	Optional floor/exit map	when relevant	context-sensitive	Mark room, two exits, extinguisher, meter shutoffs only where safe
[BEG:T:D:012]	building	Gas-network emergency number	yes	shared-safe	Call from outside
[BEG:T:D:013]	medical	GP / regular practice	when relevant	permission-required	Name, number, hours
[BEG:T:D:014]	medical	Local emergency department and accessible route	when relevant	shared-safe	Name, address, transport note
[BEG:T:D:015]	safe-place	Municipal emergency housing — daytime	when relevant	shared-safe	Office, number, required documents
[BEG:T:D:016]	safe-place	Municipal emergency housing — after hours	when relevant	shared-safe	Confirmed after-hours route
[BEG:T:D:017]	access	Languages and interpretation route	when relevant	permission-required	German/English; trusted interpreter only with consent
[BEG:T:D:018]	identity	Deployer or maintainer	yes	shared-safe	First name or role
[BEG:T:D:019]	continuity	Medication/ allergy list location	when relevant	private	Sealed private card, not a public wall list

STABLE REFERENCE	GROUP	FIELD	REQUIRED	PRIVACY	EXAMPLE
[BEG:T:D:020]	safe-place	Evacuation meeting point	yes	shared-safe	Across the street beside the post box
[BEG:T:D:021]	medical	Pharmacy and night-service lookup	when relevant	shared-safe	Local pharmacy; official night-service route
[BEG:T:D:022]	medical	Regional poison information centre	yes	shared-safe	Verified centre and number
[BEG:T:D:023]	continuity	Essential powered device, runtime, approved backup	when relevant	private	Device; remaining runtime; clinical/vendor plan
[BEG:T:D:024]	identity	Next local review date	yes	shared-safe	2026-10-26
[BEG:T:D:025]	location	Building, floor, room, entrance, bell, access route	yes	shared-safe	Rear building, 2nd floor, right; bell Smith
[BEG:T:D:026]	comfort	Low-demand safe places and activities	when relevant	private-or-shared	Balcony chair, comic, familiar playlist, simple drawing
[BEG:T:D:027]	access	Vision, hearing, mobility, fatigue and sensory adaptations	when relevant	permission-required	Large print, high contrast, chair, low-light route
[BEG:T:D:028]	installation	Additional deployables	yes	shared-safe	Pencil, clipboard, sleeve, light, charger, current first-aid leaflet
[BEG:T:D:029]	support	Trusted nearby person and backup	yes	permission-required	Name, number, availability
[BEG:T:D:030]	building	Building utility / caretaker emergency route	when relevant	shared-safe	Name, number, after-hours backup
[BEG:T:D:031]	support	Veterinary emergency service	when relevant	shared-safe	Number, hours, transport
[BEG:T:D:032]	safe-place	Local specialist violence support / shelter	when relevant	context-sensitive	Use safe device; include backup

STABLE REFERENCE	GROUP	FIELD	REQUIRED	PRIVACY	EXAMPLE
[BEG:T:D:033]	support	Youth emergency service	when relevant	shared-safe	Local day and after-hours route

Professional contact and service index

STABLE REFERENCE	SERVICE	NUMBER / LOCAL FIELD	PURPOSE	AVAILABILITY
[BEG:P:C:001]	Poison information centre — Berlin	030 19240	Poisoning advice; severe symptoms or immediate danger remain 112.	verify current service details
[BEG:P:C:002]	Poison information centre — Bonn	0228 19240	Poisoning advice; severe symptoms or immediate danger remain 112.	verify current service details
[BEG:P:C:003]	Poison information centre — Erfurt	0361 730730	Poisoning advice; severe symptoms or immediate danger remain 112.	verify current service details
[BEG:P:C:004]	Poison information centre — Freiburg	0761 19240	Poisoning advice; severe symptoms or immediate danger remain 112.	verify current service details
[BEG:P:C:005]	Poison information centre — Göttingen	0551 19240	Poisoning advice; severe symptoms or immediate danger remain 112.	verify current service details
[BEG:P:C:006]	Poison information centre — München	089 19240	Poisoning advice; severe symptoms or immediate danger remain 112.	verify current service details
[BEG:P:C:007]	Poison information centre — Mainz	06131 19240	Poisoning advice; severe symptoms or immediate danger remain 112.	verify current service details
[BEG:P:C:008]	police	110	active crime, violence, or police danger	24/7
[BEG:P:C:009]	rescue service and fire brigade	112	acute or potentially life-threatening emergencies, fire, smoke, explosion, suspected gas release	24/7

STABLE REFERENCE	SERVICE	NUMBER / LOCAL FIELD	PURPOSE	AVAILABILITY
[BEG:P:C:010]	public-administration information line	115	identifies the responsible public authority; not an emergency or guaranteed-accommodation line	Monday to Friday, 08:00–18:00
[BEG:P:C:011]	violence against women helpline	116 016	confidential support for women affected or threatened by violence and people supporting them	24/7
[BEG:P:C:012]	child and youth helpline	116 111	anonymous support for children and young people; published service hours apply	verify locally
[BEG:P:C:013]	medical on-call service	116 117	urgent medical problems that cannot wait but are not life-threatening	24/7
[BEG:P:C:014]	TelefonSeelsorge	116 123	confidential crisis conversation; acute danger remains 112	24/7
[BEG:P:C:015]	accessible emergency accommodation or powered care destination	local value required	locally confirmed destination matching mobility, communication, medication, power, caregiver, child, or animal needs	verify locally
[BEG:P:C:016]	local gas-network emergency service	local value required	gas odour or suspected network fault; call only from outside	verify locally
[BEG:P:C:017]	violence against men helpline	0800 1239900	anonymous support for men affected by violence and people supporting them; published service hours apply	verify locally
[BEG:P:C:018]	municipal emergency accommodation / homelessness service	local value required	local authority responsible for emergency accommodation; day and after-hours routes vary	verify locally

STABLE REFERENCE	SERVICE	NUMBER / LOCAL FIELD	PURPOSE	AVAILABILITY
[BEG:P:C:019]	nationwide women's refuge search	local value required	directory and availability hints; placement must be confirmed directly and the directory is not complete	verify locally
[BEG:P:C:020]	local youth emergency service / Jugendnotdienst	local value required	local child-protection and safe-place route outside ordinary office hours	verify locally

Figure catalogue — read-only references

A figure is read-only during use. It may be an authored depiction or a local reference sheet completed and dated by the deployer before installation. Every figure carries a title, stable reference, and short description.

FIGURE · READ [BEG:A:G:001]

Two reproductive-health facts with different denominators

How can lifetime infertility prevalence and postpartum-psychosis incidence be shown without pretending they share a denominator?

FIGURE · READ [BEG:A:G:002]

Care continuity loop showing essentials, warning signs, owner, backup, and next review.

Which five fields keep ongoing care usable when the primary caregiver is absent?

FIGURE · READ [BEG:A:G:003]

Four-part boundary map for requested support, refusal, uncertain capacity, and immediate danger.

How do requested support, refusal, uncertain capacity, and immediate danger change the first posture?

Related: [BEG:T:F:006] Five-minute values bridge

FIGURE · READ [BEG:A:G:004]

Five-step repair sequence: stop, stabilize, tell, repair, and follow up.

How do stop, stabilize, tell, repair, and follow up form a revisable accountability sequence?

Related: [BEG:T:F:006] Five-minute values bridge
[BEG:T:F:013] Blank remarks and handoff sheet

FIGURE · READ [BEG:A:G:005]

Four responsibility clocks separate live harm, continuing effects, repair, and ongoing care.

Which of four responsibility clocks owns the next useful action?

Related: [BEG:T:F:003] Emergency call card

FIGURE · READ [BEG:B:G:001]

Four-channel alarm map separating sensation, emotion, prediction, and urge

How can an anxiety bundle be separated into observable sensation, emotion, prediction, and urge channels?

FIGURE · READ [BEG:B:G:002]

Three optional breathing patterns

How do the three optional breathing patterns differ in timing?

Related: [BEG:T:F:012] Quiet activity sheet

FIGURE · READ [BEG:B:G:003]

What the 2023 breathwork trial actually tested

What did the breathwork trial actually compare and measure?

FIGURE · READ [BEG:B:G:004]

Overload control map showing intrinsic, avoidable, and stress loads with the headroom inequality

Which load terms can be reduced, supported, or offloaded when conceptual load exceeds current capacity?

Related: [BEG:T:F:006] Five-minute values bridge

FIGURE · READ [BEG:B:G:005]

One cut-off, different observed accuracy

How did GAD-7 accuracy at cut-off 10 differ between its original study and a pooled diagnostic review?

FIGURE · READ [BEG:B:G:006]

What the sleep-restriction study actually assigned

What time-in-bed conditions and exposure durations did the controlled sleep study compare?

FIGURE · READ [BEG:C:G:001]

First-aid triage overview

What is the first-aid sequence from scene safety through escalation and monitoring?

Related: [BEG:T:F:003] Emergency call card
[BEG:T:F:015] First-aid figure usability review
[BEG:T:F:011] Observation and vital-sign log

FIGURE · READ [BEG:C:G:002]

Time is brain — a model, not a bedside meter

How does the literature-derived untreated-stroke model accumulate estimated neural loss over sixty minutes?

FIGURE · READ [BEG:C:G:003]

AED action sequence: turn on, attach pads, clear for analysis or shock, resume CPR

What should a lay rescuer do when an AED arrives?

Related: [BEG:T:F:015] First-aid figure usability review

FIGURE · READ [BEG:C:G:004]

Adult chest-compression location using head, chest, hips, and feet as landmarks

Where is the centre of an adult chest relative to the head, hips, and feet?

Related: [BEG:T:F:015] First-aid figure usability review

FIGURE · READ [BEG:C:G:005]

Five-step recovery-position orientation

How do the five recovery-position movements relate spatially?

Related: [BEG:T:F:015] First-aid figure usability review

FIGURE · READ [BEG:D:G:001]

Communication-access adaptations

Which communication adaptation helps with which barrier?

FIGURE · READ [BEG:D:G:002]

Four-way safe-place routing map

Which of four safe-place routes fits the immediate barrier?

FIGURE · READ [BEG:D:G:003]

Six-field safe-place confirmation packet

Which six fields turn a suggested safe place into a usable destination and backup route?

FIGURE · READ [BEG:D:G:004]

Reserve-clock route: identify the essential function, confirm help and a destination, then move before the reserve ends

How should an access or essential-care route use remaining safe runtime without treating it as guaranteed?

FIGURE · READ [BEG:H:G:001]

Essential treatment and powered-device continuity map

What treatment or powered-device dependencies require an early backup route?

FIGURE · READ [BEG:H:G:002]

Five-field hazard handoff card: location, hazard, people, symptoms, and access

Which five fields make an environmental-hazard handoff usable from a safe place?

FIGURE · READ [BEG:H:G:003]

Environmental hazard override matrix

Which environmental signs override ordinary symptom routing?

FIGURE · READ [BEG:H:G:004]

Source-location decision map for indoor, outdoor, and uncertain environmental hazards

How does indoor, outdoor, or uncertain source location change the safe movement decision?

FIGURE · READ [BEG:O:G:001]

Interoception and interpretation loop

How do signal, attention, interpretation, and action produce a revisable loop?

FIGURE · READ [BEG:O:G:002]

First 90-second body, room, and attention scan

What should be observed in body, room, and attention before choosing a route?

Related: [BEG:T:F:011] Observation and vital-sign log

FIGURE · READ [BEG:O:G:003]

Signal, story, and next-question separation

How can a reader separate sensation, fast interpretation, and a route-changing question?

FIGURE · READ [BEG:O:G:004]

Three-minute observation protocol

What happens at each minute of the bounded observation experiment, and when must it stop?

FIGURE · READ [BEG:P:G:001]

Social connection: associations, not personal fate

What adjusted mortality associations did a 2015 longitudinal meta-analysis report for isolation, loneliness, and living alone?

FIGURE · READ [BEG:P:G:002]

Six-field professional call packet: where, what, when, current state, danger, and callback number

Which six facts form a useful first packet for a professional or emergency call?

Related: [BEG:T:F:003] Emergency call card

FIGURE · READ [BEG:P:G:003]

Professional route selector linking a named problem to the system able to change it and a backup or escalation route

Which professional system can change the named problem, and what backup or escalation route remains?

FIGURE · READ [BEG:P:G:004]

Four support-system layers: basic services and security, community and family, focused non-specialized support, and specialized services

How do basic services, community support, focused general support, and specialist services relate?

FIGURE · READ [BEG:R:G:001]

Evidence labels used throughout the guide

How do the guide's evidence labels differ in what they can support?

Related: [BEG:T:F:005] Feedback and field-note sheet

FIGURE · READ [BEG:R:G:002]

Two-pass guide topology with dependency modifiers

How do pass-one hazards, pass-two needs, and modifiers combine?

Related: [BEG:T:F:005] Feedback and field-note sheet
[BEG:T:F:016] Installation and wet-room audit
[BEG:T:F:018] Route drill and timing log

FIGURE · READ [BEG:T:G:001]

Comfort inventory

Ordinary regulation resources made findable before overload.

Preparation: deployer completes and dates it before installation; readers use the installed copy as reference.

Privacy: shared-safe

Related: [BEG:O:G:002] First 90-second body, room, and attention scan
[BEG:B:G:004] Overload control map showing intrinsic, avoidable, and stress loads with the headroom inequality
[BEG:B:G:002] Three optional breathing patterns

FIGURE · READ [BEG:T:G:002]

Deployment cover and ownership card

Identity, ownership, version, and review date for this copy.

Preparation: deployer completes and dates it before installation; readers use the installed copy as reference.

Privacy: shared-safe

FIGURE · READ [BEG:T:G:003]

Medication, power, and care continuity card

Medication, power, care dependencies, runtime, and approved backup.

Preparation: deployer completes and dates it before installation; readers use the installed copy as reference.

Privacy: private

Related: [BEG:A:G:002] Care continuity loop showing essentials, warning signs, owner, backup, and next review.
[BEG:H:G:001] Essential treatment and powered-device continuity map
[BEG:Z:G:006] Continuity systems are coupled
[BEG:D:G:004] Reserve-clock route: identify the essential function, confirm help and a destination, then move before the reserve ends

FIGURE · READ [BEG:T:G:004]

Household continuity board

Owners, backups, checks, and escalation for essential functions.

Preparation: deployer completes and dates it before installation; readers use the installed copy as reference.

Privacy: shared-safe

Related: [BEG:A:G:002] Care continuity loop showing essentials, warning signs, owner, backup, and next review.
[BEG:Z:G:002] Household continuity systems and ownership fields
[BEG:Z:G:001] Five operational functions for a short crisis meeting
[BEG:Z:G:005] Why everyone-tells-everyone stops scaling

FIGURE · READ [BEG:T:G:005]

Local professional contacts

Verified local names, channels, hours, and backups.

Preparation: deployer completes and dates it before installation; readers use the installed copy as reference.

Privacy: shared-safe

Related: [BEG:A:G:003] Four-part boundary map for requested support, refusal, uncertain capacity, and immediate danger.
[BEG:P:G:003] Professional route selector linking a named problem to the system able to change it and a backup or escalation route
[BEG:P:G:004] Four support-system layers: basic services and security, community and family, focused non-specialized support, and specialized services
[BEG:D:G:002] Four-way safe-place routing map

FIGURE · READ [BEG:T:G:006]

Location and access card

Verified address, access barriers, exits, and meeting point.

Preparation: deployer completes and dates it before installation; readers use the installed copy as reference.

Privacy: shared-safe

Related: [BEG:P:G:002] Six-field professional call packet: where, what, when, current state, danger, and callback number
[BEG:D:G:003] Six-field safe-place confirmation packet

FIGURE · READ [BEG:T:G:007]

Nice-place and low-demand activity map

Preselected reversible places and low-demand activities.

Preparation: deployer completes and dates it before installation; readers use the installed copy as reference.

Privacy: private-or-shared

Related: [BEG:D:G:002] Four-way safe-place routing map

FIGURE · READ [BEG:T:G:008]

Safe-place and exit map

Confirmed destinations, access routes, backups, and escalation.

Preparation: deployer completes and dates it before installation; readers use the installed copy as reference.

Privacy: context-sensitive

Related: [BEG:D:G:002] Four-way safe-place routing map
[BEG:D:G:003] Six-field safe-place confirmation packet
[BEG:D:G:001] Communication-access adaptations
[BEG:D:G:004] Reserve-clock route: identify the essential function, confirm help and a destination, then move before the reserve ends

FIGURE · READ [BEG:Z:G:001]

Five operational functions for a short crisis meeting

Which five functions should a short crisis meeting assign?

FIGURE · READ [BEG:Z:G:002]

Household continuity systems and ownership fields

What must be recorded for each household continuity function?

Related: [BEG:T:F:017] Maintenance and replacement inspection

FIGURE · READ [BEG:Z:G:003]

Coordination scaling from one person to a community

How does coordination change as a group grows?

FIGURE · READ [BEG:Z:G:004]

Priority pyramid for disrupted infrastructure

Which continuity needs should be stabilized before later comforts?

FIGURE · READ [BEG:Z:G:005]

Why everyone-tells-everyone stops scaling

How quickly do possible pairwise communication channels grow as a group grows?

FIGURE · READ [BEG:Z:G:006]

Continuity systems are coupled

Which household-continuity systems name the most dependencies and support the most other systems in the current guide model?

FIGURE · READ [BEG:Z:G:007]

Household drinking and cooking water

How much drinking and cooking water does the BBK planning value imply for one to six people over three and ten days?

Glossary

AED {#beg-r-w-001}

[BEG:R:W:001] — Automated external defibrillator: a device that analyzes the heart rhythm and gives a shock only when its algorithm identifies a shockable rhythm.

Continuity {#beg-r-w-002}

[BEG:R:W:002] — Keeping an essential function operating through a named owner, backup, review time, and escalation route.

CPR {#beg-r-w-003}

[BEG:R:W:003] — Cardiopulmonary resuscitation: chest compressions, with rescue breaths when trained and willing, used when a person is unresponsive and not breathing normally.

Deployer {#beg-r-w-004}

[BEG:R:W:004] — The person who adapts, prints, places, checks, and maintains a local copy of the guide.

Dispatcher {#beg-r-w-005}

[BEG:R:W:005] — The trained call handler in a control centre who gathers information, sends suitable help, and may coach immediate actions.

Interoception {#beg-r-w-006}

[BEG:R:W:006] — Processing signals from inside the body, including sensing, attention, interpretation, prediction, and regulation.

Public reference ID {#beg-r-w-007}

[BEG:R:W:007] — A stable typed address such as [BEG:C:S:004]. The ID stays stable even when page numbers or surrounding sections move.

Reader {#beg-r-w-008}

[BEG:R:W:008] — Any person using the guide in the moment; the reader is never assumed to be the deployer.

Recovery position {#beg-r-w-009}

[BEG:R:W:009] — A stable side-lying position used for an unresponsive person who is breathing normally when movement is not prevented by major trauma.

Red flag {#beg-r-w-010}

[BEG:R:W:010] — A sign or situation that overrides ordinary self-care and changes the route to urgent or emergency help.

Source limit {#beg-r-w-011}

[BEG:R:W:011] — The boundary of what a source, study, protocol, or model can honestly establish.

Triage {#beg-r-w-012}

[BEG:R:W:012] — Prioritizing action by urgency and likely harm; in this guide it is a lay routing aid, not a clinical diagnosis.

Vital sign {#beg-r-w-013}

[BEG:R:W:013] — An observation such as breathing, pulse, temperature, oxygen saturation, blood pressure, or glucose that may help a handoff but cannot by itself clear a red flag.

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[BEG:A:G:003]	G	A	Four-part boundary map for requested support, refusal, uncertain capacity, and immediate danger.	—

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[BEG:H:S:030]	S	H	The Orange Book — Hazards & Disasters	06b-natural-disasters.md
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[BEG:O:G:002]	G	O	First 90-second body, room, and attention scan	—
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[BEG:O:S:017]	S	O	Eleven books for when a small room becomes headquarters	00-cover.md
[BEG:O:S:018]	S	O	First 90 seconds — notice before narrating	01-how-to-use.md
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[BEG:O:S:031]	S	O	The gastrointestinal chapter you did not ask for	01b-body-owner-manual.md
[BEG:O:S:032]	S	O	The Green Book — Body Owner's Manual	01b-body-owner-manual.md
[BEG:O:S:033]	S	O	Water, food, and temperature	01b-body-owner-manual.md
[BEG:O:S:034]	S	O	Quick reference — the body router	01b-body-owner-manual.md
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[BEG:P:C:004]	C	P	Poison information centre — Freiburg	—
[BEG:P:C:005]	C	P	Poison information centre — Göttingen	—
[BEG:P:C:006]	C	P	Poison information centre — München	—
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[BEG:R:S:007]	S	R	How to read the evidence figures	08-appendix.md
[BEG:R:S:008]	S	R	Master cross-reference — where problems, routes, forms, and support meet	08-appendix.md
[BEG:R:S:009]	S	R	Master flowchart — complete text version	08-appendix.md
[BEG:R:S:010]	S	R	Mathematical notation legend	08-appendix.md
[BEG:R:S:011]	S	R	Navigation invariant	08-appendix.md
[BEG:R:S:012]	S	R	Offline deployment checklist	08-appendix.md
[BEG:R:S:013]	S	R	Pocket print card	08-appendix.md
[BEG:R:S:015]	S	R	Stable references — addresses that survive editing	08-appendix.md
[BEG:R:S:017]	S	R	4.0.0 — 17 July 2026	09-version-history.md
[BEG:R:S:018]	S	R	4.0.1 — 22 July 2026	09-version-history.md
[BEG:R:S:019]	S	R	4.1.1 — 22 July 2026	09-version-history.md
[BEG:R:S:020]	S	R	4.1.2 — 22 July 2026	09-version-history.md

STABLE REFERENCE	KIND	GUIDE	RESOURCE	CANONICAL SOURCE
[BEG:R:S:021]	S	R	4.2.0 — 22 July 2026	09-version-history.md
[BEG:R:S:022]	S	R	4.3.0 — 22 July 2026	09-version-history.md
[BEG:R:S:023]	S	R	4.3.1 — 22 July 2026	09-version-history.md
[BEG:R:S:024]	S	R	4.4.1 — 22 July 2026	09-version-history.md
[BEG:R:S:026]	S	R	Earlier versions	09-version-history.md
[BEG:R:S:027]	S	R	Version History	09-version-history.md
[BEG:R:S:028]	S	R	Affect labelling and emotional regulation	10-sources.md
[BEG:R:S:029]	S	R	Anaphylaxis	10-sources.md
[BEG:R:S:030]	S	R	Anxiety assessment — GAD-7	10-sources.md
[BEG:R:S:032]	S	R	Bathroom-scale body and perception science	10-sources.md
[BEG:R:S:033]	S	R	Burn assessment	10-sources.md
[BEG:R:S:034]	S	R	Caregiver burnout and overload	10-sources.md
[BEG:R:S:035]	S	R	Child development	10-sources.md
[BEG:R:S:036]	S	R	Cognitive-load theory	10-sources.md
[BEG:R:S:037]	S	R	Cyber incident branch	10-sources.md
[BEG:R:S:038]	S	R	Dunbar numbers — social-brain hypothesis	10-sources.md
[BEG:R:S:039]	S	R	Editorial policy	10-sources.md
[BEG:R:S:040]	S	R	Electricity safety and basics	10-sources.md
[BEG:R:S:041]	S	R	Evidence hierarchy used here	10-sources.md
[BEG:R:S:042]	S	R	First aid and emergency response	10-sources.md
[BEG:R:S:043]	S	R	Game theory and cooperation	10-sources.md
[BEG:R:S:044]	S	R	German crisis and support services	10-sources.md
[BEG:R:S:045]	S	R	Golden hour and trauma medicine	10-sources.md

STABLE REFERENCE	KIND	GUIDE	RESOURCE	CANONICAL SOURCE
[BEG:R:S:046]	S	R	Haemorrhagic shock classification	10-sources.md
[BEG:R:S:047]	S	R	Heart-rate variability	10-sources.md
[BEG:R:S:048]	S	R	Household continuity synthesis	10-sources.md
[BEG:R:S:049]	S	R	Hydration and cognition	10-sources.md
[BEG:R:S:050]	S	R	IASC — mental health and psychosocial support	10-sources.md
[BEG:R:S:051]	S	R	Legal and professional standards	10-sources.md
[BEG:R:S:052]	S	R	Mental health best practices	10-sources.md
[BEG:R:S:053]	S	R	Nutrition and emergency food	10-sources.md
[BEG:R:S:054]	S	R	Olfactory science	10-sources.md
[BEG:R:S:055]	S	R	Ostrom — commons governance	10-sources.md
[BEG:R:S:056]	S	R	Pain assessment — NRS	10-sources.md
[BEG:R:S:057]	S	R	Physiological sigh and breathing research	10-sources.md
[BEG:R:S:058]	S	R	Polyvagal theory	10-sources.md
[BEG:R:S:059]	S	R	Postpartum depression	10-sources.md
[BEG:R:S:060]	S	R	Psychology of masses, group dynamics, and sociology	10-sources.md
[BEG:R:S:061]	S	R	Quantitative evidence figures	10-sources.md
[BEG:R:S:062]	S	R	Reproductive health and medication	10-sources.md
[BEG:R:S:063]	S	R	Routing, hazard, and locale foundations	10-sources.md
[BEG:R:S:064]	S	R	Safe-place, access, and freshness foundations	10-sources.md
[BEG:R:S:065]	S	R	Seneca, Tao, and Stoic philosophy	10-sources.md

STABLE REFERENCE	KIND	GUIDE	RESOURCE	CANONICAL SOURCE
[BEG:R:S:066]	S	R	Sources and Evidence Notes	10-sources.md
[BEG:R:S:067]	S	R	Stress and cortisol research	10-sources.md
[BEG:R:S:068]	S	R	Stroke treatment	10-sources.md
[BEG:R:S:069]	S	R	Survival and emergency preparedness	10-sources.md
[BEG:R:S:070]	S	R	Therapy effectiveness	10-sources.md
[BEG:R:S:071]	S	R	Thermoregulation	10-sources.md
[BEG:R:S:072]	S	R	Water purification and clearing	10-sources.md
[BEG:R:S:073]	S	R	Yerkes–Dodson law	10-sources.md
[BEG:R:S:074]	S	R	4.5.0 — 26 July 2026	09-version-history.md
[BEG:R:S:075]	S	R	4.6.0 — 26 July 2026	09-version-history.md
[BEG:R:S:076]	S	R	4.6.1 — 26 July 2026	09-version-history.md
[BEG:R:S:077]	S	R	4.7.0 — 26 July 2026	09-version-history.md
[BEG:R:S:078]	S	R	4.8.0 — 27 July 2026	09-version-history.md
[BEG:R:S:079]	S	R	4.9.0 — 1 August 2026	09-version-history.md
[BEG:R:S:080]	S	R	4.10.0 — 1 August 2026	09-version-history.md
[BEG:R:S:081]	S	R	4.11.0 — 2 August 2026	09-version-history.md
[BEG:R:S:082]	S	R	4.12.0 — 2 August 2026	09-version-history.md
[BEG:R:S:083]	S	R	4.13.0 — 2 August 2026	09-version-history.md
[BEG:R:S:084]	S	R	4.13.1 — 2 August 2026	09-version-history.md
[BEG:R:S:085]	S	R	The Copper Book — Reference and Useful Loose Ends	08-appendix.md
[BEG:R:S:086]	S	R	4.14.0-alt.1 — 6 August 2026	09-version-history.md
[BEG:R:S:087]	S	R	4.14.0-alt.2 — 6 August 2026	09-version-history.md
[BEG:R:S:088]	S	R	Eight legacy doors inside eleven route identities	08-appendix.md

STABLE REFERENCE	KIND	GUIDE	RESOURCE	CANONICAL SOURCE
[BEG:R:S:089]	S	R	Reference release gate	08-appendix.md
[BEG:R:S:090]	S	R	Attachment, mismatch, and repair	10-sources.md
[BEG:R:S:091]	S	R	Source status — a second axis	10-sources.md
[BEG:R:S:093]	S	R	5.0.0-rc.1 — 8 August 2026	09-version-history.md
[BEG:R:S:094]	S	R	5.0.1 — 11 August 2026	09-version-history.md
[BEG:R:S:095]	S	R	5.0.2 — 11 August 2026	09-version-history.md
[BEG:R:S:097]	S	R	5.1.1 — 12 August 2026	09-version-history.md
[BEG:R:S:099]	S	R	5.1.2 — 14 August 2026	09-version-history.md
[BEG:R:W:001]	W	R	AED	—
[BEG:R:W:002]	W	R	Continuity	—
[BEG:R:W:003]	W	R	CPR	—
[BEG:R:W:004]	W	R	Deployer	—
[BEG:R:W:005]	W	R	Dispatcher	—
[BEG:R:W:006]	W	R	Interoception	—
[BEG:R:W:007]	W	R	Public reference ID	—
[BEG:R:W:008]	W	R	Reader	—
[BEG:R:W:009]	W	R	Recovery position	—
[BEG:R:W:010]	W	R	Red flag	—
[BEG:R:W:011]	W	R	Source limit	—
[BEG:R:W:012]	W	R	Triage	—
[BEG:R:W:013]	W	R	Vital sign	—
[BEG:S:S:001]	S	S	1 — You Left the Room. Now What.	04b-social-field-guide.md
[BEG:S:S:002]	S	S	2 — Communication Templates	04b-social-field-guide.md
[BEG:S:S:003]	S	S	3 — The Mirror Conversation	04b-social-field-guide.md
[BEG:S:S:004]	S	S	4 — Navigating Specific Social Contexts	04b-social-field-guide.md
[BEG:S:S:005]	S	S	5 — Boundary Setting From a Bathroom	04b-social-field-guide.md
[BEG:S:S:006]	S	S	6 — Re-Entry Strategies	04b-social-field-guide.md

STABLE REFERENCE	KIND	GUIDE	RESOURCE	CANONICAL SOURCE
[BEG:S:S:007]	S	S	7 — When Social Emergency Becomes Real Emergency	04b-social-field-guide.md
[BEG:S:S:009]	S	S	The Purple Book — Social Field Guide	04b-social-field-guide.md
[BEG:S:S:010]	S	S	Quick reference — social router	04b-social-field-guide.md
[BEG:T:D:001]	D	T	Accessible / powered safe destination	—
[BEG:T:D:002]	D	T	Street address, city, country	—
[BEG:T:D:003]	D	T	Charged light, phone charger, power bank locations	—
[BEG:T:D:004]	D	T	Preferred and backup communicatio n channels	—
[BEG:T:D:005]	D	T	Coordinates	—
[BEG:T:D:006]	D	T	Copy/site name	—
[BEG:T:D:007]	D	T	Local psychiatric crisis / social psychiatric service	—
[BEG:T:D:008]	D	T	Safe door-unlocking or key handoff instruction	—
[BEG:T:D:009]	D	T	Height above sea level	—
[BEG:T:D:010]	D	T	First-aid kit and AED location	—
[BEG:T:D:011]	D	T	Optional floor/exit map	—
[BEG:T:D:012]	D	T	Gas-network emergency number	—
[BEG:T:D:013]	D	T	GP / regular practice	—
[BEG:T:D:014]	D	T	Local emergency department and accessible route	—
[BEG:T:D:015]	D	T	Municipal emergency housing — daytime	—

STABLE REFERENCE	KIND	GUIDE	RESOURCE	CANONICAL SOURCE
[BEG:T:D:016]	D	T	Municipal emergency housing — after hours	—
[BEG:T:D:017]	D	T	Languages and interpretation route	—
[BEG:T:D:018]	D	T	Deployer or maintainer	—
[BEG:T:D:019]	D	T	Medication/allergy list location	—
[BEG:T:D:020]	D	T	Evacuation meeting point	—
[BEG:T:D:021]	D	T	Pharmacy and night-service lookup	—
[BEG:T:D:022]	D	T	Regional poison information centre	—
[BEG:T:D:023]	D	T	Essential powered device, runtime, approved backup	—
[BEG:T:D:024]	D	T	Next local review date	—
[BEG:T:D:025]	D	T	Building, floor, room, entrance, bell, access route	—
[BEG:T:D:026]	D	T	Low-demand safe places and activities	—
[BEG:T:D:027]	D	T	Vision, hearing, mobility, fatigue and sensory adaptations	—
[BEG:T:D:028]	D	T	Additional deployables	—
[BEG:T:D:029]	D	T	Trusted nearby person and backup	—
[BEG:T:D:030]	D	T	Building utility / caretaker emergency route	—
[BEG:T:D:031]	D	T	Veterinary emergency service	—
[BEG:T:D:032]	D	T	Local specialist violence support / shelter	—

STABLE REFERENCE	KIND	GUIDE	RESOURCE	CANONICAL SOURCE
[BEG:T:D:033]	D	T	Youth emergency service	—
[BEG:T:F:003]	F	T	Emergency call card	07a-templates.md
[BEG:T:F:005]	F	T	Feedback and field-note sheet	07a-templates.md
[BEG:T:F:006]	F	T	Five-minute values bridge	07a-templates.md
[BEG:T:F:011]	F	T	Observation and vital-sign log	07a-templates.md
[BEG:T:F:012]	F	T	Quiet activity sheet	07a-templates.md
[BEG:T:F:013]	F	T	Blank remarks and handoff sheet	—
[BEG:T:F:015]	F	T	First-aid figure usability review	07a-templates.md
[BEG:T:F:016]	F	T	Installation and wet-room audit	07a-templates.md
[BEG:T:F:017]	F	T	Maintenance and replacement inspection	07a-templates.md
[BEG:T:F:018]	F	T	Route drill and timing log	07a-templates.md
[BEG:T:G:001]	G	T	Comfort inventory	07a-templates.md
[BEG:T:G:002]	G	T	Deployment cover and ownership card	07a-templates.md
[BEG:T:G:003]	G	T	Medication, power, and care continuity card	07a-templates.md
[BEG:T:G:004]	G	T	Household continuity board	07a-templates.md
[BEG:T:G:005]	G	T	Local professional contacts	07a-templates.md
[BEG:T:G:006]	G	T	Location and access card	07a-templates.md
[BEG:T:G:007]	G	T	Nice-place and low-demand activity map	07a-templates.md
[BEG:T:G:008]	G	T	Safe-place and exit map	07a-templates.md
[BEG:T:S:001]	S	T	Mini contents	07a-templates.md
[BEG:T:S:002]	S	T	Remarks and handoff sheet	07a-templates.md

STABLE REFERENCE	KIND	GUIDE	RESOURCE	CANONICAL SOURCE
[BEG:T:S:003]	S	T	Take, replace, improve	07a-templates.md
[BEG:T:S:005]	S	T	Who fills what?	07a-templates.md
[BEG:T:S:006]	S	T	How to read the resource band	07a-templates.md
[BEG:T:S:007]	S	T	Use, update, replace	07a-templates.md
[BEG:T:S:008]	S	T	The Grey Book — Templates & Forms	07a-templates.md
[BEG:Z:G:001]	G	Z	Five operational functions for a short crisis meeting	—
[BEG:Z:G:002]	G	Z	Household continuity systems and ownership fields	—
[BEG:Z:G:003]	G	Z	Coordination scaling from one person to a community	—
[BEG:Z:G:004]	G	Z	Priority pyramid for disrupted infrastructure	—
[BEG:Z:G:005]	G	Z	Why everyone-tells-everyone stops scaling	—
[BEG:Z:G:006]	G	Z	Continuity systems are coupled	—
[BEG:Z:G:007]	G	Z	Household drinking and cooking water	—
[BEG:Z:S:001]	S	Z	Evacuation pocket list	06-zombie-guide.md
[BEG:Z:S:005]	S	Z	Preparedness checklist — before anything happens	06-zombie-guide.md
[BEG:Z:S:007]	S	Z	Verify before optimizing	06-zombie-guide.md
[BEG:Z:S:009]	S	Z	The Olive Book — Zombie Guide	06-zombie-guide.md
[BEG:Z:S:010]	S	Z	Air, fire, and carbon monoxide	06-zombie-guide.md
[BEG:Z:S:011]	S	Z	Communication as the group grows	06-zombie-guide.md
[BEG:Z:S:012]	S	Z	Cooperation and collective resilience	06-zombie-guide.md

STABLE REFERENCE	KIND	GUIDE	RESOURCE	CANONICAL SOURCE
[BEG:Z:S:013]	S	Z	Energy	06-zombie-guide.md
[BEG:Z:S:014]	S	Z	Essential medication and powered-device continuity	06-zombie-guide.md
[BEG:Z:S:015]	S	Z	First minutes — protect what fails fastest	06-zombie-guide.md
[BEG:Z:S:016]	S	Z	Food	06-zombie-guide.md
[BEG:Z:S:017]	S	Z	Hygiene and toilet failure	06-zombie-guide.md
[BEG:Z:S:018]	S	Z	If the disruption lasts — shared rules without emergency cosplay	06-zombie-guide.md
[BEG:Z:S:019]	S	Z	Medication	06-zombie-guide.md
[BEG:Z:S:020]	S	Z	Mini collapsing-society guide — or, more often, several bad days with broken infrastructure	06-zombie-guide.md
[BEG:Z:S:021]	S	Z	Optional reading — models that are not prerequisites for action	06-zombie-guide.md
[BEG:Z:S:022]	S	Z	Reading traces and observing the environment	06-zombie-guide.md
[BEG:Z:S:023]	S	Z	Self-defence is not a continuity strategy	06-zombie-guide.md
[BEG:Z:S:024]	S	Z	Several households — coordinating without inventing a tiny dictatorship	06-zombie-guide.md
[BEG:Z:S:025]	S	Z	Shelter and temperature	06-zombie-guide.md
[BEG:Z:S:026]	S	Z	The assignment invariant	06-zombie-guide.md
[BEG:Z:S:027]	S	Z	The continuity invariant	06-zombie-guide.md
[BEG:Z:S:028]	S	Z	Water, energy, and hygiene at group scale	06-zombie-guide.md

STABLE REFERENCE	KIND	GUIDE	RESOURCE	CANONICAL SOURCE
[BEG:Z:S:029]	S	Z	Water — priority zero after air and immediate safety	06-zombie-guide.md

Source, visual, and standalone coverage matrix

This generated view shows what each graph node currently owns. It is a release-planning instrument, not a score of human importance. A node marked *standalone candidate* has crossed the numerical source/visual screen but still needs editorial, layout, accessibility, and usability review.

GUIDE	STATUS	SECTIONS	SOURCES O/R/E	OWNED VISUALS	SHARED VISUALS	VISUAL SOURCE BASIS
O — The Green Book — Body Owner's Manual	released standalone	18	0/4/2	4	0	4/4
A — The Amber Book — Responsibility	released standalone	15	0/2/9	5	0	5/5
B — The Teal Book — Calm Guide	released standalone	23	0/5/1	6	0	6/6
C — The Red Book — Self Ambulance	released standalone	27	3/2/8	5	0	5/5
D — The Blue Book — Safety & No Place	released standalone	14	11/0/0	4	0	4/4
H — The Orange Book — Hazards & Disasters	released standalone	25	15/0/3	4	0	4/4

GUIDE	STATUS	SECTIONS	SOURCES O/R/E	OWNED VISUALS	SHARED VISUALS	VISUAL SOURCE BASIS
Z — The Olive Book — Zombie Guide	released standalone	24	6/2/5	7	2	7/7
P — The Indigo Book — Professional Support	released standalone	14	6/0/0	4	0	4/4
S — The Purple Book — Social Field Guide	released standalone	9	0/7/5	0	0	0/0
T — The Grey Book — Templates & Forms	released standalone	24	0/0/0	0	0	0/0
R — The Copper Book — Reference	released standalone	92	0/0/0	2	0	2/2

Per-guide provenance

O — The Green Book — Body Owner's Manual

- **Release state:** released standalone
- **Canonical chapters:** `00-cover.md`, `01-how-to-use.md`, `01b-body-owner-manual.md`
- **Local source IDs:** `01b-body-owner-manual--emergency-routing`, `01b-body-owner-manual--gut-brain`, `01b-body-owner-manual--iasp`, `01b-body-owner-manual--nrs`, `01b-body-owner-manual--rome`, `01b-body-owner-manual--syncope`
- **Owned reader visuals:** `interoception-loop`, `observatory-scan`, `signal-story-question`, `three-minute-observation`
- **Shared reader visuals:** none

A — The Amber Book — Responsibility

- **Release state:** released standalone
- **Canonical chapters:** `02-situation-a.md`
- **Local source IDs:** `02-situation-a--bsi-incident`, `02-situation-a--caregiver`, `02-situation-a--child-development`, `02-situation-a--embryotox`, `02-situation-a--emergency`, `02-situation-a--infertility`, `02-situation-a--interactive-repair`, `02-situation-a--ppd`, `02-situation-a-`

-ppp-incidence, 02-situation-a--pregnancy-counselling, 02-situation-a--shaking
- **Owned reader visuals:** care-continuity-loop, consent-authority-boundary, repair-sequence, responsibility-clock-map, vega-reproductive-denominators
- **Shared reader visuals:** none

B — The Teal Book — Calm Guide
- **Release state:** released standalone
- **Canonical chapters:** 03-situations-b-g.md, 04-calm-guide.md
- **Local source IDs:** 03-situations-b-g--cowan, 03-situations-b-g--gad7, 03-situations-b-g--gad7-review, 03-situations-b-g--sleep-loss, 04-calm-guide--balban, 04-calm-guide--who-stress
- **Owned reader visuals:** alarm-channels-map, breathing-techniques, breathwork-trial-map, overload-control-map, vega-gad7-accuracy, vega-sleep-study-design
- **Shared reader visuals:** none

C — The Red Book — Self Ambulance
- **Release state:** released standalone
- **Canonical chapters:** 03-situations-b-g.md, 05-self-ambulance.md
- **Local source IDs:** 05-self-ambulance--drk-bleeding, 05-self-ambulance--drk-burns, 05-self-ambulance--drk-chemical, 05-self-ambulance--drk-electrical, 05-self-ambulance--drk-fracture, 05-self-ambulance--drk-heart, 05-self-ambulance--drk-recovery, 05-self-ambulance--drk-stroke, 05-self-ambulance--emergency-numbers, 05-self-ambulance--erc2025, 05-self-ambulance--erc2025-first-aid, 05-self-ambulance--gesund-poisoning, 05-self-ambulance--time-brain
- **Owned reader visuals:** aed-action-sequence, cpr-body-orientation, recovery-position-steps, triage-flow, vega-stroke-time-model
- **Shared reader visuals:** none

D — The Blue Book — Safety & No Place
- **Release state:** released standalone
- **Canonical chapters:** 03-situations-b-g.md, 03g-safe-place-routing.md
- **Local source IDs:** 03g-safe-place-routing--authority-115, 03g-safe-place-routing--authority-sign, 03g-safe-place-routing--children-help, 03g-safe-place-routing--medical-116117, 03g-safe-place-routing--men-help, 03g-safe-place-routing--nora, 03g-safe-place-routing--police-acute, 03g-safe-place-routing--shelter-search, 03g-safe-place-routing--telefonseelsorge, 03g-safe-place-routing--women-help, 03g-safe-place-routing--women-sign
- **Owned reader visuals:** communication-access-card, safe-place-confirmation-packet, safe-place-route-map, safe-reserve-clock
- **Shared reader visuals:** none

H — The Orange Book — Hazards & Disasters
- **Release state:** released standalone
- **Canonical chapters:** 03-situations-b-g.md, 03h-environmental-hazards.md, 06b-natural-disasters.md

- **Local source IDs:** `03h-environmental-hazards--bbk-112`, `03h-environmental-hazards--bbk-fire`, `03h-environmental-hazards--bbk-power`, `03h-environmental-hazards--bfr`, `03h-environmental-hazards--dvgw`, `03h-environmental-hazards--electric`, `03h-environmental-hazards--poison`, `03h-environmental-hazards--warning`, `06b-natural-disasters--bbk-earthquake`, `06b-natural-disasters--bbk-fire`, `06b-natural-disasters--bbk-outage`, `06b-natural-disasters--bbk-shelter`, `06b-natural-disasters--bbk-warning`, `06b-natural-disasters--bbk-water`, `06b-natural-disasters--bbk-wind`, `06b-natural-disasters--closed-door`, `06b-natural-disasters--gfz-earthquake`, `06b-natural-disasters--ready-tornado`
- **Owned reader visuals:** `dependency-continuity-map`, `hazard-handoff-card`, `hazard-override-matrix`, `hazard-source-location-map`
- **Shared reader visuals:** none

Z — The Olive Book — Zombie Guide

- **Release state:** released standalone
- **Canonical chapters:** `06-zombie-guide.md`
- **Local source IDs:** `06-zombie-guide--bbk-heat`, `06-zombie-guide--bbk-hygiene`, `06-zombie-guide--bbk-power`, `06-zombie-guide--bbk-ratgeber`, `06-zombie-guide--bbk-stock`, `06-zombie-guide--bbk-warning`, `06-zombie-guide--collective-emergency`, `06-zombie-guide--collective-recovery`, `06-zombie-guide--dfv-co`, `06-zombie-guide--drk-cold`, `06-zombie-guide--medical-route`, `06-zombie-guide--ostrom`, `06-zombie-guide--stgb32`
- **Owned reader visuals:** `first-meeting-roles`, `household-continuity-board`, `scaling-chart`, `survival-pyramid`, `vega-communication-channels`, `vega-continuity-dependencies`, `vega-household-water-stock`
- **Shared reader visuals:** `care-continuity-loop`, `dependency-continuity-map`

P — The Indigo Book — Professional Support

- **Release state:** released standalone
- **Canonical chapters:** `07-professional-support.md`
- **Local source IDs:** `07-professional-support--connection`, `07-professional-support--iasc`, `07-professional-support--legal-aid`, `07-professional-support--nora`, `07-professional-support--numbers`, `07-professional-support--spd`
- **Owned reader visuals:** `professional-call-packet`, `professional-route-selector`, `support-system-layers`, `vega-social-connection`
- **Shared reader visuals:** none

S — The Purple Book — Social Field Guide

- **Release state:** released standalone
- **Canonical chapters:** `04b-social-field-guide.md`
- **Local source IDs:** `04b-social-field-guide--affect-labeling`, `04b-social-field-guide--cold-face`, `04b-social-field-guide--danger-assessment`, `04b-social-field-guide--dv-definition`, `04b-social-field-guide--dv-hotline`, `04b-social-field-guide--nice-social-anxiety`, `04b-social-field-guide--nora`, `04b-social-field-guide--rejection-sensitivity`, `04b-social-field-guide--social-anxiety`, `04b-social-field-guide--social-comparison`, `04b-social-

`field-guide--social-support`, `04b-social-field-guide--spotlight`
- **Owned reader visuals:** none
- **Shared reader visuals:** none

T — The Grey Book — Templates & Forms
- **Release state:** released standalone
- **Canonical chapters:** `07a-templates.md`
- **Local source IDs:** none
- **Owned reader visuals:** none
- **Shared reader visuals:** none

R — The Copper Book — Reference
- **Release state:** released standalone
- **Canonical chapters:** `08-appendix.md`, `09-version-history.md`, `10-sources.md`
- **Local source IDs:** none
- **Owned reader visuals:** `evidence-classes`, `two-pass-route-map`
- **Shared reader visuals:** none

Master cross-reference — where problems, routes, forms, and support meet [ref.1.2]

STARTING PROBLEM	OWNING BOOK	USEFUL GREY BOOK RESOURCE	PROFESSIONAL HANDOFF
red flag / life danger	**C — The Red Book — Self Ambulance**	emergency call; location and access	112 / dispatcher
body signal, faintness, ordinary inputs, medication context, or “what changed?”	**O — The Green Book — Body Owner’s Manual**	observation log; comfort inventory	practice / pharmacy / 116 117 / Red as needed
pain / illness / injury	**C — The Red Book — Self Ambulance**	observation log; emergency call	practice / 116 117 / 112 according to urgency
caused harm / responsibility / dependency	**A — The Amber Book — Responsibility**	five-minute values; remarks and handoff	medical, legal, or social route via Indigo
anxiety / panic / overload	**B — The Teal Book — Calm Guide**	comfort inventory; observation log; nice-place map	trusted person / 116 117 / crisis service as needed
social absence, communication, boundary, re-entry, or graceful exit	**S — The Purple Book — Social Field Guide**	five-minute values; nice-place map; remarks	named social or professional route when needed
danger / coercion / nowhere safe	**D — The Blue Book — Safety & No Place**	safe-place map; location and access; local contacts	110 / 112 / specialist service
smoke, gas, chemicals, electricity, unsafe air, smell, or a natural or technical hazard	**H — The Orange Book — Hazards & Disasters**	emergency call; location and access; care continuity	112 / warning authority / gas service / poison centre
outage or long disruption once immediate hazards are handled	**Z — The Olive Book — Zombie Guide**	care continuity; household board	BBK / local authority / clinician / 112 as appropriate

STARTING PROBLEM	OWNING BOOK	USEFUL GREY BOOK RESOURCE	PROFESSIONAL HANDOFF
need a number, appointment, bed, document, or handoff	**P — The Indigo Book — Professional Support**	local contacts; emergency call; location and access	named service plus backup
need a writable packet	**T — The Grey Book — Templates & Forms**	choose by use mode and privacy class	receiving service named on the resource
need a stable address, figure, formula, source, or audit trail	**R — The Copper Book — Reference**	feedback or review form when correcting	owning route remains primary

The titles above are the current public ones. Older route names survive as aliases so old links and archived text keep working; an alias is allowed to remain findable, and is not allowed to appear here as though it were current.

Mathematical notation legend [ref.1.3]

MARK	MEANING	USE HERE
$\vee$	logical OR	one true danger condition can change the route
$\Rightarrow$	implies	a stated condition leads to an action inside the model
Δ	change between observations	sensation after minus sensation before
n	number of people or items	group size, supplies, contacts
t	time	minutes, hours, or days as stated
Protocol	authoritative action rule	first aid or public warning instruction
Study result	observation from a named design and population	anxiety and time-perception experiment
Model	calculation or thinking aid	communication channels in a group
Mnemonic	memorable compression	observe, change, compare

Eight legacy doors inside eleven route identities [ref.1.4]

DOOR	LOUDEST PROBLEM	CURRENT OWNING ROUTE	LEGACY NAMES RETAINED
A	responsibility, dependency, or harm	**A — The Amber Book — Responsibility**	Situation A, Responsibility and Care, Ch.2
B	anxiety, panic, or unreality	**B — The Teal Book — Calm Guide**	Situation B, Alarm and Calm, Ch.4
C	pain or physical illness	**C — The Red Book — Self Ambulance**	Situation C, Body and First Aid, Ch.5
D	danger, coercion, or violence	**D — The Blue Book — Safety & No Place**	Situation D, Threat and Safe Place
E	overload and task congestion	**B — The Teal Book — Calm Guide**	Situation E, Alarm and Calm

DOOR	LOUDEST PROBLEM	CURRENT OWNING ROUTE	LEGACY NAMES RETAINED
F	bad or unknown smell	**H — The Orange Book — Hazards & Disasters**	Situation F after the environmental gate
G	no safe or workable place	**D — The Blue Book — Safety & No Place**	Situation G
H	smoke, gas, chemicals, electricity, or unsafe air	**H — The Orange Book — Hazards & Disasters**	Situation H, Air, Smell, and Environment

The maintained route identities are **O, A, B, C, D, H, Z, P, S, T, and R** — eleven of them. The A–H door scheme is a compatibility map kept for older links and printed copies; it is not the shelf.

O, Z, P, S, T, and R are route identities rather than additional legacy doors: they orient bodily observation, preserve continuity, connect professional systems, handle social navigation, carry writable facts, and make the whole graph inspectable.

Release invariant. The generated route index above must list exactly those eleven identities under their current public titles. If it ever says ten, omits Purple, or shows a legacy alias as the current title, the registry is wrong and this page must not be patched to agree with it.

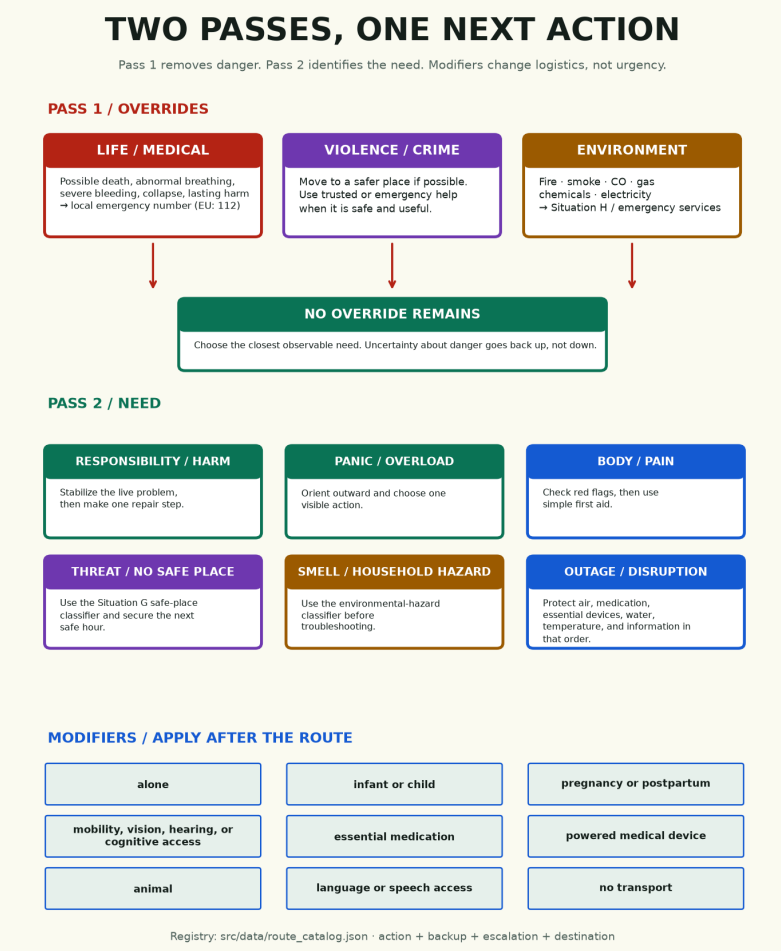
Guide topology

[ref.1.5]

The chapters form a directed graph: observations lead to actions, actions lead to reassessment or another chapter, and every route should end somewhere a person can actually continue. This is useful mathematics only because dead ends are bad writing.

Two-pass guide topology with dependency modifiers [ref.fig.2]

How do pass-one hazards, pass-two needs, and modifiers combine?



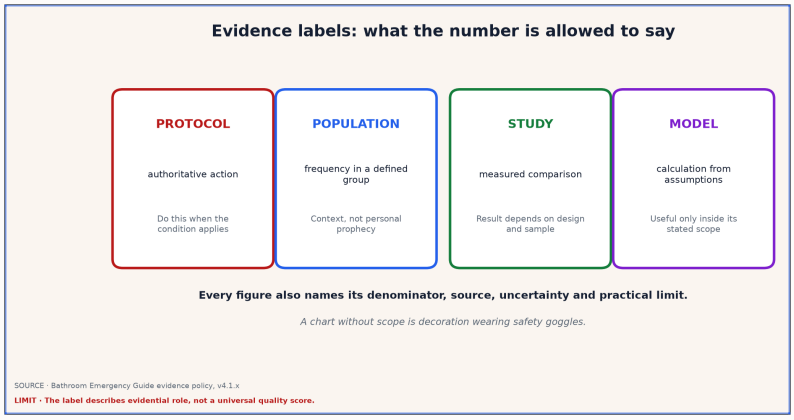
Flowchart legend [ref.1.6]

SHAPE OR STYLE	MEANING
heavy emergency block	immediate action rather than further reading
diamond	choose the closest true answer
rectangle	do the stated action
rounded destination	continue in the named chapter or service
dashed line	optional explanation
loop	compare better, same, worse, or new information

How to read the evidence figures [ref.1.7]

Evidence labels used throughout the guide [ref.fig.1]

How do the guide's evidence labels differ in what they can support?



A number is only as useful as its denominator, population, time frame, and limit. Protocols tell you what to do. Studies tell you what happened under a particular design. Associations describe variables travelling together. Models show what follows from assumptions. None of them becomes a personal prophecy by being printed in a confident font.

Figure and template grammar [ref.1.8]

The generated figure catalogue above is canonical. Every figure is presented as **Figure · Read only** with a stable `[BEG:...:G:...]` address, title, and short description. A figure may be an authored depiction or a local reference sheet completed and dated by the deployer before installation. Readers do not edit the installed figure; it is replaced when the local truth changes.

Grey Book templates use the parallel label **Template · Write** with a stable `[BEG:...:F:...]` address, title, and short description. Use a fresh copy for each incident, observation, review, drill, or handoff.

Generated images remain explanatory aids. The adjacent prose remains the complete route for monochrome print, screen readers, low light, failed images, and coffee-related diagram loss.

Evidence labels [ref.1.9]

The guide distinguishes the role of each statement:

LABEL	MEANING	EXAMPLE
Protocol	Action aligned with an authoritative guideline	call 112 for unresponsive abnormal breathing
Population estimate	Frequency in a named population and time frame	lifetime infertility prevalence
Diagnostic-accuracy study	Performance of a screen against a reference standard	GAD-7 sensitivity/specificity
Randomized study	Comparison created by allocation to interventions	28-day breathwork trial
Observational association	Variables travelled together after adjustment; causation remains limited	social isolation and mortality odds

LABEL	MEANING	EXAMPLE
Descriptive equation	Exact relation once inputs are known	$C(n) = n(n-1)/2$
Mathematical model	Calculation from assumptions inside a stated scope	stroke tissue-loss estimate
Conceptual model	A thinking aid, not a measured prediction	$A_{k+1} = A_k - \delta_k + \varepsilon_k$
Mnemonic	Memorable compression	one action, one backup, one escalation

A metaphor wearing a lab coat still needs identification, a denominator, and visiting hours.

Formula and theorem index [ref.1.10]

1. Red-flag dominance — routing protocol

$$R = \bigvee_i r_i, \qquad R = 1 \Rightarrow 112$$

A positive red flag overrides scores and self-reassurance.

2. Tiny action queue — design theorem

$$Q = [\,\text{action}, \text{backup}, \text{escalation}\,]$$

Acute instructions should fit in a small working-memory budget.

3. Accountability tuple — procedural mnemonic

$$A = (\,\text{stop}, \text{stabilize}, \text{tell}, \text{repair}, \text{follow up}\,)$$

Turns guilt into observable repair work.

4. Pain change — descriptive communication

$$\Delta P = P_{now} - P_{earlier}$$

Useful for reporting change; not a measure of injury or urgency.

5. Cognitive load — conceptual model

$$L = I + E + S$$

Intrinsic difficulty, avoidable clutter, and stress load are separated so at least one term can be reduced. The equation is not a validated diagnostic instrument.

6. Breath pacing — descriptive equation

$$T = t_i + t_e, \qquad f = \frac{60}{T}$$

Describes a chosen pattern. Comfort and safety set the pattern.

7. Stepwise arousal — conceptual model

$$A_{k+1} = A_k - \delta_k + \varepsilon_k$$

Small useful actions can reduce arousal while new events add load. This replaces the fictional universal cortisol-decay curve.

8. Household emergency water — planning convention

$$W_{plan} = 2nd \text{ litres}$$

An **Olive planning convention**, not a BBK figure and not a medical prescription. BBK's current wording is at least **1.5 L of fluids per day** for an adult, plus about **0.5 L of water per day when cooking is planned**; the sum is what this equation carries for n people over d days. Individual needs and incident conditions vary, and an official water-quality instruction outranks the arithmetic.

9. Communication channels — graph theorem

$$C\left(n\right) = \frac{n\left(n-1\right)}{2}$$

Explains why groups need roles and broadcast channels.

10. Survival function — mathematical model

$$S\left(t\right) = \exp\left(-\int_0^t h\left(u\right)\,du\right)$$

Valid mathematics, useless as a personal forecast without measured hazard data.

11. Heat balance — conceptual physical model

$$\Delta H = M - \left(C + K + R + E\right)$$

Represents heat production minus convective, conductive, radiative, and evaporative losses. The guide uses it to organize prevention, not calculate a person's core temperature.

12. Listen–reflect–respond — conversation mnemonic

$$\text{listen} \rightarrow \text{reflect} \rightarrow \text{respond}$$

A compact alternative to composing a rebuttal while the other person is still talking.

13. Stroke time model — literature-derived model

For the scope and assumptions used by Saver (2006), cumulative modelled neuronal loss over t untreated minutes is:

$$N\left(t\right) = 1.9t \text{ million neurons}$$

This is an order-of-magnitude urgency model for a typical large-vessel supratentorial ischemic stroke, not a measurement in one patient. FAST and 112 remain the action.

14. Odds ratio — descriptive study statistic

For odds o_1 in one group and o_0 in a reference group:

$$OR = \frac{o_1}{o_0}$$

An odds ratio is not the same as a probability ratio, absolute risk, or proof of causation. It requires the study population, adjustment set, and follow-up to mean anything useful.

Fillable fields live in T — Templates [ref.1.11]

R indexes writable resources; it does not maintain a second blank-form system. Use the generated figure and template catalogues above to choose the canonical Grey Book page. The resource band identifies its type, stable reference, and short description; the privacy class controls placement, and related references show what should travel with it.

The most commonly paired set is:

- **[BEG:T:G:006] Location and access card**;
- **[BEG:T:F:003] Emergency call card**;
- **[BEG:T:G:005] Local professional contacts**;
- **[BEG:T:G:008] Safe-place and exit map**;
- **[BEG:T:G:003] Medication, power, and care continuity card**;
- **[BEG:T:G:004] Household continuity board**.

Complete only relevant fields, store or photograph them safely, and replace them when the route, local fact, privacy boundary, or review date changes.

Do not put these on a shared printout

- passwords;
- PINs;
- alarm codes;
- safe combinations;
- private-key material;
- exact hidden spare-key location;
- information that would endanger someone fleeing violence.

A shared bathroom is not a secure credential vault, however trustworthy the toothbrushes appear.

Master flowchart — complete text version [ref.1.12]

This tree is maintained by hand against the eleven books, and it is the one page in Copper that can drift without a generator noticing. If it disagrees with an owning book, the book is right.

```
BATHROOM EMERGENCY GUIDE — MASTER FLOWCHART
============================================================

0. OVERRIDE
   |
   +-- life danger, abnormal breathing, unresponsive,
   |   severe bleeding, stroke sign, seizure, collapse,
   |   major burn, acute self/other danger?
   |       +-- YES / MAYBE / UNSURE --> 112
   |       |                            unlock if safe
   |       |                            speakerphone
   |       |                            follow dispatcher
   |       +-- NO --> continue
   |
   +-- active crime or immediate violent threat?
   |       +-- YES --> safer place --> 110
   |       |          injury / life danger --> 112
   |       +-- NO --> continue
   |
   +-- fire / smoke / CO / gas / chemical / electrical danger,
   |   or an official hazard warning?
           +-- YES / MAYBE --> H — ORANGE
           |                   leave, shelter, or isolate only as safely
           |                   instructed; live official instructions win
           |                   112 / poison centre / gas service / warning
authority
           +-- NO --> choose the loudest remaining problem

A. RESPONSIBILITY / DEPENDENCY / HARM --> A — AMBER
   |
   +-- WHICH CLOCK?  live harm / continuing effects / repair / ongoing
care
   +-- live injury, birth, or immediate danger --> C — RED / 112 / 110
   +-- WHAT KIND OF STAKE?   (substrate is metadata, not a verdict)
   |      welfare       can it presently be harmed?
   |      agency        can it choose, consent, refuse, act?
   |      development   are important capacities still emerging?
   |      dependency    what fails if care stops, and is that on me?
   |      transfer      can a competent person or system take over?
   |      reversibility can today's decision be undone?
   |      hazard        can it harm other entities?
   |      authority     what am I entitled or required to decide?
   |         limit: uncertainty + irreversibility raise the burden of
care
   |                on MY actions; they never manufacture authority over
   |                another person's body or decision
   +-- then the domain module: pregnancy / birth / newborn / child /
   |   adult / animal / technical system
   +-- caused harm --> stop + stabilize + tell + repair + follow up
   +-- technical system --> contain first (isolate, pause, preserve,
   |                        snapshot, notify) -- every step reversible
   |                        uncertain moral status is not zero moral
status,
   |                        and never a reason to leave a harmful system
running
   +-- unresolved duty --> today / legal / transfer / long-term care

B. ANXIETY / PANIC / OVERLOAD --> B — TEAL
   |
   +-- bodily symptom new, severe, or unclear --> O — GREEN / C — RED
   +-- otherwise --> orient outward + reduce one avoidable load
   |                 + one safe action + one person
   +-- recurring, or shrinking ordinary life --> P — INDIGO
   +-- acute self / other danger --> 112

C. BODY SIGNAL / PAIN / ILLNESS / INJURY --> O — GREEN + C — RED
   |
   +-- describe what changed; OPQRST or the observation log when useful
```

```
   +-- severe / sudden / chest / neuro / collapse / pregnancy red flag --
> 112
   +-- urgent but not life-threatening --> practice / 116 117
   +-- stable minor problem --> appropriate first aid + reassess
   +-- device readings inform the handoff; they never cancel a red flag

D. DANGER / COERCION / NOWHERE SAFE --> D — BLUE
   |
   +-- FIRST MINUTE: 112 / 110 / Orange overrides
   +-- G1 person or active threat --> exit or safer place --> 110
   |      a lock is a barrier, not a plan: leave anyway for fire, smoke,
   |      bad air, forced entry, or a responder's instruction
   |      prepared non-voice route: nora, registered in advance
   +-- G2 no weather-safe place tonight --> municipal accommodation route
   |      child: danger --> 110/112; no safe adult --> Jugendamt;
   |      someone to talk to --> 116 111 (counselling, not placement)
   +-- G3 access or essential care fails --> name the failing function
   |      and the remaining reserve
   |      urgent but not life-threatening --> 116 117 / clinician
   |      life-supporting failure or imminent serious harm --> 112
   +-- G4 physically safe, cannot remain here for the next hour
   |      --> one-hour container + hand off the primary problem
   |      merely distressed but able to stay --> B — TEAL / S — PURPLE
   +-- CONFIRM before travelling: destination, availability, access,
   |   arrival, backup, escalation
   +-- after-effects or service need --> P — INDIGO

E. OVERLOAD / TASK CONGESTION --> B — TEAL
   |
   +-- write: prevent harm / soon / can be ugly
   +-- choose one physical action under five minutes
   +-- delegate or hand off repeated essential failures
   +-- if the real problem is social navigation --> S — PURPLE

F. BAD OR UNKNOWN SMELL --> H — ORANGE
   |
   +-- fire / smoke / CO / gas / chemical / electrical / symptoms -->
hazard route
   +-- sewage or drain, only after a negative hazard gate --> repair
route
   +-- damp or mould, only after a negative hazard gate --> moisture
repair
   +-- do not assume outdoors is safer; current warning instructions
decide

G. NO SAFE OR WORKABLE PLACE --> D — BLUE + P — INDIGO
   |
   +-- see the D branch above; G is its legacy door

H. ENVIRONMENT / HAZARD / DISASTER --> H — ORANGE
   |
   +-- fire / smoke --> smoke-free exit; unsafe route --> close door +
112
   +-- CO or combustion exposure --> leave the exposure when safe + 112
   +-- gas --> no flame, switch, bell, or phone; knock, leave, call
outside
   +-- chemical --> stop exposure; rinse when appropriate; keep the
label;
   |               poison centre / 112
   +-- electrical --> do not touch a live source; isolate only if safe;
112
   +-- area-scale warning --> shelter, stop ventilation, or evacuate
exactly
                              as instructed

OUTAGE / LONG DISRUPTION --> Z — OLIVE
   |
   +-- first: clear Orange's hazard overrides and verify the official
warning
```

```
   +-- THE CONTINUITY INVARIANT, per function:
   |      status / reserve / owner / backup / next action / review /
   |      failure route
   +-- first minutes --> air + urgent medical + temperature + water
   |                     + communication
   +-- first days --> food + medication + sanitation + dependants +
animals
   +-- several households --> named roles + shared log + explicit
handoffs
   +-- longer shared-resource problem --> allocation, rotation,
accountability
                                          (and it never overrides an
                                           evacuation order)

SOCIAL NAVIGATION --> S — PURPLE
   |
   +-- am I safe?  no, or cannot tell --> D — BLUE / 110 / 112
   +-- clinical crisis --> C — RED / P — INDIGO
   +-- otherwise --> disclose at the level you choose (Level 0-4)
                     + boundary + re-entry + graceful exit + one next
move

PROFESSIONAL ROUTE --> P — INDIGO
   |
   +-- name the problem
   +-- choose the service able to change it
   +-- prepare a usable handoff
   +-- confirm outcome, backup, owner, review time
       (contact is not handoff)

WRITABLE FACTS --> T — GREY
REFERENCE / SOURCE / STABLE ID --> R — COPPER

EVERY NON-EMERGENCY ROUTE
   |
   +-- do one action
   +-- check better / same / worse / different problem
   +-- use the backup
   +-- escalate on worsening, uncertainty, or a red flag
   +-- end at a named destination
```

Pocket print card

[ref.1.13]

RED FLAG?

112 · unlock if safe · speakerphone · follow dispatcher

Unresponsive · abnormal breathing · severe bleeding · stroke sign · chest pressure · severe breathlessness · seizure · major burn · collapse · acute self/other danger

BODY

Ch.5 · first aid · 116 117 if urgent but non-life-threatening

ALARM

Feet · five objects · gentle exhale · one person

THREAT

Exit / safer place · 110 · 116 016 · do not confront

NO SAFE PLACE
Situation G · threat / no roof / access-care / internal crisis

ENVIRONMENT
Leave source · Situation H · call from safety

OUTAGE
Official warning · essential care · water · temperature · roles

Offline deployment checklist [ref.1.14]

- Print the monochrome PDF single-sided or duplex.
- Complete the relevant Grey Book resources and keep their resource bands attached.
- Keep the guide near a charged light source.
- Add a simple first-aid poster from an official provider.
- Store current medication and emergency plans nearby but privately.
- Refresh service numbers and medical guidance before relying on an older printout.
- Test that QR codes or links are not the only access path.
- Ensure the print remains readable without colour.
- Replace the guide after water damage. It is not itself waterproof, despite strong thematic alignment.

Navigation invariant [ref.1.15]

Every non-emergency route must provide:

1. a next action;
2. a backup;
3. a reason to escalate;
4. a named destination.

A dead end in prose is still a dead end.

Reference release gate [ref.1.16]

Before a print or public build is called current, check the compiled system, not only the chapter you happen to have edited.

Content gate

- current public title and owning route agree with the generated route index;
- the emergency override and escalation rule agree with the owning book, not with an older copy of it;
- models, estimates, mnemonics, and optional theory are visibly labelled;
- legacy aliases remain searchable without being presented as current titles.

Service and freshness gate

- operational numbers, hours, access modes, and scopes carry a checked date;

- a review-by date or maximum review interval exists;
- a backup or failure route exists wherever availability matters;
- a directory entry is not described as a confirmed bed, appointment, responder, or live destination unless that outcome was actually confirmed.

Render and accessibility gate

- no orphan **FIELD NOTE** heading, and no identity band without its payload;
- no accidental blank-page or severe whitespace regression;
- monochrome and large-print routes remain usable;
- image alternatives and adjacent text carry the complete action route;
- detached Grey pages keep identity, privacy class, version, and review data.

Privacy gate

- no password, PIN, private key, alarm code, hidden-key location, or protected refuge address is exposed;
- no private medical or identifying data is published without a lawful and appropriate reason;
- photographs of installations reveal no access or security detail.

Version History [ref.2]

5.1.2 — 14 August 2026 [ref.2.1]

The online edition now distinguishes the **product mark** from the **stable reference namespace**. Reader chrome says **BE**, matching `be.fkr.dev`, and its accessible name continues to say “Bathroom Emergency Guide”. Existing `[BEG:...]` references are not renamed: they are public addresses and changing their prefix would make a cosmetic improvement by breaking citations.

The visible address is live. The complete reader starts at `BE / Shelf`, a detached Green book at `BE / 0`, and scrolling into a section changes the address to its compact reader code such as `BE / dis.5` or `BE / ref.12`. Browser tests exercise those transitions directly instead of merely checking that the right JavaScript exists.

Stable references are now literal web hardlinks too. Every active reference has one canonical `#BEG:...` target in the complete online guide and at least one permalink to it; the Pages validator walks all rendered HTML reference links and proves that their target document and fragment exist. The older lowercase `#beg-*` IDs stay as compatibility aliases.

The website and reader headers also carry permanent release provenance: a link to the tagged version, the exact build commit, and the build metadata/date. The GitHub repository is promoted beyond that quiet metadata row into its own high-contrast header control, so both “what am I reading?” and “where is the source?” are answerable without scrolling or opening developer tools.

Dark mode receives its own browser contrast gate over reader chrome, contents, and book content. That pass removed remaining light-only quantitative-figure surfaces and now fails the release when normal text falls below the WCAG AA contrast threshold used by the verifier.

Diagram QA became stricter at the same time. The text-fit audit now rejects independently positioned labels that overlap one another, not only labels that escape a drawn box. It caught the Orange `WARN` collision that motivated the pass, five Recovery Position footer overflows, and additional overview-label collisions. Ten text-bearing generator families run through the same audit, and an independent verifier proves the detector against an intentionally broken synthetic figure before rerendering the current diagrams.

The physical release package is hardened too: qpdf checks the booklet PDF structure, CI keeps the full booklet matrix, and the individually imposed Shelf and eleven colour/mono booklets are published beside their books instead of being hidden behind only the combined print bundles.

5.1.1 — 12 August 2026 [ref.2.2]

The web edition becomes a first-class reader rather than a generated document behind a project landing page. The complete guide again carries a persistent contents rail on the left at desktop widths. The Shelf and eleven colour books are its top-level groups; stable guide sections sit beneath them. Scroll state marks both the current section and its parent book and keeps the active entry in view during long reads. On narrow screens the same structure remains an Escape-closeable contents drawer.

The public website and generic book covers are intentionally less prescriptive about emergency routing than the context-specific service pages. They now say to use the **local emergency number**, naming **112 only for the EU**, rather than placing Germany's 110 police shortcut on a general emergency surface. If a call itself is unsafe, the generic surface points first to a safer place or a trusted person who can call. Context-specific German service information can still appear where its purpose, scope, and limits travel with the number.

The eleven-book overview also uses one identity language end to end. The former graph circles used generic hatch marks that did not match the strong pattern tiles below them. The graph now uses larger rounded rectangles carrying the same pulse, diamond, wave, cross, shield, zigzag, crosshatch, dot, speech, form-grid, and rule motifs as the book directory. Equal-axis rendering prevents the network from stretching those nodes, and the top title/subtitle no longer occupy the Green node's space. Local handoff graphs use the same treatment.

Repository publication instructions are no longer displayed on the public deployment page. GitHub Pages remains an implementation detail documented in the repository rather than a task a guide deployer needs to see on the site.

This release also records the next deployment target: a static, strictly client-side wizard that lets a deployer fill canonical local forms, review the privacy class and visibility of each value, and render a printable local packet without transmitting entered data. More generally, operational knowledge such as deployment instructions, maintenance rules, and changelog history should converge into the deployed guide — usually Grey or Copper, or a future dedicated deployment/maintenance book when the material becomes a coherent task of its own.

5.0.2 — 11 August 2026 [ref.2.3]

The first stable patch sharpens the visual identity of the eleven standalone books. Running headers now work like field-manual tabs rather than quiet page furniture: each book carries its glyph, route code, terse colour-book label, larger pattern marker, heavy type, and a stronger accent rule. The canonical `be.fkr.dev` address remains part of the header.

The identity deliberately does not depend on colour alone, so monochrome printing preserves the same book-to-book recognition. The A4/2 treatment also keeps the stronger geometry inside the printable region; an experimental outer-edge border was rejected because it violated trim-safety checks.

5.0.1 — 11 August 2026 [ref.2.4]

This is the first stable 5.x release. It promotes the reviewed 5.0 release candidate and closes the last physical-packaging gap: the Shelf introduction is now a booklet too, rather than a loose front-matter artifact.

The complete booklet print run contains twelve independent signatures in shelf order: the Shelf intro followed by the eleven colour books. Colour and monochrome bundles are both already imposed for portrait A4 duplex printing at 100%, flip on the long edge. Each booklet begins on its own physical sheet and is folded and bound separately after printing.

Release engineering also synchronizes package and lockfile SemVer, exposes the combined booklet downloads and print instructions through the Pages package, puts `be.fkr.dev` into the running print header, and makes CI install and retain the booklet toolchain/artifacts.

5.0.0-rc.1 — 8 August 2026 [ref.2.5]

Why this is 5.0.0 and not 4.14.0-alt.4

The `-alt` suffix existed to mark an experimental editorial line running beside the mature 4.13 release machinery. That line is finished. The two have been one tree since the synthesis, all eleven books have now been read by outside reviewers and revised, and continuing to ship a "4.x alternate" would describe a fork that no longer exists.

What actually changed at the major-version boundary: the shelf is eleven colour-titled books rather than eight situation doors; the A–H doors survive only as a compatibility map; reader references replaced machine identifiers on the page; every book carries sourced citations attached to individual claims; and the indexes are generated from registries rather than maintained by hand. Old stable references still resolve — `[BEG:...]` addresses and retired IDs were never recycled — so this is a major version by scope, not by breakage.

It is a release *candidate* because nothing here has been deployed, installed in an actual bathroom, or drilled with a reader who did not write it. The installation and route-drill sheets in Grey exist precisely to produce the evidence that would justify dropping the `-rc`.

The revision campaign

Six books were revised against reader critiques. The pattern across all of them was the same: a rule stated carefully in one place and carelessly in another, with nothing in the build noticing the disagreement.

Safety corrections

- **Amber** had no carve-out for a shaken or head-injured baby: “After losing your temper” ran straight to apologize. An urgent-medical override now precedes the apology sequence.
- **Blue** routed “a child without safe care” to 112 while its own children’s section, three pages later, had the correct tiering. That tiering now governs: 110/112 for danger or unsafe abandonment, Jugendamt or Jugendnotdienst when there is no safe adult but no acute danger, 116 111 for counselling — which is stated to be counselling, not dispatch and not placement.
- **Blue** also treated any failure to maintain essential medication as a 112 criterion. It now requires that the interruption is causing or imminently risks serious harm, with 116 117 for urgent but not life-threatening, and says outright that a missed routine dose is not an ambulance criterion.
- **Olive** told readers to warm a hypothermic person slowly. DRK describes two stages, routes both to 112, and says of the second: no further warming attempts. The section now splits the stages and keeps the one rule that never changes — no rubbing, no direct heat.
- **Olive**’s blanket ban on indoor combustion heaters was too broad, and its ban on camping stoves contradicted BBK, which suggests a Campingkocher for small meals while forbidding grills indoors. The test is now approval rather than fuel: anything not specifically intended and installed for indoor use is outdoor-only.
- The **hub**’s threat section advised changing passwords from a trusted device. Blue’s own modifier already explained that a conspicuous account change can itself be the thing that gets noticed. The hub now carries the careful version, which also fixes it for the master guide.
- **Purple**’s locked-bathroom instruction became conditional: keep the barrier while it is the safer side, leave for fire, smoke, hazardous air, forced entry, or a responder’s instruction.

Fabricated precision removed

- **Purple** replaced minute-keyed cover stories with a Level 0–4 disclosure ladder, and dropped invented “acceptable absence” and “risk level” columns.
- **Olive** dropped group-size thresholds that presented design intuitions as consequences of $C\left(n\right) = n\left(n-1\right)/2$. The transitions are now qualitative.
- **Grey**’s route-drill timings are labelled provisional interface targets, not reader performance standards. A slow stage indicts the installation.
- Household water: BBK publishes at least **1.5 L of fluids per day** plus about **0.5 L for cooking**, never “2 litres”. $W_{plan} = 2nd$ is now labelled Olive’s own planning convention in Olive, Copper’s formula index, and the source notes.

Architecture

- **Amber** leads with an eight-question entity check — welfare, agency, development, dependency, transfer, reversibility, hazard, authority — with substrate demoted to metadata. The reversibility rule ships with its limit in the same section: it constrains your own actions and never manufactures authority over another person’s body or decision.

- **Olive** promotes the continuity invariant (status, reserve, owner, backup, next action, review, failure route) to the front; Dunbar, the survival function, the heat balance, Pareto, the pairwise-channel formula, and the book-architecture audit move intact to optional reading.
- **Blue** puts First minute ahead of the confirmed-destination model, pulls the three threat clocks from the hub after G1 rather than before the routing model, and gives G4 an admission criterion so it stops absorbing Teal.
- Section letters A0–A9 are gone from Amber rather than renumbered; they collided with the reader references printed beside them.
- **nora** is named in Blue and Purple as a prepared, registered-in-advance non-voice route to 110/112 — never an install task during an emergency.

Grey stops owning rules it should only record

- Grey states explicitly that it does not decide escalation: a form copies the route, backup, destination, or threshold owned by the relevant book, service, clinical plan, product instruction, or official warning.
- Local operational facts now carry source, checked date, review-by date, and backup source. A number is not the fact; scope, access channel, and hours are part of it, and they do not always match for the same service.
- “Fresh-air route” becomes “cleaner-air place or safe-air route”, because an area-scale smoke or chemical warning can make staying inside correct.
- The contacts table and safe-place map now carry Blue’s revised escalation wording instead of an older copy of it.

Copper catches up with the shelf it indexes

- The architecture line said **ten** route identities while listing eleven, and the sentence naming non-door identities omitted Purple. Both corrected, with a release invariant stating that the generated index is authoritative and this page must not be patched to agree with a wrong registry.
- The master cross-reference used legacy names as though they were current titles, and had no row for Green or Purple. Current public titles now appear; aliases are labelled as aliases.
- The master flowchart still routed artificial entities to “isolate, preserve logs, notify owner” — the exact architecture Amber was recovered from — and had no Purple, no Green, and no continuity invariant. Rewritten against the current books, and marked as the one hand-maintained page in Copper.
- Added a reference release gate covering content, service freshness, rendering and accessibility, and privacy.

Evidence gains a status axis

- Source status — current operational, current optional, contested or approximate, historical, superseded — now sits alongside evidence class. Evidence class asks what kind of claim this is; status asks what job it is allowed to do.
- Dunbar, Ostrom, Yerkes–Dodson, polyvagal language, the philosophical material, and game theory carry explicit status lines.
- Collective-resilience research replaces the Prisoner’s Dilemma as Olive’s main cooperation frame, citing Drury, Cocking and Reicher (2009) and Ntontis et al. (2021). The **“Player B”** battery

warning stays in Olive's mainline, beside the cooperation rules, because it is a rule about how to treat your neighbour.
- Vague "later rupture-and-repair research" is replaced by a named interaction study with a DOI; Bowlby and Ainsworth are relabelled historical foundations. The same swap removed two trade paperbacks from Purple, where the Danger Assessment now supports the danger list.
- Purple, Blue, Olive, and Amber added sourced citations where the text previously asserted. Cited sources went from 72 to 95 across the campaign.
- The IASP pain definition now cites Raja et al. (2020) in *Pain*, the paper that states and explains it, with the IASP term list as the secondary link. The IASP host refuses automated requests, so the previous citation could never be machine-checked; the page was read by hand on 8 August 2026 and that confirmation is now recorded in the source checker rather than reported forever as an outstanding task.

Verification

- New validator: retired guidance cannot reappear. Nine superseded phrases — including the silicon-entity branch, "ten route identities", "care bridge fails", and "fresh-air route" — now fail the build if they return to any chapter except the version history and source notes, which exist to record what older releases said. Verified against the pre-revision files.
- Field Note headings orphaned their own kickers across the whole shelf. `break-after: avoid-page` was set but not `break-inside`, and the "FIELD NOTE nn" label is a block in `::before`, so Chromium parked the label at one page foot and began the next page with an unlabelled heading.
- `verify_layout` now matches markers across hyphenated line wraps: the A4/2 column breaks "powered-device" at its own hyphen, and collapsing whitespace turned a present, legible heading into a missing marker.
- `verify_sources` retries once on curl code 000. Several cited authorities rate-limit, and a checker that reports a slow ministry as a dead link is one nobody runs before a release.
- Breadth and continuity markers in the validators were pinning headings when their job is to guarantee subjects stay covered; they now say so, and hold no apostrophes, since pandoc smart-quotes the output.

4.14.0-alt.2 — 6 August 2026 [ref.2.6]

Figures and templates become different objects

- Every reader-facing resource now declares one of two public types: **Figure · Read only** or **Template · Write**.
- The eight local-information sheets completed by deployers are figures because readers use the installed copies as reference; they are replaced rather than edited when facts, privacy, condition, or review dates change.
- Every one of the 49 figures and 10 templates carries a title, stable reference, and short description.
- Former form references for migrated local figures remain available as legacy anchors rather than being reused for another meaning.

Rendering and public documentation follow the source of truth

- Figure and template wrappers now group type, title, stable reference, short description, content, and related-resource links as one visual object.
- The Grey Book separates local reference figures from reusable templates; the Copper Book generates the corresponding catalogues.
- README, deployment instructions, roadmap, landing metrics, downloads, and the feedback path now use the same two-type vocabulary.
- Clean standalone builds remove stale pre-Grey-Book output names before rendering, while selected guide builds refresh diagrams and inventories first.

Verification

- Validators require title, stable reference, short description, and use mode for every indexed figure and template, exactly ten writable templates, exactly eight deployer-completed local figures, and read-only semantics for every figure.
- Six master editions, 66 standalone PDF editions, and the complete responsive site pass reference, migration, layout, density, accessibility, overflow, browser, and release-matrix checks.

4.14.0-alt.1 — 6 August 2026 [ref.2.7]

Experimental full synthesis of the mature 4.13 release machinery with the 4.x-alt editorial line. The guide becomes an eleven-book shelf with colour titles, adult humour, the Green Body Owner's Manual, Purple Social Field Guide, and Orange Natural Disasters book as canonical members. Standalone editions begin with reader questions rather than graph governance. Safety remains decisive at real red flags but no longer supplies the tone of every page.

4.13.1 — 2 August 2026 [ref.2.8]

The render environment is explicit

- Offline Vega-Lite charts now use a tracked Fontconfig profile rather than inheriting unrelated host desktop configuration fragments.
- Diagram labels request the available bold weight instead of an unavailable black weight that caused fallback messages.

Renderer warnings become release failures

- Successful SVG rasterization now forwards stderr instead of discarding it.
- A new smoke validator renders all eight quantitative figures in a temporary directory, checks the exact SVG/PNG set, and requires zero stderr.
- Reader routes, claims, forms, sources, graph identities, and the 60 standalone PDF editions remain otherwise unchanged.

4.13.0 — 2 August 2026 [ref.2.9]

Responsibility and Care becomes a detachable route

- A now builds from the canonical responsibility and care chapter in A4, A4/2, and large-print colour/monochrome editions

without copying reader prose.
- Five local sources, five owned reader visuals, seven linked Blue Book forms, graph handoffs, and generated Sources and limits remain attached.

Safety comes before the verdict

- A four-clock route separates live harm, continuing effects, repair, and ongoing care before blame or explanation.
- New figures cover the responsibility clocks, the five-step repair sequence, consent/capacity/authority boundaries, and care continuity.
- Apology, acceptance, forgiveness, legal liability, and completed repair remain distinct claims.

All ten graph identities are now standalone families

- The released set is O, A, B, C, D, H, Z, P, T, and R, totalling 60 standalone PDF editions.
- Build evidence does not decide liability, capacity, consent, forgiveness, or whether a real repair or care handoff succeeded.

4.12.0 — 2 August 2026 [ref.2.10]

Every detached route states its contract

- Each released standalone family now states its inside scope, deliberate boundary, canonical aliases, exit rule, and local resource map.
- Standalone manifests record linked figure, form, support, and route references so completeness is checked across A4, A4/2, large print, colour, and mono.

Figures and forms carry their context

- Figure cards now carry stable addresses, owning route identity, pattern, glyph, reader question, and paired Blue Book forms.
- All eighteen canonical forms carry a generated route band with privacy class, route chips, related figures, and support-service references.
- Reference and Professional Support expose generated relationship maps instead of maintaining duplicate contact, diagram, and fillable-field tables.

Clearer language keeps the same address

- Professional Support now distinguishes reaching a service from confirming a usable outcome, backup, owner, and review time.
- The appendix maps eight legacy situation doors into ten maintained route identities and keeps writable facts in T — Templates.
- Five rewritten headings retain their previous stable public references; a wording improvement does not retire a resource that still exists.

4.11.0 — 2 August 2026 [ref.2.11]

Outage and continuity becomes a detachable route

- Z now builds from the canonical outage, disaster, and continuity chapter in six layout/mode editions without copying reader prose into a second source.

- The standalone family carries four local sources, seven owned reader visuals, complete graph handoffs, and generated Sources and limits.

Warning channels gain a local operational source

- The initial verification route now cites current BBK information for NINA and Cell Broadcast.
- Short direct warnings remain paired with fuller official information channels rather than being treated as complete incident instructions.

Nine standalone families share one canonical source tree

- The released set is O, B, C, D, H, Z, P, T, and R, totalling 54 standalone PDF editions.
- A remains master-only. Build evidence does not claim that a real outage, evacuation, supply route, or household continuity plan was field-tested.

4.10.0 — 1 August 2026 [ref.2.12]

Orientation becomes a detachable route

- O now builds from the canonical Small-Room Observatory chapter in six layout/mode editions without copying the master cover or duplicating its emergency gate.
- The standalone family carries eleven local sources, four owned visuals, complete graph handoffs, and generated Sources and limits.

Threat and safe place becomes a detachable route

- D now builds from its owned threat-clock section and the complete safe-place chapter in A4, A4/2, and large-print colour/monochrome editions.
- Eight operational sources and four reader visuals remain attached to the route, including destination confirmation, communication access, and the remaining-reserve model.

Eight standalone families share one canonical source tree

- The released set is O, B, C, D, H, P, T, and R, totalling 48 standalone PDF editions.
- A and Z remain master-only. Build evidence does not claim that a local bed, service, safe place, or real-crisis route was available or successfully used.

4.9.0 — 1 August 2026 [ref.2.13]

Observation gets a visible first route

- Added a first-90-seconds body/room/attention scan before the explanatory material in the Small-Room Observatory.
- Added four diagrams for the scan, interoception loop, signal/story/question sequence, and bounded three-minute observation.
- Made the stop condition and “no improvement is a result” boundary explicit so observation does not silently become delay.

A suggested safe place must become an operational destination

- Reworked the four-way route map and communication card into shorter, large-label operational graphics.
- Added a confirmation packet for destination, availability, access, arrival, backup, and escalation.
- Added a reserve-clock route that calls and moves before access or essential care fails, while refusing unsupported generic runtime promises.

Candidate coverage is not a release claim

- O and D now each own four source-backed reader visuals and cross the numerical standalone-candidate screen.
- Both remain inside the complete guide until standalone extraction, layout, accessibility, and usability review are completed.

4.8.0 — 27 July 2026 [ref.2.14]

The project becomes a usable web surface

- Replaced the single landing document with responsive project, deployment, download, and 404 pages built entirely from local assets.
- Added route-aware navigation, release metrics, evidence boundaries, themes, mobile navigation, and a self-contained guide/route package.

Deployment becomes interactive without becoming a database

- Added a local-only six-step checklist, progress display, reset, and copied summary beside privacy, format, mounting, maintenance, and operator guidance.
- Stored only generic completion keys and explicitly prohibited sensitive local facts in the browser interface.

Publication remains an explicit operation

- Added browser QA for desktop/mobile layout, overflow, console errors, remote requests, theme changes, planner persistence, and download filtering.
- Added a GitHub Pages workflow and optional reviewed custom-domain variable; ordinary builds and local releases still do not publish or deploy anything.

4.7.0 — 26 July 2026 [ref.2.15]

First aid becomes a detachable field guide

- C now builds from its owned pain route and the canonical first-aid chapter in six standalone layout/mode editions.
- The release gate requires seven local sources, five owned reader visuals, local end matter, graph handoffs, tagging, geometry, and semantic parity.

Professional support gains an operational visual set

- Added a six-field call packet, layered-support map, and professional-route selector beside complete text and table fallbacks.
- P now builds independently with five operational sources and four reader visuals across A4, A4/2, and large-print color/mono

editions.

Six standalone families share one source tree

- The graph hub and release matrix now cover B, C, H, P, T, and R.
- The remaining O, A, D, and Z nodes stay in the complete guide until they pass equivalent source, visual, layout, accessibility, and usability review.

4.6.1 — 26 July 2026 [ref.2.16]

The installation becomes testable

- Added wet-room installation, route-drill, first-aid-figure-review, and maintenance sheets to the Blue Book.
- Made glare, reach, one-handed page turning, moisture, privacy, and physical replacement observable deployment checks rather than prose reminders.

Coverage becomes generated evidence

- Added a ten-node source, section, visual, provenance, and standalone-readiness matrix generated from canonical registries.
- Embedded the report in Reference and made stale coverage fail local builds and CI.
- Added four stable form references while preserving the retired-ID boundary.

4.6.0 — 26 July 2026 [ref.2.17]

The Blue Book externalizes useful facts

- Added T — Templates as a standalone family with detachable location, call, contact, comfort, observation, safe-place, continuity, feedback, remarks, and activity sheets.
- Split author, deployer, reader, and helper responsibilities so the person using the guide is not silently assigned maintenance of the installation.
- Added privacy-aware deployment fields and a full installation/maintenance manual.

Reference becomes an addressable system

- Added stable typed IDs for sections, forms, figures, contacts, deployment fields, and glossary terms.
- Added a generated global index, diagram index, contact collection, deployment-field index, glossary, and form index to R — Reference.
- Released R as a standalone A4, A4/2, and large-print color/mono family.
- Expanded the graph to ten identities while keeping page and hierarchical numbers as non-canonical navigation aids.

First aid explains the mechanism without inventing one

- Separated the 112 call from later actions in the first-minute flowgraph.
- Added chest-location, AED-action, and recovery-position diagrams and wrote out CPR and AED.

- Replaced the “reboot” metaphor with the accurate rhythm-analysis/shock model, explained rescuer switching and 30:2, and added short reasons beside wound, shock, burn, fracture, and spine actions.
- Made effective coughing the first choking principle and declined to publish unreviewed self-manoeuvres.

Project and release packaging become complete

- Added a project landing page, deployment instructions, stable revision footers, reproducible build metadata, and a hashed release manifest.
- Added CI for every master and B/H/T/R layout/mode/format combination.
- Added validators for the stable reference registry, landing package, complete build matrix, and false publication/deployment claims.

4.5.0 — 26 July 2026

[ref.2.18]

Graph-linked subguides become real objects

- Froze nine graph identities with unique code, pattern, glyph, title, and colour channels, plus reciprocal edge validation and a complete text directory.
- Added a responsive graph hub and local “you are here” maps that preserve direct emergency routes instead of making the graph a queue before help.
- Built B — Alarm and Calm and H — Air, Smell, and Environment as standalone A4, A4/2, and large-print color/monochrome families from the same canonical prose used by the master.
- Added per-subguide covers, position/version metadata, introductions, handoffs, and source-complete local end matter generated from the canonical registry.

Better models and operational pictures

- Added B’s four-channel alarm map and conceptual load/headroom model, with explicit limits against treating either as a diagnostic score.
- Added H’s indoor/outdoor/uncertain source-location map and five-field hazard handoff card.
- B and H now each carry four canonical visuals with adjacent text fallbacks and non-colour encodings.
- Added identity/grouping contact sheets and selected the quieter nine-node core over a noisier split-route prototype.

Release engineering

- Added validators for source/section/figure ownership, graph reciprocity, identity uniqueness, A4/A4/2/large-print parity, PDF tagging and geometry, source blocks, semantic text, and reproducible hashes.
- Fixed the screen shell so standalone pages without a contents rail use the full reading measure rather than reserving an empty navigation column.

4.4.1 — 22 July 2026

[ref.2.19]

Common continuity synthesis

- Preserved the 4.3.1 observatory, safety routing, evidence limits, accessibility, source freshness, and six-edition print

architecture while reviewing the alternate source tree section by section.
- Accepted compatible ownership, handoff, access, and human-factors material; rejected unsupported medical, survival, legal, and developmental claims.
- Added eight structured household-continuity systems, five first-meeting roles, two generated figures, and validation for dependencies, sources, owners, backups, text equivalents, and denied claims.
- Expanded the outage guide with capability inventory, visible task ownership, review times, failure routes, and a route for dissent.

4.3.1 — 22 July 2026 [ref.2.20]

Navigation and release hygiene

- Corrected the mixed situations identity to B–F while preserving a named handoff to the dedicated Situation G guide.
- Restored executable validator modes and made script permissions part of the release contract.
- Aligned source, renderer, registry, and cover metadata at 4.3.1.

Reviewed space instead of merely filling it

- Reviewed the seven sparsest A4 pages and retained each as writable space, safety buffer, chapter opener, handoff, or reference boundary.
- Preserved the 88-page A4, 87-page A4/2, and 139-page large-print envelope.
- Added plans for graph-linked subguides, 48–60 reviewed visuals, and generated Sources and limits at the end of each future subguide.

4.3.0 — 22 July 2026 [ref.2.21]

Situation G becomes a router, not a shrug

- Split “no safe place” into violence/coercion, no roof tonight, access or essential-care failure, and social/internal crisis.
- Added national service routes where they genuinely exist and explicit local fields where municipalities, shelters, transport, and after-hours services differ.
- Added a safe-place handoff that asks for a confirmed destination, access method, backup, and escalation condition rather than accepting “try elsewhere.”

Communication is part of safety

- Added six structured communication/access profiles and a minimal written emergency card.
- Added sign-language, text, easy-language, and online access metadata where the relevant German service publishes it.
- Added generated safe-place and communication-access maps while keeping the prose complete without colour or diagrams.

Large print and freshness

- Added color and monochrome A4 large-print editions with materially larger typography rather than a browser zoom instruction disguised as a format.
- Added image-alt, heading-order, tagging, blank-page, geometry, page-growth, and color/mono parity checks.

- Added dated operational-source windows and deterministic stale-source tests so a once-correct telephone route cannot age invisibly inside the guide.

4.2.0 — 22 July 2026 [ref.2.22]

Eighth door: environmental danger

- Added Situation H for fire, smoke, CO, gas, chemicals, electricity, and the important distinction between an indoor source and an outdoor official shelter warning.
- Implemented the two-pass route promised in the roadmap: life/medical, violence/crime, and environment overrides first; observable need second; dependency modifiers after the route.
- Reworked Situation F so ordinary smell troubleshooting begins only after the hazard gate is negative.

Existing-guide enhancements

- Added a complete essential-medication and powered-device interruption route to the outage guide, including approved backup, early calls, powered destination, transport, access, and a fillable handoff.
- Added a concise hazard handoff and after-action recovery steps rather than ending the route at “leave.”

Data and visualization foundations

- Added structured route and de-DE locale registries with reviewed source IDs, destination types, service scopes, seven current poison centres, warning channels, and fields that must be supplied locally.
- Added three generated views of the data: two-pass architecture, hazard override matrix, and essential-care continuity map.
- Added route-specific validation so diagrams and chapters cannot quietly drift away from the registry.

4.1.2 — 22 July 2026 [ref.2.23]

A4/2 vertical field guide

- Added a true 105 × 297 mm color and monochrome edition rather than scaling an A4 page until the type surrendered.
- Preserved one-column reading while adapting wide tables, equations, evidence figures, emergency cards, footnotes, code blocks, and cover geometry.
- Added numbered “FIELD NOTE” headings and “LOOK CLOSER” figure bands to make the long narrow pages feel like a browsable field manual rather than a receipt from a very anxious pharmacy.

Layout verification

- Added full-PDF render checks for geometry, tagging, blank pages, edge collisions, extracted-text markers, and color/mono contact sheets.
- Kept the standard A4 editions and made both page families part of the same validated build.

Next-minor preparation

- Prepared separate 4.2.0 improvement and extension tracks with content packets, source gates, flowgraph changes, and definitions of done.

4.1.1 — 22 July 2026 [ref.2.24]

Bounded facts return

- Added a structured evidence registry containing the values, evidence class, denominator, source, and practical limit for every new quantitative figure.
- Added eight diagrams covering evidence roles, GAD-7 external validation, breathwork trial design, reproductive-health denominators, the stroke urgency model, household water planning, repeated sleep restriction, and social connection associations.
- Restored notable numbers only where the source supports their exact wording; emergency protocols remain dominant over all estimates and models.

Research and writing

- Compared the famous original GAD-7 accuracy estimates with a later pooled diagnostic-accuracy review instead of treating one study as permanent calibration.
- Distinguished lifetime prevalence, rare-event incidence, randomized results, observational odds ratios, and literature-derived models in both prose and diagrams.
- Maintained the warm, slightly dry Flo voice while keeping humour outside the red-flag-to-action interval.

Engineering and roadmap

- Replaced the legacy monolithic scientific generator and removed deprecated generated figures during the canonical build.
- Added registry and diagram expectations to validation and source policy.
- Added a roadmap for hazard overrides, vulnerability modifiers, locale data, accessibility, household continuity, and future evidence visualizations.

4.0.1 — 22 July 2026 [ref.2.25]

Full v3.3 content parity on the v4 safety core

- Restored the complete seven-door guide topology, target audience, notation legend, flowchart legend, current-status prompt, quick routes, and safe text master tree.
- Reintroduced all Situation A branches: pregnancy before birth, unexpected birth, postpartum period, child and adult dependants, ambiguous duties, harm, ongoing care, animals, and the escaped silicon life form.
- Expanded anxiety, panic, GAD-7 context, pain communication, danger and digital safety, cognitive overload, smell troubleshooting, and no-place planning.
- Restored the full calm-guide breadth: permission, grounding, optional breathing patterns, Yerkes–Dodson context, cautious polyvagal language, comfort inventory, leaving scripts, help requests, smalltalk, and low-demand activities.

- Restored first-aid triage, wounds, shock, burns, fractures, electrical injury, vital observations, kit planning, waiting guidance, and non-physical crisis parallels.
- Restored nature/disaster priorities, shelter, thermoregulation, food, energy, environmental observation, cooperation, communication scaling, Dunbar context, governance models, group psychology, and Ostrom's principles.
- Restored the IASC support pyramid, therapy-evidence boundaries, friend-support guide, legal-navigation section, medical/social directories, housing packet, quick-reference card, and comprehensive local fields.
- Restored the appendix cross-reference, diagram index, extended formula index, complete safe text tree, fillable fields, deployment/update protocols, and notes pages.
- Expanded source coverage to match the subject breadth of v3.3.

Safety-preserving rewrites

- Kept red-flag dominance and corrected 112/110/116 117 routing from v4.
- Replaced the fictional universal cortisol-decay curve with a labelled conceptual step model.
- Replaced pain "physiological correlates" and home vital-sign clearance thresholds with observation and escalation guidance.
- Replaced match-based smell treatment, concentration-free bleach dosing, unsafe foraging, tactical self-defence, deterministic attachment/development claims, therapy-response promises, and personal survival percentages.
- Added explicit limits to Yerkes–Dodson, polyvagal, Dunbar, game-theory, survival, heat-balance, and screening content.
- Removed passwords, PINs, key locations, and similar secrets from shared fillable-print recommendations.

Writing and usability

- Reworked the full guide in the concise, warm, technically suspicious-of- nonsense voice established by v4.
- Preserved humour without placing jokes between a red flag and the emergency action.
- Separated "do now" instructions from "understand later" material so extensive content does not obstruct urgent use.

4.0.0 — 17 July 2026

[ref.2.26]

Technical realization

- Replaced CDN MathJax and timed browser waiting with native MathML.
- Removed brittle cover-document CSS merging; chapters and cover share one semantic document.
- Added a Pandoc template with table of contents, mobile navigation, theme toggle, reading progress, and print action.
- Rebuilt print CSS around an enforced A4 single-column invariant.
- Added an independent monochrome layer without copying the full stylesheet.
- Added Chrome and WeasyPrint PDF backends consuming identical HTML.
- Added structural, safety-wording, MathML, image, A4, and page-count validation.

- Fixed chapter assembly so repeated YAML frontmatter does not leak into output.

Orientation and UI

- Replaced route-first diagrams with a portrait, red-flag-first flowgraph.
- Added four explicit destinations and a reassessment loop.
- Reduced decorative cards and gradients in favour of a bathroom-tile, high-contrast utilitarian system.
- Improved mobile contents navigation and print table/figure behaviour.

Content and evidence

- Corrected newborn/medical routing from 110 to 112.
- Removed concentration-free bleach dosing, unsafe foraging advice, match-based smell advice, pain “physiological correlates,” and fictional cortisol decay.
- Reframed GAD-7 and pain scales as communication/screening tools, not triage.
- Rewrote CPR, bleeding, burn, stroke, poisoning, anaphylaxis, crisis, violence, water, outage, pregnancy, and caregiver sections against authoritative sources.
- Marked every formula as protocol, descriptive equation, conceptual model, or mnemonic.
- Expanded current German help numbers and source annotations.

Earlier versions [ref.2.27]

VERSION	DATE	SUMMARY
3.4	2026-06-10	experimental multi-backend and two-column work
3.3	2026-05/06	extensive content/reference edition preserved in archive
3.2	2026-05-03	formula and scientific-diagram expansion
3.0	2026-05-01	modular content and source chapter
2.0	2026-04-29	pixel assets and themed HTML/PDF
1.0	2026-04-29	initial guide

Version 4.0.0 deliberately removed several “scientific-looking” claims from 3.x. Version 4.0.1 restored the **breadth**, not the mistakes. Version 4.1.1 restores selected **numbers**, but only with visible scope, denominator, uncertainty, and limit. More content is useful only when its boundaries remain visible.

Sources and Evidence Notes

[ref.3]

Emergency routes, German service information, and medical, legal-aid, preparedness, postpartum, fracture, burn, and hypothermia material were reviewed for **22 July 2026**. Selected operational sources were re-checked on **8 August 2026**: BBK household water planning and outage guidance, DRK hypothermia, the 116 117 / 112 boundary, 115 access channels, and the disaster-

cooperation literature. A refresh date applies only to the sources actually opened that day; it is not a blanket claim about every external page.

Official and primary sources are preferred. A link is not evidence by itself; the guide records what each source supports and what it does **not** support.

Evidence hierarchy used here [ref.3.1]

1. current official emergency and public-health guidance;
2. current professional guidelines and systematic reviews;
3. primary research for narrowly described findings;
4. classic theory and historical texts for background;
5. conceptual models and mnemonics labelled as such.

No philosophical text, social-science model, screening score, home device, or attractive equation overrides emergency symptoms or dispatcher instructions.

Source status — a second axis [ref.3.2]

Evidence class answers *what kind of claim is this?* Source status answers *what job is it allowed to do in the current guide?* The two are independent: a classic paper can be excellent scholarship and still not be an emergency protocol, and a current service page can go stale without becoming bad scholarship.

- **Current operational** — supports a present action, route, service fact, or safety boundary.
- **Current optional** — useful explanation or context; not required to act.
- **Contested / approximate** — retained only with an explicit dispute or approximation label.
- **Historical** — kept to explain an older design, theory, or release.
- **Superseded** — deliberately replaced. It may stay findable for provenance, and must not be reused as current guidance.

Where a section below carries a status line, that status governs how the material may be used.

Bathroom-scale body and perception science [ref.3.3]

- **Jenkinson PM, Fotopoulou A, Ibañez A.** “Interoception in anxiety, depression, and psychosis: a review.” *eClinicalMedicine* 73 (2024): 102673. Interoception includes sensing, interpretation, integration, regulation, and prediction; heartbeat-detection accuracy does not show a simple reliable increase in anxiety. https://pmc.ncbi.nlm.nih.gov/articles/PMC11169962/
- **Taché Y, Bonaz B.** “Neuroendocrine control of the gut during stress.” *Annual Review of Physiology* 69. Stress-related signalling can inhibit upper-GI motor function and stimulate colonic propulsive activity. https://pmc.ncbi.nlm.nih.gov/articles/PMC2714186/

- **Reinhart PN et al.** “Effects of Reverberation and Compression on Consonant Identification in Individuals with Hearing Impairment.” *Ear and Hearing* 37 (2016). Tiled bathrooms are used as a high-reverberation everyday example; actual rooms vary substantially. https://pmc.ncbi.nlm.nih.gov/articles/PMC4767560/
- **Sarigiannidis I et al.** “Anxiety makes time pass quicker while fear has no effect.” *Cognition* 197 (2020): 104116. Three laboratory experiments found anxiety-related underestimation of elapsed duration. https://pmc.ncbi.nlm.nih.gov/articles/PMC7033556/
- **Shields GS, Sazma MA, Yonelinas AP.** “The Effects of Acute Stress on Core Executive Functions.” *Neuroscience & Biobehavioral Reviews* 68 (2016): 651–668. Meta-analysis of 51 studies and 2,486 participants. https://pmc.ncbi.nlm.nih.gov/articles/PMC5003767/
- **Lieberman MD et al.** “Subjective Responses to Emotional Stimuli During Labeling, Reappraisal, and Distraction.” *Emotion* 11 (2011): 468–480. Four experiments on affect labeling and self-reported affect. https://pmc.ncbi.nlm.nih.gov/articles/PMC3444304/
- **Khurana RK et al.** “The Implications of the Diving Response in Reducing Panic Symptoms.” *Frontiers in Psychiatry* 12 (2021): 798664. Small experimental study of cold facial immersion; not a universal treatment protocol. https://pmc.ncbi.nlm.nih.gov/articles/PMC8667218/
- **Espeland D et al.** “Health effects of voluntary exposure to cold water—a continuing subject of debate.” *International Journal of Circumpolar Health* 81 (2022). Distinguishes diving and cold-shock responses. https://pmc.ncbi.nlm.nih.gov/articles/PMC9518606/
- **da Silva RMFL.** “Syncope: epidemiology, etiology, and prognosis.” *Frontiers in Physiology* 5 (2014): 471. Situational syncope includes episodes associated with urination, defecation, coughing, visceral pain, and straining. https://pmc.ncbi.nlm.nih.gov/articles/PMC4258989/
- **Sinding C et al.** “New determinants of olfactory habituation.” *Scientific Reports* 7 (2017): 41047. Repeated or continuous sensory input can produce reduced responsiveness; habituation is not a safety test. https://pmc.ncbi.nlm.nih.gov/articles/PMC5264389/

Limit

These studies illuminate mechanisms and average effects. They do not diagnose a reader, identify a gas, explain every faint, or convert a familiar symptom into a harmless one.

First aid and emergency response

[ref.3.4]

1. **European Resuscitation Council — Guidelines 2025.** Adult basic life support, first aid, paediatric and newborn guidance, AED use, and emergency activation. https://www.erc.edu/science-research/guidelines/guidelines-2025/guidelines-2025-english/

2. **ERC — Guidelines 2025 for Everyone.** Layperson summary emphasizing early recognition, emergency activation, compressions, and AED use. https://www.erc.edu/media/p5ymaeej/gl2025_layperson_book_ipdf-v11-e.pdf
3. **German Red Cross — Finding a person in an emergency.** Scene safety, response, breathing, recovery position, emergency call, and CPR. https://www.drk.de/hilfe-in-deutschland/erste-hilfe/auffinden-einer-person/
4. **German Red Cross — Severe bleeding.** Direct pressure, wound care, warmth, monitoring, and emergency activation. https://www.drk.de/hilfe-in-deutschland/erste-hilfe/blutungen-und-blutstillung/blutungen/
5. **German Red Cross — Burns and scalds.** Current public cooling duration, sterile loose covering, and prevention of hypothermia. https://www.drk.de/hilfe-in-deutschland/erste-hilfe/verbrennungen/
6. **German Red Cross — Fractures.** Avoid movement and repositioning, support the limb, cover open injuries, and obtain emergency care. https://www.drk.de/hilfe-in-deutschland/erste-hilfe/knochenbruch/knochenbrueche/
7. **German Red Cross — Chemical burns.** Self-protection, removal of contaminated clothing, and immediate irrigation. https://www.drk.de/hilfe-in-deutschland/erste-hilfe/veraetzungen/
8. **German Red Cross — Hypothermia and frostbite.** Slow warming, no rubbing or intense direct heat, protection from further cold, and 112. https://www.drk.de/hilfe-in-deutschland/erste-hilfe/erfrierungen-und-unterkuehlungen/
9. **gesund.bund.de — Emergency numbers.** Official German distinctions among 112, 110, 116 117, poison centres, and crisis routes. https://gesund.bund.de/notfallnummern

Limits

- The guide does not reproduce a full first-aid course.
- “Golden hour” is used as an urgency heuristic, not a 60-minute biological deadline.
- Home vital signs can inform a call; they cannot safely clear red flags.

Survival and emergency preparedness

[ref.3.5]

10. **Bundesamt für Bevölkerungsschutz und Katastrophenhilfe (BBK).** *Vorsorgen für Krisen und Katastrophen* and current checklists: warning, water, food, medication, power, evacuation, hygiene, and individual needs. https://www.bbk.bund.de/DE/Warnung-Vorsorge/Vorsorge/Ratgeber-Checkliste/ratgeber-checkliste_node.html
11. **WHO — Technical Notes on Drinking-Water, Sanitation and Hygiene in Emergencies.** Water-treatment principles and limits of household methods. https://www.who.int/publications/m/item/technical-notes-on-drinking-water-sanitation-and-hygiene-in-emergencies

12. **Federal Office of Civil Protection — NINA warning information.** Official warning channels and public preparedness context. https://www.bbk.bund.de/DE/Warnung-Vorsorge/Warn-App-NINA/warn-app-nina_node.html

Limits

- **Current operational BBK wording:** an adult needs at least **1.5 L of fluids per day**, and about **0.5 L of water per day extra** should be allowed when cooking is planned. The preparedness target is ideally ten days, with BBK noting that even three days already helps and can be built up gradually.
- The **2 L/person/day** figure is Olive's own drinking-plus-cooking planning convention. It is a convenient sum, not BBK's stated physiological requirement, and not an individual medical prescription.
- The guide does not print universal bleach dosing, wild-food lists, or personal survival probabilities.
- Shelter guidance must yield to official fire, flood, storm, and chemical instructions.

Electricity safety and basics [ref.3.6]

13. **German statutory accident insurance and fire-service public guidance.** General electrical safety, disconnection before contact, and professional repair. The guide uses the conservative rule: do not touch a casualty until power is safely isolated and call 112 for significant exposure.
14. **BBK outage preparedness.** Battery lighting, radio, charging, medication, food-safety, and household continuity guidance.

Limits

The guide does not teach back-feeding, generator wiring, mains repair, or improvised high-voltage work.

Nutrition and emergency food [ref.3.7]

15. **BBK preparedness guide.** Familiar shelf-stable foods, individual dietary needs, storage planning, and household stock rotation.
16. **Federal and local food-safety guidance.** Refrigeration failure, flood contamination, and discard decisions should follow current incident-specific instructions.

Limits

Smell is not a complete food-safety test. Calorie formulas and emergency unverified wild-food lists are not used as action guidance.

Water purification and clearing [ref.3.8]

17. **WHO WASH technical notes.** Sedimentation, filtration, disinfection, safe storage, and chemical-contamination limits.
18. **Local water supplier and health authority notices.** Boil-water and do-not-use instructions are source- and incident-specific.

Limits

Cloth filtering removes visible particles but does not reliably disinfect. Boiling does not remove fuels, solvents, salts, pesticides, or radioactive contamination.

Child development [ref.3.9]

19. **WHO Motor Development Study** and pediatric developmental guidance. Milestones occur across broad windows and are interpreted with clinical and social context.
20. **German pediatric preventive-care routes.** Development, hearing, vision, feeding, movement, language, regression, and caregiver concerns belong in pediatric assessment rather than internet deadline tables.

Limits

The guide does not diagnose development, attachment, autism, language disorder, or parenting quality from a single milestone or one stressful interaction.

Mental health best practices [ref.3.10]

21. **World Health Organization — Doing What Matters in Times of Stress** (2020). Grounding, unhooking, values, and small practical actions. https://www.who.int/publications/i/item/9789240003927
22. **gesund.bund.de — Managing psychological crises.** Safety escalation, professional support, social connection, and caution around self-help when symptoms are severe. https://gesund.bund.de/mit-psychischen-krisen-umgehen
23. **gesund.bund.de — Social psychiatric service.** Low-threshold public crisis support for affected people and relatives. https://gesund.bund.de/sozialpsychiatrischer-dienst
24. **Inter-Agency Standing Committee — MHPSS Guidelines.** Layered support from basic safety and services through community, focused, and specialized care. https://interagencystandingcommittee.org/iasc-task-force-mental-health-and-psychosocial-support-emergency-settings/iasc-guidelines-mental-health-and-psychosocial-support-emergency-settings-2007

Anxiety assessment — GAD-7 [ref.3.11]

25. **Spitzer RL et al.** "A Brief Measure for Assessing Generalized Anxiety Disorder: The GAD-7." *Archives of Internal Medicine* 166 (2006): 1092–1097. https://doi.org/10.1001/archinte.166.10.1092

The instrument covers the preceding two weeks. It is a screening and communication tool, not acute medical triage.

Pain assessment — NRS [ref.3.12]

26. **Hjermstad MJ et al.** Comparison of numerical, verbal, and visual analogue pain scales. *Journal of Pain and Symptom Management* 41 (2011): 1073–1093. https://pubmed.ncbi.nlm.nih.gov/21110961/

Pain intensity is patient report. It does not directly encode tissue damage, physiology, or emergency severity.

Stress and cortisol research [ref.3.13]

27. **McEwen BS and related allostatic-load literature.** Stress physiology is dynamic and context-dependent.

28. **Arnsten AFT.** Stress-signalling effects on prefrontal function provide background for simplified action queues.

Limit

The former $C(t) = C_0 e^{-\lambda t}$ "cortisol decay" line was fictional as a universal personal curve and remains removed. The replacement arousal equation is explicitly conceptual.

Heart-rate variability [ref.3.14]

29. HRV research describes variation in intervals between heartbeats and is sensitive to measurement conditions, breathing, posture, device quality, age, and health.

Limit

The guide does not use HRV to diagnose safety, trauma state, vagal function, or whether a person may ignore emergency symptoms.

Physiological sigh and breathing research [ref.3.15]

30. **Balban MY et al.** "Brief structured respiration practices enhance mood and reduce physiological arousal." *Cell Reports Medicine* 4 (2023), 100895. https://doi.org/10.1016/j.xcrm.2022.100895

The trial studied repeated daily practice. It does not prove that one sigh treats every acute panic episode.

Cognitive-load theory [ref.3.16]

31. **Cowan N.** "The magical number 4 in short-term memory." *Behavioral and Brain Sciences* 24 (2001): 87–114. https://doi.org/10.1017/S0140525X01003922

32. **Sweller and later cognitive-load literature.** Distinguishes task complexity from avoidable presentation load.

Limit

Working-memory estimates are design clues, not fixed personal capacities or clinical tests.

Dunbar numbers — social-brain hypothesis [ref.3.17]

Status: current optional background. Moved out of Olive's operational path; no group-size threshold decides when a household needs a shared log.

33. **Dunbar RIM.** "Neocortex size as a constraint on group size in primates." *Journal of Human Evolution* 22 (1992): 469–493.

Nested social-network values are approximate population findings. The guide uses them only to explain why larger groups need structures and records.

Ostrom — commons governance [ref.3.18]

Status: current optional background, for sustained shared-resource problems only. Not a first-minutes emergency constitution.

34. **Ostrom E.** *Governing the Commons* (1990).

35. **Ostrom E.** Nobel lecture, “Beyond Markets and States” (2009). https://www.nobelprize.org/prizes/economic-sciences/2009/ostrom/lecture/

The eight principles summarize patterns in durable self-governed commons. They are not a universal emergency constitution.

IASC — mental health and psychosocial support [ref.3.19]

36. **IASC MHPSS Guidelines** (2007), source 24 above.

The pyramid supports a crucial distinction: basic safety, family/community support, focused help, and specialized treatment complement one another.

Therapy effectiveness [ref.3.20]

37. **Hofmann SG et al.** Review of cognitive behavioural therapy meta-analyses. *Cognitive Therapy and Research* 36 (2012): 427–440.

38. **Shedler J.** Review of psychodynamic psychotherapy evidence. *American Psychologist* 65 (2010): 98–109.

39. Condition-specific guidelines from professional and public-health bodies should guide treatment selection.

Limit

Universal therapy response percentages are not personal promises. Evidence informs shared clinical decisions; method, diagnosis, severity, access, fit, and preference matter.

Olfactory science [ref.3.21]

40. Olfaction is strongly connected with emotion and memory, but that does not make scented smoke a safe intervention.

41. Fire, gas, poison, and occupational-safety guidance supports the guide’s conservative unknown-smell route: no flame, no switch, leave exposure, call from outside when danger is possible.

Caregiver burnout and overload [ref.3.22]

42. **gesund.bund.de — Overload among family caregivers.** Warning signs, counselling, respite, and crisis routes. https://gesund.bund.de/belastungen-pflegende-angehoerige

43. Caregiver-burden research supports the need for relief, rotation, and structural support; it does not assign one inevitable depression rate to every caregiver.

Stroke treatment [ref.3.23]

44. ERC and German emergency guidance support FAST recognition and immediate 112 activation. The guide records “last known well” but does not ask a lay reader to calculate treatment windows.

Burn assessment [ref.3.24]

45. Clinical tools such as Lund–Browder charts are intended for trained assessment. The lay guide prioritizes stopping the

burn, safe cooling, warmth, covering, and emergency escalation.

Seneca, Tao, and Stoic philosophy [ref.3.25]

Status: current optional / historical-philosophical background.

Seneca and Stoicism

46. Seneca's letters and Stoic traditions offer historical material on control, adversity, judgement, and action.

Tao Te Ching and Taoism

47. The *Tao Te Ching* offers philosophical reflection on non-forcing, simplicity, and flexibility.

I Ching

48. The *I Ching* is included only as cultural and philosophical background.

Limit

Philosophy can support reflection after immediate safety is secured. It does not replace emergency services, treatment, housing, or consent. Randomly opening a book is an activity, not evidence-based triage.

Psychology of masses, group dynamics, and sociology [ref.3.26]

Crowd psychology and social identity

Status: current operational support for Olive's cooperation-first framing. This literature, not game theory, carries the empirical weight for how people actually behave in emergencies.

49. **Drury J, Cocking C, Reicher S.** "Everyone for themselves? A comparative study of crowd solidarity among emergency survivors." *British Journal of Social Psychology* 48 (2009): 487–506. Interviews with survivors of eleven emergencies support an account in which shared identity can arise from the emergency itself and be associated with solidarity rather than automatic mass panic. https://doi.org/10.1348/014466608X357893

    Its companion for the recovery period is **Ntontis E, Drury J, Amlôt R, Rubin GJ, Williams R, Saavedra P**, "Collective resilience in the disaster recovery period," *British Journal of Social Psychology* 60 (2021): 1075–1095. Emergent social identity and observed social support were associated with collective efficacy, well-being, and the provision of support during recovery, not only during the acute event. https://doi.org/10.1111/bjso.12434

    Together these correct simplistic panic assumptions. They do not guarantee cooperation in every crowd or every disaster.

Conformity and obedience

50. Classic work by Asch, Milgram, and later researchers provides historical context but requires ethical and methodological interpretation.

Governance models

51. Ostrom, organizational theory, deliberative-democracy, sociocracy/consent, and emergency-management practice inform the comparison of coordination forms.

Sociology and power

52. Weber, Arendt, Foucault, and later social theory provide vocabulary for authority, bureaucracy, legitimacy, and power. They are background, not operational protocols.

Legal and professional standards

[ref.3.27]

53. **Official German Justiz-Services — Beratungshilfe.** Eligibility, application routes, documents, out-of-court scope, and current fee. https://service.justiz.de/beratungshilfe
54. **Official German Justiz-Services — Prozesskostenhilfe.** Financial support for eligible court proceedings. https://service.justiz.de/prozesskostenhilfe
55. **German statutory text — §32 StGB and surrounding law.** Primary legal text must be interpreted in case context by qualified counsel.

Limit

The guide does not provide case-specific legal advice or guarantee the result of self-defence, housing, criminal, family, or civil disputes.

Affect labelling and emotional regulation

[ref.3.28]

56. Research on affect labelling suggests that putting feelings into words can alter emotional processing for some people. The guide uses plain naming as an optional grounding step, not a guaranteed neural switch.

Hydration and cognition

[ref.3.29]

57. Hydration can affect wellbeing and cognition, especially with significant deficit, heat, illness, or exertion.

Limit

“Drink water” is not a universal treatment for panic or illness. Swallowing must be safe, and emergency symptoms require assessment.

Yerkes–Dodson law

[ref.3.30]

Status: current optional, approximate explanatory background.

58. **Yerkes RM and Dodson JD** (1908) and later performance research support a broad relation among arousal, task difficulty, and performance.

Limit

There is no single measurable optimum for every person and task. The guide uses it to justify simplifying tasks under high arousal.

Polyvagal theory

[ref.3.31]

Status: contested / approximate background.

59. Polyvagal language is widely used in therapy and popular education, while strong anatomical and evolutionary claims remain debated.

Limit

The guide uses connected/mobilized/shutdown language descriptively and does not present it as a complete diagnosis or settled mechanism.

Attachment, mismatch, and repair

[ref.3.32]

Status: Bowlby and Ainsworth are historical foundations; the operational claim rests on interaction research. Amber's "repair matters more than perfect attunement" was previously supported only by vague reference to "later rupture-and-repair research," which is not a citation.

60. **Bowlby J.** *Attachment and Loss* (1969). Historical foundation.
61. **Ainsworth MDS et al.** *Patterns of Attachment* (1978). Historical foundation.
62. **Müller M, Zietlow A-L, Klauser N, Woll C, Nonnenmacher N, Tronick E, Reck C.** "From Early Micro-Temporal Interaction Patterns to Child Cortisol Levels: Toward the Role of Interactive Reparation and Infant Attachment in a Longitudinal Study." *Frontiers in Psychology* 12 (2022): 807157. https://doi.org/10.3389/fpsyg.2021.807157 — supports interactive reparation as a real phenomenon worth naming. Amber's four-step repair script is a practical synthesis, not a validated diagnostic protocol.

Limit

Attachment categories are not assigned from one incident, a quiz, a single missed cue, or a bathroom conversation. Ordinary mismatch is not proof of relationship damage.

Postpartum depression

[ref.3.33]

63. **gesund.bund.de — Wochenbettdepression.** Distinguishes a brief baby blues from persistent depressive symptoms and emphasizes professional support. https://gesund.bund.de/wochenbettdepression
64. Psychiatric emergency guidance supports immediate 112 activation for acute self/baby danger, severe confusion, hallucinations, or delusional states.

Golden hour and trauma medicine

[ref.3.34]

65. Trauma systems emphasize early recognition and rapid treatment of serious injury. The "golden hour" is retained only as an urgency mnemonic.

Haemorrhagic shock classification

[ref.3.35]

66. Formal shock classes are clinical teaching tools. The lay guide instead uses severe bleeding, altered state, pallor/clamminess, weakness, collapse, and rapid breathing as reasons for 112 and direct pressure.

Anaphylaxis [ref.3.36]

67. ERC and allergy guidelines support immediate intramuscular adrenaline via a prescribed auto-injector, emergency activation, and avoidance of standing or walking during severe reactions.

Game theory and cooperation [ref.3.37]

Status: current optional explanatory background. Demoted from Olive's mainline: collective-resilience research, not the Prisoner's Dilemma, carries the empirical burden for real emergencies.

68. **Axelrod R.** *The Evolution of Cooperation* (1984) and repeated-game research provide background for visible rules, proportional response, and repair.

Limit

Game theory is explanatory. It does not reduce real people to fixed strategies, predict one real neighbourhood from a toy payoff matrix, or justify coercive resource control.

> **Game theory is not permission to call your neighbour "Player B" while taking his batteries.**

Thermoregulation [ref.3.38]

69. Basic heat-transfer physiology supports staying dry, blocking wind, insulating from ground, reducing heat exposure, and avoiding intense direct rewarming in suspected hypothermia.
70. Current DRK guidance, source 8 above, governs the first-aid actions used.

Reproductive health and medication [ref.3.39]

71. **Embryotox.** Evidence-based information and specialist counselling for medication during pregnancy and breastfeeding. https://www.embryotox.de/
72. **familienplanung.de.** Federal pregnancy and counselling information. https://www.familienplanung.de/beratung/beratungsstellensuche/

German crisis and support services [ref.3.40]

Status: current operational. These carry service facts that expire; each needs a checked date wherever a local deployment copies it.

73. **TelefonSeelsorge:** https://www.telefonseelsorge.de/
74. **Violence against Women Helpline:** https://www.hilfetelefon.de/
75. **Medical on-call service — 116 117.** The patient service states it is reachable around the clock, 24 hours a day and seven days a week, for urgent medical problems that are **not** life-threatening and cannot wait for the next regular practice opportunity. Life-threatening emergencies remain **112**. This is the boundary Blue, Olive, and Grey now route against. https://www.116117.de/de/aerztlicher-bereitschaftsdienst.php

76. **Nummer gegen Kummer:** https://www.nummergegenkummer.de/

Cyber incident branch [ref.3.41]

77. **Federal Office for Information Security (BSI).** Citizen and organizational incident information and reporting routes. https://www.bsi.bund.de/

Quantitative evidence figures [ref.3.42]

Each figure keeps its evidence class, denominator, scope, and practical limit beside the value.

78. **Spitzer RL et al.** "A Brief Measure for Assessing Generalized Anxiety Disorder: The GAD-7." *Archives of Internal Medicine* 166 (2006): 1092–1097. Original primary-care validation at cut-off 10 reported 89% sensitivity and 82% specificity. https://doi.org/10.1001/archinte.166.10.1092

79. **Cochrane diagnostic-test-accuracy review (2025).** At cut-off 10 or the nearest available value, pooled sensitivity for generalized anxiety disorder was 0.64 (95% CI 0.56–0.72) and specificity 0.91 (0.87–0.93). Heterogeneity remained substantial. https://www.cochrane.org/evidence/CD015455_how-accurate-are-gad-7-and-gad-2-questionnaires-detecting-anxiety-disorders

80. **Balban MY et al.** "Brief structured respiration practices enhance mood and reduce physiological arousal." *Cell Reports Medicine* 4 (2023):

100895. Remote randomized study; 108 adults included, four conditions, five minutes daily for 28 days. https://doi.org/10.1016/j.xcrm.2022.100895

81. **World Health Organization.** *Infertility Prevalence Estimates, 1990–2021*, current fact sheet, and 2025 global guideline. Approximately 17.5% of adults—about one in six people of reproductive age—experience infertility during their lifetime. https://www.who.int/news-room/fact-sheets/detail/infertility

82. **VanderKruik R et al.** "The global prevalence of postpartum psychosis: a systematic review." *BMC Psychiatry* 17 (2017): 272. Five incidence studies ranged from 0.89 to 2.6 per 1,000; methods were too heterogeneous for a pooled global estimate. https://doi.org/10.1186/s12888-017-1427-7

83. **Saver JL.** "Time is brain—quantified." *Stroke* 37 (2006): 263–266. Literature-derived model estimates for a typical untreated large-vessel supratentorial ischemic stroke: 1.9 million neurons, 14 billion synapses, and 12 km of myelinated fibres per minute. https://doi.org/10.1161/01.STR.0000196957.55928.ab

84. **BBK.** *Vorsorgen für Krisen und Katastrophen*, revised 2025/2026. Household planning value: ideally two litres per person per day for ten days; at least three days already helps and may be expanded gradually. https://www.bbk.bund.de/DE/Warnung-Vorsorge/Vorsorge/Ratgeber-Checkliste/ratgeber-checkliste_node.html

85. **Van Dongen HPA et al.** “The cumulative cost of additional wakefulness.” *Sleep* 26 (2003): 117–126. Controlled study enrolling 48 healthy adults; four-, six-, and eight-hour time-in-bed groups were followed for 14 days, while a separate zero-hour comparison group underwent three days of total sleep deprivation. The four- and six-hour chronic-restriction conditions produced cumulative, dose-dependent performance deficits. https://doi.org/10.1093/sleep/26.2.117

86. **Holt-Lunstad J et al.** “Loneliness and social isolation as risk factors for mortality: a meta-analytic review.” *Perspectives on Psychological Science* 10 (2015): 227–237. Adjusted observational odds ratios: social isolation 1.29, loneliness 1.26, living alone 1.32. https://doi.org/10.1177/1745691614568352

Shared limit

These figures provide bounded context, not certainty theatre. Screening accuracy varies by setting; randomized-study results depend on sample and intervention; observational odds ratios do not establish individual causation; population frequencies do not predict one person; mathematical models inherit their assumptions. Emergency protocols continue to outrank every chart.

Routing, hazard, and locale foundations

[ref.3.43]

87. **Bundesamt für Bevölkerungsschutz und Katastrophenhilfe (BBK).** “European emergency number 112,” current 2026 information. The page names acute or potentially life-threatening situations, fire, smoke, explosion, and suspected gas smell as emergency examples. https://www.bbk.bund.de/SharedDocs/Kurzmeldungen/DE/2026/02/om-11-tag-notruf.html

88. **BBK.** “Was tun, wenn es brennt?” Current public fire-behaviour guidance: warn people, leave by a safe route, close doors when possible, call 112, and do not enter a smoke-filled route. https://www.bbk.bund.de/DE/Warnung-Vorsorge/Vorsorge/Brandschutz/_documents/feuer-verhalten_dossier2.html

89. **BBK.** “Vorsorge und Handeln bei Stromausfall.” Current outage guidance, including generator and combustion precautions relevant to carbon monoxide and the possibility that failure of medical equipment becomes life-threatening. https://www.bbk.bund.de/DE/Warnung-Vorsorge/Vorsorge/Stromausfall/stromausfall_node.html

90. **Deutscher Verein des Gas- und Wasserfaches (DVGW).** “Was tun bei Gasgeruch?” Consumer guidance: avoid flames and sparks, do not operate electrical switches or phones in the affected building, warn by knocking, leave, and call the network operator from outside. https://www.dvgw.de/themen/gas/verbraucherinformationen/was-tun-bei-gasgeruch

91. **gesund.bund.de.** “Erste Hilfe bei Vergiftungen.” Current federal health information on stopping exposure, fresh air, rinsing skin and eyes, keeping product information, poison-centre consultation, and 112 escalation for severe symptoms. https://gesund.bund.de/erste-hilfe-bei-vergiftungen

92. **Bundesinstitut für Risikobewertung (BfR).** “Giftinformationszentren in Deutschland,” reviewed 29 April 2026. Current directory of the seven German poison information centres in Berlin, Bonn, Erfurt, Freiburg, Göttingen, Mainz, and München. https://www.bfr.bund.de/deutsches-produktregister-depro/giftinformationszentren-in-deutschland/

93. **BBK.** NINA warning-message documentation. Official warnings can specify whether people should shelter indoors, stop ventilation, avoid an area, or evacuate; event-specific instructions outrank generic movement advice. https://www.bbk.bund.de/DE/Warnung-Vorsorge/Warn-App-NINA/Funktion-Inhalt/Warnmeldungen/warnmeldungen_node.html

94. **BBK.** “Notgepäck.” Current emergency-bag guidance, used only for immediately reachable essentials and advance preparation —not as a reason to delay escape from an active hazard. https://www.bbk.bund.de/DE/Warnung-Vorsorge/Vorsorge/So-koennen-Sie-sich-vorbereiten/Notgepaeck/notgepaeck_node.html

95. **German Red Cross (DRK).** “Stromschlag — Erste Hilfe.” Current first-aid guidance emphasizes self-protection, interruption of the circuit, 112 activation, resuscitation when required, and rescue by trained personnel only for high-voltage incidents. https://www.drk.de/hilfe-in-deutschland/erste-hilfe/stromschlag/

Routing limit

The registry describes safe first actions and destinations; it does not measure an actual atmosphere, electrical system, fire compartment, device runtime, or individual toxic dose. Scene-specific instructions from dispatchers, fire services, poison centres, network operators, warning authorities, clinicians, and device emergency plans take precedence.

Household continuity synthesis [ref.3.44]

`src/data/continuity_catalog.json` reorganizes existing operational material around eight household functions: information, air/hazard, care/power, water, temperature/shelter, food, sanitation, and access/transport. It does not add new exposure thresholds, treatment rules, or survival estimates.

The continuity view draws primarily on sources 87, 89, 93, and 94 above, plus the accessibility foundation below. Its contribution is human-factors structure: status, remaining safe window or stock, named owner, backup, next action, review time, and failure escalation. The generated figures are views of that registry and have complete text equivalents in Ch.6.

Continuity limit

A generic household board cannot know the actual device runtime, food safety, water quality, building condition, transport availability, municipal response, or a person’s access requirements. Official warnings, dispatchers, clinicians, network operators, product instructions, and personal emergency plans continue to outrank it.

Safe-place, access, and freshness foundations [ref.3.45]

96. **Behördennummer 115.** Nationwide public-administration information line. The ordinary telephone service currently publishes Monday to Friday, 08:00–18:00. Note that this is the schedule for *one* access channel: see source 102, whose published hours differ. The guide uses 115 only to identify the responsible authority; it is not an emergency number, and not a guarantee of accommodation, appointment, bed, or after-hours municipal response. https://www.115.de/
97. **Hilfetelefon "Gewalt gegen Frauen."** Current service overview for **116 016**: free, confidential, around the clock, multilingual, and available through telephone and online routes. Published access routes also include sign language, written language, and easy language. https://www.hilfetelefon.de/
98. **Hilfetelefon Gewalt an Männern.** Current anonymous telephone support at **0800 1239900** during published service hours, with online counselling. The guide prints the availability limit rather than presenting it as a round-the-clock emergency service. https://www.maennerhilfetelefon.de/
99. **Nummer gegen Kummer.** Current child and youth helpline **116 111** and online counselling. Published service hours apply; acute danger remains a 110/112 route. https://www.nummergegenkummer.de/
100. **TelefonSeelsorge Germany.** Current around-the-clock crisis-conversation routes including **116 123**. It is not a substitute for rescue service when a person cannot remain safe. https://www.telefonseelsorge.de/
101. **Zentrale Informationsstelle Autonomer Frauenhäuser.** Nationwide women's refuge search with availability hints and accessibility filters. The directory warns that it is not complete and that a displayed place is not a confirmed bed or the protected refuge address. https://www.frauenhaus-suche.de/
102. **115 sign-language service.** Current DGS video route to public-administration information, requiring internet and a camera-capable device. Its published hours are **not** the same as the ordinary 115 telephone hours in source 96, which is exactly why an access channel needs its own recorded hours rather than inheriting the number's. https://www.115.de/gebaerdensprache
103. **W3C.** *Web Content Accessibility Guidelines (WCAG) 2.2.* Used as the technical basis for complete image alternatives, logical headings, consistent navigation, and interfaces that do not depend on a single sensory channel. https://www.w3.org/TR/WCAG22/

Safe-place and accessibility limit

The national registry can identify national services and categories. It cannot know a municipality's current after-hours office, shelter capacity, working lift, accessible room, pet policy, transport availability, powered destination, or whether a threatened person can safely use a particular device. Those remain explicit local fields and

require confirmation. Communication adaptations should be chosen with the person; diagnosis, speech, eye contact, or movement does not reveal a complete access plan.

Source-freshness rule

Operational services carry a review date and a maximum review interval. A recent review does not prove that a remote service is reachable this minute; local availability still needs confirmation.

Editorial policy

[ref.3.46]

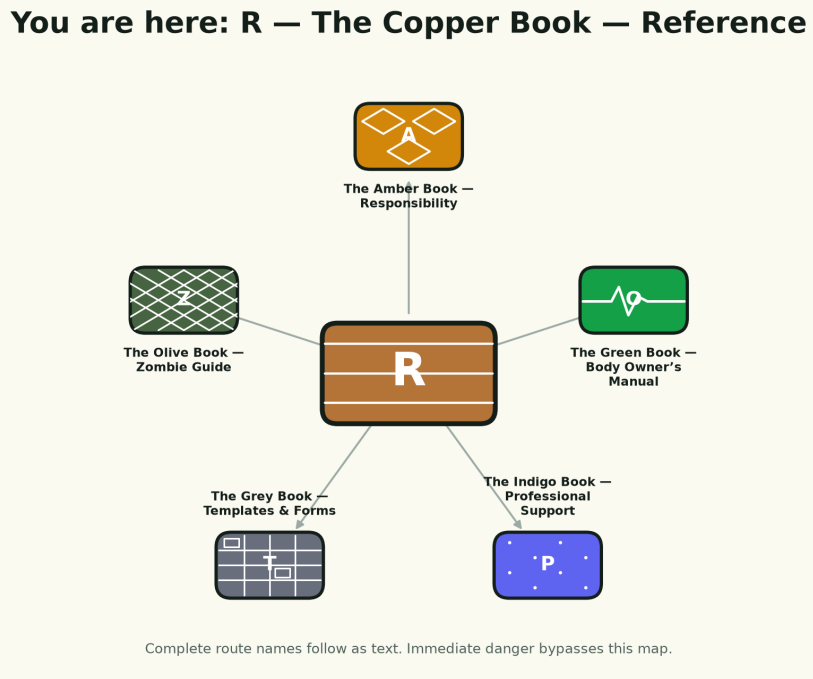
- Do not infer acute medical urgency from a GAD-7, pain score, home pulse, oximeter, blood pressure, or apparent calm.
- Do not print drug, chemical, or water-disinfection dosing without product- and concentration-specific authority.
- Distinguish measured relationships from explanatory models.
- Label disputed or approximate theories.
- Prefer a short action plus escalation rule before deeper explanation.
- Keep humour away from the gap between a red flag and the action.
- Recheck service numbers, legal-aid details, and guideline versions before printing or deployment.
- Keep confidence proportional to the evidence.

Where next?

R

You do not need to complete the shelf in order. Stay here while this is the primary problem; move when another title becomes more accurate.

- **A — The Amber Book — Responsibility** — use it when that problem becomes primary.
- **O — The Green Book — Body Owner's Manual** — use it when that problem becomes primary.
- **P — The Indigo Book — Professional Support** — use it when that problem becomes primary.
- **T — The Grey Book — Templates & Forms** — use it when that problem becomes primary.
- **Z — The Olive Book — Zombie Guide** — use it when that problem becomes primary.



Connections from R — The Copper Book — Reference