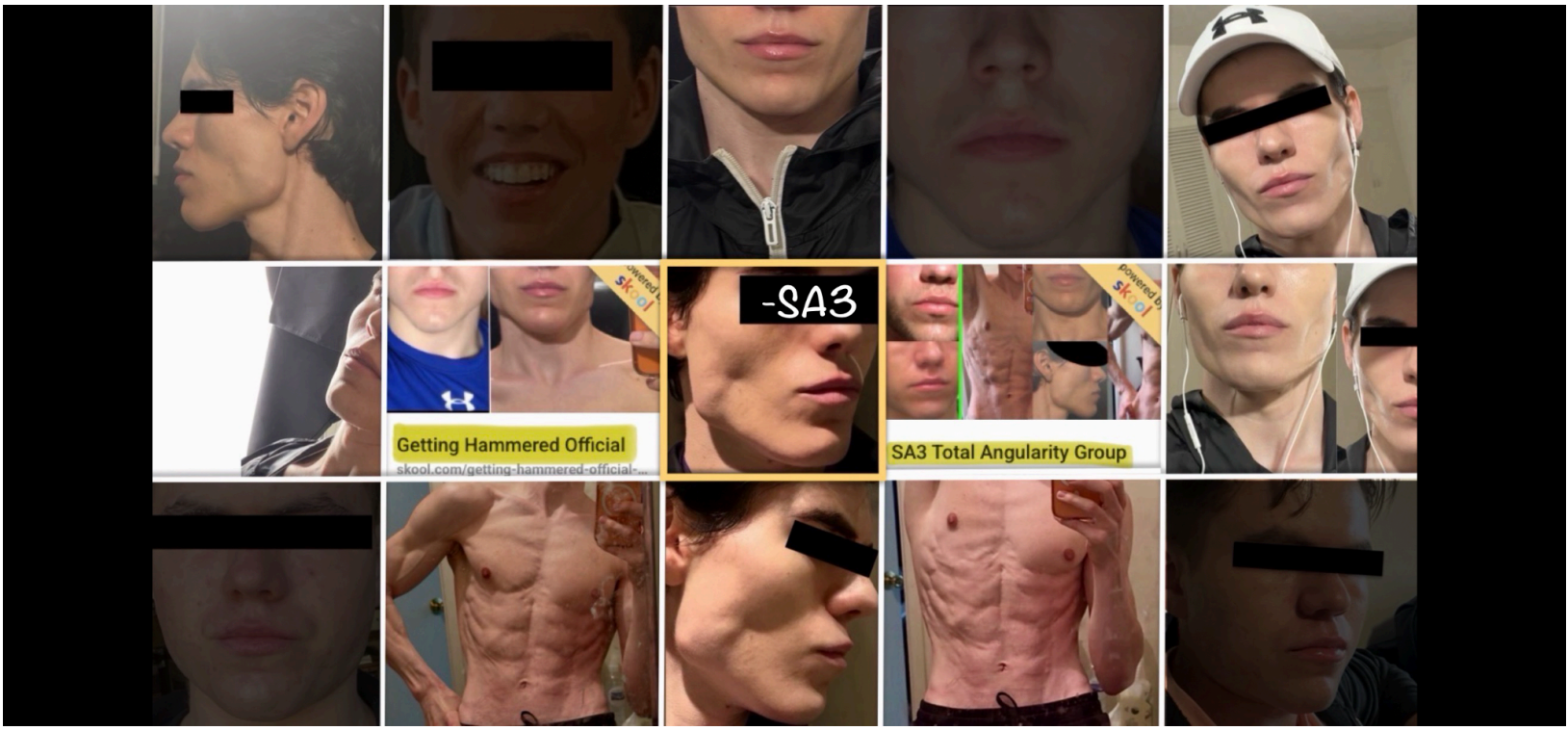
The SpectrumAesthetics3 Protocol - V 1.0 Archive



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What exact areas do YOU need to target?

This actually leads us to the first major mistake with bonesmashing, which is:

1) Not being COMPLETELY shredded and debloated. + Why this is a MAJOR risk

The difference even from "lean" to normies vs. fully chiseled is insane. Since I was not lean enough when doing cheekbones, I overdid them laterally (and shouldn't have hit the middle/bottom parts in general, could have kept them more compact and higher-set), and then when lean it became a harmony issue since they are just too much relative to my lower third width (which now I am training) and also to my flatter submalar/midface area (which I'll address eventually as well).

You do not fully know what you look like until you are in the above condition, so you can't really know in what way to change your ramus-gonions area, chin width or height, chin front projection, cheekbones, etc. And you can't even rely on photoshop morphs to test out what working on different areas might look like.

So tread CAREFULLY with this when not TRULY as lean as needed. If it is something obvious like a tiny chin like I had then yes you can work on this while getting shredded. Since lasting results take a while to accumulate anyways so you won't overdo it in a short period of time probably. But I think the point I am making here is clear. You need to fully see your base since what we are doing is literally the equivalent of filler or implant – and you don't want to have to do bone shaving or scar tissue buildup removal (depending on what the mass we are adding actually consists of) later on.

Being shredded for the months ending 2025 helped me fully see that my jaw corners needed work, no copes.

If you are not shredded as fuck and are doing this over a long period of time, that is akin to getting implants or filler without even knowing what exactly you really need, LOL

Getting shredded is beyond the scope of this program, but GLP drugs changed my life by allowing me to finally get truly lean and to maintain it, and PSMF dieting with high protein is a great way to get the dieting business done with asap.

But yeah, Knowing where to hit:

- **FaceApp** morphs of yourself (**reshape tool**)
- **Claude prompts for advice** (say you are getting filler to become as model-tier and objectively attractive as possible and want to know what areas to suggest the doctor to

inject it based on weak points – ofc don't bother explaining the real mechanism. iI is surprisingly objective in helping even with hardmaxxes and stuff).

- To an extent **using swelling as a guide**, seeing how swelling certain areas in certain ways alters your look; a decent but not 100% perfect proxy of future results (and if it is uncanny you also may have hit too hard/long and the high swelling is the issue, not growth on the bone for you in general)
- It is beyond the scope of this to try to compile resources on the ideas ratios related to all the areas one may bonesmash, but also, it isn’t as though I was using measuring tools on my pics, like, ever. If you have an aesthetic and objective eye, then you can figure out what things to work on.

The Golden Rule / The essentials of the program

> how many hits are you doing in each area? and with cheekbones are you just hitting one bit of moving across with the hammer?

The Golden Rule: keeping the swelling/pump alive and never letting it fully dying down, but not doing too much either where we damage the skin, etc.

What we are coming to with this is that it is more convoluted than a totally static recommendation like "X sets of X reps at X intensity per spot 3x per day"

Instead, it seems to come down to an intuitive titration up/down of these factors depending on how well the swelling is staying active and the area a bit pumped between sessions.

When an area feels like it is basically returning to baseline - both in swelling appearance and just the feel of it and pain, if it feels like you have never hit it before in your life - then you need to be upping some combo of sets/reps and intensity.

Now, instead of only pulling the volume lever (which takes more time) or intensity (more skin damage, head jostling, etc.), I think it makes sense to adjust all of these things in tandem. The biggest thing for me being to up frequency itself in adding a mid-day session, so now it is 7am, 1pm, 7pm roughly, spread out as much as I can. Sometimes jaw corners, but especially chin, were just not staying pumped between sessions. Something like cheekbones for me were always way easier to keep pumped with how swollen they can get

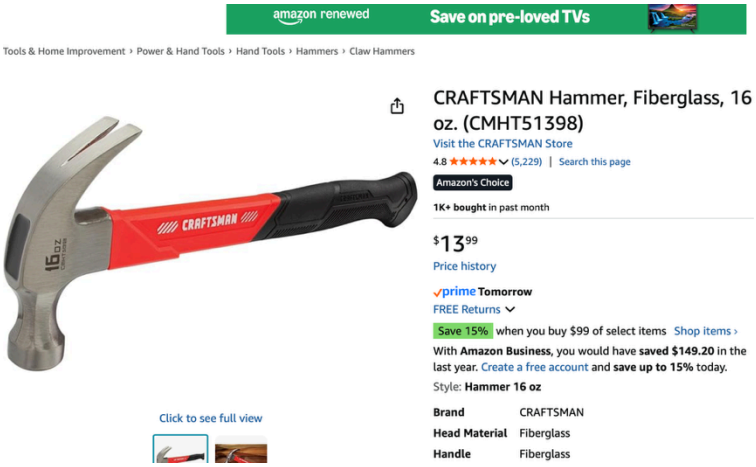
But now, chin feels more swollen, is bigger, and a little tender to the touch each session; as far as I understand this is the GOLDEN ZONE. Where our program isn't over-damaging anything, and yet providing a constant enough stimulus state for healing to come in the form of what is likely scar tissue mass buildup.

So, based on the Golden Rule in my experience, this has been anything from 2-5 sets per spot per session, 30-100 reps per spot. What "spot" means to me is just cheekbone, ramus, chin front, or chin corners.

"HITTING ONE BIT OR MOVING ACROSS WITH THE HAMMER"? – moving up and down for ramus, going across it for gonions from the jaw corner to the antegonial notch, and going side to side when doing front of chin, going across, up a tiny bit, back across, repeat. Since chin corners are a specific tiny area, there's no moving up/across to be doing, so that's an

example of a spot where each rep is the same spot. Tho I'll change angle between sets from diagonal leaning more from upwards/vertical to hitting them from a more horizontal plane.

-HAMMER not fists, 16oz not 8oz so the weight makes it easier and better, COMPLETELY FLAT SMOOTH HEAD since your skin will get KILLED if there is any unevenness or scratches.

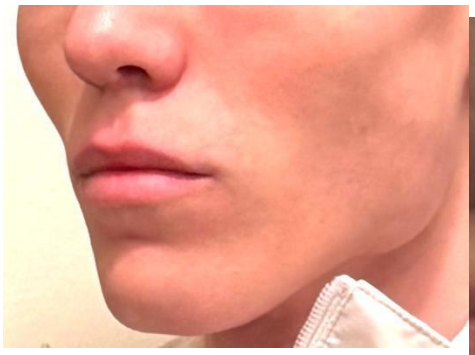


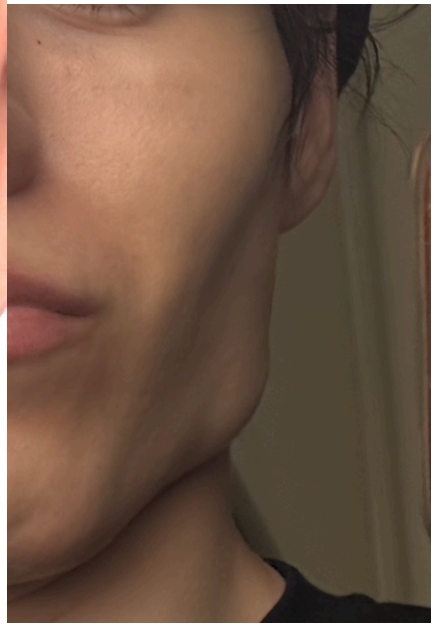
I had this heavy steel ball thing for chin corners, and this allowed to hit more specifically since a hammer head is way too wide to target exactly what you need for that spot. ie- [amazon link to the type iirc]

Now, without this on hand currently, I am using the hammer for chin corners, but diagonally in a way that I am only using like half the head surface

Guides / notes for different areas:

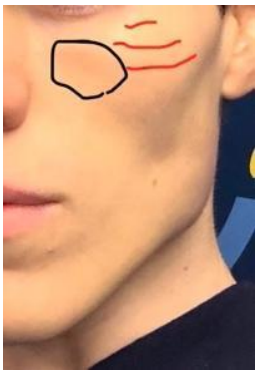
Cheekbones





CHEEKBONES SHAPING KEYS: I wish I only did the top half of them and didn't overdo the outer part of them. Now the wider jaw is bringing the ratio into balance again though.

See how these are a little bulbous and "tall"? They look far better than before and are not bad, but if I only did the middle half and higher as marked in **red** then they could be higher, more compact, taller and deeper hollow cheeks probably, etc. A set would be going across back in forth, then up a little more and across back n forth a couple times, repeat etc. yes, be careful if going closer to eye.

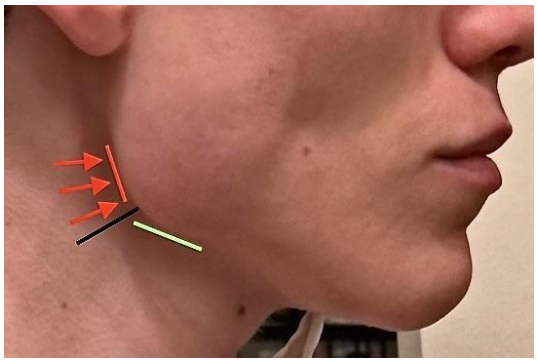


The **black circle:** this is marking the underlying skin damage and darkness discoloration that I always talk about. This isn't the cheekbone anyways and was too soft tissue for me to grow ig. It's slightly dark in the pic and this is with CC cream covering it. So avoid this inner zone and stay on the right parts of the cheekbone.

The ideal cheekbones for your face are going to differ, so perhaps can compile resources here on the most ideal growth for your face shape and archetype. But even if you just grow them haphazardly, you will be better off than if they are flat, tbh.

MY SKIN DAMAGE: See the skin damage section for more on how I killed my skin by hitting in that black circle area, RIP

Jaw corners (ramus/gonions)



-The **black line** in the side profile pic divides the **ramus** which is above it marked with **red** and the **gonion** below it in **green**; idk where the exact anatomical dividing line is, but this is what I am referring to

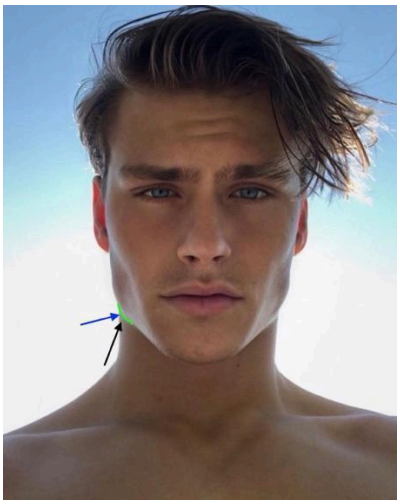
-**My plan right now.** I am hitting mostly the ramus and not the gonion right now. The ramus narrowness was the real weakness before, and the swelling ascended me right away and made it clear this was the major opportunity zone. This seems to be the bulk of the jaw corners area mass that I need. That being said, once I grow them to a sufficient degree, maybe I will need more gonion width as well in order to balance things or go even further. So, I have largely used swelling as a guide in the past: acute swelling results to see what ascends you + FaceApp reshape morphs to alter a few mm of shape + Claude prompts (telling it you are trying to become as model tier as possible and are seeing a doctor for filler and want to know what areas to ask about or whatever)

-**Part of the ramus.** The red arrows in the side profile pic indicate I am hitting the **lower part of the ramus**, like the first inch of it above the black line dividing the ramus from the gonion at the corner edge, but especially the bottom half of this 1-inch range for the best flare and angularity

-**Gonion hits angle.** When I hit gonions a little bit, I do not go not from the bottom, since hitting that green line area from the bottom will make it taller over time and provides a kind of weird blocky-jaw looking pump that I do not think is aesthetic; so to the extent I am minimally hitting gonions, I try to have the hammer sideways and come from the side as much as I can. But this is difficult to perfect do the way the bone is shaped so it is still from a slight upward angle, but mostly horizontal.

-**Ramus angle on horizontal plane.** The illustration of a person from above with arrows: those arrows are to show the angle I am coming at the ramus from. Like how it is hard to hit the gonions fully horizontally, I find it hard to hit the ramus fully from the side due to soft tissue interference, so even when coming from the side, it still is from a slightly behind angle, kind of like the middle of the 3 arrows in that picture.

-So the ramus sets, I'm following the protocol guidelines at the bottom of my .org post and working up and down the range during the set, again mostly concentrating on the lower part. Gonions I'm just doing a little bit of horizontal work (again, probably like a 30 degree angle), mostly to test the swelling at this point vs actually driving growth there.



The green line here marks the gonion on Arvid Hestner's right side, tracing from the jaw corner where it meets the ramus all the way in until the antegonial notch.

The **blue arrow** coming from the side is about **the angle I am doing gonions** at, hammer held sideways.

The black arrow coming from the bottom will create vertical growth that I think will look bad on most people. Again, I can't say exactly what type of growth everyone needs though.

-Hitting ramus/gonions without masseter interference: To avoid masseter blocking, be shredded, turn head to side a bit, neck forward and jutting lower jaw, teeth/jaws apart a bit, and duck face to make skin more taut. These are nuances hard to fully explain that you kind of have to figure out.
And there are times, be it due to swelling or whatever else, where it feels like I can't hit the bone easily even if it felt very accessible the session before; just keep experimenting with more or less masseter clench, more or less openness of the jaws, more or less jutting, lip positions like regular vs duck face vs a big cheesy raised grin, etc.

Chin

Front for projection, corners from a diagonal angle for width, Bottom for height; and of course if you are going for height and forward projection, then probably doing it at some diagonal angles between the front and the bottom as well so you are growing it forward and down in an even and canny way

Will add pics eventually

It seems like chin is a hard one to know when it needs work; I couldn't tell how weak my chin was for the longest time. Only recently did I realize I could work on the front for forward projection. And I just began doing the corners again some for width because cheat_win said to work on this in a comment in my main thread, and sure enough the swelling from that is ascending me already.

Other areas: under-eyes, brow ridge, mandible (no probably)

Not that experienced in these areas; for under-eye stuff you may want to use fingers and not a hammer, idk.

Brow ridge, some people have done including CheeseTouch on the forum. I just haven't done it since mine was naturally pronounced.

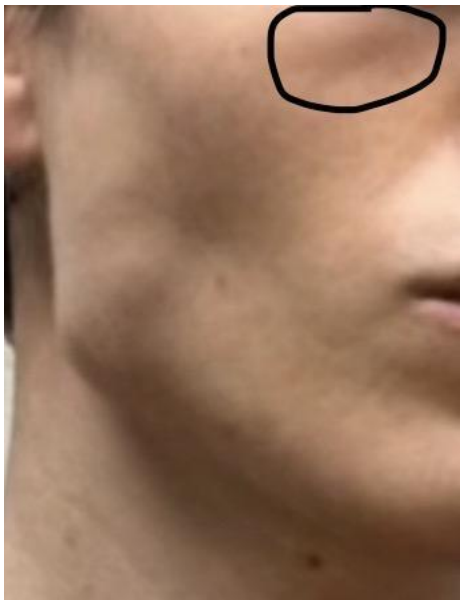
Mandible: it is hard to imagine most people need this. Jaw fillers in the ramus/gonion are common; in the mandible, not at all. Likewise, it seems jaw angle implants are way more common than full wraparound jaw implants.

Cheat_win, with the legendary fillers ascension, apparently did them in the ramus/gonions (and then the submalar/midface area, and idk about chin), not the mandible; it just seems that it isn't the mandible itself that is the problem for people. You'd think he got it there too since it looks better, but it seems like chin and jaw corners improvements just end up making the mandible look better as well.

Skin damage

Avoiding skin and vascular damage is really an important component of this and especially for cheekbones imo.

I STILL have some sort of visible damage in the more inner part of the cheekbone on both sides, which it seems is some sort of underlying vascular issue and is not a surface-skin issue fixable with micro needling or GHK-CU or anything. Looks a bit darker/discolored and like a slight divot in some lighting. It looks like this laser treatment called V-Beam may be the only/best actual fix for this, so I'll need to invest in a couple expensive sessions at some point. BUT, I'm kind of just waiting until I'm done with gonial area / jaw corners – in case I have similar damage fuckery there too, so that could also be fixed by V-Beam vs. doing it again.



Even though the gonial area had surface-level red spots consistently the first couple periods I was doing it there, this had healed entirely.

However, as you can see, for me, it was the inner part of the "cheekbone" that if you look at an anatomy picture is really more the midface area and soft tissue and not actual bone. Yes, I was hitting there some to see if I could forward-project it more. However, I don't really have damage directly on the zygos-area skin itself, it seems. So it is probably key to not really hit the "inner" part as I did, which I do not think can really grow and can lead to this issue.

Cheekbones themselves though are still prone to skin issues, bleeding/breakage: I've had it and there's pics of Clavicular and Androgenic with damage here after a session. Normal methods create a ton of swelling where it is like a "pocket" under the skin and it gets all red and then can break and look bad/be damaged for a few days as it has to heal.

---Solution:

I don't think it is a matter of hammer vs. fist/knuckles. Yes, in the first case you need some sort of oil or beef tallow or thick moisturizer to prevent damage via actual abrasion as much as possible. But the cheekbone issue can happen even despite this.

The shorter sessions without super hard hits partially help this.

But for now for you. First of all, if using a hammer or device, it must be a TOTALLY smooth surface: hammers with a surface slightly uneven, slightly scratched, etc. will FUCK you just by themselves. Second, doing shorter sessions (like 30 seconds softer hits, left side, right side, left side, right side, done; or maybe even just 1 set each time), and then 2-3 times a day, trying to keep swelling there but not extreme pooling as we would do with our harder sessions back when we thought Wolff's Law was the real driver here.

-Trying to avoid friction with the hammer head and using "quick" hits in a way hard to fully explain

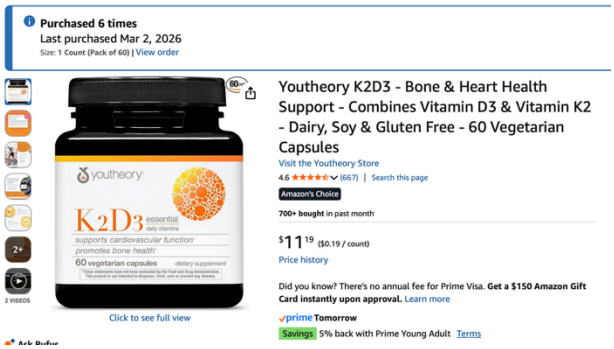
This is an ongoing issue; persistent red/dark skin spots on both jaw corners. Am microneedling some and using GHK-CU as well. But it just seems it would not be worth taking multiple days off every couple weeks to heal it or something.

Hopefully we can figure out better ways

Hammer head must, MUST, be TOTALLY flat and smooth, NO unevenness or scratches

Supplements

Vitamin D3, Vitamin K2: I use this one. You know you are a bonesmashing OG when it lasts 2 months and you've bought it 6 times, haha.



Yes this is technically more for bone growth, but we don't fully know if this is all scar tissue buildup, part scar tissue part hematoma ossification, or even entirely hematomas. So best to be supporting all mechanisms, and these are good vitamins to be taking anyhow.

Vitamin C: Supports collagen pathways somehow. I'm not going to read up on it and then repeat it here as though I am saying it by heart; but this is legit.

Calcium. Again, for the same reasons as D3/K2.

Magnesium.

Maybe collagen powder. Not technically needed with high animal meats intake etc. Do your research to see if it is worth it. Efficacious doses of 15-20g are an extra dollar a day or so.

Won't list everything, but there's other things in any decent multivitamin that you want to be having as well, etc.

Sarms, anabolics, peptides. Kind of beyond my scope here.

*If someone wants to do a deep dive into how these promote either bone turnover/growth or scar tissue formation recovery processes, that might be golden.

I don't think any of these would end up being true major cheat codes if we are dealing with naturally rate-limited processes involving scar tissue response and ossification.*

Again, need help adding more value to this…

Mistakes

- Again, not using a totally smooth hammer surface
- Not being completely shredded and debloated; akin to injecting filler with a blindfold
- Not assessing the areas to grow properly and overdoing areas or not training areas that you should; I used to be myopically-focused on cheekbones, ridiculously not seeing the opportunities to improve my lower third
- Not doing other things in tandem; great hairstyle (I used to have dumb short hairstyles, descends so many people, just even look up Matt Bomer short spiky hair), everything possible for skin, decent style. Elevator shoes from tallmensshoes, colored contacts, CC cream, even. There is no “line” of what is “fake” or “frauding”