The Visceral Manipulation: Abdomen 1 (VM1) course is the foundation for the Visceral Manipulation workshop series. In this course, you will get a solid introduction to the basic theories, principles and techniques of Visceral Manipulation. At each subsequent level of the VM series more body areas will be covered and the techniques refined. All levels of instruction include numerous practical and highly effective techniques that can be immediately incorporated into your present practice.

The emphasis for VM1 is on the development of very sensitive tactile abilities. Visceral Manipulation requires palpation skills that are specific to this approach. These abilities take time and practice to fully acquire. Consequently, different levels of skills are taught in each course as the student progresses. Instruction will focus on the ability to distinguish the types and layers of visceral tissues. You will gradually learn how to access deep layers of tissues with non-invasive skills and how to be precise in interpreting what is felt.

Techniques for identifying each individual structure and the accessible connective tissues are addressed. Subjects also considered are:

1) distinguishing qualities of tissues such as tone, elasticity, distensibility, fibrosis (when present);
2) motion, mobility and motility; and
3) reactivity to stimulus and functional relationships with the rest of the body tissues.

To help you learn these techniques, detailed anatomy and functional mechanics for each organ will be provided.

We will begin our VM study with the abdomen, since it is the most readily accessible of the major visceral cavities. Included among the abdominal organs are the liver, stomach, gall bladder, biliary ducts, duodenum, small intestine and large intestine, and their respective interconnecting tissues. Subsequent levels include posterior abdominal organs, pelvic organs, thoracic organs and cranial viscera.

Evaluation tools introduced are general and local listening, motility listening, mobility testing, and inhibition techniques. These tools are used to follow tensions to the strongest areas of stress throughout the body. They are global and involve all of the systems and tissues of the body. Techniques for isolating distinct areas of dysfunction (down to the distinct spot in the specific articular plane of the structure) and determining cause and effect between these different areas will be introduced. Also at this time, the causative correlation from visceral restrictions to somatic dysfunction can be experienced and verified by each student.

The manipulations are local and very specific to discrete areas and planes of tissue dysfunction. Specificity of these techniques is important since they form the building blocks for skills taught in latter courses that involve entire lesional chains.
We leave it up to each prospective student to assume responsibility for advance preparation; we cannot screen students for their level of readiness. You may, however, find yourself frustrated and left behind if you do not study before hand. It is suggested that you read through the *Visceral Manipulation* text book and look up the terms for the following lists of terms and structures provided. It is also recommended that you begin your study well in advance of the scheduled workshops to allow for unforeseen interruptions and a comfortable learning pace. We want this to be an interesting and intriguing educational experience for all of you.

The following is a list of terms and structures that are important in your preparation for this course. In addition, referencing these terms and structures from good anatomical texts such as the current British Edition of Gray's Anatomy, Clemente's Anatomy and/or Netter's Atlas of Human Anatomy are highly encouraged. These anatomy books are available through The Barral Institute.

1. Mobility and Motility (See Barral's text for specific context of these terms)
2. Peritoneum
3. Visceral Ligaments
4. Omentum
5. Mesentery
6. Diaphragm Crus
7. Liver
8. Glisson's Capsule
9. Coronary Ligament
10. Right and Left Triangular Ligaments
11. Falciform Ligament
12. Cardiac Sphincter
13. Stomach: Fundus of, Cardia of, Greater and Lesser, Curvature of
14. Pylorus
15. Pyloric Antrum
16. Omental Bursa
17. Gastrophrenic Ligament
18. Greater and Lesser Omentum
19. Hepatogastric Ligament
20. Hepatoduodenal Ligament
21. Duodenum
22. Retroperitoneal
23. Common Bile Duct
24. Sphincter of Oddi
25. Duct of Wirsung
26. Pancreas
27. Duodenojejunal Junction
28. Ligament of Treitz
29. Gall Bladder
30. Hepatic Ducts, Cystic Duct
31. Mesenteric Root
32. Small Intestine
33. Superior Mesenteric Artery and Vein Inferior Mesenteric Artery and Vein
34. Portal Vein
35. Terminal Ileum
36. Cecum
37. Iliocecal Valve
38. Ascending Colon
39. Phrenicocolic Ligaments
40. Transverse Colon
41. Transverse Mesocolon
42. Hepatic Flexure
43. Splenic Flexure
44. Descending Colon
45. Sigmoid Colon
46. Sigmoid Mesocolon
47. Autonomic Nervous System
48. Induction