

Cystic Duct

3-4cm long (1 1/4")

3-4mm wide (1/8")

40-60ml capacity
(1-2 oz)

500-1200 ml (~2-5 cups) of
bile / day

4cm at widest point

Hepatic Duct

4cm long (1 1/2")

20cm H2O pressure

CBD Duct

7.5cm long (3")

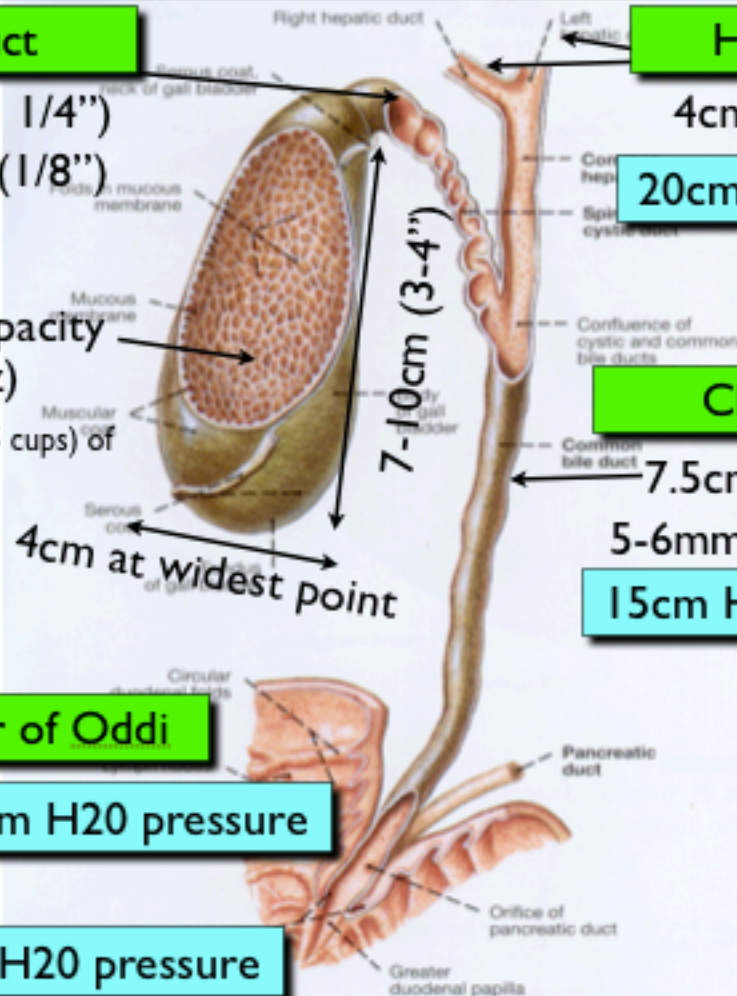
5-6mm wide (1/4")

15cm H2O pressure

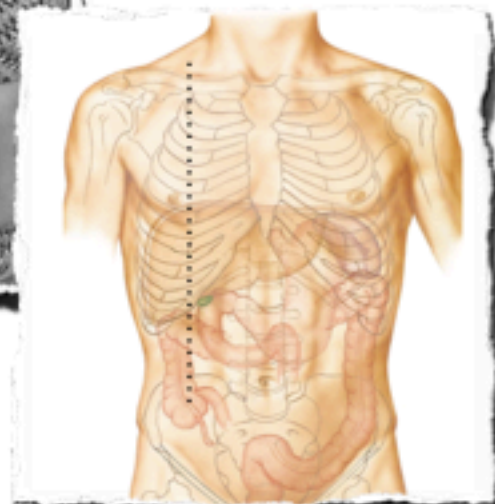
Sphincter of Oddi

Relaxed: 10cm H2O pressure

Contracted: 30cm H2O pressure



#1 Find the GB (p. 111)



- ✓ Seated...
- ✓ Finger pads / ulnar surface of right hand subcostal, right of right mid-clavicular line
- ✓ Finger pads / ulnar surface of left hand subcostal, slightly left of right hand contact
- ✓ Create "soft pillow"...
- ✓ Shear right and left... feel area of restriction

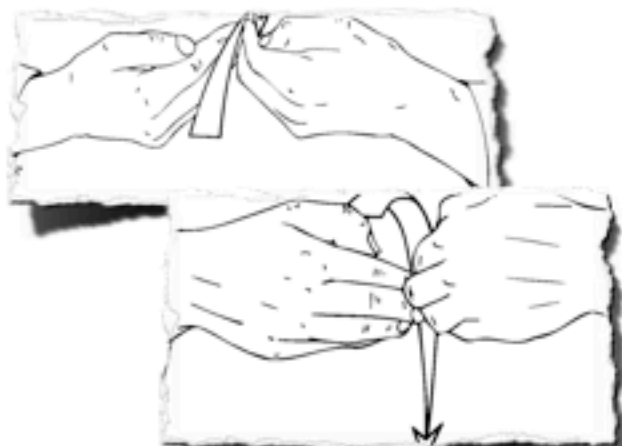


#2 Releasing tensions around GB (p. 110-111)

- ☑ **Walk finger pads inferior**
(umbilical line if very sensitive)
- ☑ **Gently compress around tissues** -person folds over your hands (create “pillow” for GB)
- ☑ **Induction technique**
(Listen, follow & encourage listening)



3 Draining the GB (p. 112-113)



☑ Move SUPERIOR,
POSTERIO-MEDIAL (one fluid
movement, INFERIOR &
ANTERIOR)

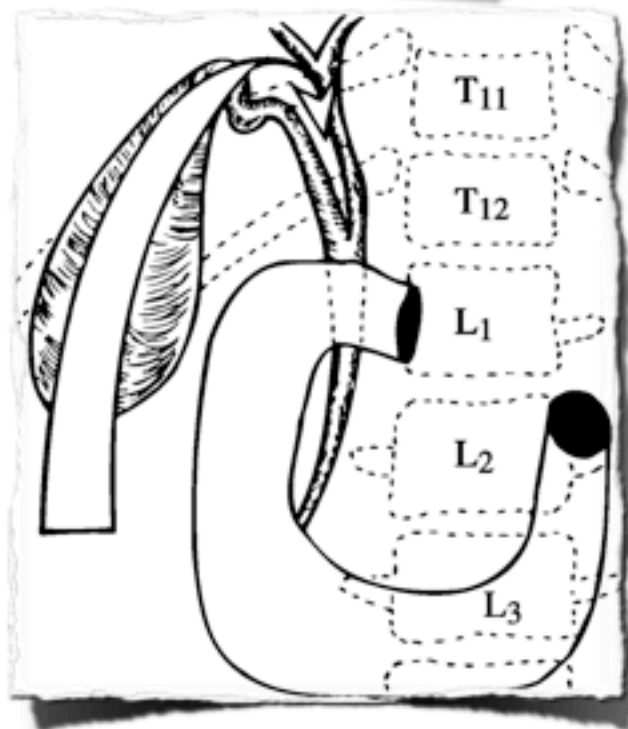
☑ 8-10 cycles - rhythmic, smooth
do not take hands off between
cycles.



3 Draining the GB (p. 112-113)

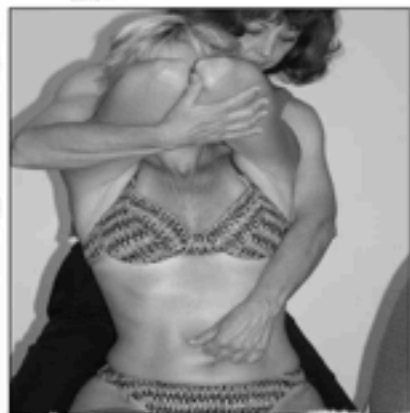
✓ **Direct technique** - you are asking bile to move from fundus to body to neck to cystic duct to CBD to Oddi.

✓ **Encapsulate GB**



#4 & 5 Stretch CBD & Check Oddi (p. 114)

- ✓ **Anchor Oddi:** thumb superior to Oddi. Fine tune (calibrate) anchor (R-hip, Pubic bone, L-Hip)?
- ✓ **Long Lever:** Palm on sternum to line up tension at thumb (or hands behind neck & L/R rotation) - brings in more information - tube responds by stretching)
- ✓ **Evaluate Oddi** - ensure functionality



#6 Gall Bladder Motility (p. 116)

- ✓ Same as liver motility but greater rotational component because of shape
- ✓ Balance gallbladder & liver motilities together



INSPIR	EXPIR
Superior	Inferior
Lateral	Medial
Posterior	Anterior