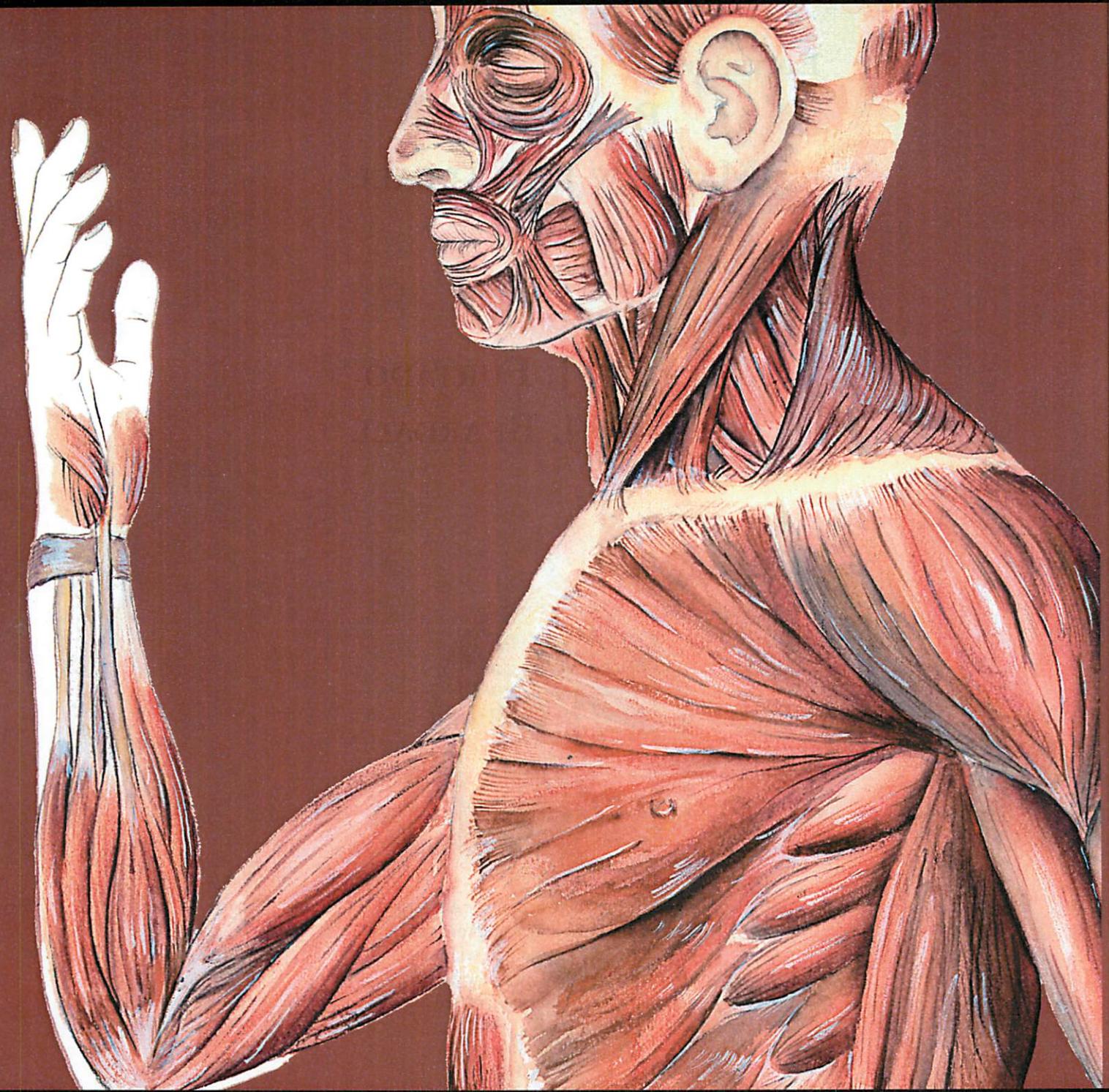


CLINICAL KINESIOLOGY

VOL V: MUSCLES OF THE LOWER EXTREMITIES
CALF AND FOOT

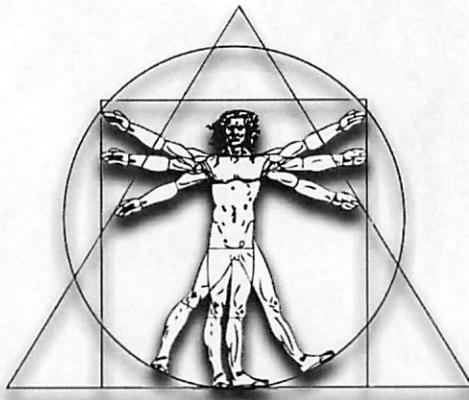


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DEDICATION

by the late Dr. Alan Beardall

**To Kinesiologists world wide, who
are seeking a holistic approach to
health by observing and measuring
the performances of the human
body.**

ACKNOWLEDGEMENTS

No book on Kinesiology would be complete without giving tribute to the founder, developer and researcher of Applied Kinesiology, Dr. George Goodheart of Detroit, Michigan.

A special thanks to our artist, Jerry Upchurch, who has made every effort to make this a special book. His excellent graphics are especially appreciated.

Special appreciation is given to my assistant, Cristin Gilbert, for her assistance, encouragement and dedication to Clinical Kinesiology.

Dana Van Skiver is responsible for editing and manual preparation. Her unusual approach, dedication and loyalty have brought a special uniqueness to this fifth volume.

Cinde Gordon is responsible for the paste-ups and point identification. Her special touch is appreciated.

INTRODUCTION

This is the fifth in a series of workbooks to be published under the Clinical Kinesiology title. This manual contains all the muscles of the lower extremities from the knee to the toes, 52 muscles inclusive.

Each muscle presented will contain the following data:

- 1) A picture of the muscle itself with written identification of the origin and insertion.
- 2) A picture of the muscle test. This includes angles or degrees, when indicated, as well as points of bracing and contact. Bracing areas are identified by a box with a white arrow. Contact points are identified by a box with a black arrow. White arrows demonstrate the direction the patient moves for a proper test; the black arrow indicates the direction of force the doctor applies for the muscle test.
- 3) Written description of the location as well as visual pictures of the following reflexes: neurovascular, neurolymphatic, two visceral organ reflexes and the muscle acupuncture point.
- 4) A description of the muscle action.
- 5) The vertebral level (V.L.) which is the most common subluxation seen in the spinal column when the respective muscle is aberrant.
- 6) The Lovett Brother Vertbral Level (L.B.V.L) is the vertebrae at the opposite end of the spin that moves synchronistically with the V.L. and may also be subluxated.
- 7) The myomere (M.M.), which is the location on the spinal column of the most direct nerve route to the muscle.
- 8) The related cranial and foot subluxations most commonly seen in clinical practice.
- 9) The specific nutrient and recommended nutrient sources related to each muscle.

This manual is divided into four chapters, as follows:

CHAPTER I: KINESIOLOGICAL TESTING AND EXAMINATION PROCEDURE

CHAPTER II: EXTRINSIC MUSCLES OF THE FOOT

 Section I: Calf and Ankle

 Section II: Big Toe

 Section III: Toes

CHAPTER III: INTRINSIC MUSCLES OF THE FOOT

 Section I: Big Toe

 Section II: Toes

CHAPTER IV: REFERENCES

- A. Organ-Muscle Relationships
- B. Vertebral Level-Muscle Relationships
- C. Cranial Bone-Muscle Relationships
- D. Foot Bone-Muscle Relationships
- E. Muscle-Organ Relationships

F. Alphabetical Index of Muscles

The following books have been published by Clinical Kinesiology:

- Volume I: Muscles of the Low Back and Abdomen
- Volume II: Muscles of the Pelvis and Thigh
- Volume III: Muscles of the TMJ, Hyoid and Cervicals, Including Cranial Manipulation
- Volume IV: Muscles of the Upper Extremities; Shoulder, Forearm and Hand
- Volume V: Muscles of the Lower Extremities; Calf and Foot
- Clinical Kinesiology Instruction Manual: Including Introduction to Hand Modes
- Biocomputer Hand Modes Manual
- Clinical Kinesiology Travel Manual

It should be clearly understood that this text is not intended to replace the excellent research and manuals of Dr. George Goodheart, nor those texts produced by Dr. David Walther. The author encourages you to avail yourself of these texts. The opinions, ideas and concepts expressed in this manual do not necessarily reflect current medical opinion. They are the result of independent research obtained through clinical practice.

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CHAPTER I

KINESIOLOGICAL TESTING AND EXAMINATION PROCEDURE

KINESIOLOGY TESTING AND EXAMINATION PROCEDURE

This chapter of the book deals with muscle testing. This has become an important part of the Chiropractic examination. The information given is invaluable in evaluating the musculoskeletal part of the patient's symptoms. Muscle tests should be performed with the understanding of the factors involved in good muscle testing. (See the Clinical Kinesiology Instruction Manual, pages 46-47.)

There are fifty-two muscles of the lower extremity. In this chapter, they are divided into the following categories:

1. Muscles of the knee and ankle.
2. Muscles of the arch.
3. Muscles of the big toe.
4. Muscles of the toes:
 - a) Muscles of the second toe.
 - b) Muscles of the third toe.
 - c) Muscles of the fourth toe.
 - d) Muscles of the fifth toe.

The tests for these muscles are pictured and numbered in a sequence that might suggest the most efficient manner in which to test all 52 muscles.

The muscles of the calf and foot are divided into four divisions. The first division are muscles that insert on the calf (popliteus) or calcaneus. The second set are the muscles that insert on the arch of the foot or have an affect on the arch, like tibialis posterior. The third set are the muscles that insert on the big toe. These start with the extensors. The fourth set are the muscles of the toes. These start with the muscles of the second toe and end with the muscles of the fifth toe.

Although there are sixty-two individual muscle tests pictured, for practical purposes there are only fifty-two muscles discussed in the text. The reason for this is that muscles are divided based on kinesiological consideration (i.e., according to associated reflexes, cranial and foot bone subluxations, etc.).

It should be noted that the names and computer numbers of certain muscles have been changed. Please note the changes below:

MUSCLE #	NEW NAME	OLD NAME
920	Adductor Hallucis, Sup. Div.	Abductor Hallucis, Sup. Div.
922	Adductor Hallucis, Inf. Div.	Abductor Hallucis, Inf. Div.
932	Abductor Hallucis, Obl. Head Peroneus Div.	Adductor Hallucis, Obl. Head peroneus Div.
934	Abductor Hallucis, Obl. Head Metatarsal Div.	Adductor Hallucis, Obl. Head Metatarsal Div.
936	Abductor Hallucis Trans. Head, Medial Div.	Adductor Hallucis Trans. Head Medial Div.
938	Abductor Hallucis Trans. Head, Lateral Div.	Adductor Hallucis Trans. Head Lateral Div.
950	Flexor Digitus Pedis, Second	Lumbricales Pedis, First Div.
952	Flexor Digitus Pedis, Third	Lumbricales Pedis, Second Div.
954	Flexor Digitus Pedis, Fourth	Lumbricales Pedis, Third Div.

MUSCLE #	NEW NAME	OLD NAME
956	Flexor Digitus Pedis, Fifth	Lumbricales Pedis, Fourth Div.
958	Adductor Digitus Pedis, Second	Interossei Dorsales Pedis, First Div.
960	Adductor Digitus Pedis, Third	Interossei Plantares, First Div.
962	Adductor Digitus Pedis, Fourth	Interossei Plantares, Second Div.
964	Adductor Digitus Pedis, Fifth	Interossei Plantares, Third Div.
966	Abductor Digitus Pedis, Second	Interossei Dorsales Pedis, Second Div.
968	Abductor Digitus Pedis, Third	Interossei Dorsales Pedis, Third Div.
970	Abductor Digitus Pedis, Fourth	Interossei Dorsales Pedis, Fourth
972	Abductor Digitus Pedis, Fifth	Flexor Digitus Quinti Brevis

In the study of the muscles of lower extremities all textbooks have chosen to follow the idea that the second metatarsal is the mid-line of the foot. Therefore all muscles which pull toward the second metatarsal are called adductors and those which pull away are called abductors. In this text, we have chosen a more logical way of naming muscles. The action of the muscles of the extremities is described in the same manner as the rest of the body, with the exception of the muscles of the hands. That is, all action toward the mid-sagittal plane is called adduction and action away from the mid-sagittal plane is called abduction. Therefore, a muscle on the medial aspect of the arch of the foot which pulls the big toe toward the mid-sagittal plane is called an adductor, not an abductor.

The intrinsic muscles of the foot which pull the toes are named according to their action. For example, adductor digitus pedis, fourth, in the old texts is named interossei plantares the second. The new name describes what the action is first; what the muscle acts on (a digit), second; pedis for foot, third; the number which tells us what toe the muscle acts upon, fourth. Adductor digitus pedis, fourth is a muscle of the foot which has an adduction action on the fourth digit. The new muscle name tells us a complete story, while interossei plantares, second tells us very little. (It tells us it is between the toes and on the plantar surface and has something to do with second. This second turns out to be the second in a series of three.) The changes in the names of these muscles are practical, useful and more meaningful.

GENERAL RULES FOR UNDERSTANDING MUSCLE TEST ILLUSTRATION

The muscle testing illustrations in this book are new and original. We have tried throughout each book to improve our methods of presentation. Most muscle testing illustrations include the following:

Clear White Arrows:	Indicate the positioning for testing of the muscle in question (M.T.P.).
Clear Arrows/Black Interior:	Represents the direction of the force of the testor once a contact has been accomplished.
Box with White Arrow:	Represents the area of contact with the body for bracing.
Box with Black Arrow:	Represents the area of contact for specific muscle test.
A Lined Drawing:	The solid line represents the neutral position, the dotted line represents the muscle testing position (M.T.P.).

The muscle test shown below is that of Peroneus Longus, Cuneiform Division. This muscle is an extrinsic muscle of the foot and based on its origin and insertion it acts as a plantar flexor, abductor and evertor. The white arrows (as seen in Figures 1, 2 and 3) depict the action of this muscle. Fig. 1 is plantar flexion, Fig. 2 is eversion and Fig. 3 is abduction. By noting these arrows in each illustration you can quickly visualize each muscle's action and therefore its muscle testing position (M.T.P.).

Fig. 1: Indicates plantar flexion.

Fig. 2: Indicates eversion.

Fig. 3: Indicates abduction.

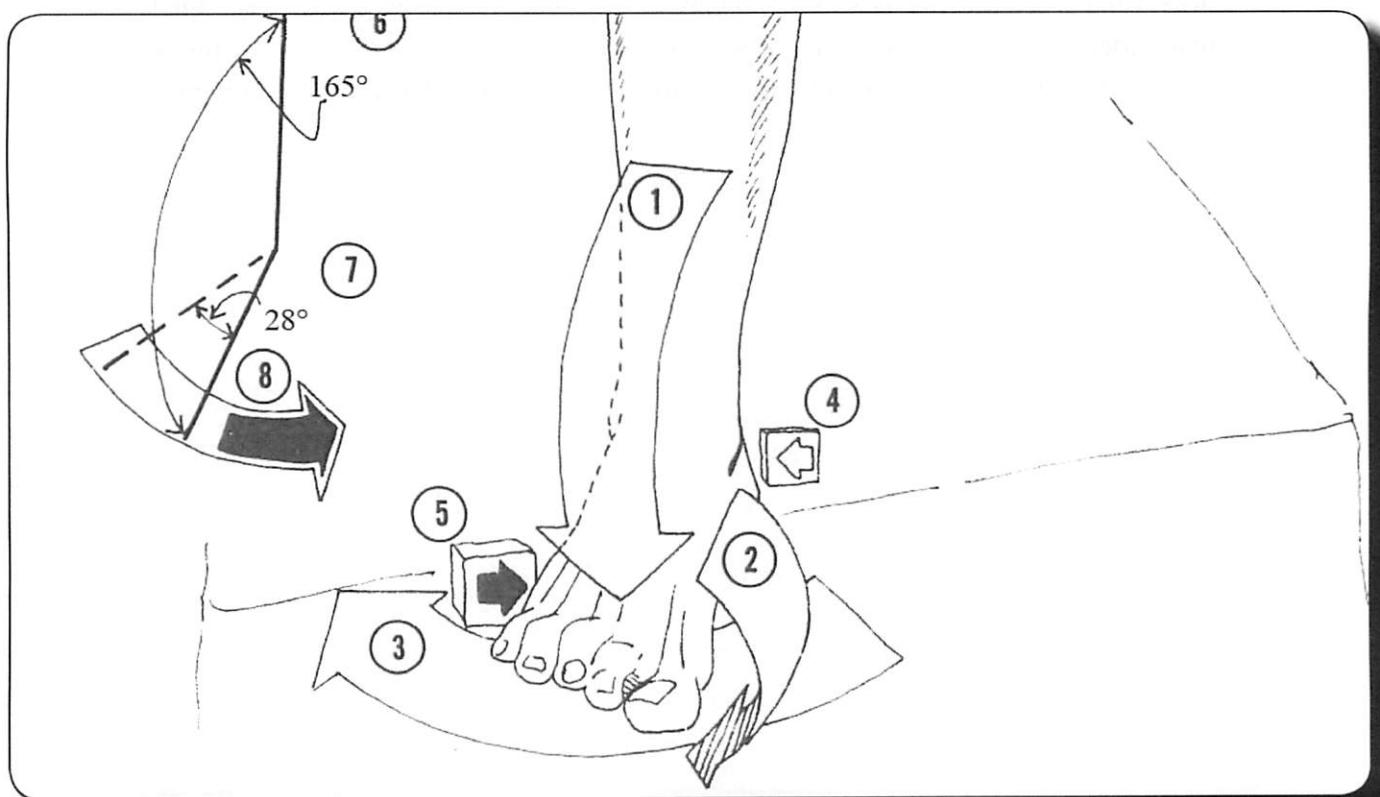
Fig. 4: Represents the area of contact on the calcaneus.

Fig. 5: Represents the area of contact on the fifth metatarsal.

Fig. 6: Represents the degrees of plantar flexion represented also by the white arrow in Fig. 1.

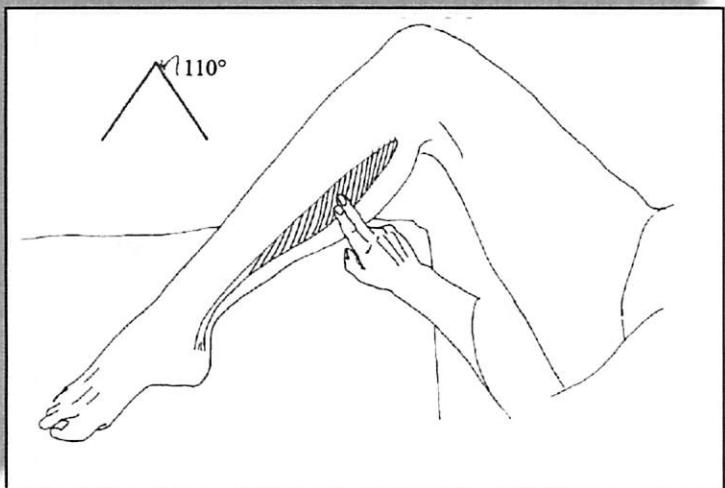
Fig. 7: Represents the degrees of abduction as seen in Fig. 3.

Fig. 8: Represents the direction of the force of the muscle test across the body in a transverse plane.

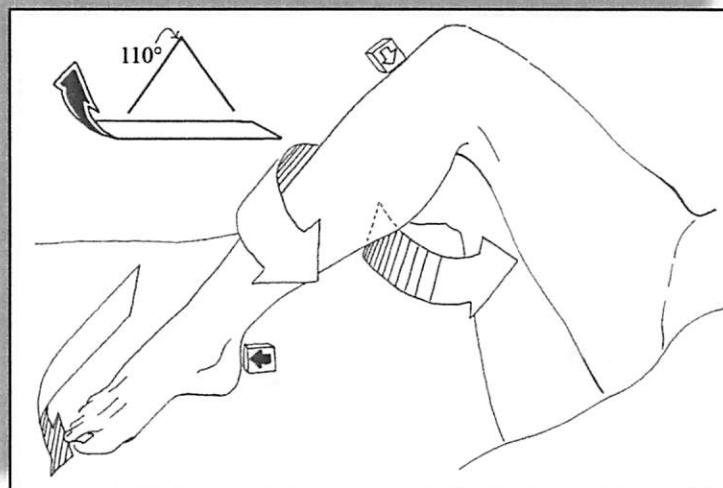


GROUP I

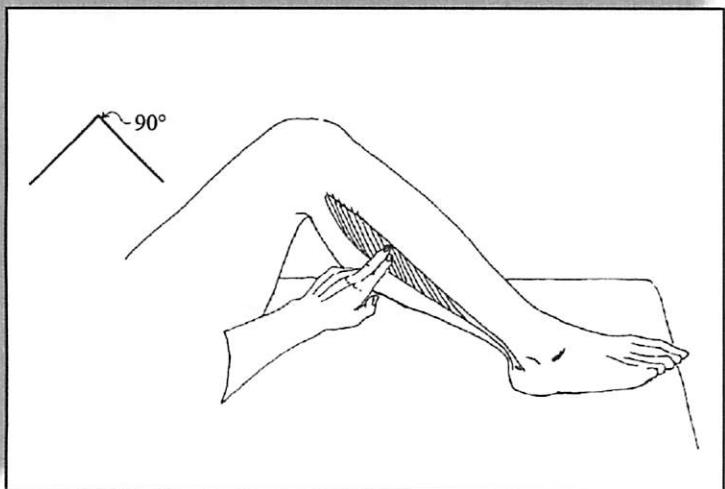
Muscle of the Knee and Ankle



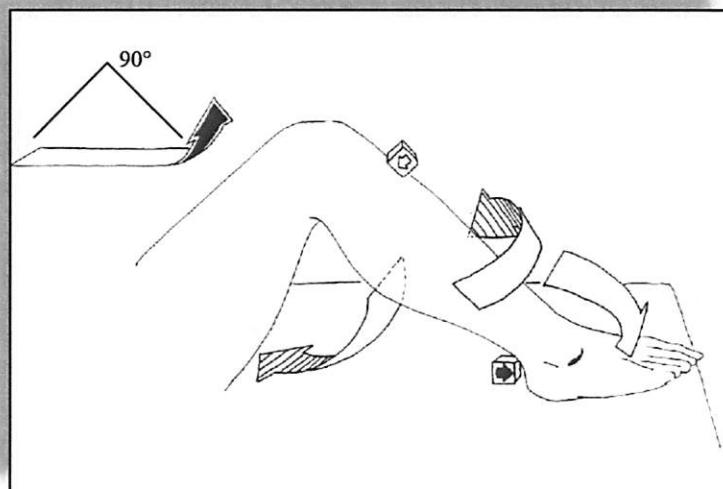
878 SOLEUS, Medial Head



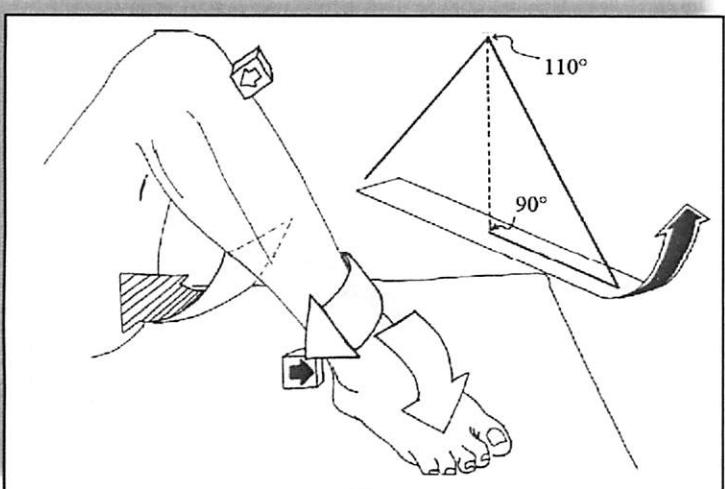
872 GASTROCNEMIUS, Medial Head



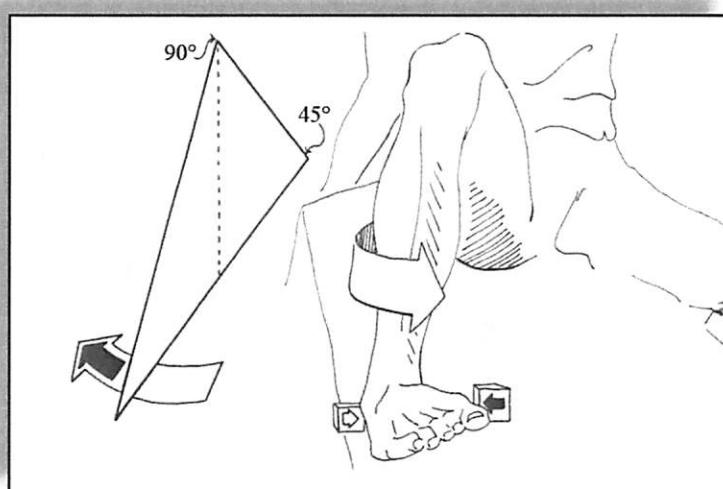
880 SOLEUS, Lateral Head



876 PLANTARIS



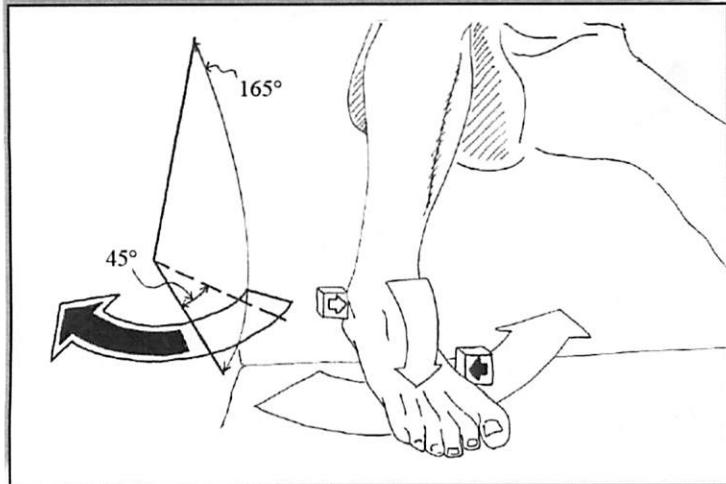
874 GASTROCNEMIUS, Lateral Head



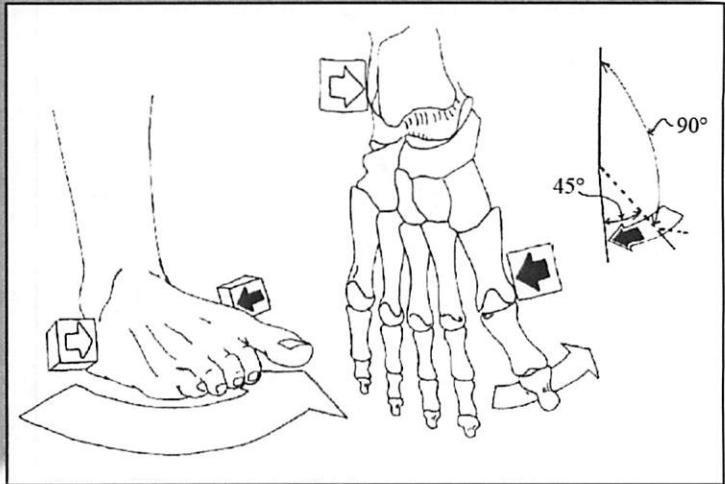
870 POPLITEUS

GROUP II

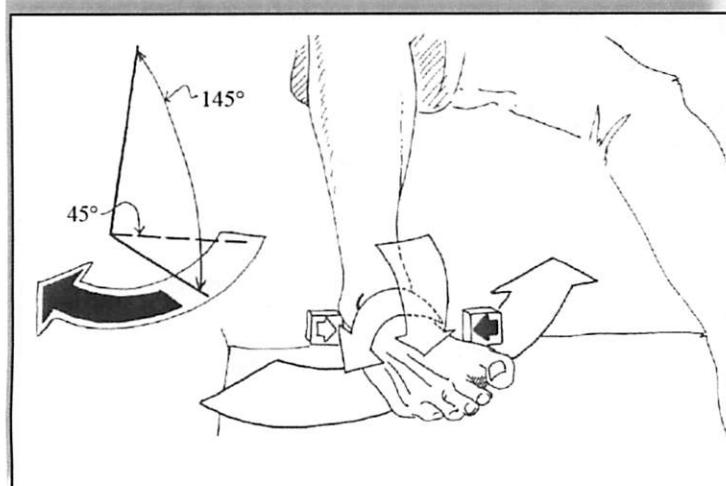
Muscle of the Arch



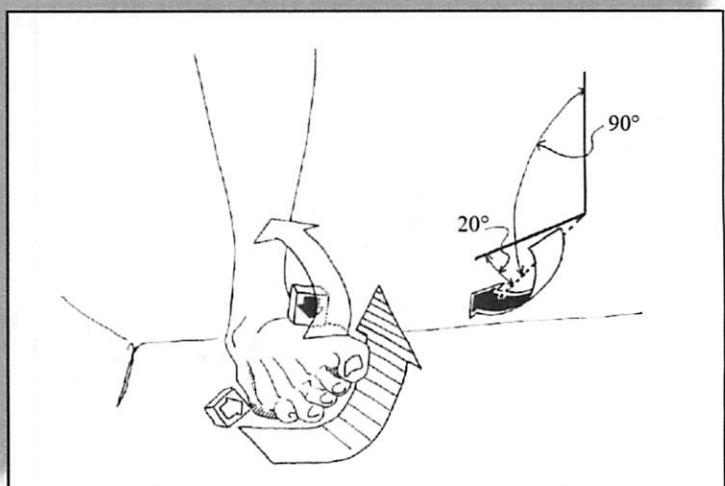
882 TIBIALIS POSTERIOR, Tibial Div.



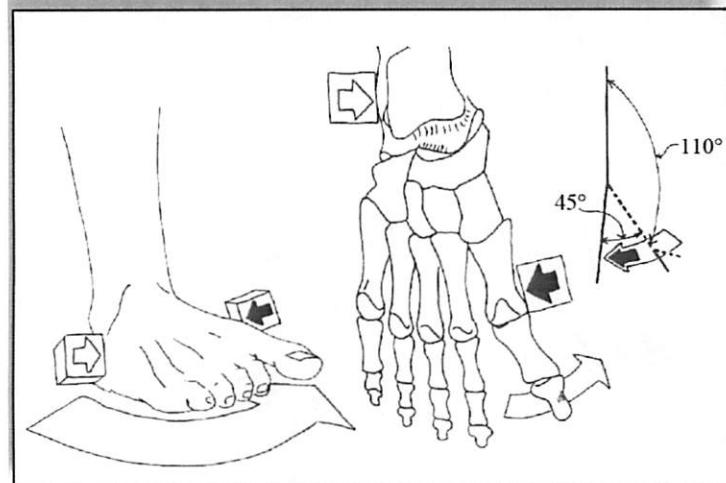
920 ADDUCTOR HALLUCIS, Superior. Div.



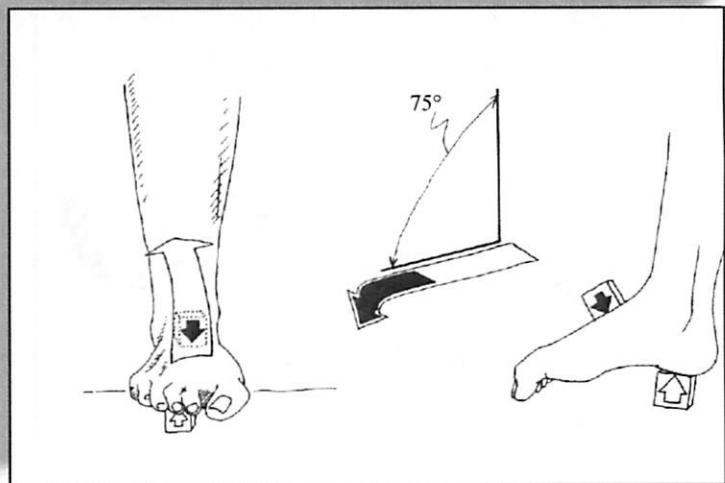
884 TIBIALIS POSTERIOR, Fibular Div.



896 TIBIALIS ANTERIOR, Supinator Div.



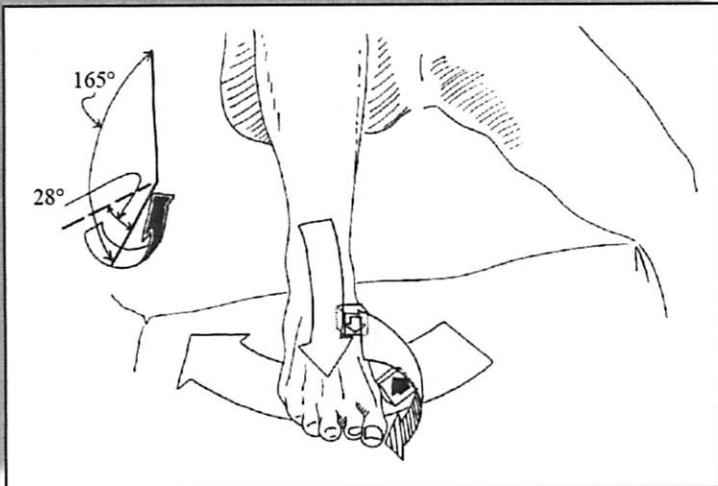
922 ADDUCTOR HALLUCIS, Inferior. Div.



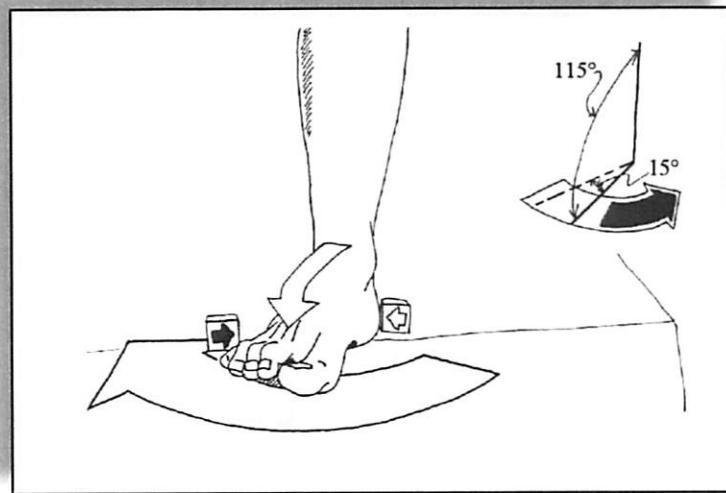
898 TIBIALIS ANTERIOR, Dorsiflexor Div.

GROUP II

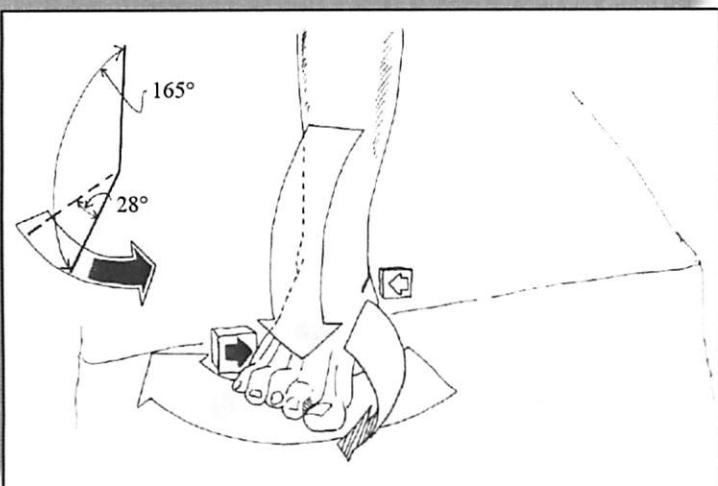
Muscle of the Arch



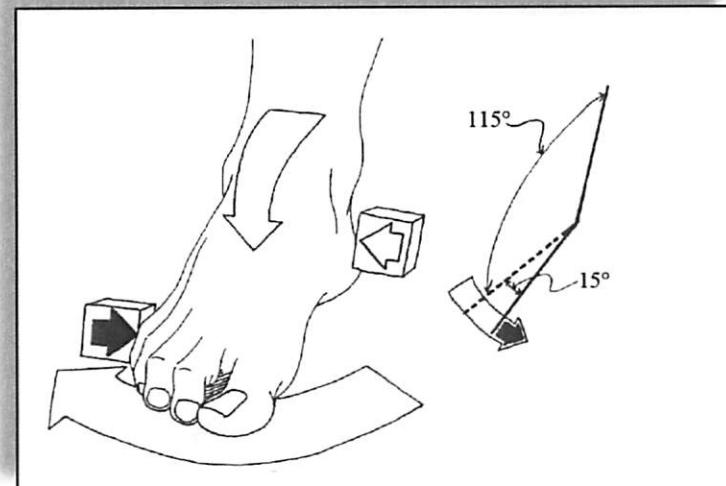
888 PERONEUS LONGUS, Metatarsal Div.



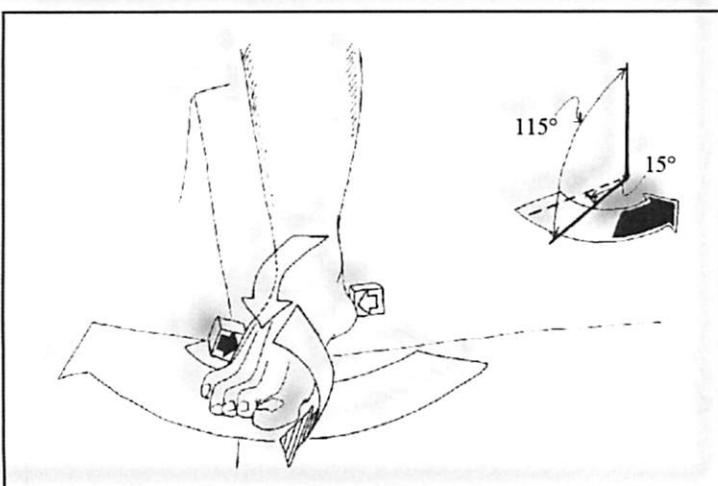
892 PERONEUS BREVIS, Septal Div.



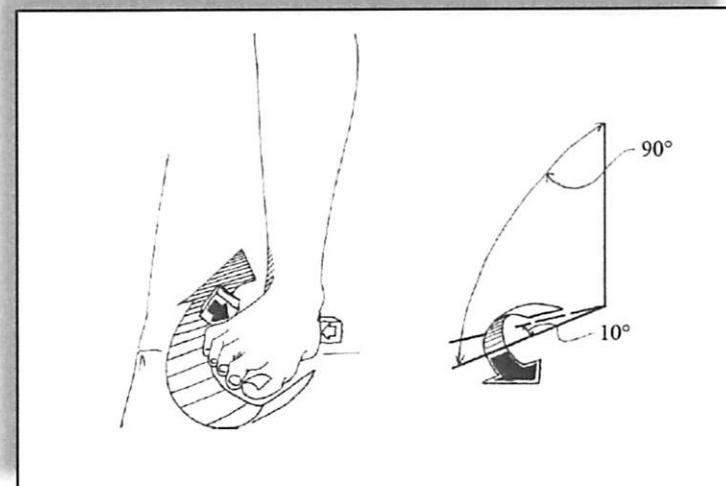
886 PERONEUS LONGUS, Cuneiform Div.



974 ABDUCTOR DIGITUS MINIMI PEDIS



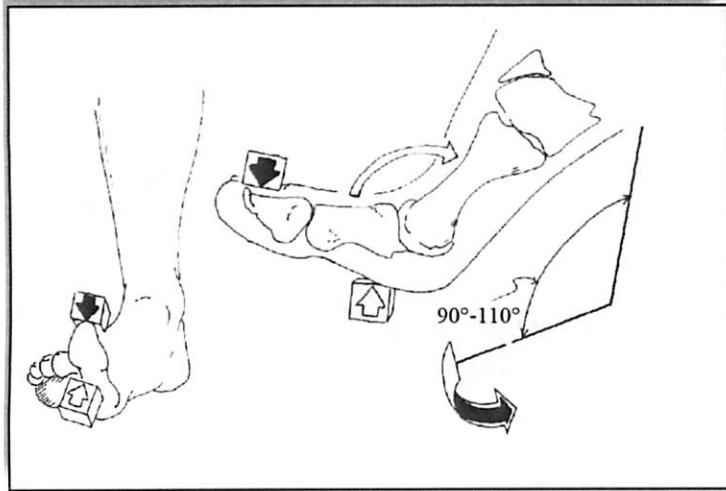
892 PERONEUS BREVIS, Fibular Div.



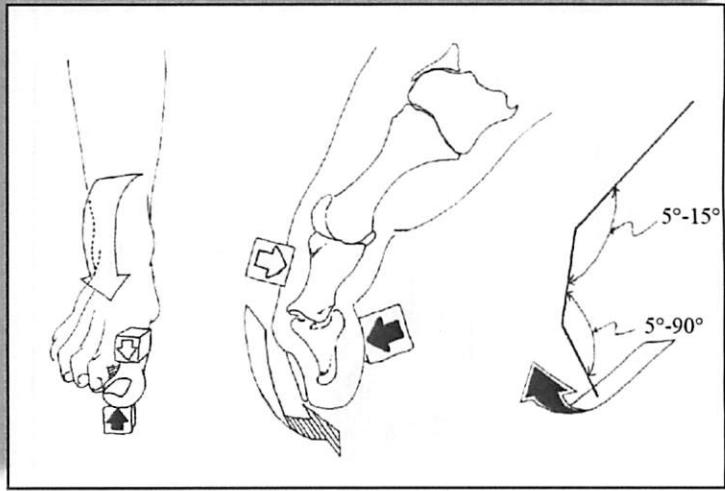
894 PERONEUS TERTIUS

GROUP III

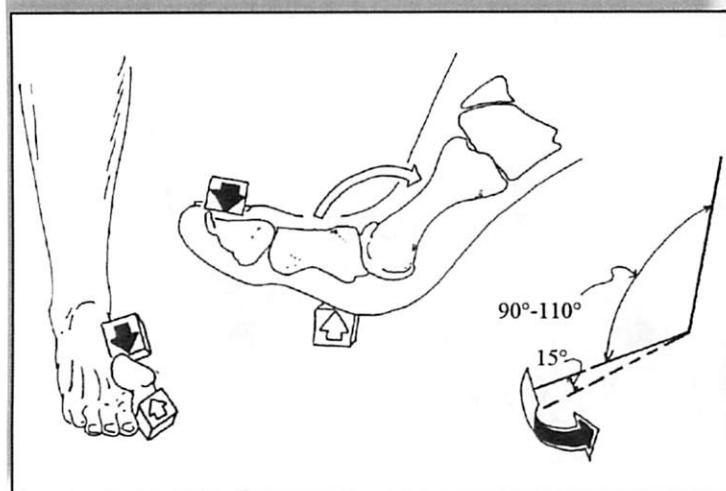
Muscles of the Big Toe



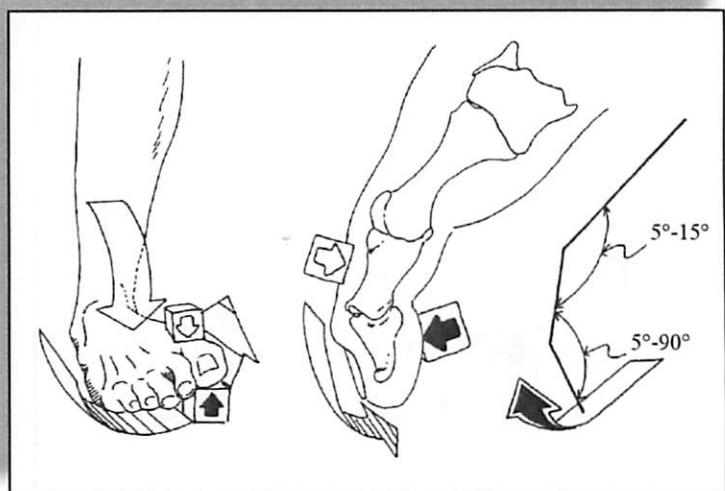
906 EXTENSOR HALLUCIS LONGUS, Fibular Div.



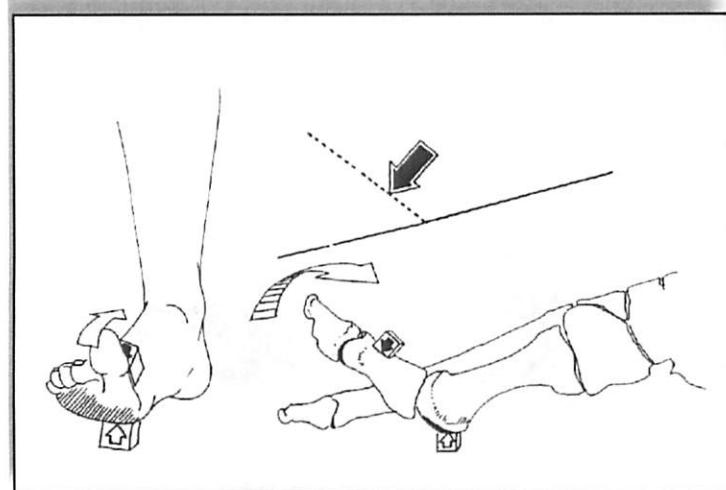
900 FLEXOR HALLUCIS LONGUS, Tibial Div.



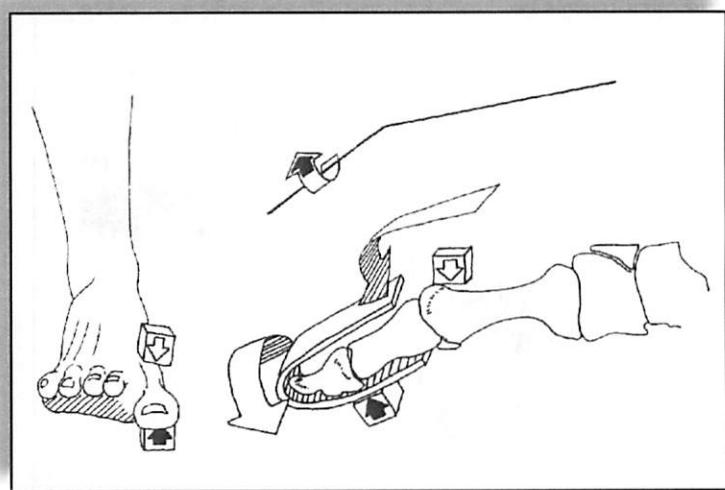
904 EXTENSOR HALLUCIS LONGUS, Inter. Div.



902 FLEXOR HALLUCIS LONGUS, Fibular Div.



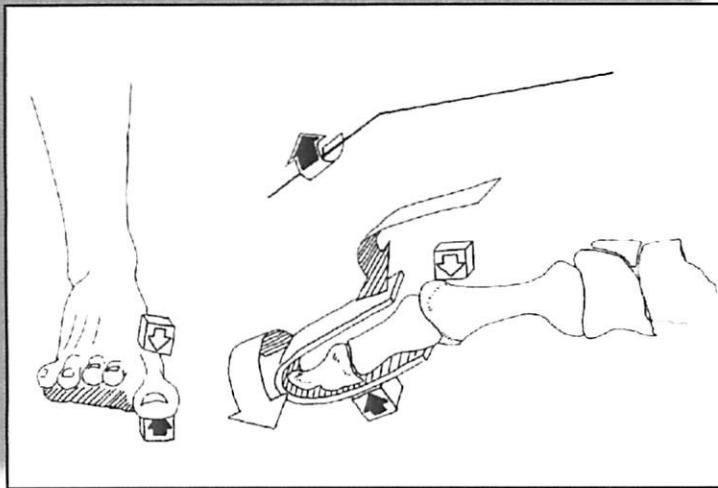
940 EXTENSOR HALLUCIS BREVIS



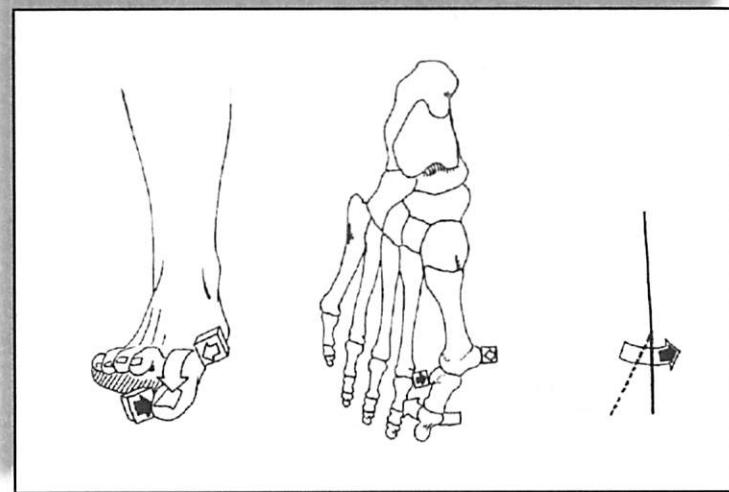
924 FLEXOR HALLUCIS BREVIS, First Cune. Div.

GROUP III

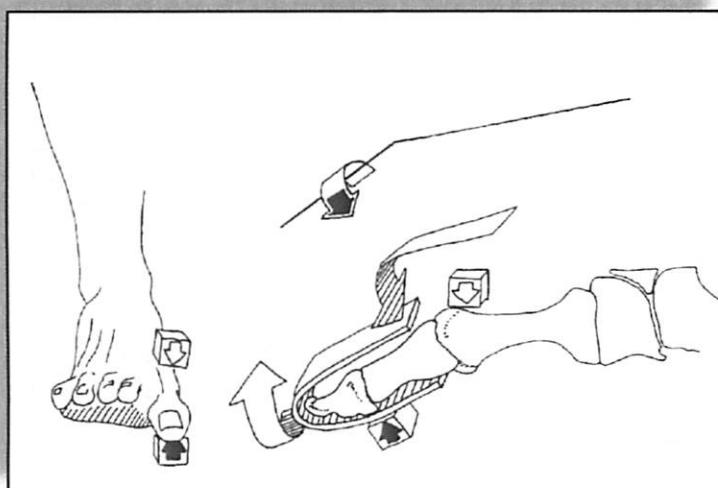
Muscles of the Big Toe



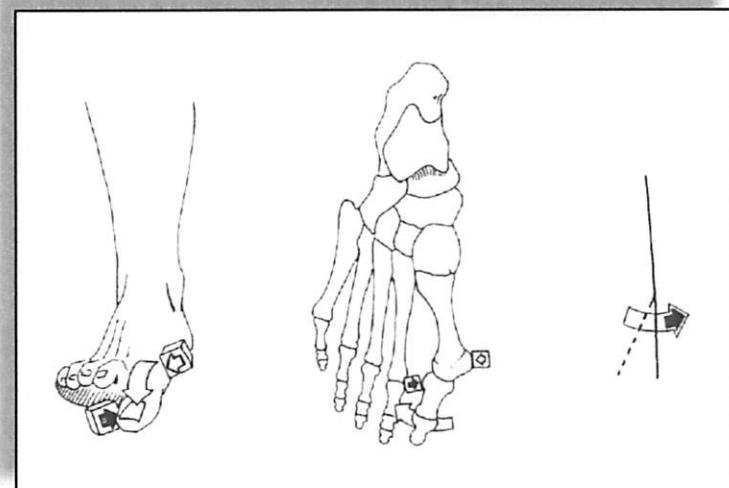
926 FLEXOR HALLUCIS BREVIS, Tendon Div.



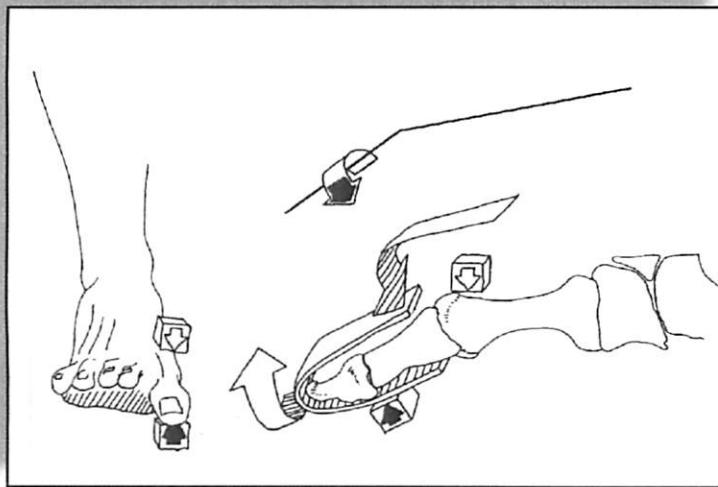
932 ABDUCTOR HALLUCIS OBL. HEAD, Peron. Div.



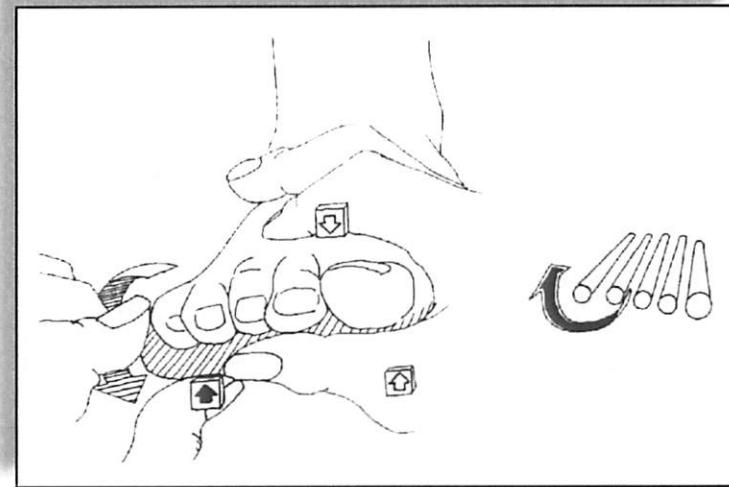
928 FLEXOR HALLUCIS BREVIS, 3rd Cuneiform Div.



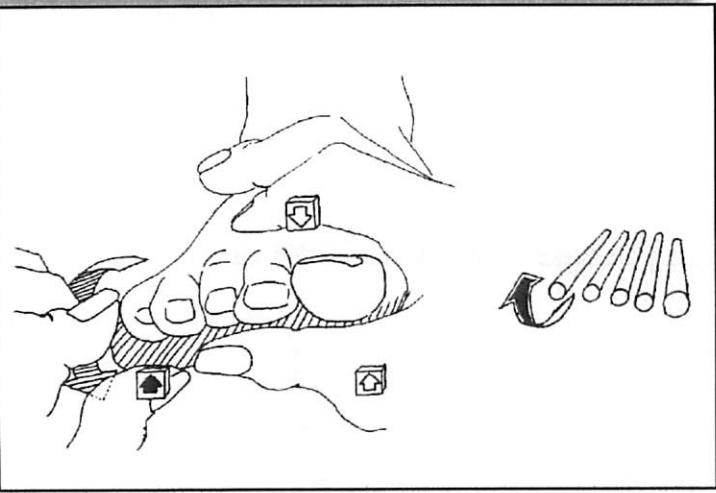
934 ABDUCTOR HALLUCIS OBL. HEAD, Meta. Div.



930 FLEXOR HALLUCIS BREVIS, Cuboid Div.



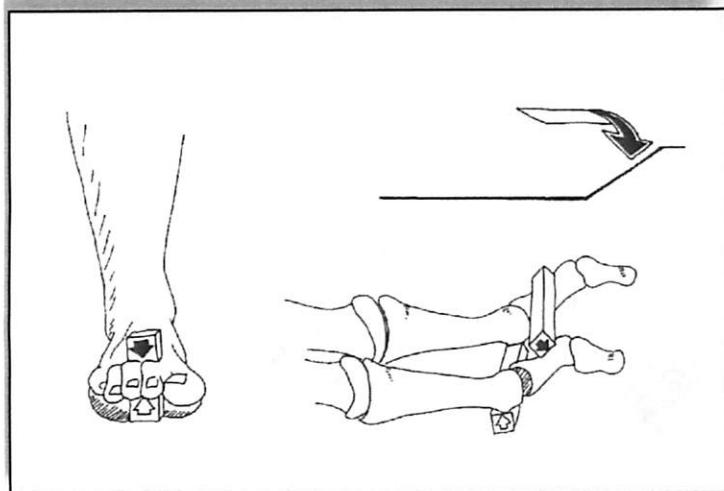
936 ABDUCTOR HALLUCIS TRANS. HEAD, Med. Div.



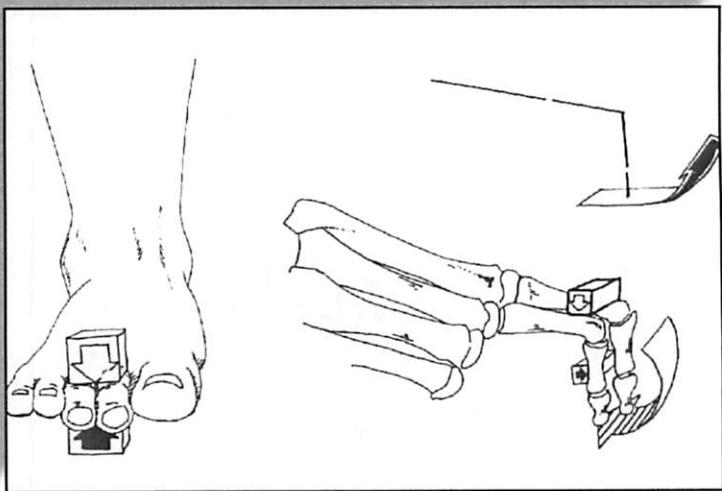
938 ABDUCTOR HALLUCIS TRANS. HEAD, Lat. Div.

GROUP IV

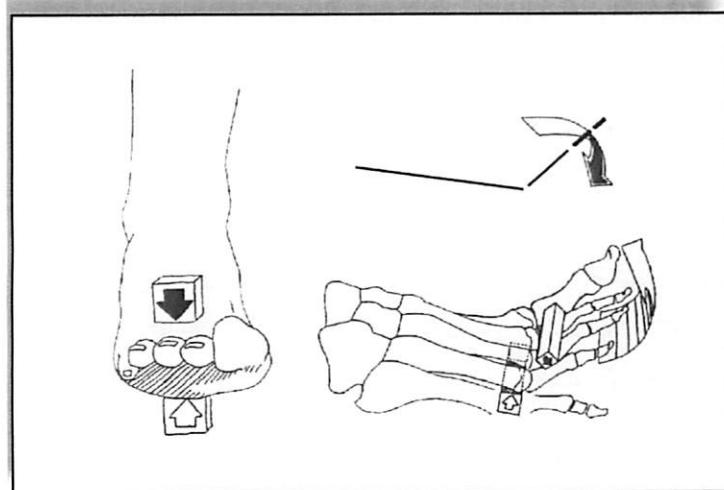
Muscle of the Second Toe



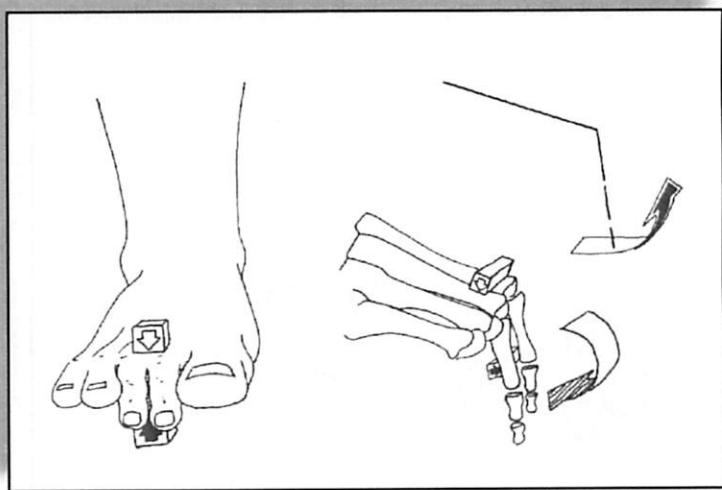
912 EXTENSOR DIGITORUM LONGUS, Medial Div.



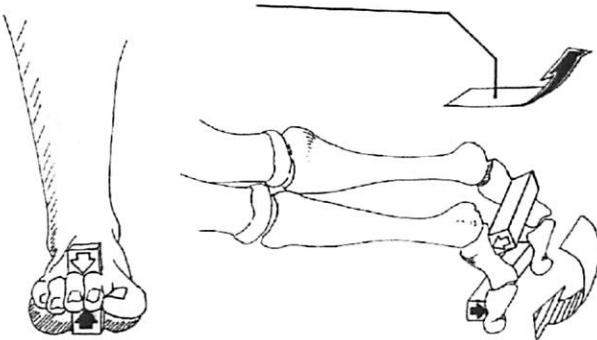
946 FLEXOR DIGITORUM BREVIS, Medial Div.



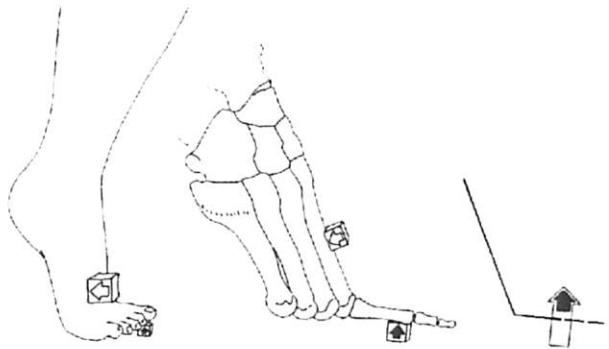
976 EXTENSOR DIGITORUM BREVIS



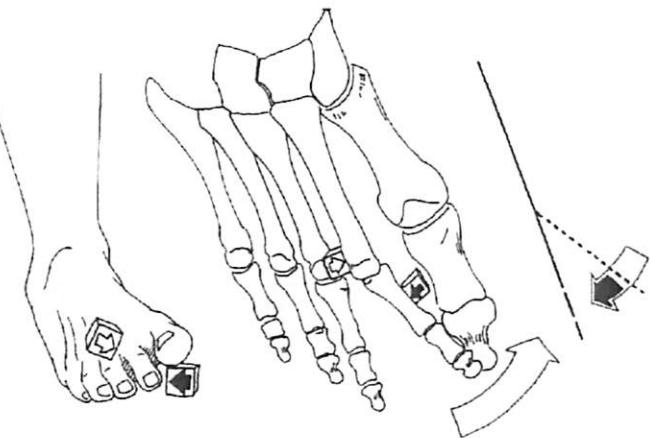
942 QUADRATUS PLANTAE, Medial Div.



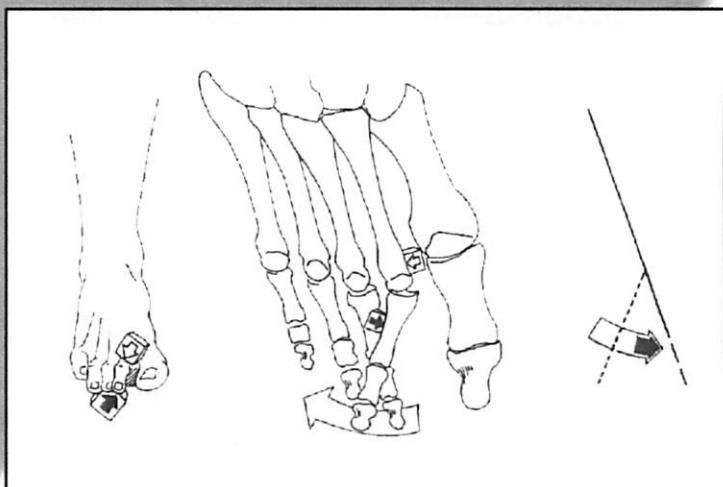
908 FLEXOR DIGITORUM LONGUS, Medial Div.



950 FLEXOR DIGITUS PEDIS, Second



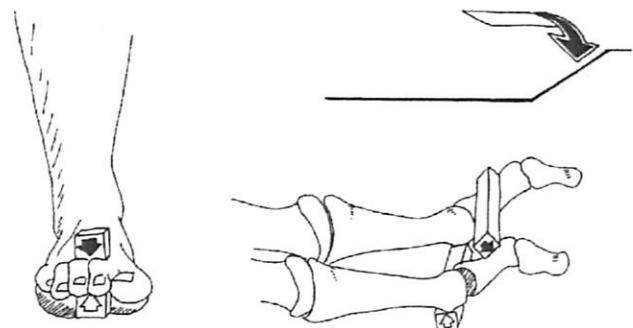
958 ADDUCTOR DIGITUS PEDIS, Second



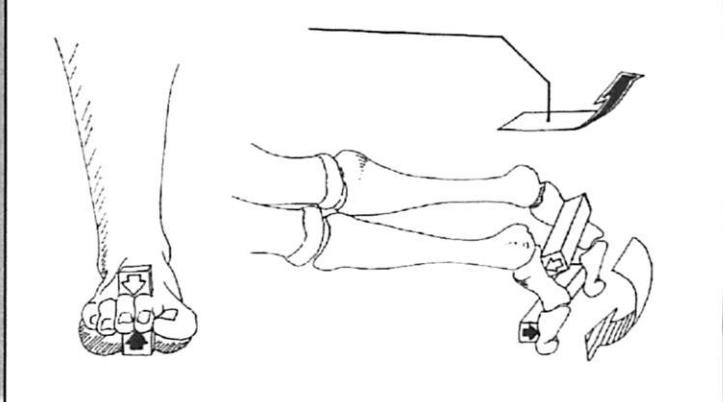
966 ABDUCTOR DIGITUS PEDIS, Second

GROUP V

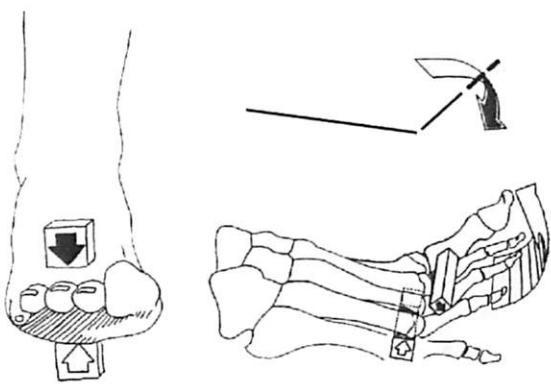
Muscle of the Third Toe



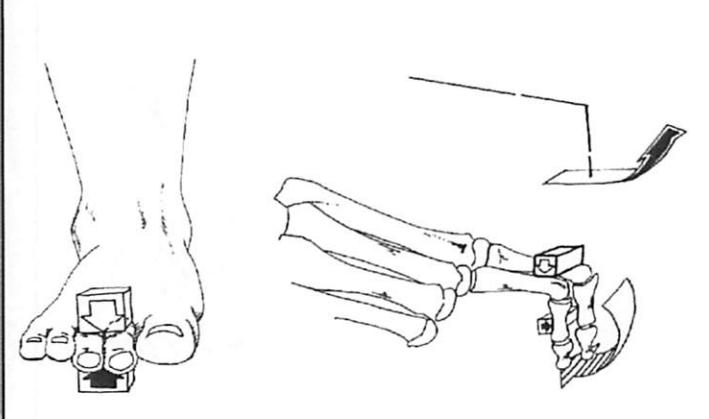
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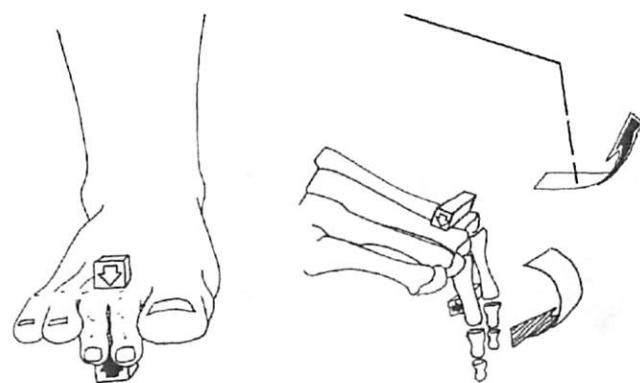
908 FLEXOR DIGITORUM LONGUS, Medial Div.



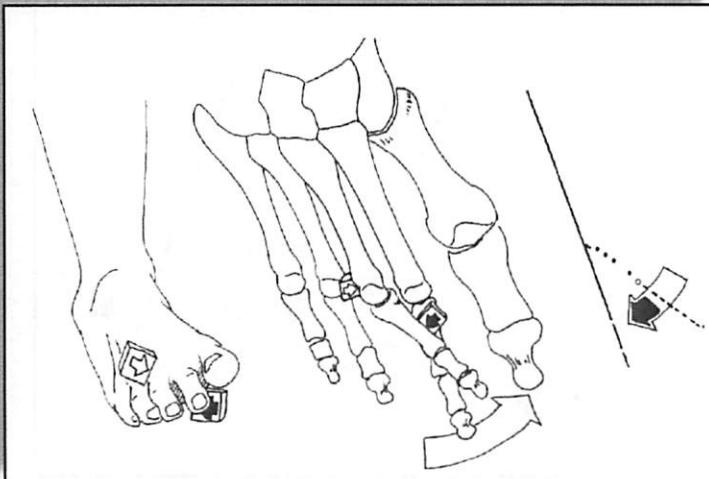
976 EXTENSOR DIGITORUM BREVIS



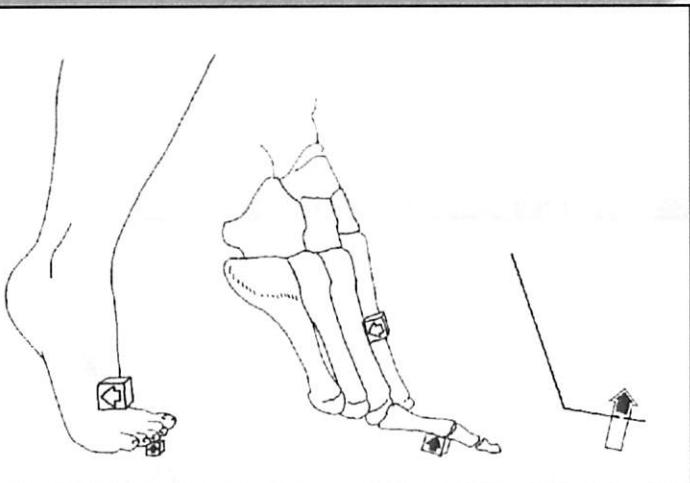
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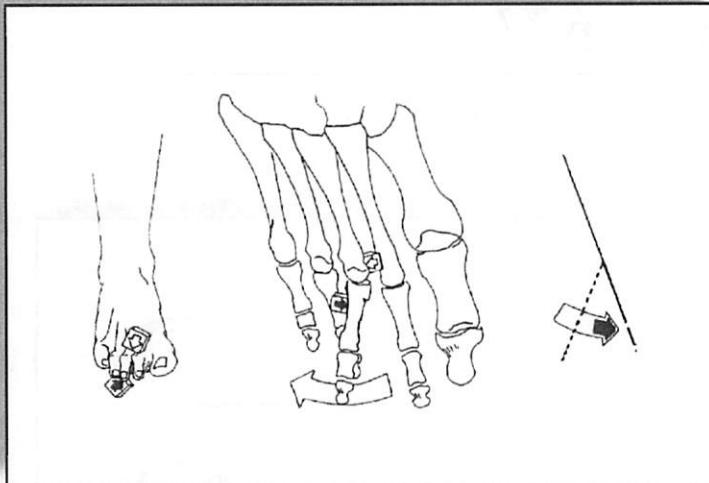
942 QUADRATUS PLANTAE, Medial Div.



960 ADDUCTOR DIGITUS PEDIS, Third



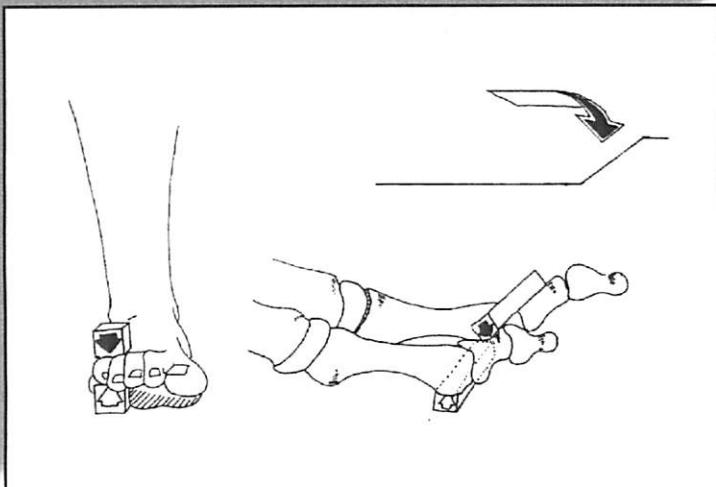
952 FLEXOR DIGITUS PEDIS, Third



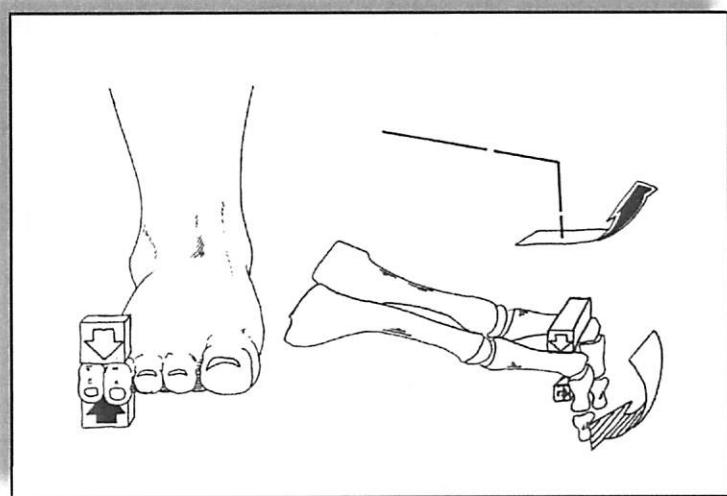
968 ABDUCTOR DIGITUS PEDIS, Third

GROUP VI

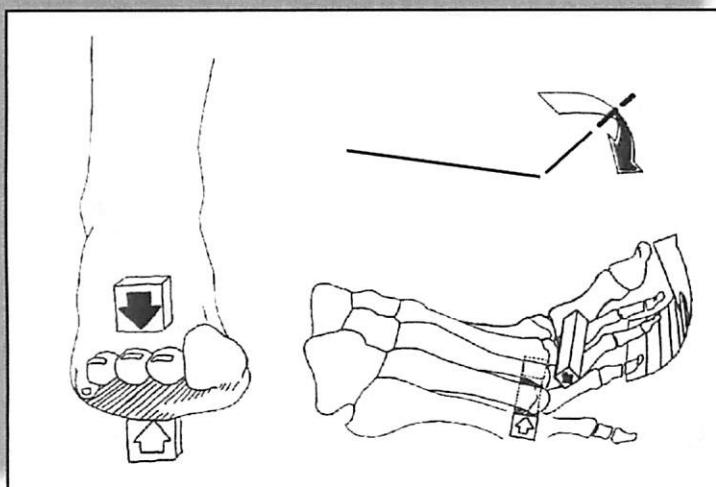
Muscle of Fourth Toe



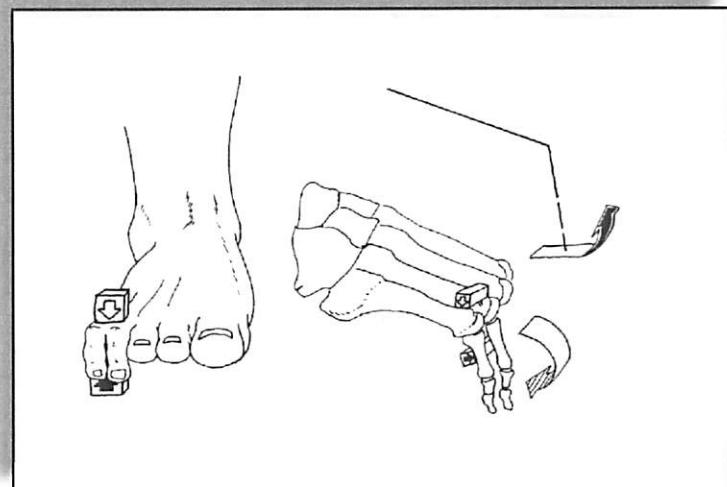
914 EXTENSOR DIGITORUM LONGUS, Lateral Div.



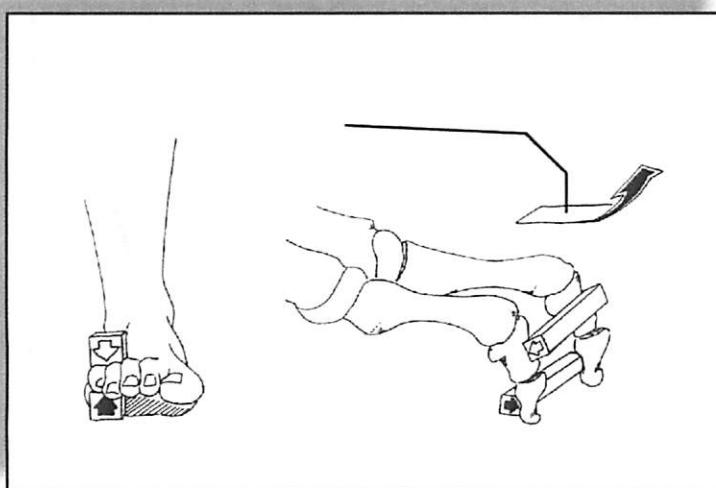
948 FLEXOR DIGITORUM BREVIS, Lateral Div.



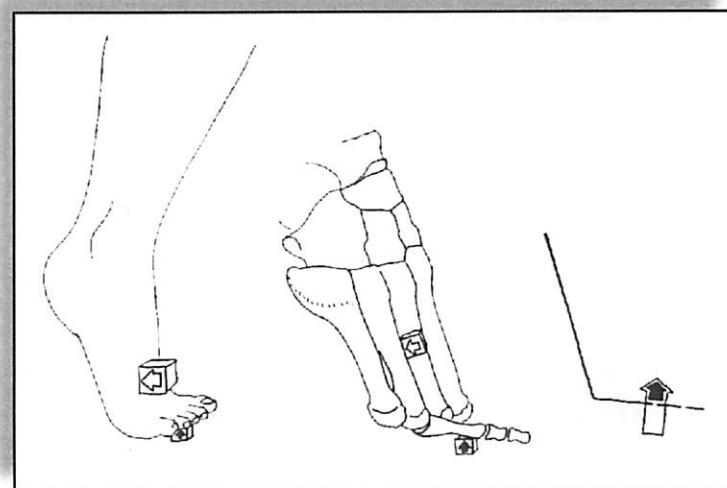
976 EXTENSOR DIGITORUM BREVIS



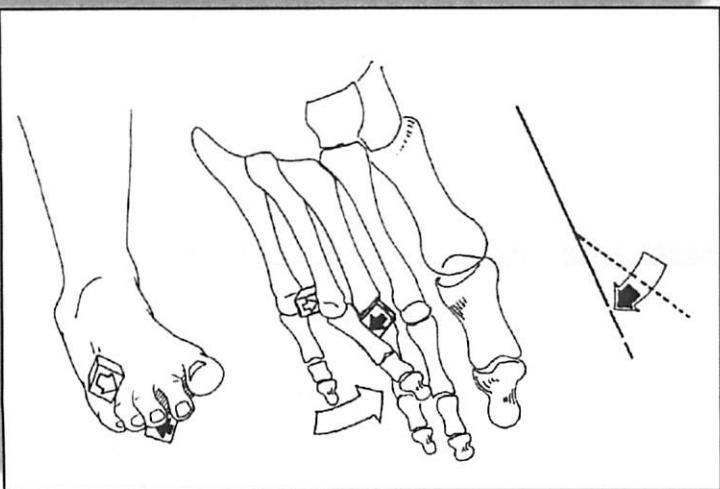
944 QUADRATUS PLANTAE, Lateral Div.



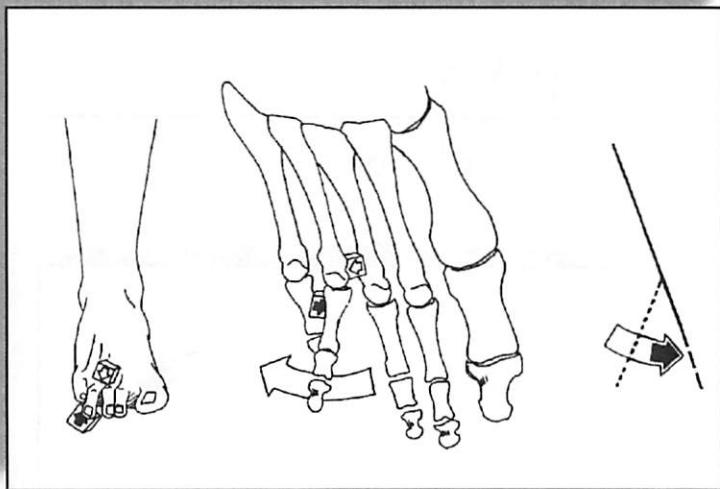
910 FLEXOR DIGITORUM LONGUS, Lateral Div



954 FLEXOR DIGITUS PEDIS, Fourth



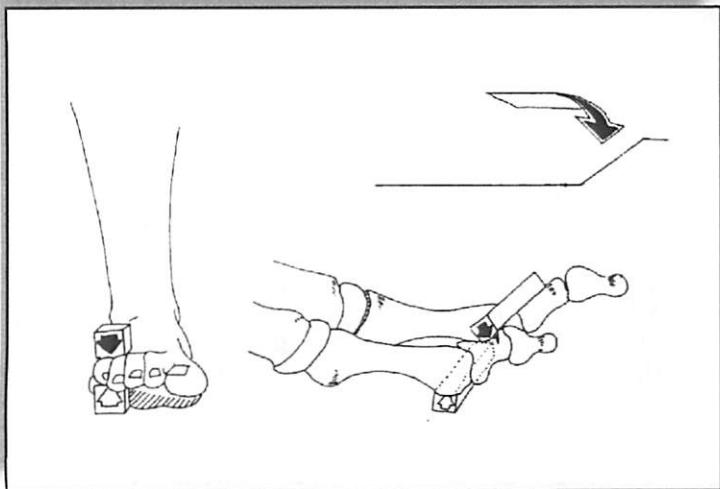
962 ADDUCTOR DIGITUS PEDIS, Fourth



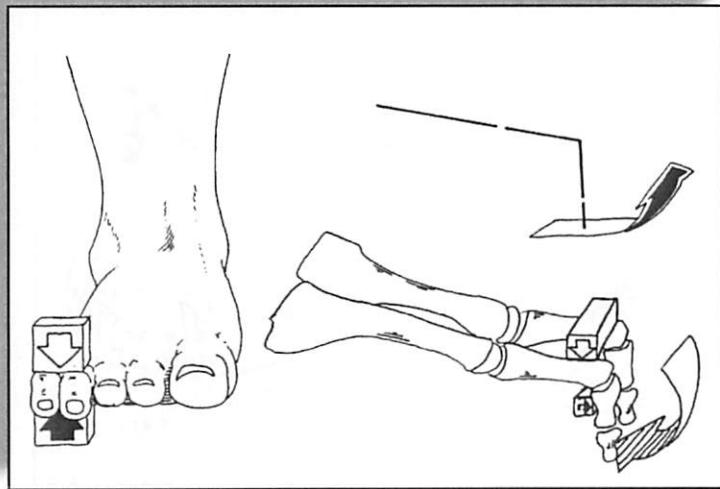
970 ABDUCTOR DIGITUS PEDIS, Fourth

GROUP VII

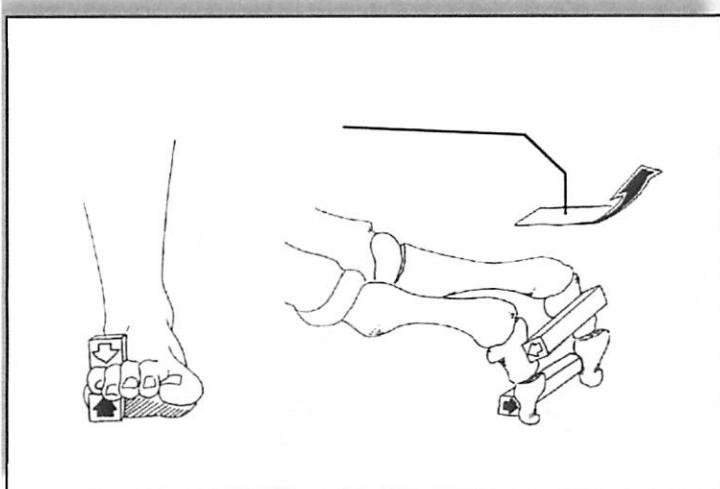
Muscle of the Fifth Toe



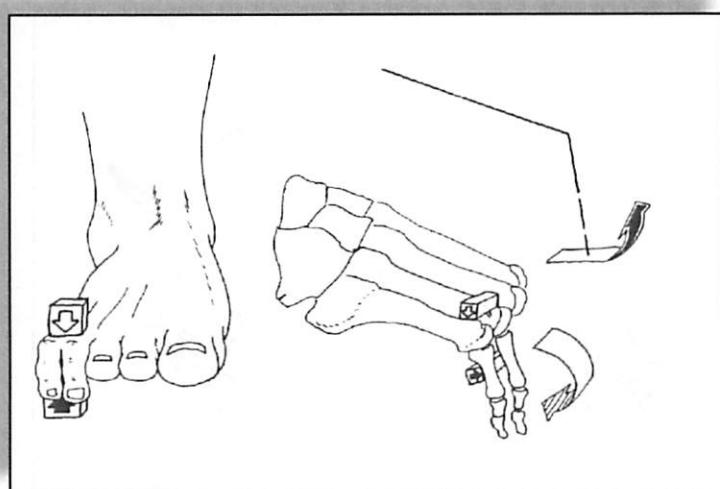
914 EXTENSOR DIGITORUM LONGUS, Lateral Div.



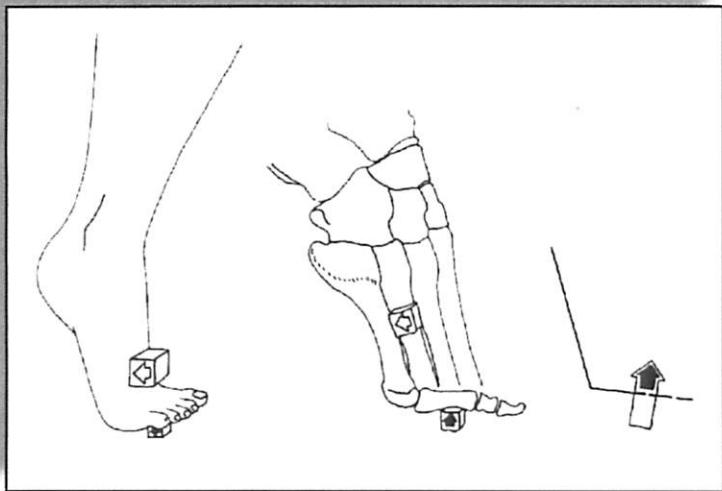
948 FLEXOR DIGITORUM BREVIS, Lateral Div.



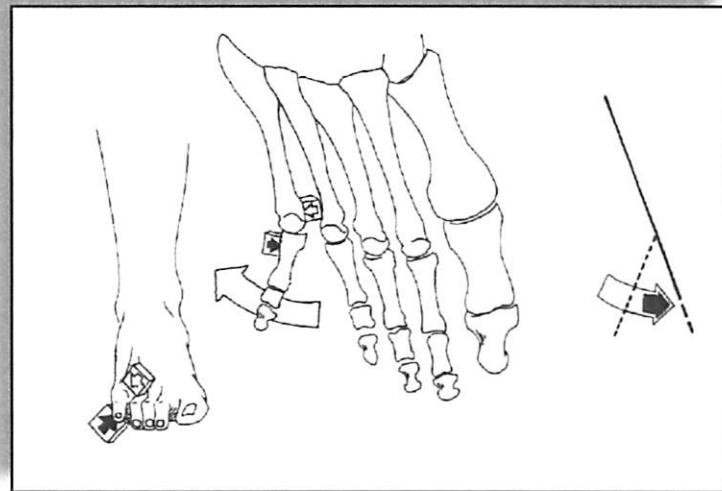
910 FLEXOR DIGITORUM LONGUS, Lateral Div.



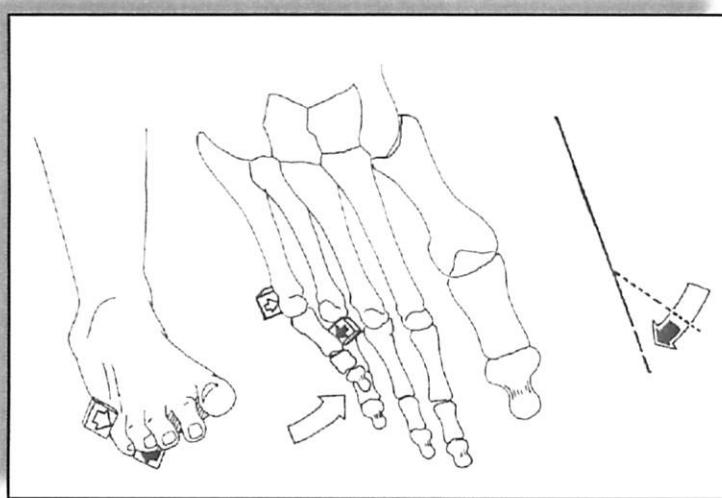
944 QUADRATUS PLANTAE, Lateral Div.



956 FLEXOR DIGITUS PEDIS, Fifth



972 ABDUCTOR DIGITUS PEDIS, Fifth



964 ADDUCTOR DIGITUS PEDIS, Fifth



CHAPTER II

EXTRINSIC MUSCLES OF THE FOOT

USING THE CLINICAL KINESIOLOGY WORKBOOKS

This Clinical Kinesiology workbook of the lower extremities covers the specific information necessary to test and evaluate 52 muscles. The major and most important portion of the workbook is the muscle worksheet. Each muscle is presented in a structured format to provide the necessary information to evaluate possible muscular dysfunctions. The information is displayed on 'seven pictorial drawings which include a word description to properly identify the related local muscle reflexes. The meaning conveyed by each category is as follows:

Origin:	Indicates the area where the muscle origin is most effectively treated and will sometimes vary from the description commonly found in anatomy texts.
Insertion:	Indicates the area where the muscle insertion is most effectively treated.
Test:	Describes the test position found to be most practical and efficient in isolating a particular muscle or its division.
Dr.:	Refers to the doctor (or one performing the test.)
Ipsilateral:	Refers to the muscle being tested on the same side of the body. All pictures are of the right foot.
Contralateral:	Refers to the opposite side of the body to the muscle being tested.
Brace:	Refers to the area being held by the doctor to stabilize the patient for testing.
Contact:	Refers to the area contacted by the doctor in order to test for muscle contraction.

This manual contains several muscles which have divisions not presently accepted in medical texts. These divisions are an outgrowth of personal research obtained while observing patients, studying anatomy books, dissecting cadavers and most important, divisions are based on various reflexes (i.e., a neurovascular reflex) which benefit only a section or part of a normal muscle.

PROCEDURE FOR MUSCLE CORRECTION

Synchronous Pulse and Double-Fingered Contact:

Based upon clinical experience over many years and trial and error testing of many techniques, certain procedures have remained dominant as being most effective when treating a muscle on a local basis. This procedure is the use of a double-fingered bilateral contact. The contact is held until a synchronal pulse is felt. While stimulating any reflex point on the body, always use a two-fingered contact. This is a neutral contact as opposed to a positive or negative single finger contact.

PROCEDURE FOR MUSCLE CORRECTION:

On a local basis, a muscle is directly influenced by one or more of the following factors:

1. Neurovascular
2. Neurolymphatic
3. Visceral Organ Reflex
4. Muscle Acupuncture Point
5. Vertebral Level, Myomere, and Lovett Brother
6. Cranial

7. Foot
8. Nutrition

1. Neurovascular: Description: NV points are generally found on the cranium.

Discussion: Vascular beds of the muscle needing treatment are influenced by using the following procedure until a synchronous pulse is felt. A neurovascular reflex, which is generally located on the surface of the cranium, when activated by a light tugging double fingered contact with one hand and a rotary stimulating contact with the opposite hand at the origin of the muscle, will restore normal circulation to the area associated with that reflex. These contacts are ipsilateral.

Note: Dr. George Goodheart is responsible for the development of the original neurovascular muscular relationships.

2. Neurolymphatic: Description: NL points are generally found between the ribs.

Discussion: The lymphatics of the muscle being treated are influenced by using the following procedure until a synchronous pulse is felt. A neurolymphatic reflex, which is generally located in the rib cage, when activated by a rotary stimulating contact with the opposite hand at the insertion of the muscle, will produce lymphatic flushing of the areas associated with that reflex. Both the right and left muscle group are treated by using the same reflex. *Note: Dr. George Goodheart is responsible for the development of the original neurolymphatic muscular relationships.*

3. Visceral Organ I and II: Description: VOR I and II are the primary and secondary visceral organ reflexes.

Discussion: Somato-visceral influences and viscero-somatic reflexes are common feedback systems with the local computer. A muscle is primarily associated with two specific organs. They are listed as Visceral Organ I (VOR I) and Visceral Organ II (VOR II). They are treated as follows: A VOR, which is generally located on the abdomen or other specific areas of the body, when activated by a rotary stimulating contact with one hand and a rotary stimulating contact with the opposite hand on the Muscle Acupuncture Point, will restore normal interaction between somato-visceral and viscero-somatic functions of the body. Following stimulation, hold until a synchronous pulse is detected.

4. Muscle Acupuncture Point: Description: M.A.P. is a specific reflex for the muscle being tested and is located contralateral to the muscle being tested.

Discussion: Each muscle has a specific acupuncture point located on the opposite side, which acts as an energizer and a point of circuitry overload, located within or around the normal acupuncture points as previously described by Felix Mann. For treatment procedure, see VOR reflex).

5. Vertebral Level, Myomere, and Lovett Brother:

Discussion: VL, MM and VBVL are three primary areas of neurological input from the spinal

cord to each muscle. The first area is called the myomere and reflects areas of normal neurological innervation to a specific muscle. The vertebral level is a phenomenon not clearly understood but is frequently found associated with each muscle aberration. When either of these levels two-point, adjust the area as indicated and tap for recall. Occasionally it is necessary to pulse the MM or VL or both to the muscle. The Lovett Brother is the vertebrae, at the opposite end of the spine from the VL, that moves synchronistically with the V.L.

6. Cranial: Related extraspinal subluxation that occurs as a compensatory involvement in muscle aberration.
7. Foot: Related extraspinal subluxation that occurs as a compensatory involvement in muscle aberration.
8. Nutrition: Each muscle has a specific nutrient associated with it. Nutrition is indicated when the neurolymphatic reflex is not an N.R.L and the insertion of the muscle has a positive therapy localization that is an N.R.L..

PRIORITY TREATMENT:

1. Test and record all weak muscles.
2. Use computer clearout technique (See Clearing Techniques in Instruction Manual)
3. Retest the muscles to determine which one remained weak.
4. The weak muscle is considered a ONE-POINT.
5. Mark the major reflexes associated with the muscle:
NV, NL, VOR I, VOR II, VL, MM, Cranial, Foot, and LBVL.
6. Have the patient therapy localize (TL) each reflex point while testing the muscle.
The reflex that causes the weak muscle to become strong is considered the TWO-POINT.
7. Check the TWO-POINT reflex to make sure it is an NRL.
8. Treat the reflex that is the NRL in the appropriate manner.
(See procedure for Muscle Correction).
NV - Origin
NL - Insertion (MAP - VOR I MAP - VOR II MAP - Muscle)
VL - Adjust, then pulse to muscle
MM - Adjust, then pulse to muscle
Cranial
Foot
9. If two reflex points are indicated as NRL's, use the THREE-POINT technique. The THREE-POINT technique helps to determine which of the major reflexes is to be treated. The procedure is as follows:
 - a) The weak muscle is the ONE-POINT.
 - b) The reflex point that strengthens the muscle is the TWO-POINT.

- c) While the patient TL's the reflex point that strengthened the weak muscle, if any other reflex point changes the indicator muscle, it is considered the THREE-POINT and the major point to be treated.

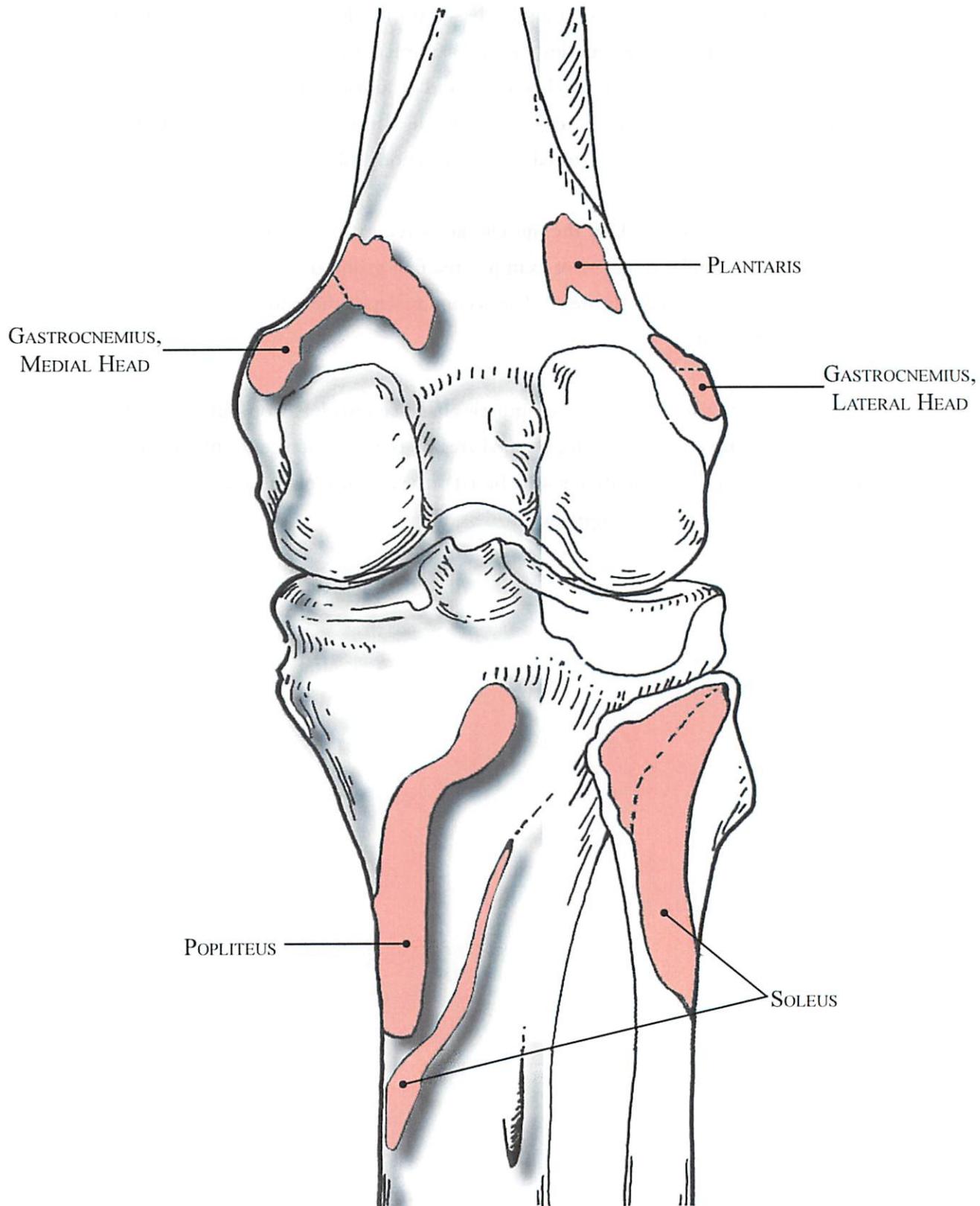
Most anatomical texts study muscles based on the location of the muscle belly. Thus muscles of the calf are all the muscles whose anatomical muscle fibers are between the knee and ankle. In this manual, muscles will be listed and grouped according to their insertion. The insertion of a muscle is where the effect of muscle contraction is most optimally seen. As kinesiologists, we are primarily interested in muscle action and its measurement.

For ease of understanding, the muscles are listed by insertion and then subdivided into muscles that have a similar origin. For example, the first group of muscles presented is muscles of the calf that insert on the calcaneus. The second group is the muscles of the calf that insert on the arch of the foot.

Once the logical arrangement of muscles has been made, a computer number has been assigned. These numbers will be in the general area of previous computer numbers but are now in a new order. The previous numbers were based on a sequence of muscle tests which have now been modified as research has progressed.

ORIGIN AND INSERTION

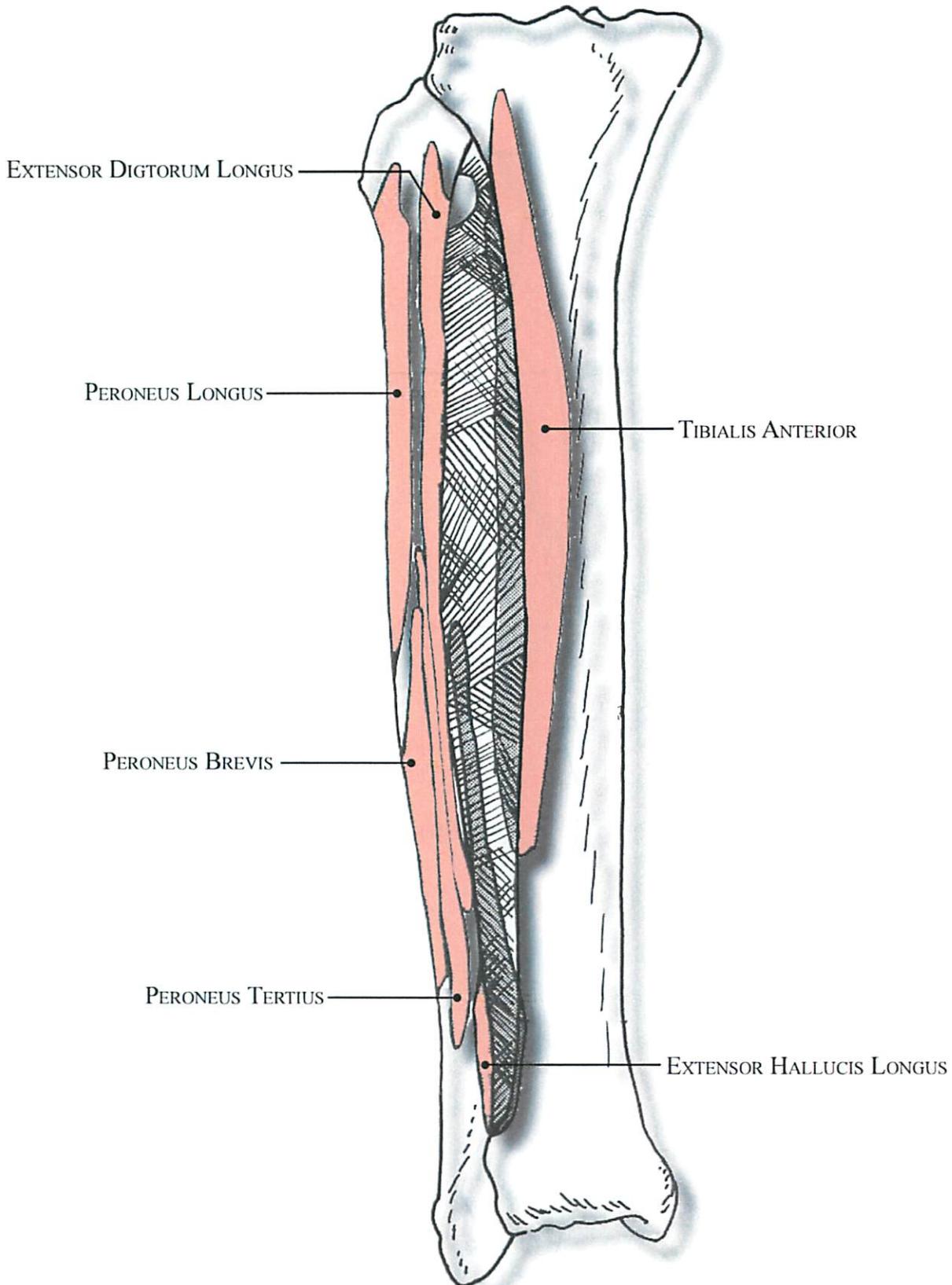
CALF MUSCLES



POSTERIOR VIEW OF KNEE

ORIGIN AND INSERTION

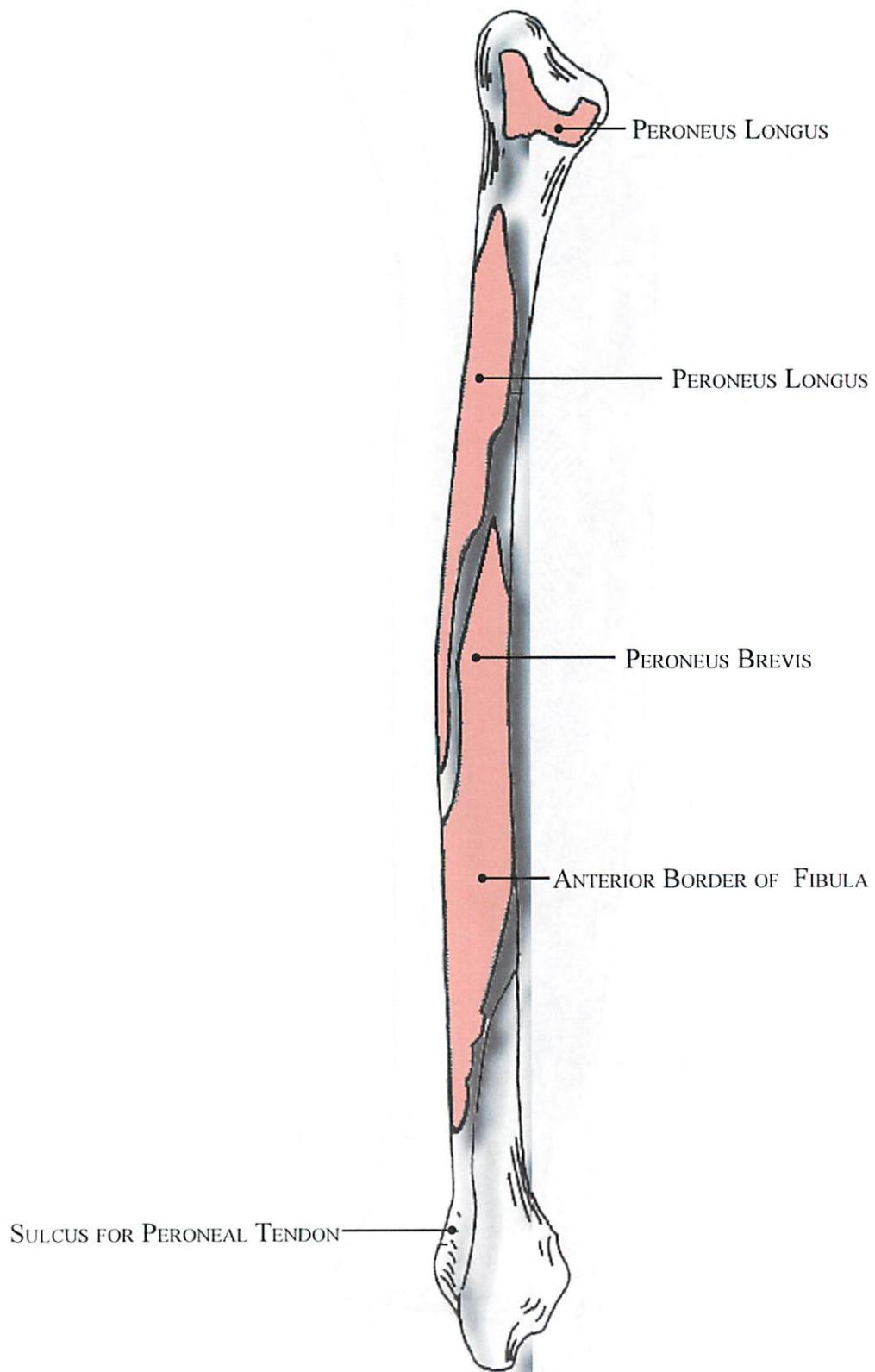
CALF MUSCLES



ANTERIOR VIEW OF TIBIA AND FIBULA

ORIGIN AND INSERTION

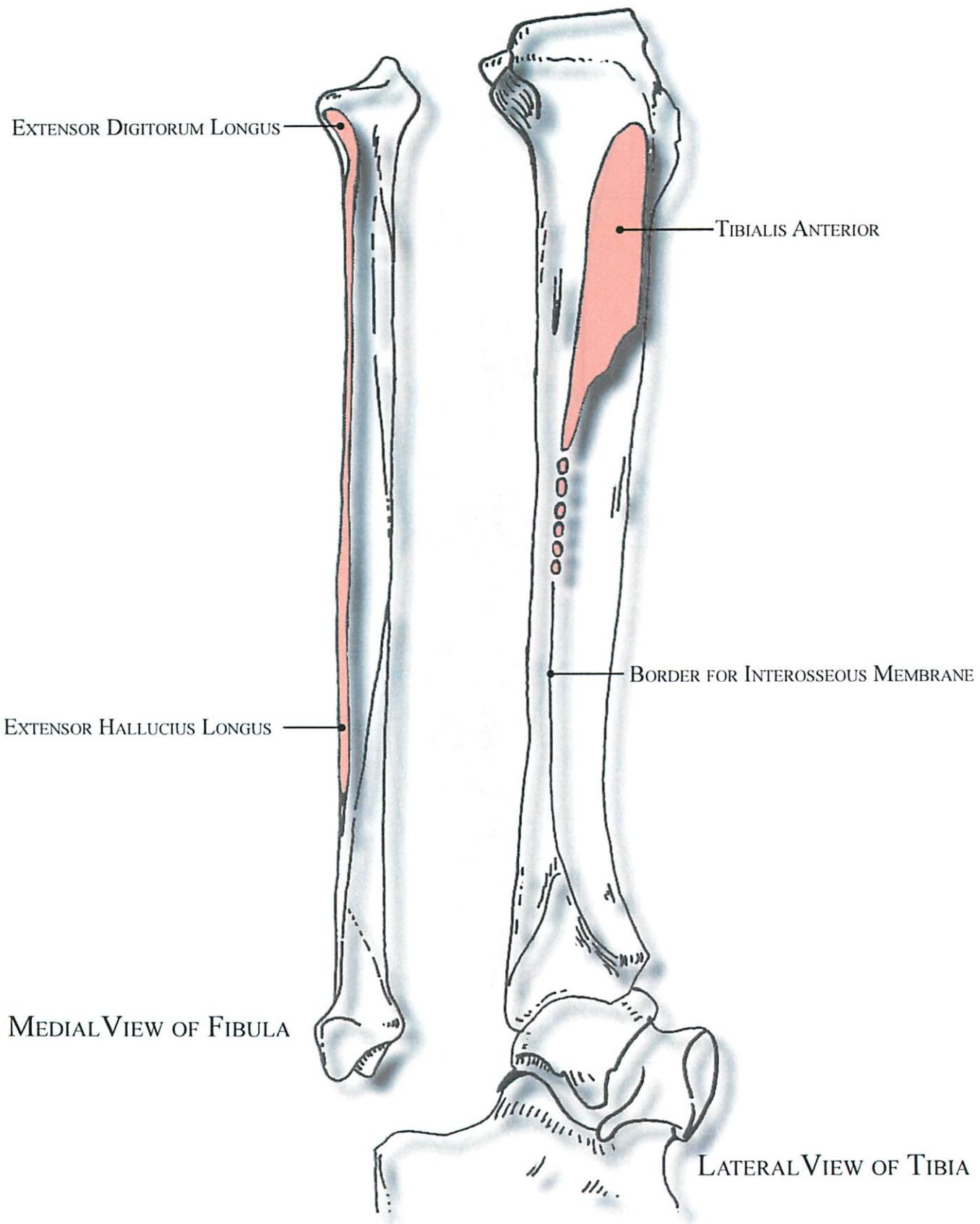
CALF MUSCLES



LATERAL VIEW OF FIBULA

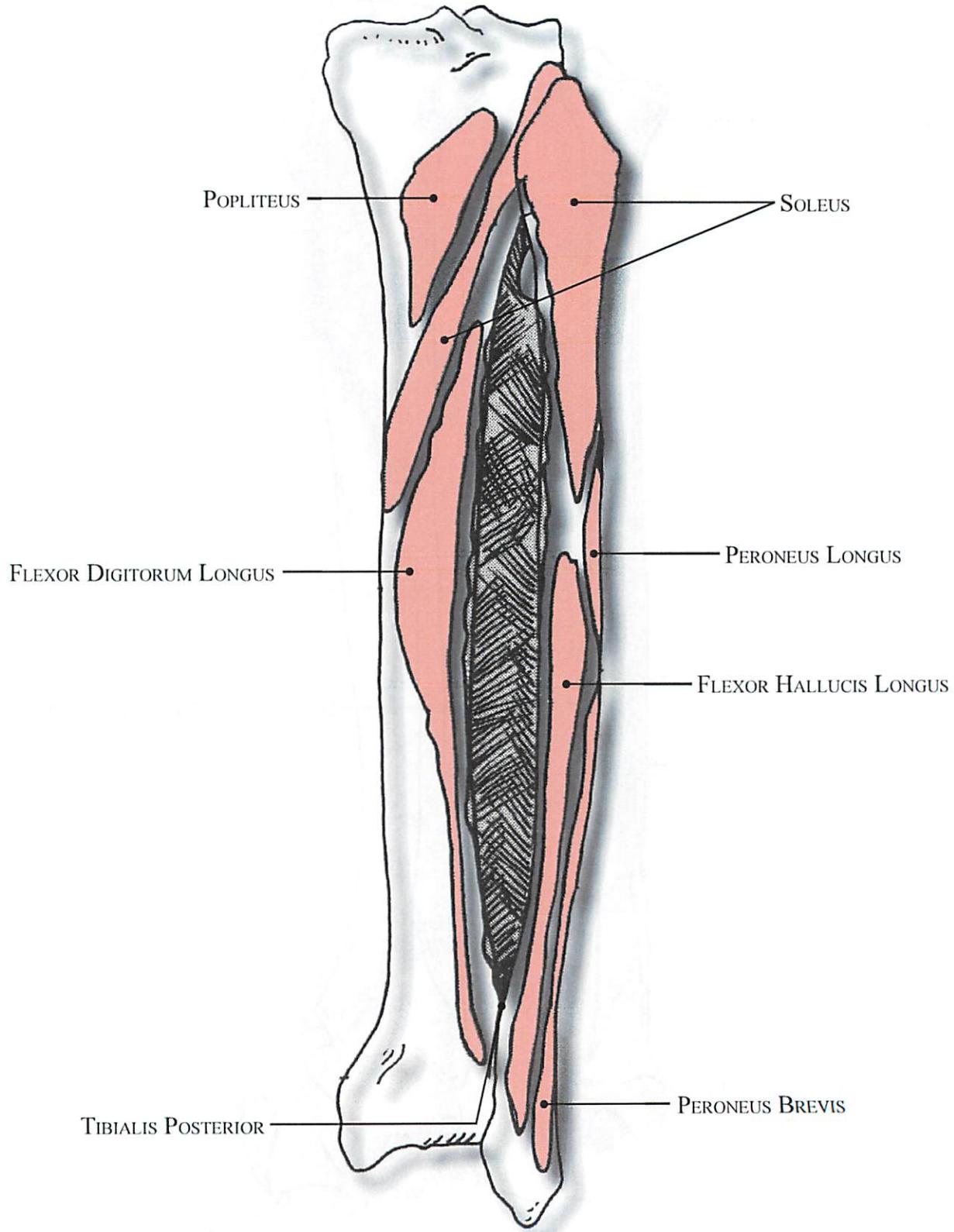
ORIGIN AND INSERTION

CALF MUSCLES



ORIGIN AND INSERTION

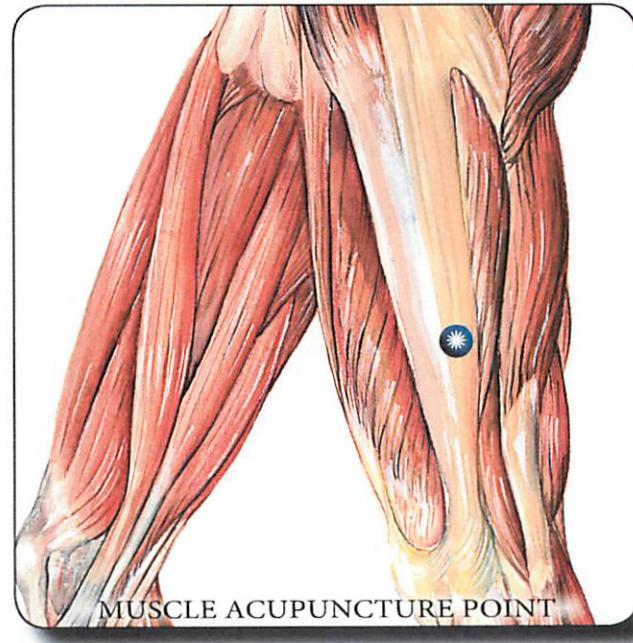
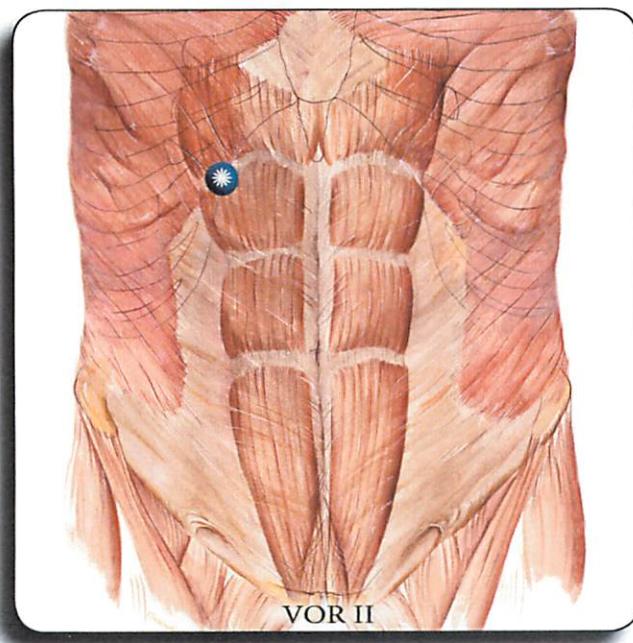
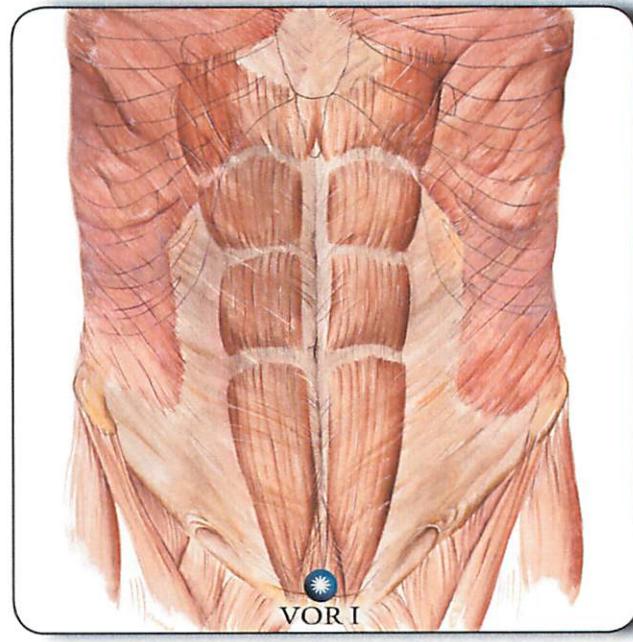
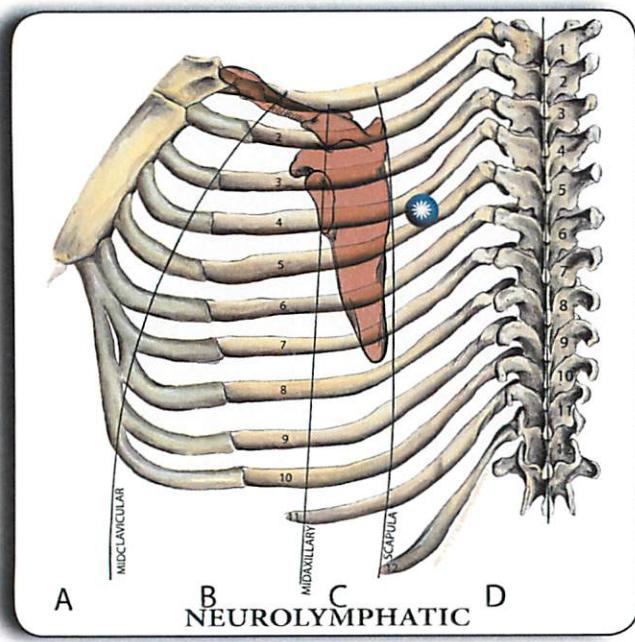
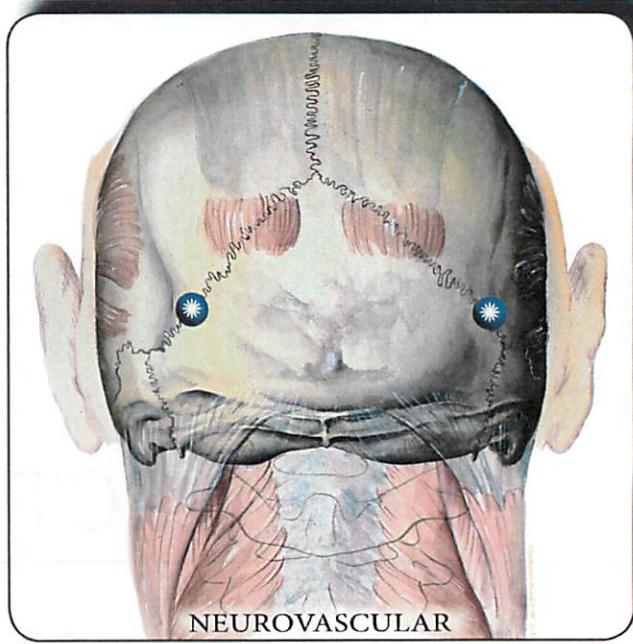
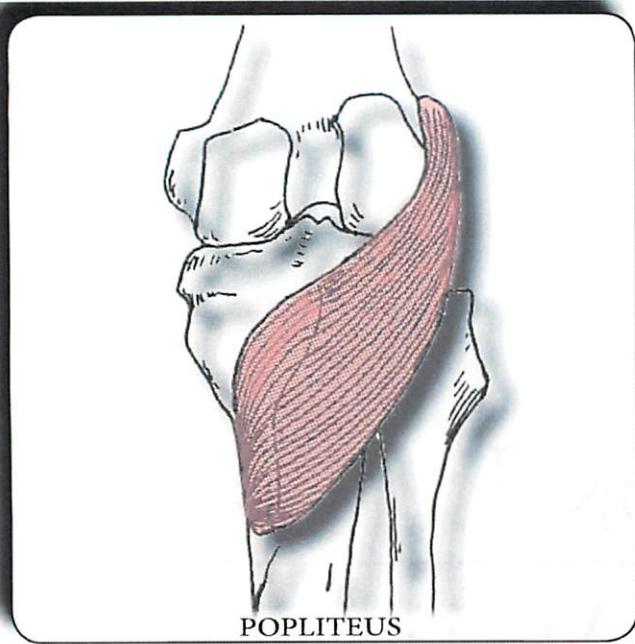
CALF MUSCLES



POSTERIOR VIEW OF TIBIA AND FIBULA

SECTION I:

CALF AND ANKLE



Muscle 870: POPLITEUS

ORIGIN: Lateral condyle of femur, oblique popliteal ligament of knee and outer margins of the lateral meniscus.

INSERTION: Triangle area on proximal posterior surface of the tibia above soleal line.

ACTION: With femur fixed, flexes the calf on the femur and internally rotates the tibia. With tibia fixed, rotates the femur externally

TEST:

Patient: Position Supine.

M.T.P.: Flex ipsilateral femur on hip

45 degrees, flex ipsilateral leg on femur 90 degrees. completely internally rotate calf on femur

Doctor:

Position: End of table facing patient.

Brace: Ipsilateral calcaneus laterally.

Contact: Ipsilateral aspect of foot at arch.

Direction: Externally rotate leg on femur.

NEUROVASCULAR: (Post/BL) Lambdoidal suture, lower lateral aspect, near junction of squamosal suture.

NEUROLYMPHATIC: (Post/L) Fourth I.C.S., 3" lateral to spine.

VISCERAL ORGAN:

I. *Vaginal Vault/Penis:* (Ant/Midline) Cv 3, 1" above pubes.

II. *Gall Bladder:* (Ant/R) Rectus abdominis lateral border; near the origin of the fourth section.

M. A. P. : G 32 1/4

V.L. : L1 R

L. B. V.L. : C5 R

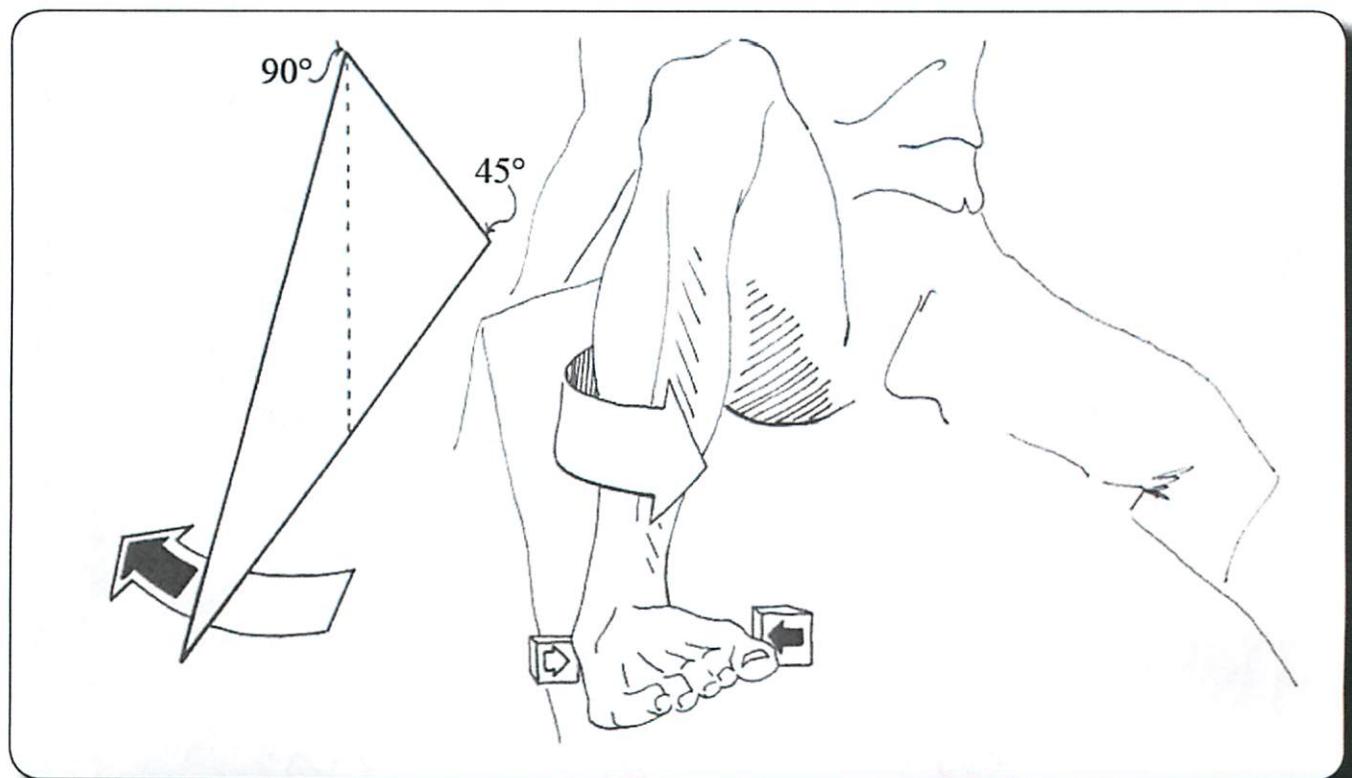
M. M. : L5

CRANIAL: Temporal Bone

FOOT: Cuboid

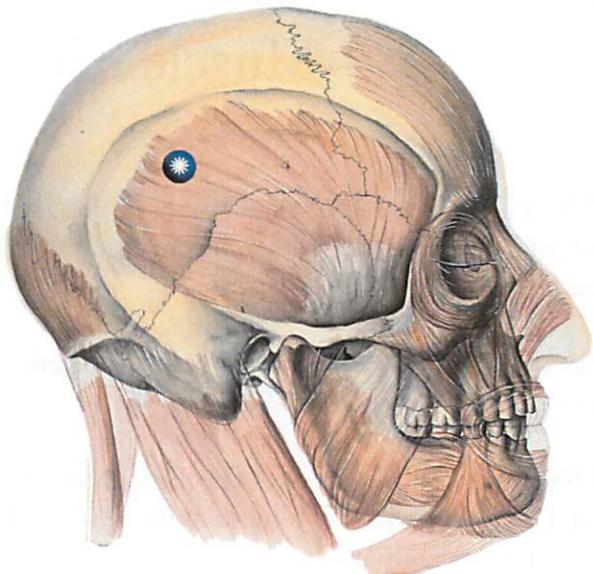
NUTRIENT SOURCE: Inositol

1. Core Inositol (N.W.)

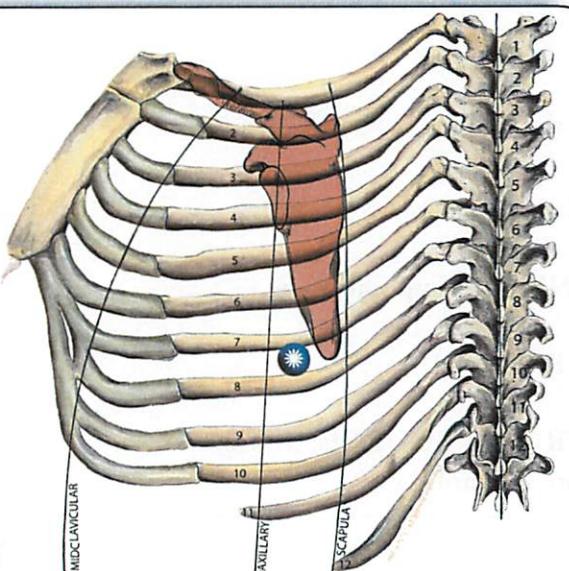




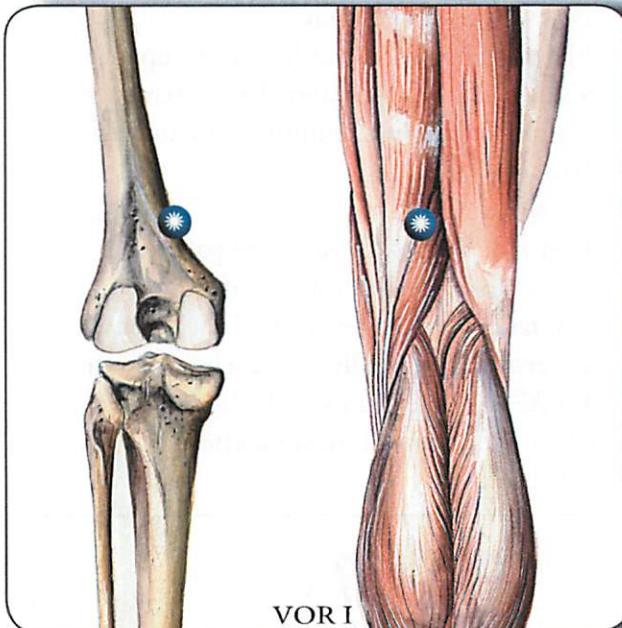
GASTROCNEMIUS (MEDIAL HEAD)



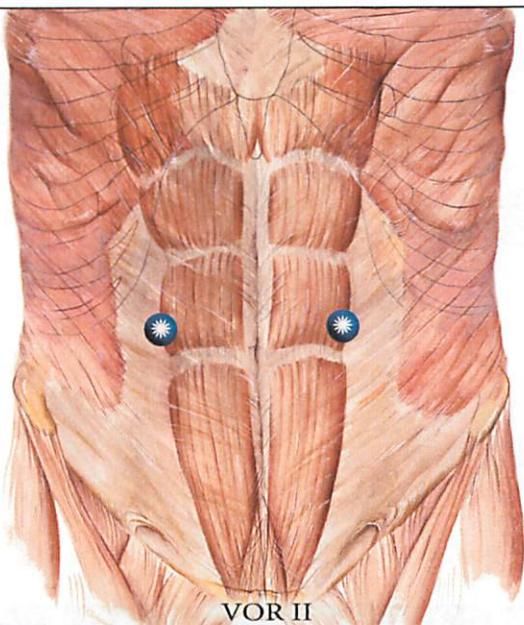
NEUROVASCULAR



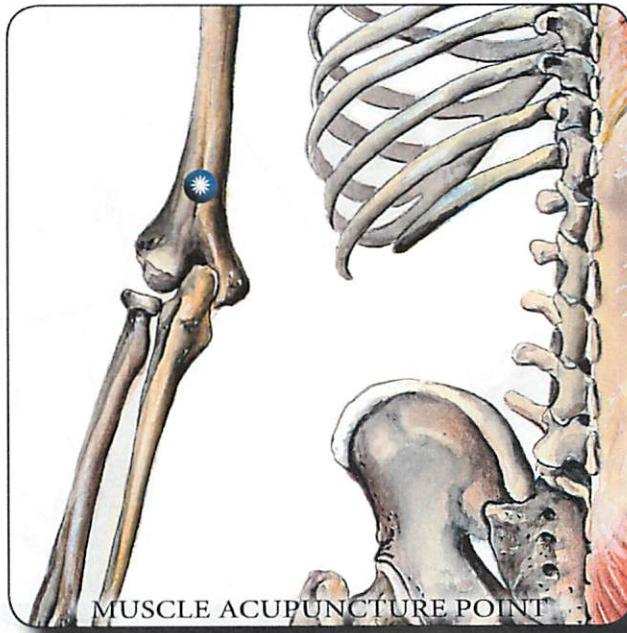
A B C D
MIDCLAVICULAR
MIDAXILLARY
SCAPULA
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 872: GASTROCNEMIUS, (Medial Head)

ORIGIN: Medial condyle and adjacent part of femur, capsule of knee joint.

INSERTION: Calcaneus via the calcaneal tendon.

ACTION: With origin fixed, plantar flexes the foot. With insertion fixed, flexes femur on calf.

TEST:

Patient: Position: Supine.

M.T.P.: Flex ipsilateral femur on hip while in neutral position. Flex ipsilateral knee 110 degrees. Fully internally rotate leg and plantar flex foot.

Doctor:

Position: End of table facing patient.

Brace: Ipsilateral knee.

Contact: Ipsilateral calcaneus.

Direction: Extend calf on thigh.

NEUROVASCULAR: (Lat) Parietal bone, 4" superior and 2" posterior to external auditory canal, inferior to superior temporal line.

NEUROLYMPHATIC: (Post/L) Seventh I.C.S., parascapular area, 6" lateral to spine.

VISCERAL ORGAN:

I. *Duodenum:* (Post/BL) Belly of semimembranosus, medial side, 2" superior to origin of gastrocnemius.

II. *Kidney:* (Ant/BL) Rectus abdominis, second section, lateral border, 1" superior to umbilicus.

M. A. P. : T 11

V.L. : T11 R

L. B. V.L. : C7 R

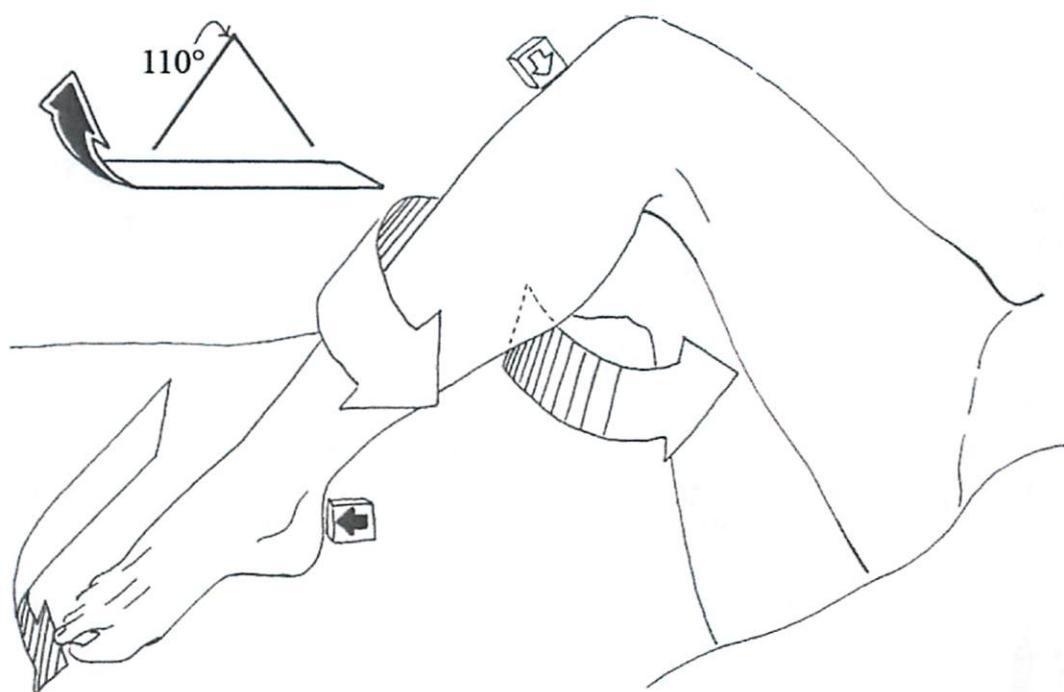
M. M. : S2

CRANIAL: Occiput (See Volume III for cranial correction).

FOOT: Calcaneus

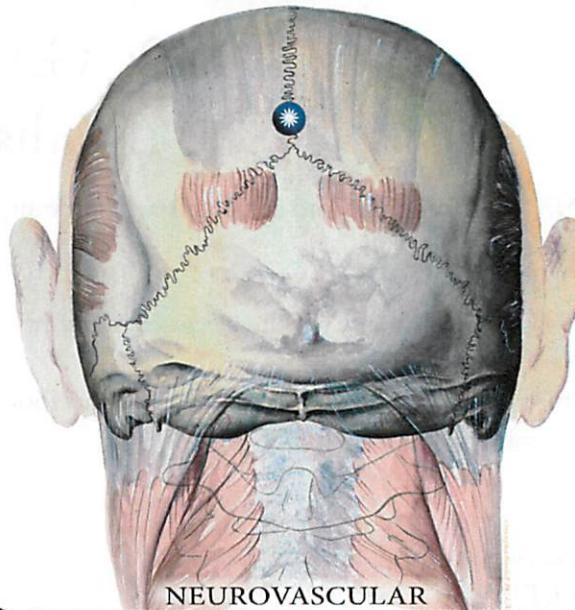
NUTRIENT SOURCE:

- 1. Phosfood (S)
- 2. Core Phosphorus (N.W.)
- 3. Phos-Tab (N.W.)

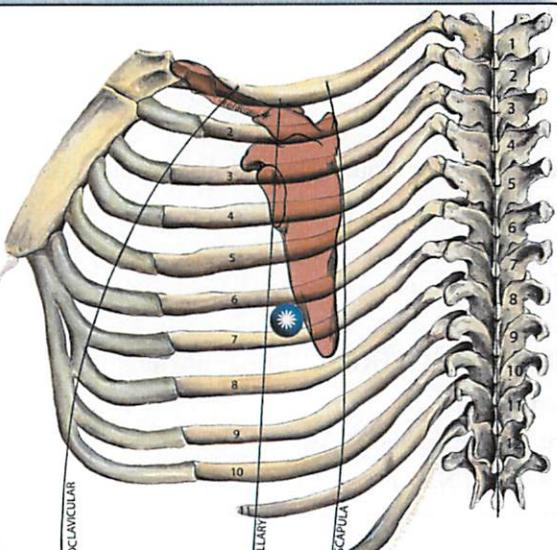




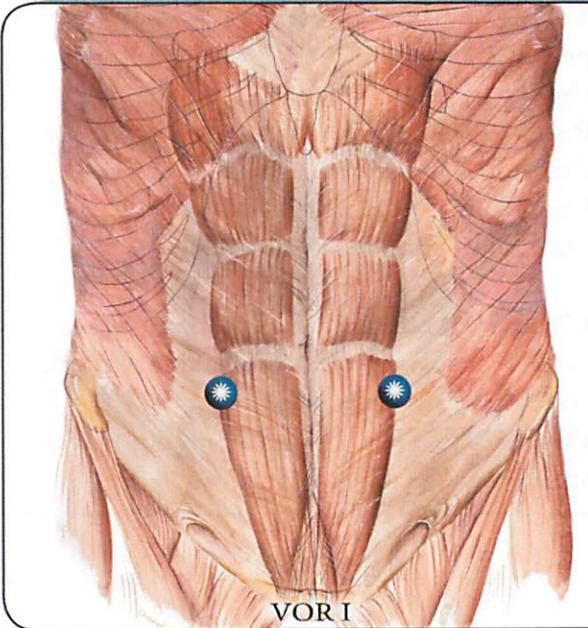
GASTROCNEMIUS (LATERAL HEAD)



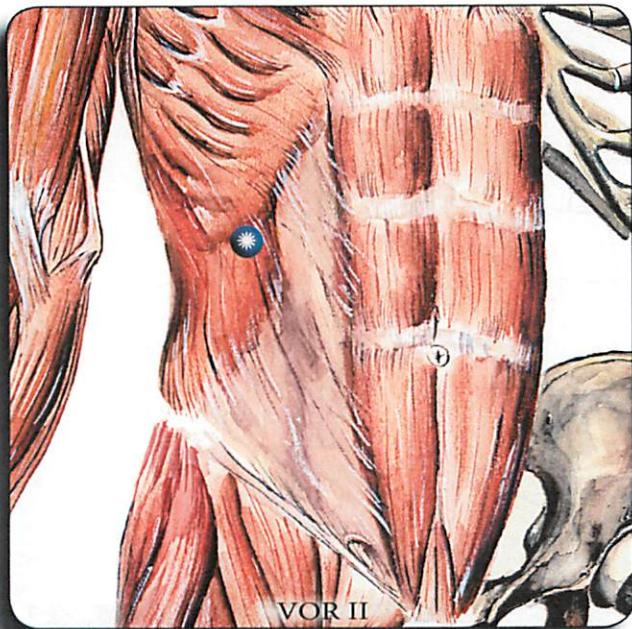
NEUROVASCULAR



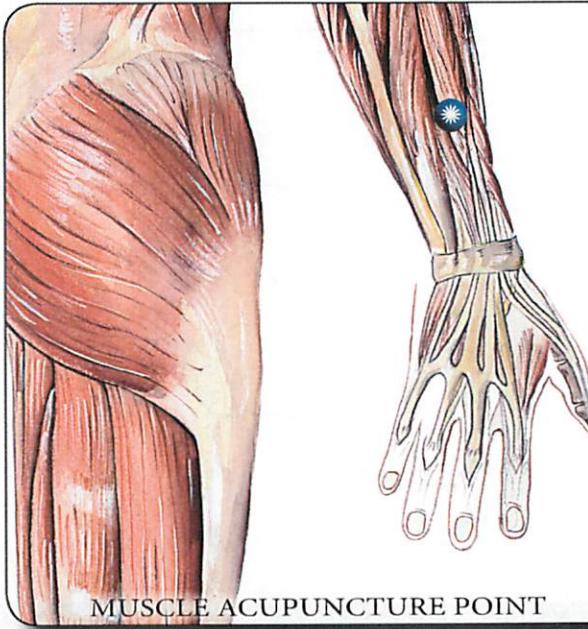
A B C NEUROLYMPHATIC D



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 874: GASTROCNEMIUS, (Lateral Head)

ORIGIN: Lateral condyle and adjacent part of femur, capsule of knee joint.

INSERTION: Calcaneus via the calcaneal tendon.

ACTION: With origin fixed, plantar flexes foot. With insertion fixed, flexes femur on calf.

TEST:

Patient: Position: Supine.

M.T.P.: Flex ipsilateral femur on hip. Flex knee 110 degrees. Fully externally rotate calf on thigh.

Doctor:

Position: End of table facing patient.

Brace: Ipsilateral knee.

Contact: Ipsilateral calcaneus.

Direction: Extend leg on thigh.

NEUROVASCULAR: (Post/Midline) Sagittal suture just superior to posterior fontanelle.

NEUROLYMPHATIC: (Post/L) Sixth I.C.S., parascapular area, 6" lateral to spine.

VISCERAL ORGAN:

I. *Colon - Ascending and Descending:* (Ant/BL)
Rectus abdominis, first section, lateral aspect, just inferior to level of umbilicus.

II. *Liver:* (Ant/R) Sp 16, just inferior to rib cage.

M. A. P. : Li 6

V.L. : T9 L

L. B. V.L. : T2 L

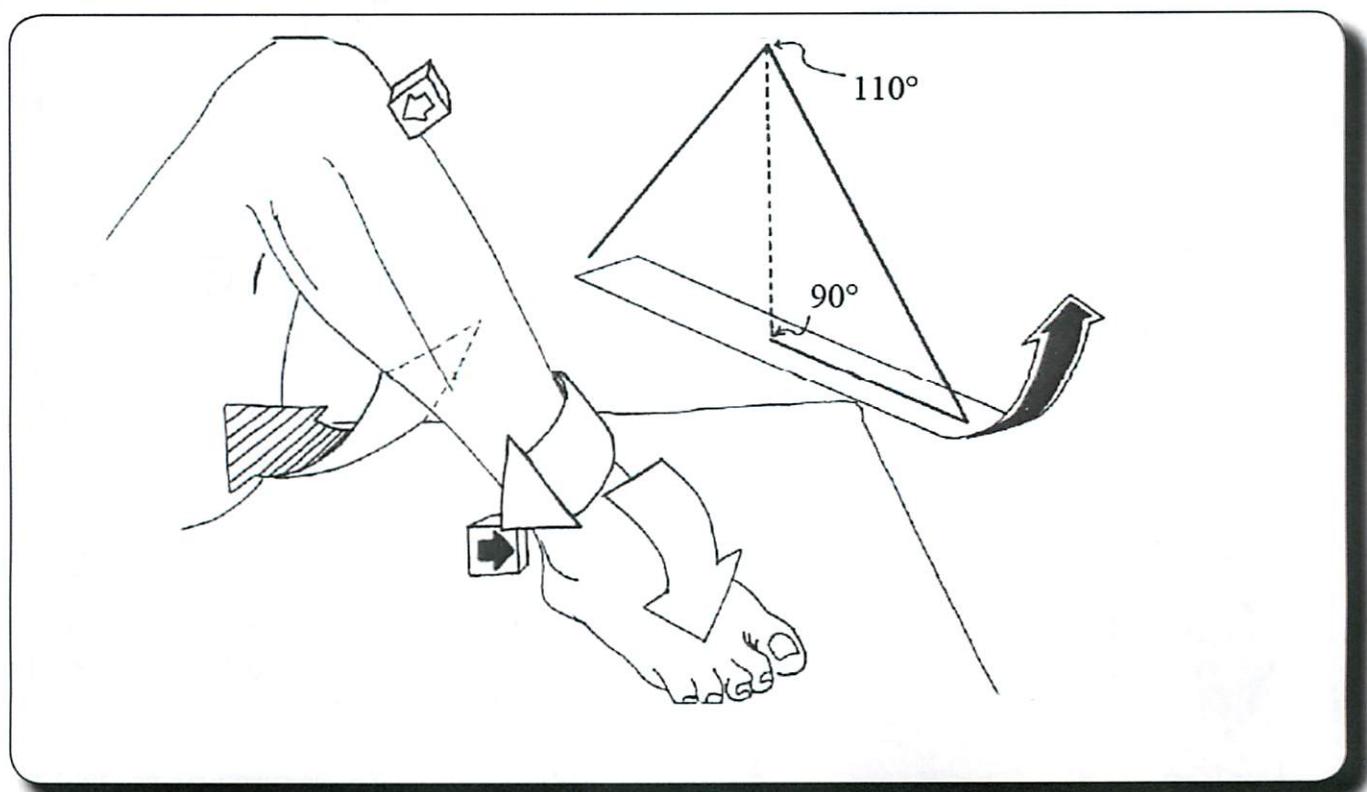
M. M. : S2

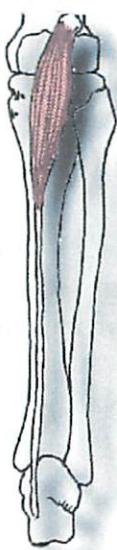
CRANIAL: Occiput

FOOT: Calcaneus

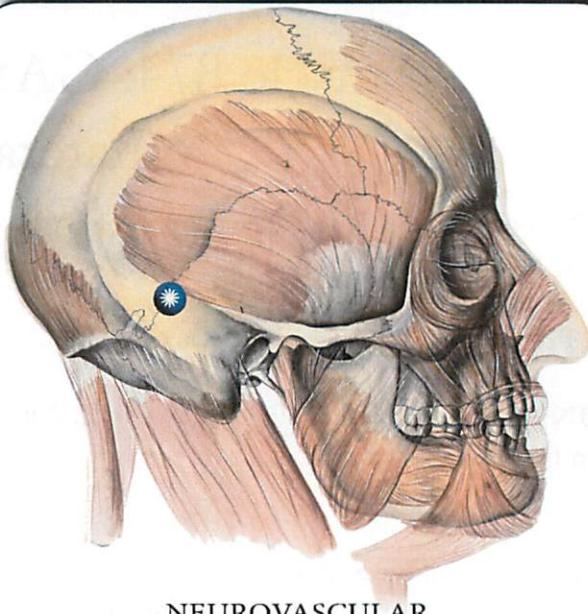
NUTRIENT SOURCE: Iodine

1. Organic Iodine (S)
2. Core Iodine (N.W.)

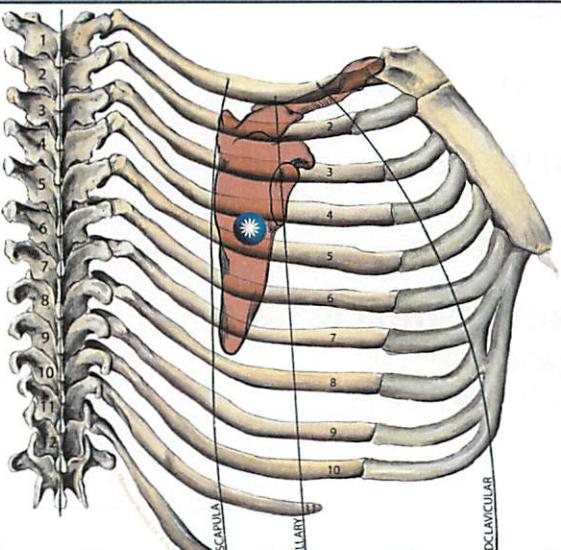




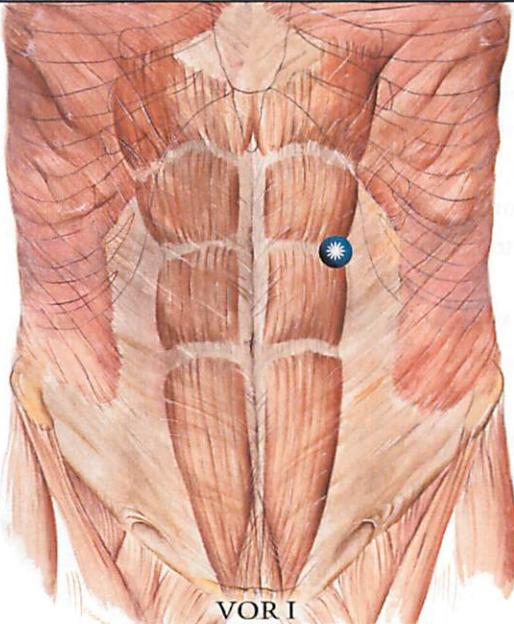
PLANTARIS



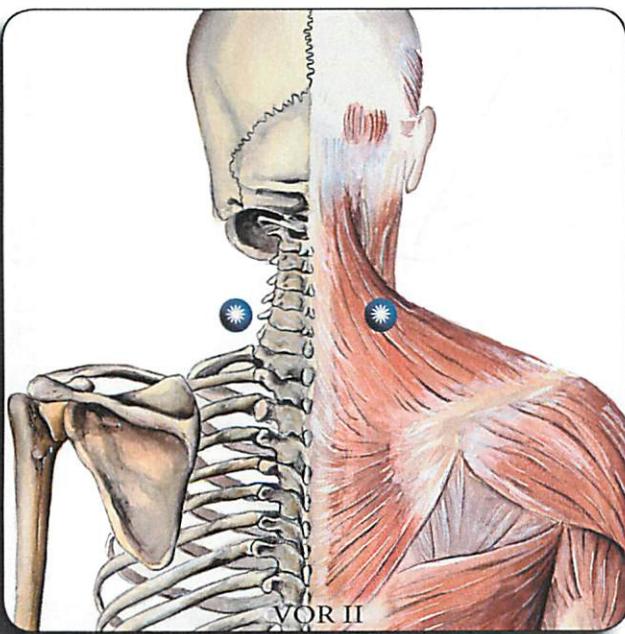
NEUROVASCULAR



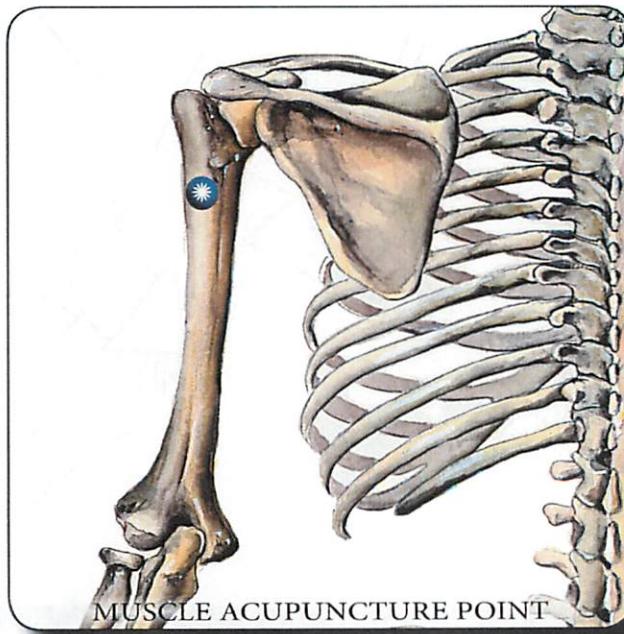
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 876: PLANTARIS

ORIGIN: Lower part of the lateral supracondylar line and the oblique popliteal ligament of femur.

INSERTION: Calcaneus, via the calcaneal tendon.

ACTION: With origin fixed, assists in plantar flexion of foot. With insertion fixed, assists in knee flexion.

TEST:

Patient: Position: Supine.

M.T.P.: Flex ipsilateral femur on hip.

Flex ipsilateral calf on femur to 90 degrees.

Internally rotate calf on foot 5 degrees.

Plantar flex foot.

Doctor:

Position: End of table facing patient.

Brace: Ipsilateral knee.

Contact: Ipsilateral calcaneus.

Direction: Extend leg on thigh.

NEUROVASCULAR: (Lat) Squamosal suture, near asterion.

NEUROLYMPHATIC: (Post/R) Fourth I.C.S., parahumeral area.

VISCERAL ORGAN:

I. *Jejunum, Ninth Section:* (Ant/L) Rectus abdominis, lateral border, between second and third sections.

II. *Tonsillar Lymphatics:* (Post/BL) T 15.5; lateral aspect of neck at level of C5 (in upper trapezius belly).

M. A. P. : T 13

V.L. : L4 L

L. B. V.L. : C2 L

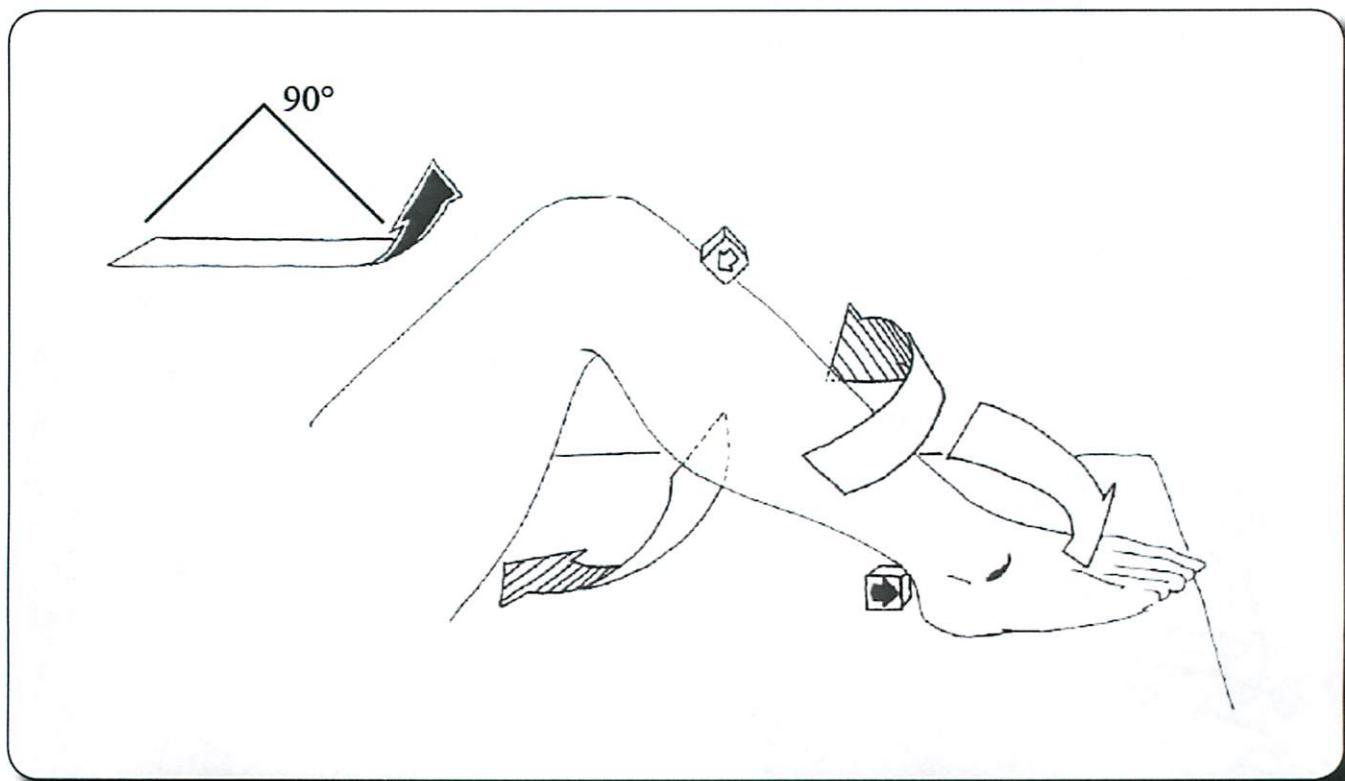
M. M. : S1

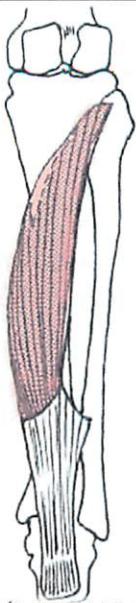
CRANIAL: Zygomatic

FOOT: Second Cuneiform

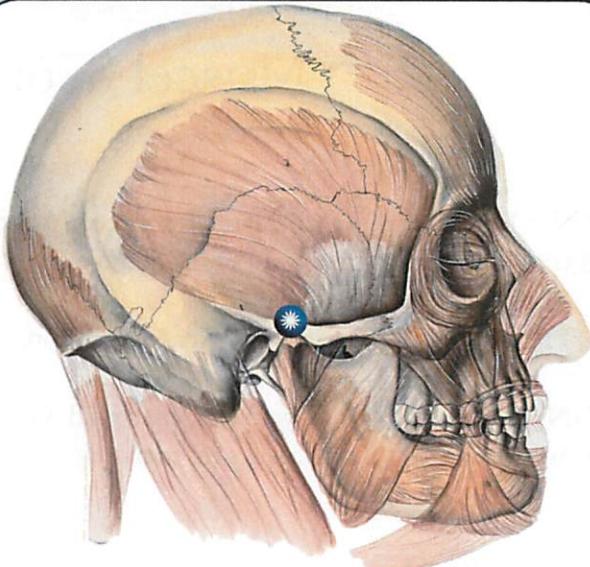
NUTRIENT SOURCE: Magnesium

1. Min-Tran (s)
2. Core Magnesium (N.W.)
3. Aspartic-Mag. (N.W.)

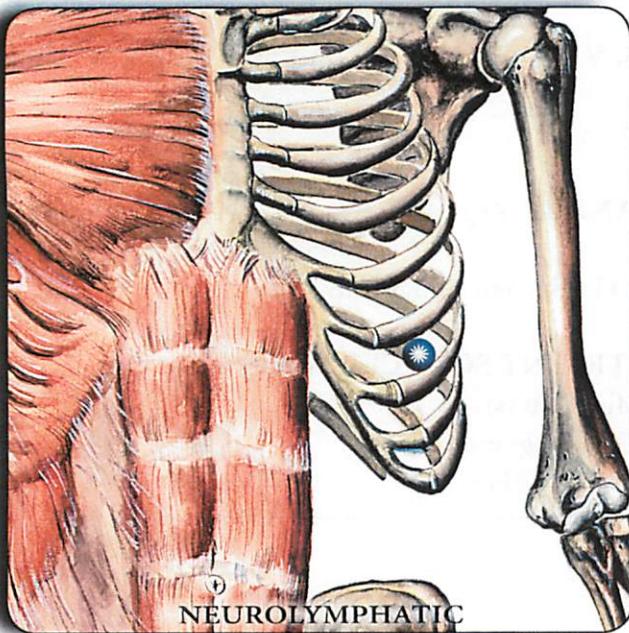




SOLEUS (MEDIAL HEAD)



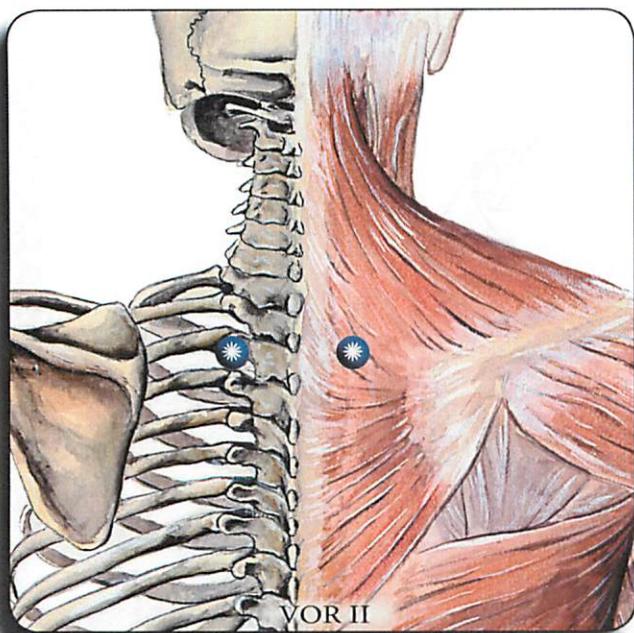
NEUROVASCULAR



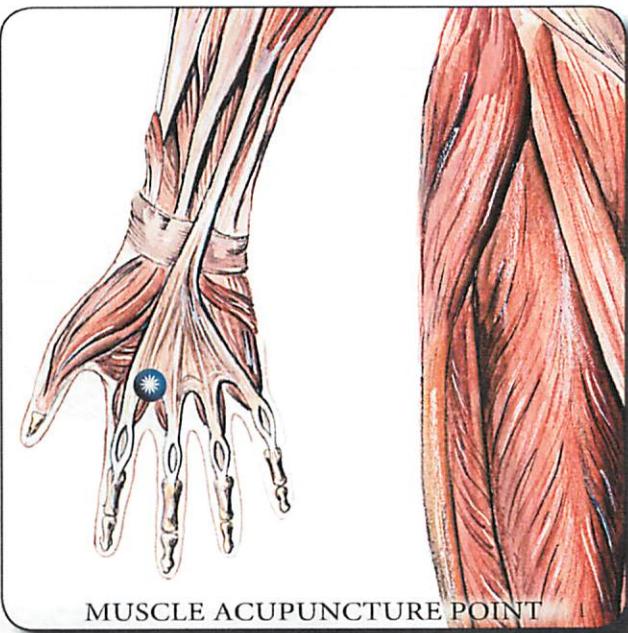
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscel 878: SOLEUS, (Medial Head)

ORIGIN: Transverse processes of atlas and axis vertebrae.

INSERTION: Vertebral border at superior angle of scapula.

ACTION: Raises the scapula, draws it medially and rotates it to lower the lateral angle.

TEST:

No known practical test available. Therapy localize over muscle. See illustration.

NEUROVASCULAR: (Lat) Temporal bone, zygomatic process, anterior to external auditory canal.

NEUROLYMPHATIC: (Ant/L) Seventh I.C.S., l^o lateral to costal cartilage junction..

VISCERAL ORGAN:

I. *Adrenal:* (Ant/BL) Rectus abdominis, third section, medial border.

II. *Anterior Pituitary:* (Post/BL) B 12; transverse process of T3.

M. A. P. : Cx 8 (

V.L. : T3 R

L. B. V.L. : T8 R

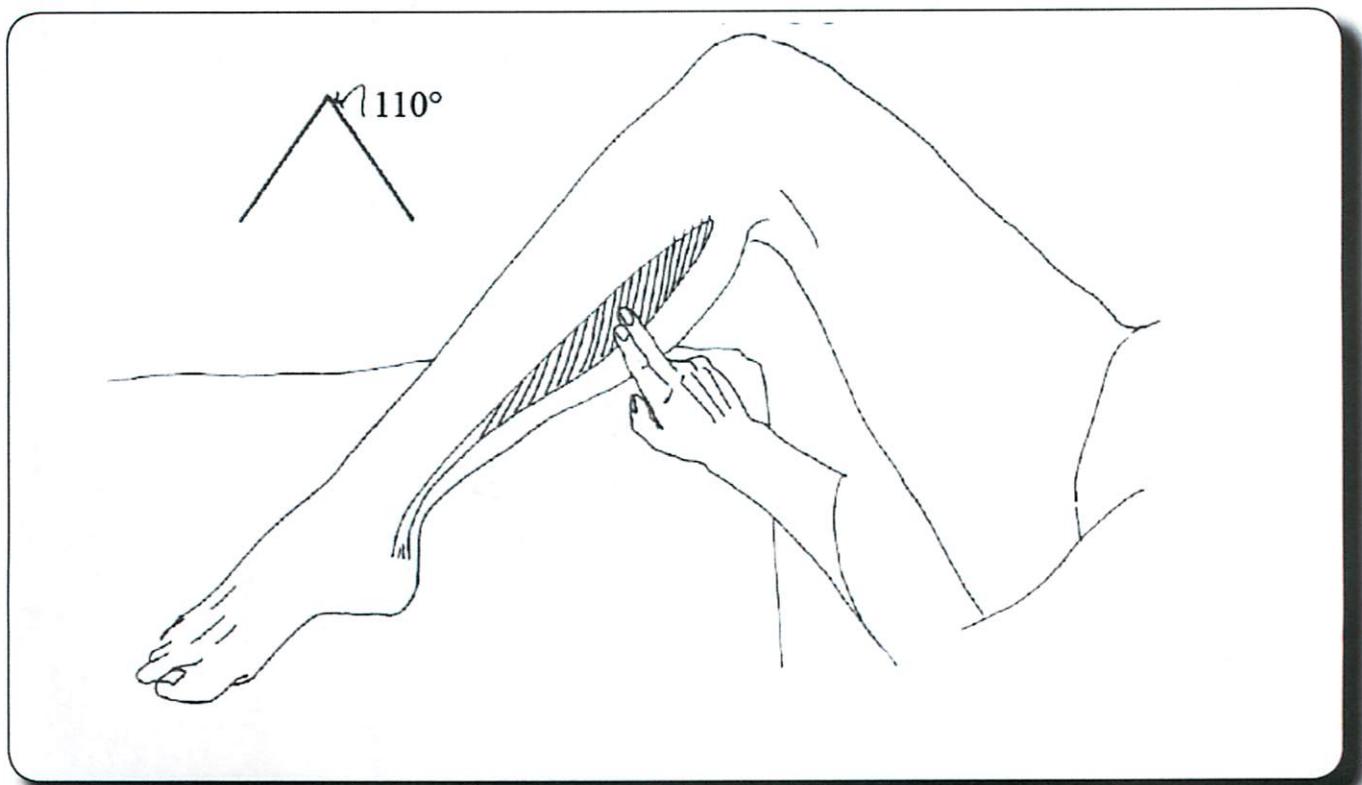
M. M. : S2

CRANIAL: Frontal

FOOT: Navicular

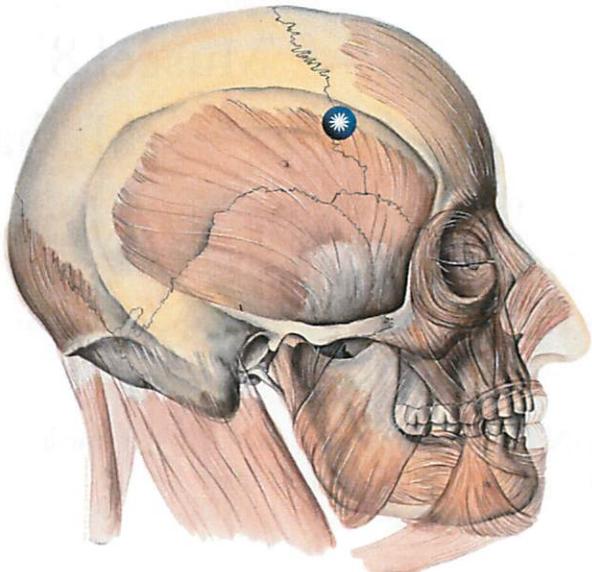
NUTRIENT SOURCE: Rutin

1. Cyruta (S)
2. Collagen (S)
3. Core Rutin (N.W.)

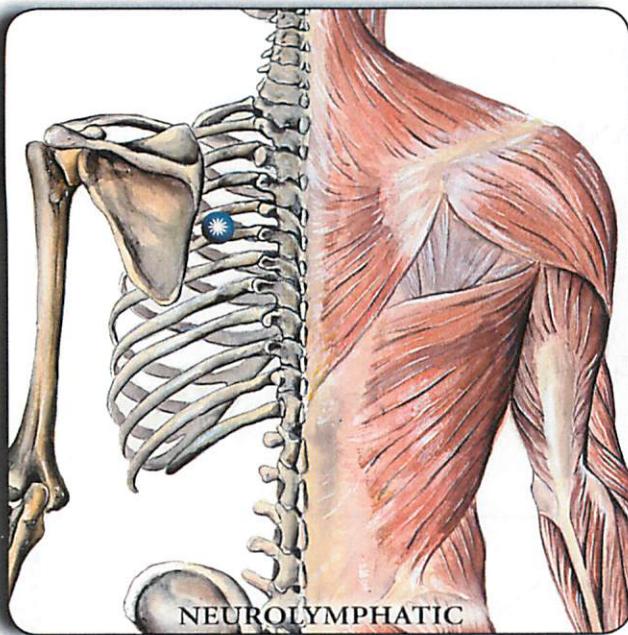




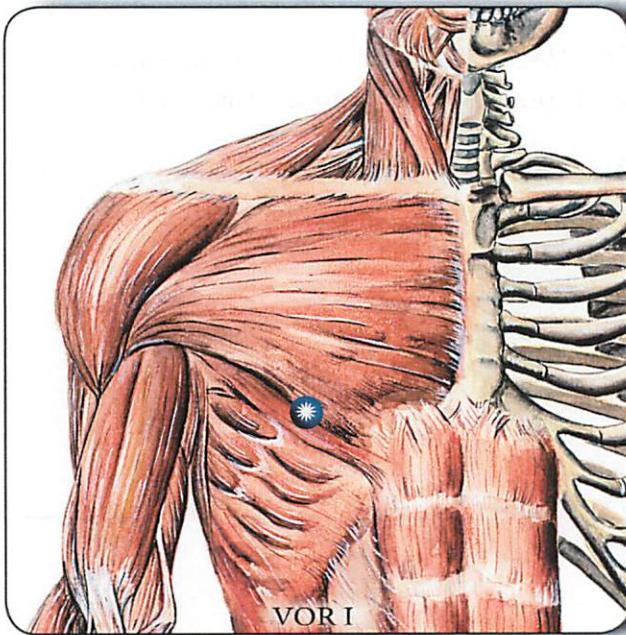
SOLEUS (LATERAL HEAD)



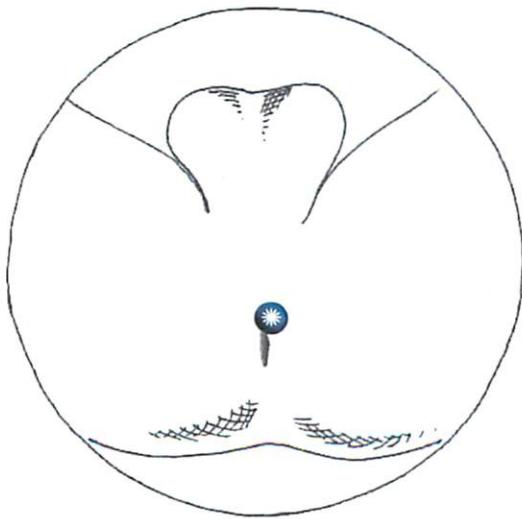
NEUROVASCULAR



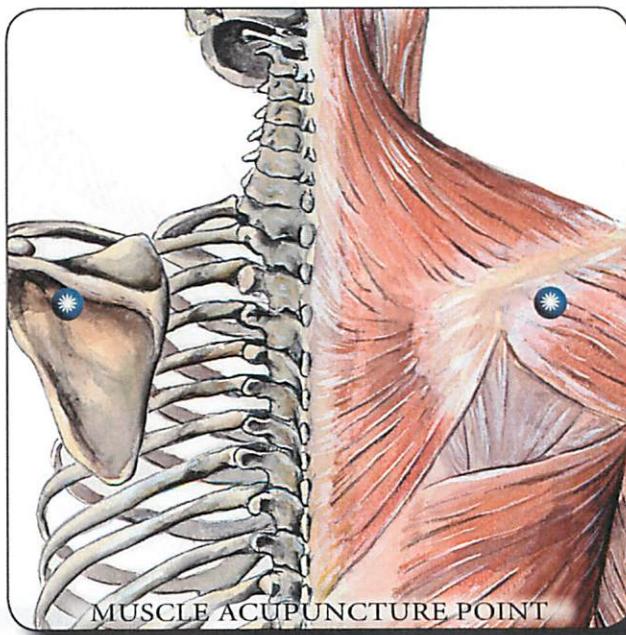
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscel 880: SOLEUS, (Lateral Head)

ORIGIN: Posterior surface of head of the upper 1/3 of fibular shaft.

INSERTION: Calcaneus via the calcaneal tendon.

ACTION: Plantar flexes foot.

TEST:

No known practical test available. Therapy localize over muscle. See illustration.

NEUROVASCULAR: (Lat) Coronal suture, at superior temporal line.

NEUROLYMPHATIC: (Post/L) Fifth I.C.S., 3" lateral to spine.

VISCERAL ORGAN:

I. *Liver*: (Ant/R) Junction of sixth rib and costal cartilage.

II. *External Rectal Sphincter*: (Inf) Rectal anus, 1 o'clock (with reference to supine position of body).

M. A. P.: Si 11 3/4

V.L.: T9 L

L. B. V.L.: T2 L

M. M.: S2

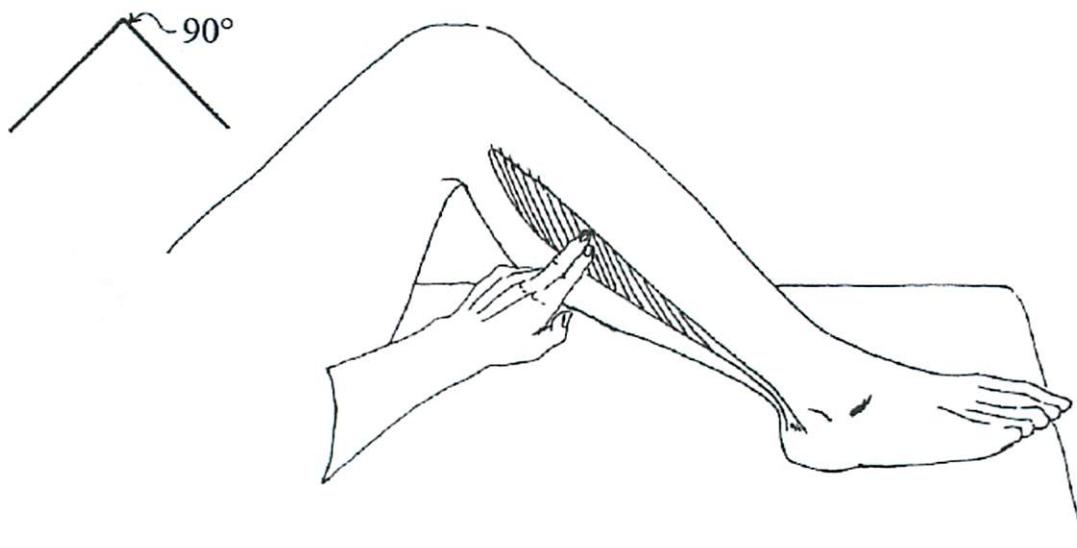
CRANIAL: Frontal

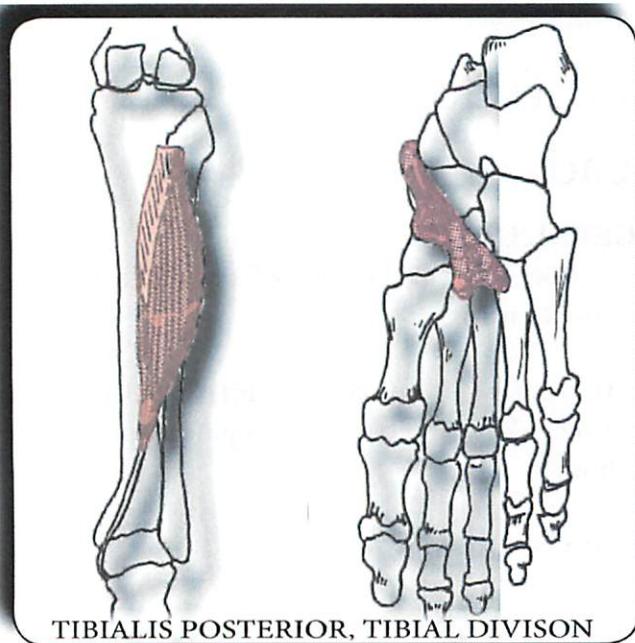
FOOT: Navicular

NUTRIENT SOURCE:

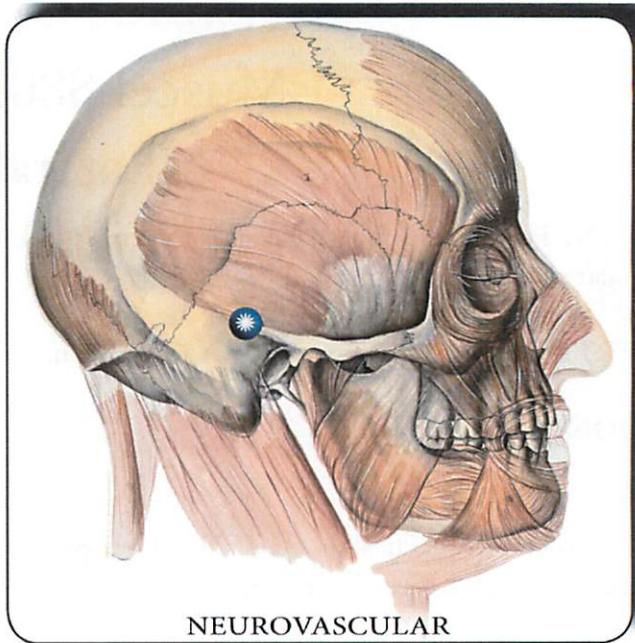
Paraminobenzoic acid

1. Nutri-Comp (N.W.)

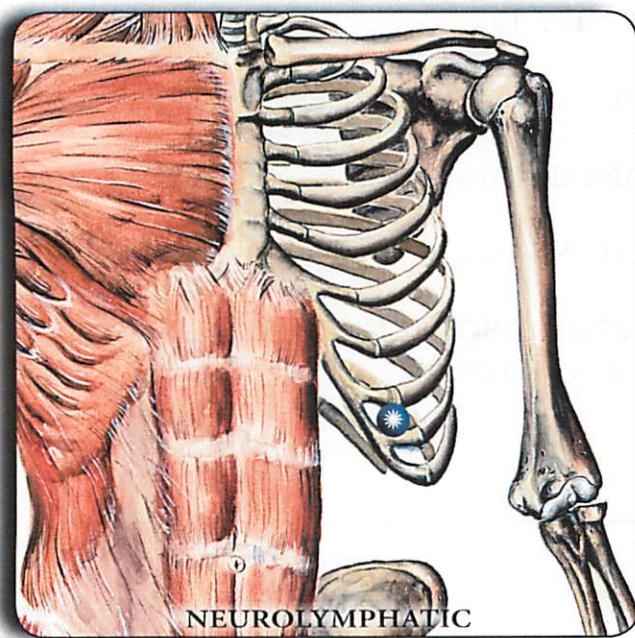




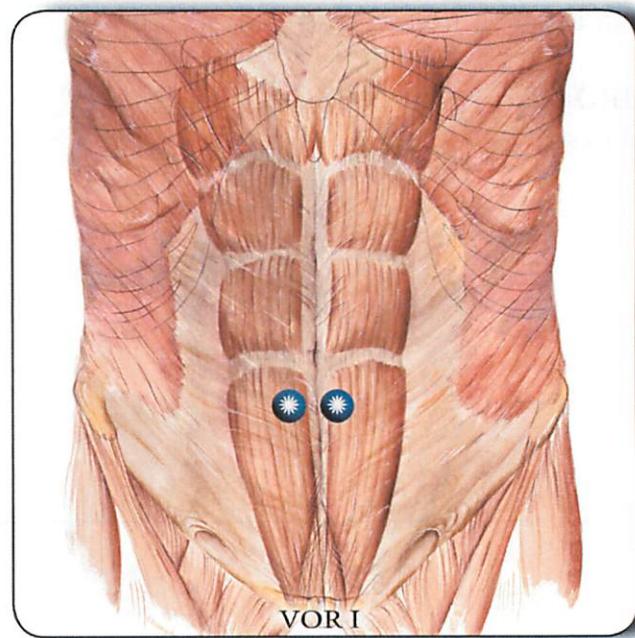
TIBIALIS POSTERIOR, TIBIAL DIVISON



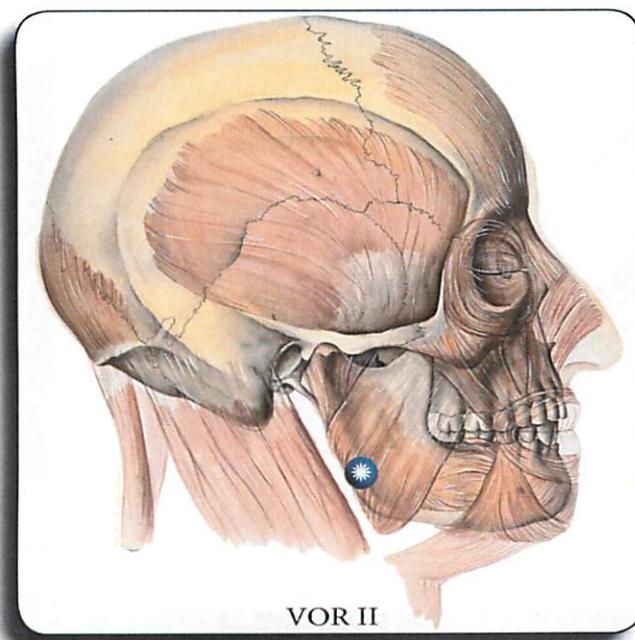
NEUROVASCULAR



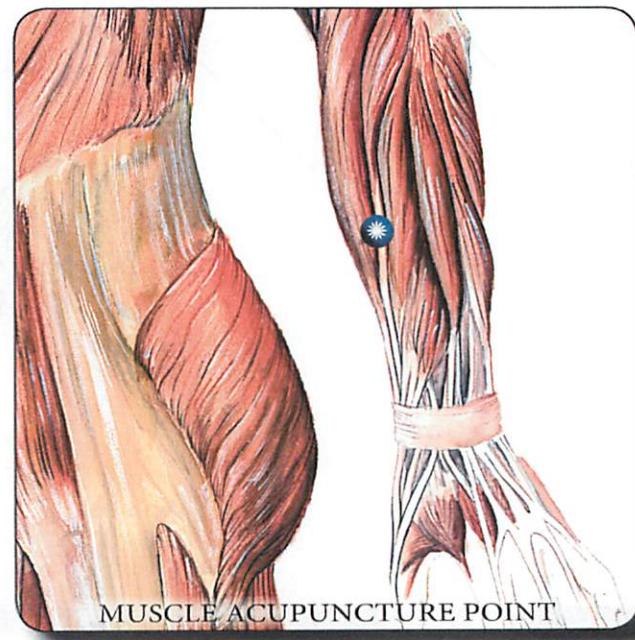
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 882: TIBIALIS POSTERIOR, (Tibial Division)

ORIGIN: Posterior proximal lateral aspect of tibia.

INSERTION: Cuboid, second and third cuneiform, base of second, third and fourth metatarsal bones.

ACTION: Plantar flexes and adducts foot.

TEST:

Patient: Position: Supine.

M.T.P.: Plantar flex and adduct foot completely.

Doctor:

Position: End of table facing patient.

Brace: Ipsilateral lateral aspect of calcaneus.

Contact: Medial aspect of longitudinal arch.

Direction: Abduct foot through coronal plane.

NEUROVASCULAR: (Lat) Temporal bone, 1" superior and 1" posterior to external auditory canal.

NEUROLYMPHATIC: (Ant/L) Eighth I.C.S., at nipple line.

VISCERAL ORGAN:

I. *Ileum, Fifth Section:* (Ant/BL) Rectus abdominis, first section, medial border.

II. *Pancreas:* (Lat/BL) S6; mandible, at insertion of masseter.

M. A. P. : Li 7 3/4

V.L. : C3 L

L. B. V.L. : L3 L

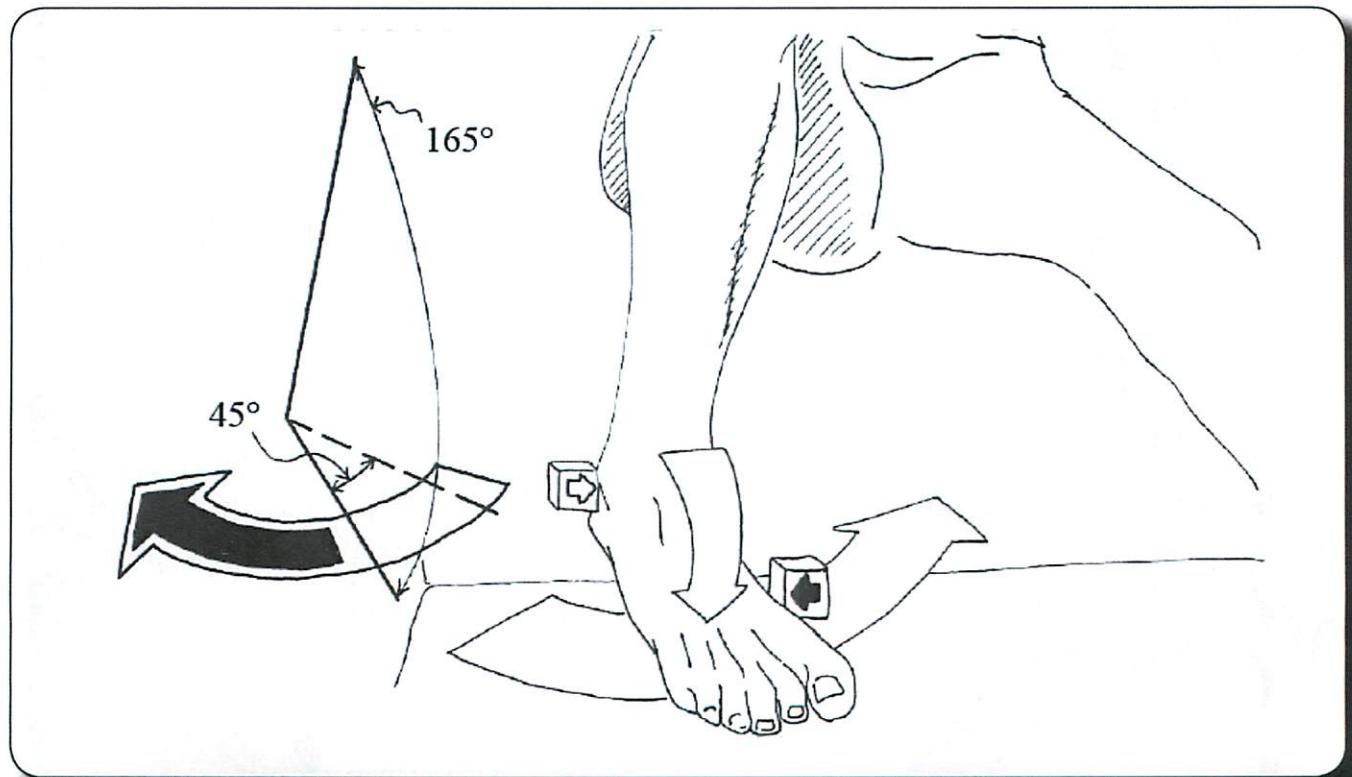
M. M. : L5

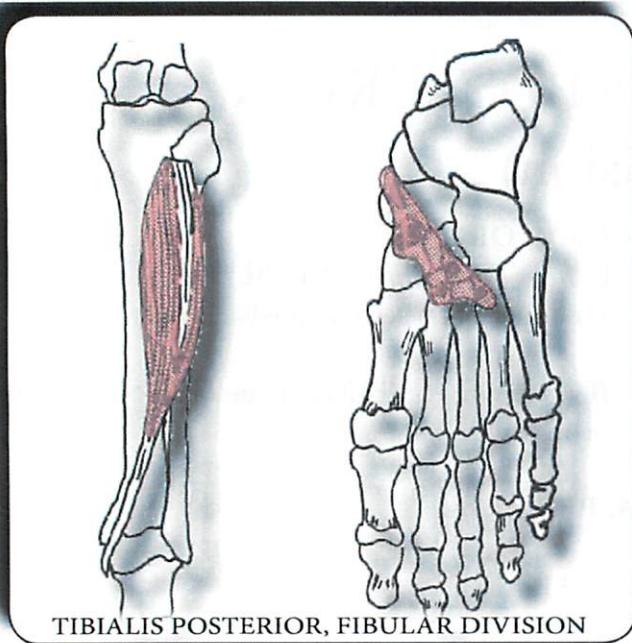
CRANIAL: Parietal

FOOT: Talus

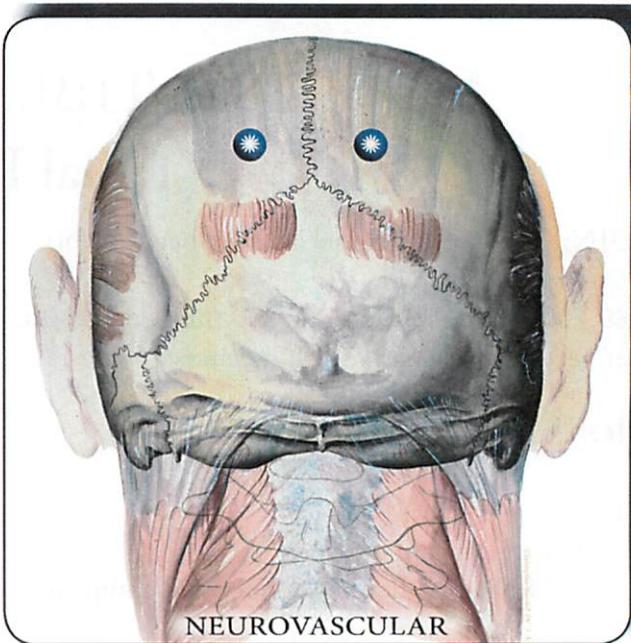
NUTRIENT SOURCE:

1. Chezyn (S)
2. Core Zinc (N.W.)

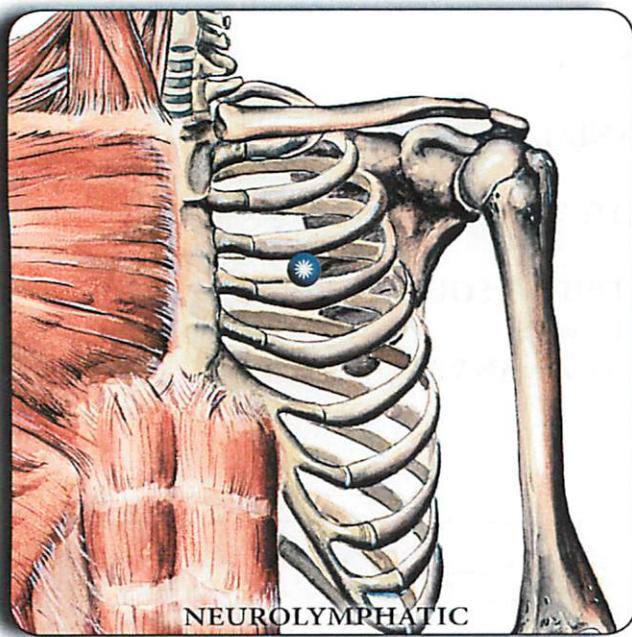




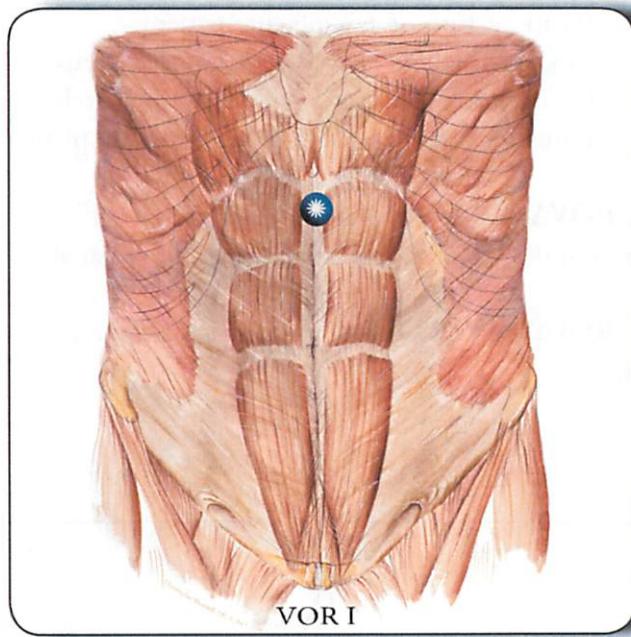
TIBIALIS POSTERIOR, FIBULAR DIVISION



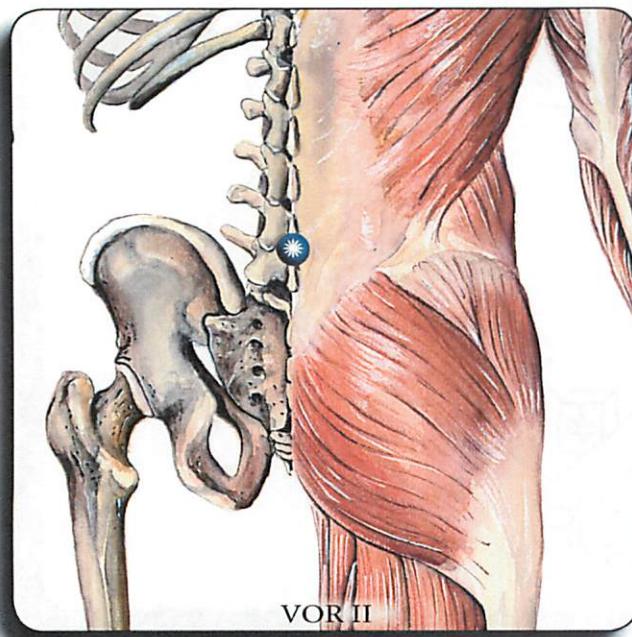
NEUROVASCULAR



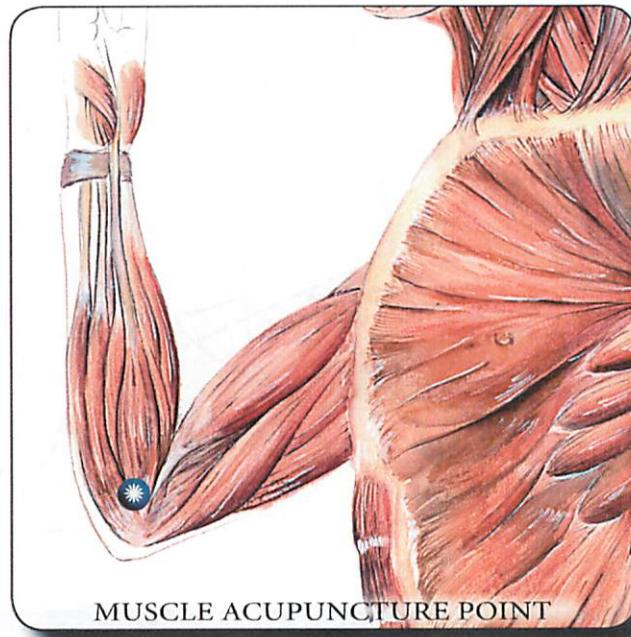
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 884: TIBIALIS POSTERIOR, (Fibular Division)

ORIGIN: Posterior proximal medial surface of fibula and interosseous membrane.

INSERTION: Tuberosity of navicular and inferior surfaces of medial cuneiform.

ACTION: Principle supinator of foot in plantar flexion.

TEST:

Patient: Position: Supine.

M.T.P.: Completely plantar flex (approximately 145 degrees) adduct (approximately 45 degrees), and then supinate foot. Keep toes in neutral position.

Doctor:

Position: End of table facing patient.

Brace: Ipsilateral lateral aspect of calcaneus.

Contact: Medial aspect of longitudinal arch.

Direction: Abduct foot through coronal plane.

NEUROVASCULAR: (Post/BL) Parietal bone, 1" lateral to sagittal suture, 2 to 2 1/2" anterior to posterior fontanelle.

NEUROLYMPHATIC: (Ant/L) Third I.C.S., 3-4" lateral to sternum, near nipple line.

VISCERAL ORGAN:

I. *Heart:* (Ant/Midline) Cv 13; between umbilicus and xiphoid.

II. *Testicle/Ovaries:* (Post/Midline) Gv 3; between L4 and L5 spinous processes.

M. A. P. : H 3

V.L. : T7 R

L. B. V.L. : T4 R

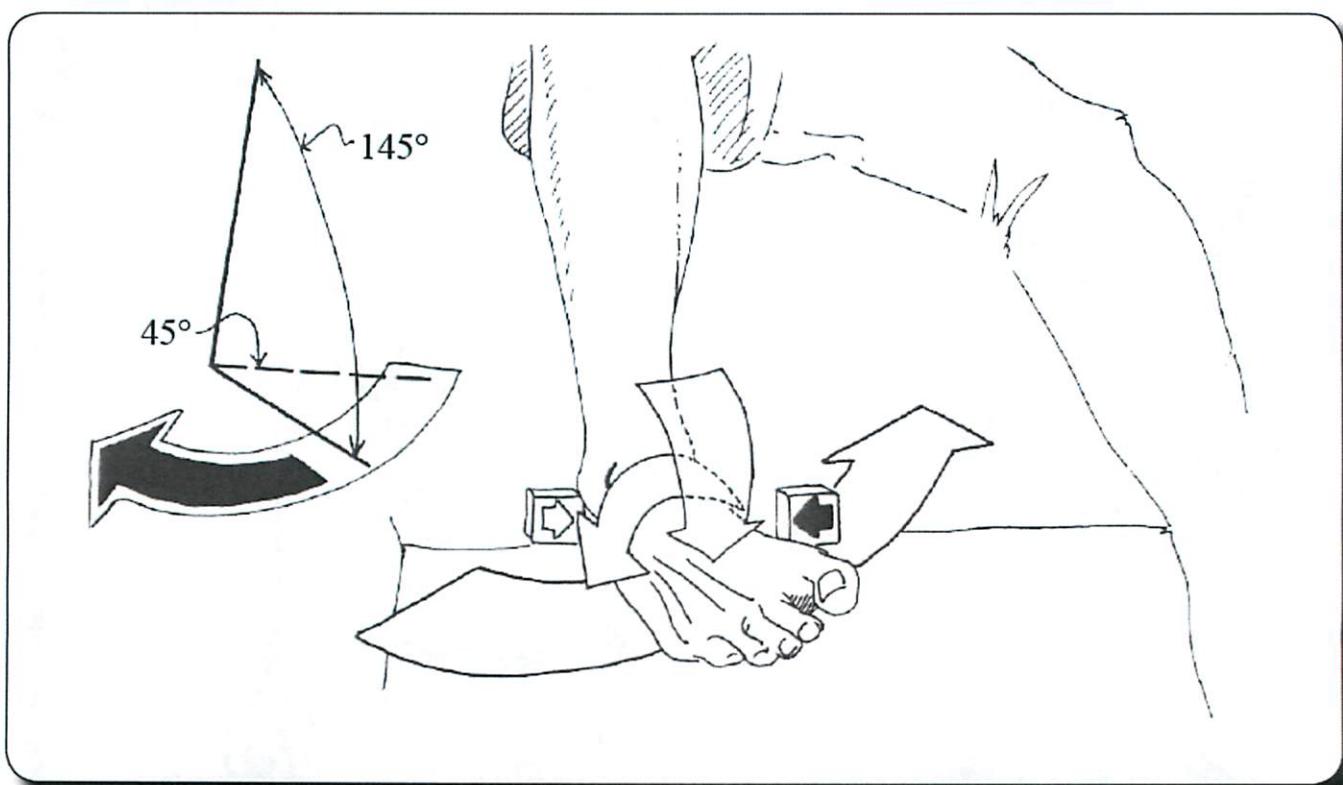
M. M. : L5

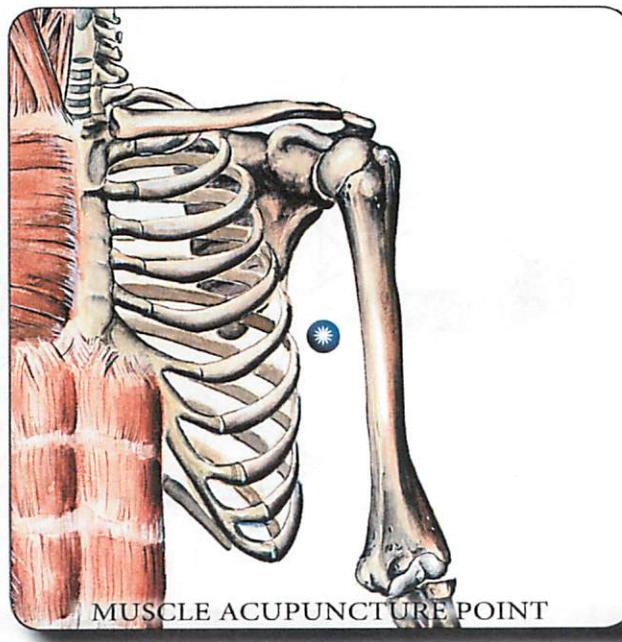
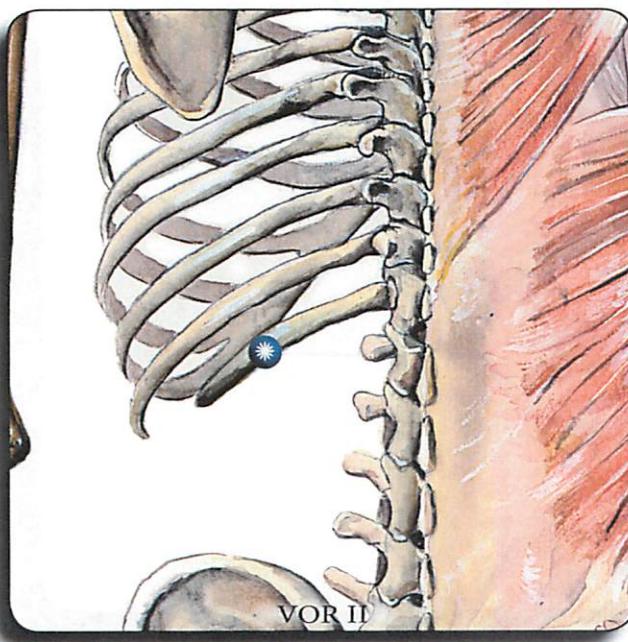
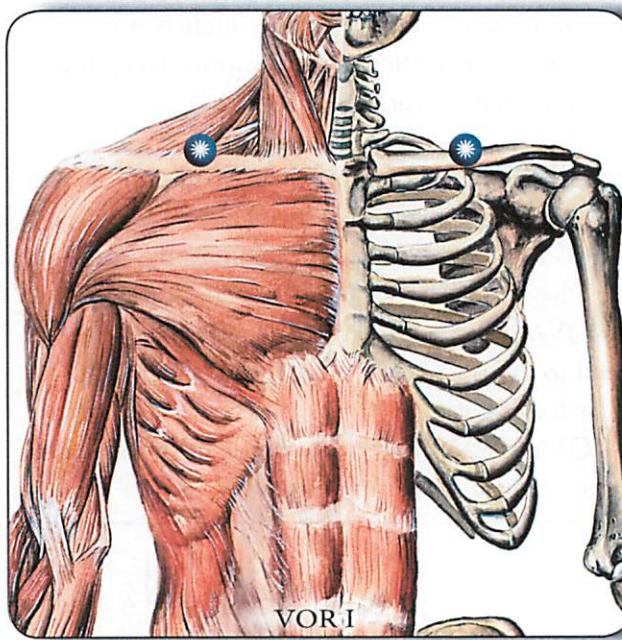
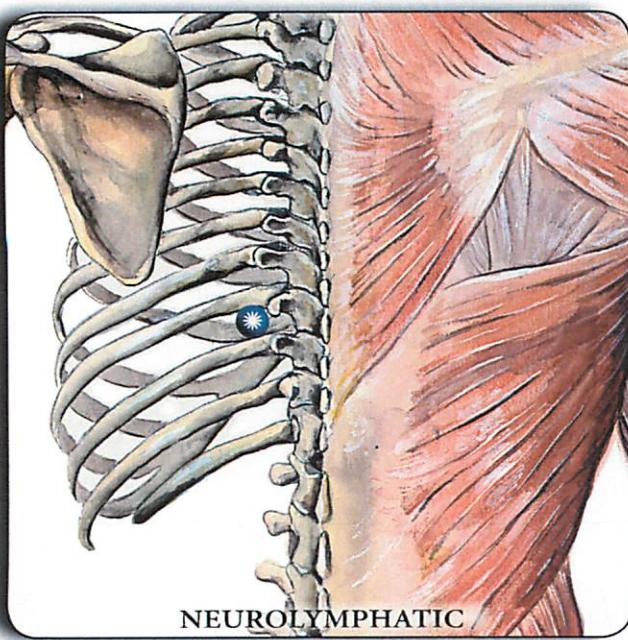
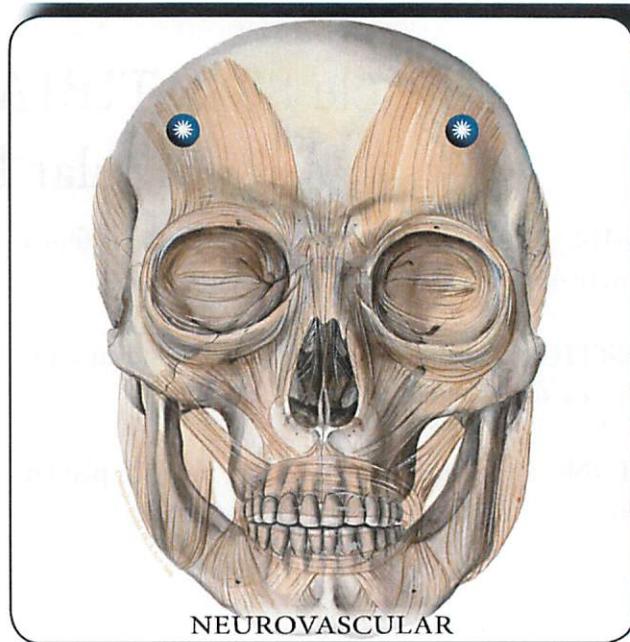
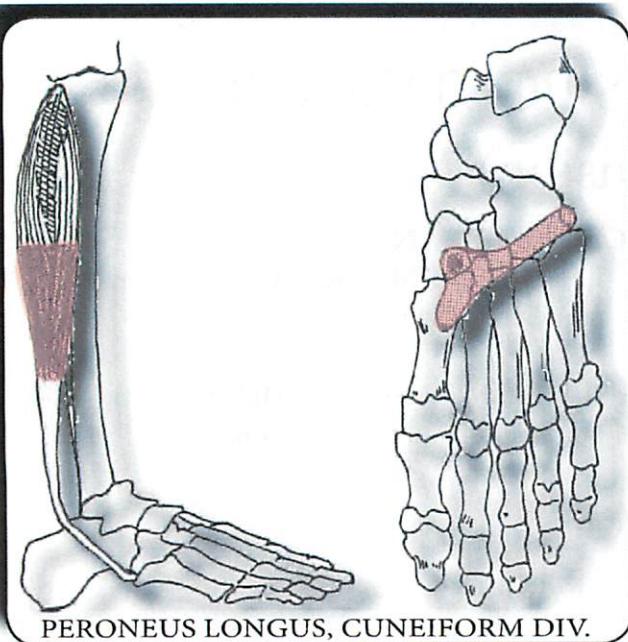
CRANIAL: Sphenoid

FOOT: Third Cuneiform

NUTRIENT SOURCE:

- 1. Core Potassium (N.W.)
- 2. Aspartic K (N.W.)
- 3. Organic Minerals (S)





Muscle 886: PERONEUS LONGUS, (Cuneiform Division)

ORIGIN: (Lower Fibers of Origin) Upper 2/3 of the lateral surface of the body of the fibula.

INSERTION: Lateral side of the first cuneiform.

ACTION: Externally rotates, abducts and plantar flexes the foot.

TEST:

Patient: Position: Supine.

M.T.P.: Completely plantar flex (approximately 165 degrees) abduct (approximately 28 degrees) and evert the foot. Keep toes in neutral position

Doctor:

Position: At end of table facing patient.

Brace: Ipsilateral medial aspect of calcaneus.
Contact: Lateral aspect of foot near cuboid.

Direction: Invert and adduct the foot.

NEUROVASCULAR: (Ant/BL) Frontal bone, 1" superior and 1" lateral to frontal prominence.

NEUROLYMPHATIC: (Post/L) Ninth I.C.S., at transverse process of vertebra.

VISCERAL ORGAN:

I. *Bladder:* (Ant/BL) S 12; mid-clavicle area.

II. *Duodenum:* (Post/L) B 45; middle of twelfth rib.

M.A.P.: H 1.5

V.L.: T11 R

L.B. V.L.: C7 R

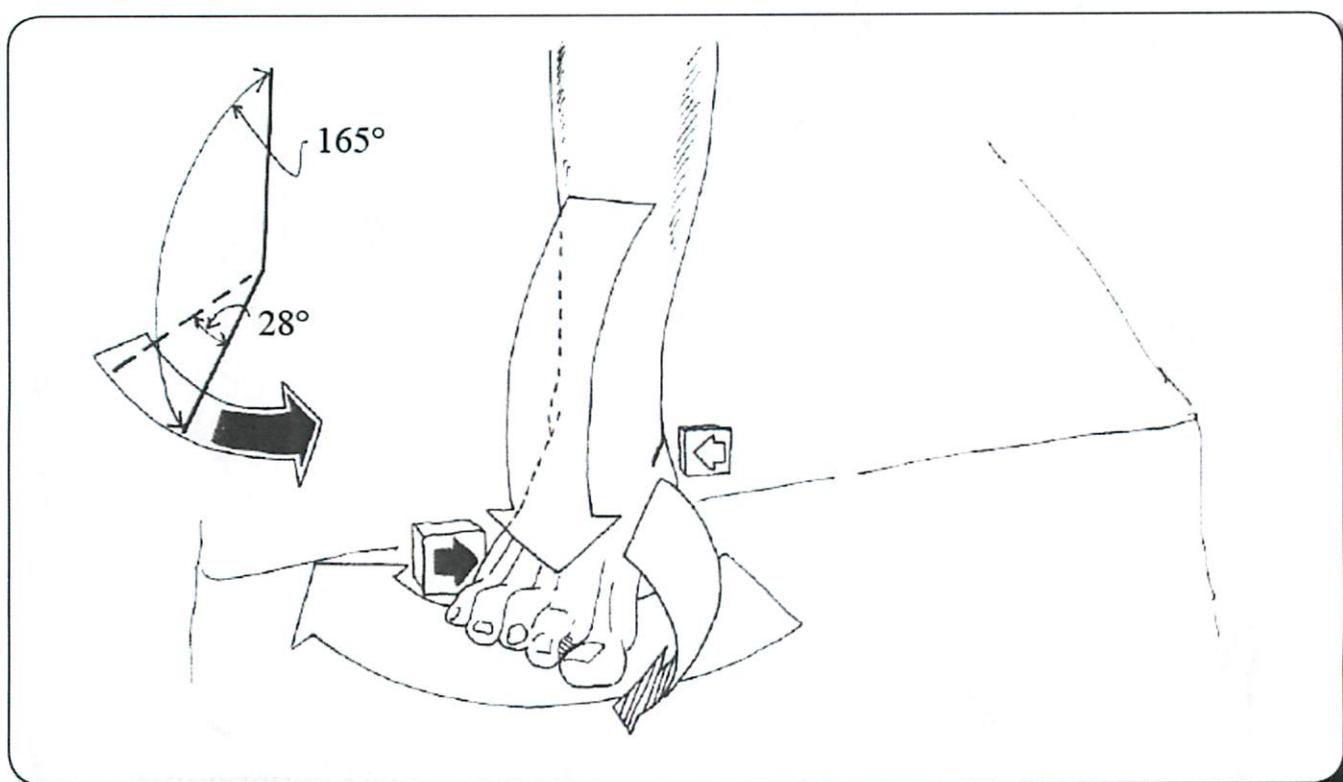
M.M.: L5

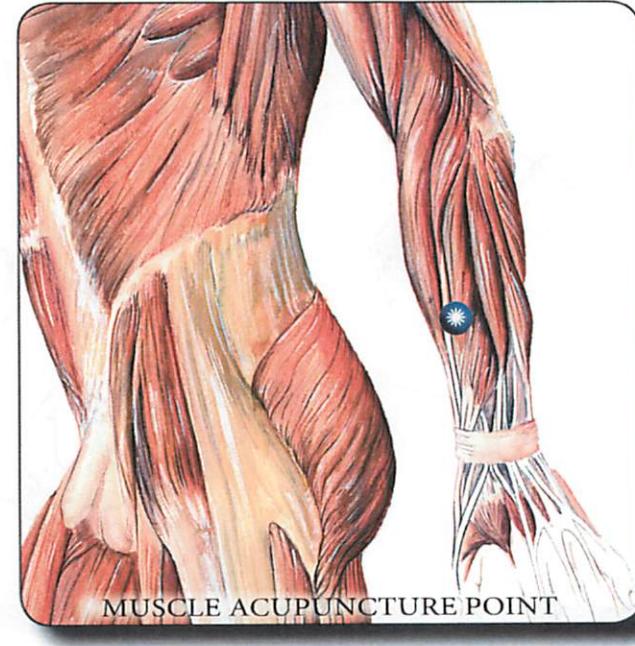
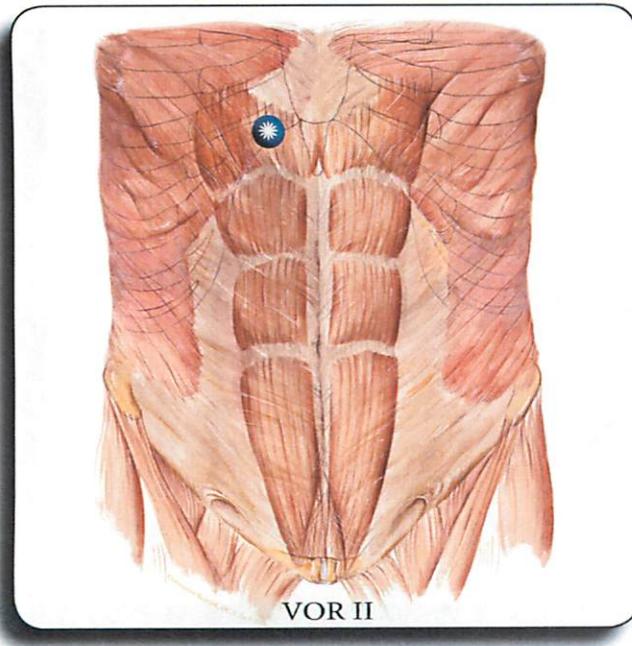
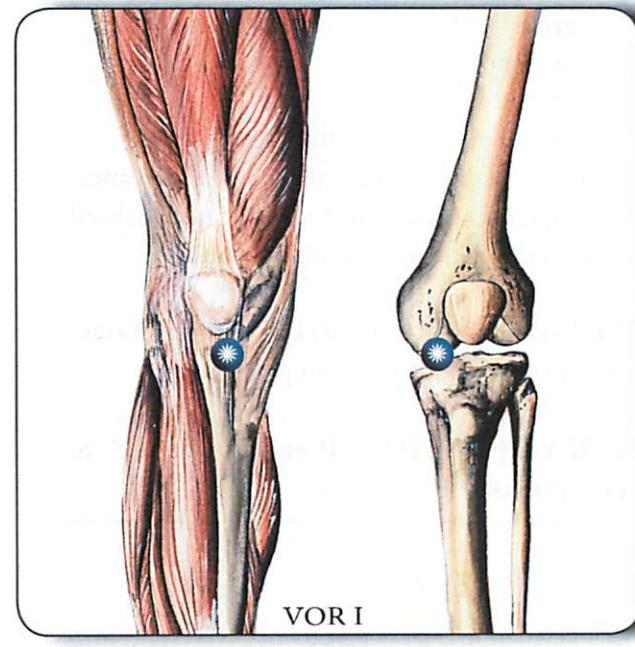
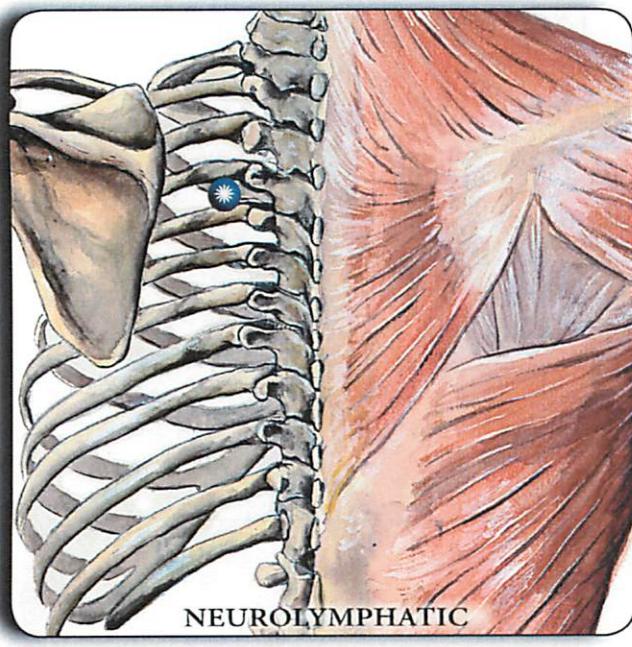
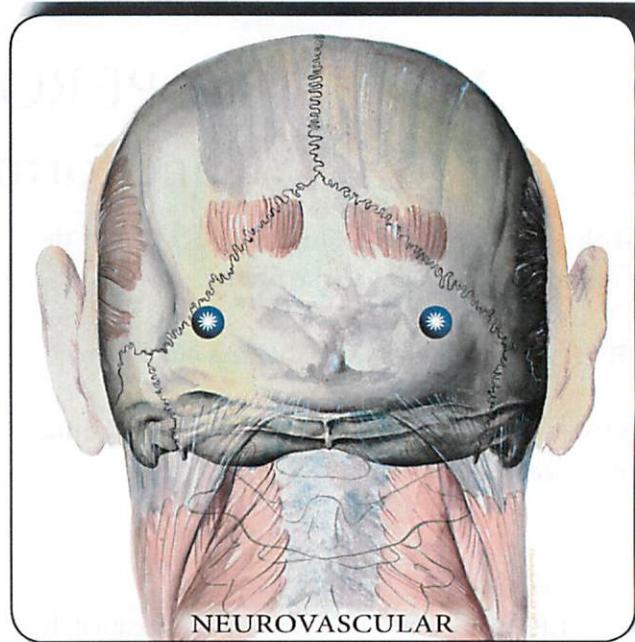
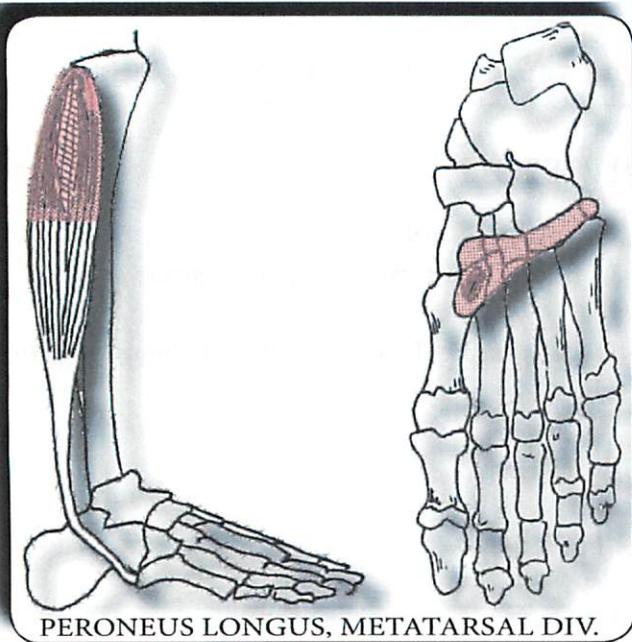
CRANIAL: Ethmoid

FOOT: First Cuneiform

NUTRIENT SOURCE: Phosphorus

1. Core Phosphorus (N.W.)
2. Phos-Tab (N.W.)
3. Phosfood (S)





Muscle 888: PERONEUS LONGUS, (Metatarsal Division)

ORIGIN: Head and upper 2/3 of the lateral surface of the fibula.

INSERTION: Lateral side of the base of the first metatarsal bone.

ACTION: Everts, abducts and plantar flexes the foot. Attachment on first metatarsal acts to maintain longitudinal arch and first metatarsal flexion.

TEST:

Patient: Position: Supine.

M.T.P: Completely plantar flex, abduct and evert foot. Keep toes in neutral position.

Doctor:

Position: At side of table facing patient's feet.

Brace: Dorsal aspect of foot.

Contact: Plantar surface of first metatarsal bone.

Direction: Dorsiflex first metatarsal.

NOTE: Action of this muscle is most concentrated during the last 10 degrees of metatarsal plantar flexion.

NEUROVASCULAR: (Post/BL) Occiput, just inferior to the middle of the lambdoidal suture.

NEUROLYMPHATIC: (Post/L) Fourth I.C.S., 2" lateral to spine.

VISCERAL ORGAN:

I. Parathyroid: (Ant/BL) Patella tendon, just superior to tibial tuberosity, medial side.

II. Gall Bladder: (Ant/R) Rectus abdominis, fourth section, 1 1/2" medial to lateral border.

M.A.P.: Li 6 1/2

V.L. : T8 L

L. B. V.L. : T3 L

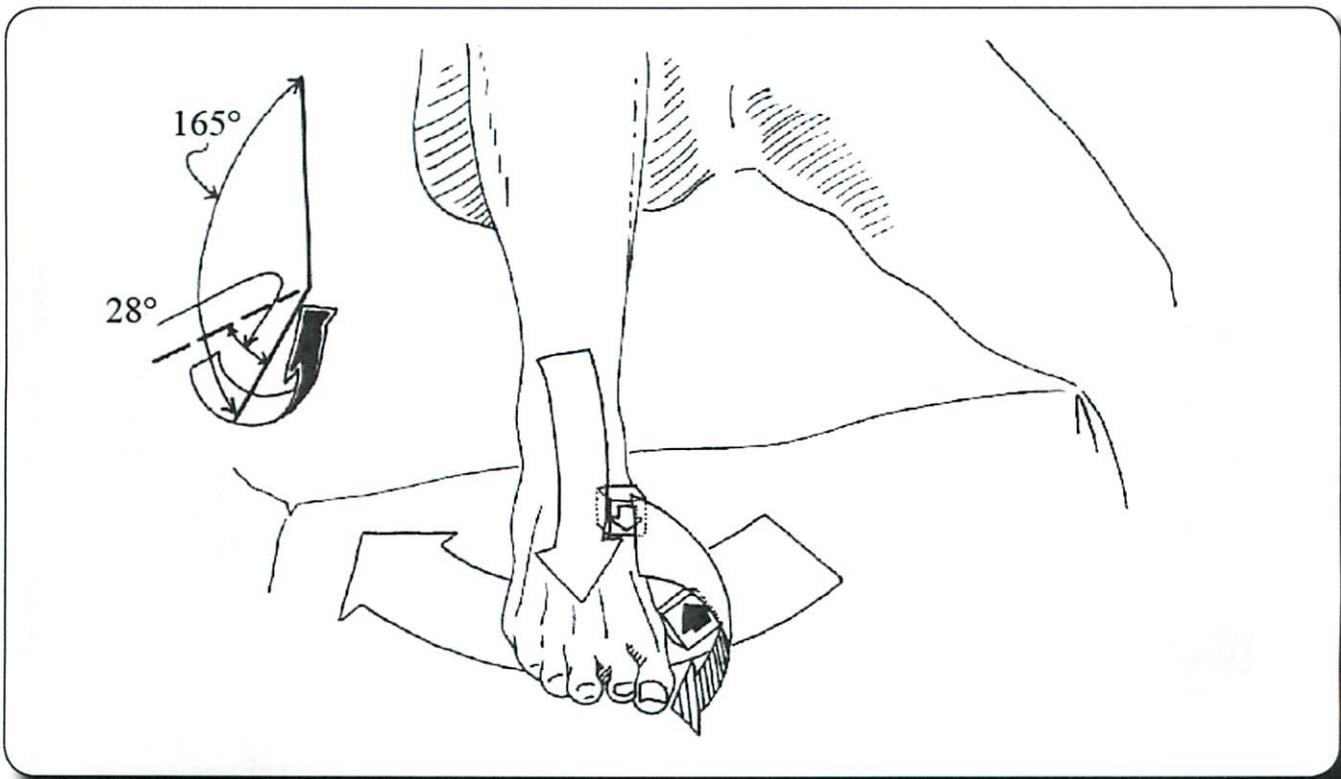
M.N.: S1

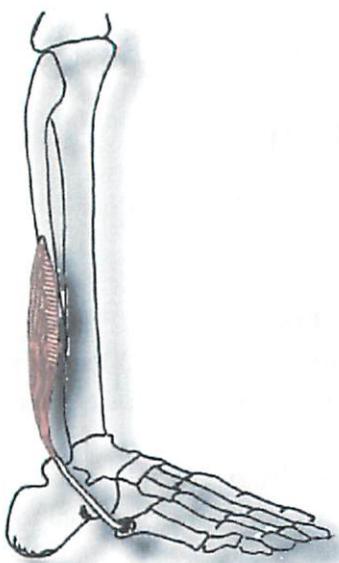
CRANIAL: Parietal

FOOT: Talus

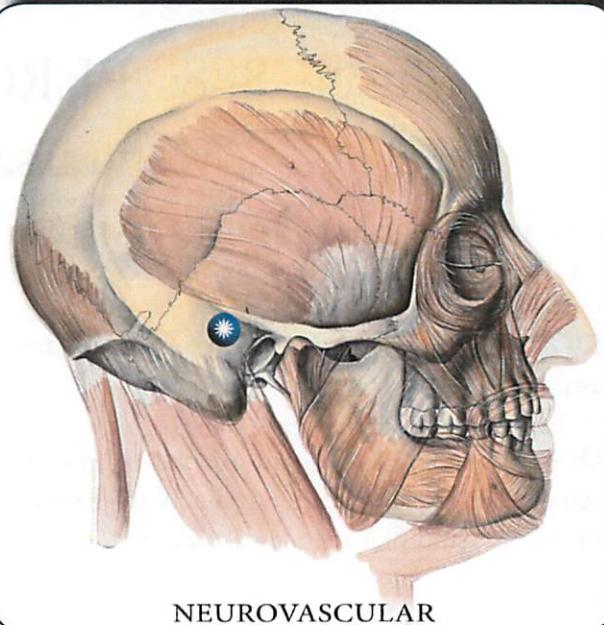
NUTRIENT SOURCE: Manganese

1. Core Manganese (N.W.)
2. Vita Manganese (N.W.)
3. Ligaplex II (S)

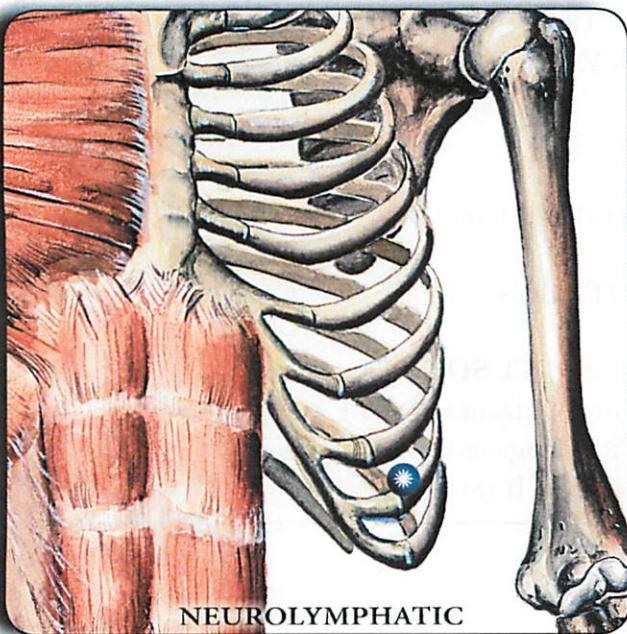




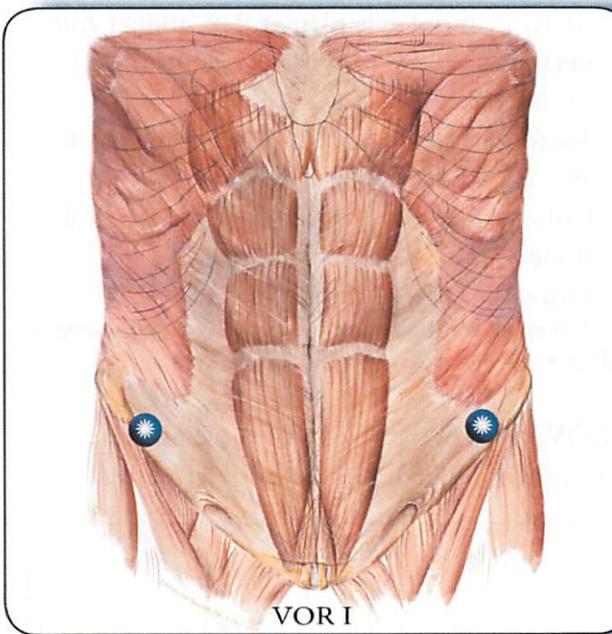
PERONEUS BREVIS, FIBULAR DIVISION



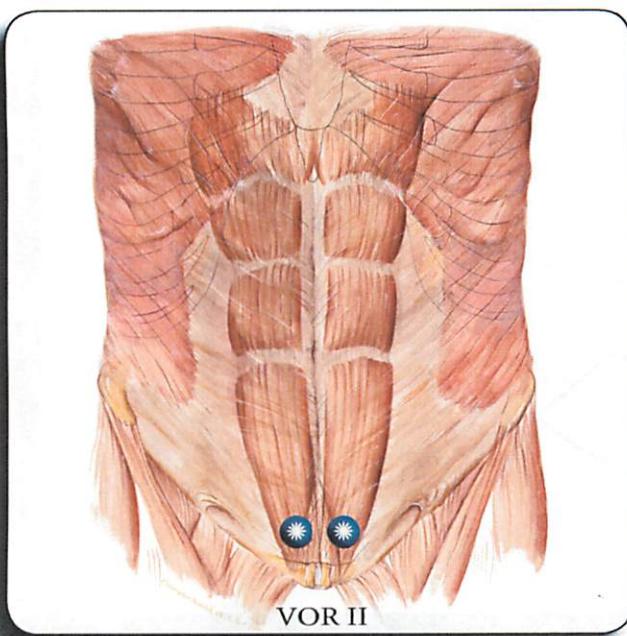
NEUROVASCULAR



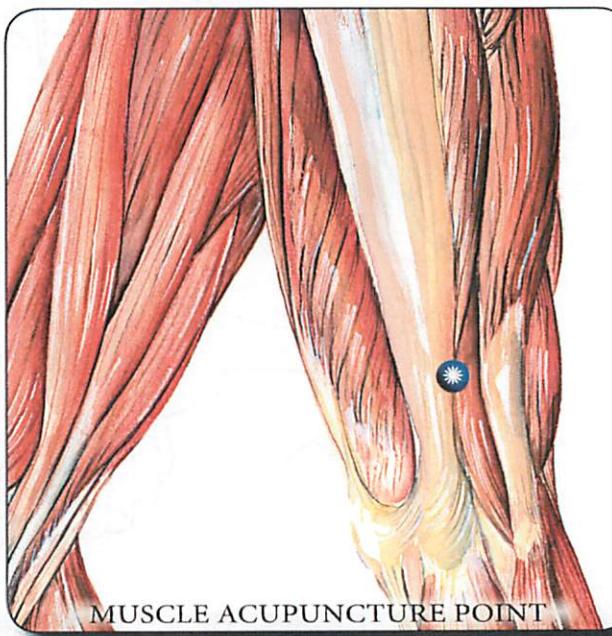
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 890: PERONEUS BREVIS, (Fibular Division)

ORIGIN: Lower lateral 2/3 of fibula.

INSERTION: Tuberosity at the base of the fifth metatarsal bone, lateral aspect.

ACTION: Abducts, everts and plantar flexes the foot.

TEST:

Patient: Position: Supine.

M.T.P.: Plantar flex 115 degrees and abduct foot 15 degrees. Keep toes in neutral position.

Doctor:

Position: At end of table facing patient.

Brace: Ipsilateral medial aspect of calcaneus.

Contact: Lateral aspect of foot.

Direction: Adduct the foot.

NEUROVASCULAR: (Lat) Temporal bone, 1" behind the ear.

NEUROLYMPHATIC: (Ant/L) Eighth I.C.S., humeral area, lateral to mid-clavicular line.

VISCERAL ORGAN:

I. *Lungs:* (Ant/BL) Lv 12.5; inguinal ligament, medial to sartorius origin.

II. *Urethra, Membranous Portions:* (Ant/BL) K 12; Rectus abdominis, first section, 1" superior and 1" lateral to pubes.

M. A. P. : G 32 1/3

V.L. : T11 L

L. B. V.L. : C7 L

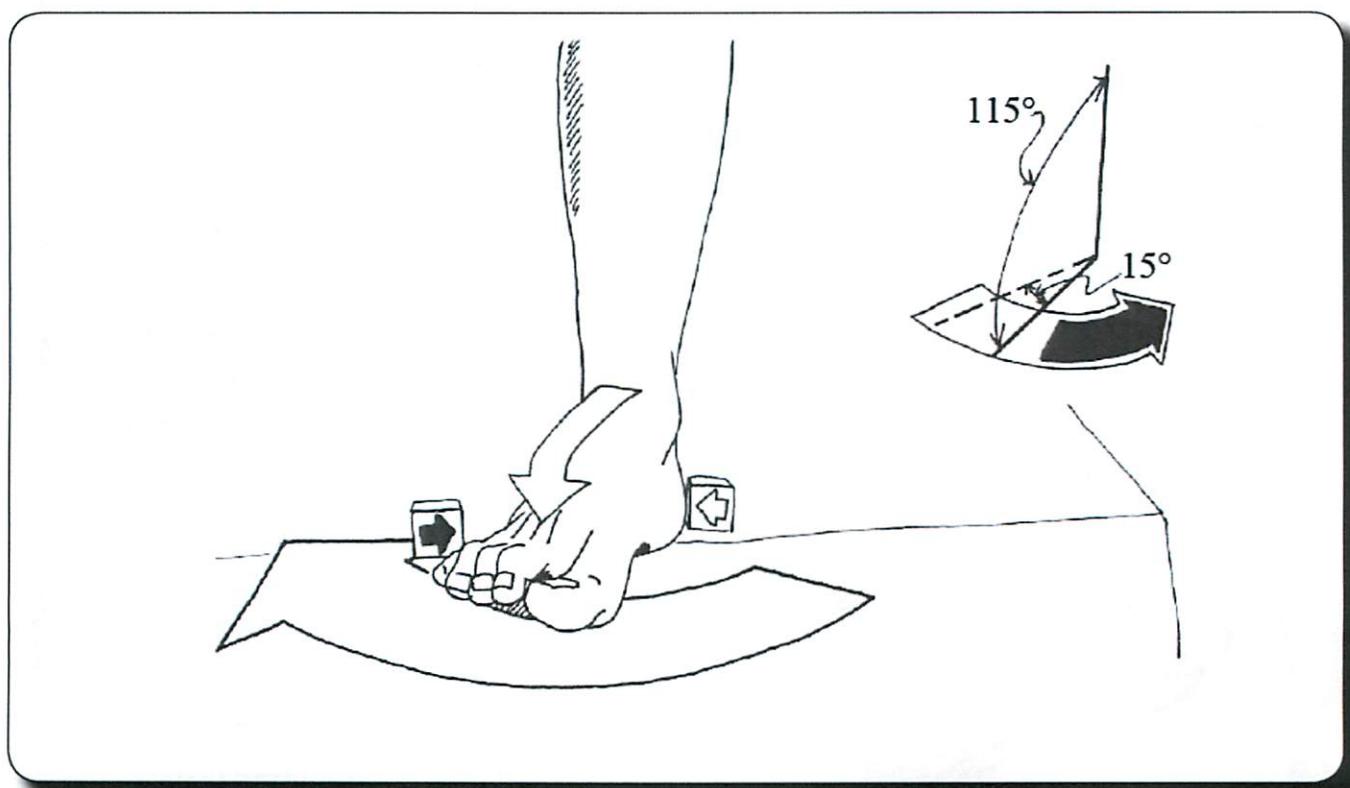
M. M. : L5

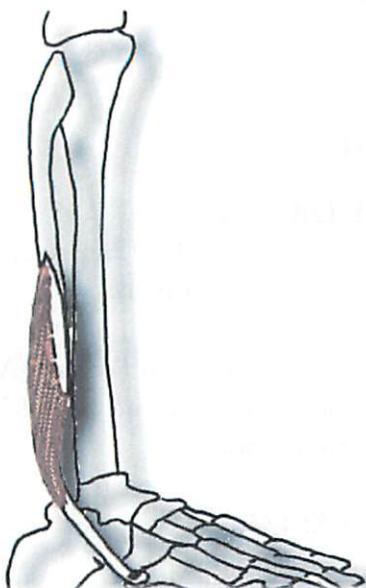
CRANIAL: Parietal

FOOT: Talus

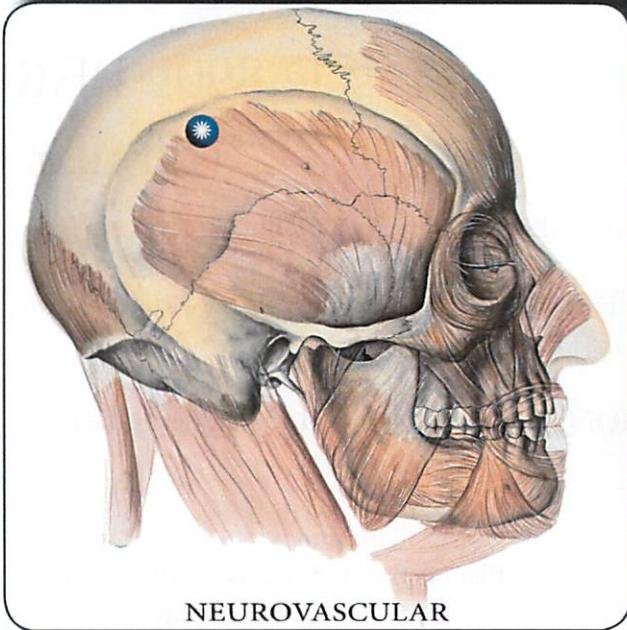
NUTRIENT SOURCE: Iron

1. Ferrofood (S)
2. Core Iron (N.W.)
3. Fe Chelate (N.W.)

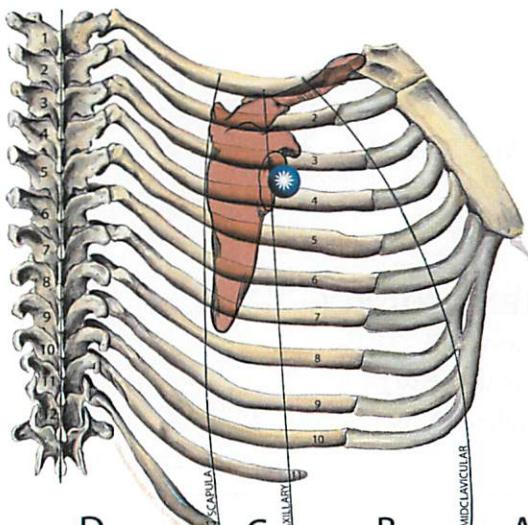




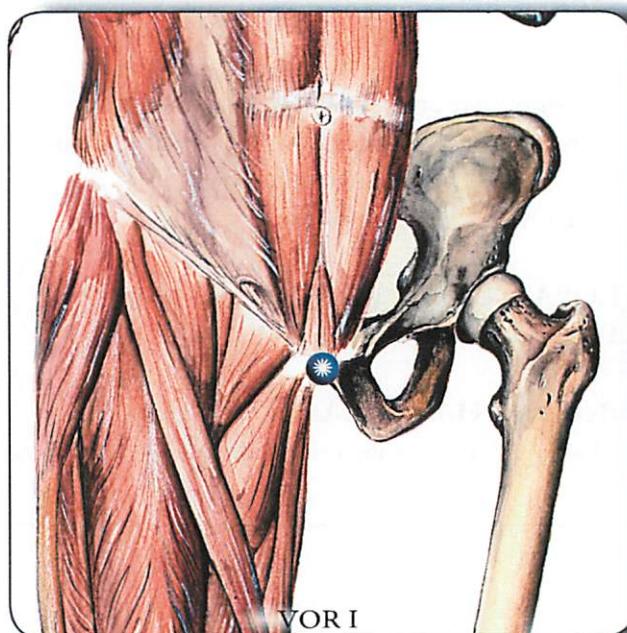
PERONUS BREVIS, SEPTAL DIVISION



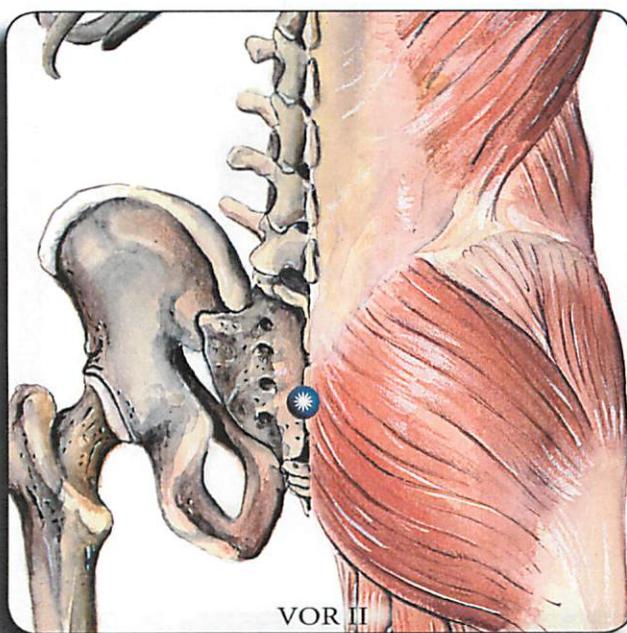
NEUROVASCULAR



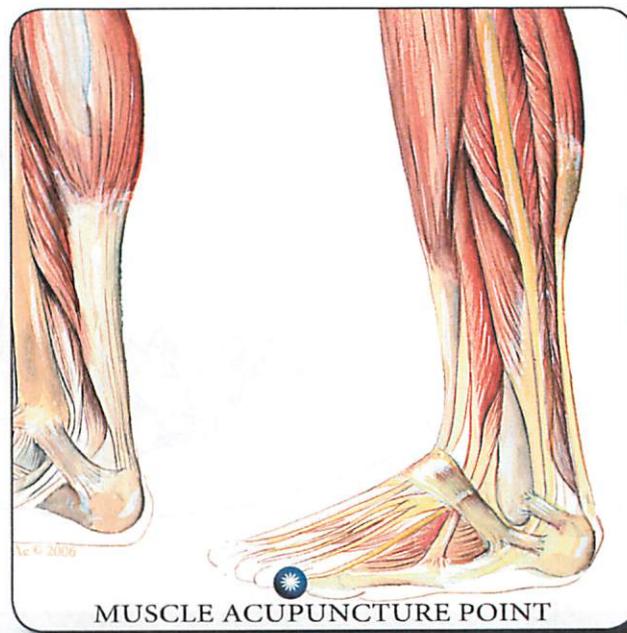
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 892: PERONEUS BREVIS, (Septal Division)

ORIGIN: Intramuscular septa.

INSERTION: Tuberosity at the base of the fifth metatarsal bone.

ACTION: Abducts, everts and plantar flexes the foot.

TEST:

Patient: Position: Supine.

M.T.P: Foot abducted (approximately 15 degrees) and plantar flexed (approximately 115 degrees). Toes in neutral position.

Doctor:

Position: At end of table facing patient.

Brace: Ipsilateral medial aspect of calcaneus.

Contact: Dorsal and lateral aspect of foot.

Direction: Invert and adduct foot.

NEUROVASCULAR: (Lat) Parietal bone, superior temporal line; 4" superior and 1" posterior to external auditory canal.

NEUROLYMPHATIC: (Ant/R) Third I.C.S., parahumeral, 6-8" lateral to sternum.

VISCERAL ORGAN:

I. *Bladder:* (Ant/Midline) Cv 1.5; middle of pubes.

II. *Nose:* (Post/Midline) Gv 2.1; apex of sacrum.

M. A. P.: B 67

V.L.: T5 R

L. B. V.L.: T6 R

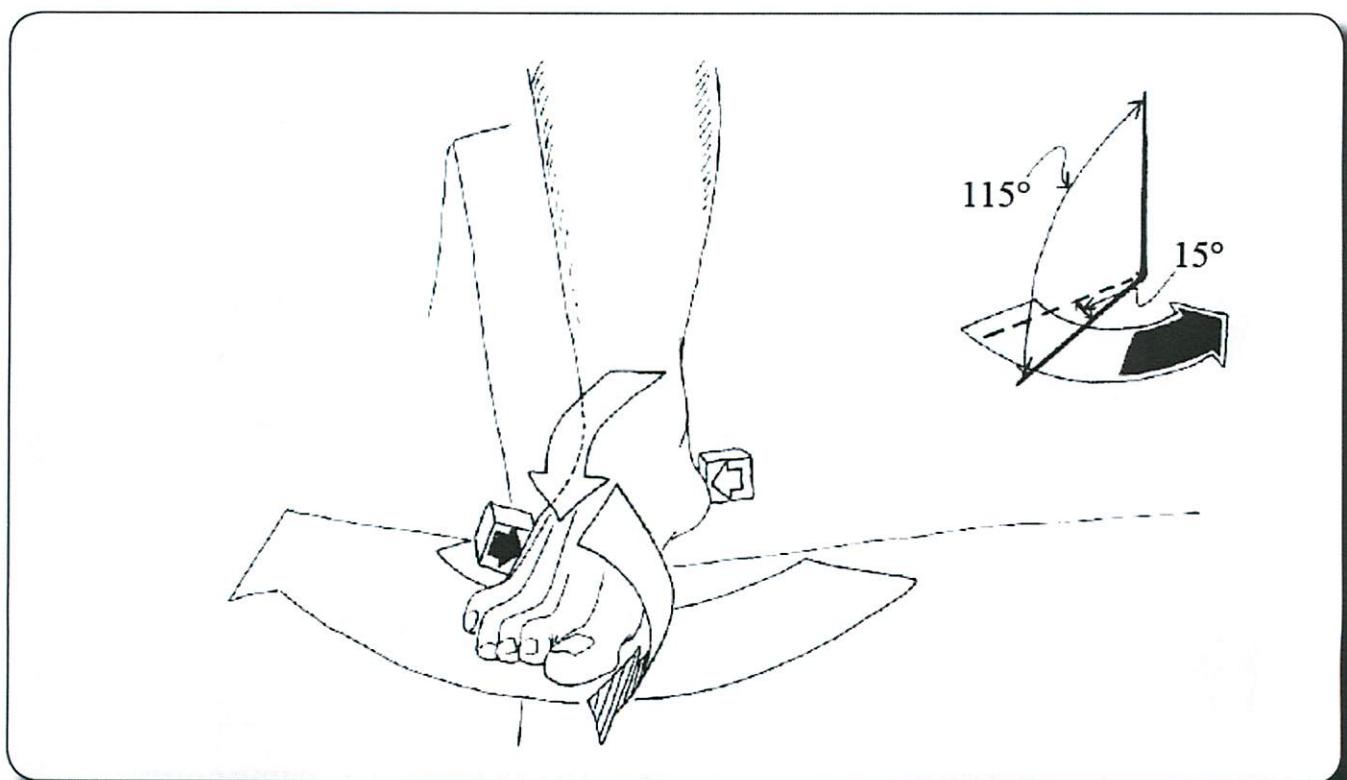
M. M.: S1

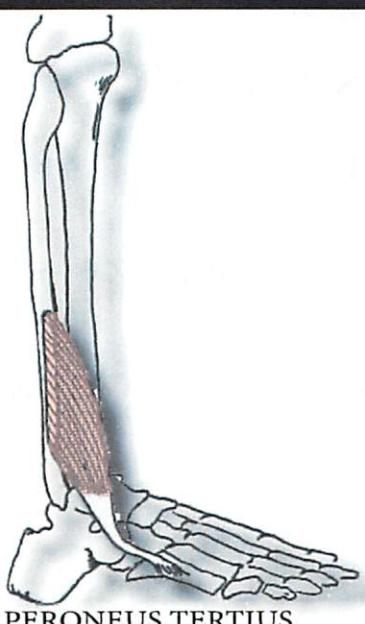
CRANIAL: Temporal

FOOT: Cuboid

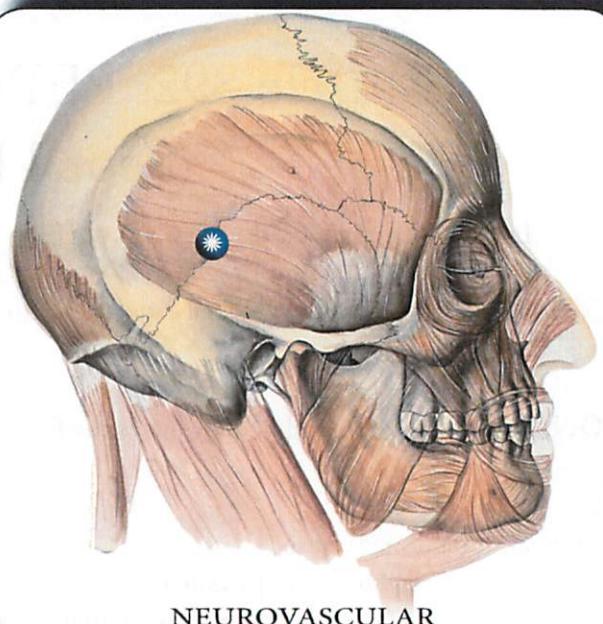
NUTRIENT SOURCE:

1. Allorganic Trace Minerals (S)
2. Core Copper (N.W.)

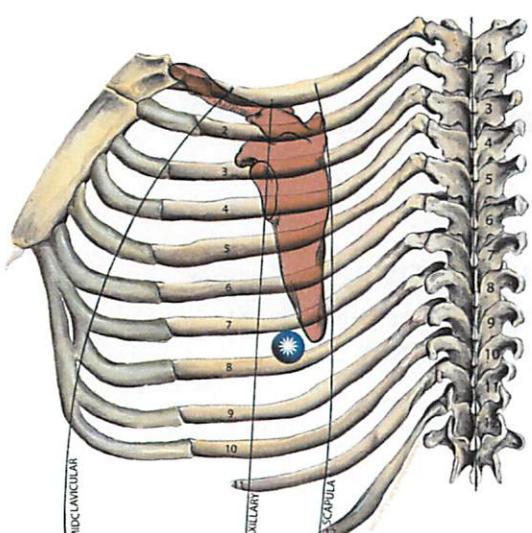




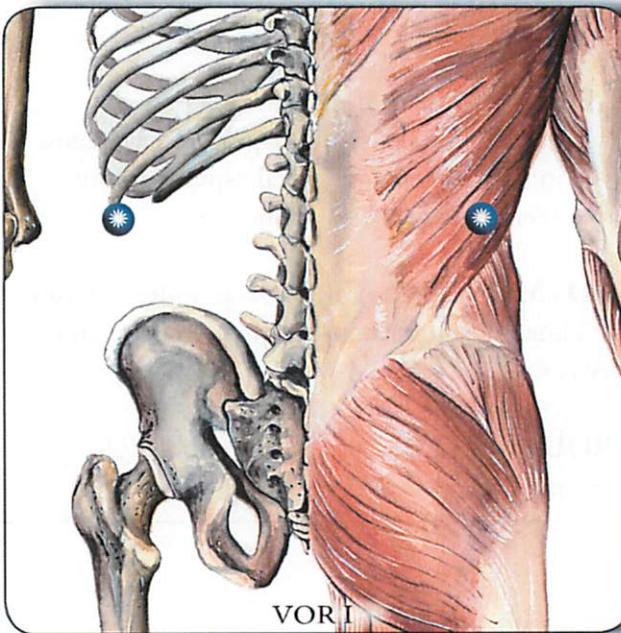
PERONEUS TERTIUS



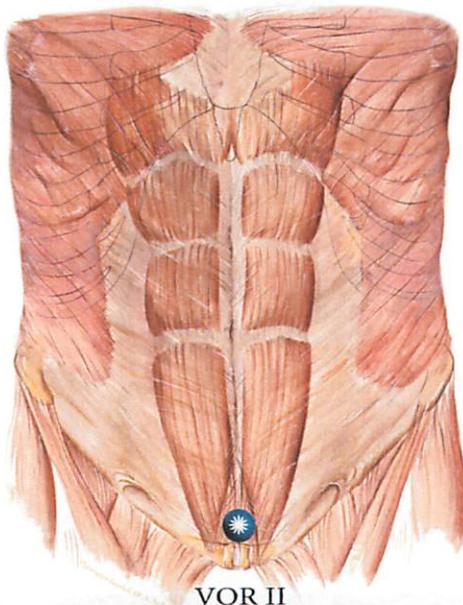
NEUROVASCULAR



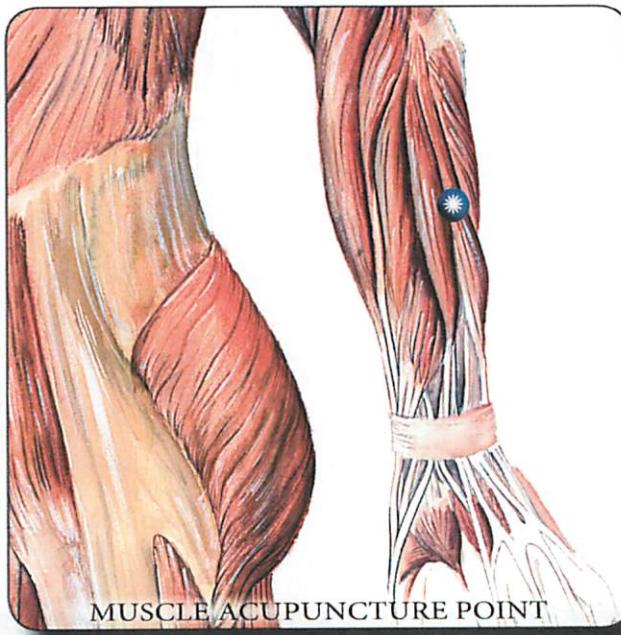
A B C D
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 894: PERONEUS TERTIUS

ORIGIN: Lower third of anterior surface of fibula - interosseous membrane.

INSERTION: Dorsal surface at the base of the fifth metatarsal.

ACTION: Dorsiflexes and everts the foot upon the leg.

TEST:

Patient: Position: Supine.

M.T.P.: Foot at approximately 90 degrees dorsiflexion and 10 degrees abduction with complete eversion.

Doctor:

Position: End of table facing patient.

Brace: Medial and posterior aspect of calcaneus.

Contact: Dorsal surface of fifth metatarsal.

Direction: Plantar flex and invert foot.

NEUROVASCULAR: (Lat) Squamosal suture, 2" superior and 1" posterior to external auditory canal; just above the level of the top of ear.

NEUROLYMPHATIC: (Post/L) Seventh I.C.S. parascapular, 6" from the spine.

VISCERAL ORGAN:

I. *Lung:* (Ant/BL) Lv 13; tip of eleventh rib.

II. *Bladder:* (Ant/Midline) Linea alba; 1" above pubes.

M. A. P. : T 9

V.L. : C4 L

L. B. V.L. : L2 L

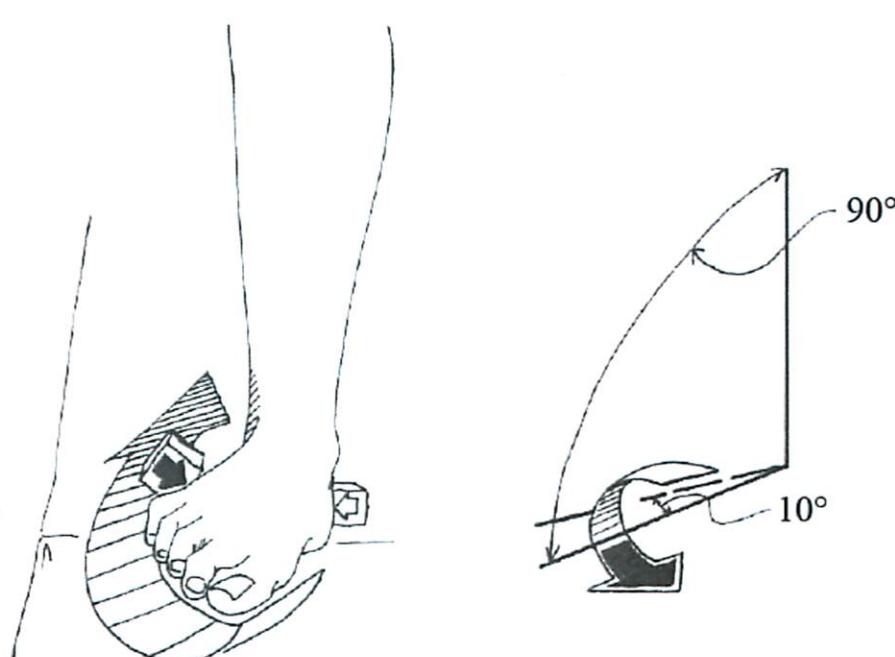
M. M. : L5

CRANIAL: Temporal

FOOT: Cuboid

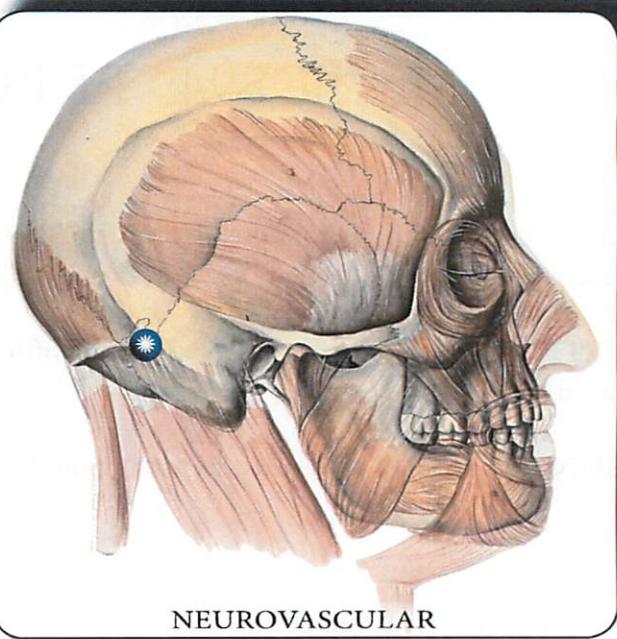
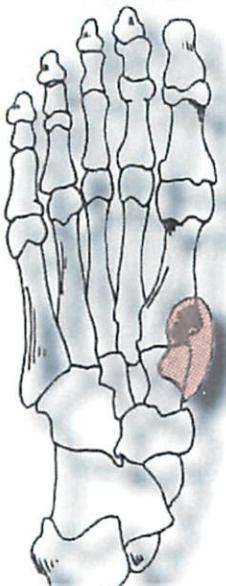
NUTRIENT SOURCE: Manganese

1. Manganese B12 (S)
2. Core Manganese (N.W.)

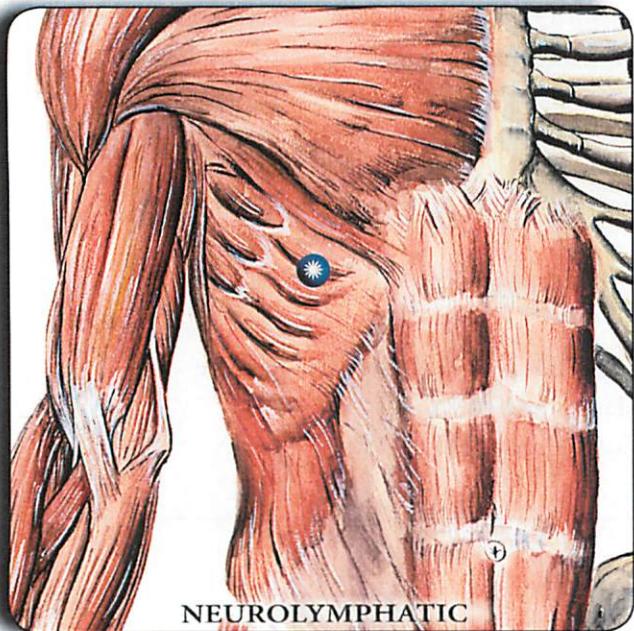




TIBIALIS ANTERIOR, SUPINATOR DIV.



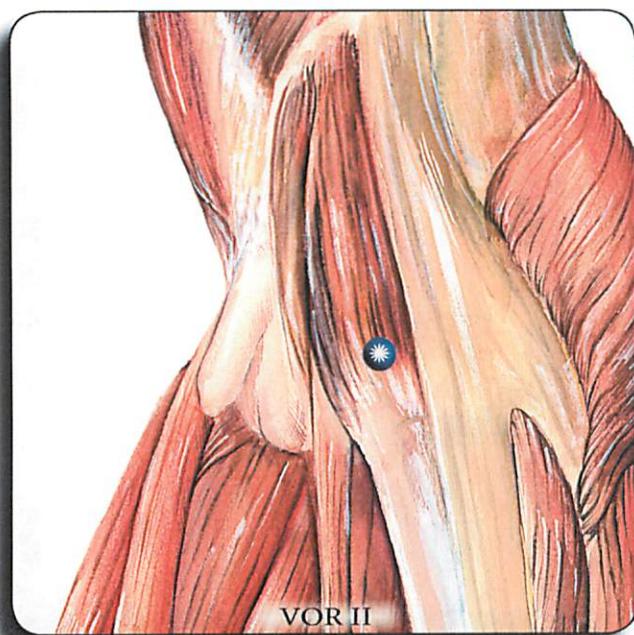
NEUROVASCULAR



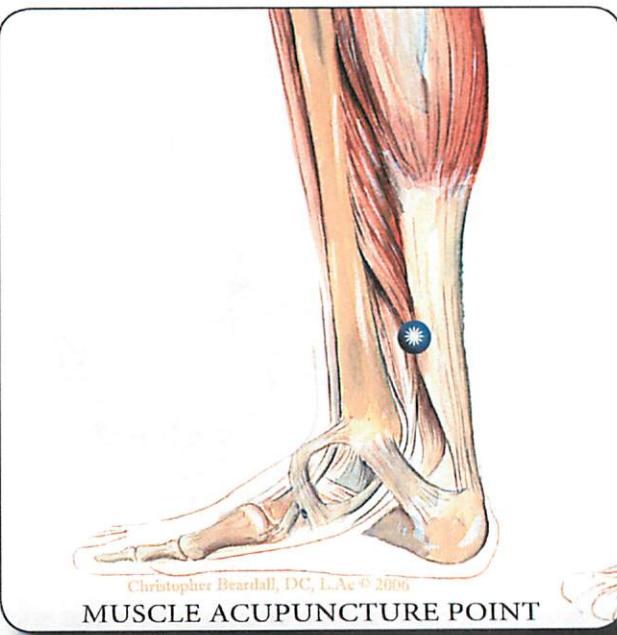
NEUROLYMPHATIC



VOR I



VOR II



Christopher Beardall, DC, LAc © 2006
MUSCLE ACUPUNCTURE POINT

Muscle 896: TIBIALIS ANTERIOR, (Supinator Division)

ORIGIN: Lateral condyle and upper 1/2 to 2/3 of lateral surface of body of tibia.

INSERTION: Medial and upper surface of base of first metatarsal bone.

ACTION: Supinates, inverts and adducts the foot.

TEST:

Patient: Position: Supine.

M.T.P.: Foot adducted 20 degrees, inverted, supinated and in 90 degrees dorsiflexion.

Plantar flex all toes.

Doctor:

Position: End of table facing patient.

Brace: Inferior aspect of ipsilateral calcaneus.

Contact: Dorsal aspect of first metatarsal.

Direction: Pronate and plantar flex foot upon leg.

NEUROVASCULAR: (Lat) Asterion.

NEUROLYMPHATIC: (Ant/R) Sixth I.C.S., at the costal cartilage junction.

VISCERAL ORGAN:

I. *Jejunum, Fourth Section:* (Ant/L) Rectus abdominis, third section, 1/2" below attachment of fourth section.

II. *Urethra, Prostate Portion:* (Lat/BL) G 29, 1" below belly of tensor fascia lata.

M. A. P. : Sp 6

V.L. : L2 L

L. B. V.L. : C4 L

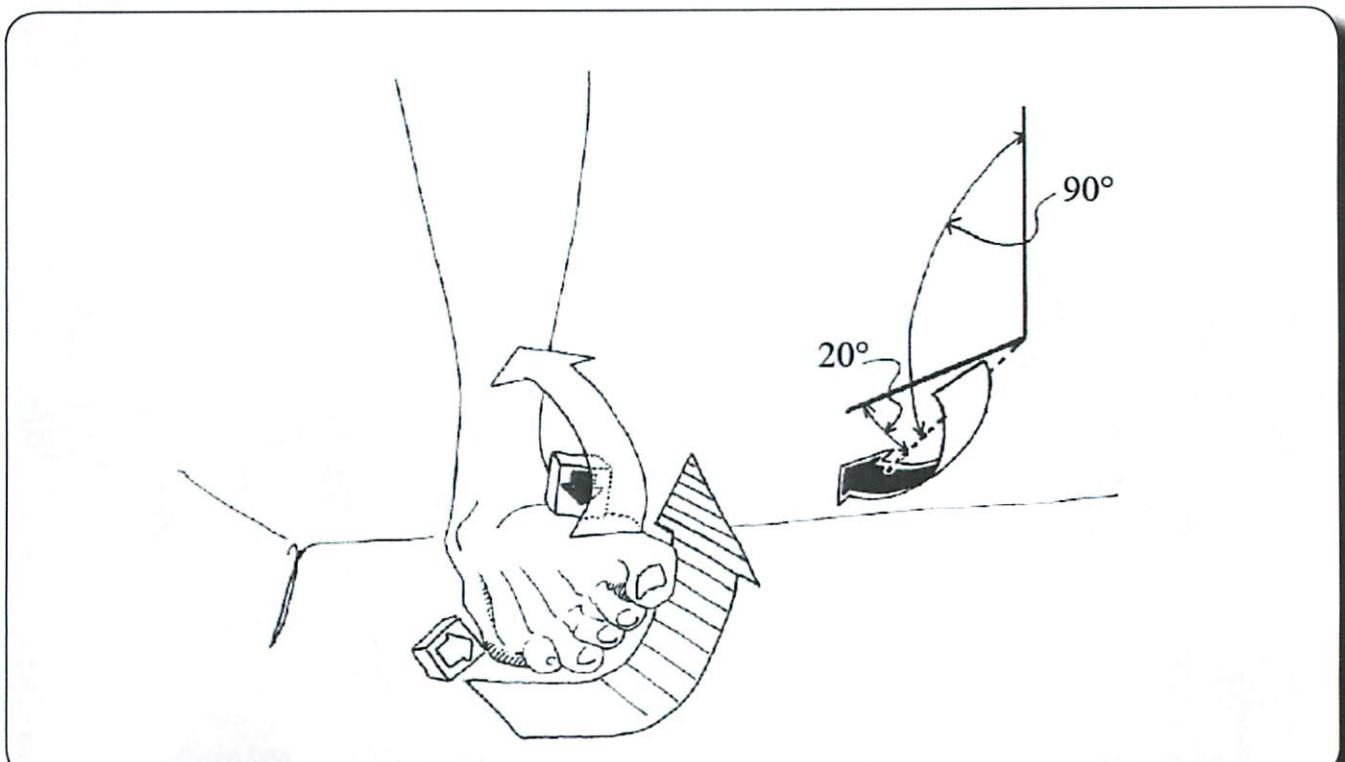
M. M. : L4

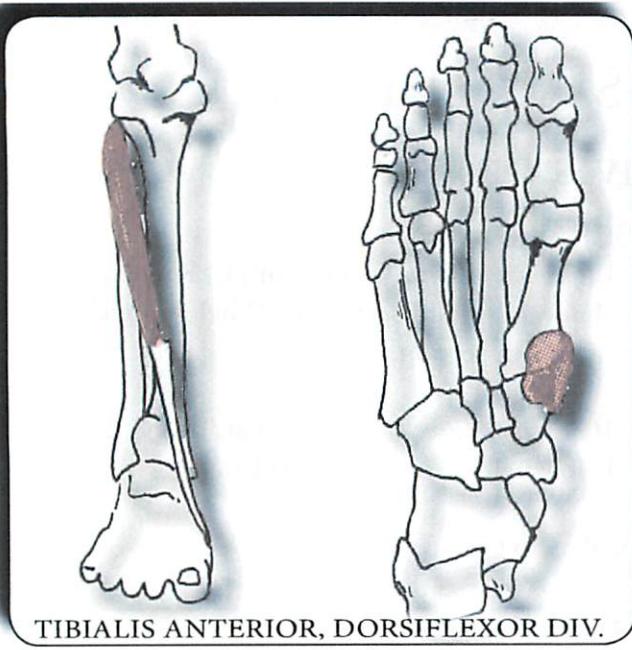
CRANIAL: Frontal

FOOT: Navicular

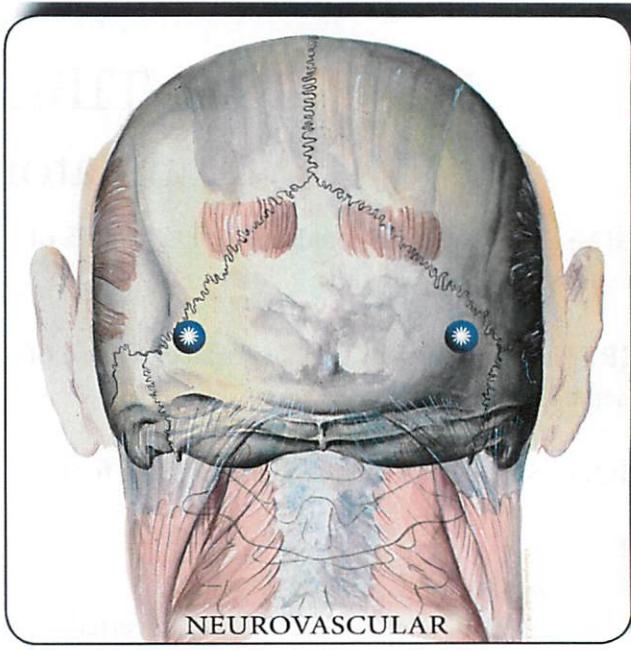
NUTRIENT SOURCE: Calcium

1. Minchex (S)
2. Core Calcium (N.W.)

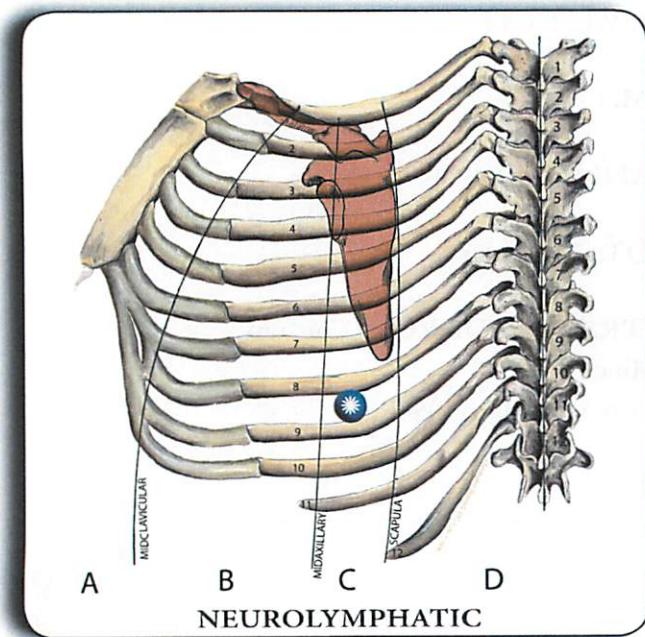




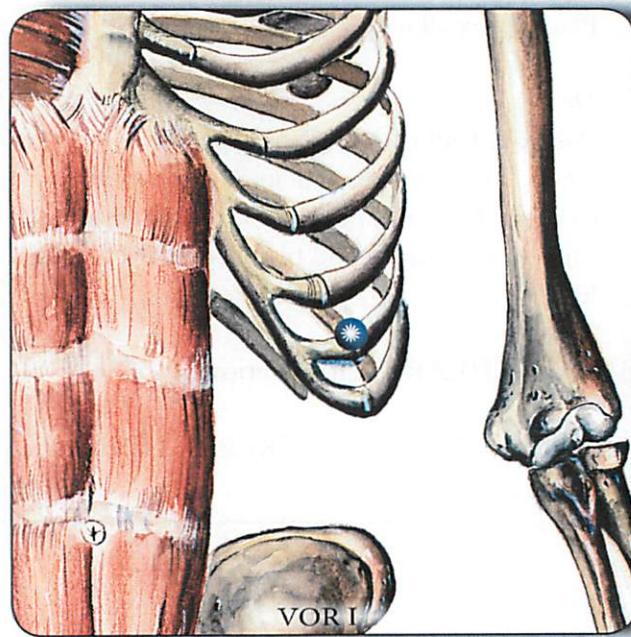
TIBIALIS ANTERIOR, DORSIFLEXOR DIV.



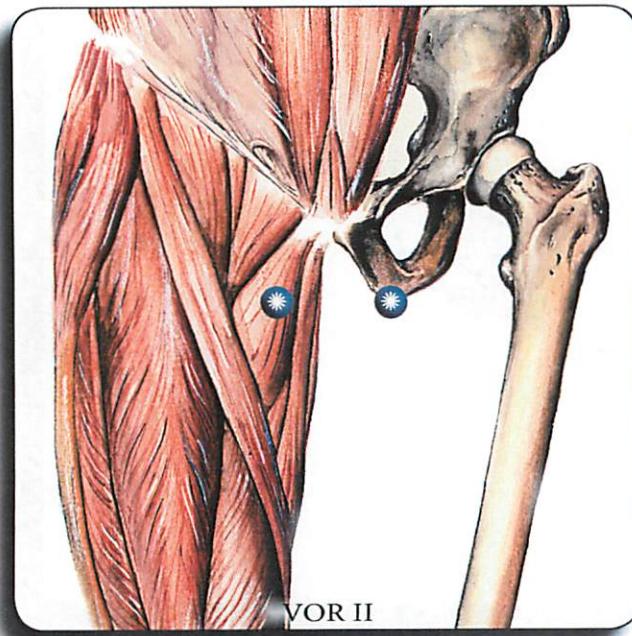
NEUROVASCULAR



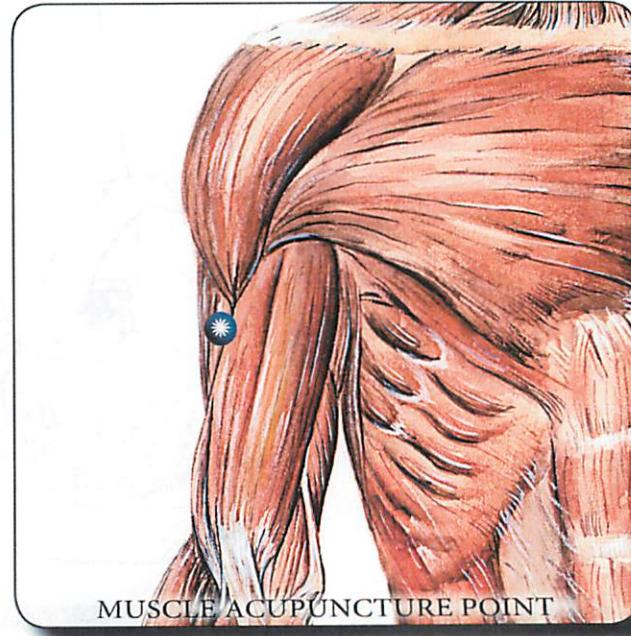
A B C D
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 898: TIBIALIS ANTERIOR, (Dorsiflexor Division)

ORIGIN: Interosseous membrane, intramuscular septum.

INSERTION: Medial and plantar surface of the first cuneiform bone.

ACTION: Dorsiflexes the foot upon the leg.

TEST:

Patient: Position: Supine.

M.T.P.: Foot fully flexed upon; leg (approximately 75 degrees). Keep all toes plantar flexed.

Doctor:

Position: End of table facing patient.
Brace: Inferior aspect of ipsilateral calcaneus.
Contact: Dorsal aspect of foot.
Direction: Plantar flex foot upon leg.

NEUROVASCULAR: (Post/BL) Occipital bone, 1" medial to asterion.

NEUROLYMPHATIC: (Post/L) Eighth I.C.S., lateral humeral area.

VISCERAL ORGAN:

I. *Spleen:* (Ant/L) End of ninth rib, costal cartilage junction.

II. *Ductus Deferens:* (Ant/BL) Lv 10, below obturator foramen.

M. A. P. : L 3 3/4

V.L. : C5 L

L. B. V.L. : L1 L

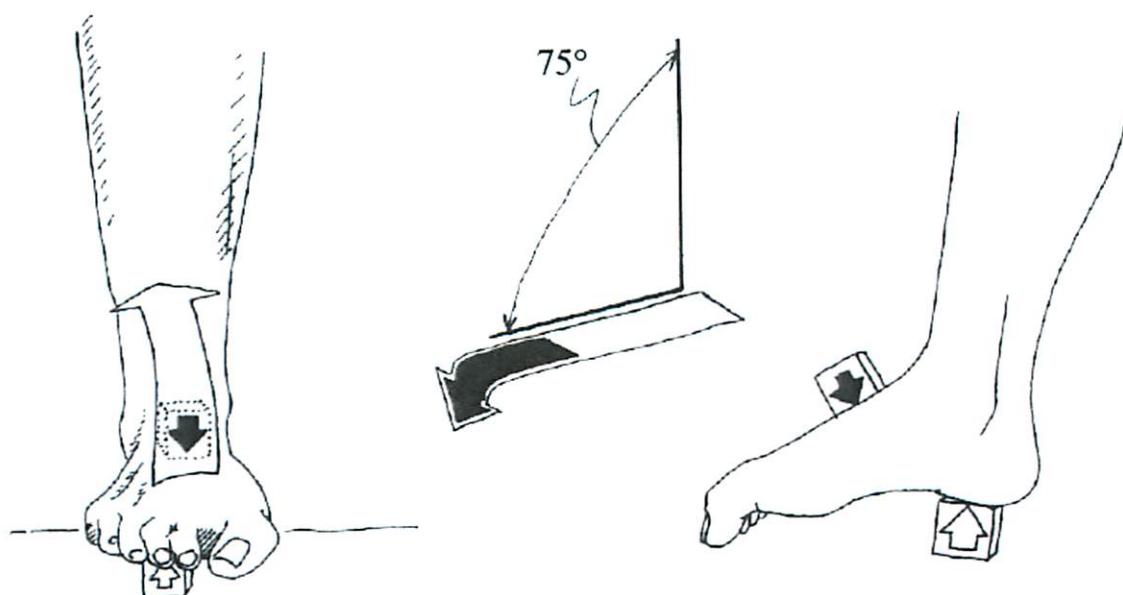
M. M. : L5

CRANIAL: Frontal

FOOT: Navicular

NUTRIENT SOURCE: Sodium

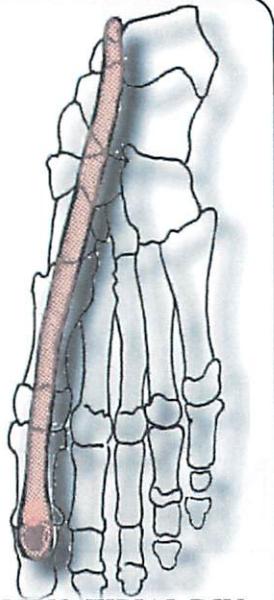
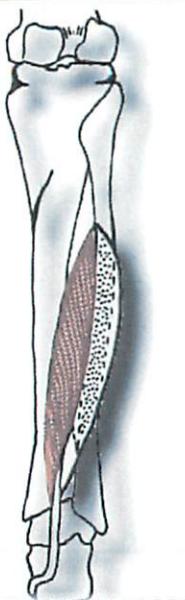
1. Sea Salt



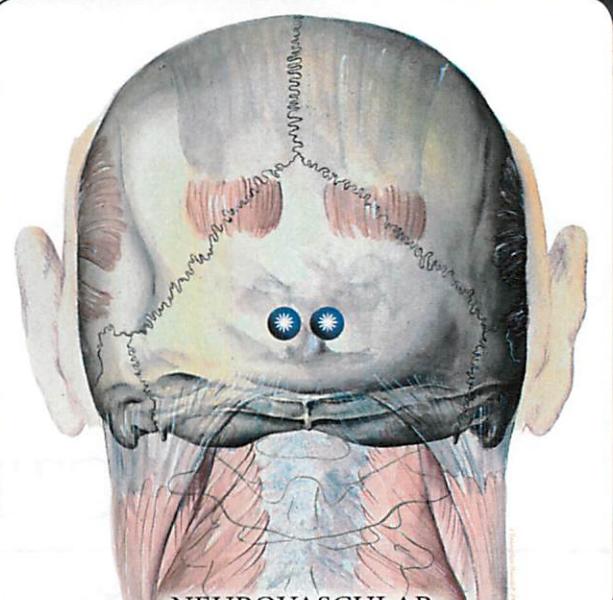


SECTION II:

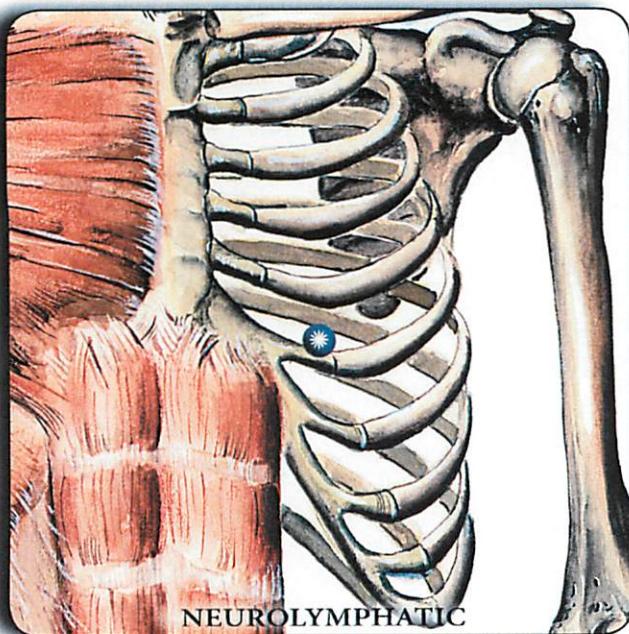
BIG TOE



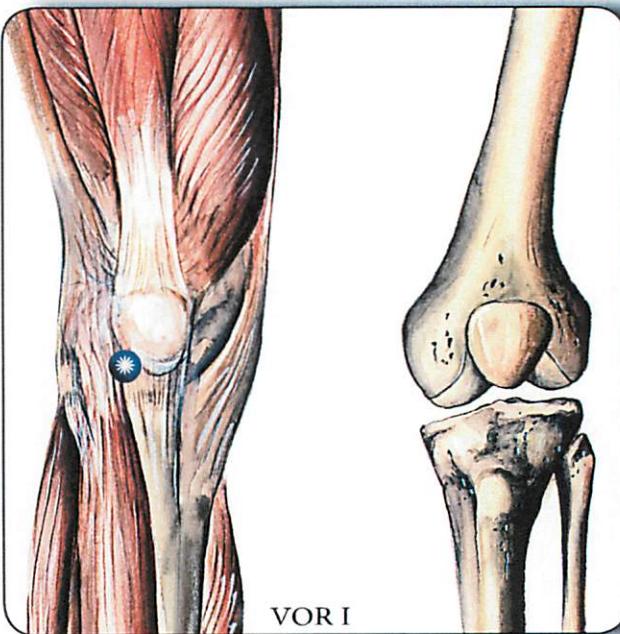
FLEXOR HALLUCIS LONGUS, TIBIAL DIV.



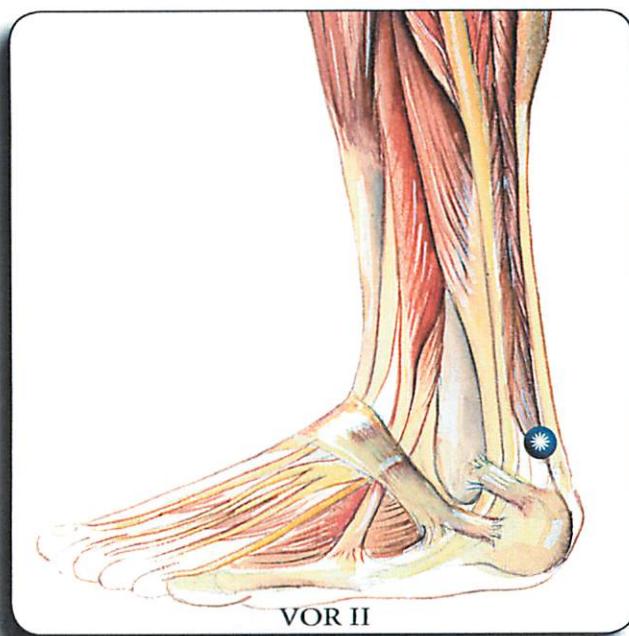
NEUROVASCULAR



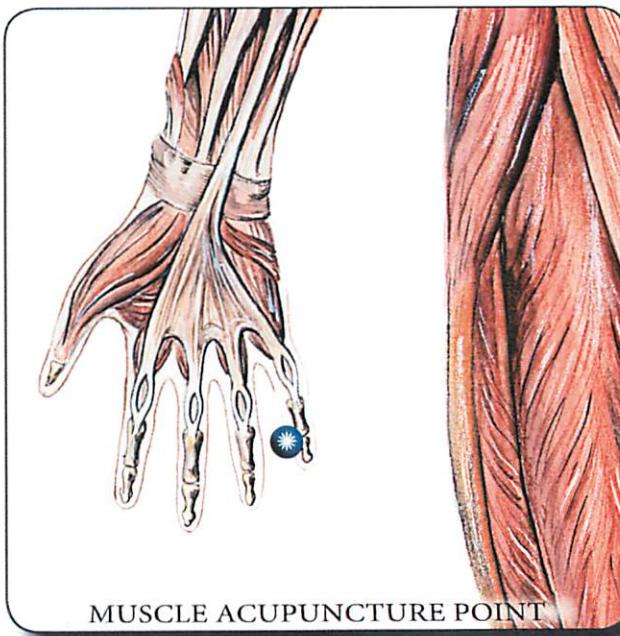
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 900: FLEXOR HALLUCIS LONGUS, (Tibial Division)

ORIGIN: Lower part of interosseous membrane, intermuscular septum and from fascia covering tibialis posterior.

INSERTION: Base of distal phalanx of great toe.

ACTION: Flexes distal phalanx of great toe. Assists in foot plantar flexion.

TEST:

Patient: Position: Supine.

M.T.P.: Plantar flex distal phalanx of great toe and move foot slightly into eversion

Doctor:

Position: At side of table facing patient's feet.

Brace: Dorsal surface of proximal phalanx.

Contact: Plantar surface of distal phalanx.

Direction: Dorsiflex through midsagittal plane.

NEUROVASCULAR: (Post/BL) Superior to external occipital protuberance.

NEUROLYMPHATIC: (Ant/L) Fifth I.C.S., costal junction.

VISCERAL ORGAN:

I. *Liver:* (Ant/R) S 35; lateral inferior aspect of patella.

II. *Anterior Pituitary:* (Lat/BL) B 60; posterior distal aspect of fibula.

M. A. P. : H 9

V.L. : L2 R

L. B. V.L. : C4 R

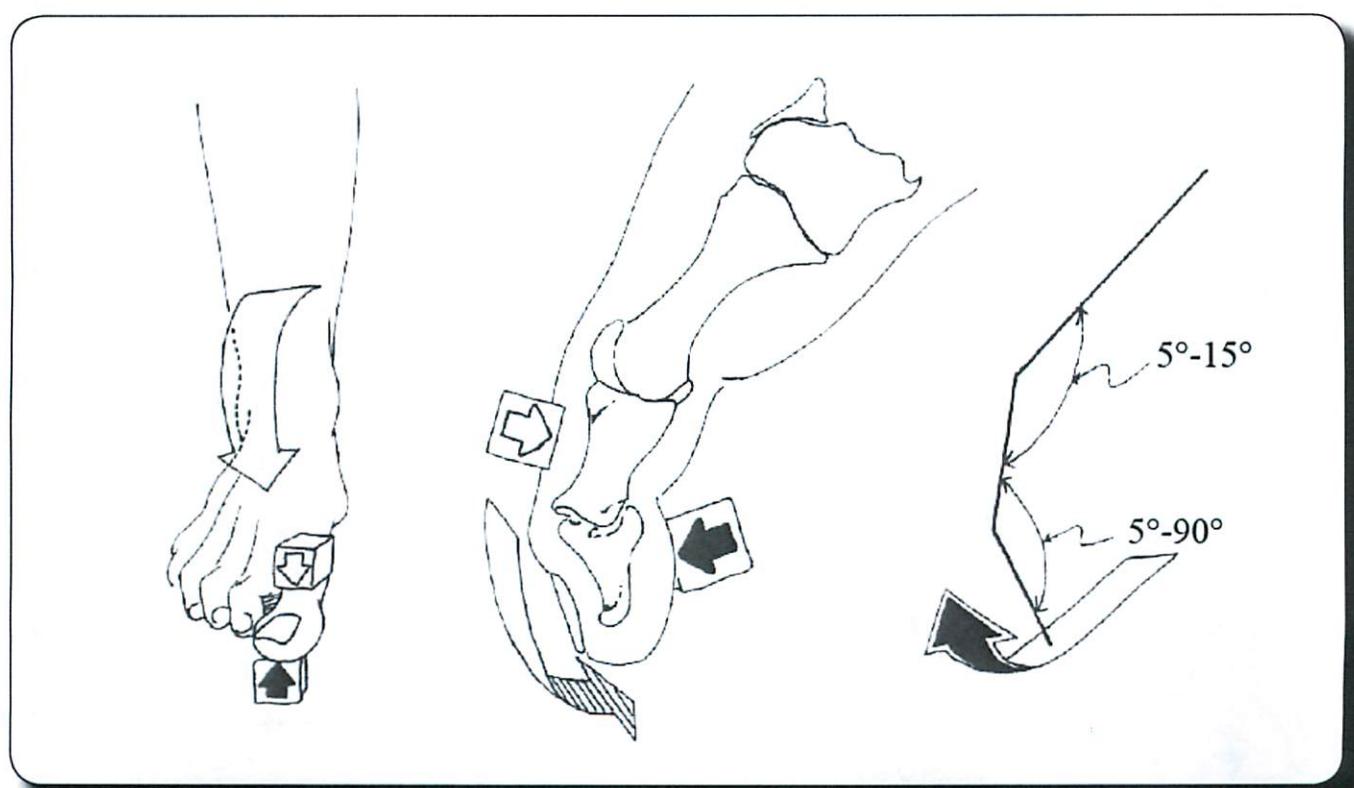
M. M. : S2

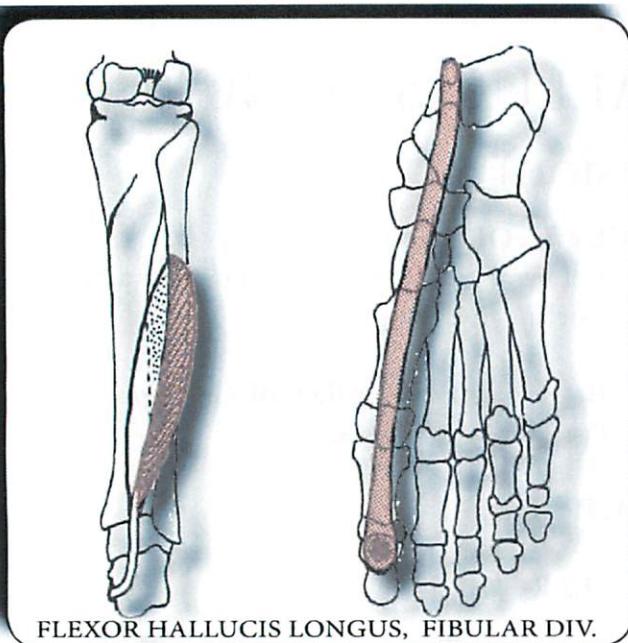
CRANIAL: Vomer

FOOT: Second Metatarsal

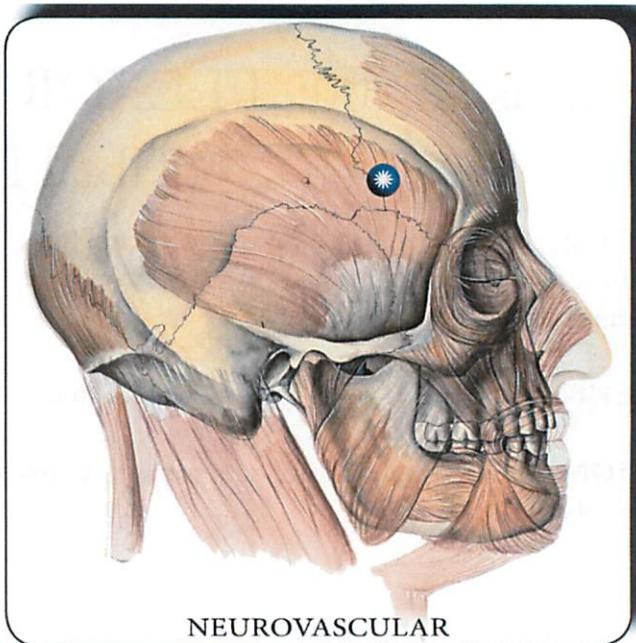
NUTRIENT SOURCE: Iron

1. Ferrofood (S)
2. Core Iron (N.W.)

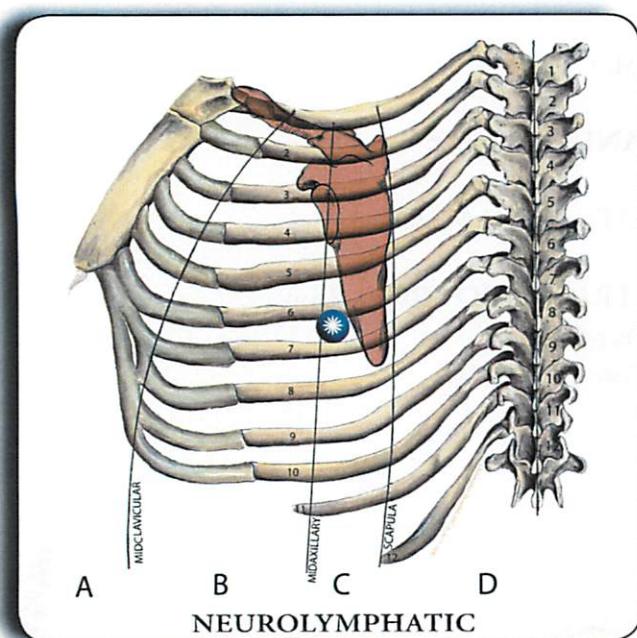




FLEXOR HALLUCIS LONGUS, FIBULAR DIV.

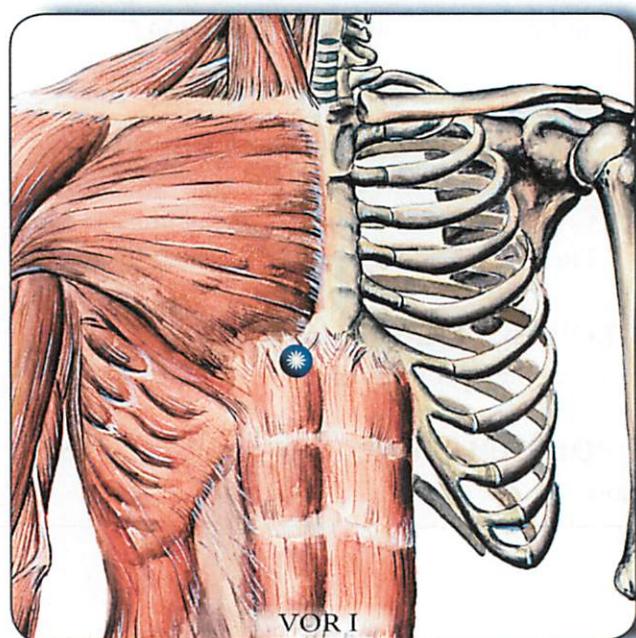


NEUROVASCULAR

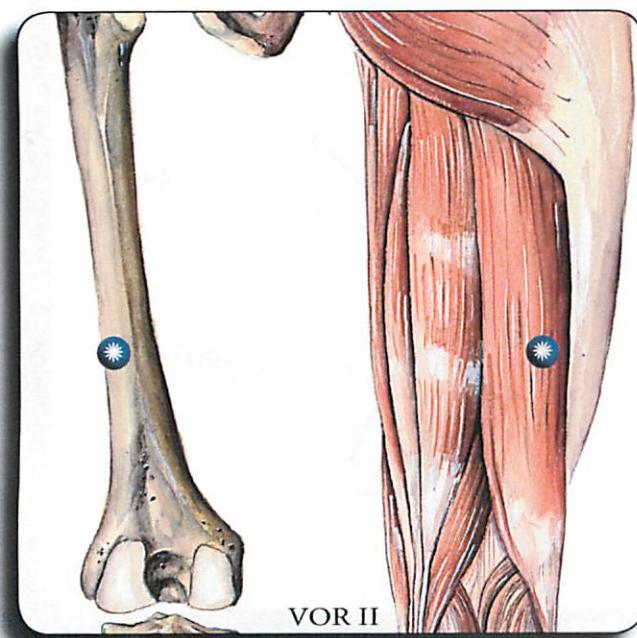


A MIDCLAVICULAR
B
C MIDAXILLARY
D SCAPULAR

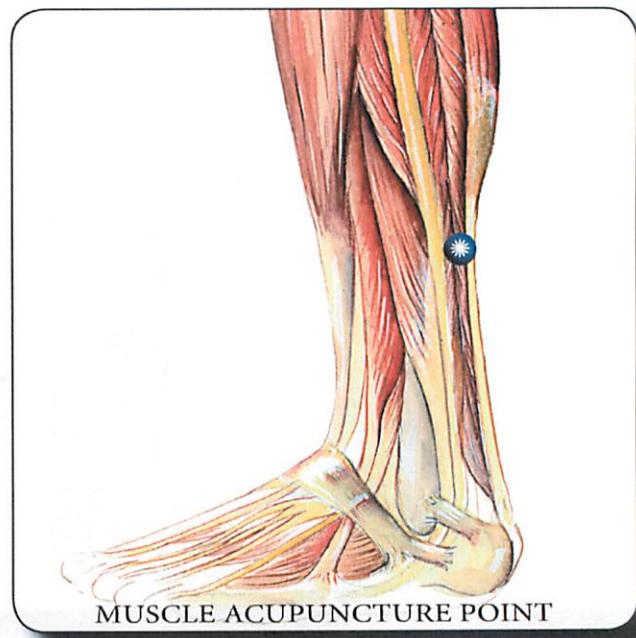
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 902: FLEXOR HALLUCIS LONGUS, (Fibular Division)

ORIGIN: Inferior 2/3 of the posterior surface of the body of the fibula.

INSERTION: Base of the distal phalanx of the great toe.

ACTION: Flexes distal phalanx of great toe. Assists in foot plantar flexion and supination.

TEST:

Patient: Position: Supine.

M.T.P.: Plantar flex distal phalanx of great toe and move foot into a supinated position.

Doctor:

Position: Side of table facing patient's feet.

Brace: Dorsal surface of proximal phalanx.

Contact: Plantar surface of distal phalanx.

Direction: Dorsiflex through midsagittal plane.

NEUROVASCULAR: (Lat) Coronal suture, 1" inferior to superior temporal line.

NEUROLYMPHATIC: (Lat/L) Sixth I.C.S., parahumeral area.

VISCERAL ORGAN:

I. *Esophagus - Abdominal Part:* (Ant/R) Right side of xiphoid.

II. *Kidney:* (Post/BL) Belly of biceps femoris at level of B 51, 1 - 2" lateral.

M. A. P. : B 58.2

V.L. : C5 L

L. B. V.L. : L1 L

M. M. : S1

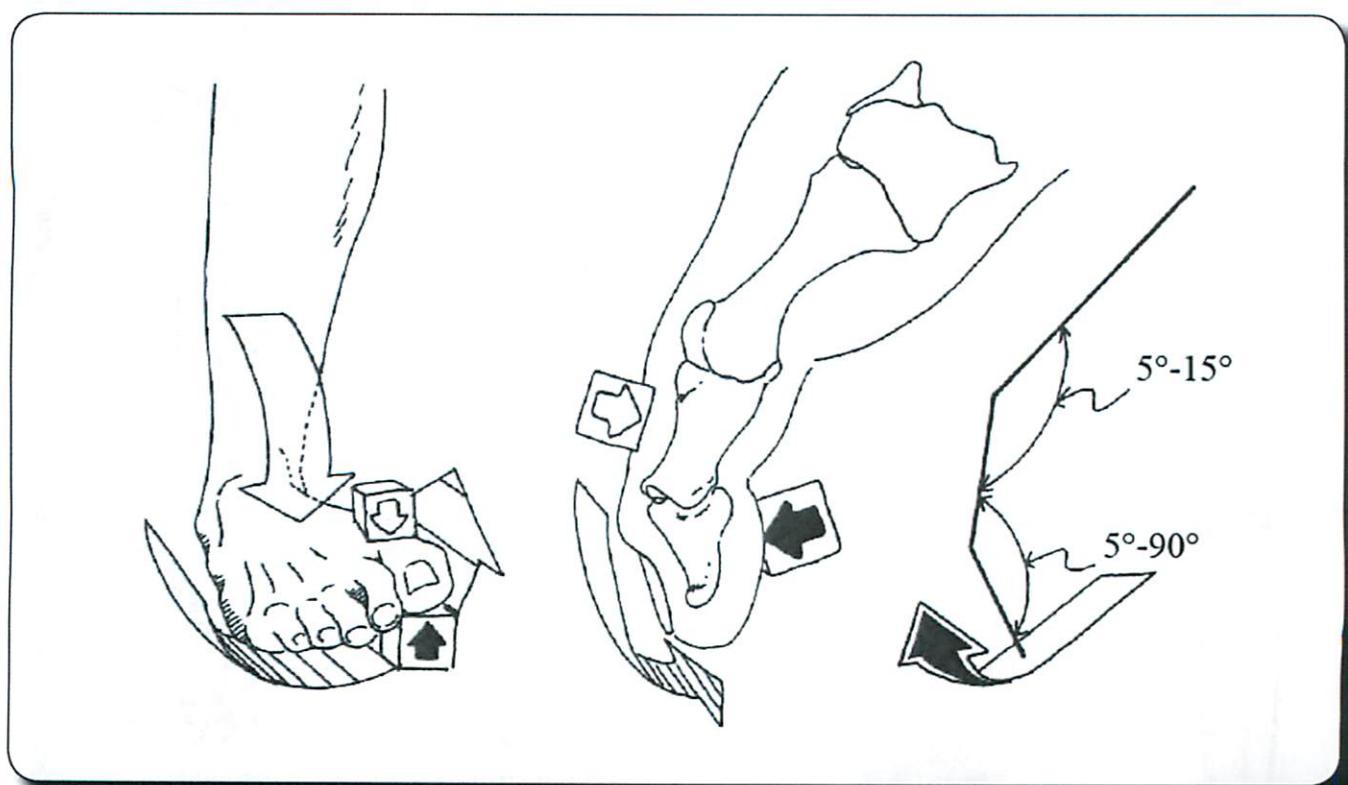
CRANIAL: Inferior Conchae

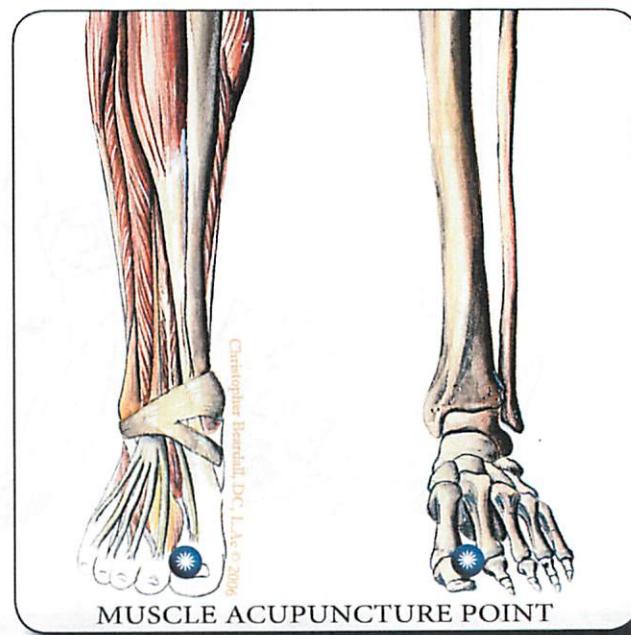
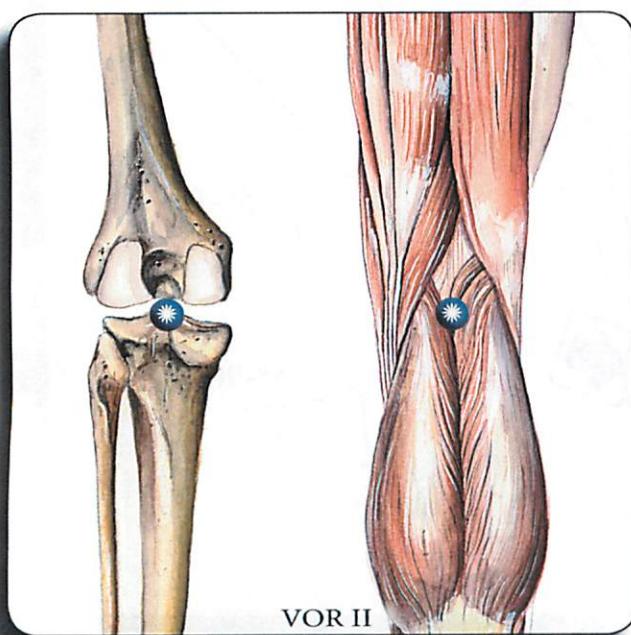
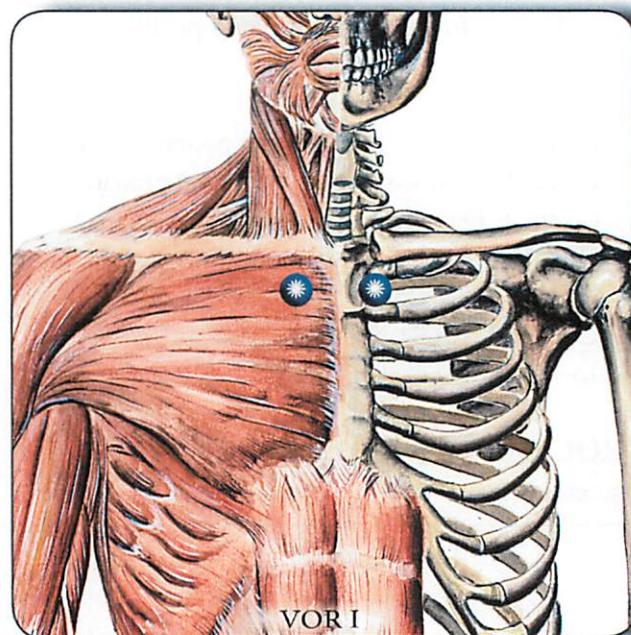
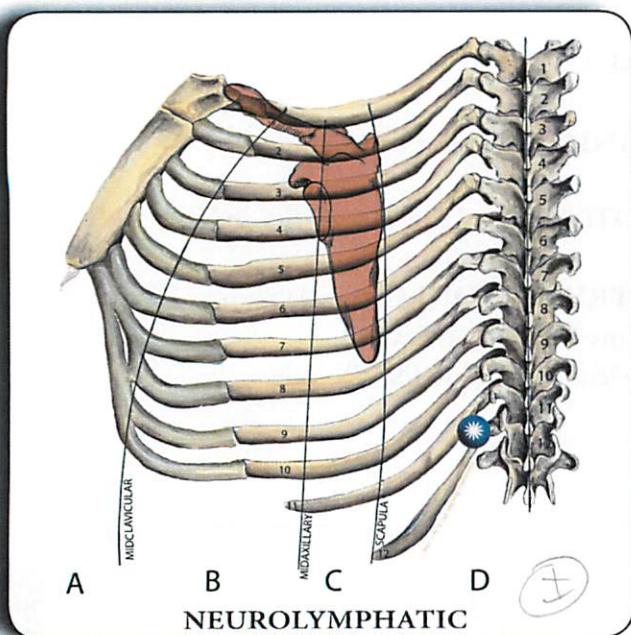
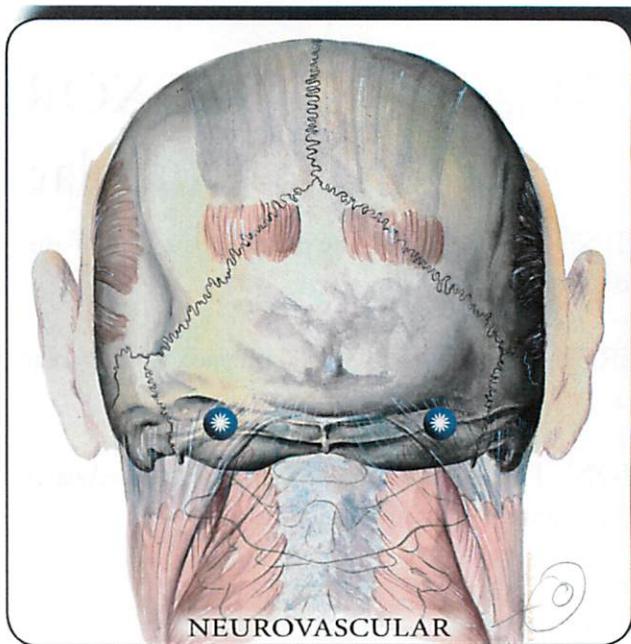
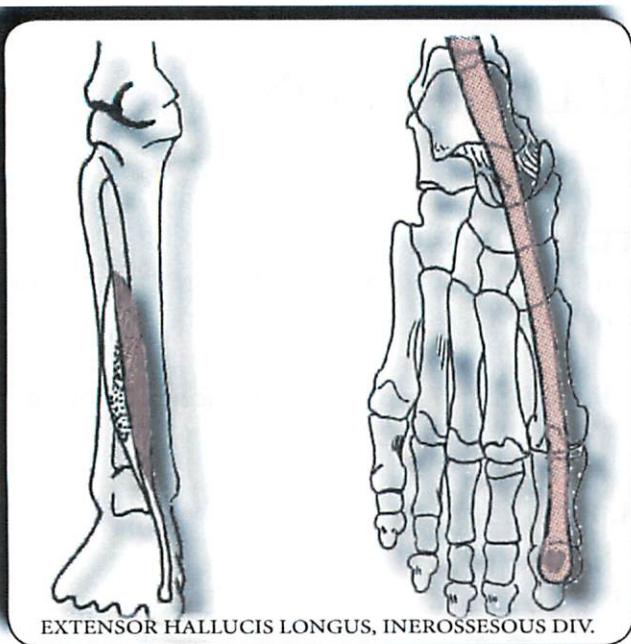
FOOT: Proximal Phalanx of Second Toe

NUTRIENT SOURCE:

1. Core Selenium (N.W.)

2. Selenium Chelate (N.W.)





Muscle 904: EXTENSOR HALLUCIS LONGUS, (Interosseous Division)

ORIGIN: Interior osseous membrane between tibia and fibula.

INSERTION: Distal phalanx of great toe.

ACTION: Dorsiflexes distal phalanx of great toe, especially in inverted position. Assists in foot dorsiflexion.

TEST:

Patient: Position: Supine.

M.T.P.: Dorsiflex distal phalanx of great toe and move foot into inverted position.

Doctor:

Position: End of table facing patient.

Brace: Plantar surface of proximal phalanx.

Contact: Dorsal surface of distal phalanx.

Direction: Plantar flex through mid-sagittal plane.

NEUROVASCULAR: (Post/BL) Occipital bone, medial to occipitomastoid suture.

NEUROLYMPHATIC: (Post/L) Eleventh I.C.S.
1" lateral to spine.

VISCERAL ORGAN:

I. Thymus: (Ant/BL) Junction of first rib and sternum, inferior border

II. Anterior Pituitary: (Post/BL) B 54, popliteal fossa.

M. A. P.: Lv 1. (Muscle Acupressure Point)

V.L.: L3 R (Vertebra Level)

L. B. V.L.: C3 R
Loverly Brother

M. M.: S1 Direct N. Supply to Muscle

CRANIAL: Mandible

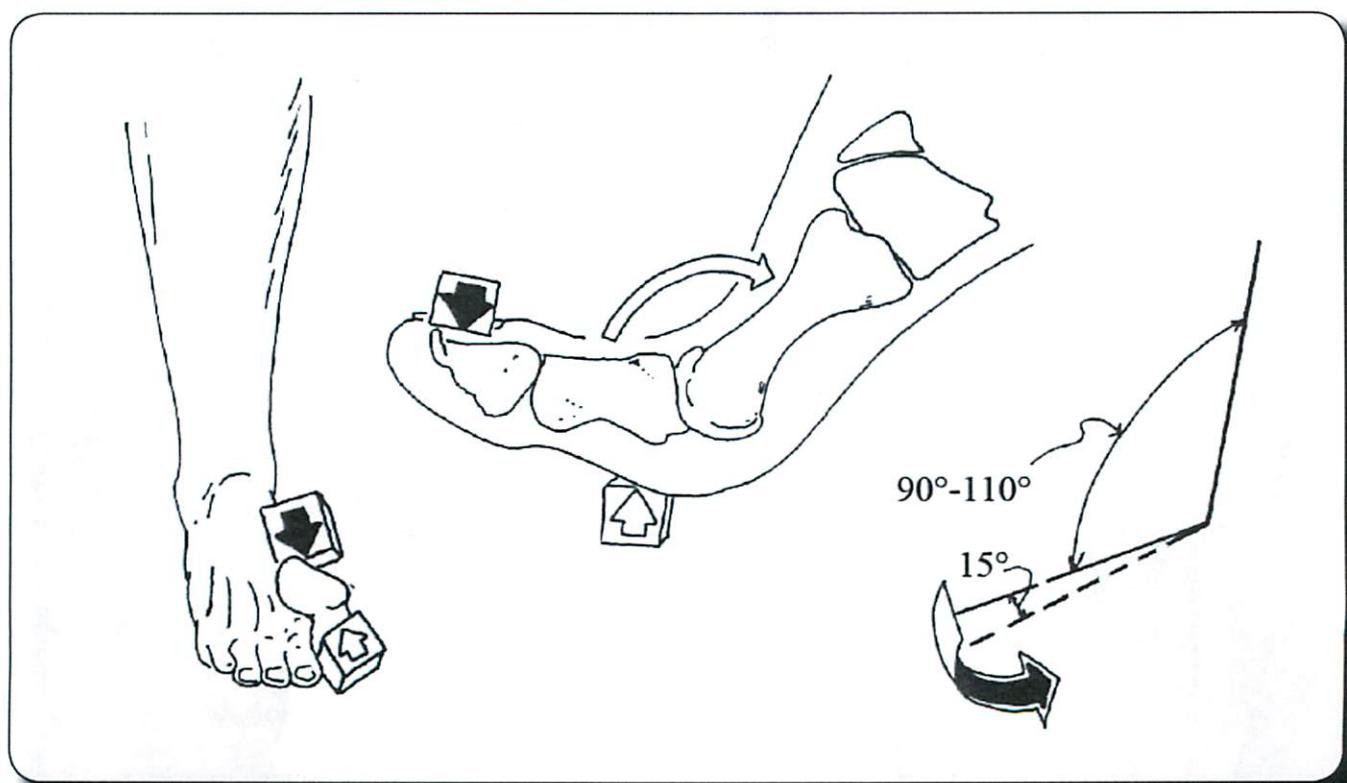
FOOT: Proximal Phalanx of Great Toe

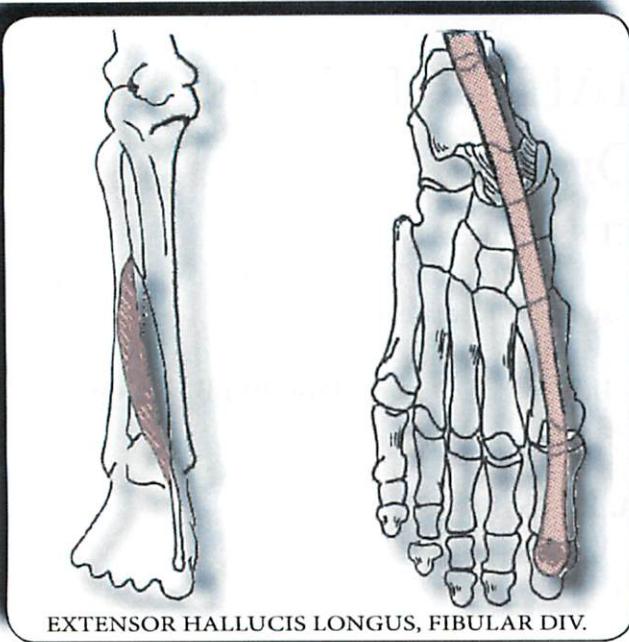
NUTRIENT SOURCE:

Choline

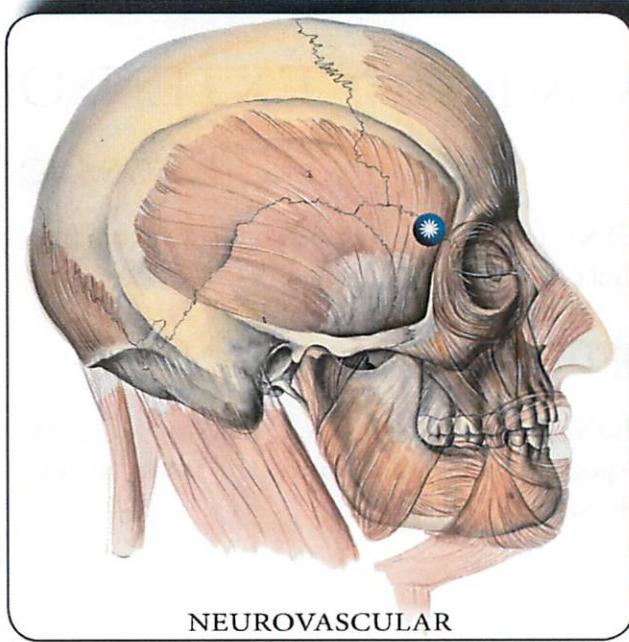
1. Choline (S)

2. Core Choline (NW)

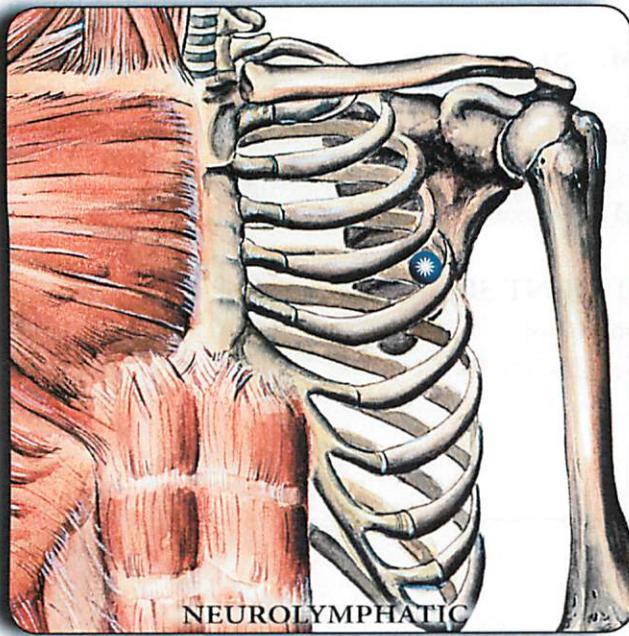




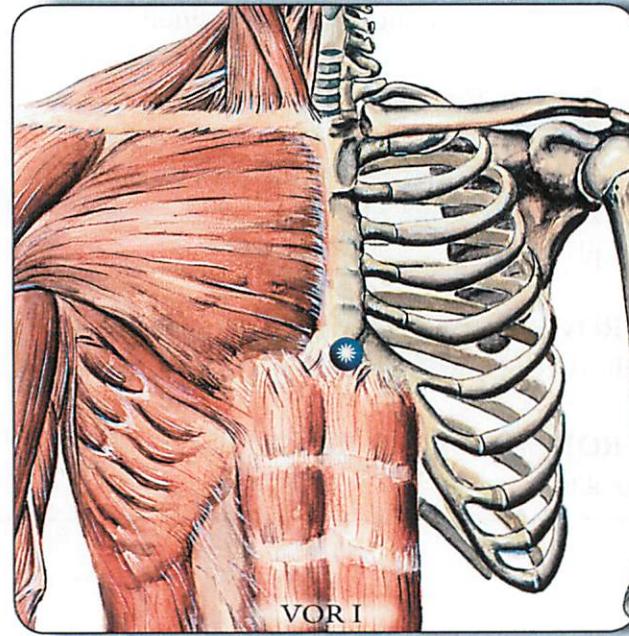
EXTENSOR HALLUCIS LONGUS, FIBULAR DIV.



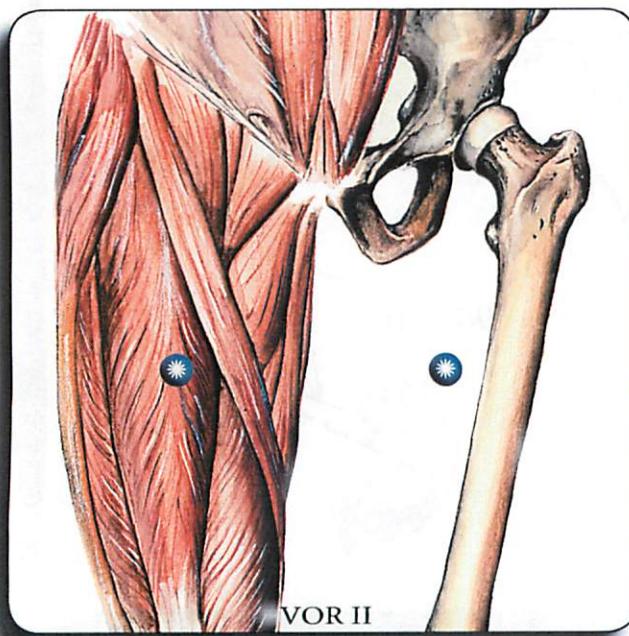
NEUROVASCULAR



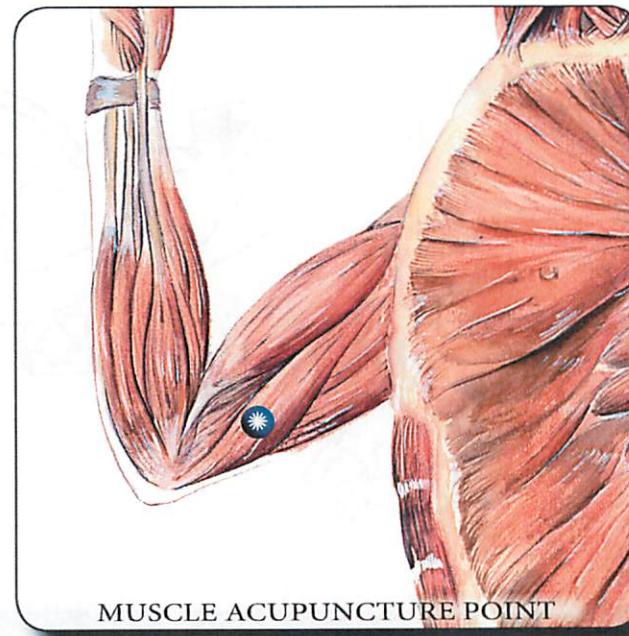
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 906: EXTENSOR HALLUCIS LONGUS, (Fibular Division)

ORIGIN: Anterior surface of the fibula, middle 1/2 of its extent.

INSERTION: Base of the distal phalanx of the great toe.

ACTION: Dorsiflexes distal phalanx of great toe and assists in foot dorsiflexion.

TEST:

Patient: Position: Spine.

M.T.P.: Dorsiflex distal phalanx of great toe; maintain foot in mid-sagittal plane.

Doctor:

Poistion: End of the table facing patient.

Brace: Plantar surface of proimal phalanx.

Contact: Dorsal surface of distal phalanx.

Direction: Plantar flex through mid-sagittal plane.

NEUROVASCULAR: (Lat) Sphenofrontal suture, posterior to eye.

NEUROLYMPHATIC: (Ant/L) Fourth I.C.S., outside mid-clavicular line.

VISCERAL ORGAN:

I. *Heart - Left Ventrical:* (Ant/L) Rectus abdominis, fourth section, near xiphoid.

II. *Urethra:* (Ant/BL) Belly of rectus femoris, medial to midline, lateral to sartorius muscle, superior to Sp 11.

M. A. P. : Si 8 1/3

V.L. : L2 R

L. B. V.L. : C4 R

M. M. : S1

CRANIAL: Palatine

FOOT: First Metatarsal

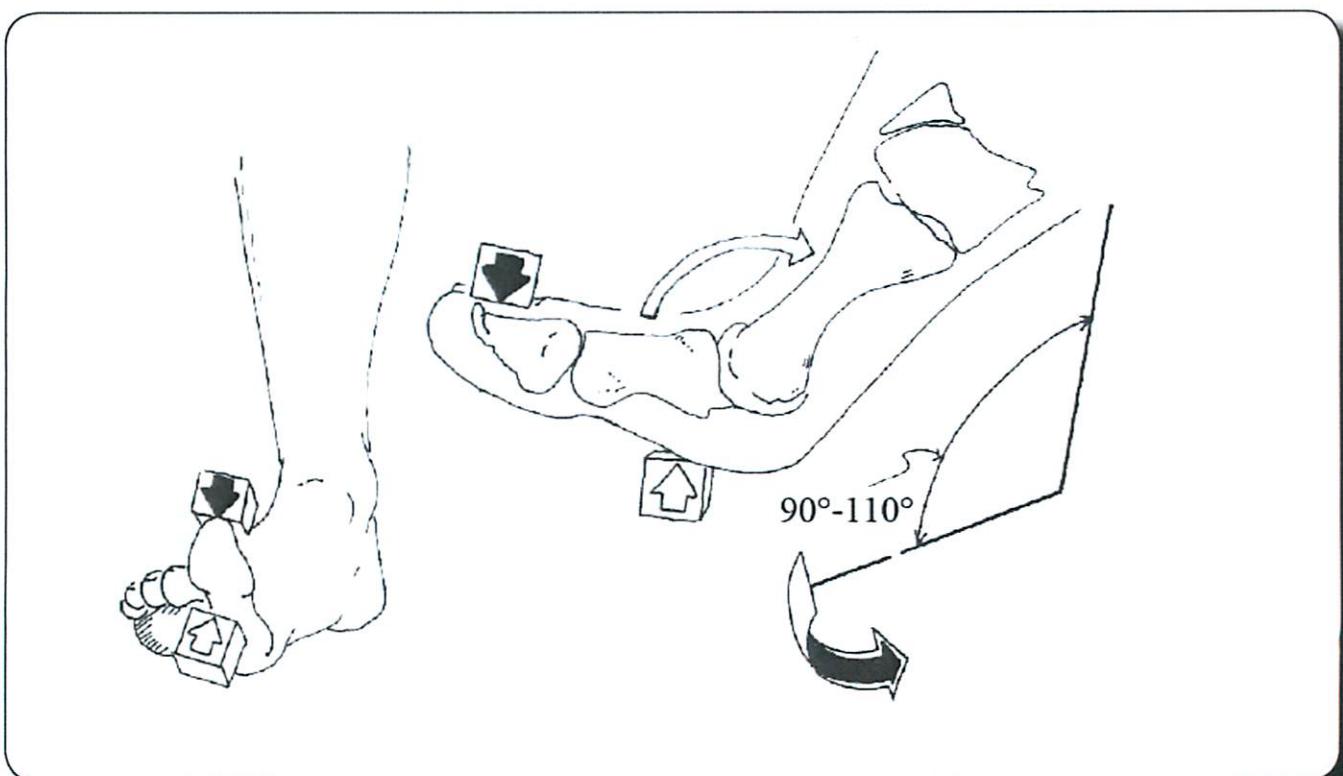
NUTRIENT SOURCE:

Magnesium

1. Core Magnesium (N.W.)

2. Magnesium Chelate (N.W.)

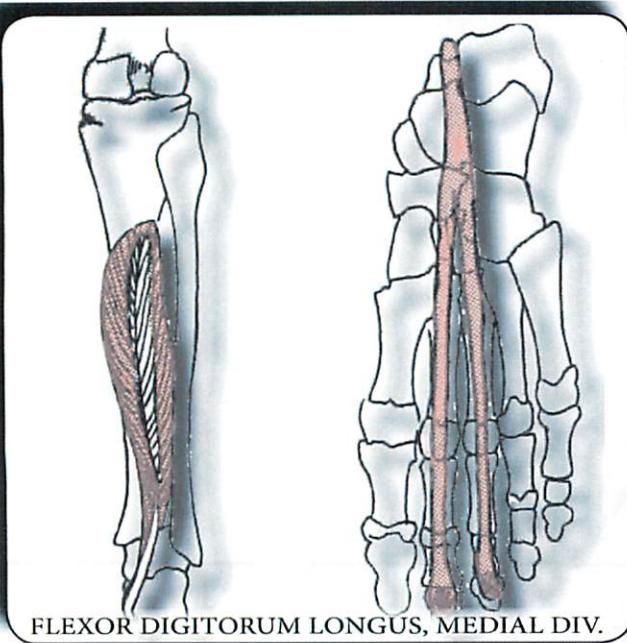
3. Min Chex (S)



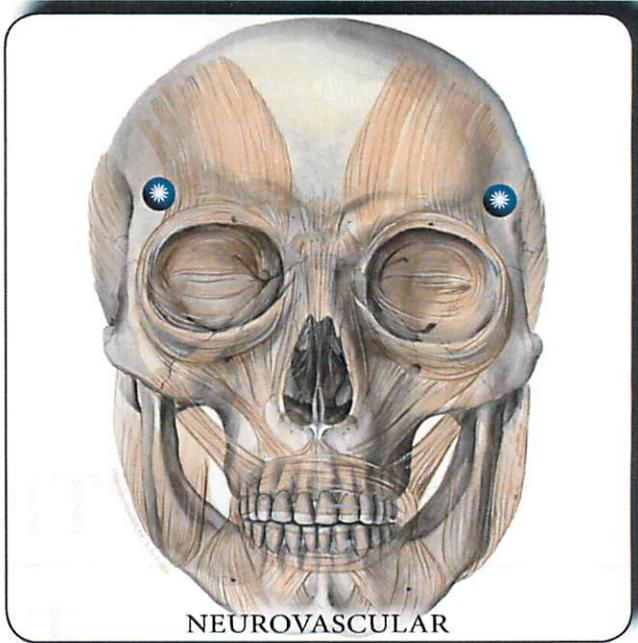


SECTION III:

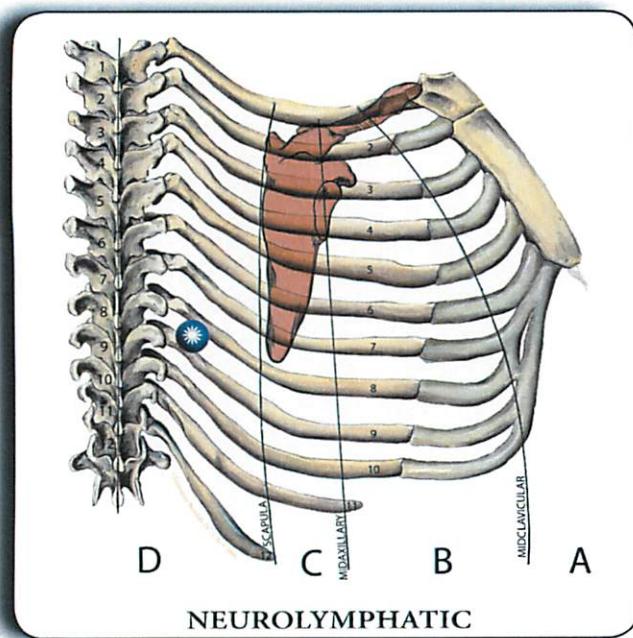
TOES



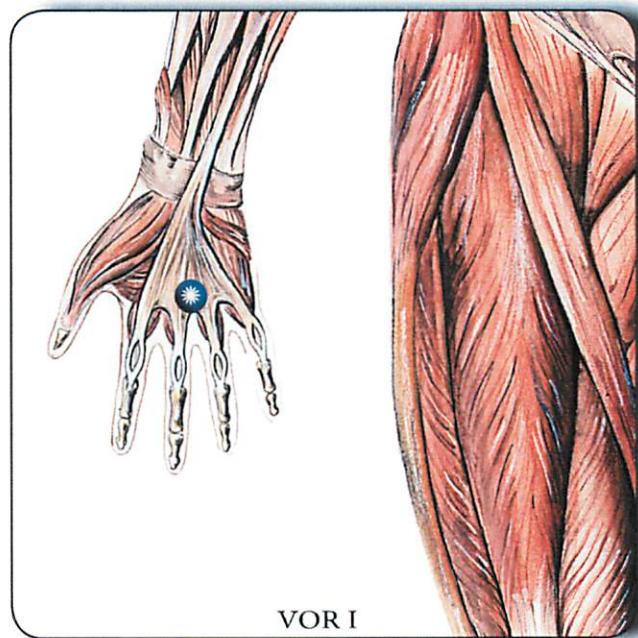
FLEXOR DIGITORUM LONGUS, MEDIAL DIV.



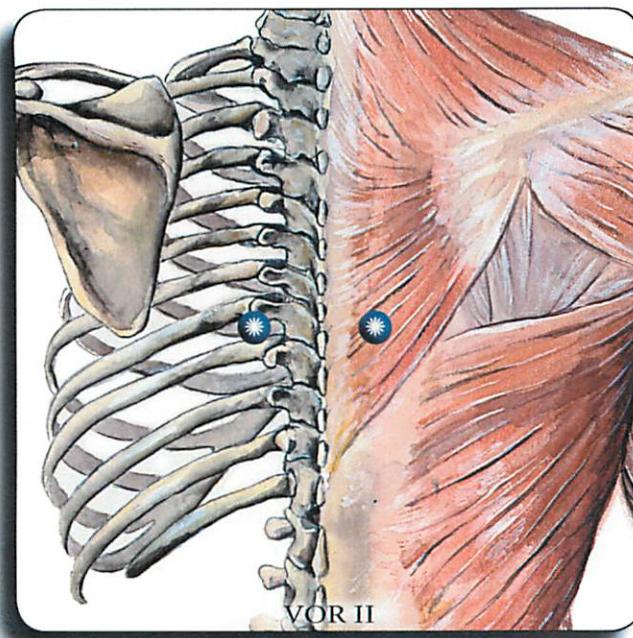
NEUROVASCULAR



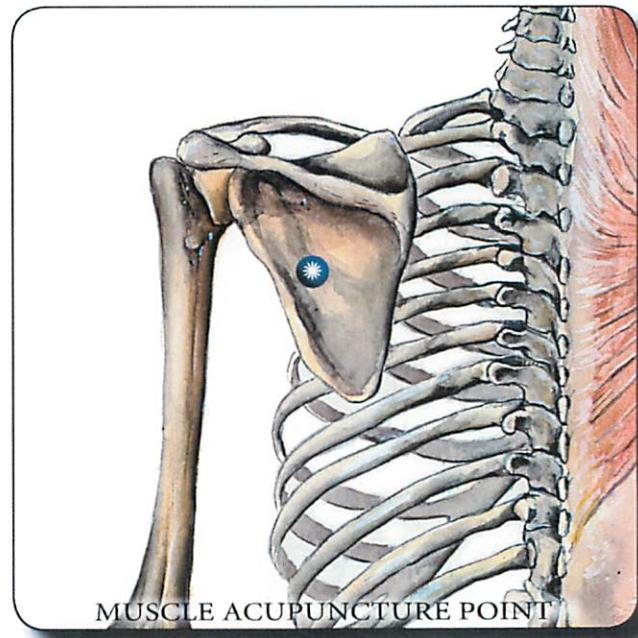
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 908: FLEXOR DIGITORUM LONGUS, (Medial Division)

ORIGIN: Posterior surface of the body of the tibia from the popliteal line to the inferior part of tibialis posterior origin.

INSERTION: Bases of the distal phalanges of second and third toes.

ACTION: Plantar flexes distal phalanx of second and third toes. Assists in plantar flexion and supination of foot.

TEST:

Patient: Position: Supine.

M.T.P: Plantar flex the distal phalanges of the second and third toes.

Doctor: Position: End of table facing patient.

Brace: Proximal dorsal surfaces of middle phalanges of second and third toes.

Contact: Plantar surfaces of distal phalanges of second and third toes.

Direction: Dorsiflex phalanges through mid-sagittal plane.

NEUROVASCULAR: (Ant/BL) Frontal bone, lateral superior part, near the level of the frontal prominence.

NEUROLYMPHATIC: (Post/R) Eighth I.C.S., paraspinal, 2" from spine.

VISCERAL ORGAN:

I. *Anterior Pituitary:* (R) Palmar side of hand between third and fourth metacarpals, distal end.

II. *Stomach:* (Post/BL) B 17, between T8 and T9 transverse processes.

M. A. P. : Si 11 1/4

V.L. : L4 R

L. B. V.L. : C2 R

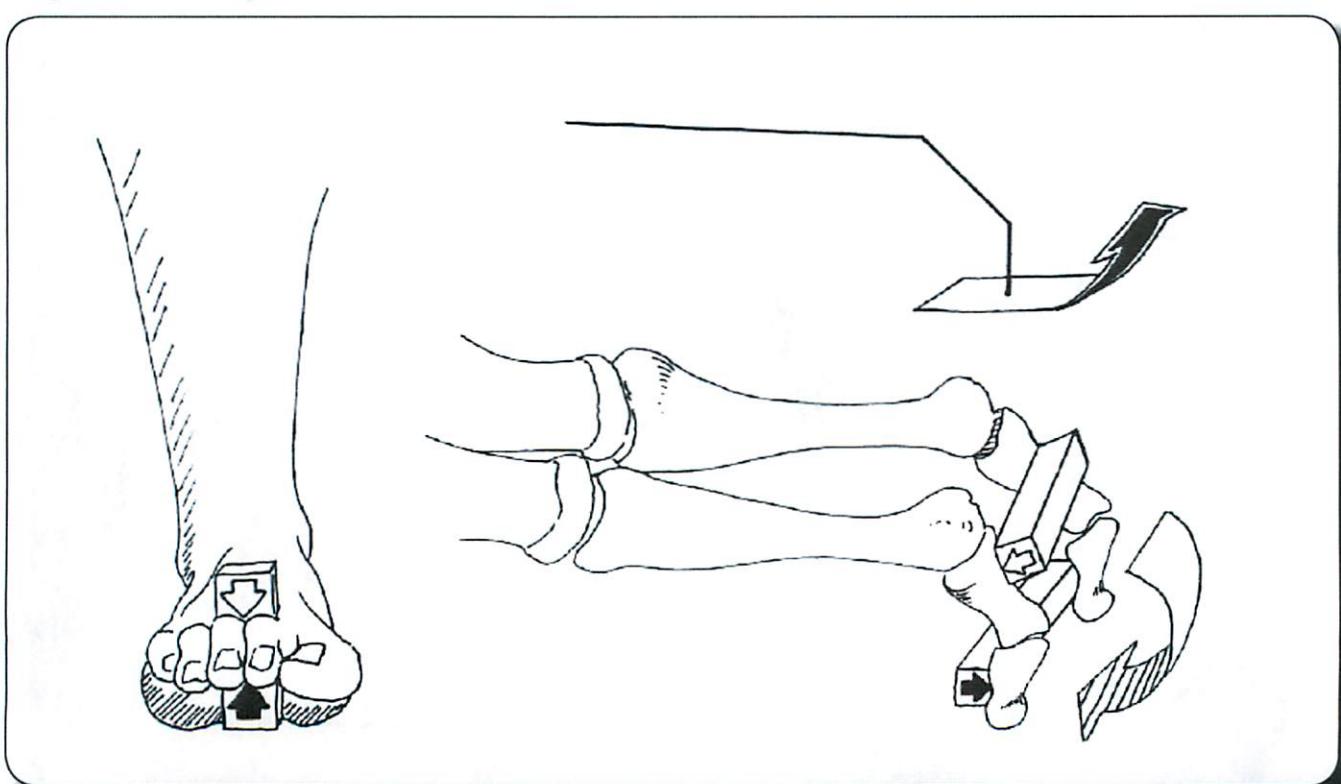
M. M. : S1

CRANIAL: Maxilla

FOOT: Third Metatarsal

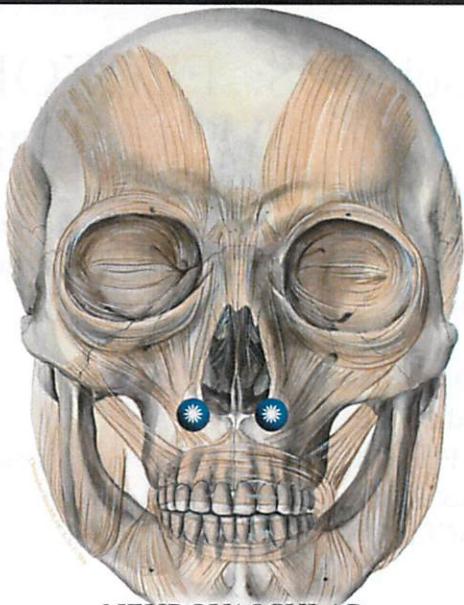
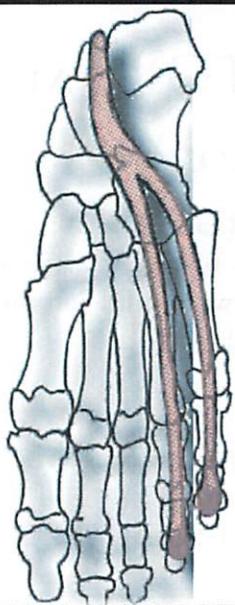
NUTRIENT SOURCE: Zinc

1. Chezyn (S)
2. Core Zinc (N.W.)
3. Zinc Chelate (N.W.)

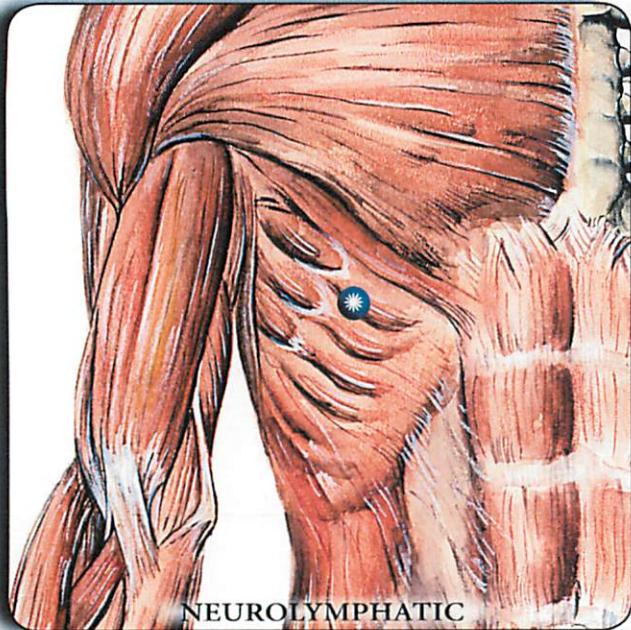




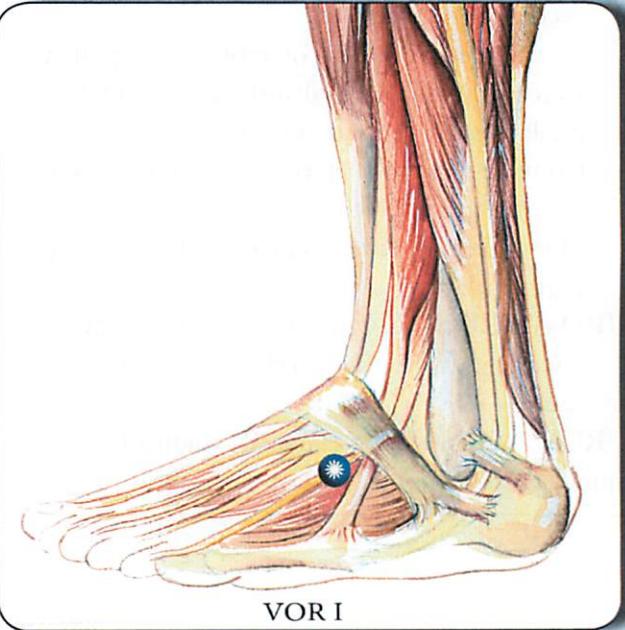
FLEXOR DIGITORUM LONGUS, LATERAL DIV



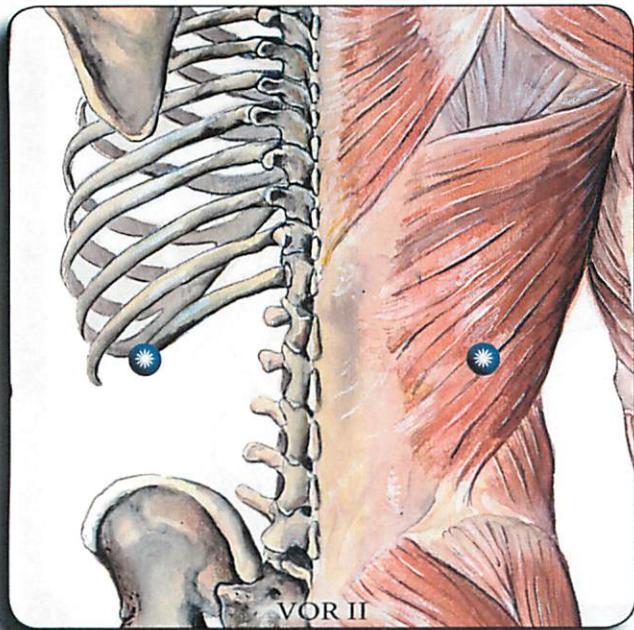
NEUROVASCULAR



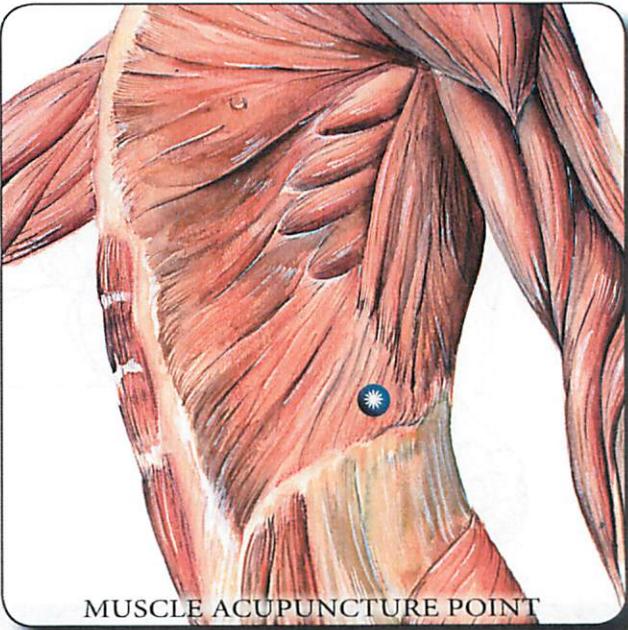
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 910: FLEXOR DIGITORUM LONGUS, (Lateral Division)

ORIGIN: Posterior part of tibia from the middle area inferiorly, middle 1/3 of tibia centrally.

INSERTION: Base of the distal phalanges of the fourth and fifth toes.

ACTION: Plantar flexes distal phalanges of the fourth and fifth toes. Assists in plantar flexion and supination of foot.

TEST:

Patient: Position: Supine.

M.T.P.: Plantar flex distal phalanges of the fourth and fifth toes.

Doctor: Position: End of table facing patient.
Brace: Dorsal surface of middle phalanges of fourth and fifth toes.

Contact: Plantar surfaces of distal phalanges of fourth and fifth toes.

Direction: Dorsiflex phalanges through mid -sagittal plane.

NEUROVASCULAR: (Ant/BL) Maxillary bone, just inferior and lateral to nose.

NEUROLYMPHATIC: (Ant/R) Sixth I.C.S., mid-clavicular line.

VISCERAL ORGAN:

I. *Anterior Pituitary*: (Lat/BL) Superior medial surface of cuboid.

II. *Kidney*: (Post/BL) G 25, tip of twelfth rib.

M. A. P. : G 26 3/4

V.L. : T4 R

L. B. V.L. : T7 R

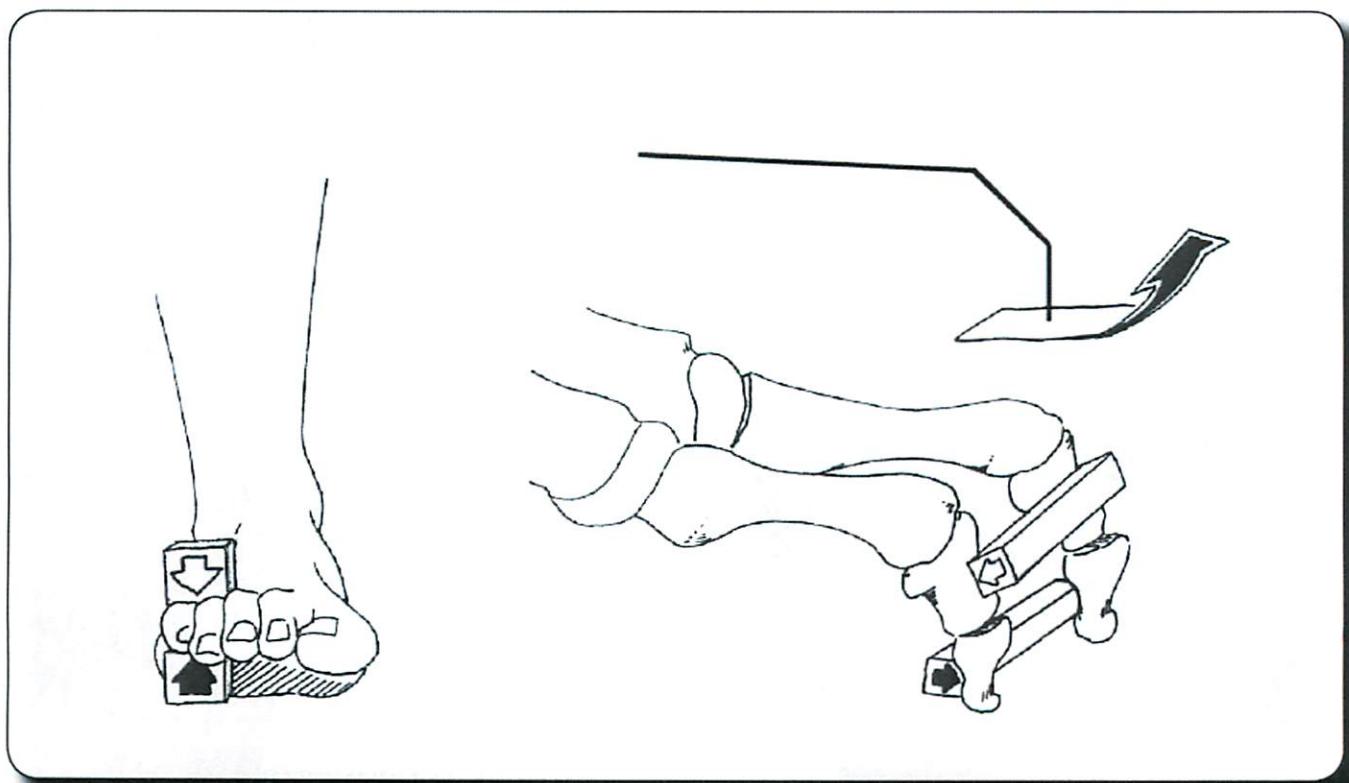
M. M. : S2

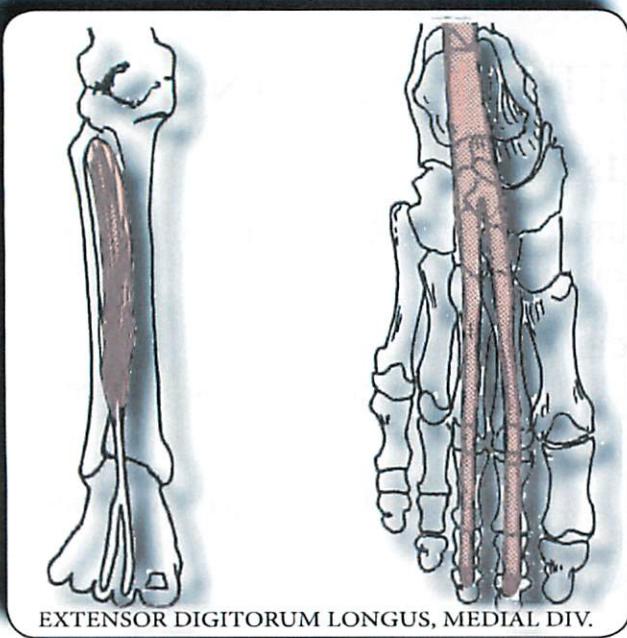
CRANIAL: Parietal

FOOT: Talus

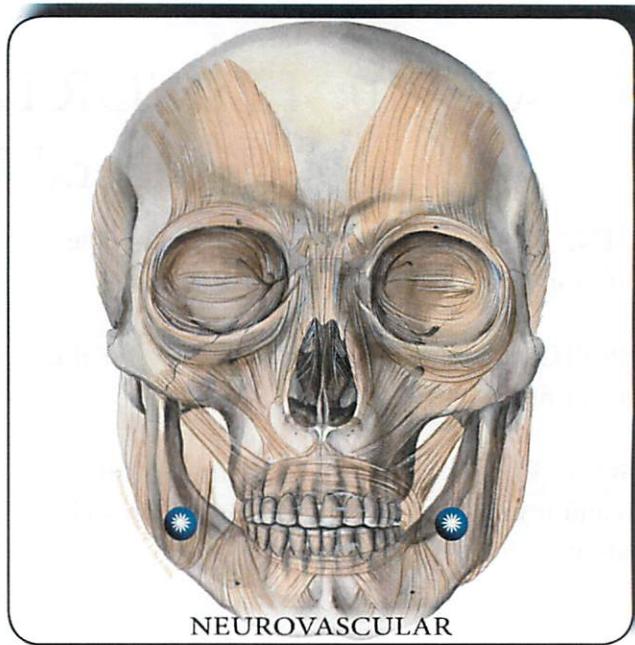
NUTRIENT SOURCE: Hesperidin

1. Core Hesperidin

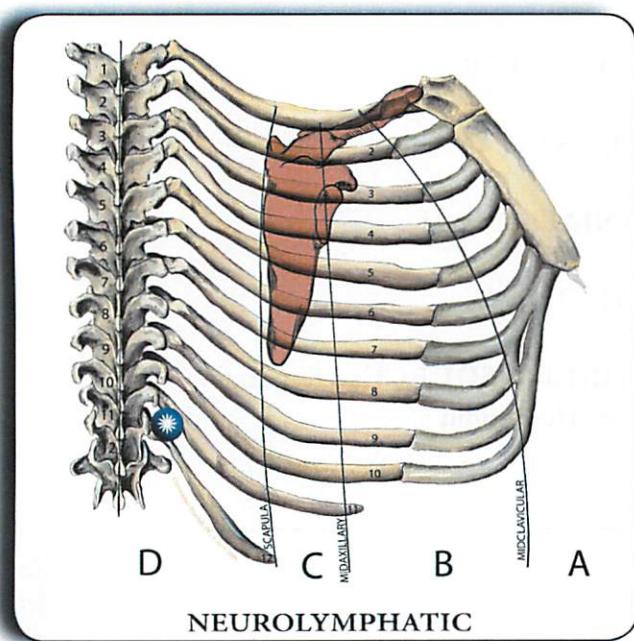




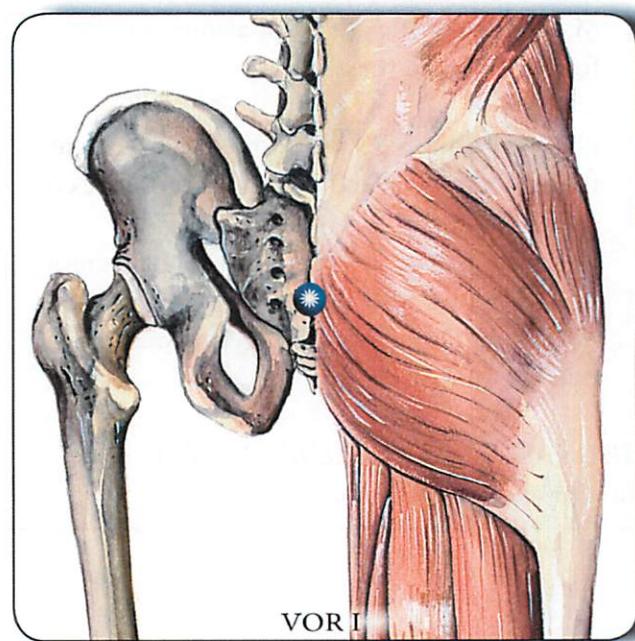
EXTENSOR DIGITORUM LONGUS, MEDIAL DIV.



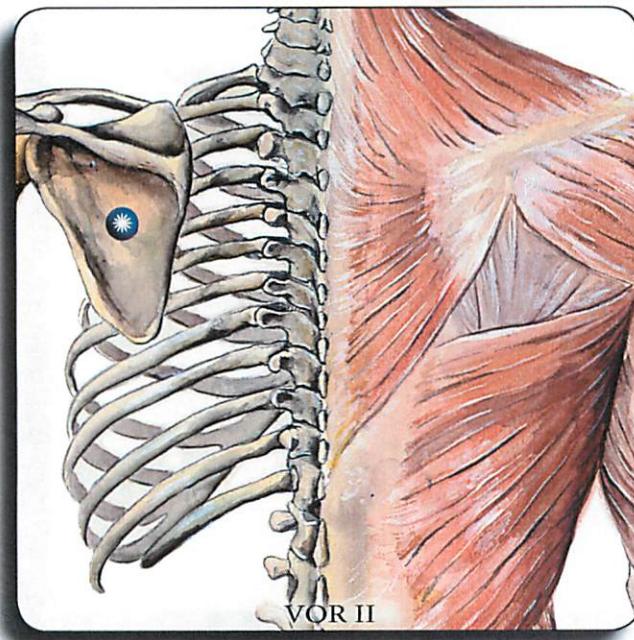
NEUROVASCULAR



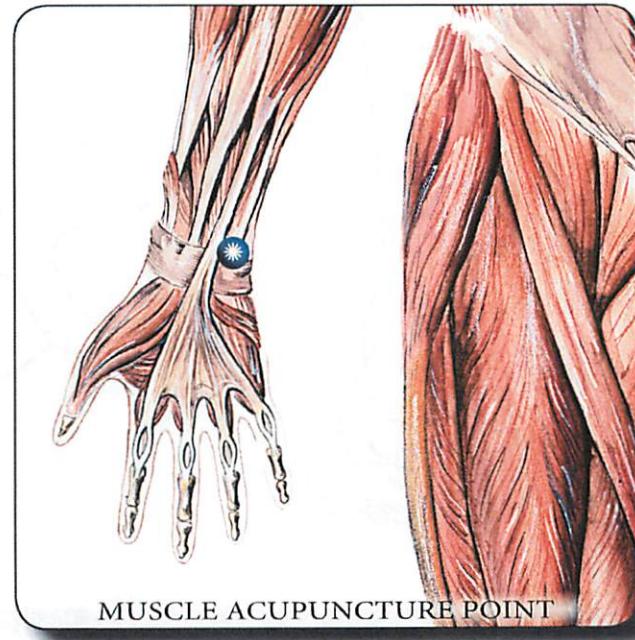
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 912: EXTENSOR DIGITORUM LONGUS, (Medial Division)

ORIGIN:

1. Lateral condyle of tibia.
2. Proximal 2/3 of fibula.
3. Upper part of interosseous membrane.
4. Intramuscular septa.

INSERTION: Base of the middle phalanx of the second and third toes.

ACTION: Dorsiflexes the middle and distal phalanges of the second and third toes and with continued action dorsiflexes the foot.

TEST:

Patient: Position: Supine.

M.T.P.: Dorsiflex middle and distal phalanges of second and third toes.

Doctor: Position: End of table facing patient.

Brace: Plantar aspect of the proximal phalanx.

Contact: Dorsal surface of middle phalanges.

Direction: Plantar flex through mid-sagittal plane.

NEUROVASCULAR: (Ant/BL) Mandible, near angle of insertion of masseter.

NEUROLYMPHATIC: (Post/R) Eleventh I.C.S., at the spine.

VISCERAL ORGAN:

I. *Prostate/Uterus*: (Post/Midline) Gv 21/2

II. *Heart*: (Post/L) Middle of scapula.

M. A. P. : H 6

V.L. : T10 L

L. B. V.L. : T1 L

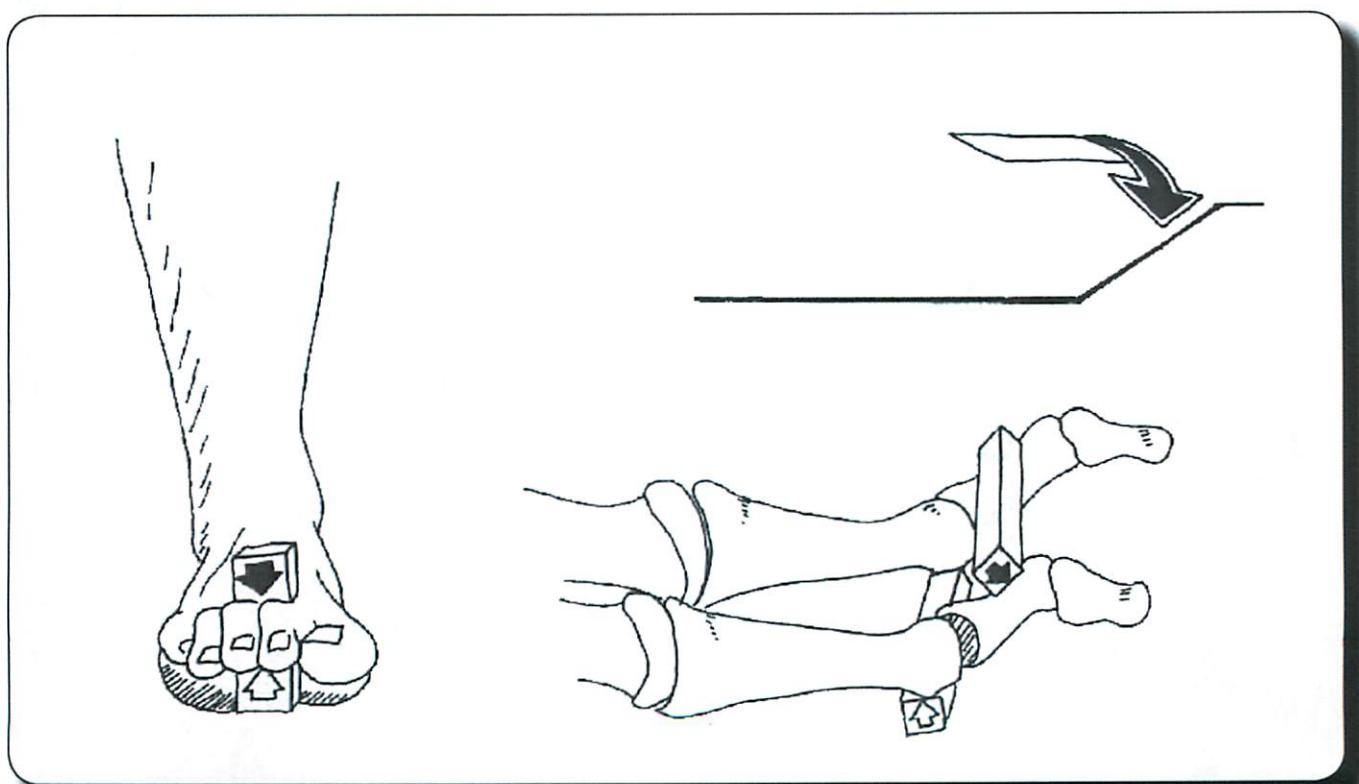
M. M. : L5

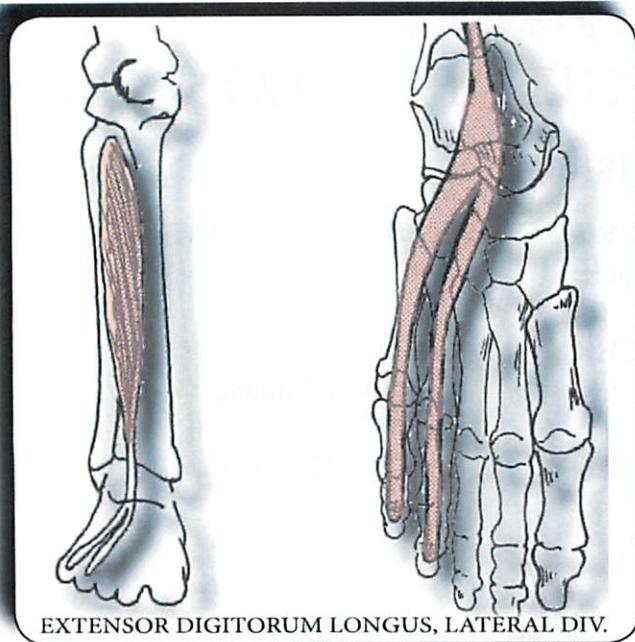
CRANIAL: Maxillary Bone

FOOT: Second Metatarsal

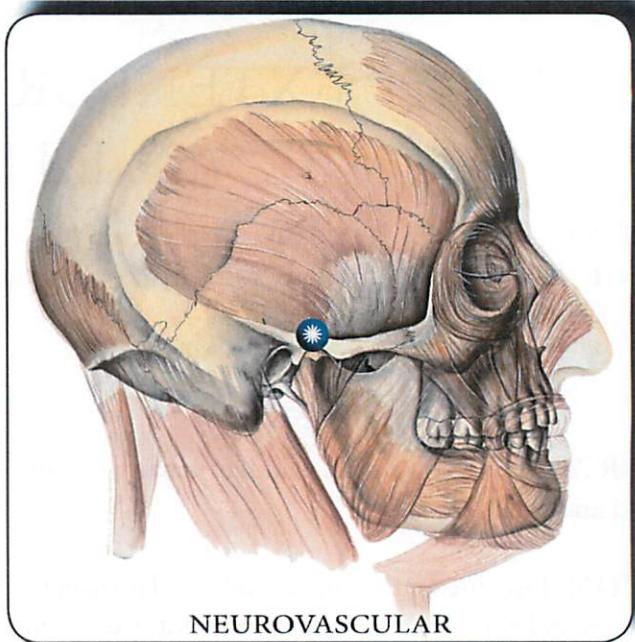
NUTRIENT SOURCE: Copper

1. Core Copper (N.W.)
2. Copper Chelate (N.W.)
3. Allorganic Trace Minerals (S)

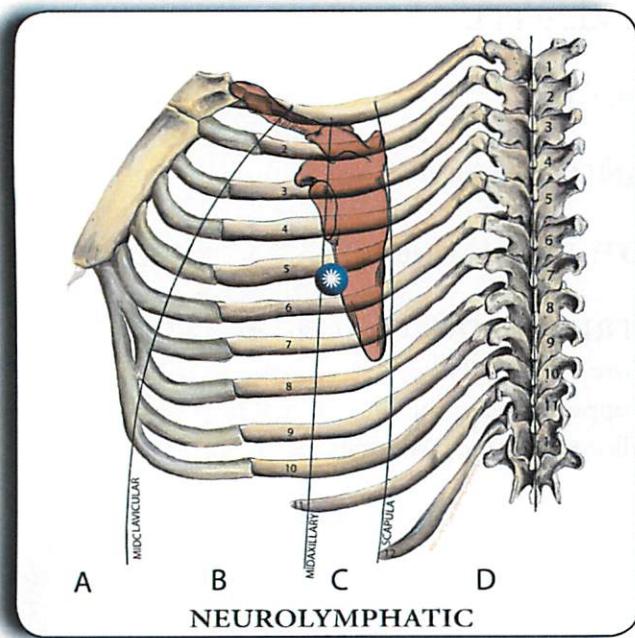




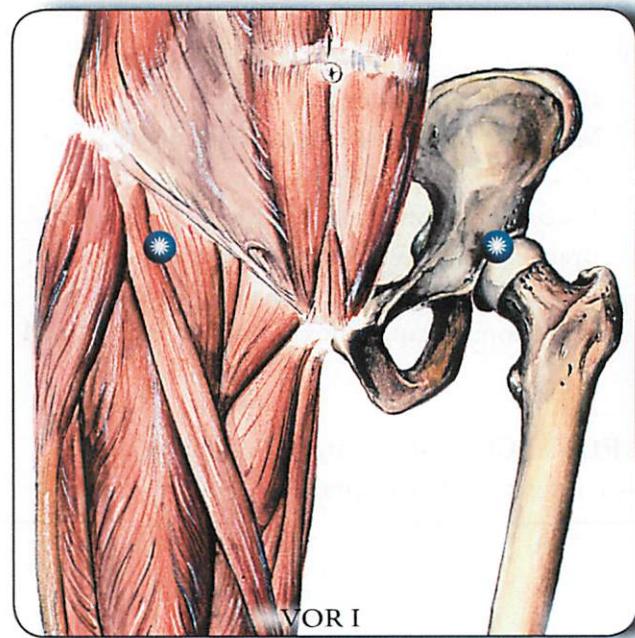
EXTENSOR DIGITORUM LONGUS, LATERAL DIV.



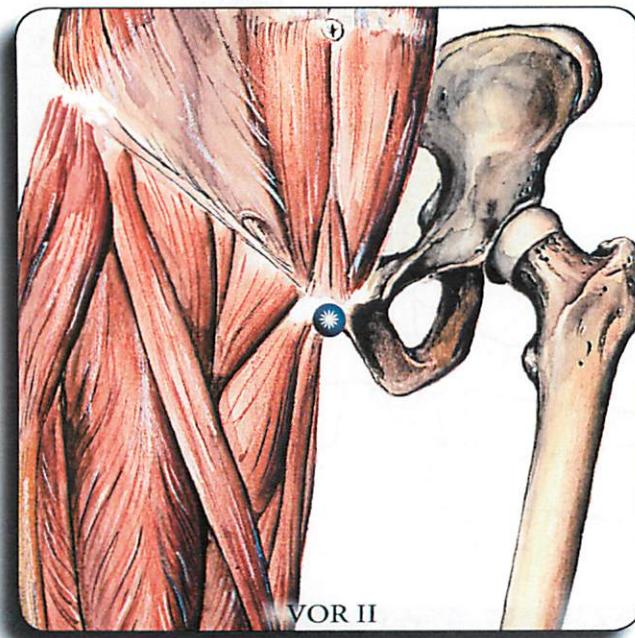
NEUROVASCULAR



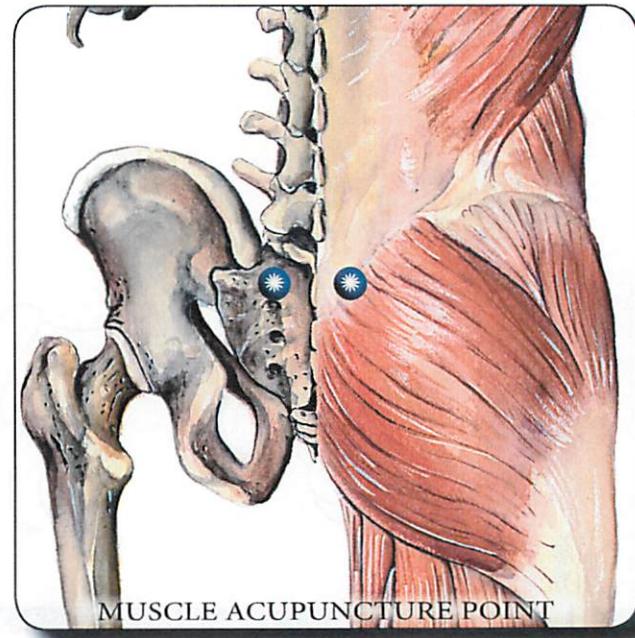
A MIDCLAVICULAR
B MIDAXILLARY
C D NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 914: EXTENSOR DIGITORUM LONGUS, (Lateral Division)

ORIGIN: Upper 3/4 of the anterior surface of the fibula.

INSERTION: Base of the middle phalanx of the fourth and fifth toes.

ACTION: Dorsiflexes middle and distal phalanges of fourth and fifth toes.

TEST:

Patient: Position: Supine.

M.T.P.: Dorsiflex middle and distal phalanges of fourth and fifth toes.

Doctor: Position: End of table facing patient.
Brace: Palmar aspect of the proximal phalanx.
Contact: Dorsal surface of middle phalanges.
Direction: Plantar flex through mid-sagittal plane.

NEUROVASCULAR: (Lat) Temporal bone, zygomatic process, just anterior to ear.

NEUROLYMPHATIC: (Post/L) Fifth I.C.S., parahumeral, 6-8" from spine.

VISCERAL ORGAN:

I. *Thyroid*: (Ant/BL) Acetabulum, external anterior lip.

II. *Posterior Pituitary*: (Ant/Midline) Cv 1.3.

M. A. P. : B 27

V.L. : T10 L

L. B. V.L. : T1 L

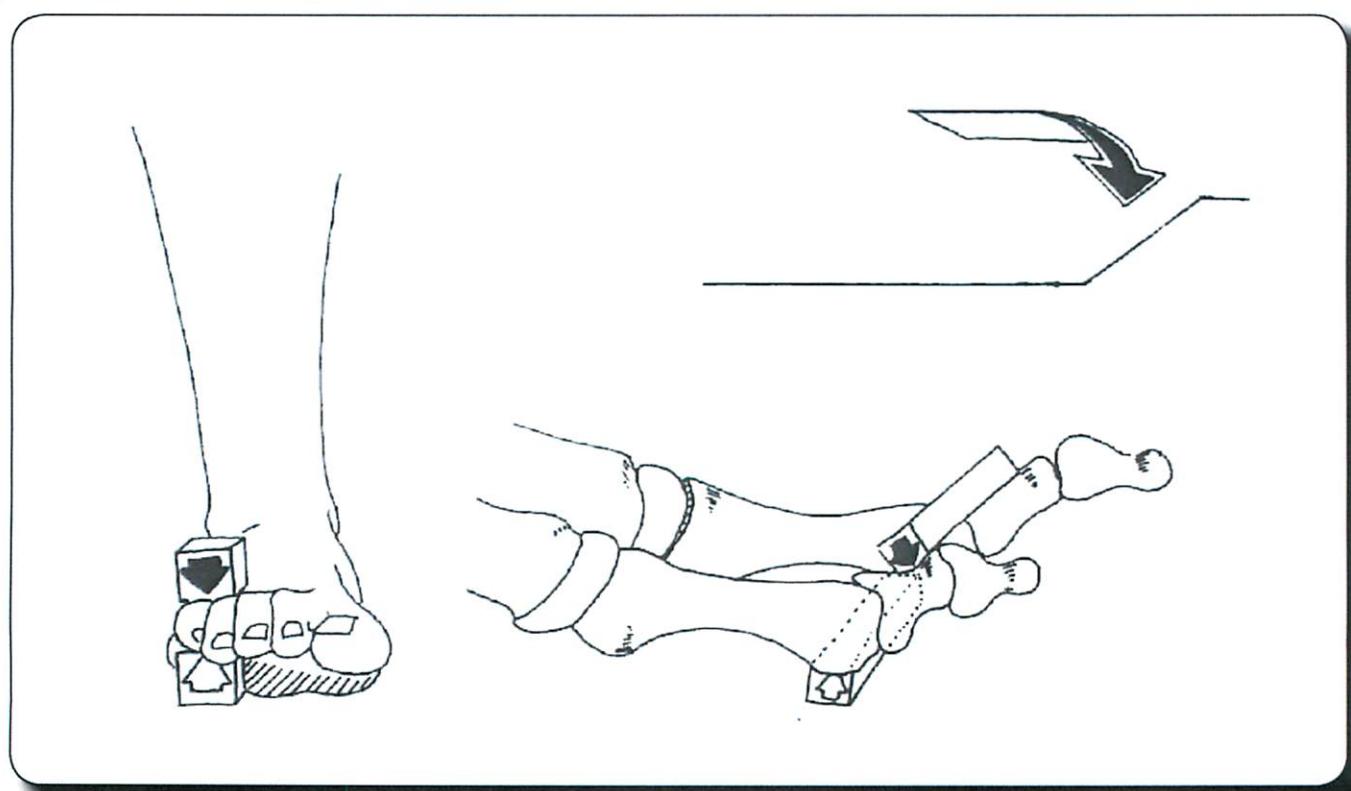
M. M. : S1

CRANIAL: Occiput

FOOT: Calcaneus

NUTRIENT SOURCE: Magnesium

1. Core Magnesium (N.W.)
2. Magnesium Chelate (N.W.)
3. Min Chex (S)



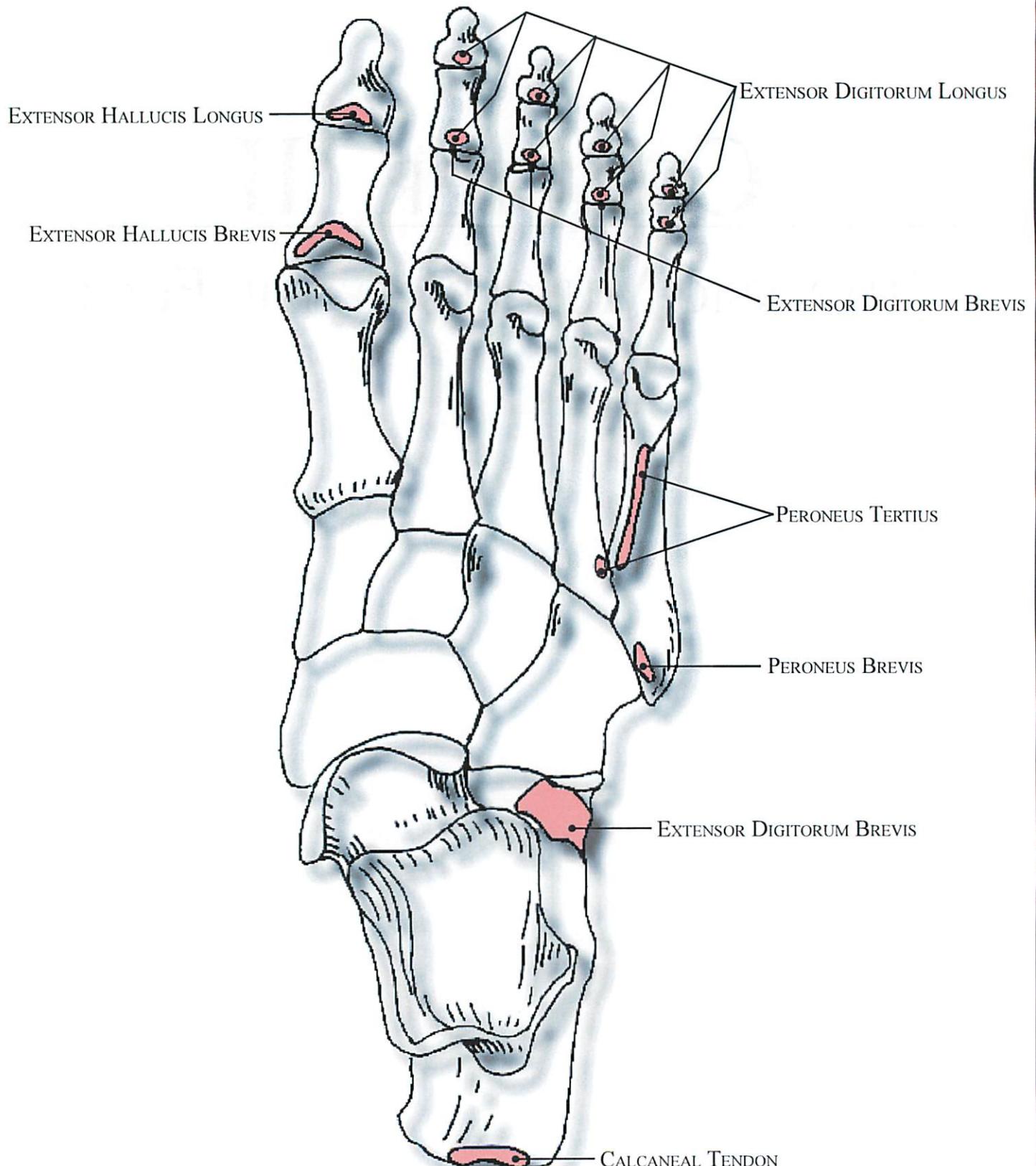


CHAPTER III

INTRINSIC MUSCLES OF THE FOOT

ORIGIN AND INSERTION

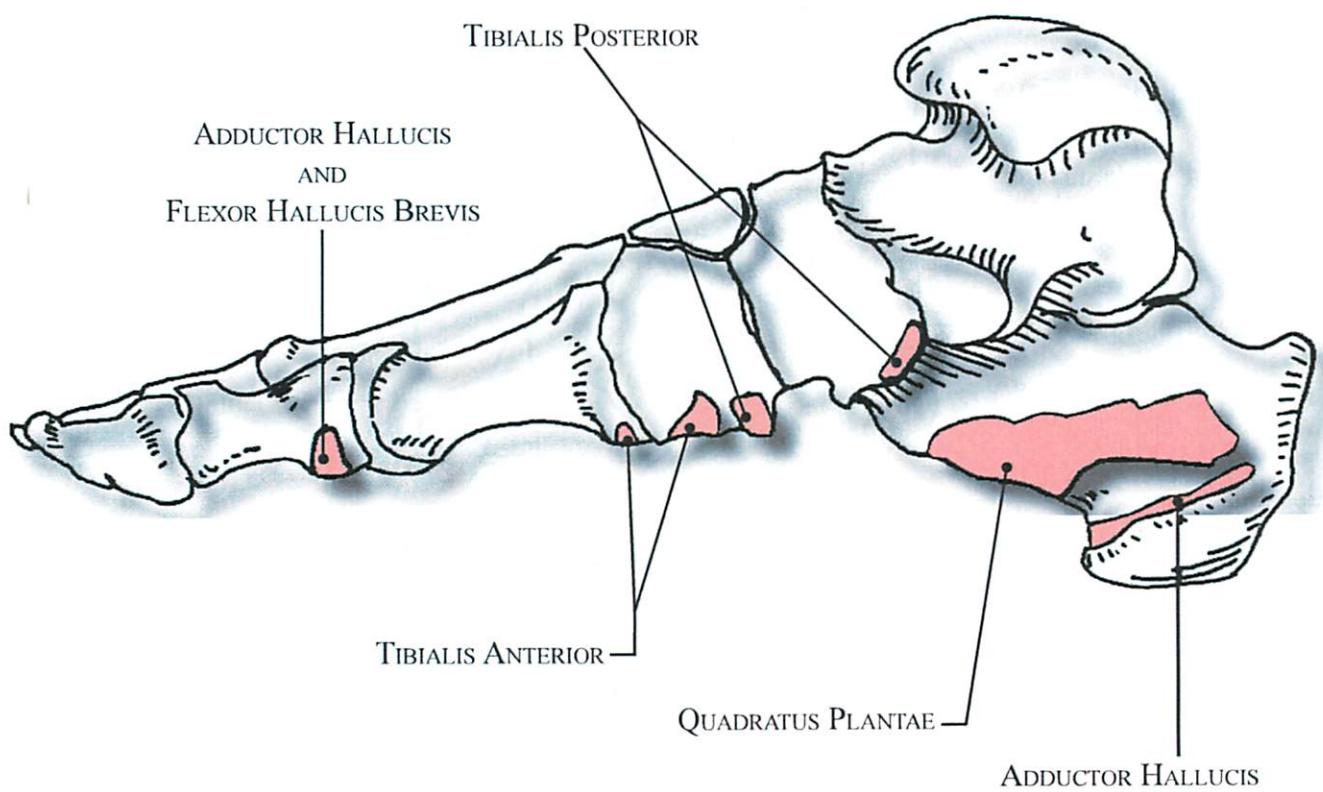
CALF AND FOOT MUSCLES



SUPERIOR VIEW OF FOOT

ORIGIN AND INSERTION

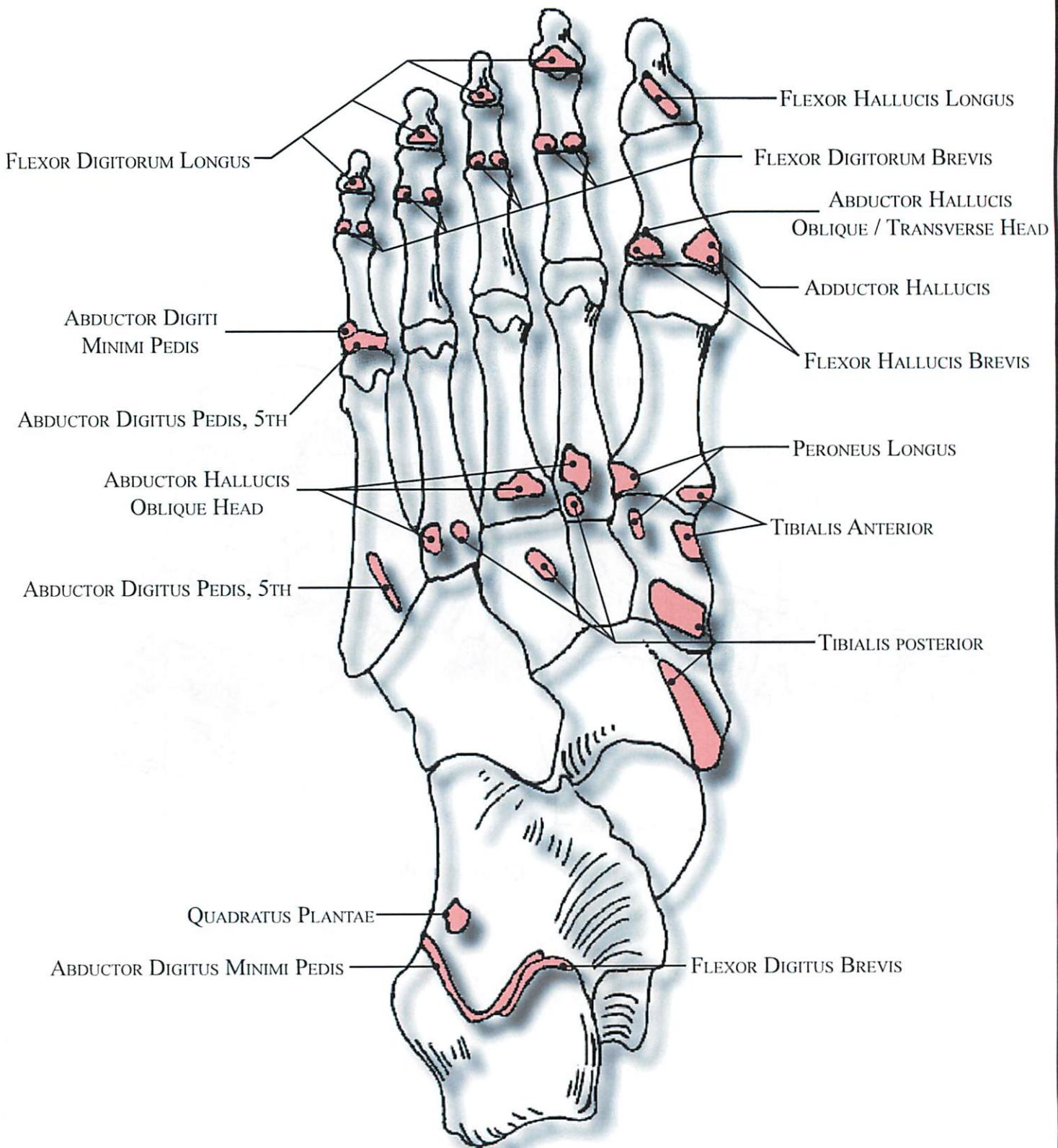
CALF AND FOOT MUSCLES



MEDIAL VIEW OF FOOT

ORIGIN AND INSERTION

CALF AND FOOT MUSCLES



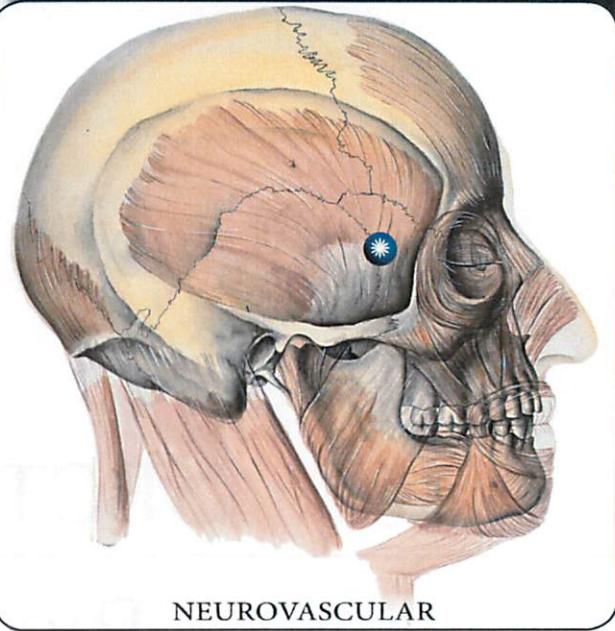
PLANTAR VIEW OF RIGHT FOOT

SECTION I:

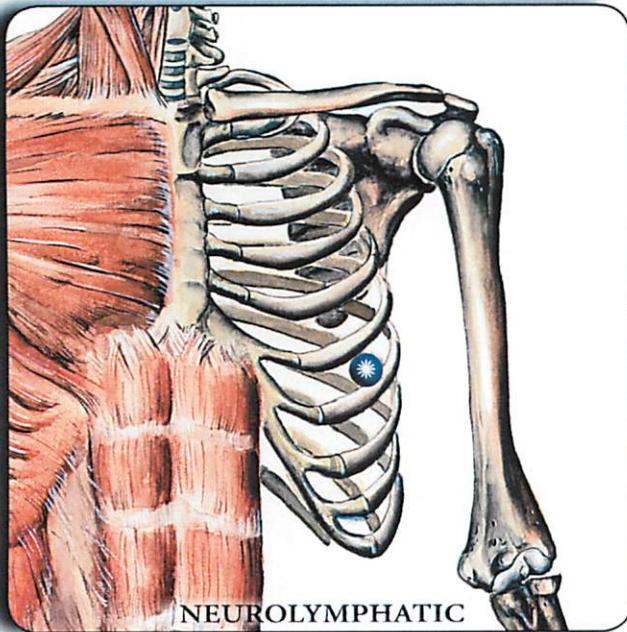
BIG TOES



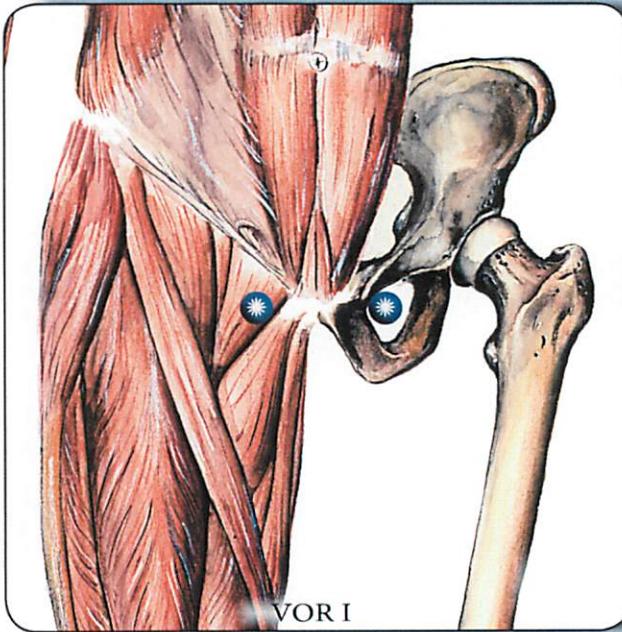
ADDOCTOR HALLUCIS, SUPERIOR DIV.



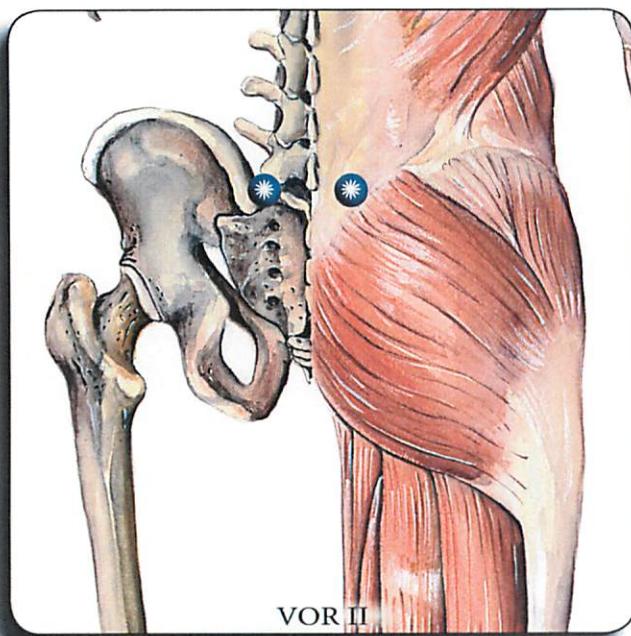
NEUROVASCULAR



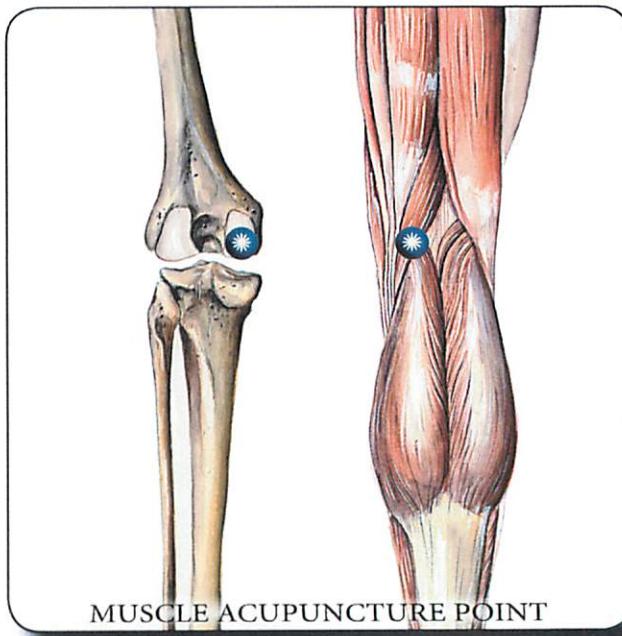
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 920: ADDUCTOR HALLUCIS, (Abductor Hallucis, Superior Division)

ORIGIN: Medial process of the tuberosity of calcaneus, lacinate ligament.

INSERTION: Medial tendon of the base of the proximal phalanx of the great toe.

ACTION: Adducts the great toe. Assists in foot adduction, inversion and supination. Stabilizes the longitudinal arch.

TEST:

Patient: Position: Supine.

M.T.P: Foot in 90 degrees dorsiflexion, 45 degrees adduction and inverted. Flex great toe.

Doctor: Position: End of table facing patient.

Brace: Lateral aspect of calcaneus.

Contact: Medial aspect of first metatarsal.

Direction: Evert and abduct foot.

NEUROVASCULAR: (Lat) Sphenosquamosal suture, middle part of the greater wing.

NEUROLYMPHATIC: (Ant/L) Sixth I.C.S., past mid-clavicular line.

VISCERAL ORGAN:

I. *Anterior Pituitary*: (Ant/BL) Middle of obturator foramina.

II. *Prostate/Uterus*: (Post/BL) B 25; level of L5 - S1 junction.

M. A. P. : K 10

V.L. : L3 L

L. B. V.L. : C3 L

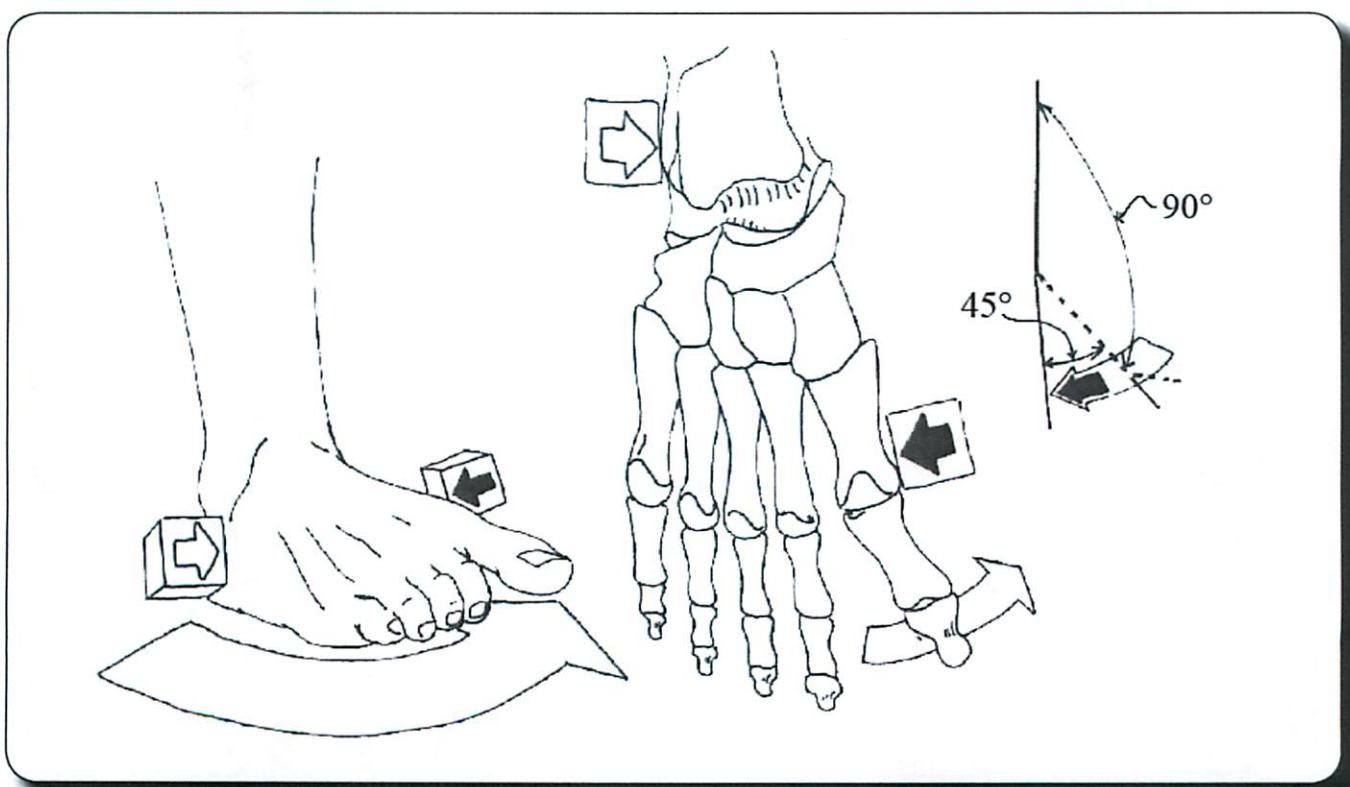
M. M. : S1

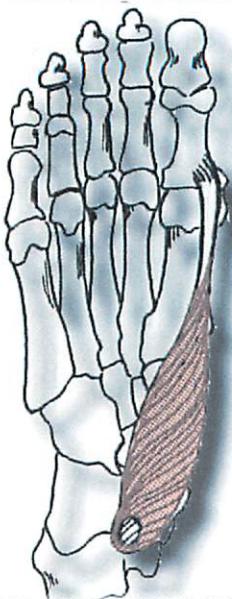
CRANIAL: Ethmoid

FOOT: First Cuneiform

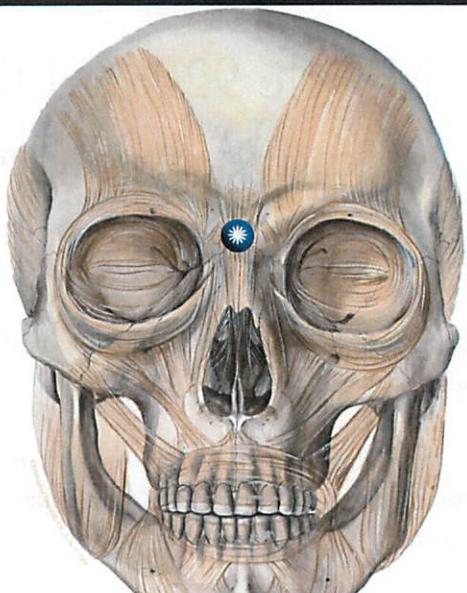
NUTRIENT SOURCE: Potassium

1. Organic Minerals (S)
2. Core Potassium (N.W.)
3. Aspartic K (N.W.)

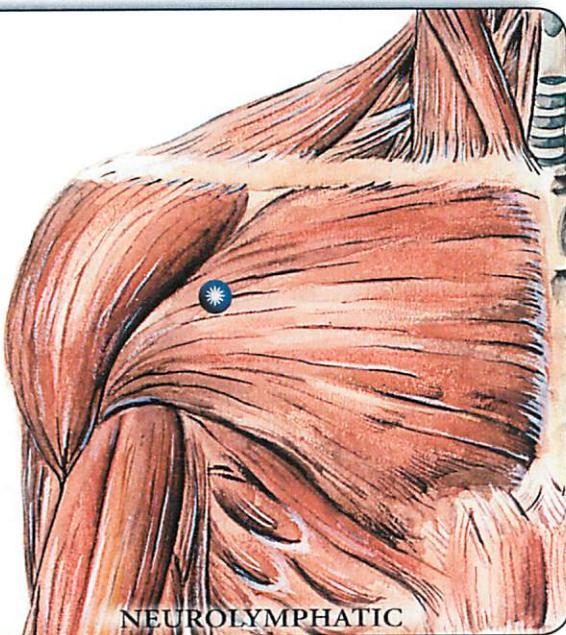




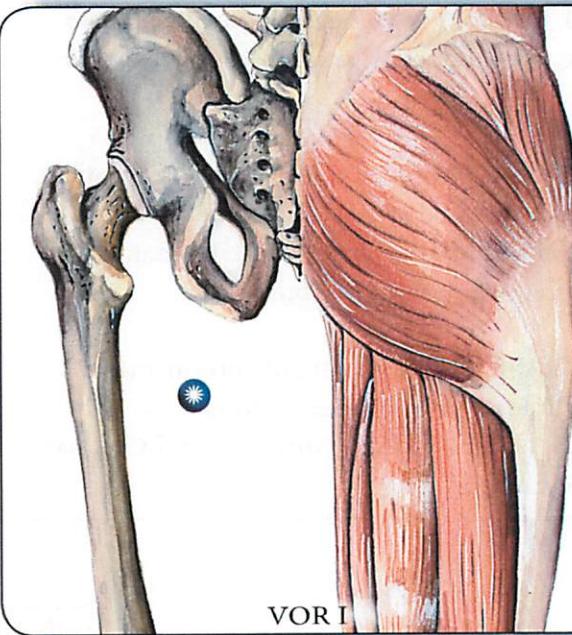
ADDUCTOR HALLUCIS, INFERIOR DIV.



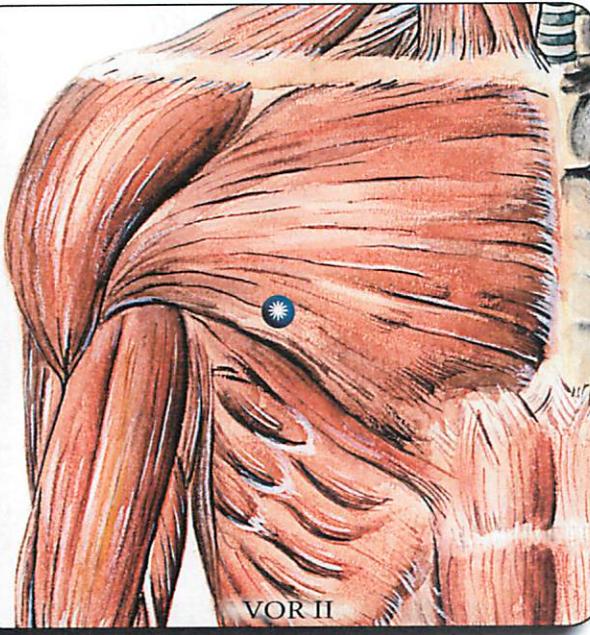
NEUROVASCULAR



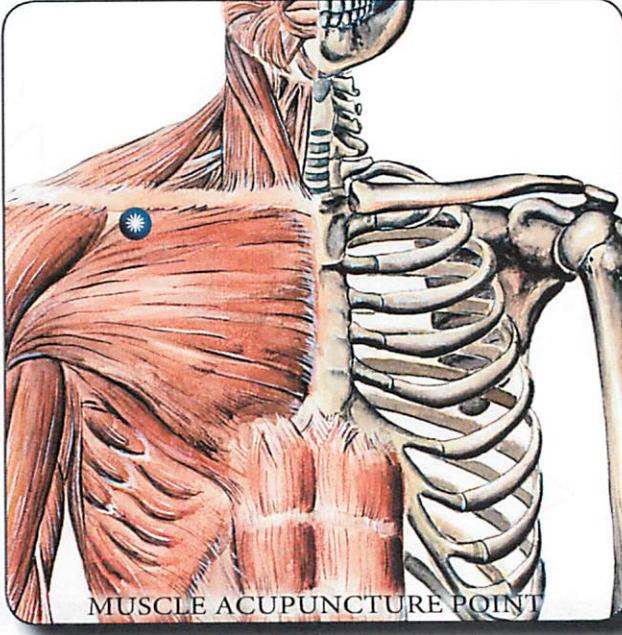
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 922: ADDUCTOR HALLUCIS, (Abductor Hallucis, Inferior Division)

ORIGIN: From calcaneus plantar aponeurosis, intermuscular septum and flexor digitorum brevis.

INSERTION: Tibial side of the base of the proximal phalanx of great toe.

ACTION: Flexes and adducts the great toe. Assists in foot supination.

TEST:

Patient: Position: Supine.

M.T.P.: Foot in 110 degrees dorsiflexion; flex and adduct great toe, slightly plantar flex and invert foot.

Doctor: Position: End of table facing patient.

Brace: Lateral aspect of calcaneus.

Contact: Medial aspect of first metatarsal.

Direction: Abduct foot.

NEUROVASCULAR: (Ant/Midline) Junction of nasal and frontal bones; bridge of nose midline.

NEUROLYMPHATIC: (Ant/R) Second I.C.S., 4-6" lateral to sternum.

VISCERAL ORGAN:

I. *Heart:* (Post/L) B 50; junction of gluteus maximus and hamstrings.

II. *Liver:* (Ant/R) Cx 1; fifth rib, just lateral to nipple.

M. A. P. : L 2

V.L. : L3 L

L. B. V.L. : C3 L

M. M. : S1

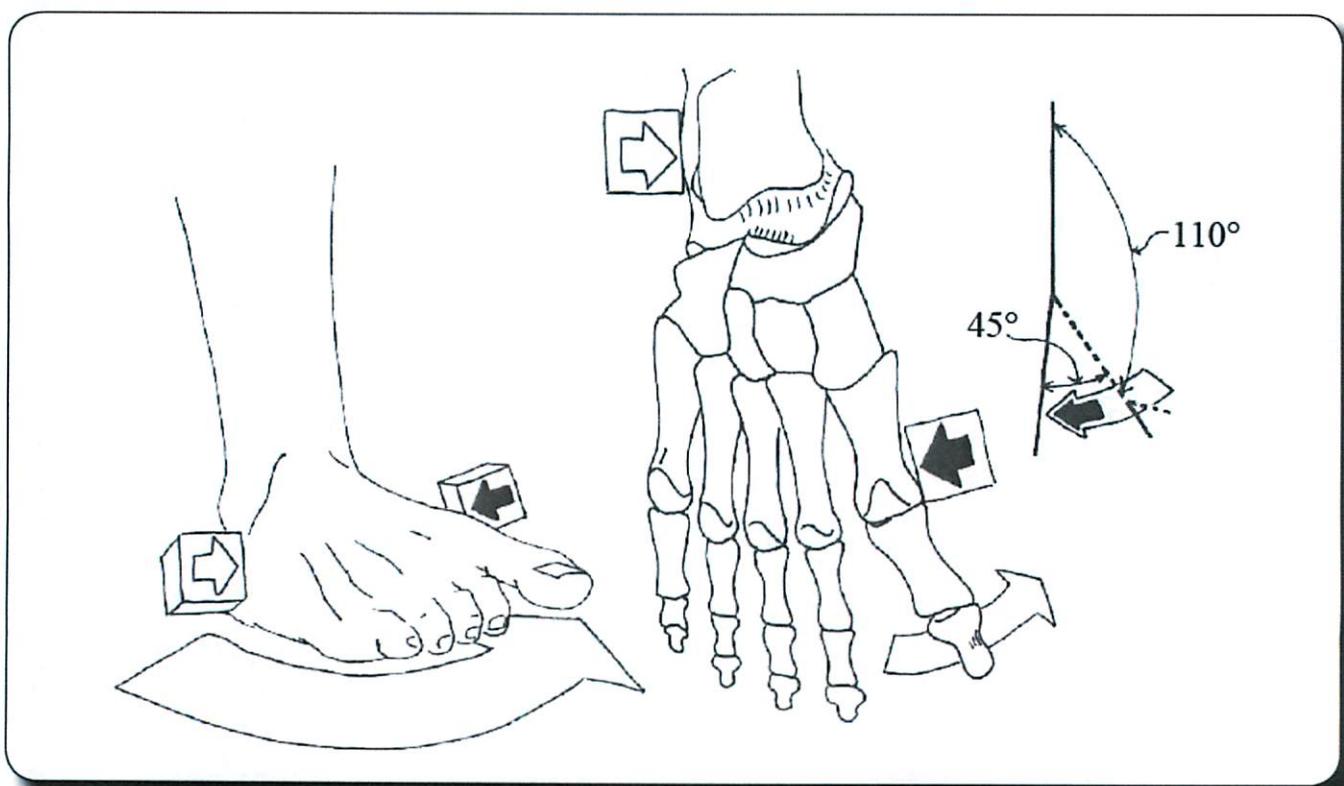
CRANIAL: Maxillary

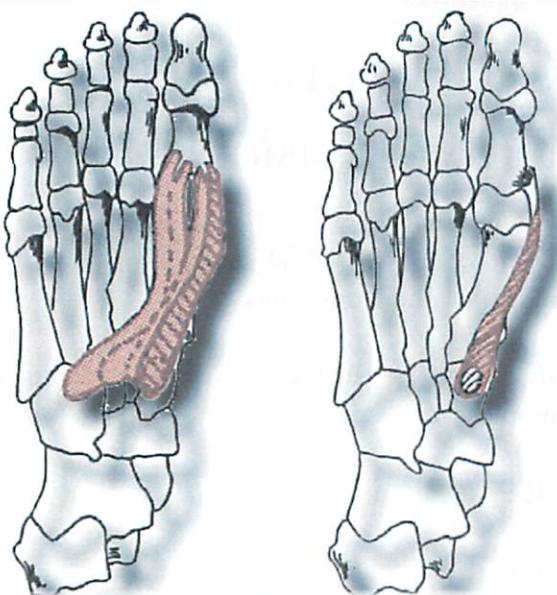
FOOT: Fifth Metatarsal

NUTRIENT SOURCE:

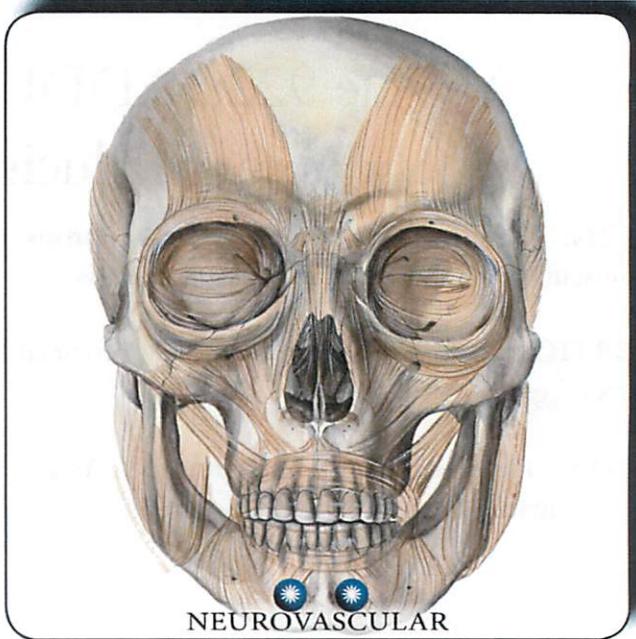
Potassium

1. Organic Minerals (s)
2. Core Potassium (N.W.)
3. Aspartic K (N.W.)

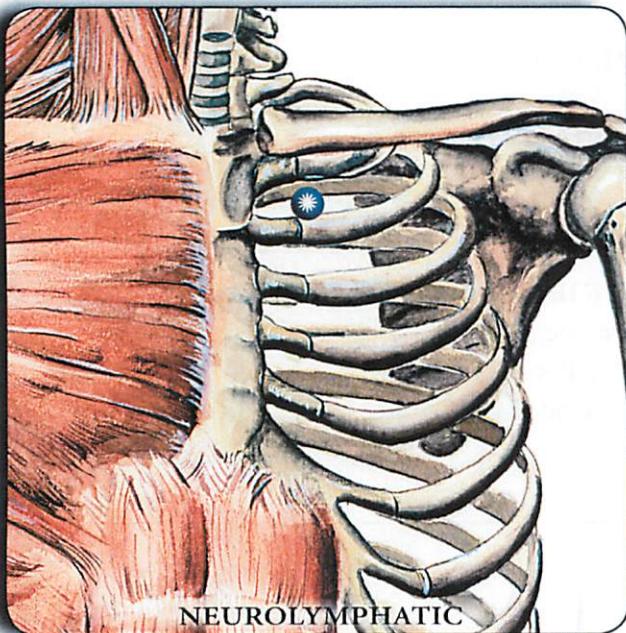




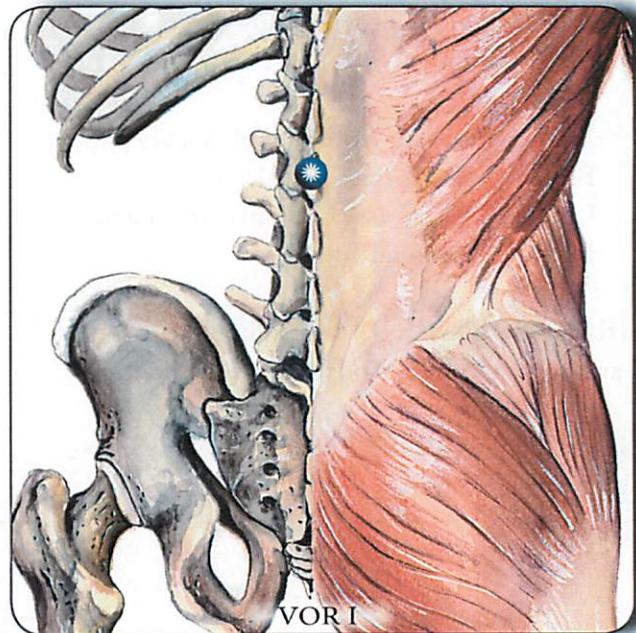
ADDUCTOR HALLUCIS, INFERIOR DIV.



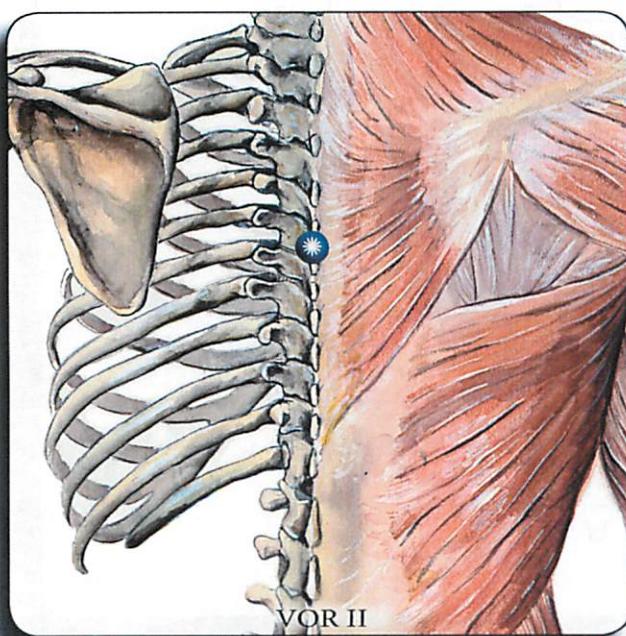
NEUROVASCULAR



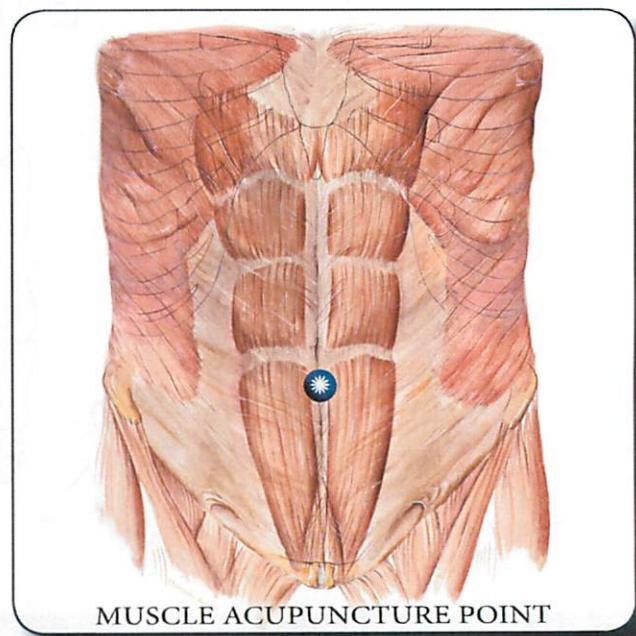
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 924: FLEXOR HALLUCIS BREVIS, (First Cuneiform Division)

ORIGIN: First cuneiform.

INSERTION: Medial side of the proximal phalanx of the great toe.

ACTION: Flexes and everts the proximal phalanx of the great toe against the first metatarsal.

TEST:

Patient: Position: Supine.

M.T.P.: Plantar flex proximal phalanx of great toe, keeping distal phalanx extended.

Doctor: Position: End of table facing patient.
Brace/Contact: Proximal phalanx of great toe with thumb and index fingers. Keep pressure on medial side of toe and turn toe clockwise.

Direction: Extend or dorsiflex through mid-sagittal plane.

NEUROVASCULAR: (Ant/BL) Mandible, posterior side, just lateral to midline on origin of mylohyoideus.

NEUROLYMPHATIC: (Ant/L) First I.C.S. 1" from sternum.

VISCERAL ORGAN:

I. *Pineal:* (Post/Midline) Gv 4; between L2 and L3.

II. *Lymphatics of Stomach:* (Post/Midline) Gv 11; between sixth and seventh thoracic vertebrae.

M. A. P.: Cv 7

V.L.: T1 L

L. B. V.L.: T10 L

M. M.: S2

CRANIAL: Lacrimal

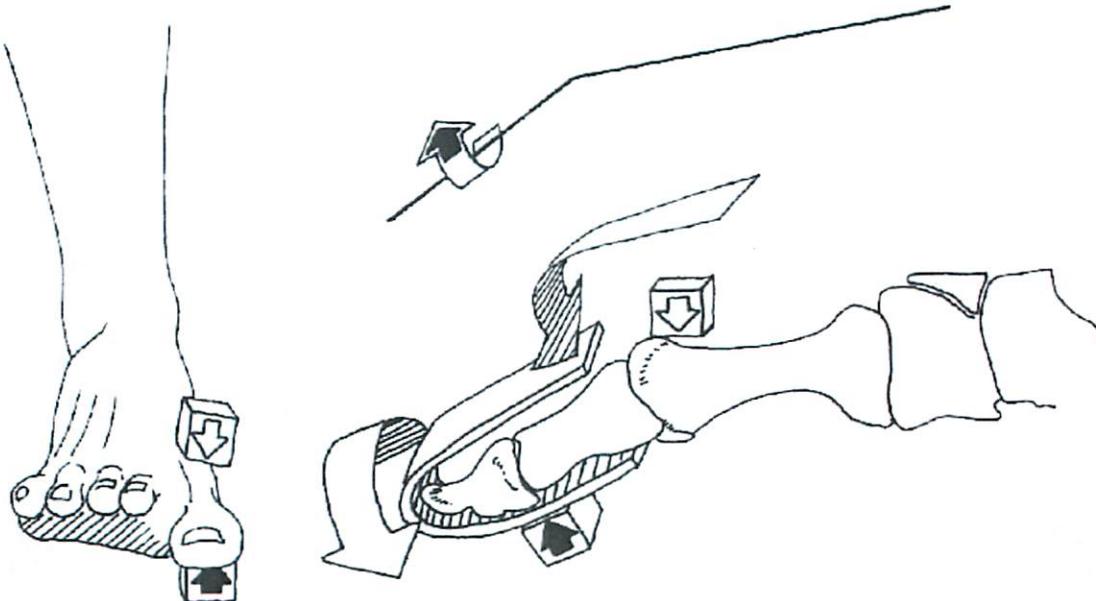
FOOT: Proximal Phalanx of Second Toe

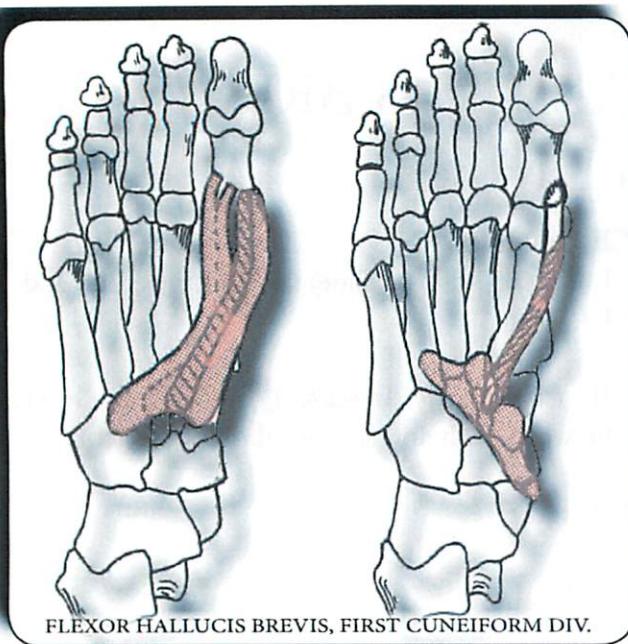
NUTRIENT SOURCE:

Vitamin B12

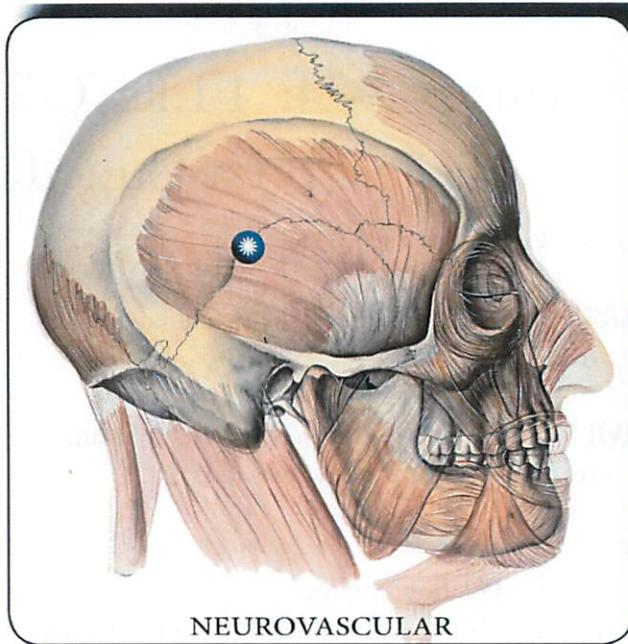
1. B12 (S)

2. Core B12 (N.W.)

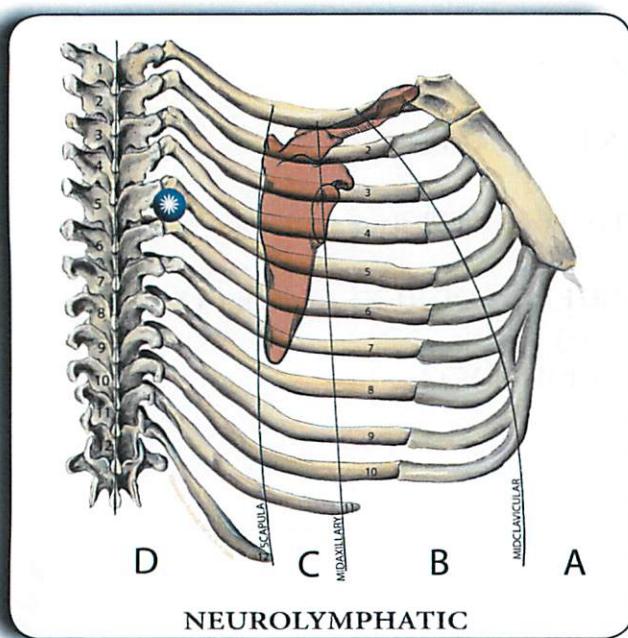




FLEXOR HALLUCIS BREVIS, FIRST CUNEIFORM DIV.

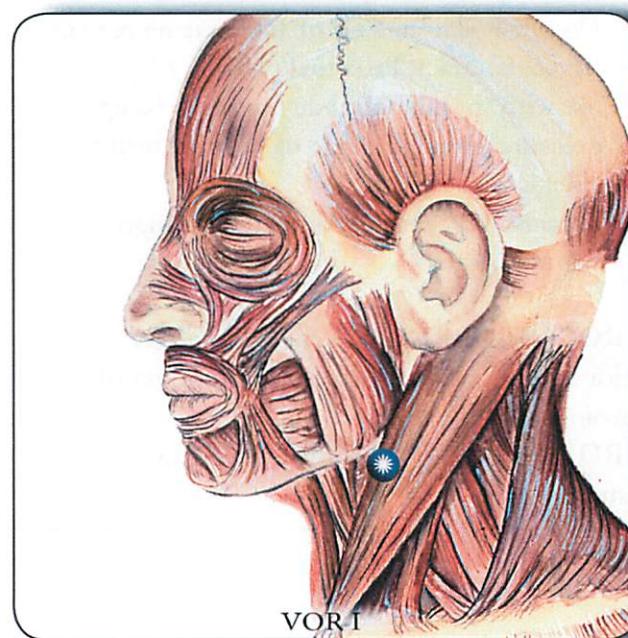


NEUROVASCULAR



D C B A

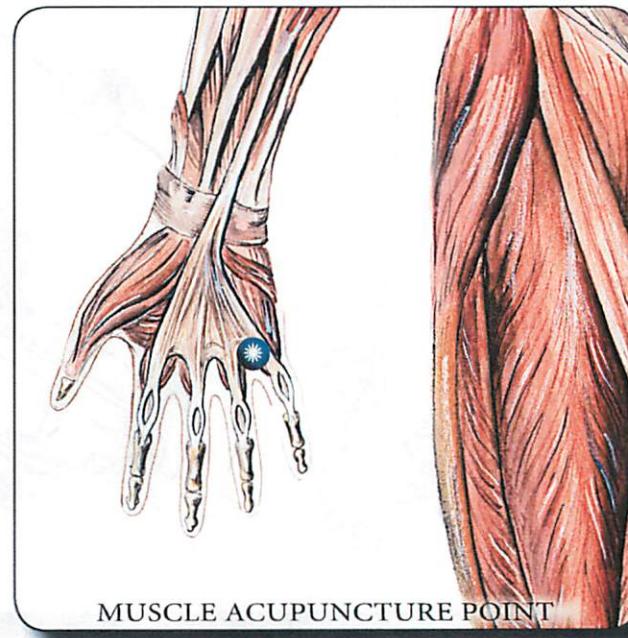
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 926: FLEXOR HALLUCIS BREVIS, (Tendon Division)

ORIGIN: Prolongation of the tendon of tibialis posterior.

INSERTION: Medial side of the proximal phalanx of the great toe.

ACTION: Flexes the proximal phalanx of the great toe against the first metatarsal.

TEST:

Patient: Position: Supine

M.T.P.: Plantar flex proximal phalanx of great toe while keeping distal phalanx extended.

Doctor: Position: End of table facing patient.
Brace/Contact: Proximal phalanx of great toe with thumb and index finger. Keep pressure on medial side of toe and turn toe clockwise.
Direction: Dorsiflex through mid-sagittal plane.

NEUROVASCULAR: (Lat) Squamosal suture of temporal bone, 3" superior to external auditory canal and 1" posterior.

NEUROLYMPHATIC: (Post/R) Fifth I.C.S. at the spine.

VISCERAL ORGAN:

I. *Tonsils:* (Ant/BL) Li 18 1/4;
Sternocleidomastoideus, upper muscle belly.

II. *Pancreatic - Duct System:* (Ant/BL) Rectus abdominis, fourth section, at insertion of muscle on rib cage.

M. A. P. : H 8

V.L. : T8 R

L. B. V.L. : T3 R

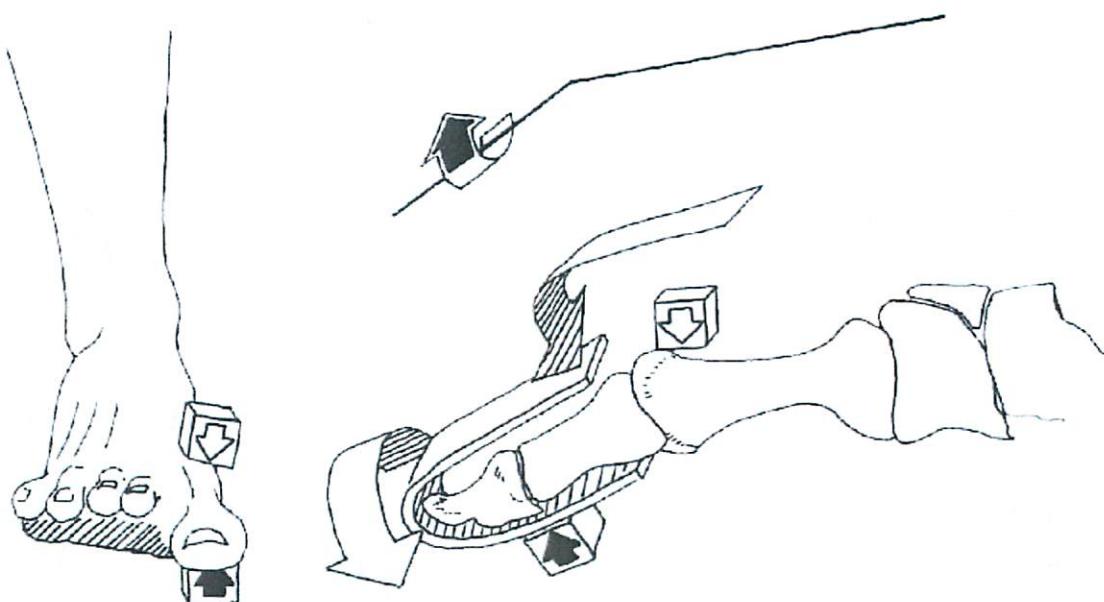
M. M. : S2

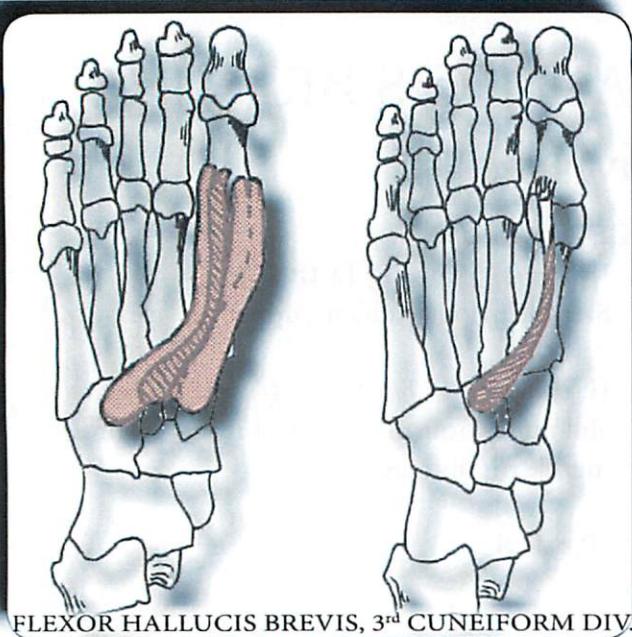
CRANIAL: Frontal

FOOT: Navicular

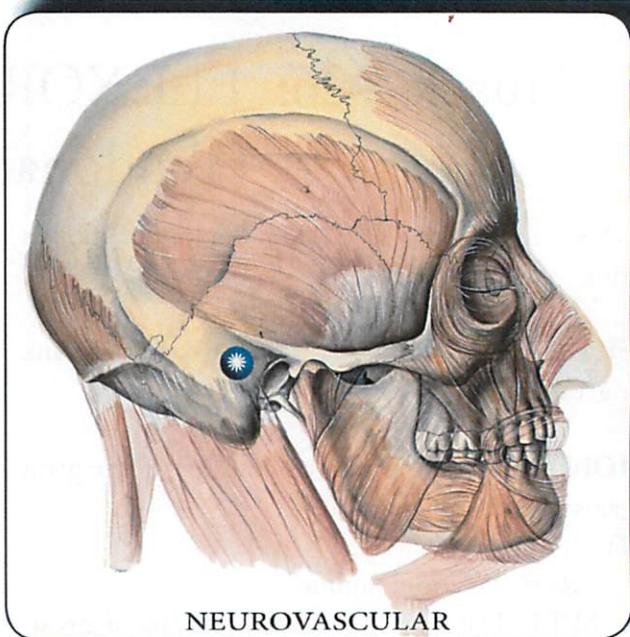
NUTRIENT SOURCE:

1. Iodomere (S)
2. Core Iodine (N.W.)

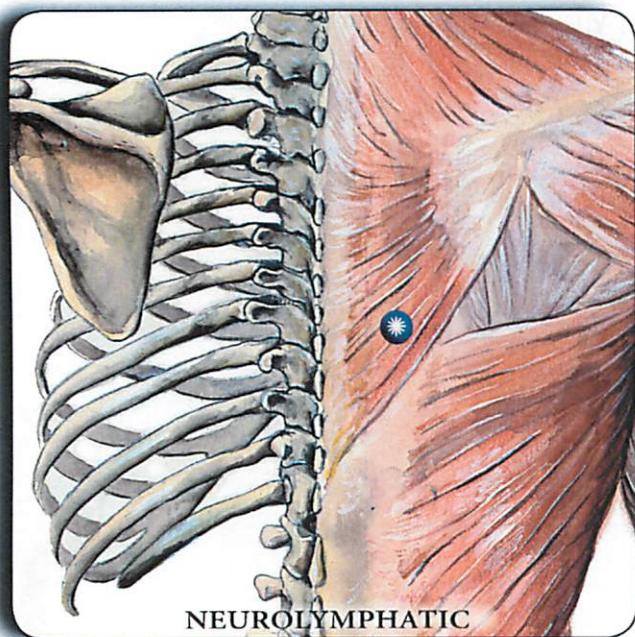




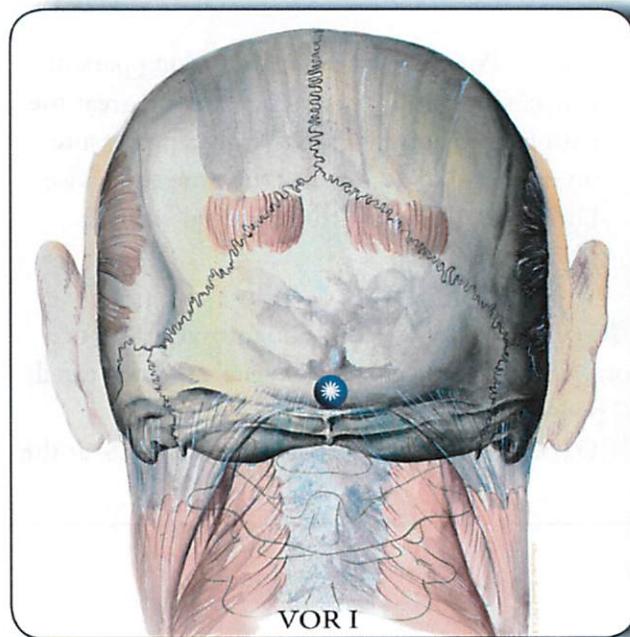
FLEXOR HALLUCIS BREVIS, 3rd CUNEIFORM DIV.



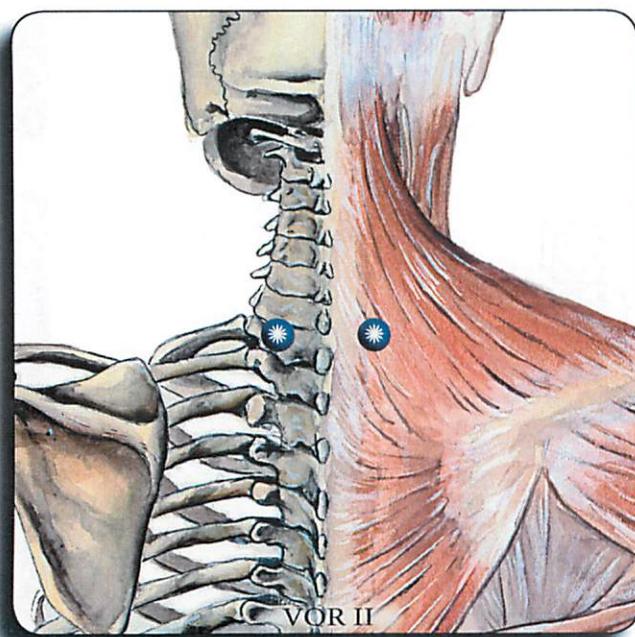
NEUROVASCULAR



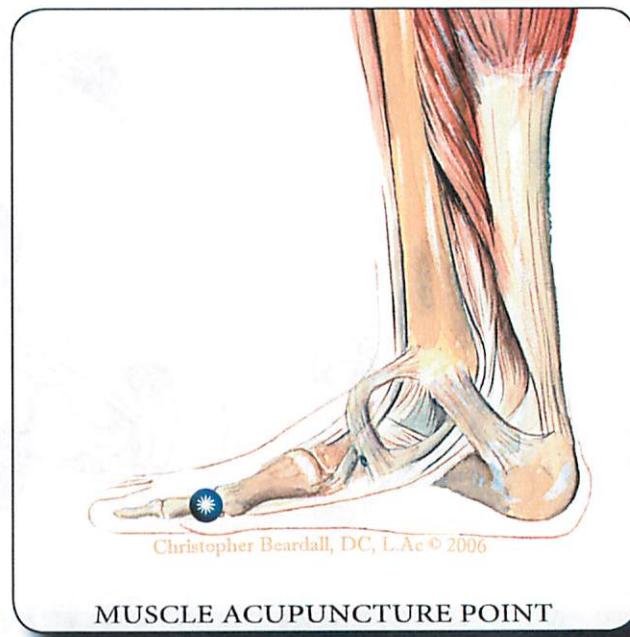
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 928: FLEXOR HALLUCIS BREVIS, (Third Cuneiform Division)

ORIGIN: Contiguous portion of the third cuneiform.

INSERTION: Lateral side of the proximal phalanx of the great toe.

ACTION: Flexes the proximal phalanx of the great toe against the first metatarsal.

TEST:

Patient: Position: Supine

M.T.P.: Plantar flex proximal phalanx of great toe while keeping distal phalanx extended.

Doctor: Position: End of table facing patient.
Brace/Contact: Proximal phalanx of great toe with thumb and index finger.

Maintain pressure on lateral side of toe, turn toe counter-clockwise.

Direction: Dorsiflex through mid-sagittal plane.

NEUROVASCULAR: (Lat) Temporal bone, mastoid portion, directly posterior to external auditory canal.

NEUROLYMPHATIC: (Post/R) Eighth I.C.S., lateral to transverse processes.

VISCERAL ORGAN:

I. *Salivary Gland - Submandibular:* (Post/Midline)
Occipital bone at base of external occipital protuberance

II. *Lungs:* (Post/BL) B 10.9, at level of transverse process of T1.

M. A. P. : Sp 2.5

V.L. : L3 L

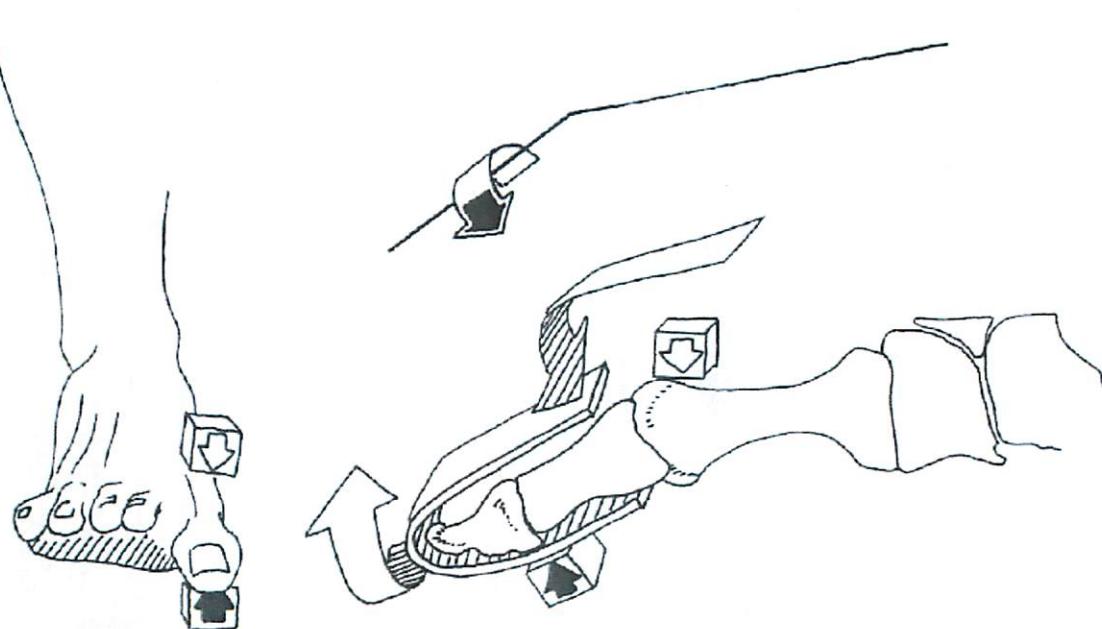
L. B. V.L. : C3 L

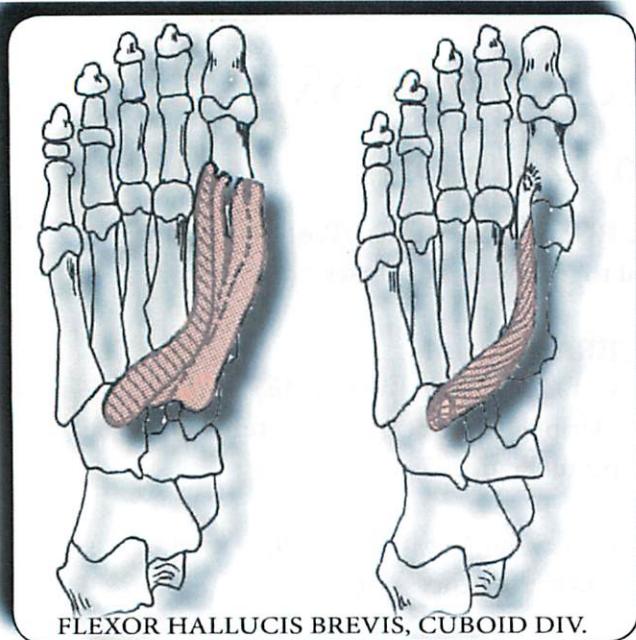
M. M. : S2

CRANIAL: Maxillae

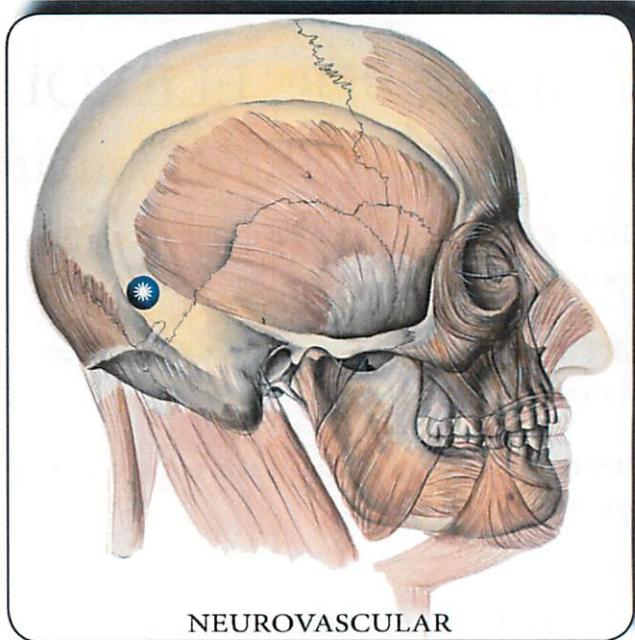
FOOT: Third Cuneiform

NUTRIENT SOURCE: In Research

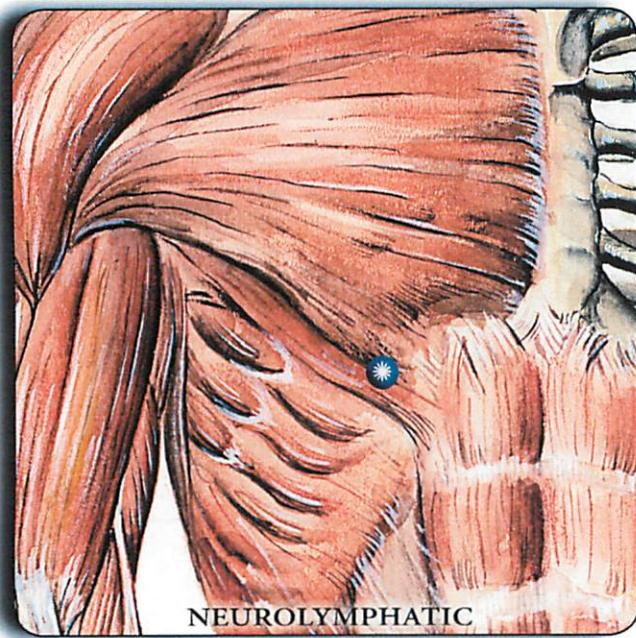




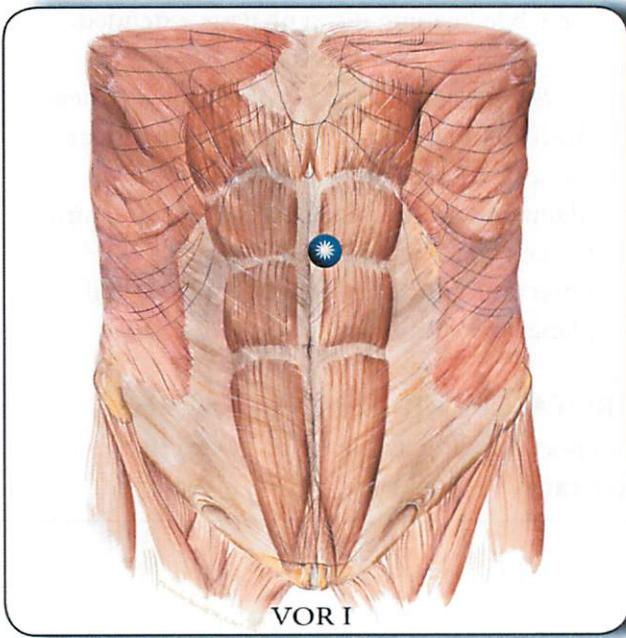
FLEXOR HALLUCIS BREVIS, CUBOID DIV.



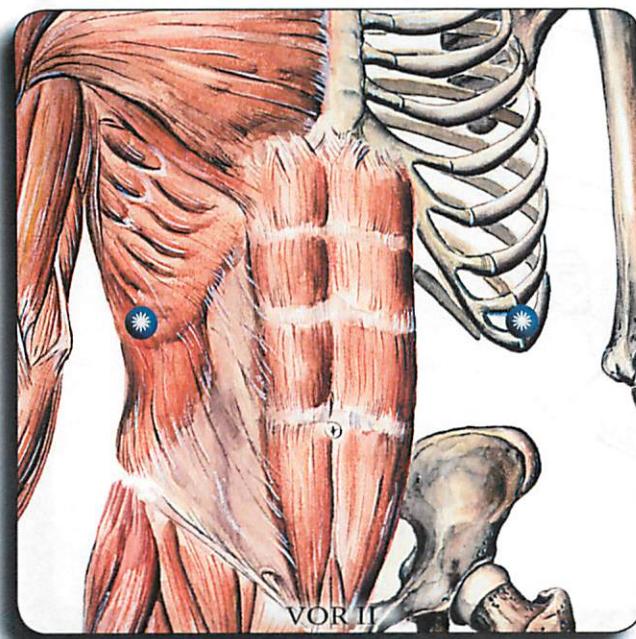
NEUROVASCULAR



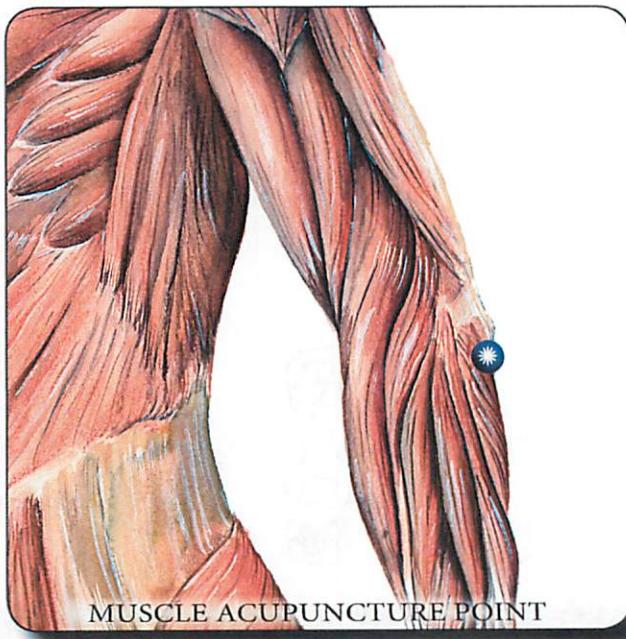
NEUROLymphatic



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 930: FLEXOR HALLUCIS BREVIS, (Cuboid Division)

ORIGIN: Medial plantar surface of cuboid and third cuneiform.

INSERTION: Medial and lateral sides of the base of the proximal phalanx of the great toe.

ACTION: Flexes the proximal phalanx of the great toe against the first metatarsal.

TEST:

Patient: Position Supine.

M.T.P.: Plantar flex proximal phalanx of great toe while keeping distal phalanx extended.

Doctor: Position: End of table facing patient. Brace/Contact : Proximal phalanx of great toe with thumb and index finger. Maintain pressure on lateral side of toe, turn toe counter-clockwise.

Direction: Dorsiflex through mid-sagittal plane.

NEUROVASCULAR: (Lat) Parietal bone, near asterion.

NEUROLYMPHATIC: (Ant/R) Sixth I.C.S., costal cartilage junction.

VISCERAL ORGAN:

I. *Jejunum* - 7th Section: (Ant/L) Rectus abdominis, third section, near origin.

II. *Lungs*: (Ant/BL) Ninth rib, 1" from costal cartilage junction.

M. A. P. : T 9 3/4

V.L. : L5 L

L. B. V.L. : C1 L

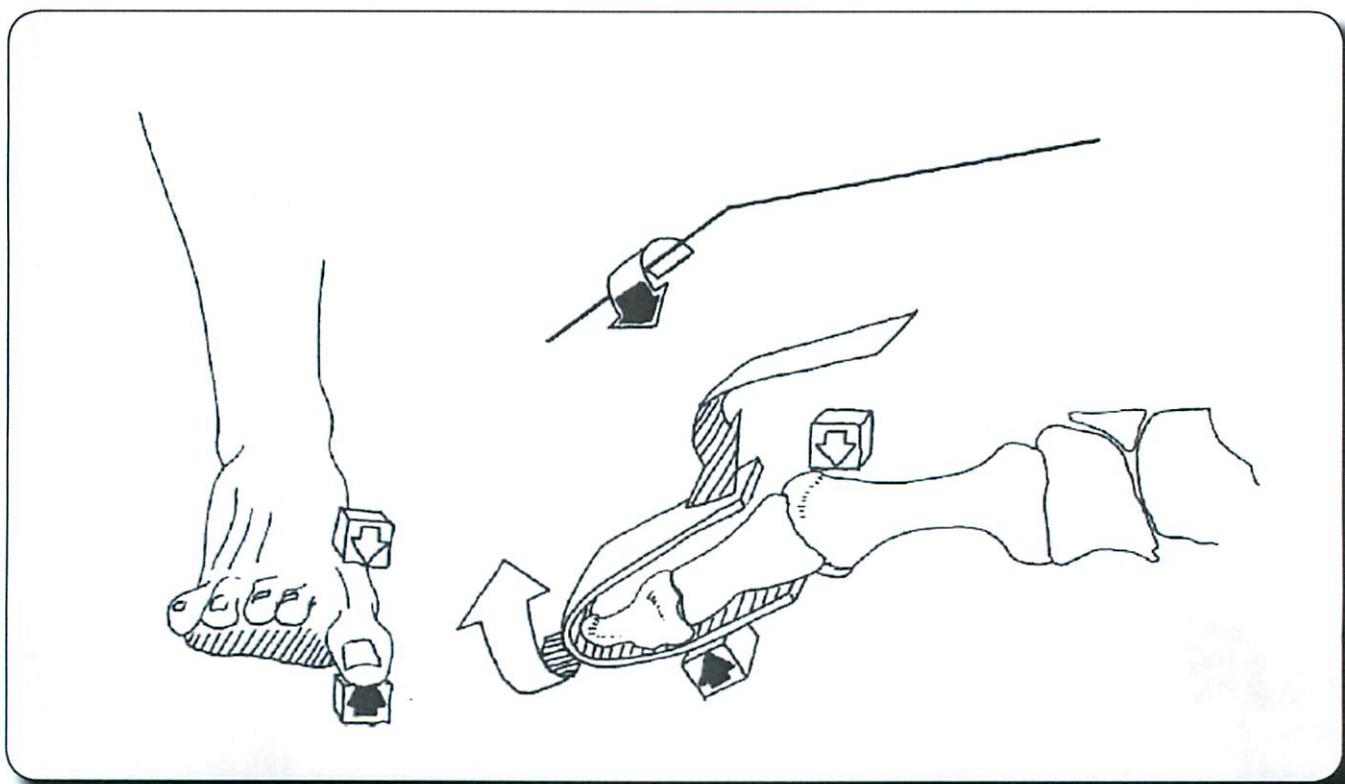
M. M. : S2

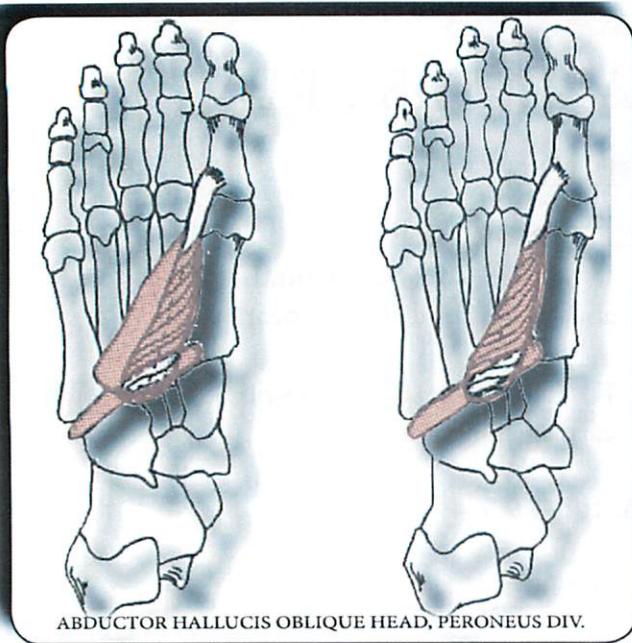
CRANIAL: Palatine

FOOT: First Metatarsal

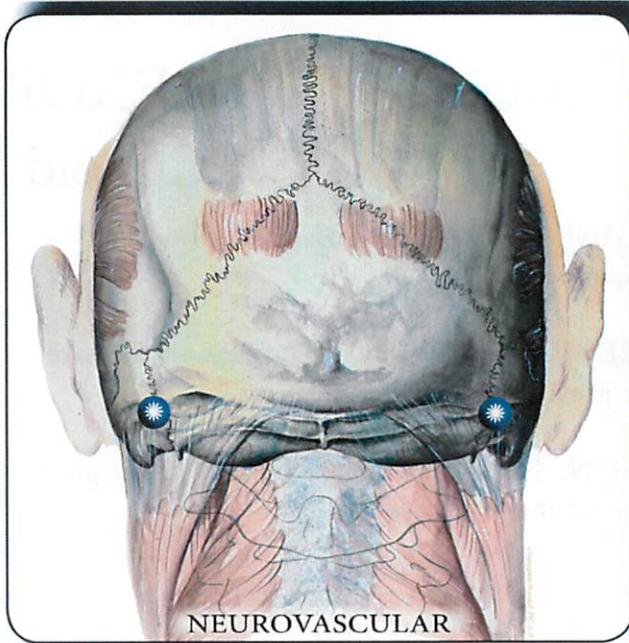
NUTRIENT SOURCE:

- 1. Organic Minerals (S)
- 2. Core Potassium (N.W.)
- 3. Aspartic K (N.W.)

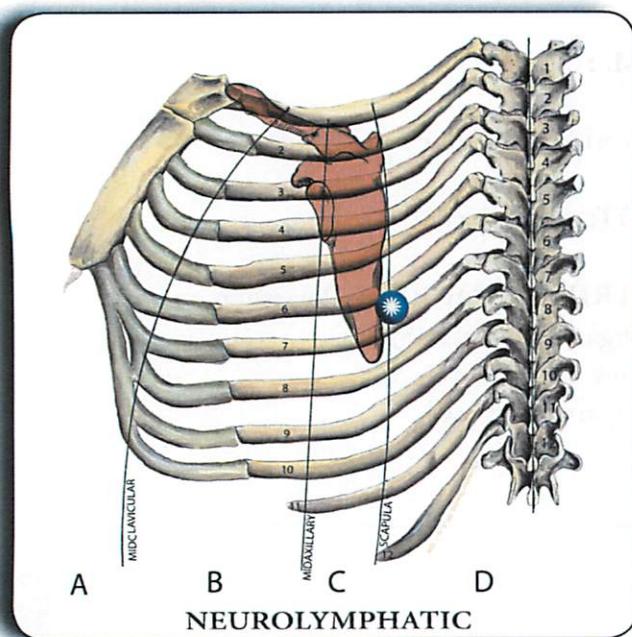




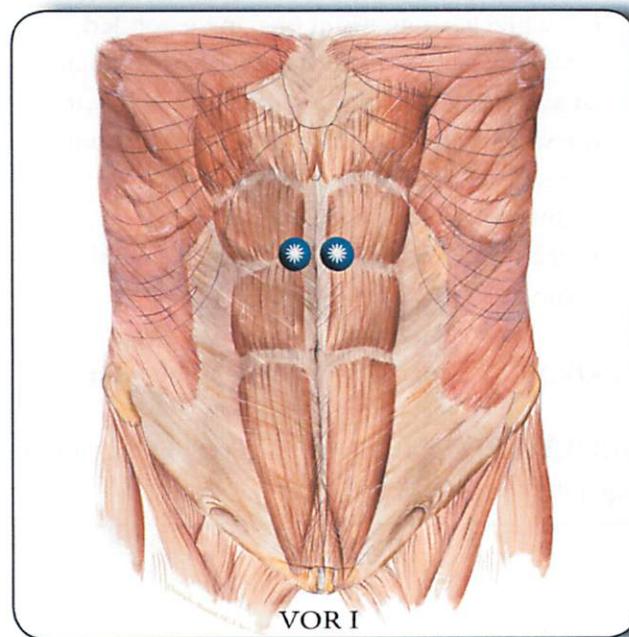
ABDUCTOR HALLUCIS OBIQUE HEAD, PERONEUS DIV.



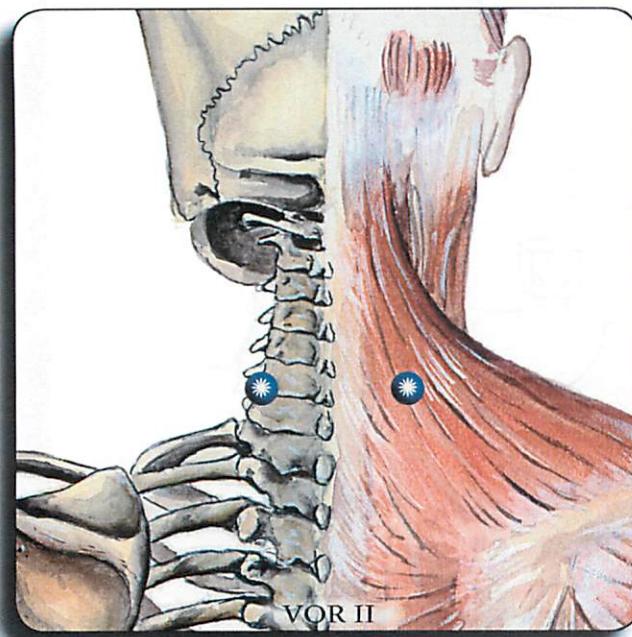
NEUROVASCULAR



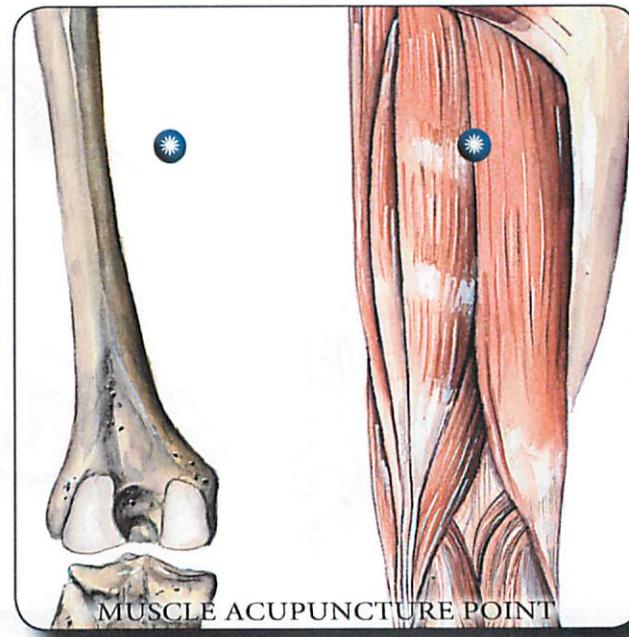
A B C D
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 932: ABDUCTOR HALLUCIS OBLIQUE HEAD (Adductor Hallucis Oblique Head, Peroneus Division)

ORIGIN: Sheath of the tendon of peroneus longus.

INSERTION: Medial proximal surface of proximal phalanx of the great toe.

ACTION: Abducts and assists in plantar flexion of proximal phalanx of great toe. Maintains concavity of distal aspect of longitudinal arch.

TEST:

Patient: Position: Supine.

M.T.P.: Flex and abduct proximal phalanx of great toe while keeping distal phalanx extended.

Doctor: Position: End of table facing patient.

Brace: First metatarsal on medial aspect.

Contact: Distal phalanx of great toe.

Direction: Adduct great toe.

NEUROVASCULAR: (Post/BL) Occipitomastoid suture, below level of external auditory canal.

NEUROLYMPHATIC: (Post/L) Sixth I.C.S., 6" lateral to spine.

VISCERAL ORGAN:

I. *Stomach:* (Ant/BL) Rectus abdominis, between second and third section, medial side.

II. *Palatine Adenoids:* (Post/BL) Bladder meridian at level of C6.

M. A. P. : B 50 1/2

V.L. : T10 R

L. B. V.L. : T1 R

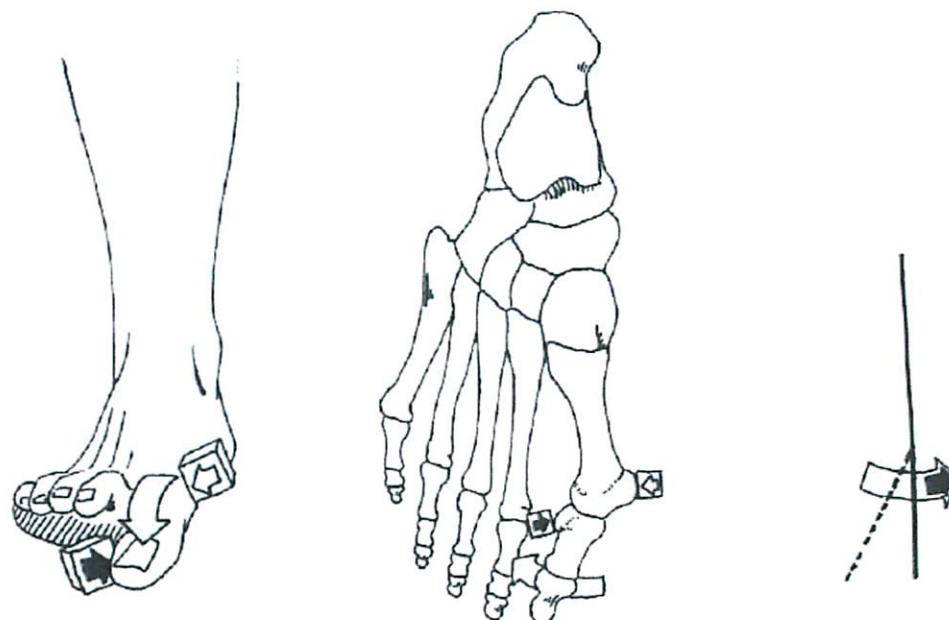
M. M. : S3

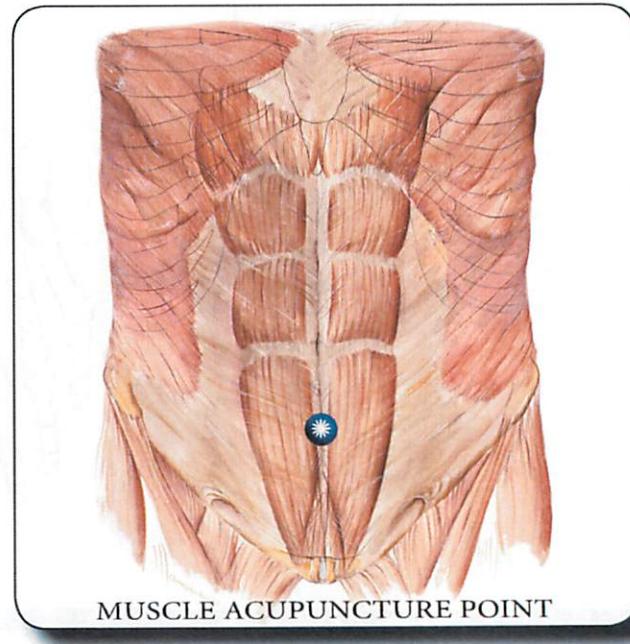
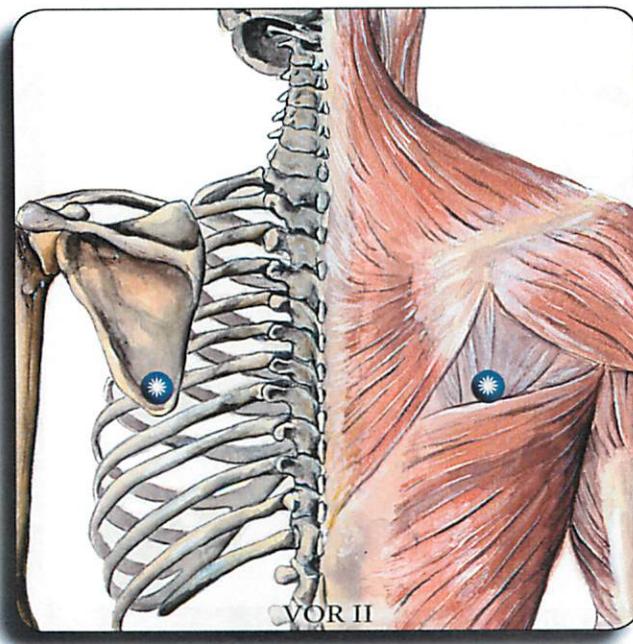
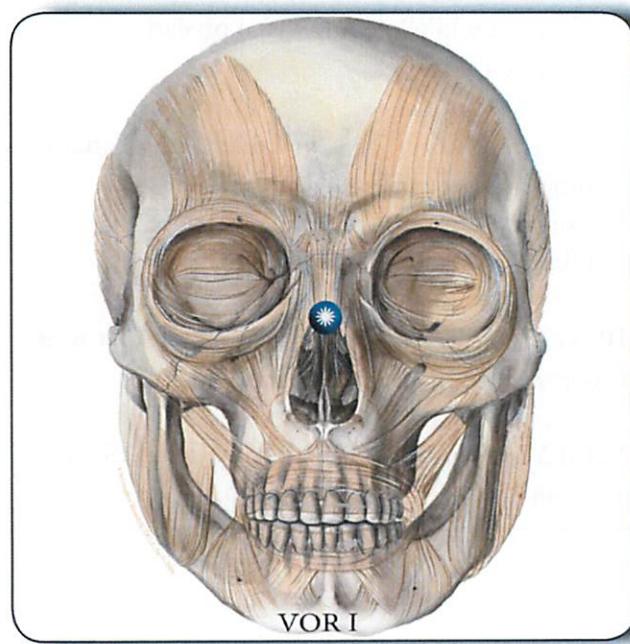
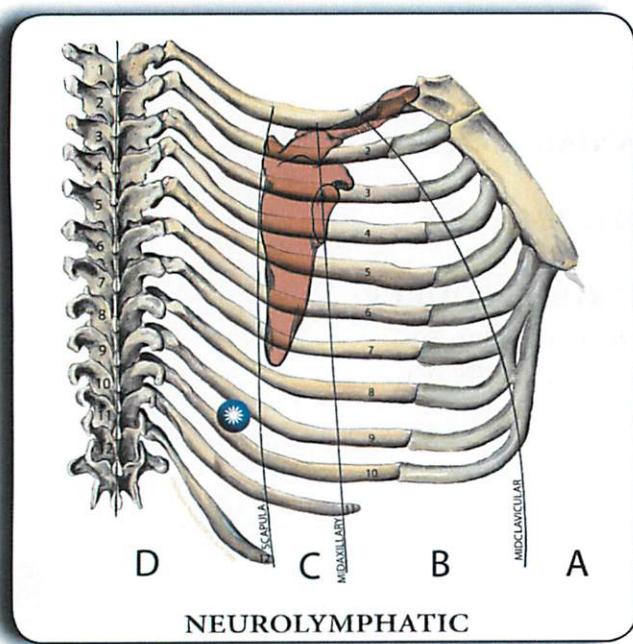
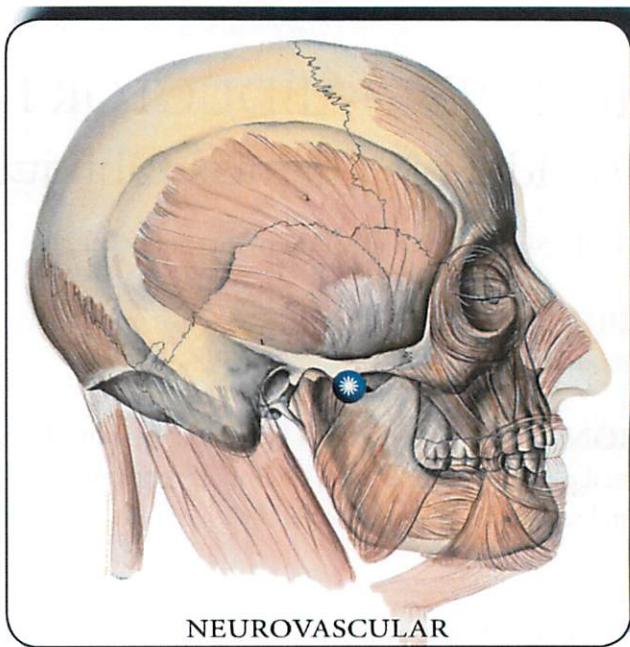
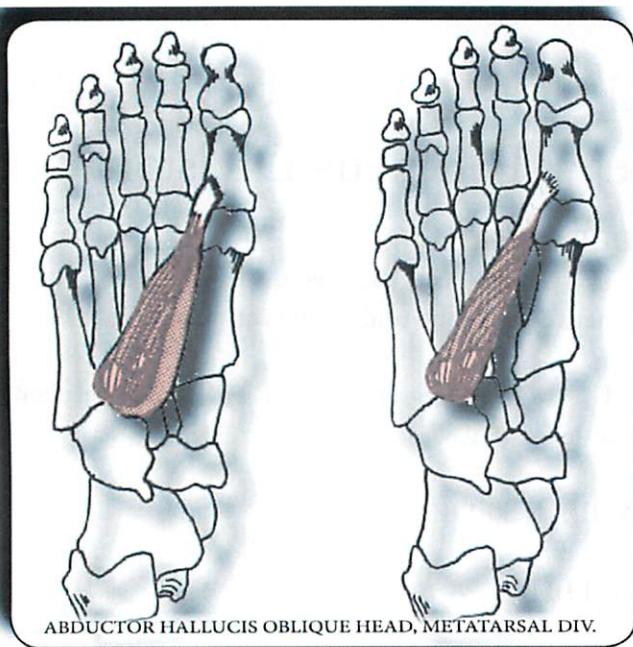
CRANIAL: In Research

FOOT: In Research

NUTRIENT SOURCE: Iodine

1. Organic Iodine (S)
2. Core Iodine (N.W.)





Muscle 934: ABDUCTOR HALLUCIS OBLIQUE HEAD (Adductor Hallucis Oblique Head, Metatarsal Division)

ORIGIN: Base of second, third, and fourth metatarsals.

INSERTION: Lateral side of the base of the proximal phalanx of the great toe.

ACTION: Abducts and assists in plantar flexion of proximal phalanx of great toe. Maintains concavity of distal aspect of longitudinal arch.

TEST:

Patient: Position: Supine.

M.T.P: Flex and abduct proximal phalanx of great toe while keeping distal phalanx extended.

Doctor: Position: End of table facing patient.

Brace: First metatarsal on medial aspect.

Contact: Distal phalanx of great toe.

Direction: Adduct great toe.

NEUROVASCULAR: (Lat) Mandible, between coronoid process and condyle.

NEUROLYMPHATIC: (Post/R) Ninth I.C.S., 2" lateral to spine.

VISCERAL ORGAN:

I. *Nose*: (Ant/Midline) Gv 24.7; tip of nasal suture

.

II. *Lungs*: (Post/BL) Tip of scapula.

M. A. P. : Cv 5

V.L. : C4 R

L. B. V.L. : L2 R

M. M. : S3

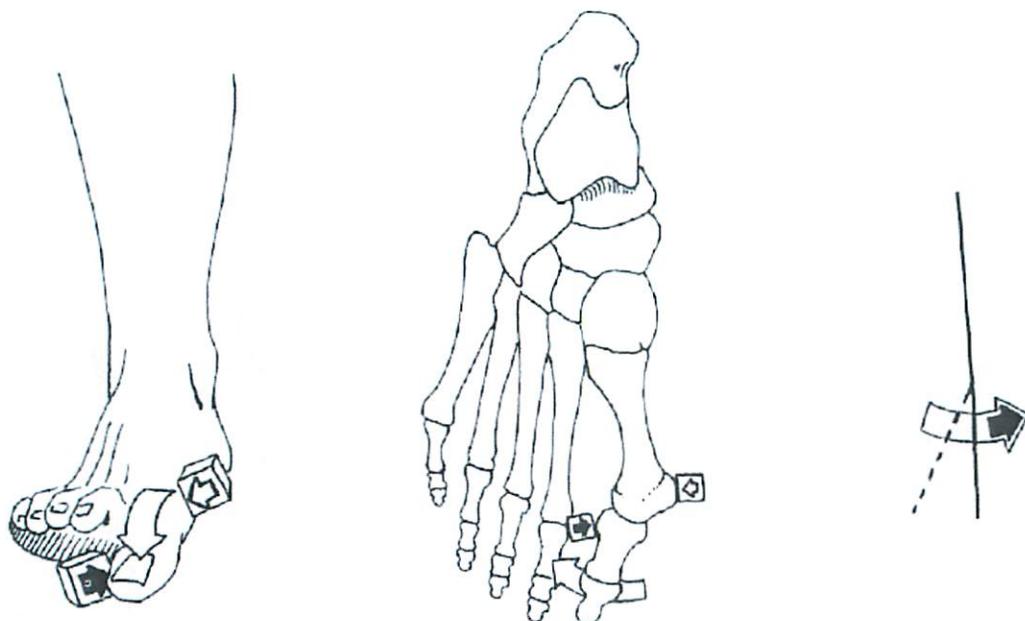
CRANIAL: Occipital

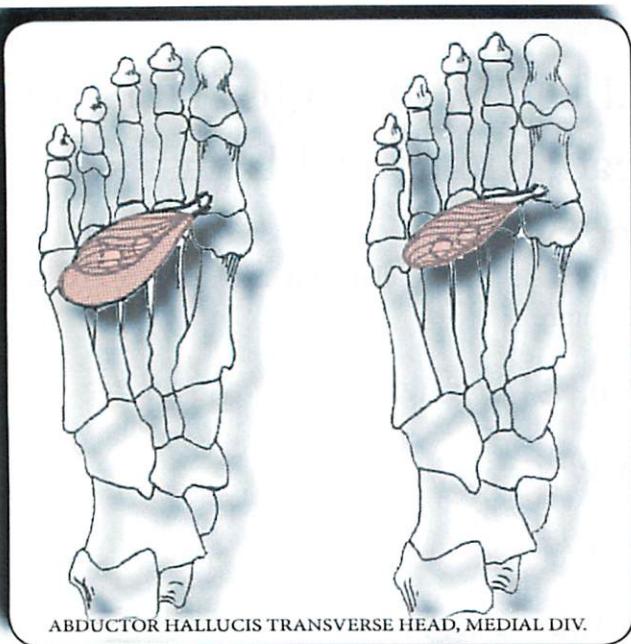
FOOT: Calcaneus

NUTRIENT SOURCE: Biotin

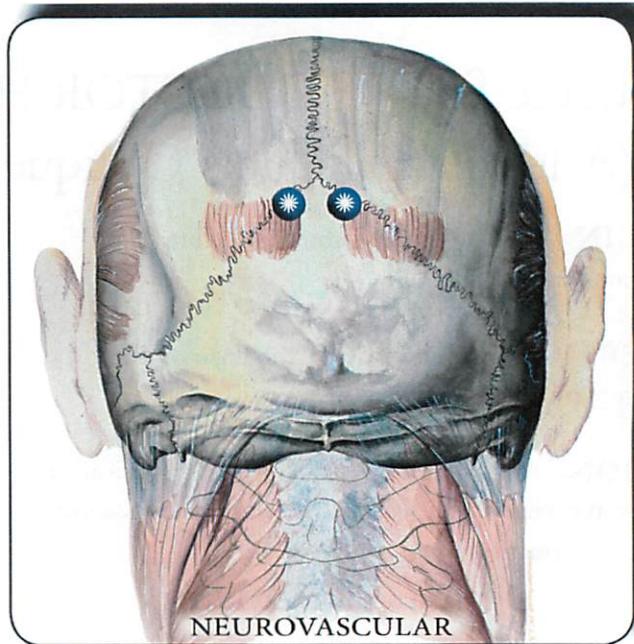
1. G Complex (S)

2. Core Biotin (N.W.)

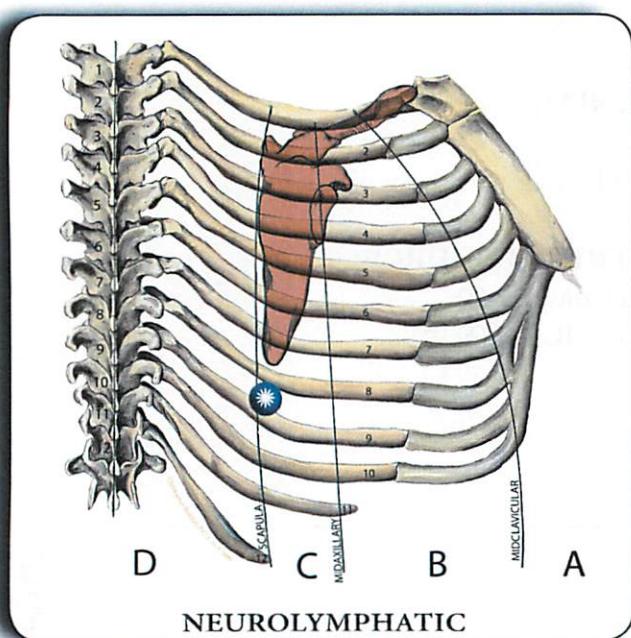




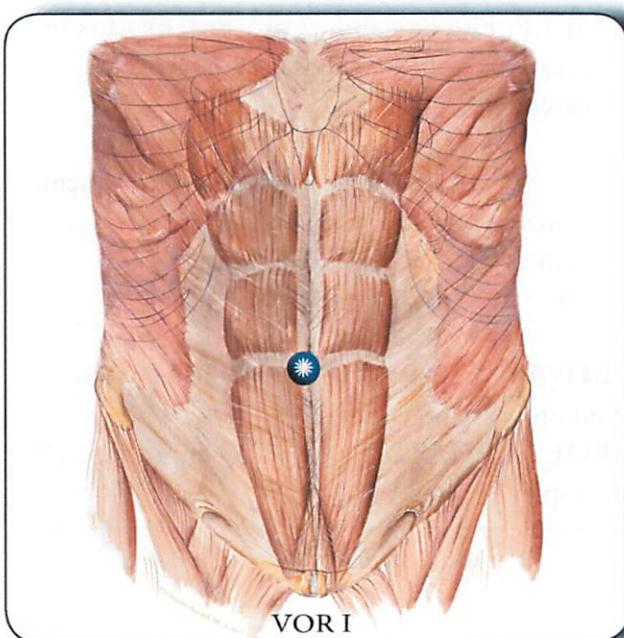
ABDUCTOR HALLUCIS TRANSVERSE HEAD, MEDIAL DIV.



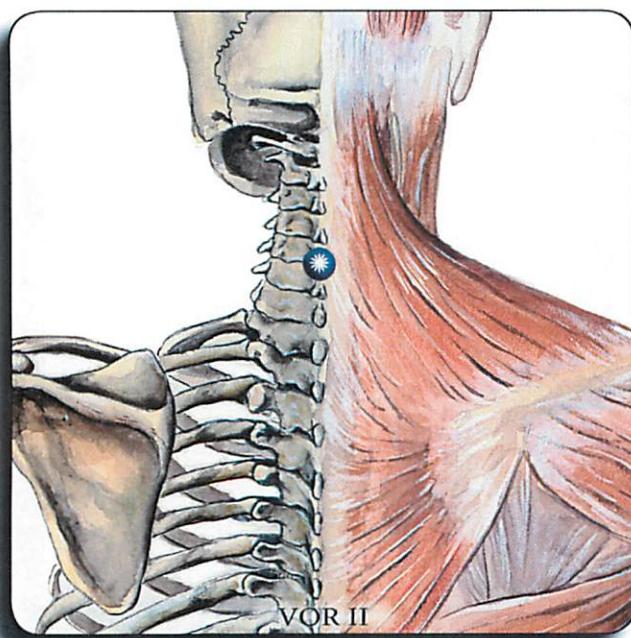
NEUROVASCULAR



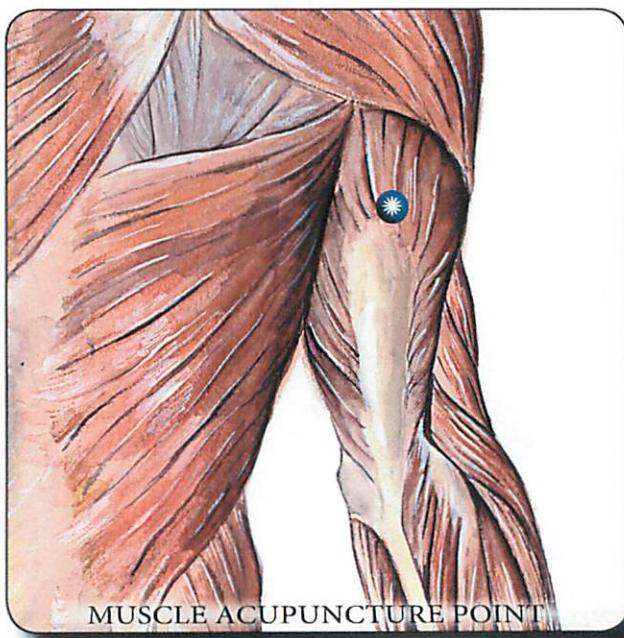
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 936: ABDUCTOR HALLUCIS TRANSVERSE HEAD (Adductor Hallucis Transverse Head, Medial Division)

ORIGIN: Plantar metatarsophalangeal ligaments of the third and fourth toes.

INSERTION: Lateral side of the base of the proximal phalanx of the great toe.

ACTION: Abducts and flexes the proximal phalanx of the great toe. Helps maintain concavity of transverse arch of foot

TEST:

Patient: Position: Supine.

M.T.P.: Flex and abduct proximal phalanx of great toe while keeping distal phalanx extended.

Doctor: Position: End of table facing patient.

Brace: Plantar and dorsal surfaces of foot with thumb and index finger.

Contact: Distal aspect of fourth and fifth metatarsals and great toe.

Direction: Separate fourth metatarsal and great toe.

NEUROVASCULAR: (Post/BL) Occiput, just below posterior fontanelle.

NEUROLYMPHATIC: (Post/R) Eighth I.C.S., at vertebral border of scapula.

VISCERAL ORGAN:

I. *Ileum*: (Ant/R) 7 o'clock on umbilicus.

II. *Testicle/Ovaries*: (Post/Midline) Gv 14.3; between C5 and C6.

M. A. P. : T 12 1/4

V.L. : T9 L

L. B. V.L. : T2 L

M. M. : S2

CRANIAL: T.M.J.

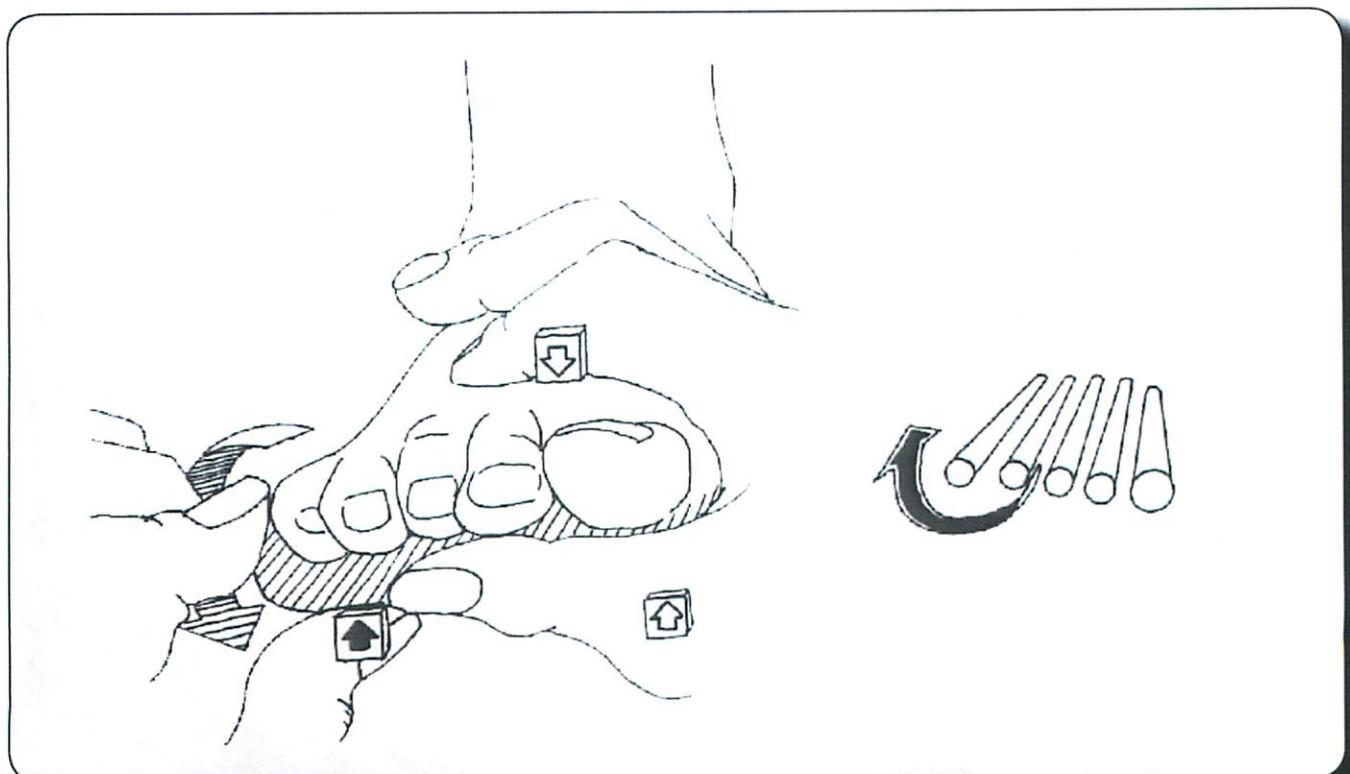
FOOT: Proximal Phalanx of Great Toe.

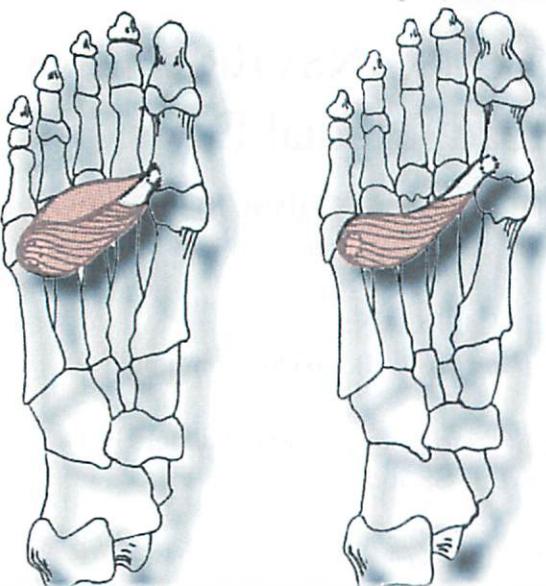
NUTRIENT SOURCE:

Rutin

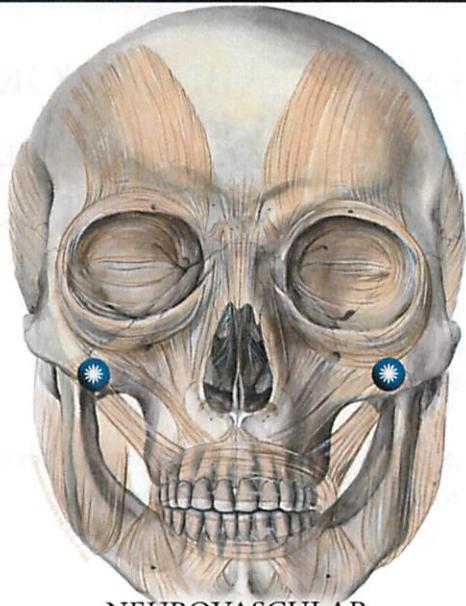
1. Cyruta (S)

2. Core Rutin (N.W.)

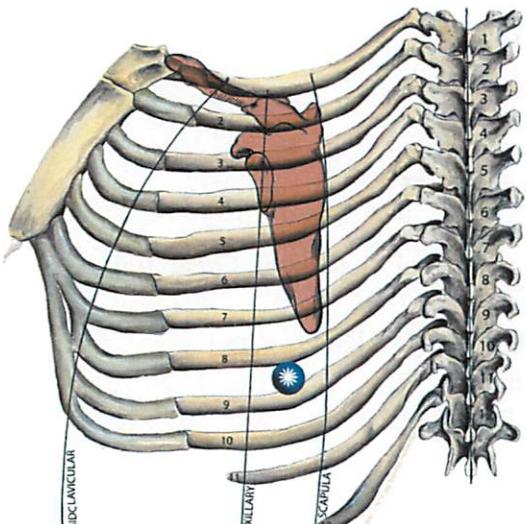




ABDUCTOR HALLUCIS TRANSVERSE HEAD, LATERAL DIV.



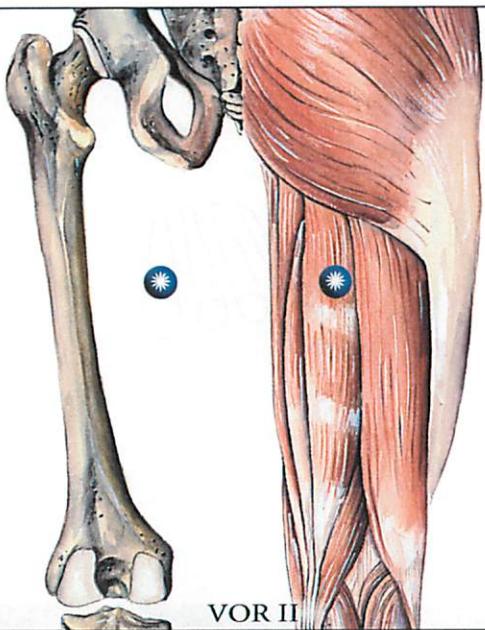
NEUROVASCULAR



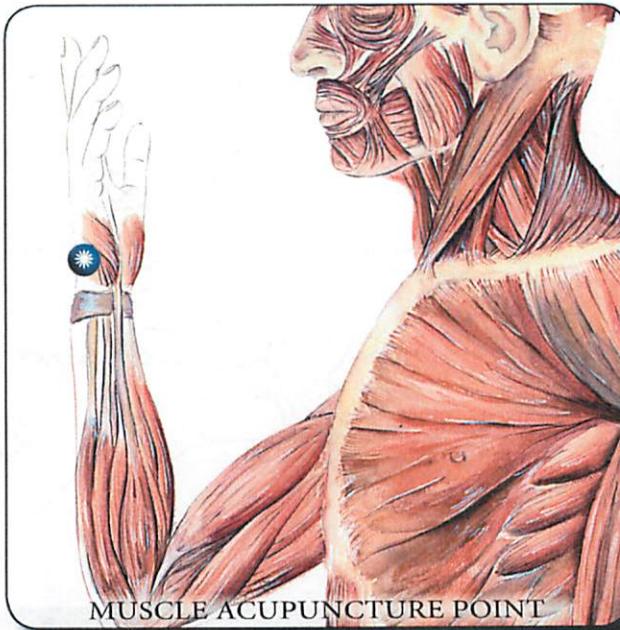
A MIDCLAVICULAR
B MIDAXILLARY
C SCAPULAR
D NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 938: ABDUCTOR HALLUCIS TRANSVERSE HEAD, (Adductor Hallucis Transverse Head, Lateral Division)

ORIGIN: Plantar metatarsalsophalangeal ligaments, especially fourth and fifth toes.

INSERTION: Lateral side at the base of the proximal phalanx of great toe.

ACTION: Abducts and flexes the proximal phalanx of the great toe. Helps maintain concavity of the transverse arch of the foot.

TEST:

Patient: Position: Supine.

M.T.P.: Flex and abduct proximal phalanx of great toe while keeping distal phalanx extended.

Doctor: Position: End of table facing patient.
Brace: Plantar and dorsal surfaces of foot with thumb and index finger.

Contact: Distal aspect of fifth metatarsal and great toe.

Direction: Separate fifth metatarsal and great toe.

NEUROVASCULAR: (Ant/BL) Maxillary bone, below zygoma, level with inferior part of nose.

NEUROLYMPHATIC: (Post/L) Eighth I.C.S., parascapular.

VISCERAL ORGAN:

I. *Lymphatics of Jejunum:* (Ant/BL) Abdominal inguinal ligament, just medial to origin of sartorius.

II. *Colon - Rectal Area:* (Post/BL) Posterior aspect of thigh, 3" inferior to B 50, 1" medial to midline.

M. A. P. : Si 4

V.L. : T12 L

L. B. V.L. : C6 L

M. M. : S3

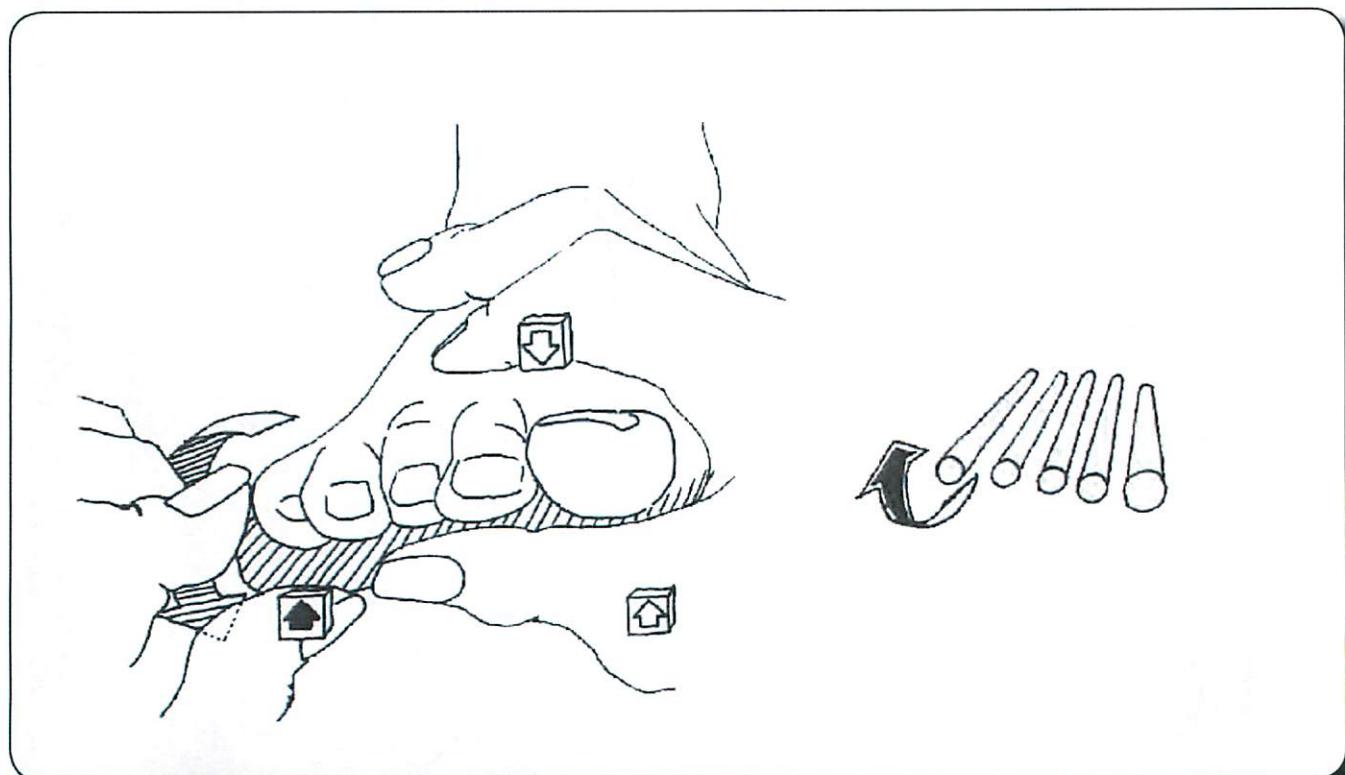
CRANIAL: Mandible

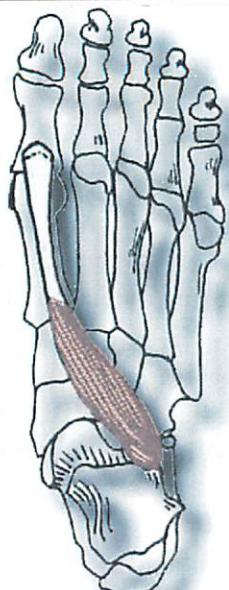
FOOT: First Phalanx of Great Toe

NUTRIENT SOURCE: Vitamin B2

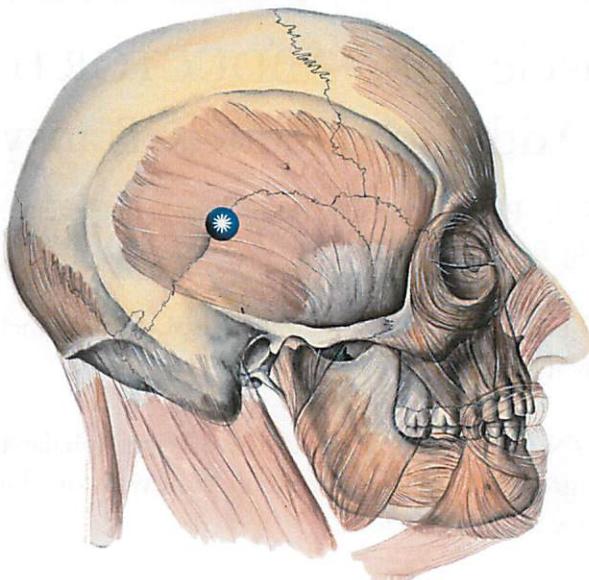
1.G Complex (S)

2.Core Riboflavin (N.W.)

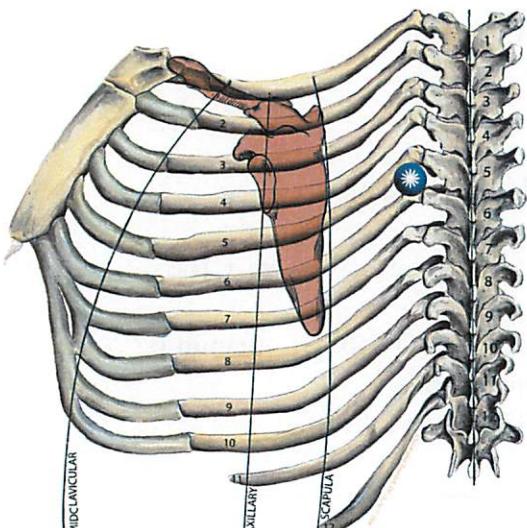




EXTENSOR HALLUCIS BREVIS



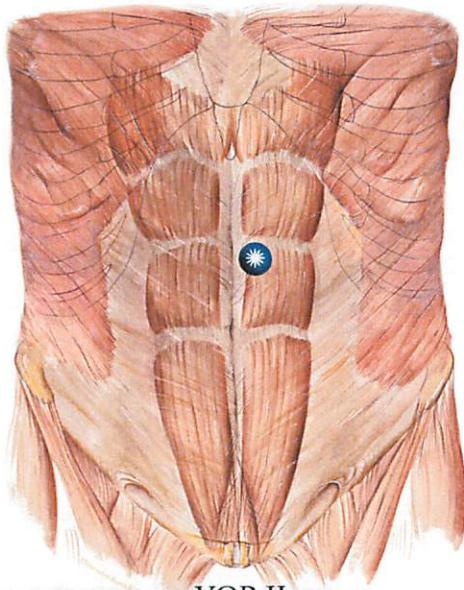
NEUROVASCULAR



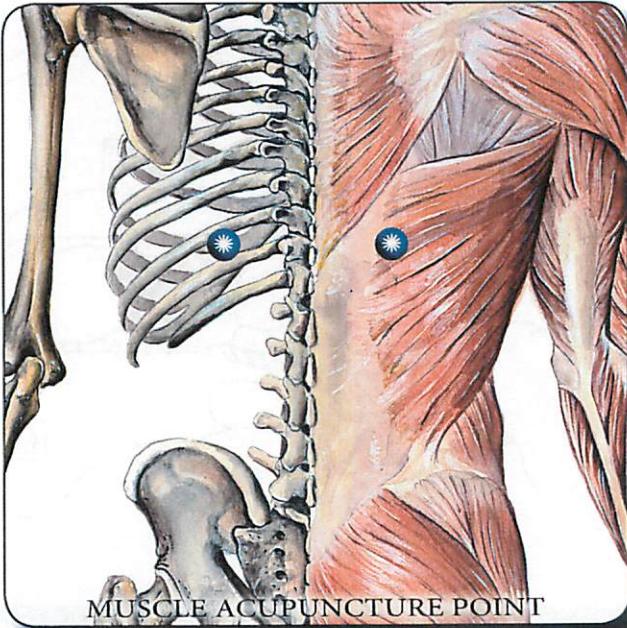
A
B
C
D
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 940: EXTENSOR HALLUCIS BREVIS

ORIGIN:

1. Lateral talocalcaneal ligament.
2. Stem of the inferior extensor retinaculum.

INSERTION: Base of proximal phalanx of great toe.

ACTION: Dorsiflexes the proximal phalanx of the great toe.

TEST:

Patient: Position: Supine.

M.T.P.: Dorsiflex proximal phalanx of great toe.

Doctor: Position: End of table facing patient.

Brace: Dorsal and plantar surfaces of great toe.

Contact: Proximal phalanx of great toe.

Direction: Plantar flex great toe through mid-sagittal plane.

NEUROVASCULAR: (Lat) Squamosal suture, 2" superior and 1' posterior to external auditory canal.

NEUROLYMPHATIC: (Post/L) Fifth I.C.S., at its transverse process.

VISCERAL ORGAN:

I. *Pancreatic - Duct System:* (Ant/L) Rectus abdominis, fourth section, just lateral to K 21.

II. *Jejunum:* (Ant/L) Rectus abdominis, second section, near insertion level or K 18.

M. A. P. : B 43

V.L. : T9 L

L. B. V.L. : T2 L

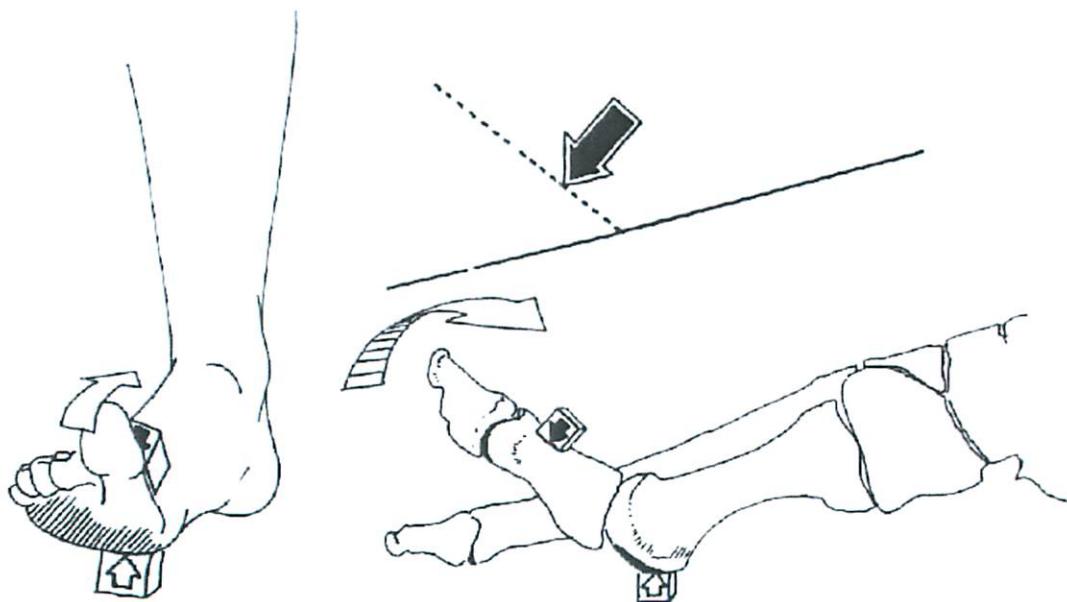
M. M. : S2

CRANIAL: In Research

FOOT: In Research

NUTRIENT SOURCE: Vitamin K

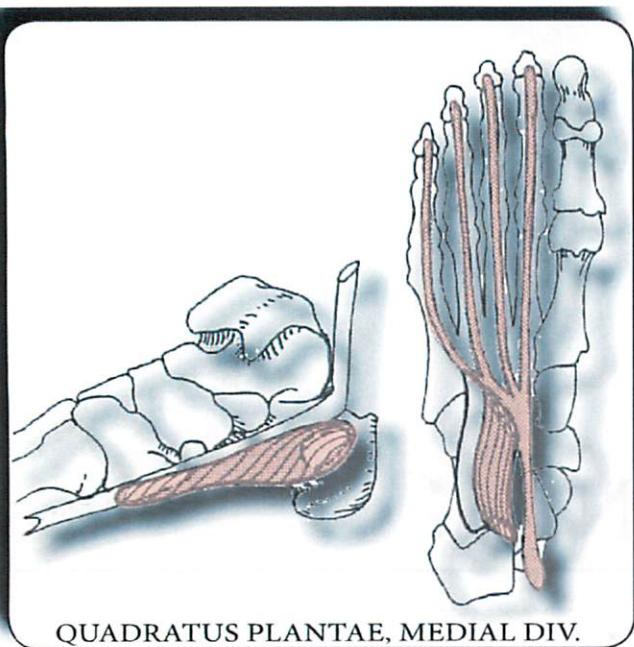
1. Chlorophyll (s)



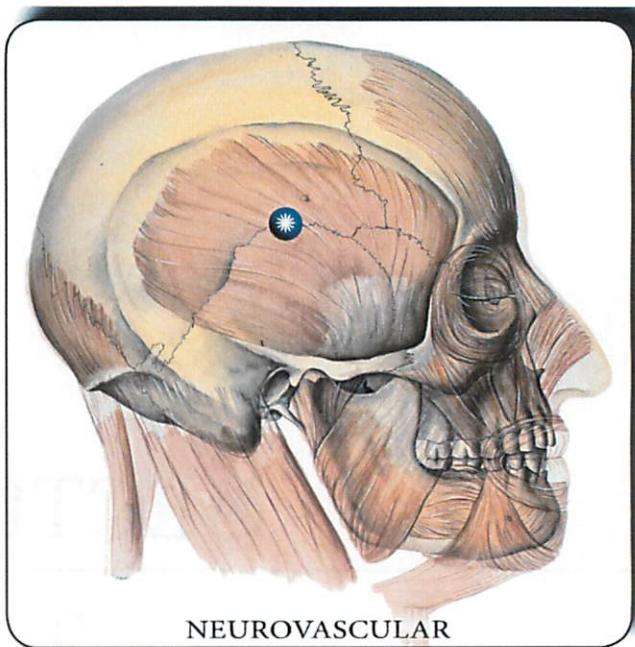


SECTION II:

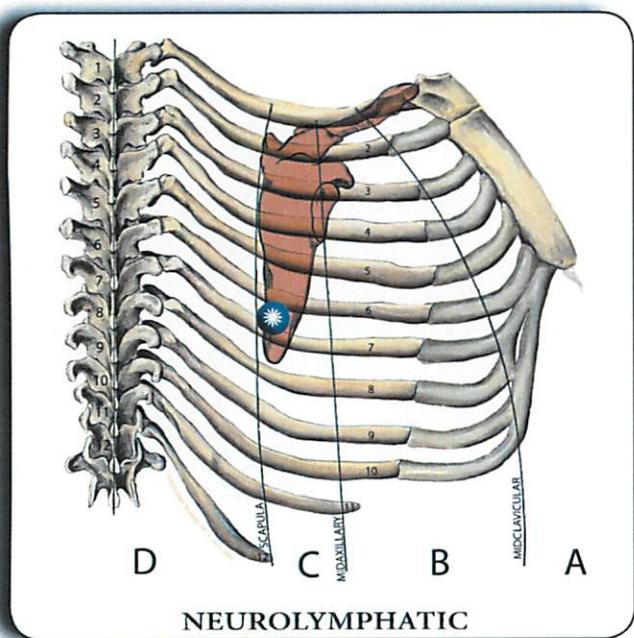
TOES



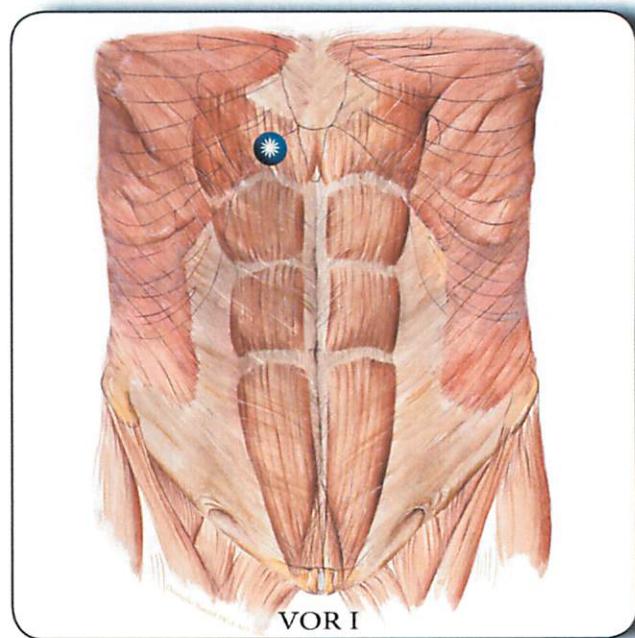
QUADRATUS PLANTAE, MEDIAL DIV.



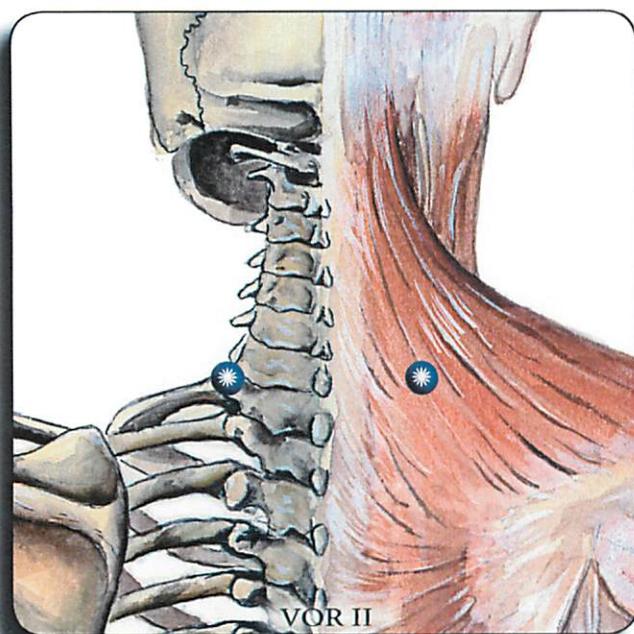
NEUROVASCULAR



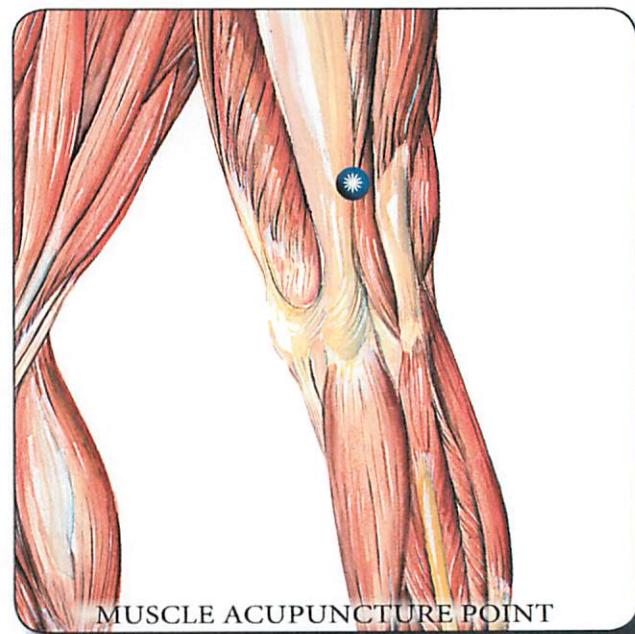
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 942: QUADRATUS PLANTAE, (Medial Division)

ORIGIN: Calcaneus, distal inferior surface.

INSERTION: Tendon of flexor digitorum longus.

ACTION: With the foot in a neutral position, assists in flexion of proximal phalanges of the second and third toes by acting as the origin of flexor digitorum pedis (lumbricales) muscle.

TEST:

Patient: Position Supine.

M.T.P. Foot is placed in neutral position.

Plantar flex proximal phalanges of the second and third toes while keeping middle and distal phalanges extended. In this anatomical position this muscle acts as the origin of the flexor digitorum pedis (lumbricales) muscle.

Doctor: Position: End of table facing patient.

Brace: Dorsum of metatarsals.

Contact: Base of proximal phalanx of the second and third toes.

Direction: Dorsiflex toe through mid-sagittal plane.

NEUROVASCULAR: (Lat) Squamosal suture - 3" superior, 1/2" posterior to external auditory canal.

NEUROLYMPHATIC: (Post/R) Sixth I.C.S., parascapular.

VISCERAL ORGAN:

I. *Parietal Cells of Stomach:* (Ant/R) Rectus abdominis, fourth section, middle of muscles.

II. *Sublingual Gland:* (Post/BL) C7 transverse process.

M. A. P. : G 32 1/2

V.L. : C4 L

L. B. V.L. : L2 L

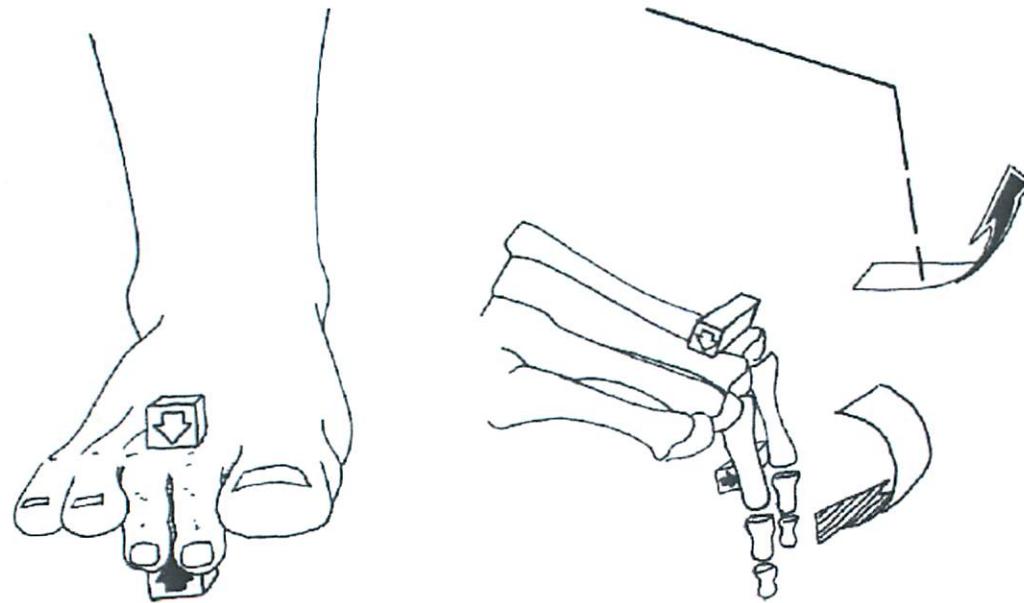
M. M. : S3

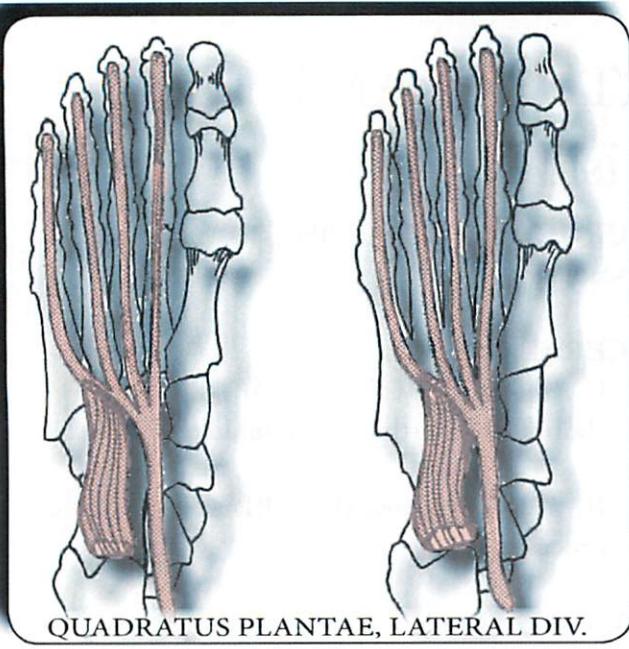
CRANIAL: Styloid

FOOT: Distal Phalanx of Great Toe

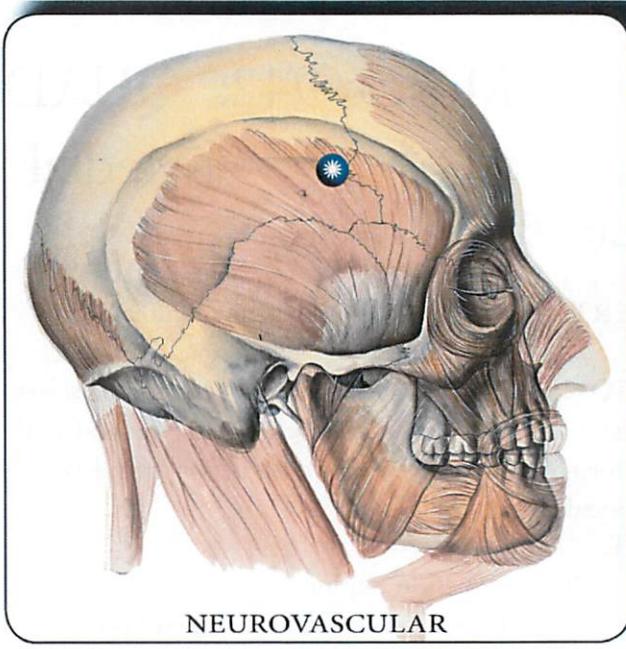
NUTRIENT SOURCE: Chloride

1. Betaine Hydrochloride (S)

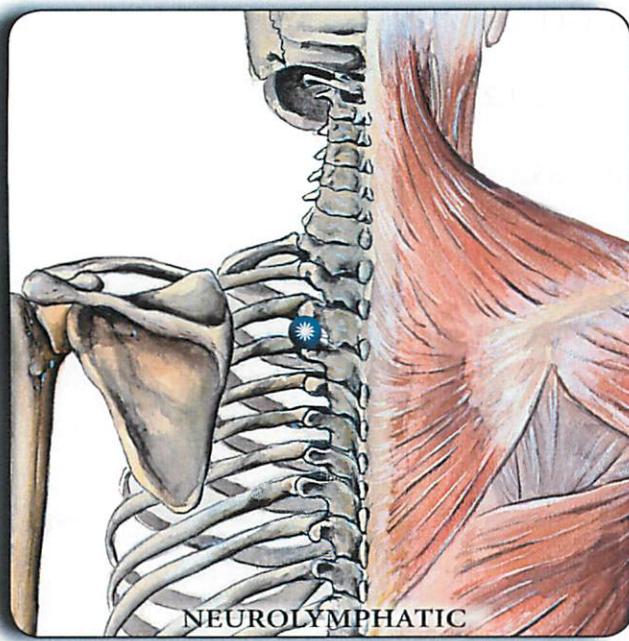




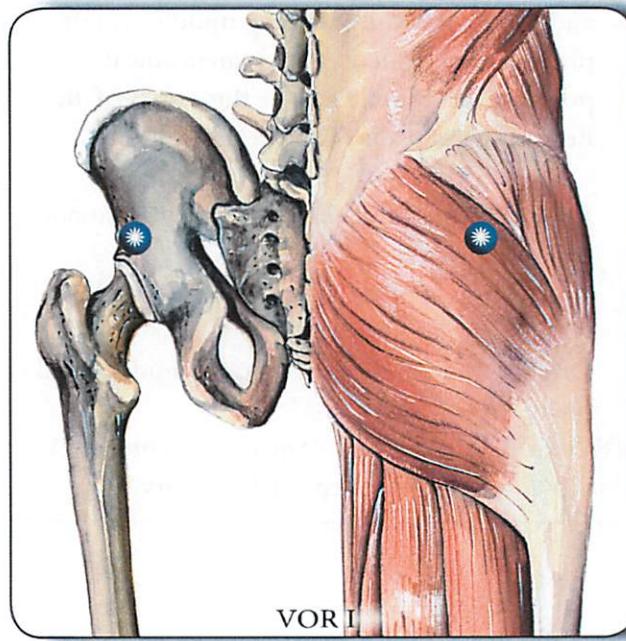
QUADRATUS PLANTAE, LATERAL DIV.



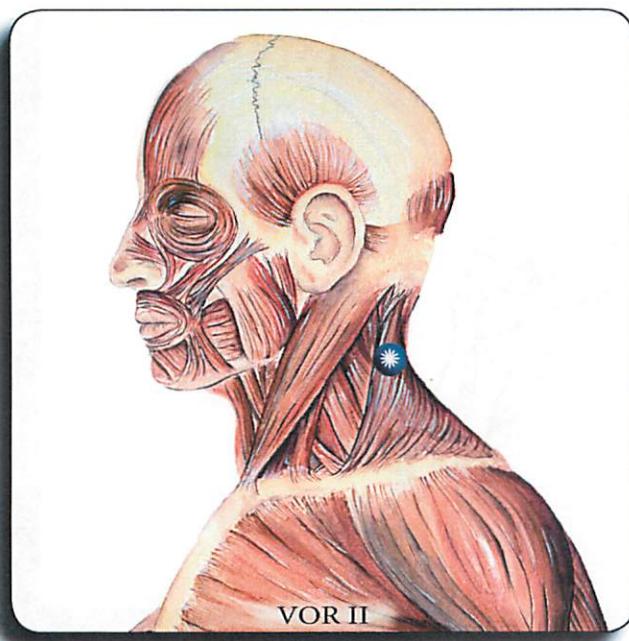
NEUROVASCULAR



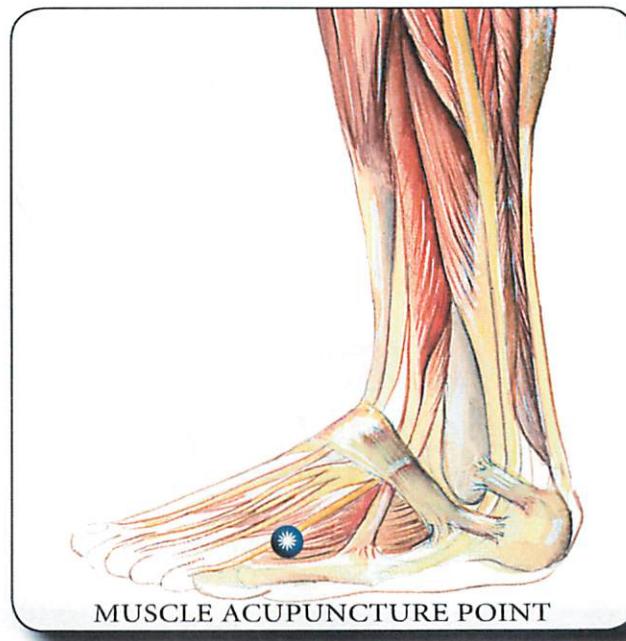
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 944: QUADRATUS PLANTAE, (Lateral Division)

ORIGIN: Lateral inferior border of calcaneus, lateral process of its tuberosity, long plantar ligament.

INSERTION: Lateral margins and upper surfaces of tendon of flexor digitorum longus.

ACTION: With foot in neutral position, assists in flexion of proximal phalanges of the fourth and fifth toes by acting as the origin of flexor digitorum pedis (lumbricales) muscle.

TEST:

Patient: Position: Supine.

M.T.P: Foot is placed in neutral position.

Plantar flex proximal phalanges of the fourth and fifth toes while keeping the middle and distal phalanges extended. In this anatomical position this muscle acts as the origin of the flexor digitorum pedis (lumbricales) muscle.

Doctor: Position: End of table facing patient.

Brace: Dorsum of metatarsals.

Contact: Base of proximal phalanx of fourth and fifth toes.

Direction: Dorsiflex toes through midsagittal plane.

NEUROVASCULAR: (Lat) Parietal bone, below superior temporal line, 1" posterior to coronal suture, 4" superior, 1" anterior to external auditory canal.

NEUROLYMPHATIC: (Post/L) Third I.C.S. at the spine.

VISCERAL ORGAN:

I. *Penis/Vaginal Vault*: (Post/BL) Belly of gluteus maximus, at level of B 48, 3-4" below crest of ilium.

II. *Larynx*: (Post/BL) G 20.3; level of C3, belly of upper trapezius.

M. A. P. : G 42

V.L. : T11 L

L. B. V.L. : C7 L

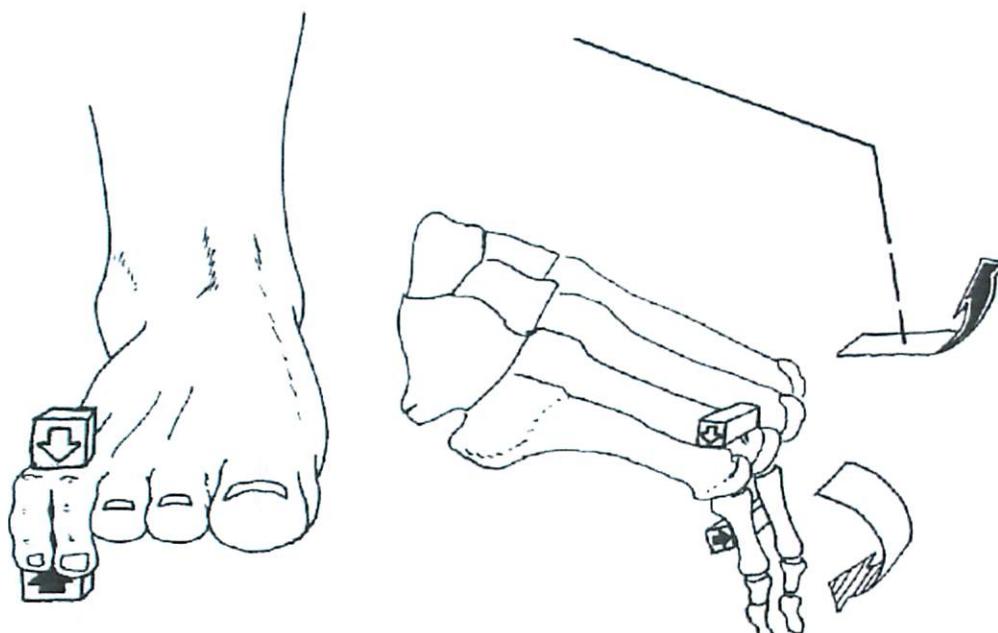
M. M. : S2

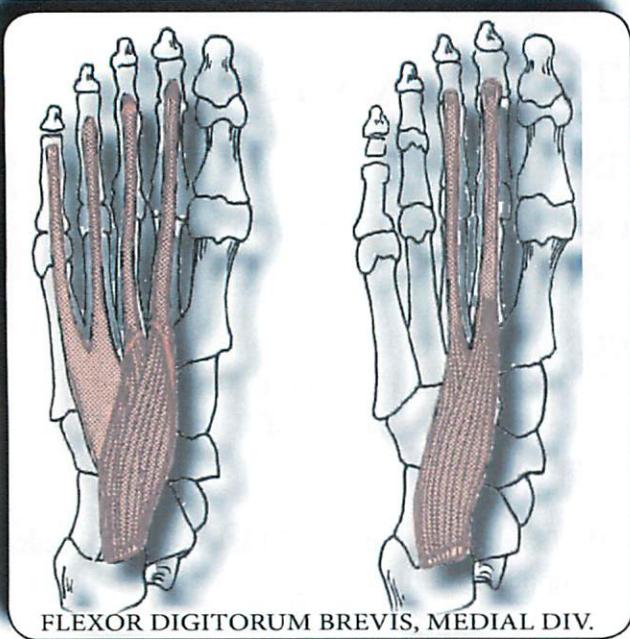
CRANIAL: Mandible

FOOT: First Phalanx of Great Toe.

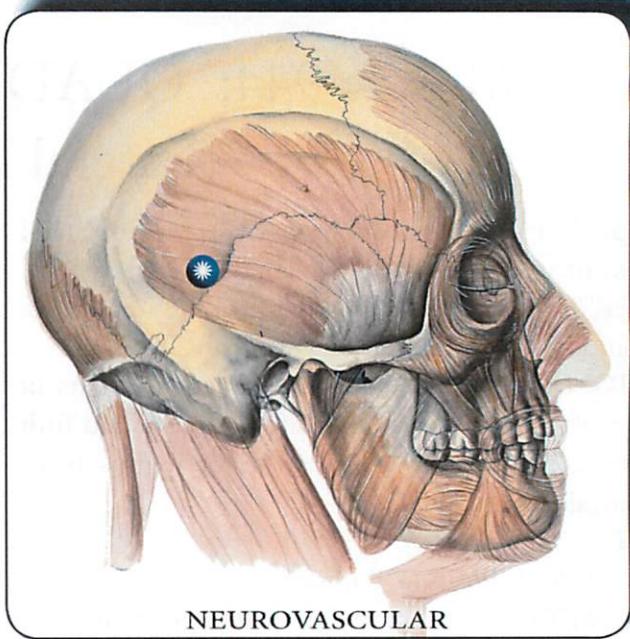
NUTRIENT SOURCE:

1. Niacinamide and B6 (S)
2. Core Niacin (N.W.)

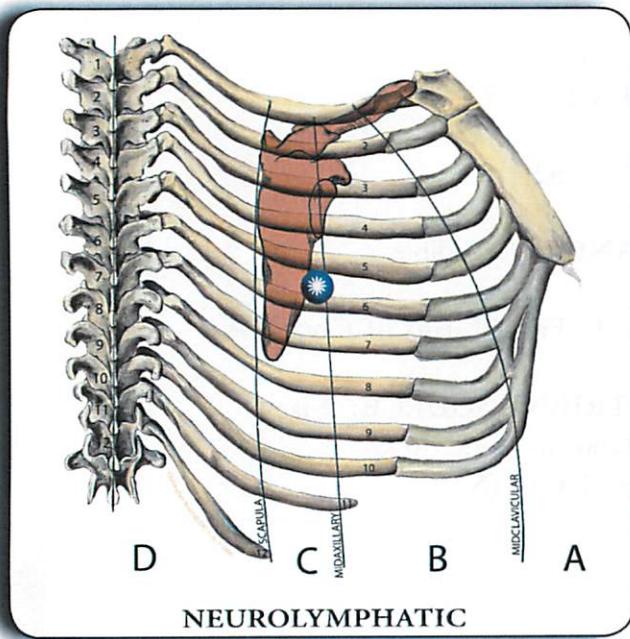




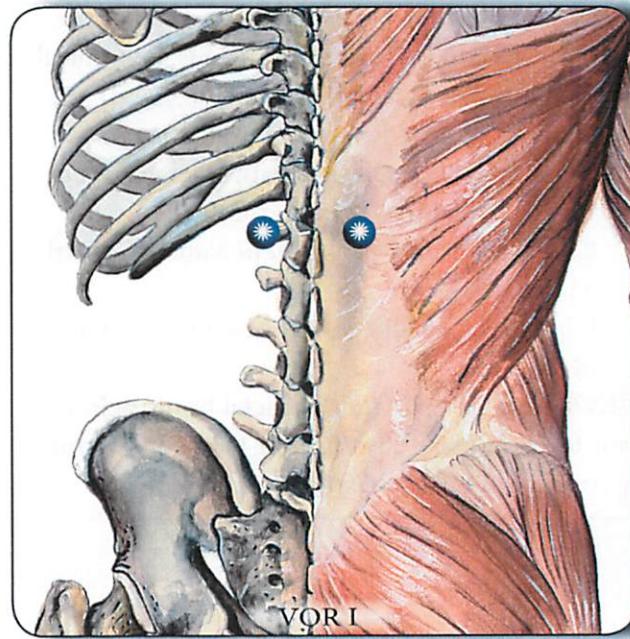
FLEXOR DIGITORUM BREVIS, MEDIAL DIV.



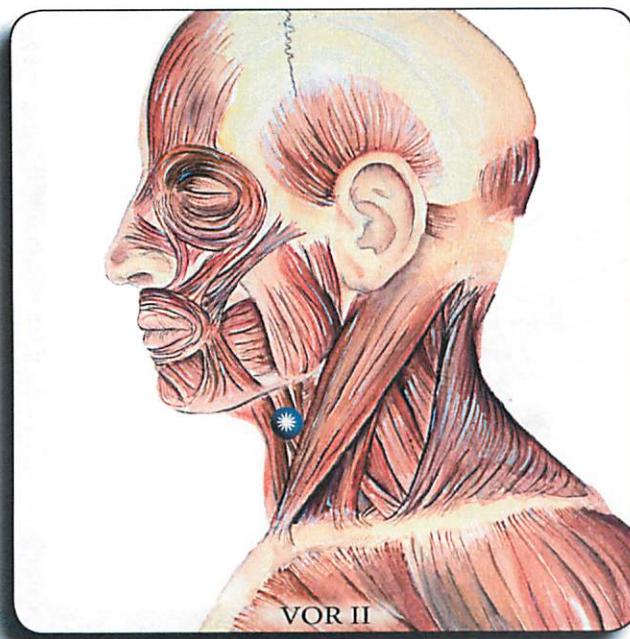
NEUROVASCULAR



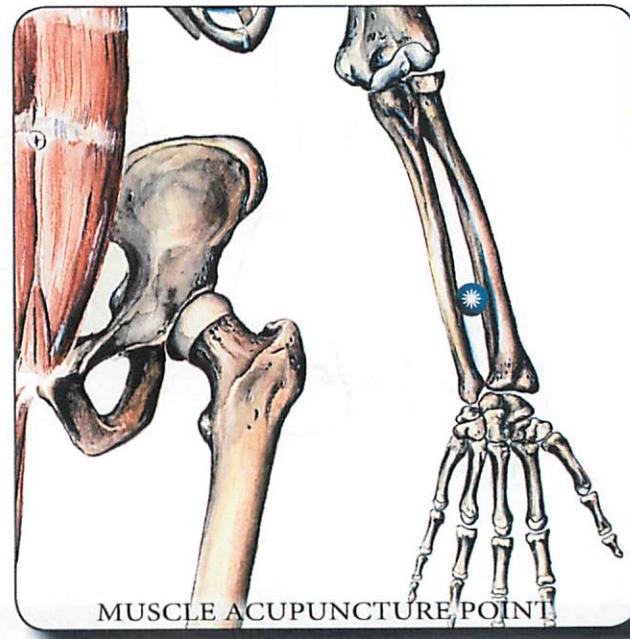
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 946: FLEXOR DIGITORUM BREVIS, (Medial Division)

ORIGIN: Medial process of tuberosity of calcaneus, central part of plantar aponeurosis and intermuscular septa.

INSERTION: Sides of the middle phalanx of the second and third toes.

ACTION: Flexes the middle phalanges of the second and third toes.

TEST:

Patient: Position: Supine.

M.T.P.: Flex the middle phalanx of the second and third toes. Keep the toes in a neutral position with the distal phalanx extended.

Doctor: Position: End of table facing patient.

Brace: Dorsum of proximal phalanges.

Contact: Base of middle phalanx of the toe.

Keep proximal phalanx straight, middle phalanx flexed and distal phalanx extended.

Direction: Dorsiflex through midsagittal plane.

NEUROVASCULAR: (Lat) Parietal bone, 3" superior and 2 1/2" posterior to ear.

NEUROLYMPHATIC: (Ant/R) Fifth I.C.S., parahumeral.

VISCERAL ORGAN:

I. *Ductus Deferens:* (Post/BL) B 21; L1 transverse processes.

II. *Larynx:* (Ant/BL) St 9 at thyroid cartilage.

M. A. P. : Cx 6

V.L. : T6 R

L. B. V.L. : T5 R

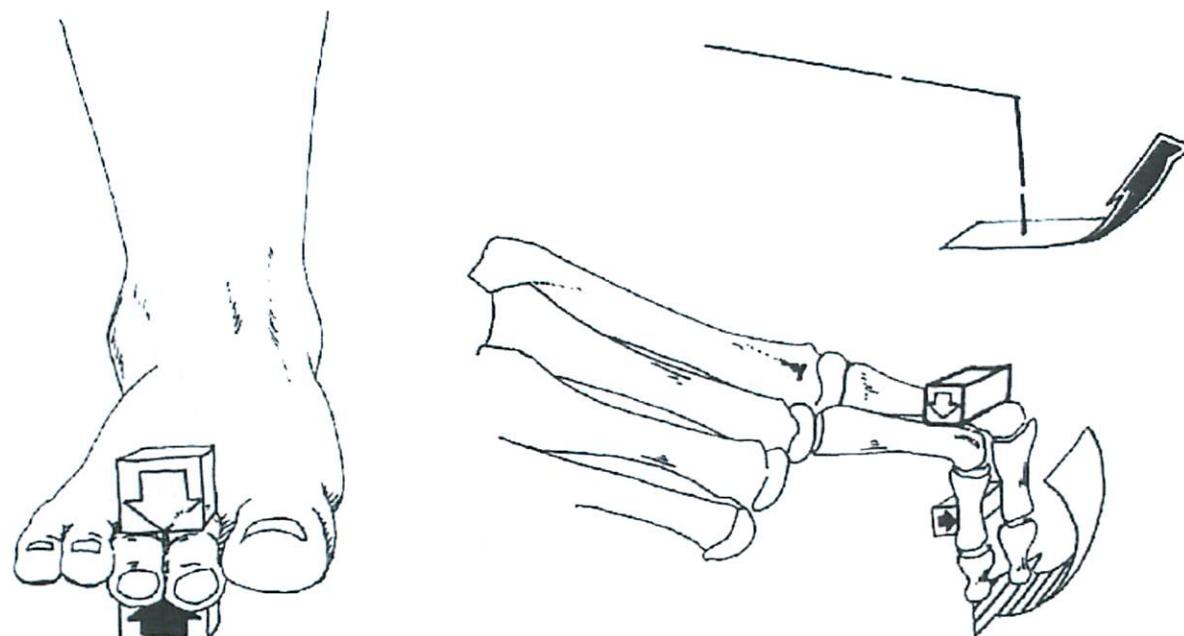
M. M. : S1

CRANIAL: Ethmoid

FOOT: First Cuneiform

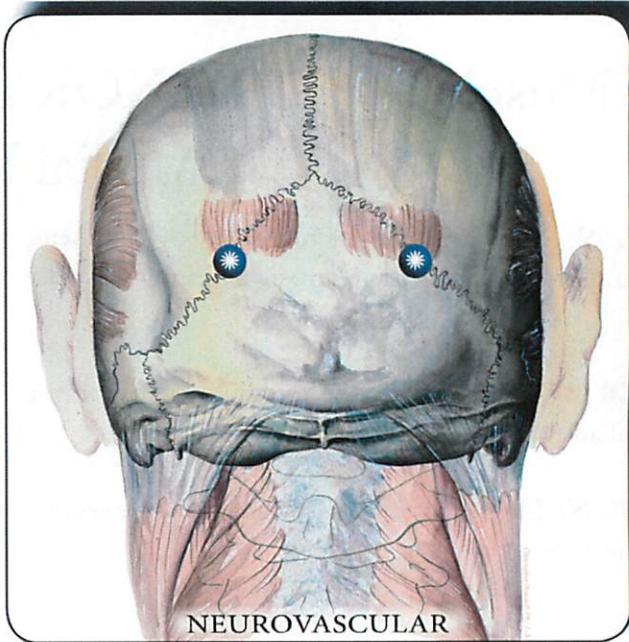
NUTRIENT SOURCE: Selenium

1. Core Selenium (N.W.)
2. Selenium Chelate (N.W.)

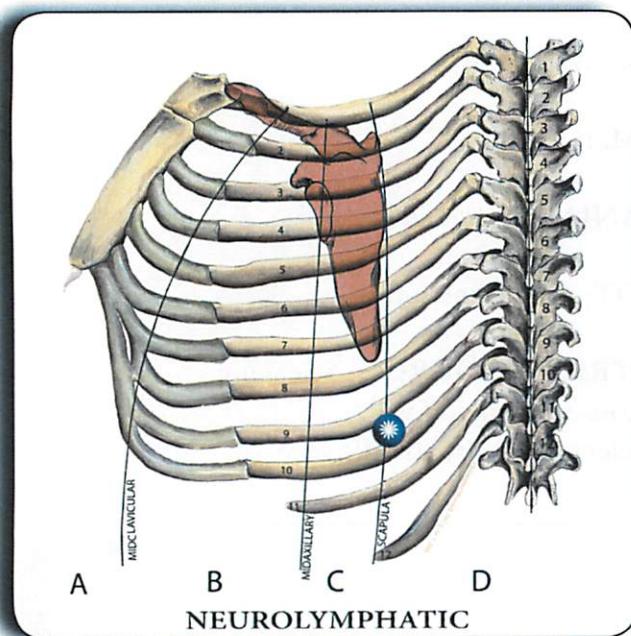




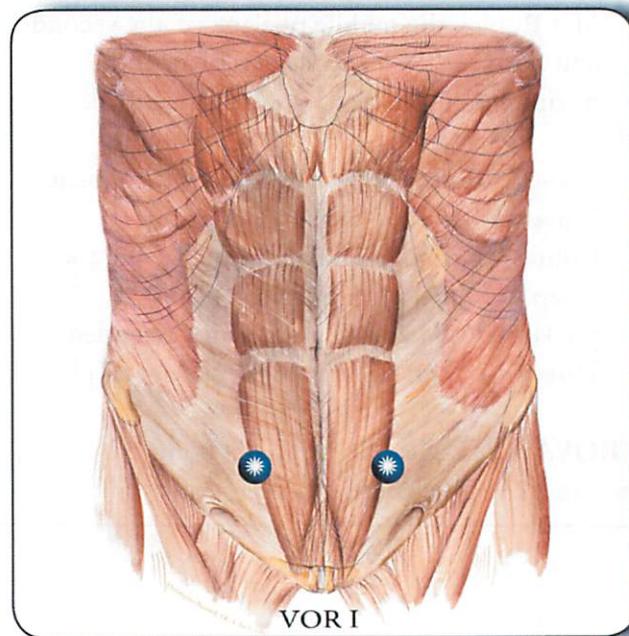
FLEXOR DIGITORUM BREVIS, LATERAL DIV.



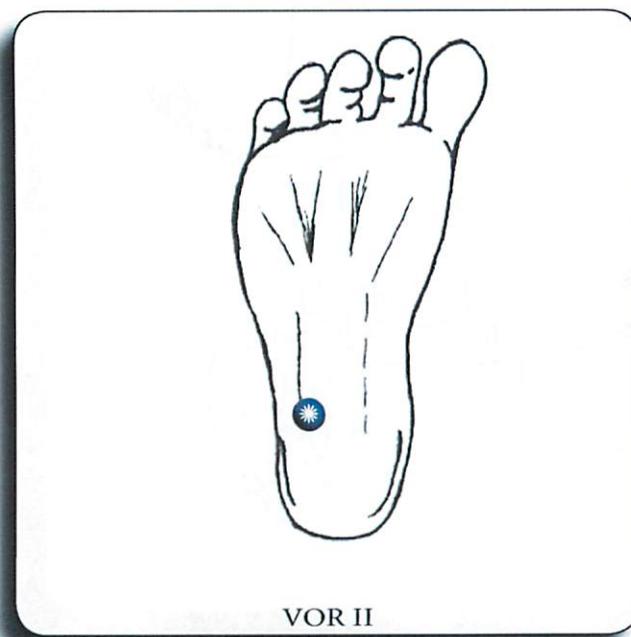
NEUROVASCULAR



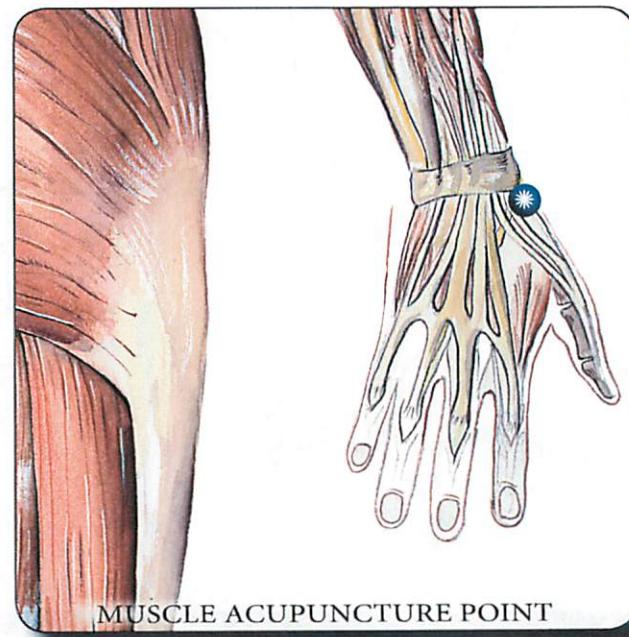
A
B
C
D
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 948: FLEXOR DIGITORUM BREVIS, (Lateral Division)

ORIGIN: Medial process of tuberosity of calcaneus, central part of plantar aponeurosis and adjacent intermuscular septa.

INSERTION: Middle phalanx of the fourth and fifth toes.

ACTION: Flexes the middle phalanx of the fourth and fifth toes.

TEST:

Patient: Position: Supine.

M.T.P.: Flex the middle phalanx of the fourth and fifth toes. Keep the toes in a neutral position with the distal phalanx extended.

Doctor: Position: End of table facing patient.

Brace: Dorsum of proximal phalanges.

Contact: Base of middle phalanx of toe.

Keep proximal phalanx straight, middle phalanx flexed and distal phalanx extended.

Direction: Dorsiflex through mid-sagittal plane.

NEUROVASCULAR: (Post/BL) Lambdoidal suture, 2" lateral to posterior fontanelle.

NEUROLYMPHATIC: (Post/L) Ninth I.C.S., 4" out from spine.

VISCERAL ORGAN:

I. *Colon - L-Descending; R-Ascending:* (Ant/BL) Rectus abdominis, first section, lateral border.

II. *Salivary Glands - Sublingual:* (BL) Plantar surface of cuboid.

M. A. P. : Li 5

V.L. : T5 L

L. B. V.L. : T6 L

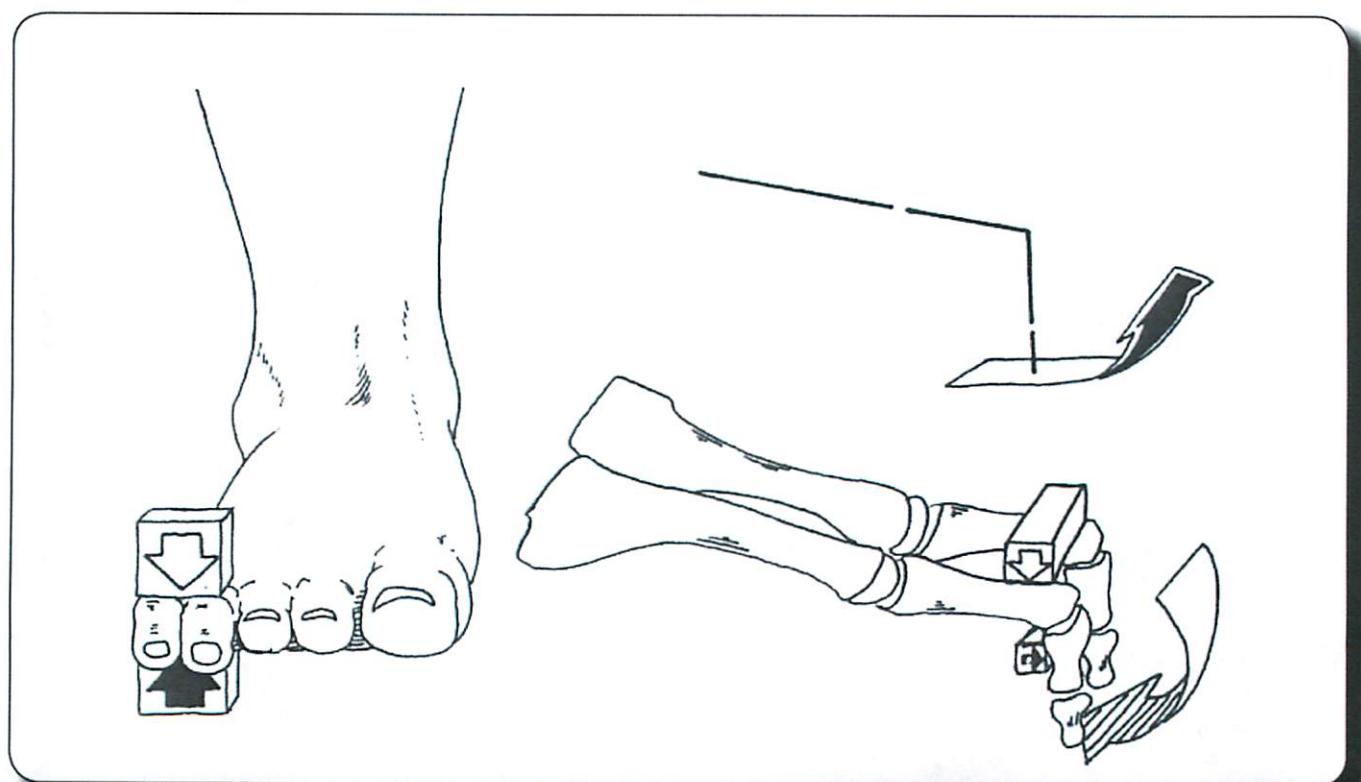
M. M. : L5

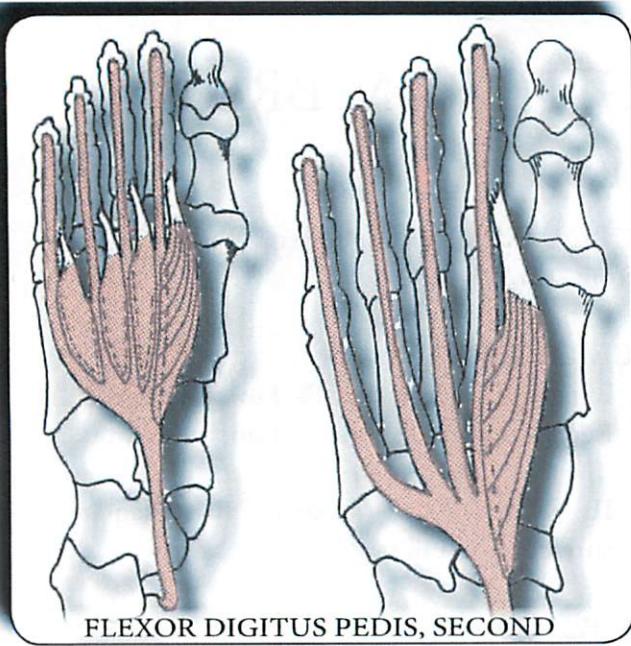
CRANIAL: Glabella

FOOT: Third Cuneiform

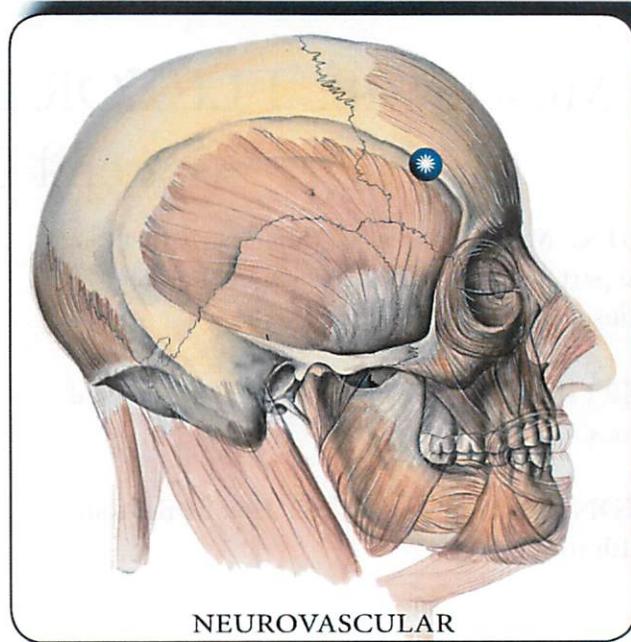
NUTRIENT SOURCE:

1. Core Biotin (N.W.)

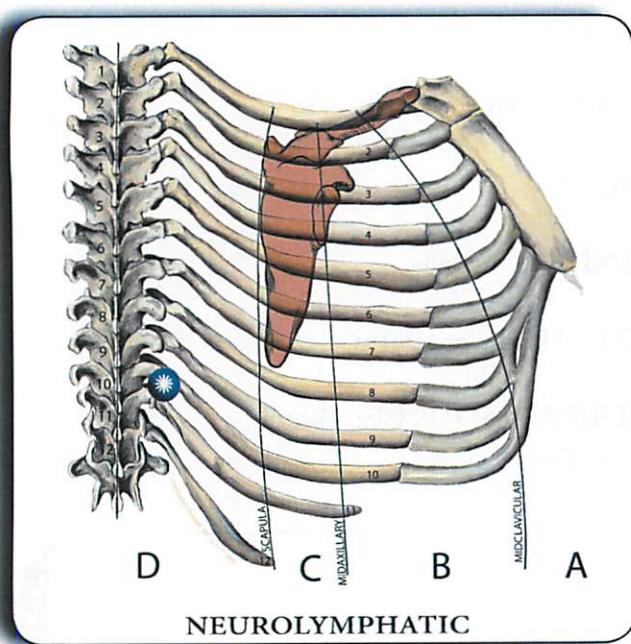




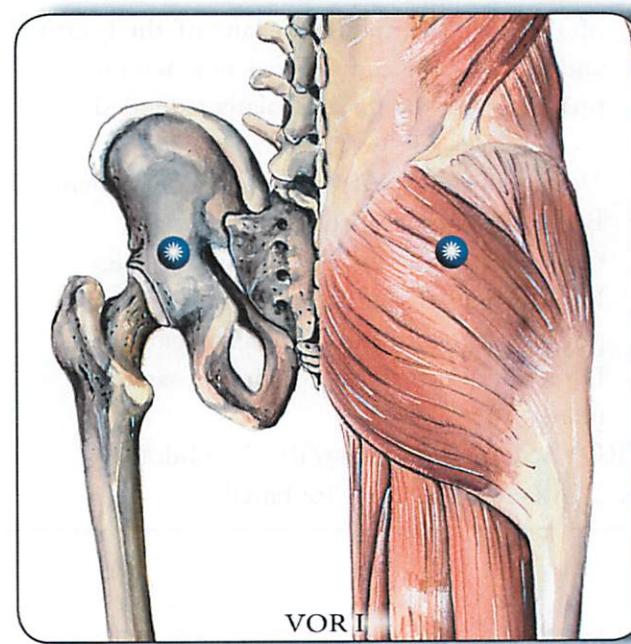
FLEXOR DIGITUS PEDIS, SECOND



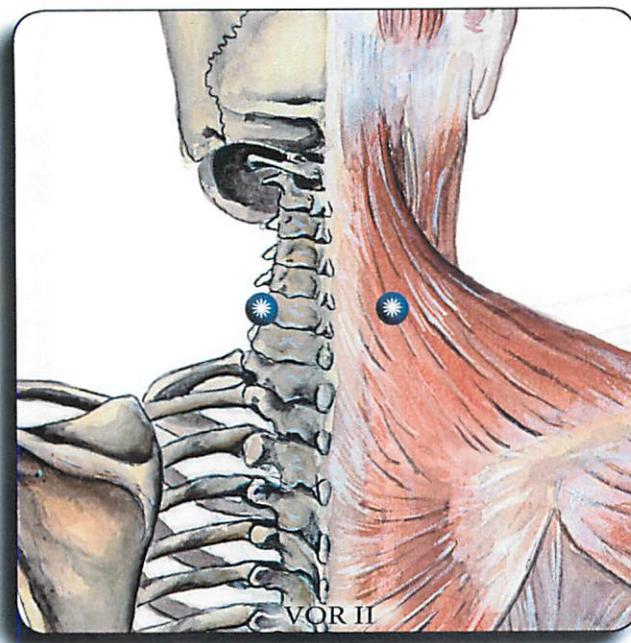
NEUROVASCULAR



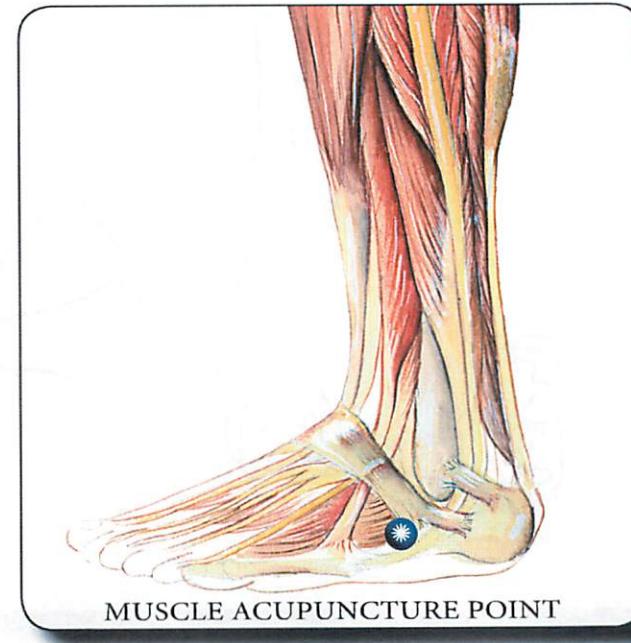
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 950: FLEXOR DIGITUS PEDIS, Second (Lumbricales Pedis, First Division)

ORIGIN: Tendon of flexor digitorum longus at the angle of division, medial side of tendon.

INSERTION: Dorsal surface of the proximal phalanx of second toe, medial side.

ACTION: Flexes the proximal phalanx while extending the middle and distal phalanges of the second toe. Especially active in flexion while toes are in an extended position. (Note illustration.)

TEST:

Patient: Position: Supine.

M.T.P.: Dorsiflex the toes. Prepare to flex the proximal while extending the middle and distal phalanges.

Doctor: Position: At end of table facing patient.

Brace: Dorsum of metatarsals.

Contact: Base of proximal phalanx of second toe. Support dorsum of toe to maintain middle and distal extension.

Direction: Dorsiflex through mid-sagittal plane.

NEUROVASCULAR: (Lat) Frontal bone, superior to superior temporal line, 2" posterior to supraorbital ridge.

NEUROLYMPHATIC: (Post/R) Tenth I.C.S. at the spine.

VISCERAL ORGAN:

I. *Lymphatics of Ileum:* (Post/BL) Belly of iliac division of gluteus maximus, lateral and inferior to B 48.

II. *Sinuses - Maxillary:* (Post/BL) C6 transverse process, posterior tip.

M. A. P. : B 62.5 (See Acupuncture Charts in Instruction Manual).

V.L. : T10 R

L. B. V.L. : T1 R

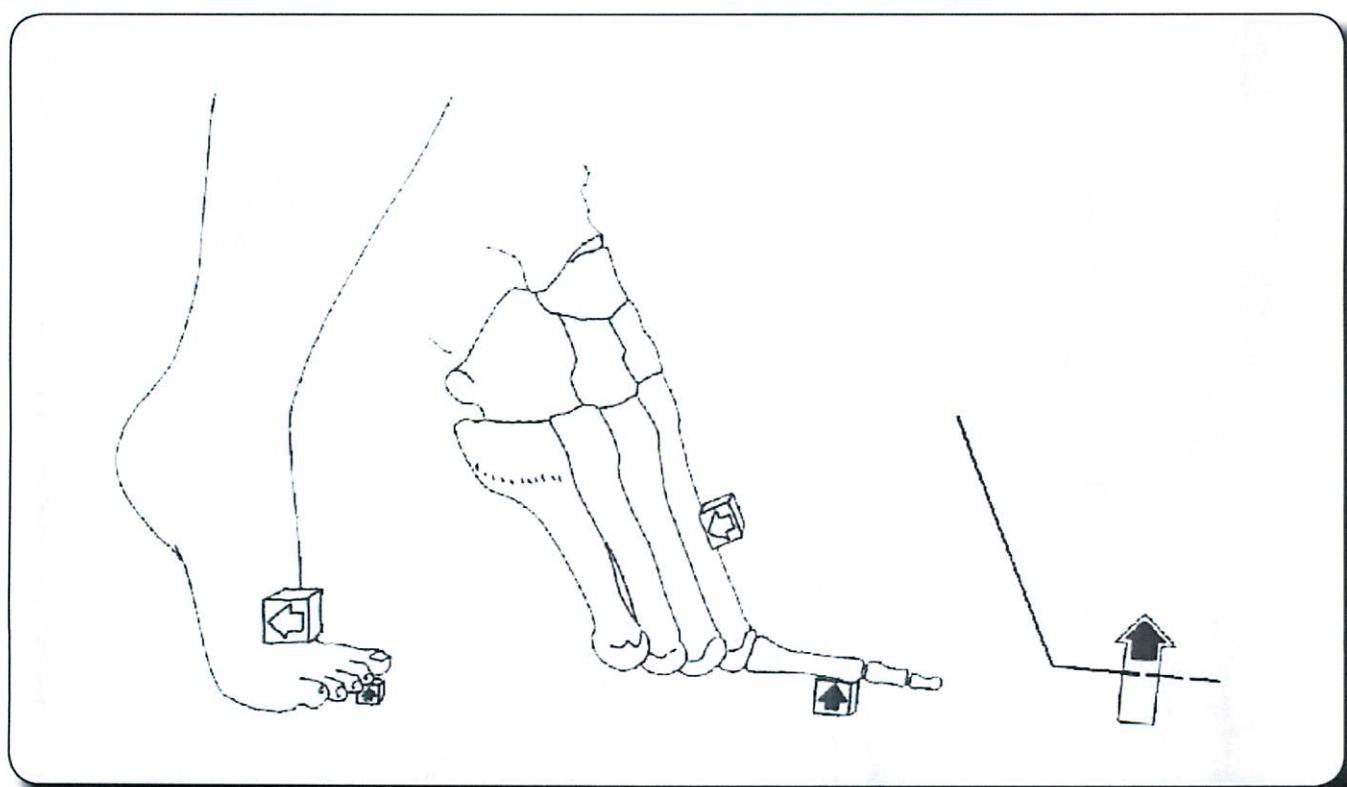
M. M. : S2

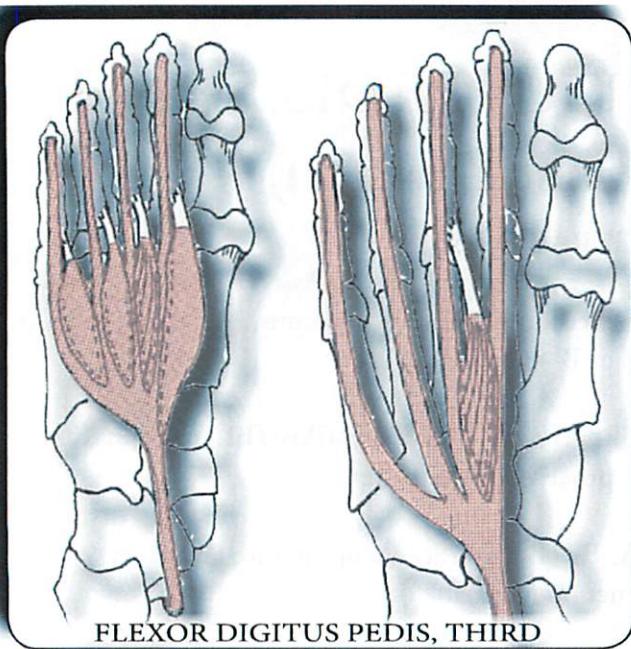
CRANIAL: Inferior Conchae

FOOT: Proximal Phalanx of Second Toe.

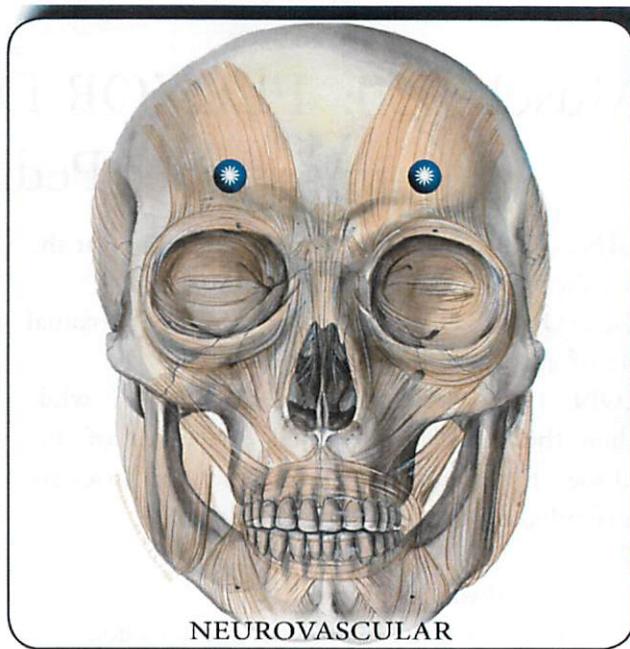
NUTRIENT SOURCE:

- 1. Core Phosphorus (N.W.)
- 2. Phosfood (S)
- 3. Phos Tabs (N.W.)

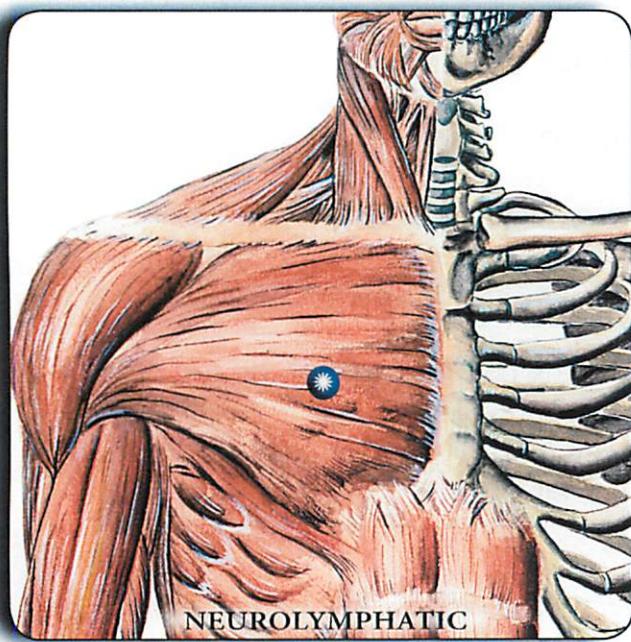




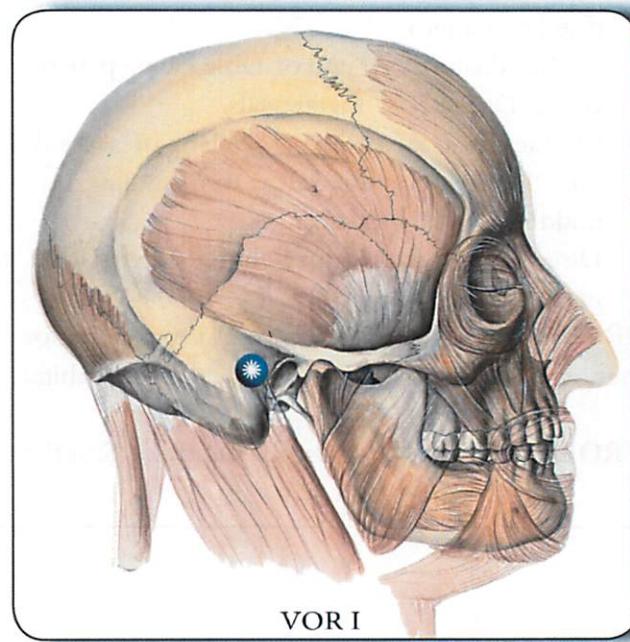
FLEXOR DIGITUS PEDIS, THIRD



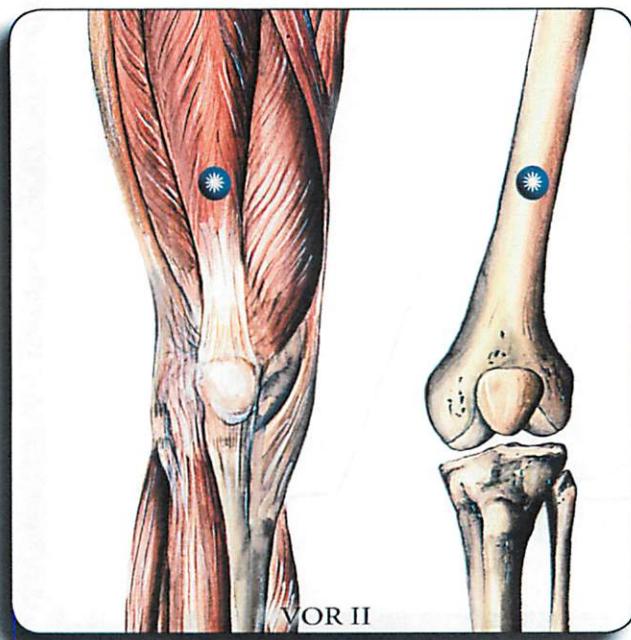
NEUROVASCULAR



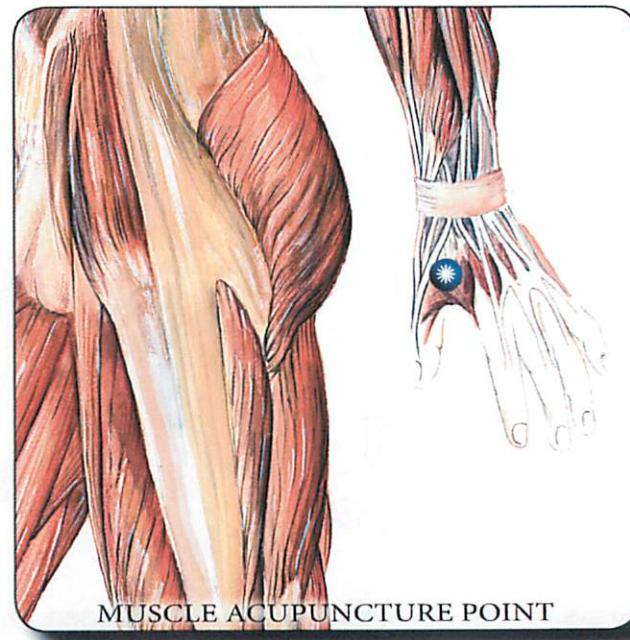
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 952: FLEXOR DIGITUS PEDIS, Third (Lumbricales Pedis, Second Division)

ORIGIN: Tendon of flexor digitorum longus at its angle of division.

INSERTION: Passes forward medial side of third toe.

ACTION: Flexes the proximal phalanx while extending the middle and distal phalanges of the third toe. Especially active in flexion while toes are in an extended position. (Note illustration.)

TEST:

Patient: Position: Supine.

M.T.P.: Dorsiflex the toes. Prepare to flex the proximal while extending the middle and distal phalanges.

Doctor: Position: End of table facing patient.
Brace: Dorsum of metatarsals.

Contact: Base of proximal phalanx of third toe. Support dorsum of toe to maintain middle and distal extension.

Direction: Dorsiflex toe through midsagittal plane.

NEUROVASCULAR: (Ant/BL) Frontal bone, below frontal prominence.

NEUROLYMPHATIC: (Ant/R) Third I.C.S., 1" lateral to sternum.

VISCERAL ORGAN:

I. *Ear - External:* (Lat/BL) T 18, posterior and inferior to ear.

II. *Kidney:* (Ant/BL) Thigh, anterior surface, in belly of rectus femoris, 1" superior to where the muscle turns to tendon.

M. A. P. : Li 4.2

V.L. : T11 L

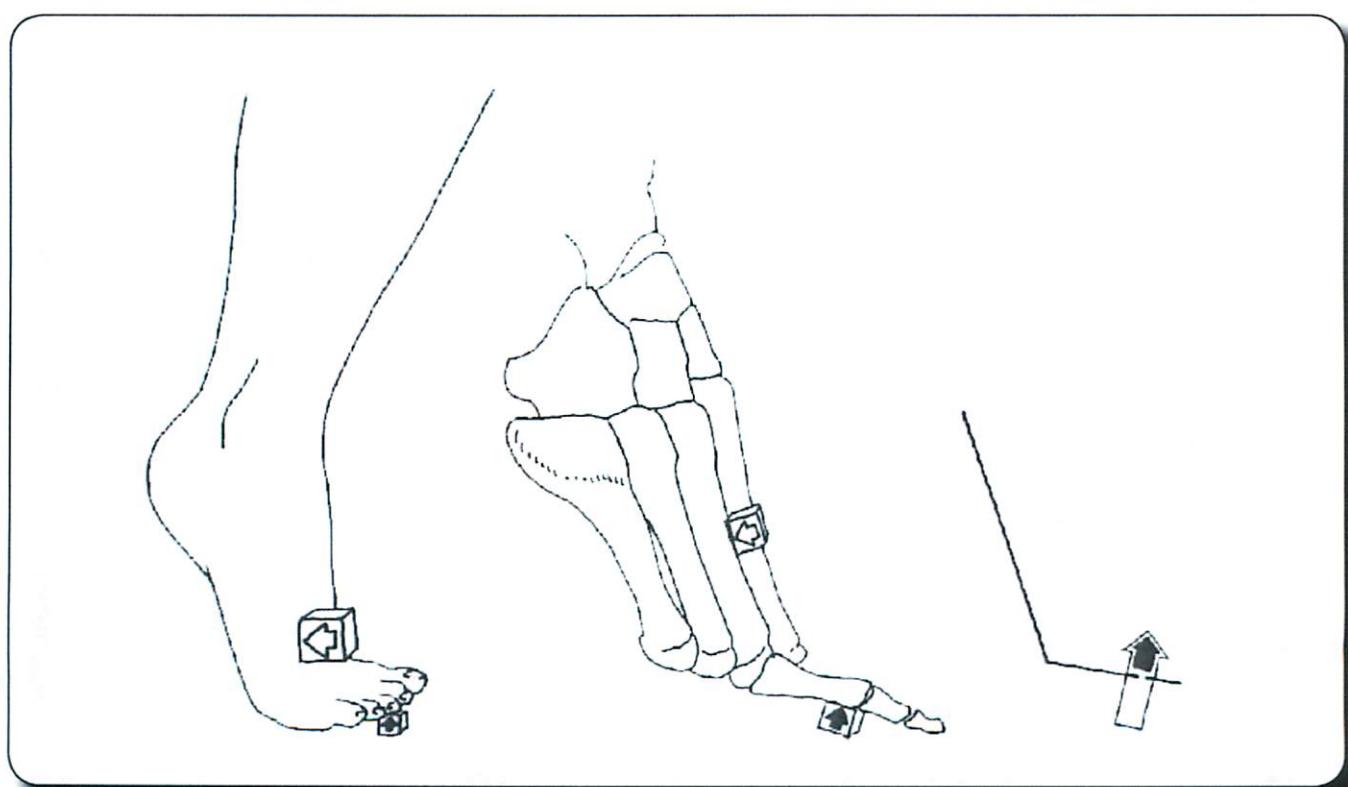
L. B. V.L. : C7 L

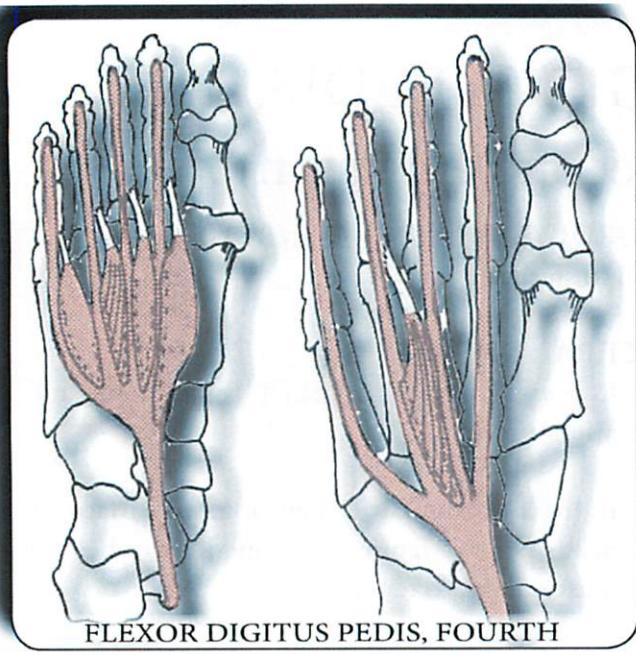
M. M. : S2

CRANIAL: In Research

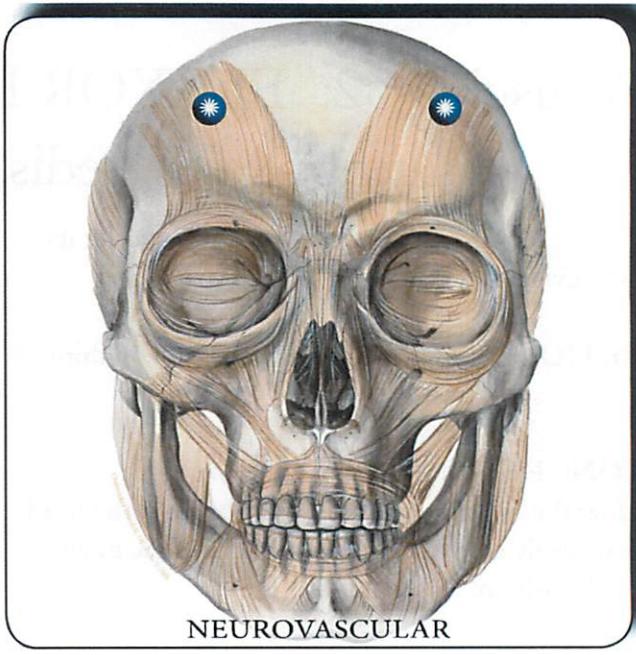
FOOT: In Research

NUTRIENT SOURCE: In Research

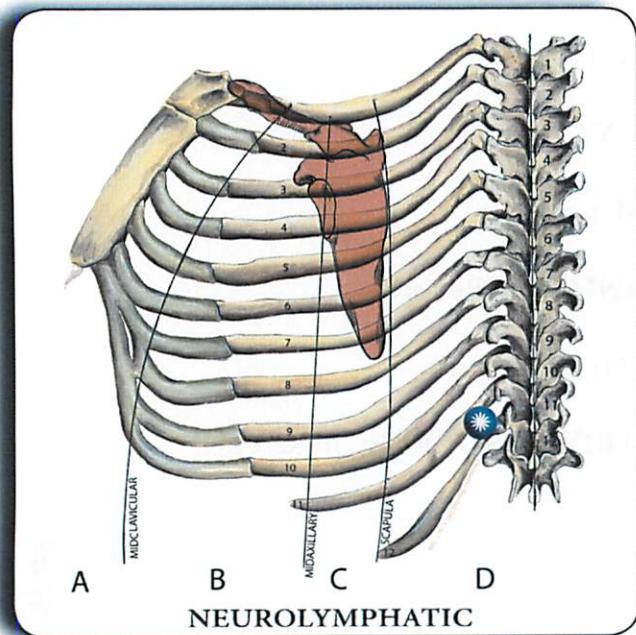




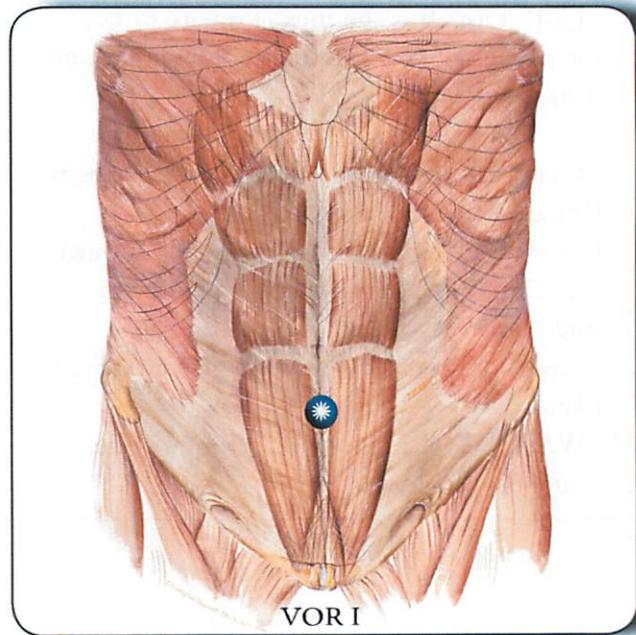
FLEXOR DIGITUS PEDIS, FOURTH



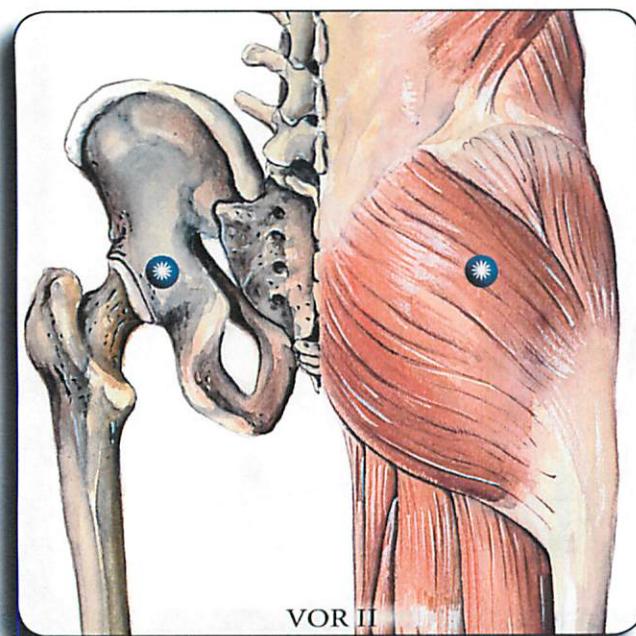
NEUROVASCULAR



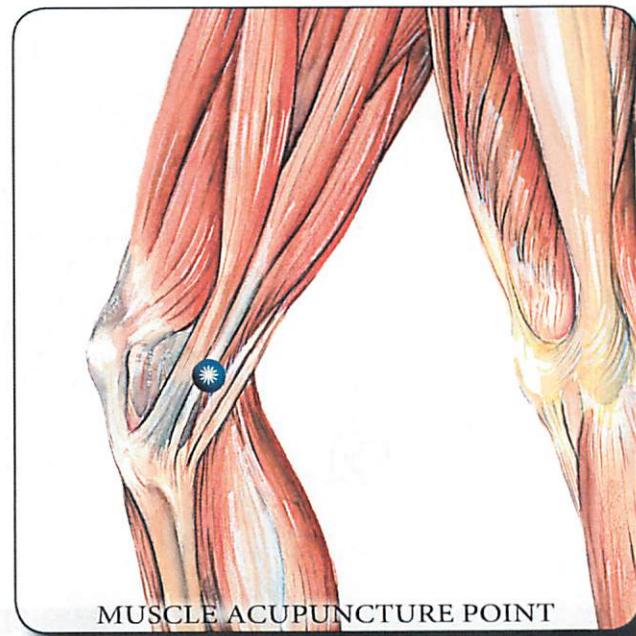
A MIDCLAVICULAR
B MIDAXILLARY
C SCAPULAR
D LUMBAR
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 954: FLEXOR DIGITUS PEDIS, Fourth (Lumbricales Pedis, Third Division)

ORIGIN: Tendon of flexor digitorum longus at the angle of division.

INSERTION: Dorsal surface of the first phalanx of the fourth toe.

ACTION: Flexes the proximal phalanx while extending the middle and distal phalanges of the fourth toe. Especially active in flexion while toes are in an extended position. (Note illustration.)

TEST:

Patient: Position: Supine.

M.T.P.: Dorsiflex the toes. Prepare to flex the proximal while extending the middle and distal phalanges.

Doctor: Position: End of table facing patient.

Brace: Dorsum of metatarsals.

Contact: Base of proximal phalanx of fourth toe. Support dorsum of toe to maintain middle and distal extension.

Direction: Dorsiflex through midsagittal plane.

NEUROVASCULAR: (Ant/BL) Frontal bone, superior and medial to frontal eminence.

NEUROLYMPHATIC: (Post/L) Eleventh I.C.S., at transverse process of vertebra.

VISCERAL ORGAN:

I. *Thymus:* (Ant/Midline) Cv 5, 3/4 of the distance between pubes and umbilicus.

II. *Penis/Vaginal Vault:* (Post/BL) Belly of gluteus maximus, superior and lateral to B 49.

M. A. P. : Lv 8.5

V.L. : T1 L

L. B. V.L. : T10 L

M. M. : S3

CRANIAL: Ethmoid

FOOT: First Cuneiform

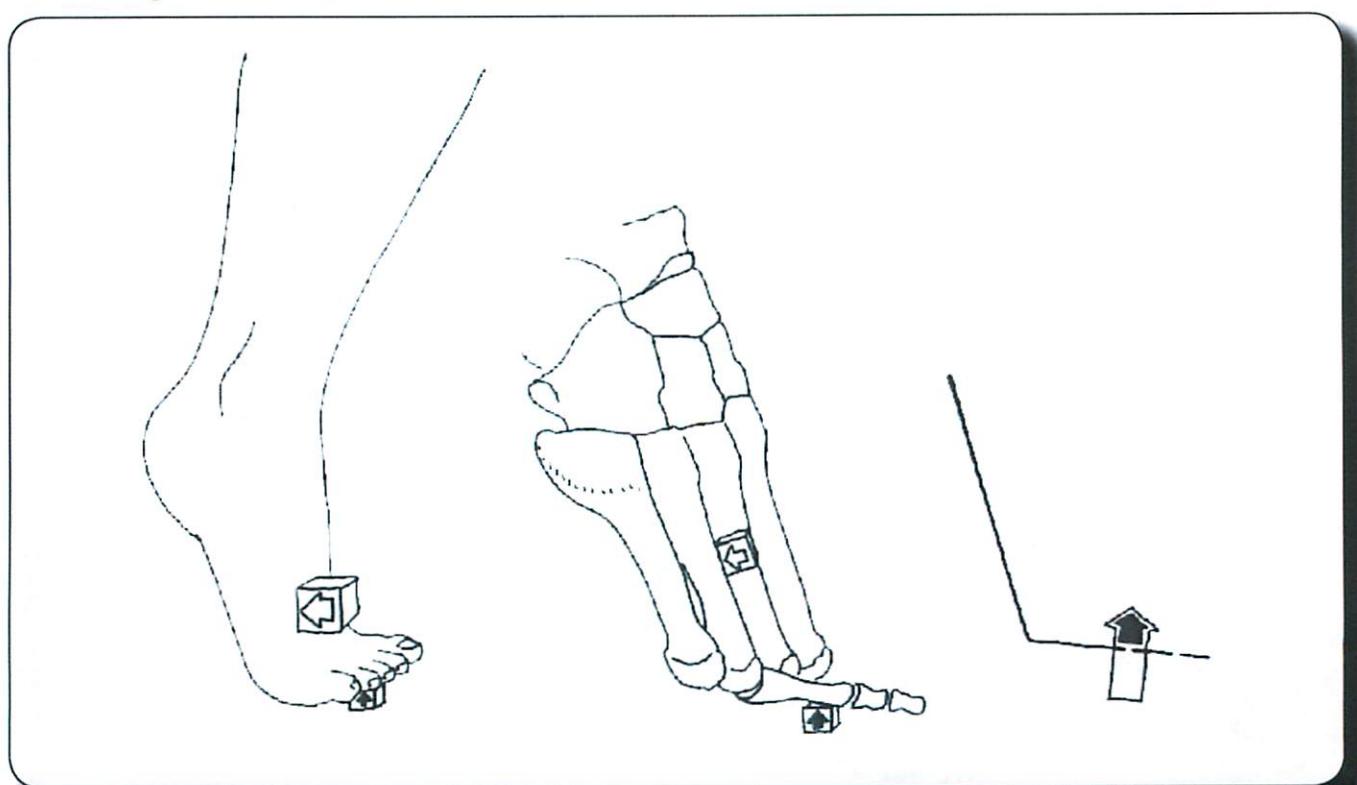
NUTRIENT SOURCE:

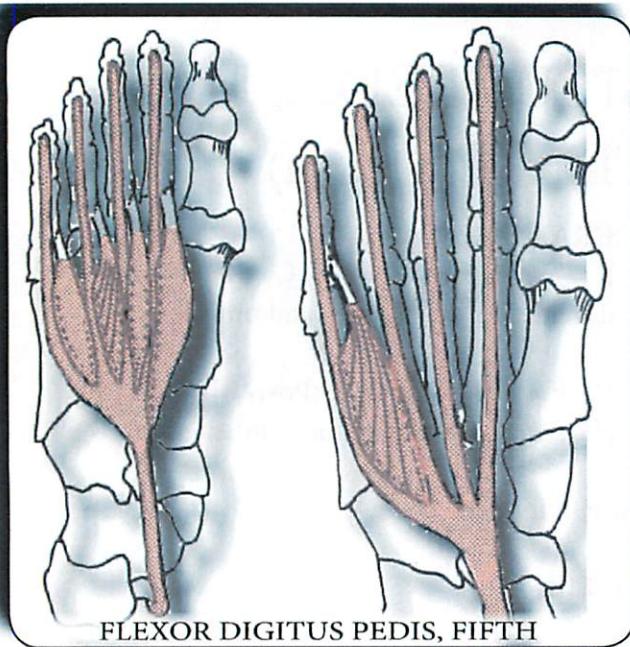
Vitamin E

1. Vitamin E (S)

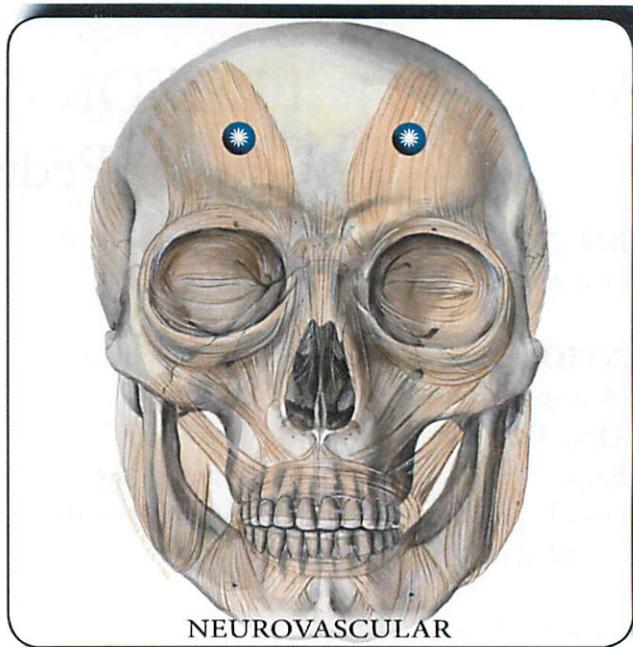
2. Core Vitamin E (N.W.)

3. E100 (N.W.)

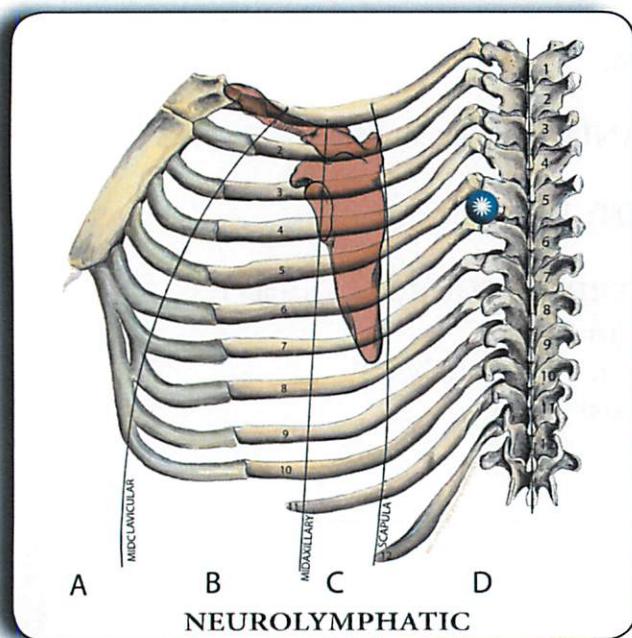




FLEXOR DIGITUS PEDIS, FIFTH

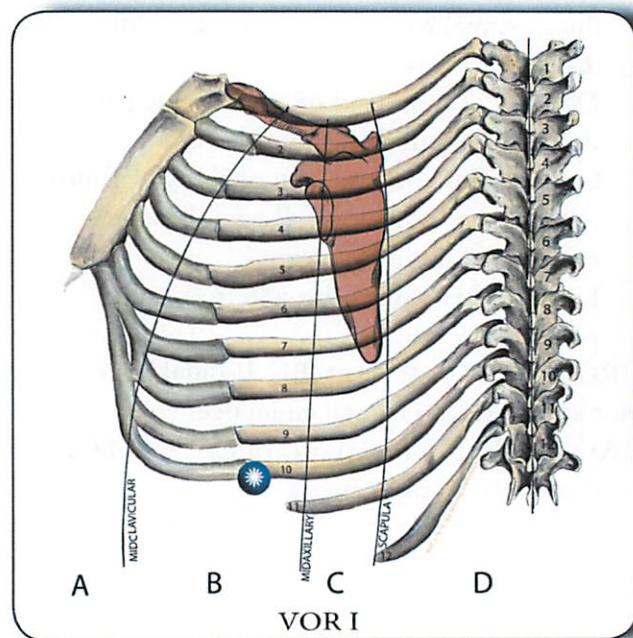


NEUROVASCULAR



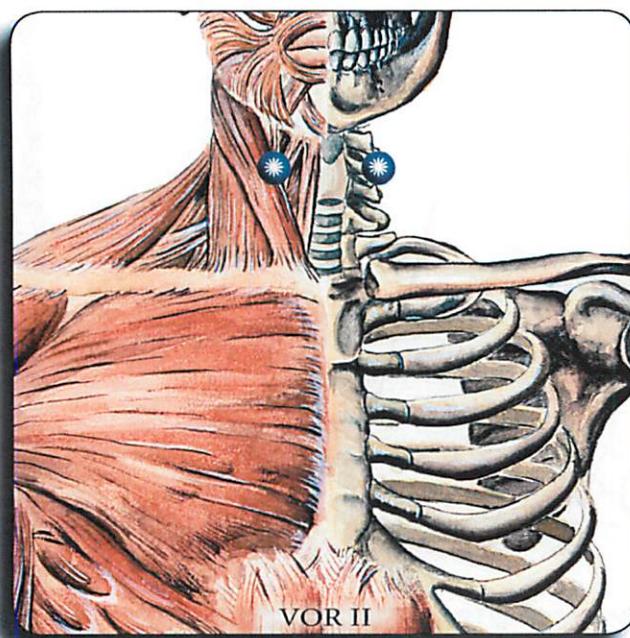
A B C D
MIDCLAVICULAR MIDAXILLARY SCAPULA SPINE

NEUROLYMPHATIC

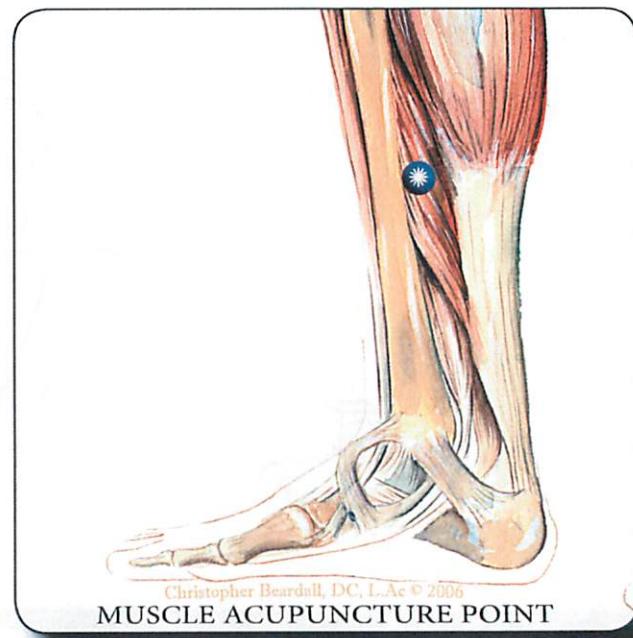


A B C D
MIDCLAVICULAR MIDAXILLARY SCAPULA SPINE

VOR I



VOR II



Christopher Beardall, DC, L.Ac © 2006
MUSCLE ACUPUNCTURE POINT

Muscle 956: FLEXOR DIGITUS PEDIS, Fifth (Lumbricales Pedis, Fourth Division)

ORIGIN: Tendon of flexor digitorum longus at the angle of division.

INSERTION: Dorsal surface of the proximal phalanx of fifth toe, medial side.

ACTION: Flexes the proximal phalanx while extending the middle and distal phalanges of the fifth toe. Especially active in flexion while toes are in an extended position. (Note illustration.)

TEST:

Patient: Position: Supine.

M.T.P.: Dorsiflex the toes. Prepare to flex the proximal while extending the middle and distal phalanges.

Doctor: Position: End of table facing patient.

Brace: Dorsum of metatarsals.

Contact: Base of proximal phalanx of fifth toe. Support dorsum of toe to maintain middle and distal extension.

Direction: Dorsiflex toe through mid-sagittal plane.

NEUROVASCULAR: (Ant/BL) Frontal bone, superior and medial to frontal eminence, close to midline.

NEUROLYMPHATIC: (Post/L) Fifth I.C.S., at transverse processes.

VISCERAL ORGAN:

I. *Liver:* (Ant/L) Tip of tenth rib at costal cartilage junction.

II. *Sinuses - Maxillary:* (Ant/BL) C5 transverse process, inferior to S9, medial border of sternocleido-mastoideus.

M. A. P. : Lv 5.5

V.L. : T12 R

L. B. V.L. : C6 R

M. M. : S3

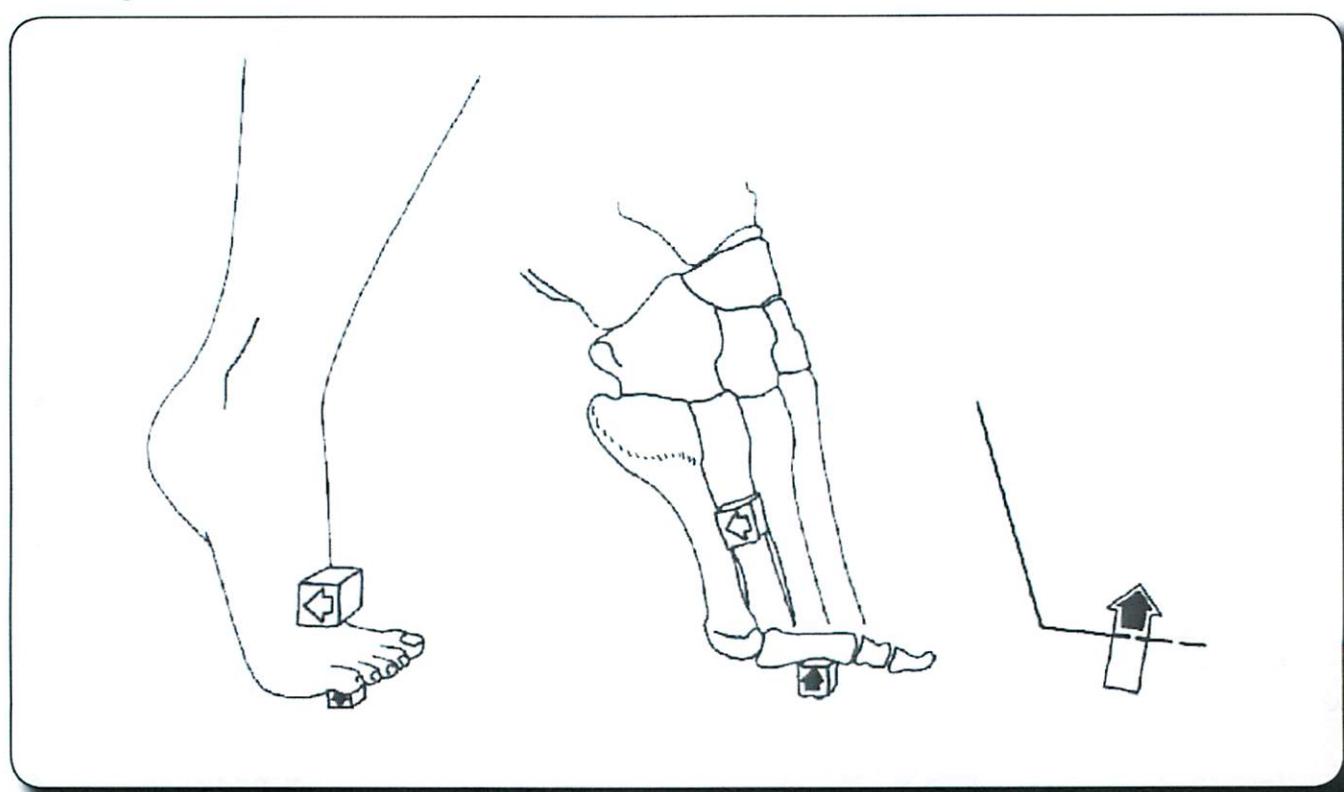
CRANIAL: Mandibular

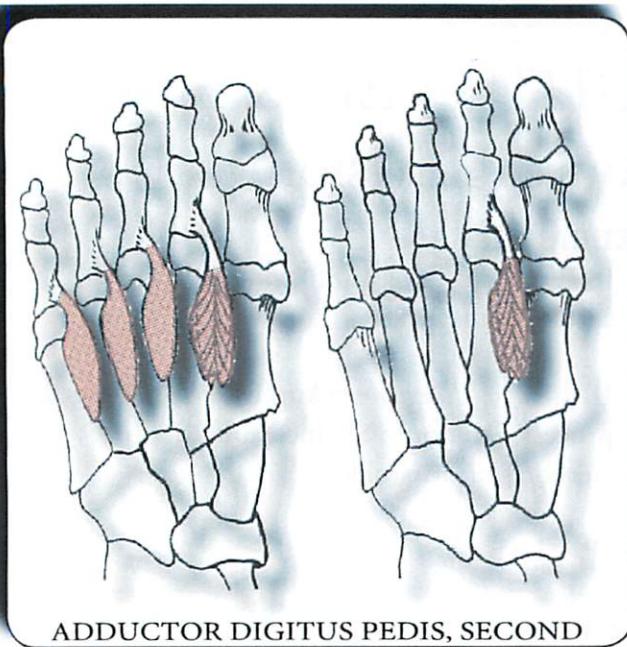
FOOT: Proximal Phalanx of Great Toe

NUTRIENT SOURCE:

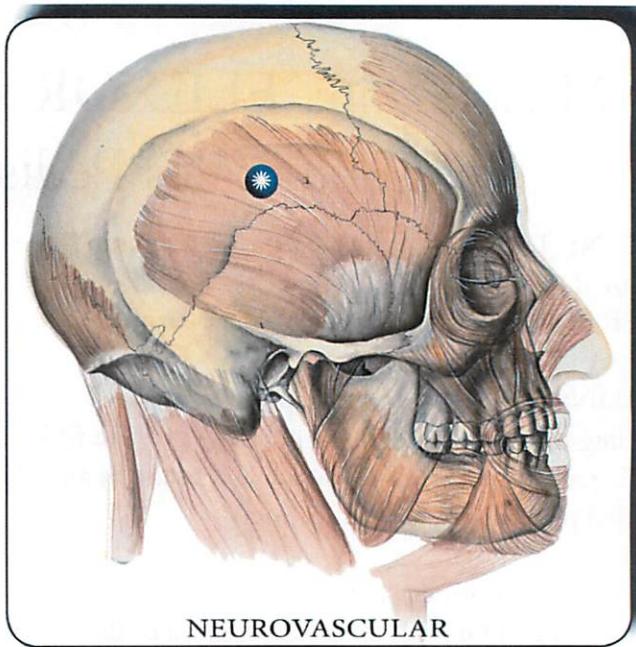
Vitamin F

1. Complex F (S)
2. Core Vitamin F (N.W.)
3. F Complex (N.W.)

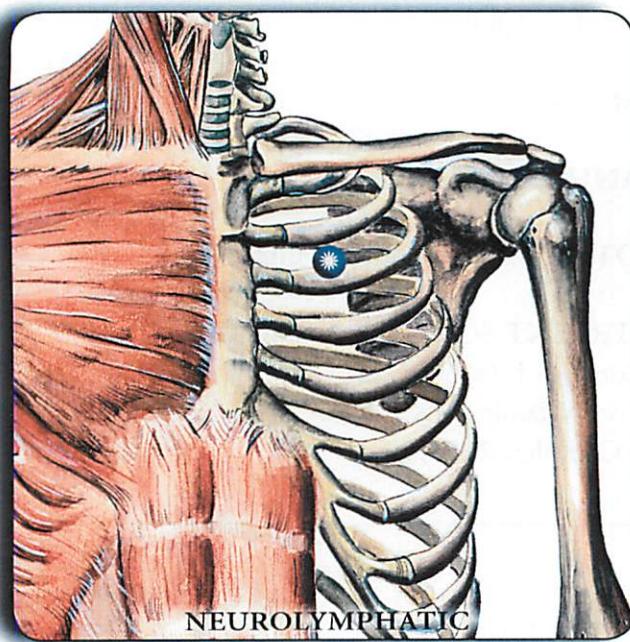




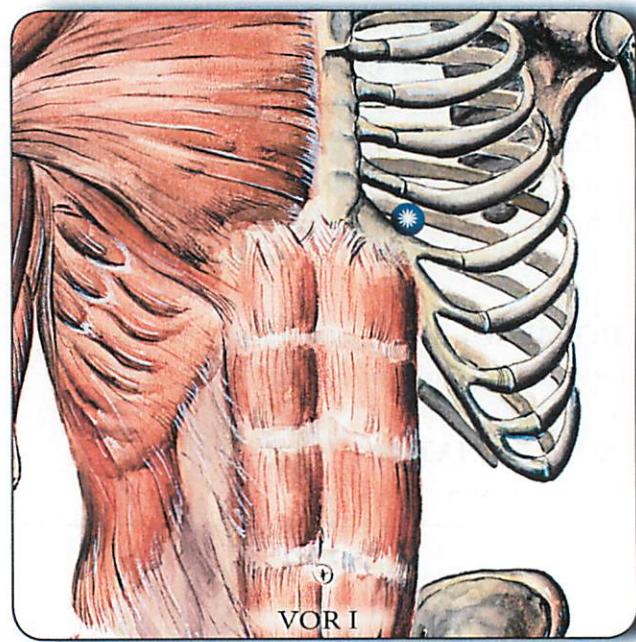
ADDUCTOR DIGITUS PEDIS, SECOND



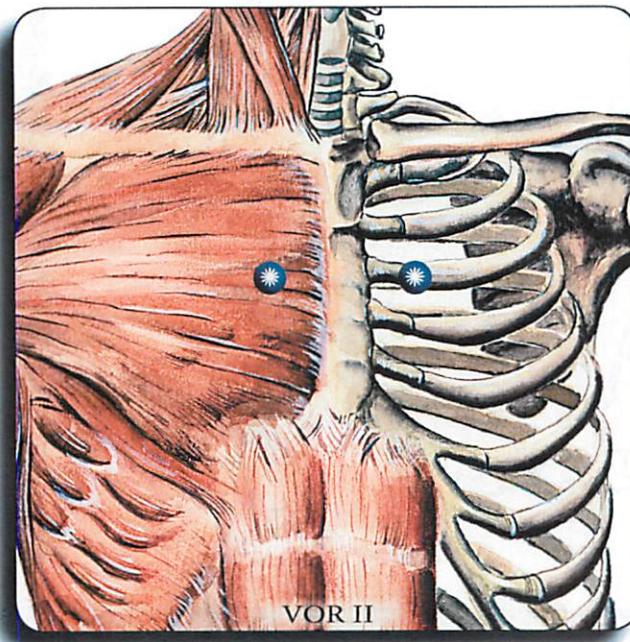
NEUROVASCULAR



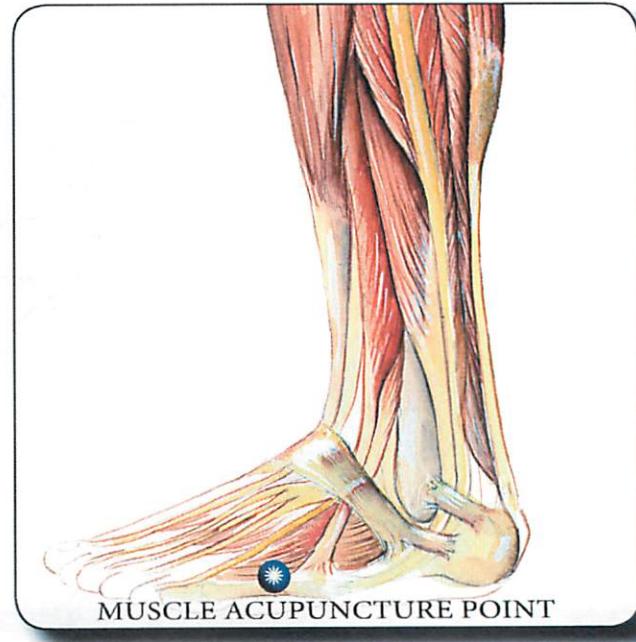
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 958: ADDUCTOR DIGITUS PEDIS, Second (Interossei Dorsales Pedis, First Division)

ORIGIN: Proximal dorsal surfaces of the first and second metatarsals.

INSERTION: Base of the proximal phalanx of the second toe. Inserts at the medial side.

ACTION: Adducts the proximal phalanx of the second toe toward the mid-sagittal plane.

TEST:

Patient: Position: Supine.

M. T .P.: Adduct and slightly flex the proximal phalanx of the second toe.

Doctor: Position: End of table facing patient.
Brace: Dorsum and lateral aspect of second metatarsal.

Contact: Medial aspect of proximal phalanx of second toe.

Direction: Abduct second toe.

NEUROVASCULAR: (Lat) Parietal bone, 1"
superior to squamosal suture, 4" superior, 1" posterior
to external auditory canal.

NEUROLYMPHATIC: (Ant/L) Second I.C.S., 2"
lateral to sternum.

VISCERAL ORGAN:

I. *Pancreas Duct System*: (Ant/L) K 22, fifth
I.C.S., 1" lateral to sternum.

II. *Eye*: (Ant/BL) Third rib, costal cartilage
junction, 1" lateral to sternum.

M. A. P.: B 64.5

V.L.: L4 R

L. B. V.L.: C2 R

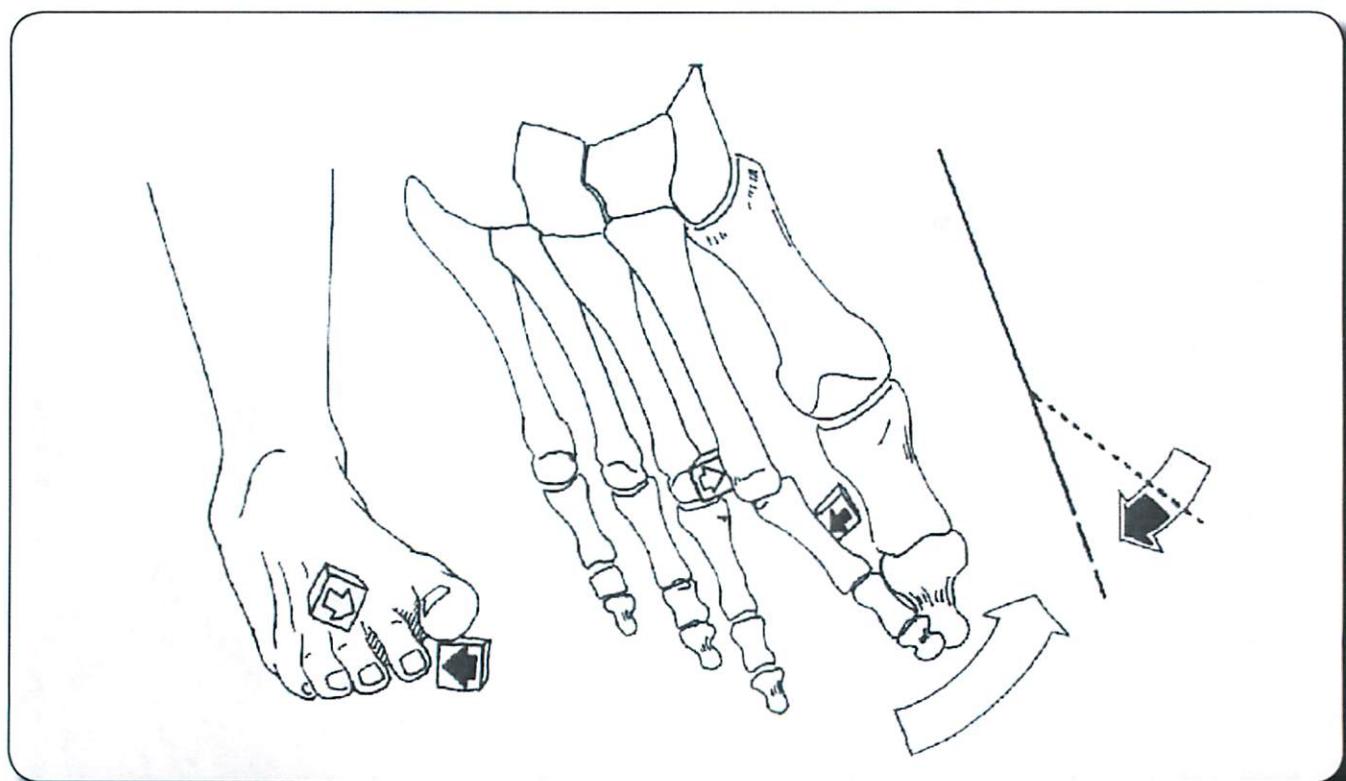
M. M.: S2

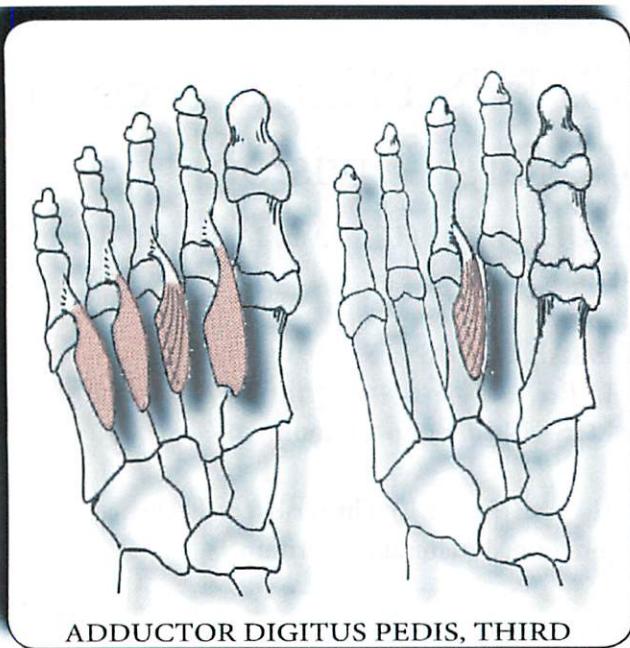
CRANIAL: Occiput

FOOT: Calcaneus

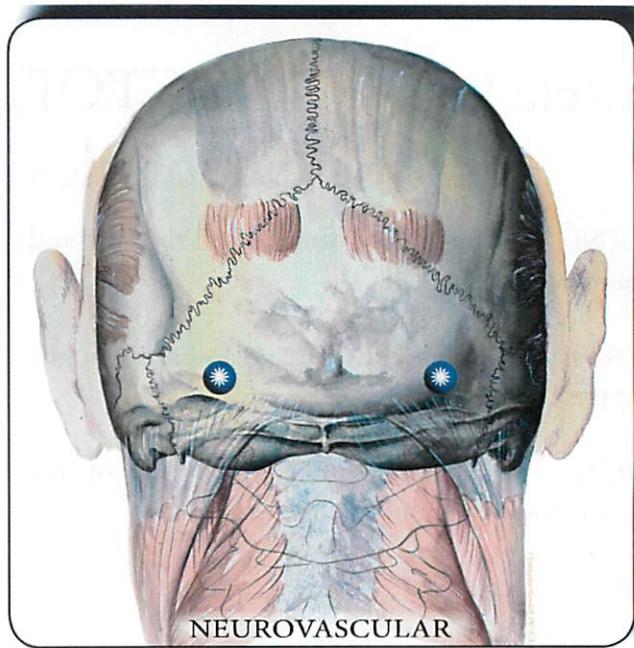
NUTRIENT SOURCE: Zinc

1. Core Zinc (N.W.)
2. Zinc Chelate (N.W.)
3. Chezyn (S)

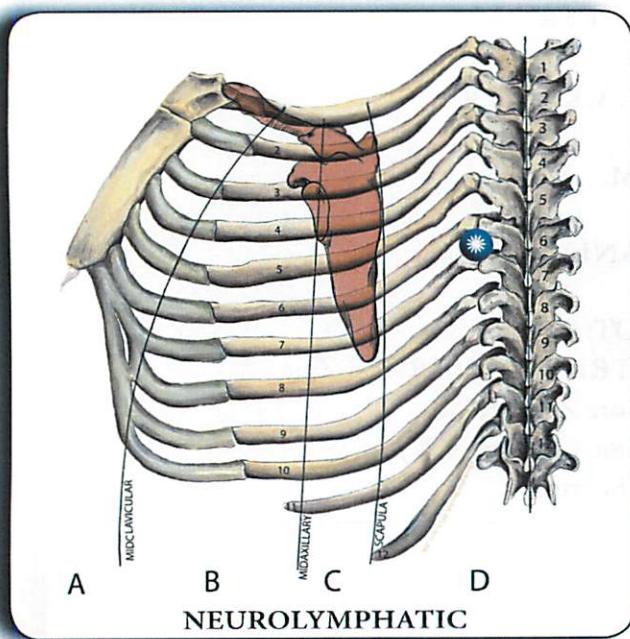




ADDUCTOR DIGITUS PEDIS, THIRD

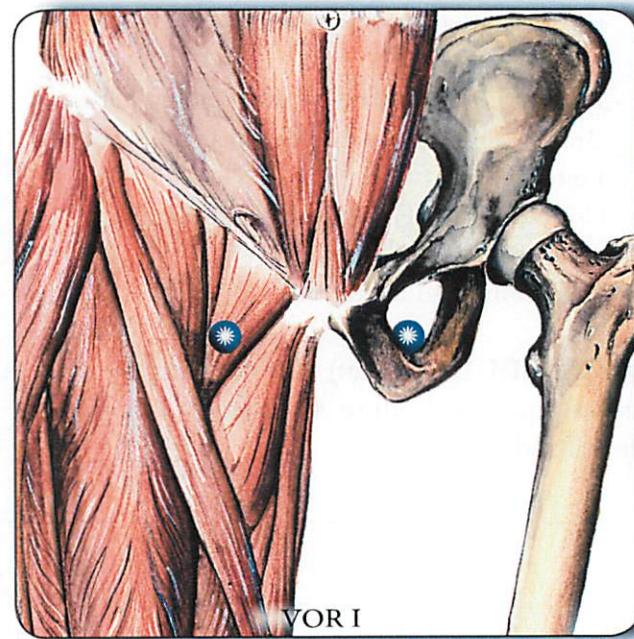


NEUROVASCULAR

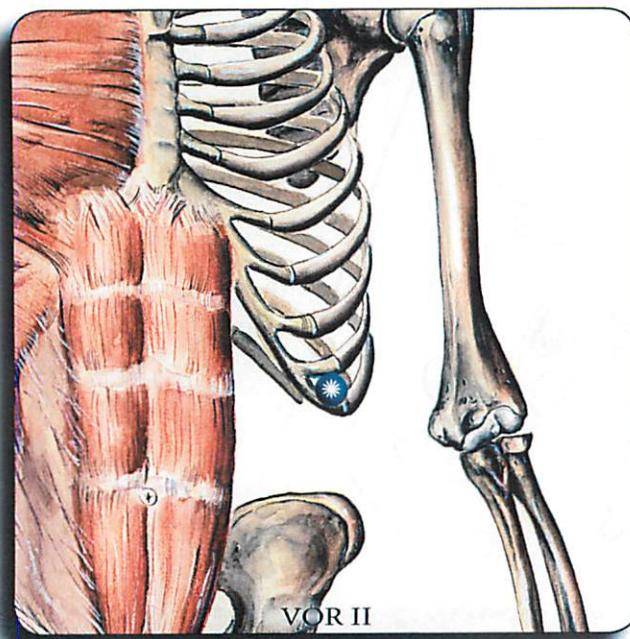


A MIDCLAVICULAR
B MIDAXILLARY
C SCAPULA
D

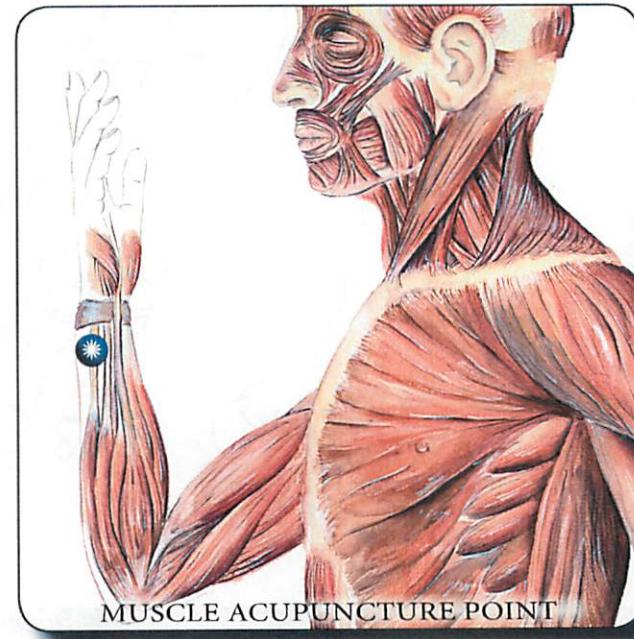
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 960: ADDUCTOR DIGITUS PEDIS, Third (Interossei Plantares, First Division)

ORIGIN: Base and medial side of third metatarsal.

INSERTION: Medial side of the base of proximal phalanx of the third toe.

ACTION: Adducts the proximal phalanx of the third toe toward the mid-sagittal plane.

TEST:

Patient: Position: Supine.

M.T.P.: Adduct and slightly flex the proximal phalanx of the third toe.

Doctor: Position: End of table facing patient.

Brace: Dorsum and lateral aspect of third metatarsal.

Contact: Medial aspect of proximal phalanx of third toe.

Direction: Abduct third toe.

NEUROVASCULAR: (Post/BL) Occipital bone, 1" inferior and 2" lateral to external occipital protuberance.

NEUROLYMPHATIC: (Post/L) Sixth I.C.S., 1" lateral to spine.

VISCERAL ORGAN:

I. *Bladder:* (Ant/BL) Lower rim of obturator foramen.

II. *Spleen:* (Ant/L) Ninth I.C.S., at costal cartilage junction.

M. A. P. : Si 6 1/2

V.L. : T6 R

L. B. V.L. : T5 R

M. M. : S3

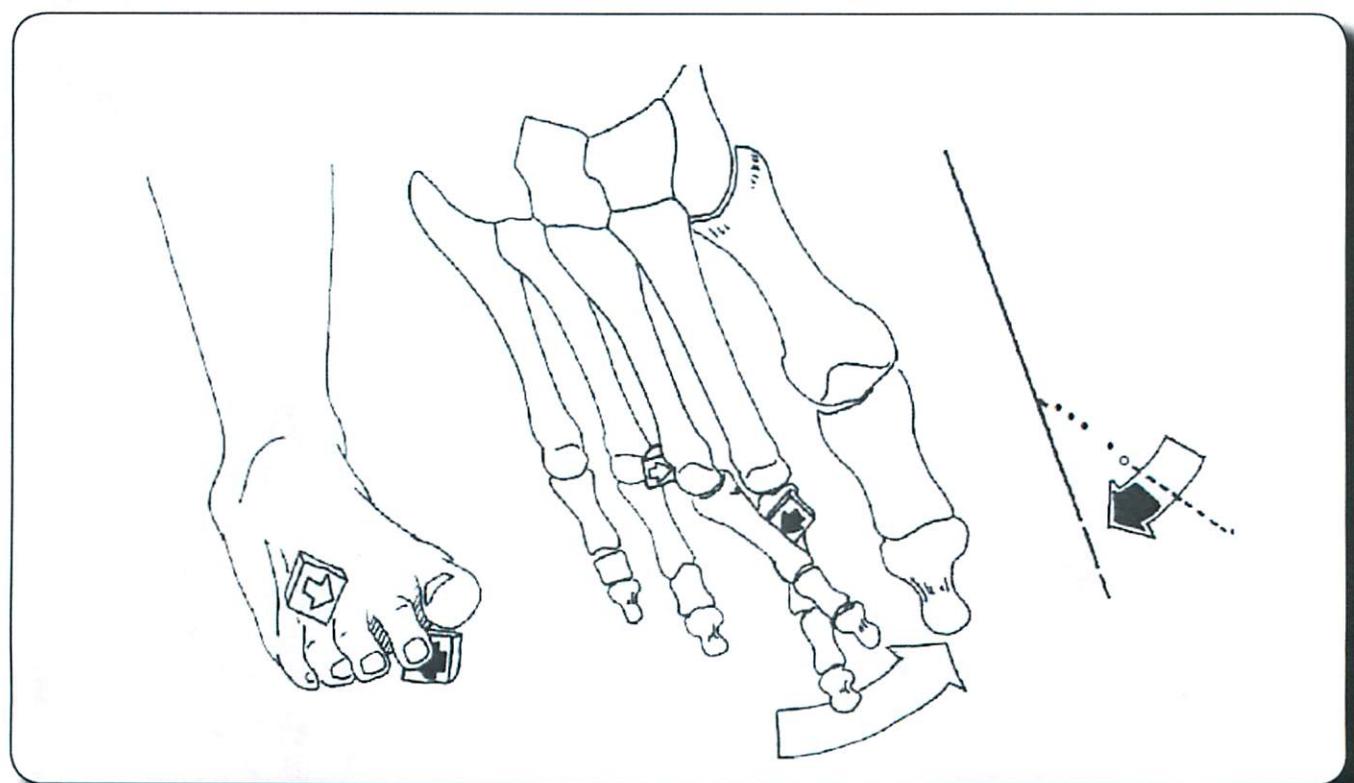
CRANIAL: In Research

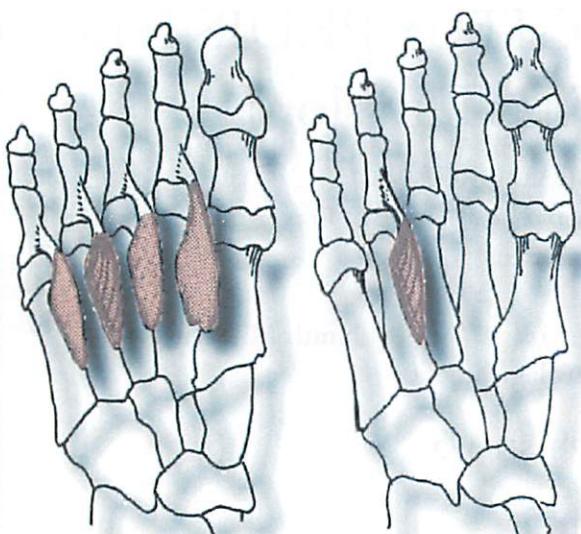
FOOT: In Research

NUTRIENT SOURCE: Iodine

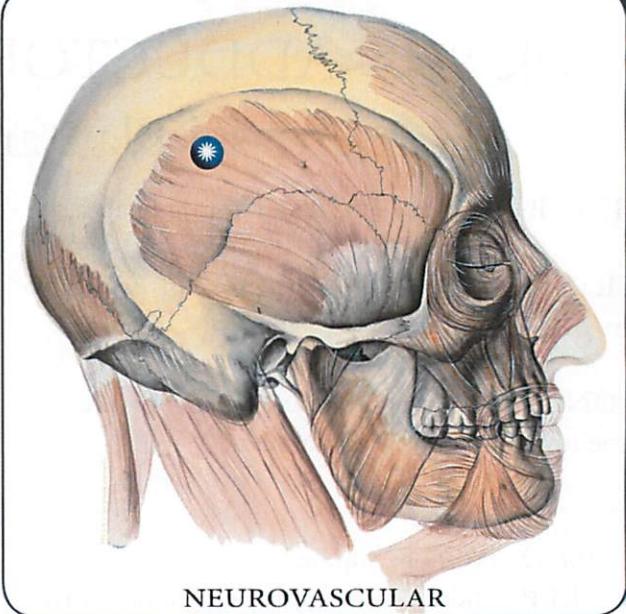
1. Iodomere (S)

2. Core Iodine (N.W.)

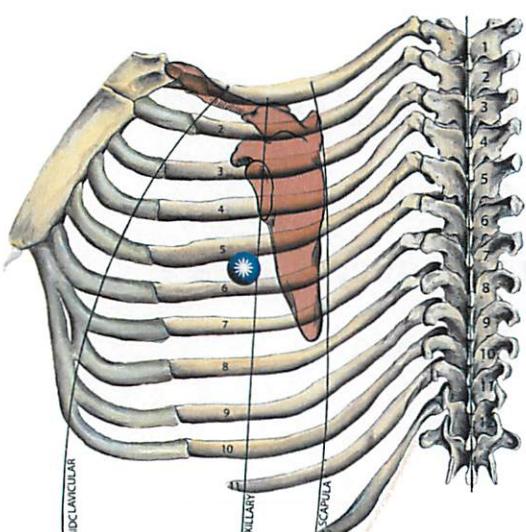




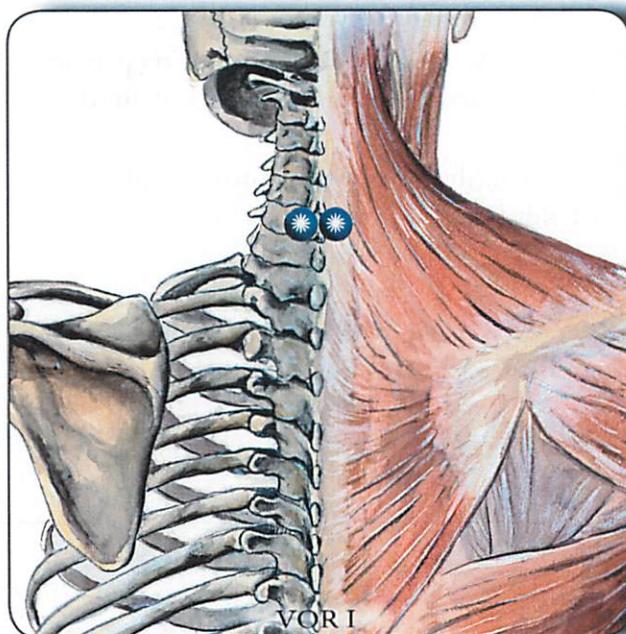
ADDUCTOR DIGITUS PEDIS, FOURTH



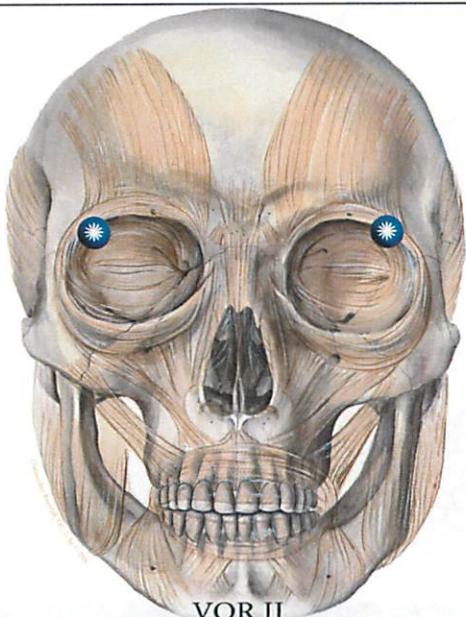
NEUROVASCULAR



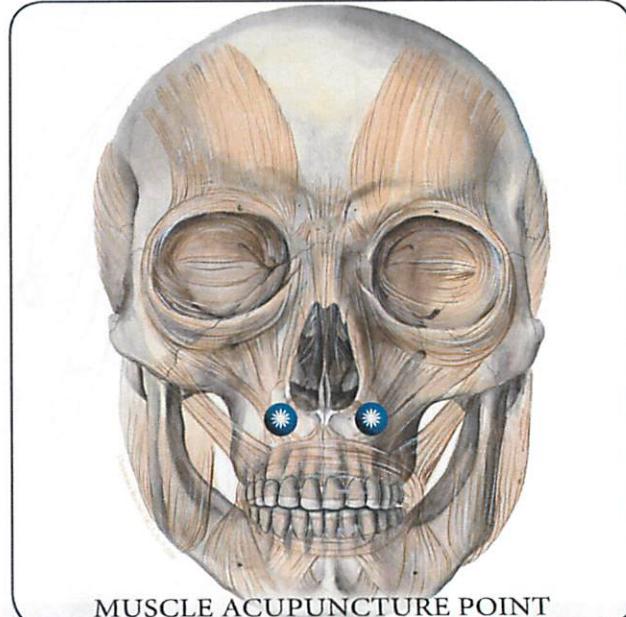
A B C D
NEUROLYMPHATIC



VQR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 962: ADDUCTOR DIGITUS PEDIS, Fourth (Interossei Plantares, Second Division)

ORIGIN: Base and medial side of the fourth metatarsal.

INSERTION: Medial side of the base of the proximal phalanx of the fourth toe.

ACTION: Adducts the proximal phalanx of the fourth toe toward mid-sagittal plane.

TEST:

Patient: Position: Supine.

M.T.P.: Adduct and slightly flex the proximal, phalanx of the fourth toe.

Doctor: Position: End of table facing patient.
Brace: Dorsum and lateral aspect of fourth metatarsal.

Contact: Medial aspect of proximal phalanx of fourth toe.

Direction: Abduct fourth toe.

NEUROVASCULAR: (Lat) Parietal bone, 4"
superior and 1" posterior to external auditory canal.

NEUROLYMPHATIC: (Ant/L) Fifth I.C.S., 6"
lateral to sternum.

VISCERAL ORGAN:

I. *Salivary Gland - Submandibular:* (Post/BL) C6,
just lateral to spinous process.

II. *Eyes:* (Ant /BL) Superior oblique corner of
the eye.

M. A. P. : Li 20

V.L. : T9 L

L. B. V.L. : T2 L

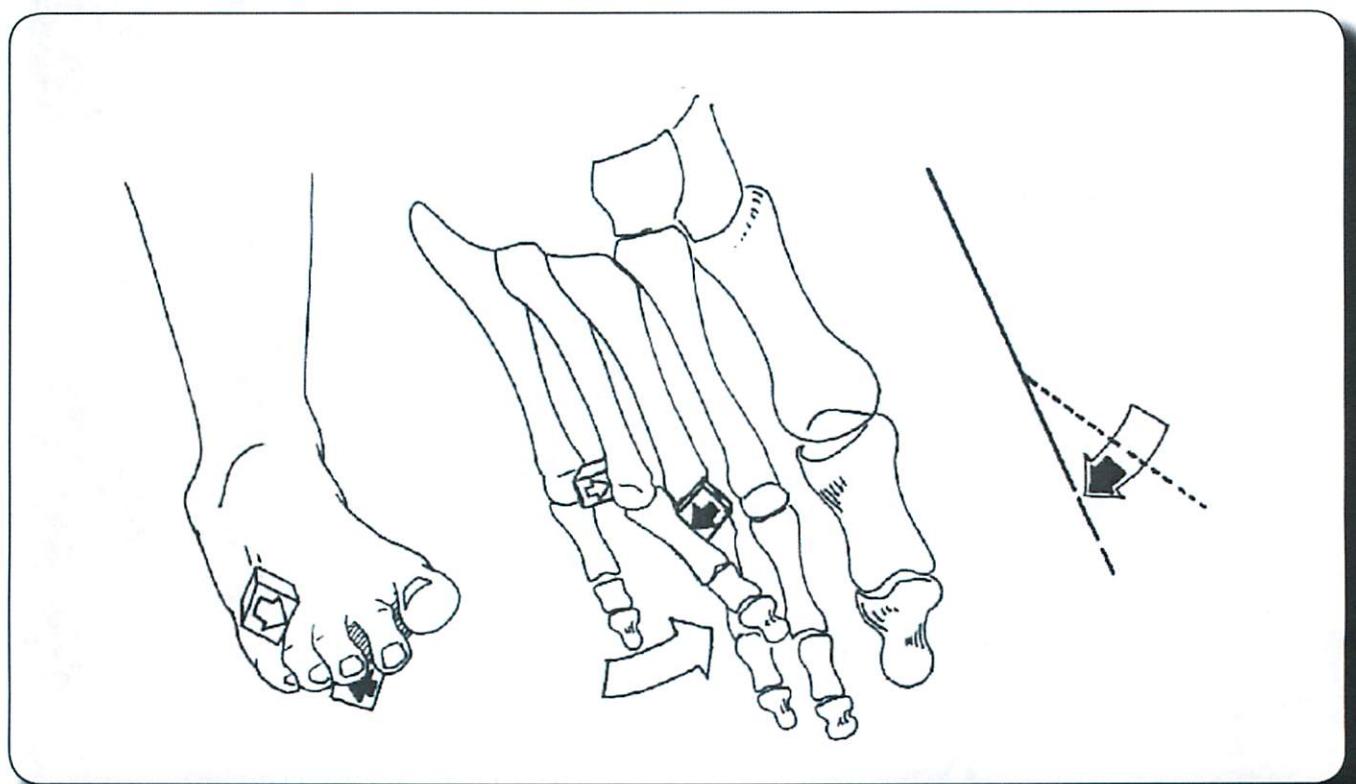
M. M. : S3

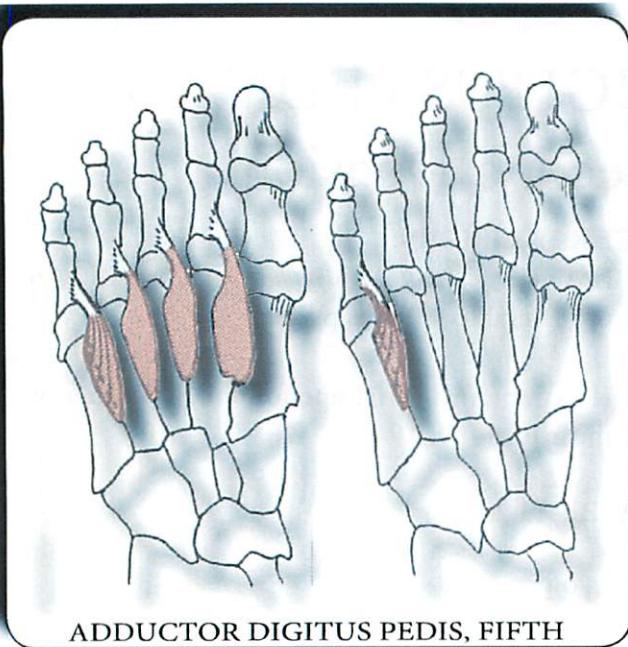
CRANIAL: Styloid

FOOT: Second Phalanx of Great Toe

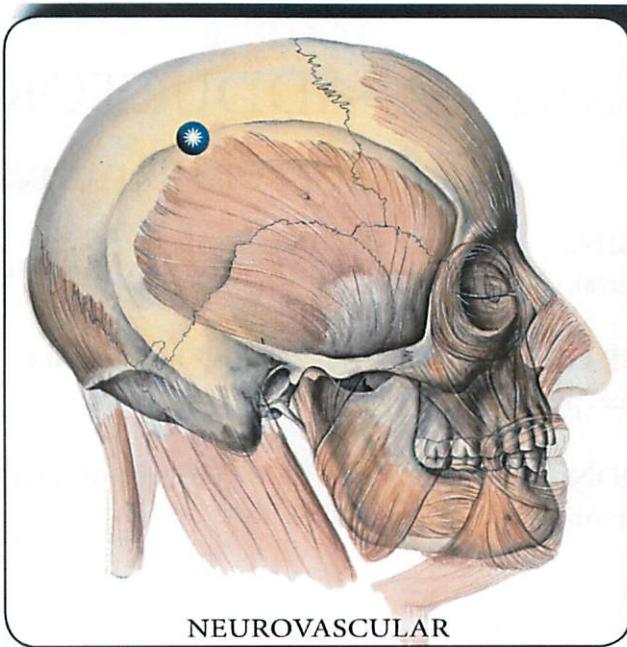
NUTRIENT SOURCE: Potassium

1. Core Potassium (N.W.)
2. Aspartic K (N.W.)
3. Organic Minerals (S)

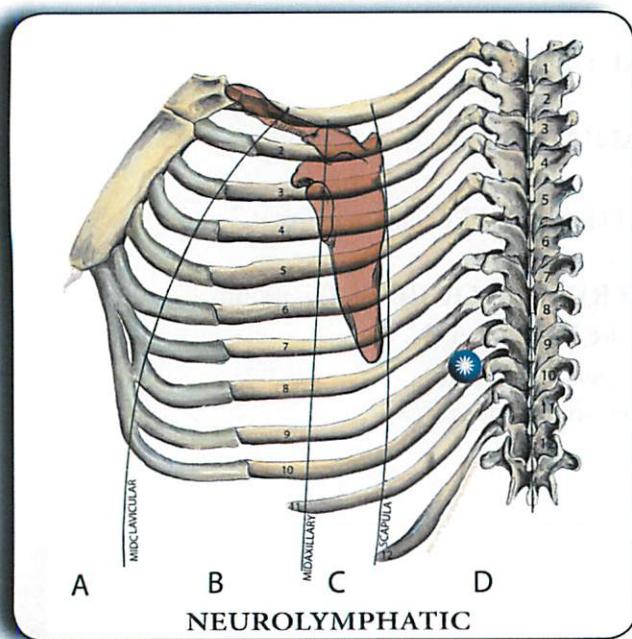




ADDUCTOR DIGITUS PEDIS, FIFTH

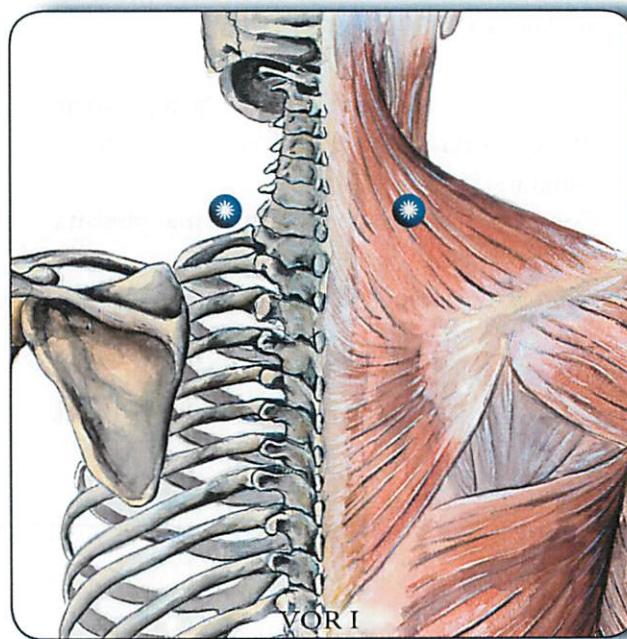


NEUROVASCULAR

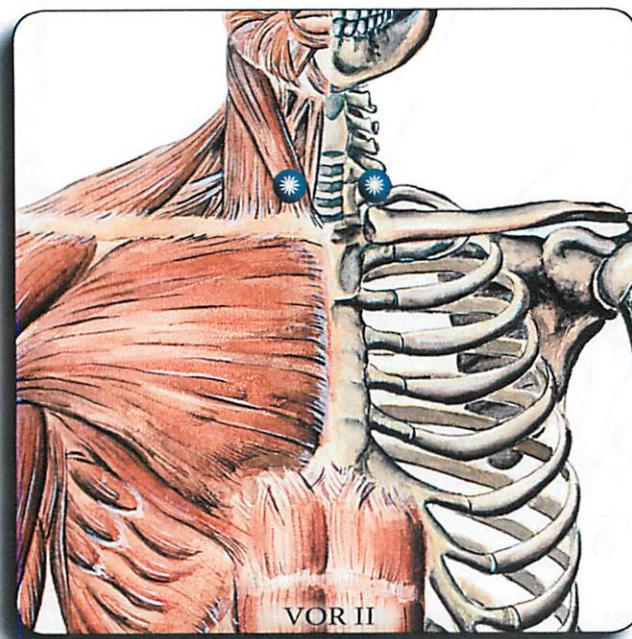


A B C D
MIDCLAVICULAR MIDAXILLARY SCAPULA

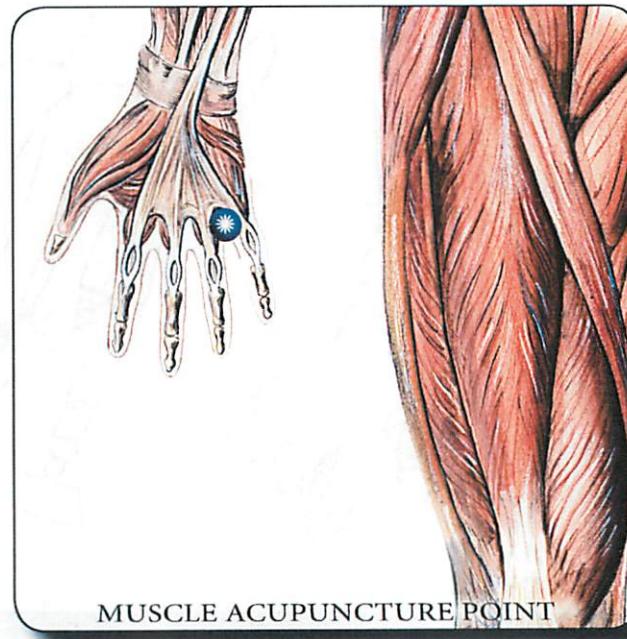
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 964: ADDUCTOR DIGITUS PEDIS, Fifth (Interossei Plantares, Third Division)

ORIGIN: Base and medial side of the fifth metatarsal.

INSERTION: Medial side of the base of the proximal phalanx of the fifth toe.

ACTION: Adducts the proximal phalanx of the fifth toe toward mid-sagittal plane.

TEST:

Patient: Position: Supine.

M.T.P.: Adduct and slightly flex the proximal phalanx of the fifth toe.

Doctor: Position: End of table facing patient.

Brace: Dorsum and lateral aspect of the fifth metatarsal.

Contact: Medial aspect of the proximal phalanx of the fifth toe.

Direction: Abduct fifth toe.

NEUROVASCULAR: (Lat) Parietal bone, superior to superior temporal line, 5" superior and 2" posterior to external auditory canal.

NEUROLYMPHATIC: (Post/L) Ninth I.C.S., 2" lateral to transverse processes.

VISCERAL ORGAN:

I. *Sinuses - Nasal:* (Post/BL) C7, 2" lateral to spinous process, in belly of upper trapezius.

II. *Tonsils:* (Ant/BL) Base of sternocleidomastoideus muscle, 1" superior to origin.

M. A. P. : H 8.4

V.L. : T8 R

L. B. V.L. : T3 R

M. M. : S3

CRANIAL: Temporal

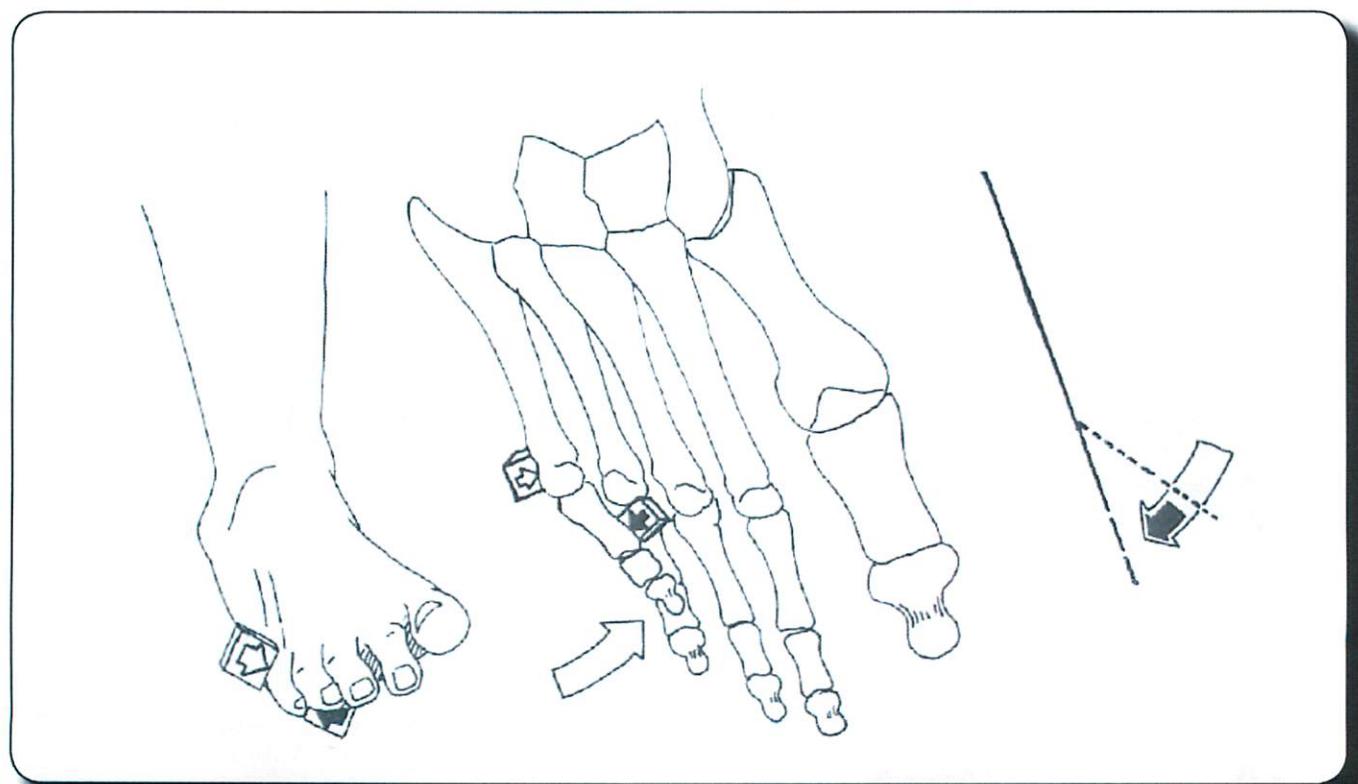
FOOT: Cuboid

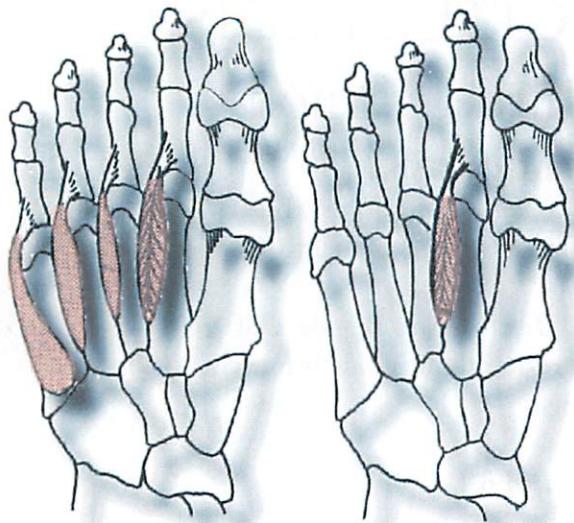
NUTRIENT SOURCE:

Vitamin A

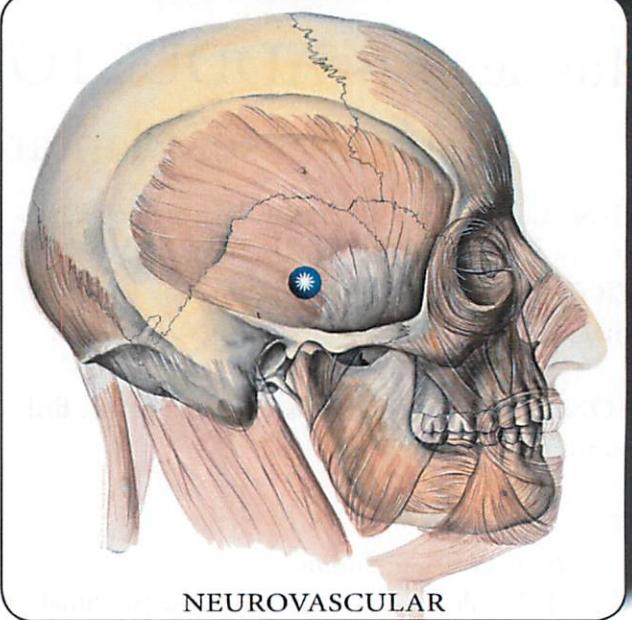
1. Vitamin A (S)

2. Core Vitamin A (N.W.)

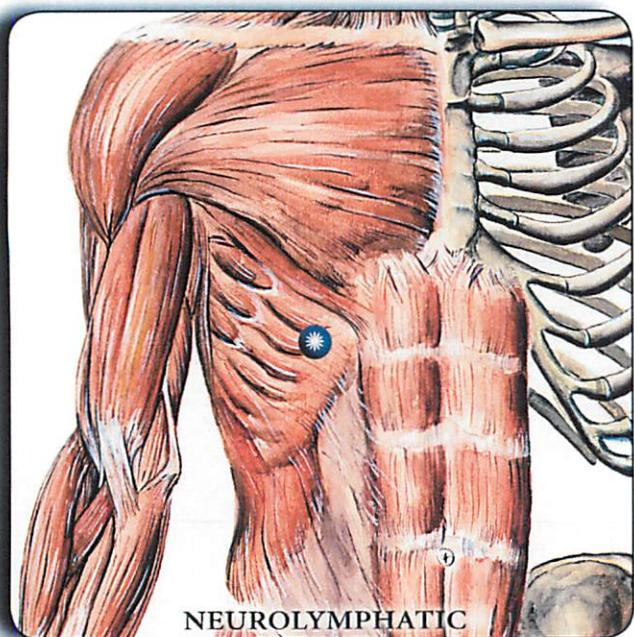




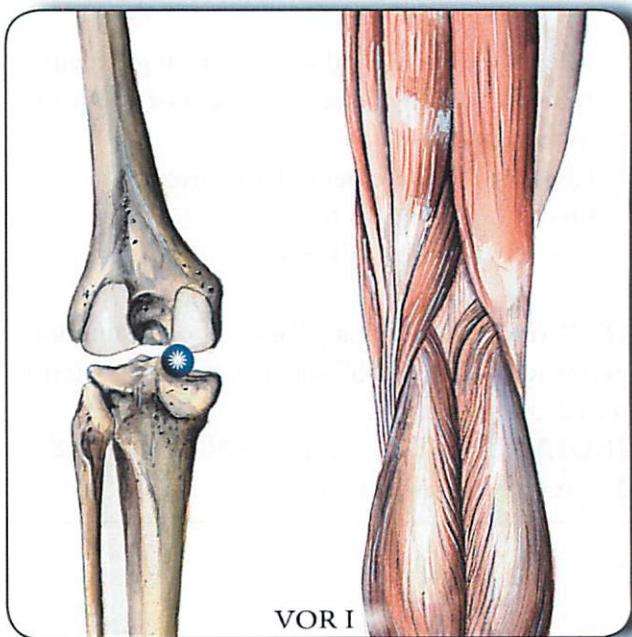
ABDUCTOR DIGITUS PEDIS, SECOND



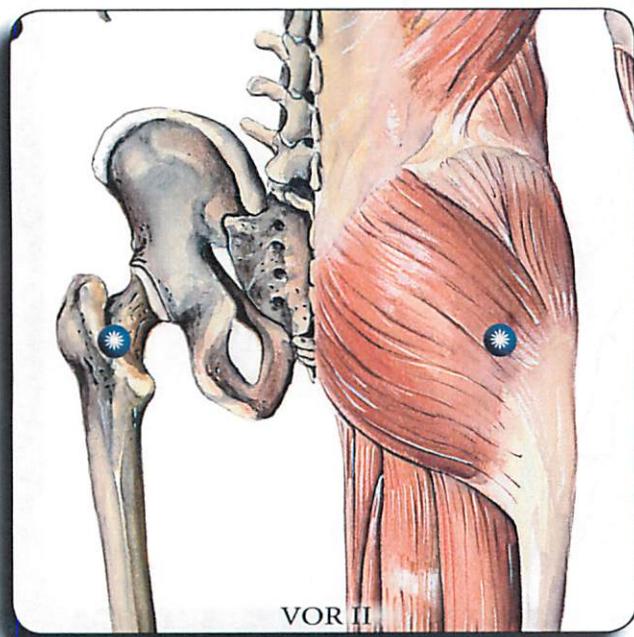
NEUROVASCULAR



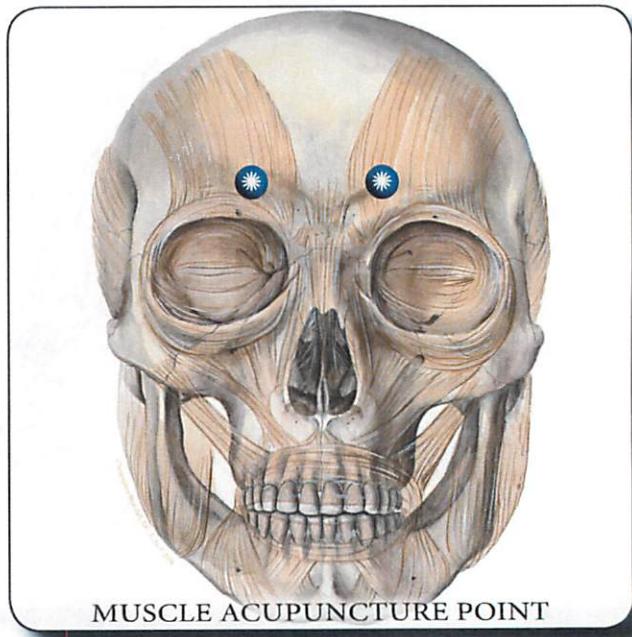
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 966: ABDUCTOR DIGITUS PEDIS, Second (Interossei Dorsales Pedis, Second Division)

ORIGIN: Dorsal surface between second and third metatarsal.

INSERTION: Base and lateral aspect of proximal phalanx of the second toe and onto the tendon of extensor digitorum longus.

ACTION: Abducts the proximal phalanx of the second toe away from the mid-sagittal plane.

TEST:

Patient: Position: Supine.

M.T.P.: Abduct and slightly flex the proximal phalanx of the second toe.

Doctor: Position: End of table facing patient.
Brace: Dorsal and medial aspect of second metatarsal.

Contact: Lateral aspect of proximal phalanx of second toe.

Direction: Adduct second toe.

NEUROVASCULAR: (Lat) Temporal bone, squamosal section, 1" superior and 1" anterior to ear.

NEUROLYMPHATIC: (Ant/R) Seventh I.C.S., at the costal cartilage junction.

VISCERAL ORGAN:

I. *Spleen:* (Post/L) Back of knee, medial to B 54.

II. *Thymus:* (Post/BL) On femur, just superior to insertion of quadratus femoris on the intertrochanteric crest.

M. A. P. : B 2 1/4

V.L. : T7 L

L. B. V.L. : T4 L

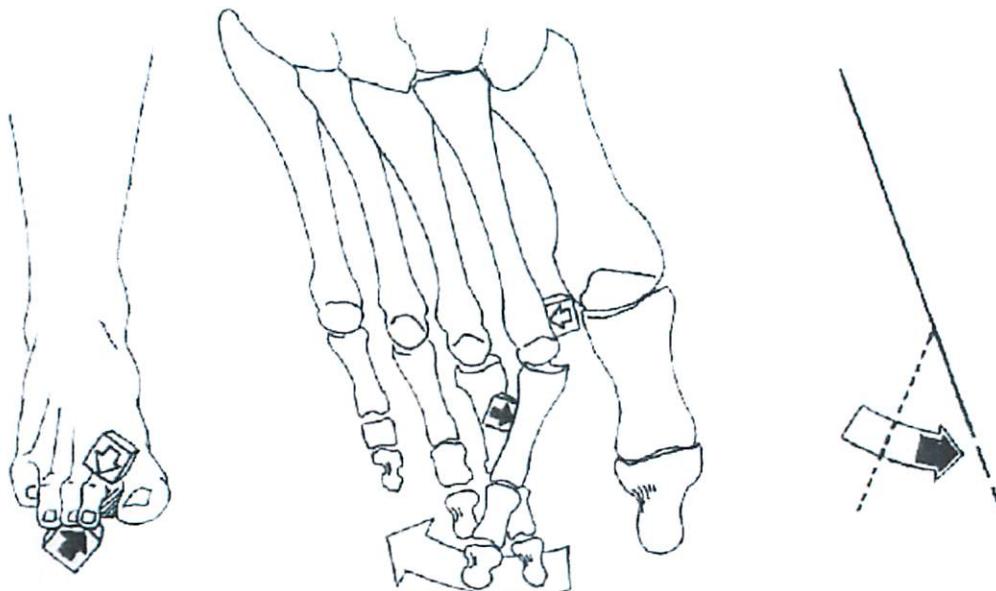
M. M. : S3

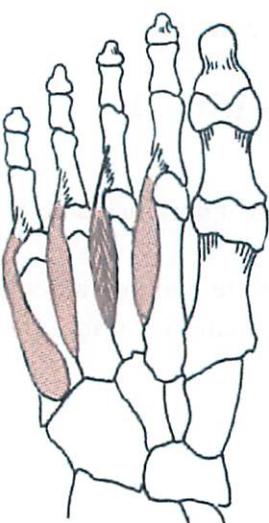
CRANIAL: Vomer

FOOT: Second Metatarsal

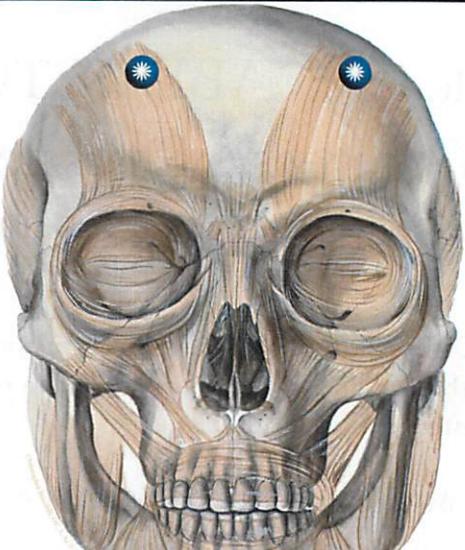
NUTRIENT SOURCE: Iron

1. Core Iron (N.W.)
2. Ferrofood (S)

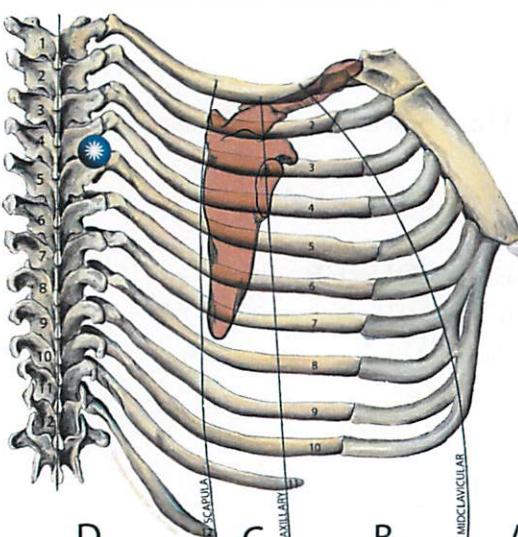




ABDUCTOR DIGITUS PEDIS, THIRD



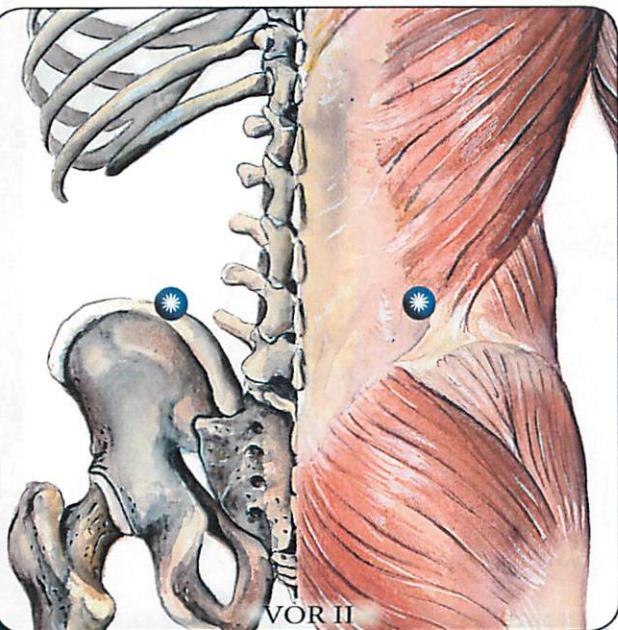
NEUROVASCULAR



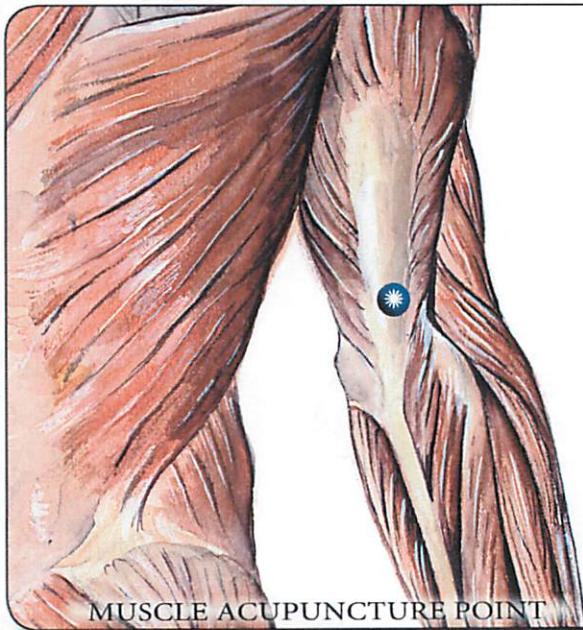
NEUROLYMPHATIC



VOR I



VÖR II



MUSCLE ACUPUNCTURE POINT

Muscle 968: ABDUCTOR DIGITUS PEDIS, Third (Interossei Dorsales Pedis, Third Division)

ORIGIN: Dorsal surface between third and fourth metatarsals.

INSERTION: Base and lateral aspect of the proximal phalanx of the third toe and onto the tendon of extensor digitorum longus.

ACTION: Abducts the proximal phalanx of the third toe away from the mid-sagittal plane.

TEST:

Patient: Position: Supine.

M.T.P.: Abduct and slightly flex the proximal phalanx of the third toe.

Doctor: Position: End of table facing patient.
Brace: Dorsal and medial aspect of the third metatarsal.

Contact: Lateral aspect proximal phalanx of third toe.

Direction: Adduct third toe.

NEUROVASCULAR: (Ant/BL) Frontal bone, at hair line.

NEUROLYMPHATIC: (Post/R) Fourth I.C.S., at the spine.

VISCERAL ORGAN:

I. *Adrenals*: (Ant/BL) Rectus abdominis, third section, near its insertion, 1/2" lateral to linea alba.

II. *Ureter*: (Post/BL) Crest of ilium, origin of quadratus lumborum, 1" lateral to L5 transverse process.

M. A. P. : T 11.2

V.L. : L2 L

L. B. V.L. : C4 L

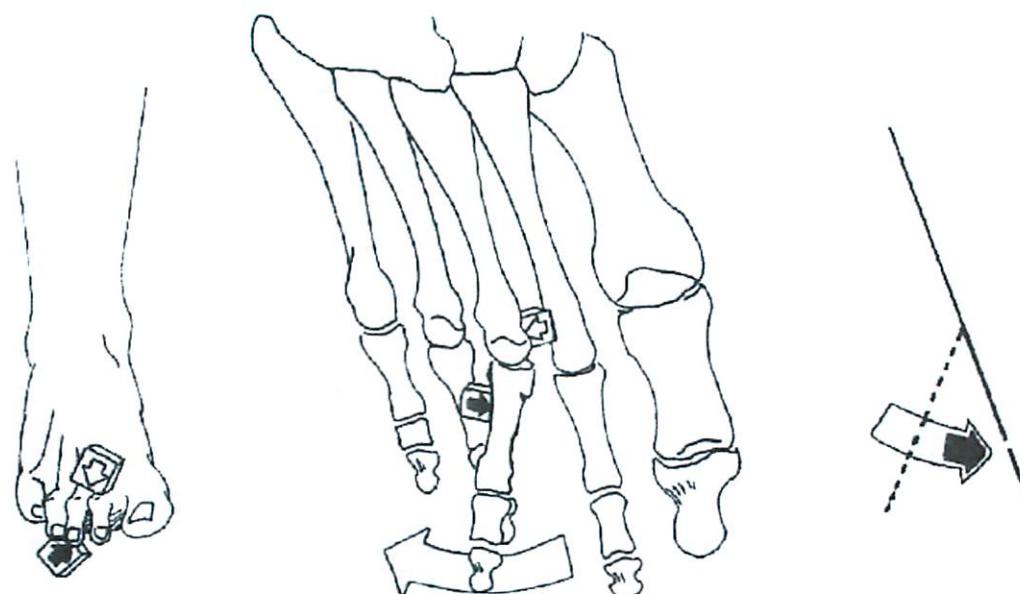
M. M. : S3

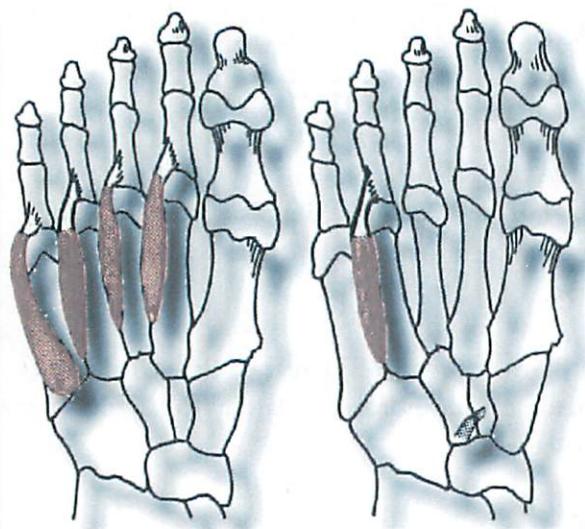
CRANIAL: In Research

FOOT: In Research

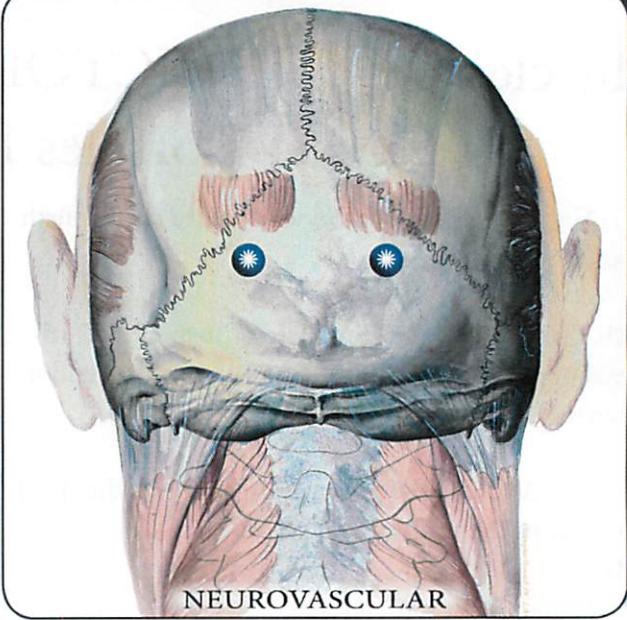
NUTRIENT SOURCE:

1. Core Pantothenic Acid (N.W.)
2. Pantothenic Acid (N.W.)

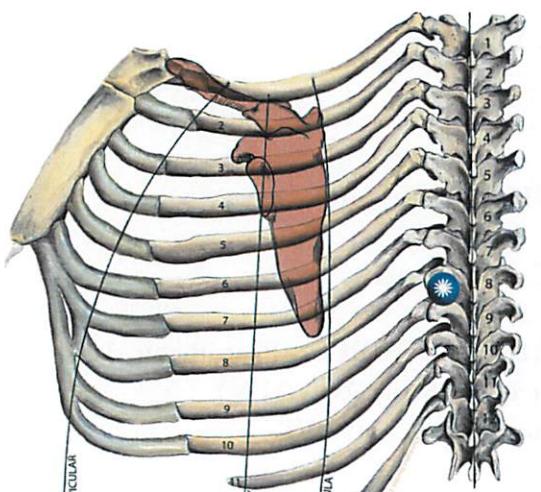




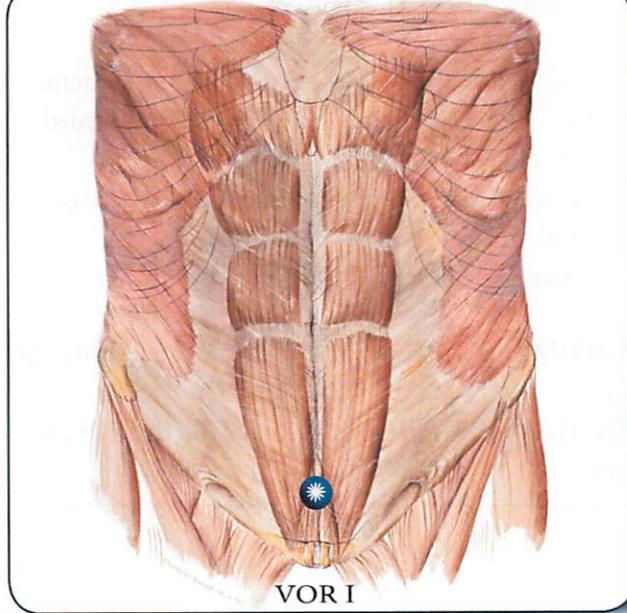
ABDUCTOR DIGITUS PEDIS, FOURTH



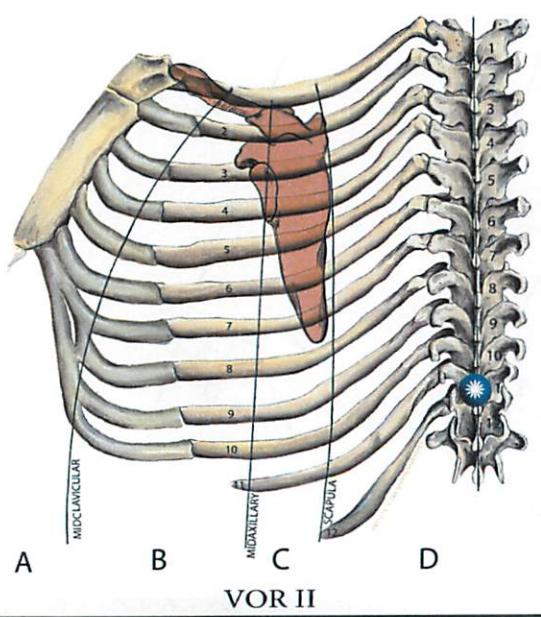
NEUROVASCULAR



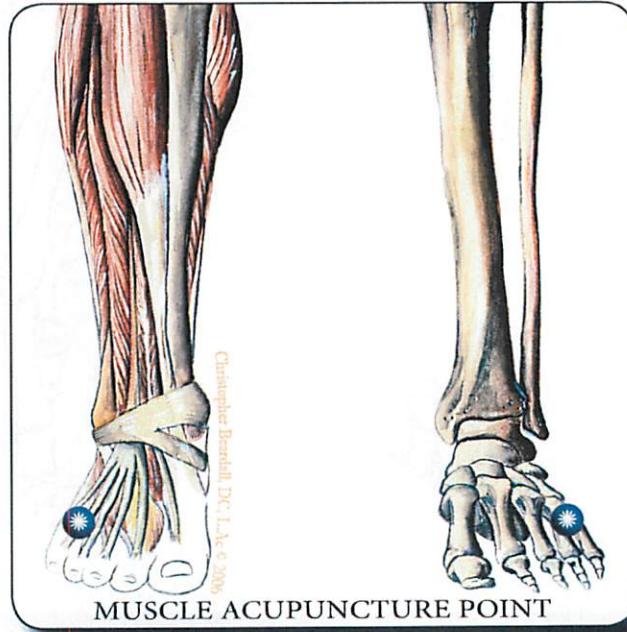
A B C D
NEUROLYMPHATIC



VOR I



A B C D
VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 970: ABDUCTOR DIGITUS PEDIS, Fourth (Interossei Dorsales Pedis, Fourth Division)

ORIGIN: Dorsal surface between the fourth and fifth metatarsals.

INSERTION: Base and lateral aspect of the proximal phalanx of the fourth toe and onto the tendon of extensor digitorum longus.

ACTION: Abducts the proximal phalanx of the fourth toe away from the mid-sagittal plane.

TEST:

Patient: Position: Supine.

M.T.P. Abduct and slightly flex the proximal phalanx of the fourth toe.

Doctor: Position: End of table facing patient.
Brace: Dorsal and medial aspect of fourth metatarsal.

Contact: Lateral aspect of proximal phalanx of fourth toe.

Direction: Adduct fourth toe.

NEUROVASCULAR: (Post/BL) Occipital bone, 2" superior and 1" lateral to external occipital protuberance.

NEUROLYMPHATIC: (Post/L) Eighth I.C.S. at spine.

VISCERAL ORGAN:

I. *Prostate/Uterus:* (Ant/Midline) Cv 4.0; 2" superior to pubes.

II. *Thyroid:* (Post/Midline) Gv 7, between spinous processes of T10 and T11.

M. A. P. : G 43.0

V.L. : C4 L

L. B. V.L. : L2 L

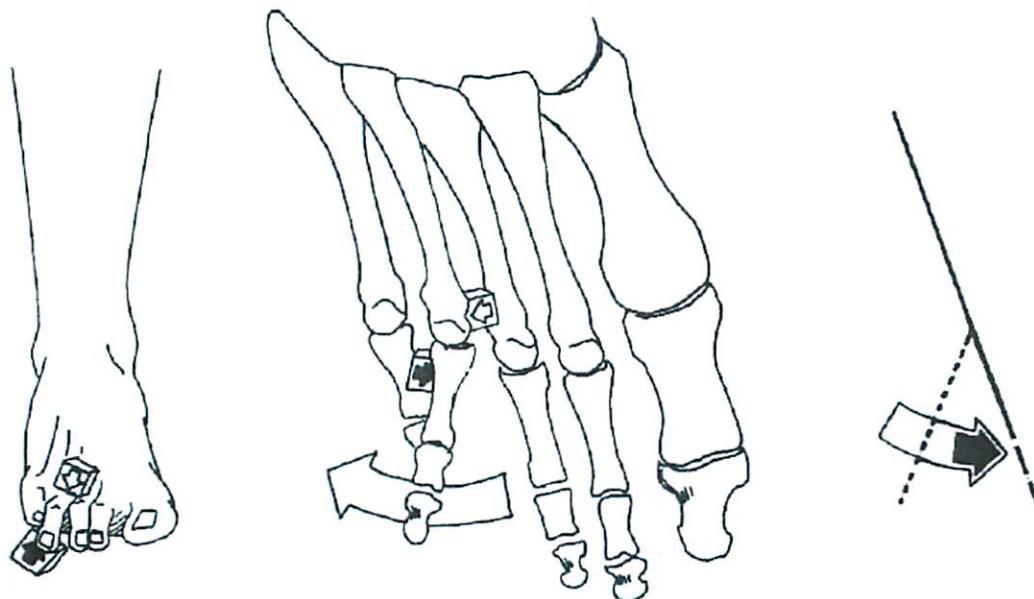
M. M. : S2

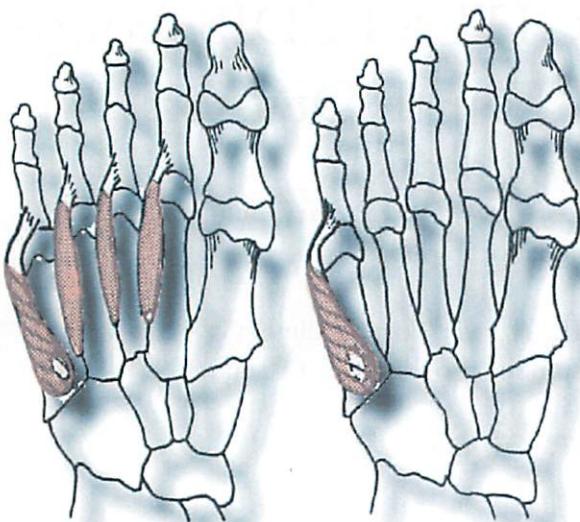
CRANIAL: Lacrimal

FOOT: Proximal Phalanx of Second Toe

NUTRIENT SOURCE: Manganese

1. Manganese B12 (S)
2. Core Manganese (N.W.)
3. Vita Manganese (N.W.)

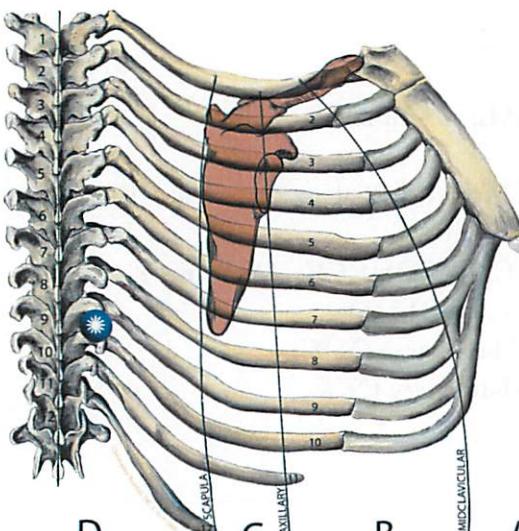




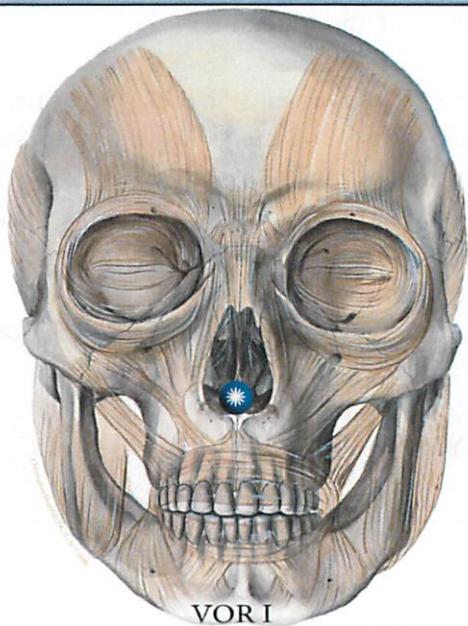
ABDUCTOR DIGITUS PEDIS, FIFTH



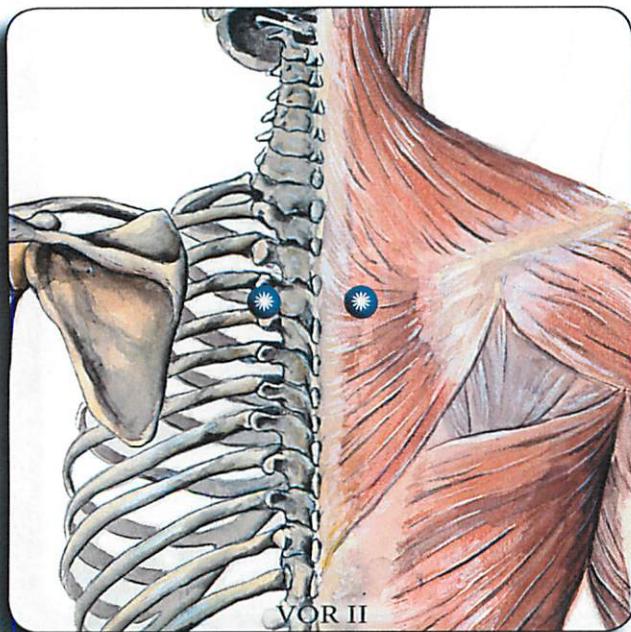
NEUROVASCULAR



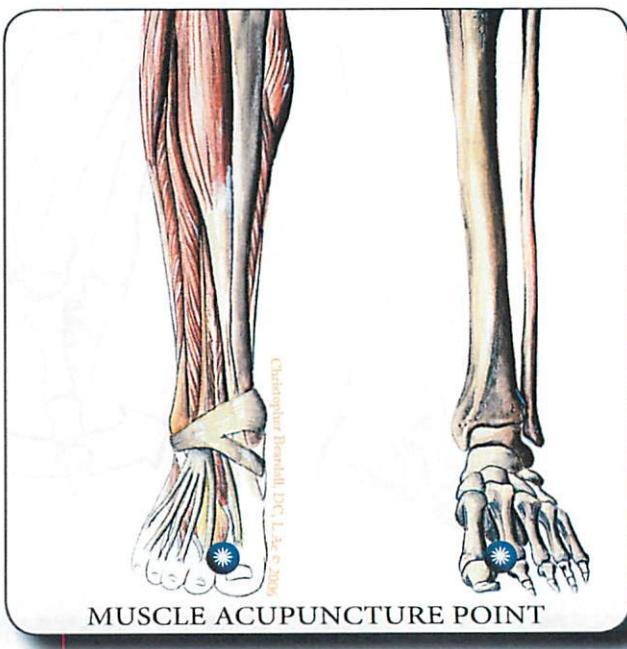
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 972: ABDUCTOR DIGITUS PEDIS, Fifth (Flexor Digiti Quinti Brevis)

ORIGIN: Plantar surface of the base of the fifth metatarsal.

INSERTION: Base and lateral surface of the proximal phalanx of the fifth toe and onto the tendon of extensor digitorum longus.

ACTION: Abduct the proximal phalanx of the fifth toe away from the mid-sagittal plane.

TEST:

Patient: Position: Supine.

M.T.P.: Abduct and slightly flex the proximal phalanx of the fifth toe.

Doctor: Position: End of table facing patient.

Brace: Dorsal and medial aspect of fifth metatarsal.

Contact: Lateral aspect of proximal phalanx of fifth toe.

Direction: Adduct fifth toe.

NEUROVASCULAR: (Ant/BL) Nasal bone, distal surface, just lateral to nasal suture.

NEUROLYMPHATIC: (Post/R) Ninth I.C.S., at transverse process.

VISCERAL ORGAN:

I. *Nose:* (Ant/Midline) Gv 25, under nose.

II. *Lungs:* (Post/BL) Spinal level of T4.

M. A. P. : Lv 2

V.L. : T1 L

L. B. V.L. : T10 L

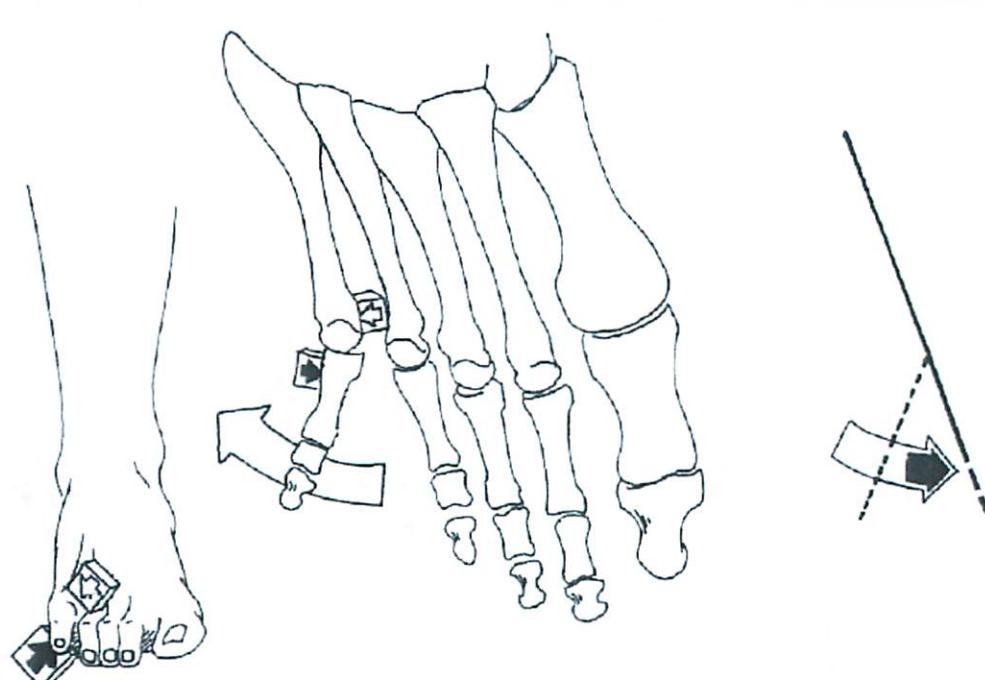
M. M. : S2

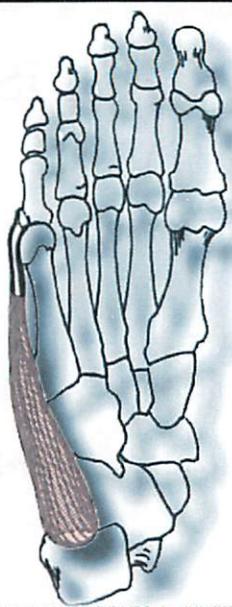
CRANIAL: Temporal

FOOT: Cuboid

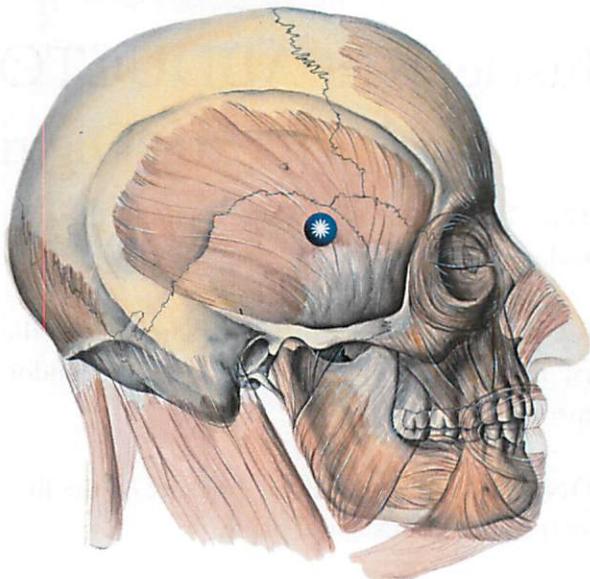
NUTRIENT SOURCE: Paraminobenzoic Acid

1. Nutri Comp (N.W.)

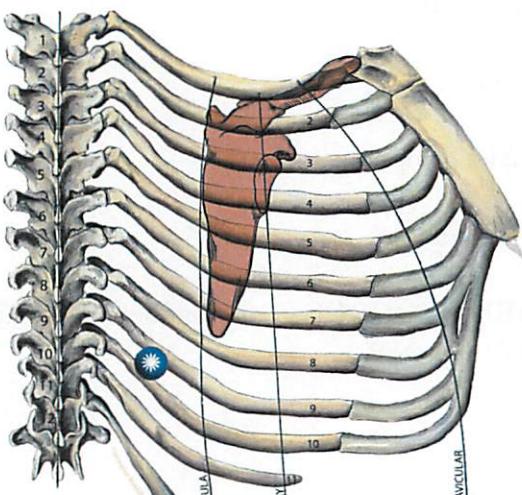




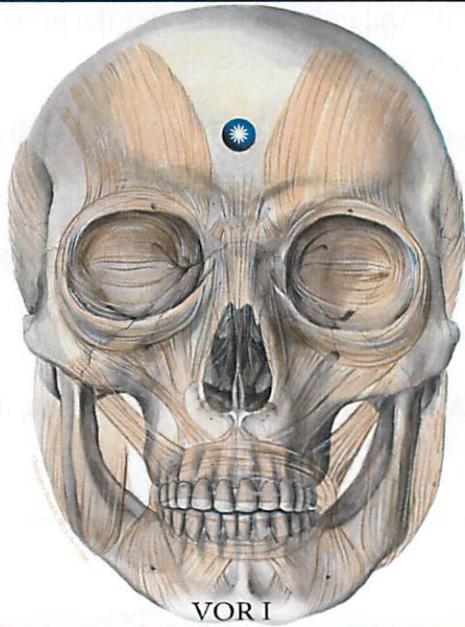
ABDUCTOR DIGITUS MINIMI PEDIS



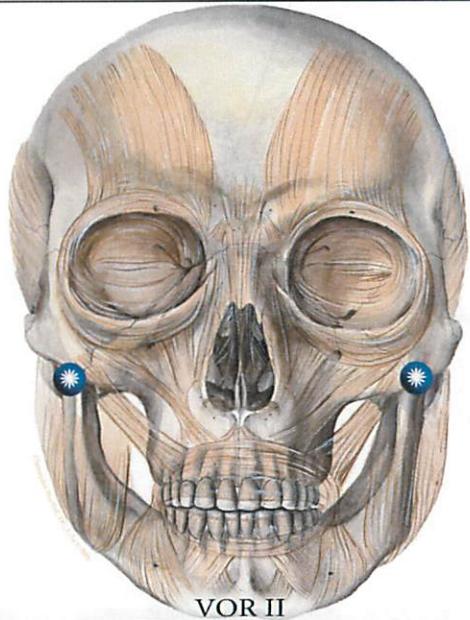
NEUROVASCULAR



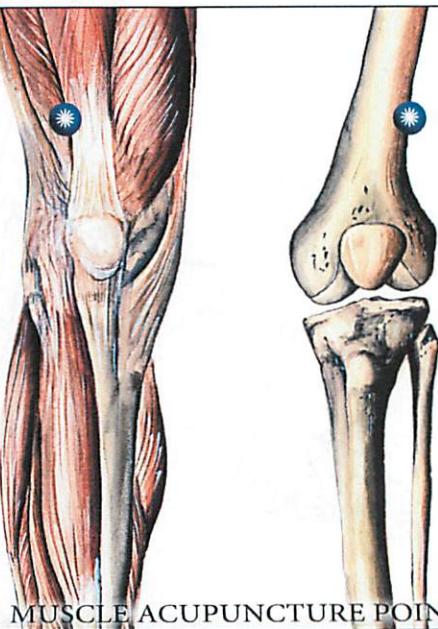
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 974: ABDUCTOR DIGITUS MINIMI PEDIS

ORIGIN: Calcaneus.

INSERTION: Distal end of fifth metatarsal and base of proximal phalanx of fifth toe.

ACTION: Abducts the fifth toe and with continued action, the foot.

TEST:

Patient: Position: Supine.

M.T.P.: Place foot in 110 degrees dorsiflexion, abduct foot 15 degrees. This is a test for foot abduction at this degree of dorsiflexion.

Doctor: Position: End of table facing patient.

Brace: Medial aspect of calcaneus.

Contact: Lateral and distal aspect of fifth metatarsal.

Direction: Adduct foot through coronal plane.

NEUROVASCULAR: (Lat) Temporal bone, just inferior to squamosphenoid suture junction.

NEUROLYMPHATIC: (Post/R) Ninth I.C.S., 2" from spine.

VISCERAL ORGAN:

I. *Nose:* (Ant/Midline) Gv 24.3; midline at level of frontal prominences.

II. *Posterior Pituitary:* (Ant/BL) Maxillary bone, lateral superior surface, under zygoma.

M. A. P. : S 33

V.L. : C5 R

L. B. V.L. : L1 R

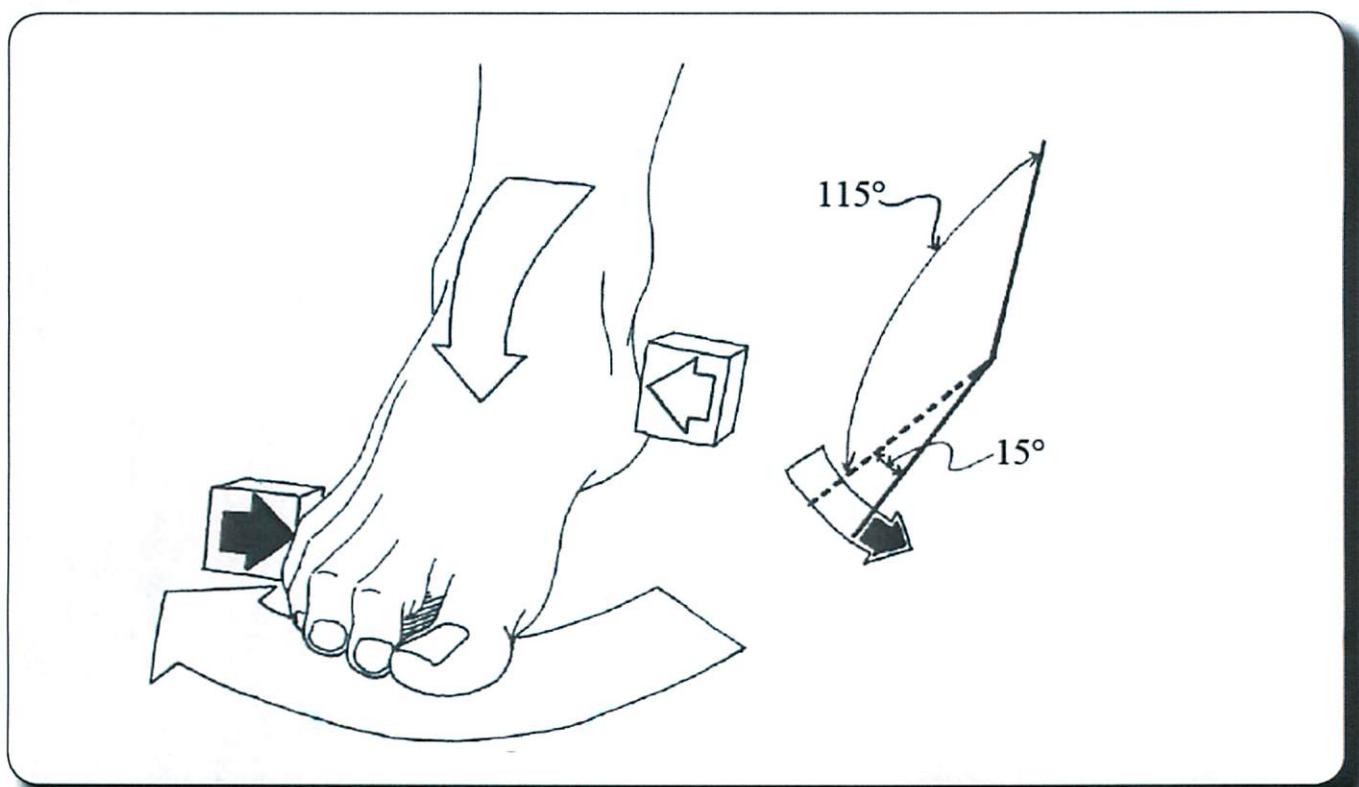
M. M. : S2

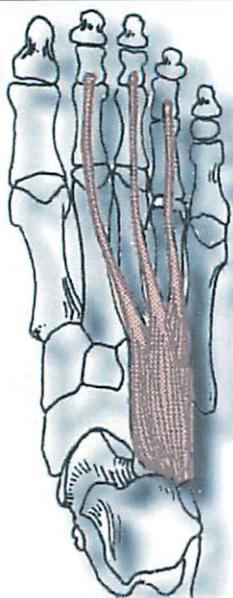
CRANIAL: In Research

FOOT: In Research

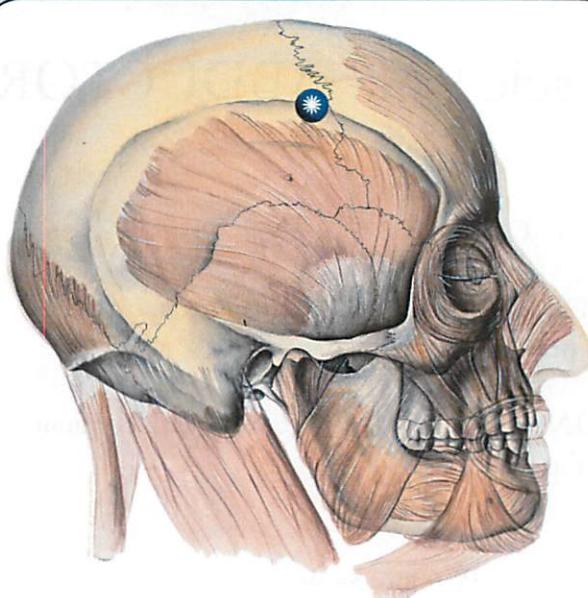
NUTRIENT SOURCE: Vitamin A

1. Vitamin A (S)
2. Core Vitamin A (N.W.)

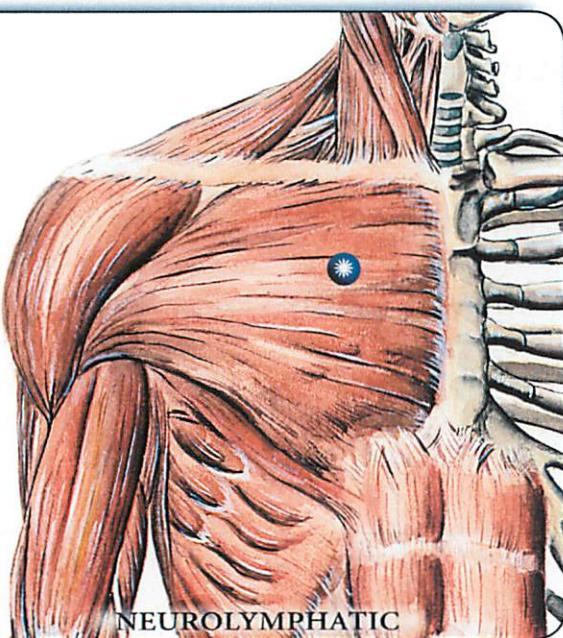




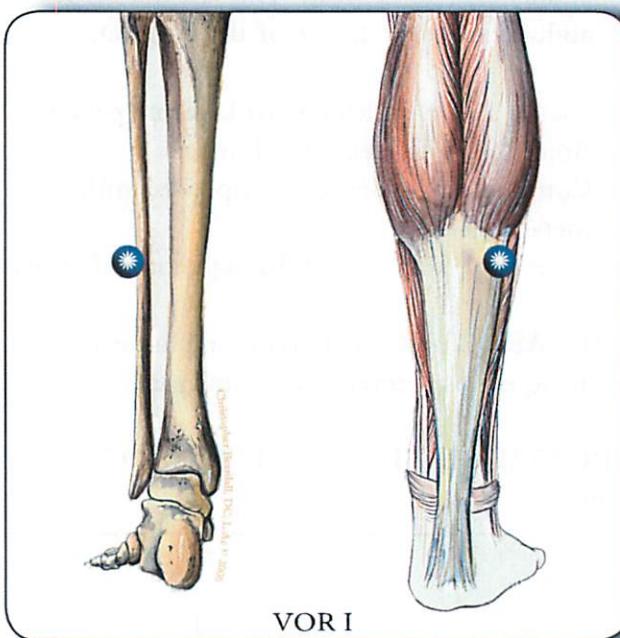
EXTENSOR DIGITORUM BREVIS



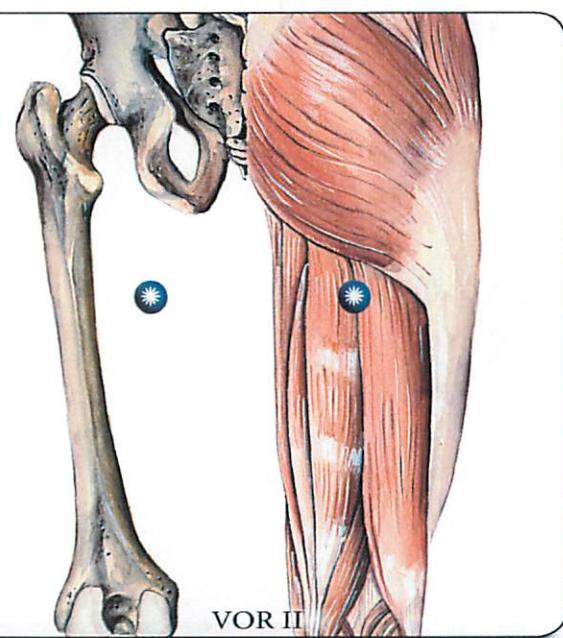
NEUROVASCULAR



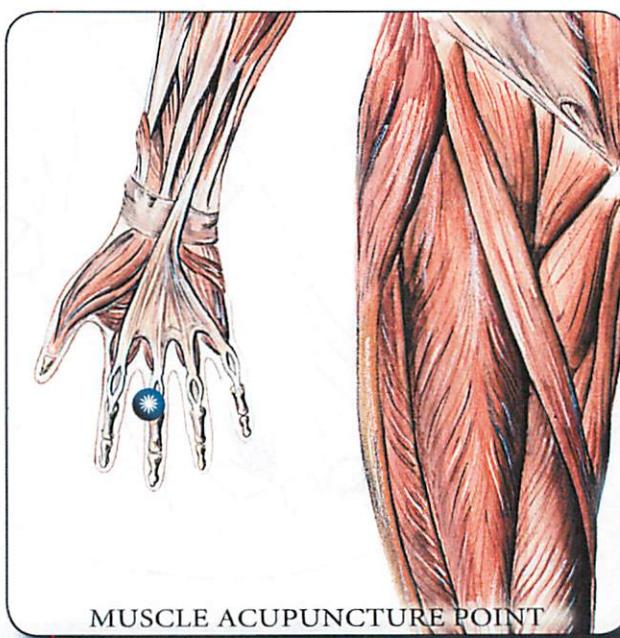
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 976: EXTENSOR DIGITORUM BREVIS

ORIGIN: Upper and lateral surfaces of calcaneus.

INSERTION: Lateral side of the tendons of extensor digitorum longus of second, third, and fourth toes.

ACTION: Dorsiflexes the proximal phalanges of the second, third and fourth toes.

TEST:

Patient: Position: Supine.

M.T.P.: Dorsiflex the proximal phalanx of the second, third and fourth toes.

Doctor: Position: End of table facing patient.
Brace: Plantar surface of foot.

Contact: Dorsal surface of proximal phalanx of second, third, and fourth toes.

Direction: Plantar flex and slightly adduct.

NEUROVASCULAR: (Lat) Parietal bone, superior to temporal line, 1" posterior to coronal suture.

NEUROLYMPHATIC: (Ant/R) Second I.C.S.,
1-2" lateral to sternum.

VISCERAL ORGAN:

I. *Thymus:* (Post/BL) Tendon of gastrocnemius midline, 2" inferior to B 58.

II. *Tonsils:* (Post/BL) B 50.2

M. A. P. : Cx 8.4

V.L. : L2 L

L. B. V.L. : C4 L

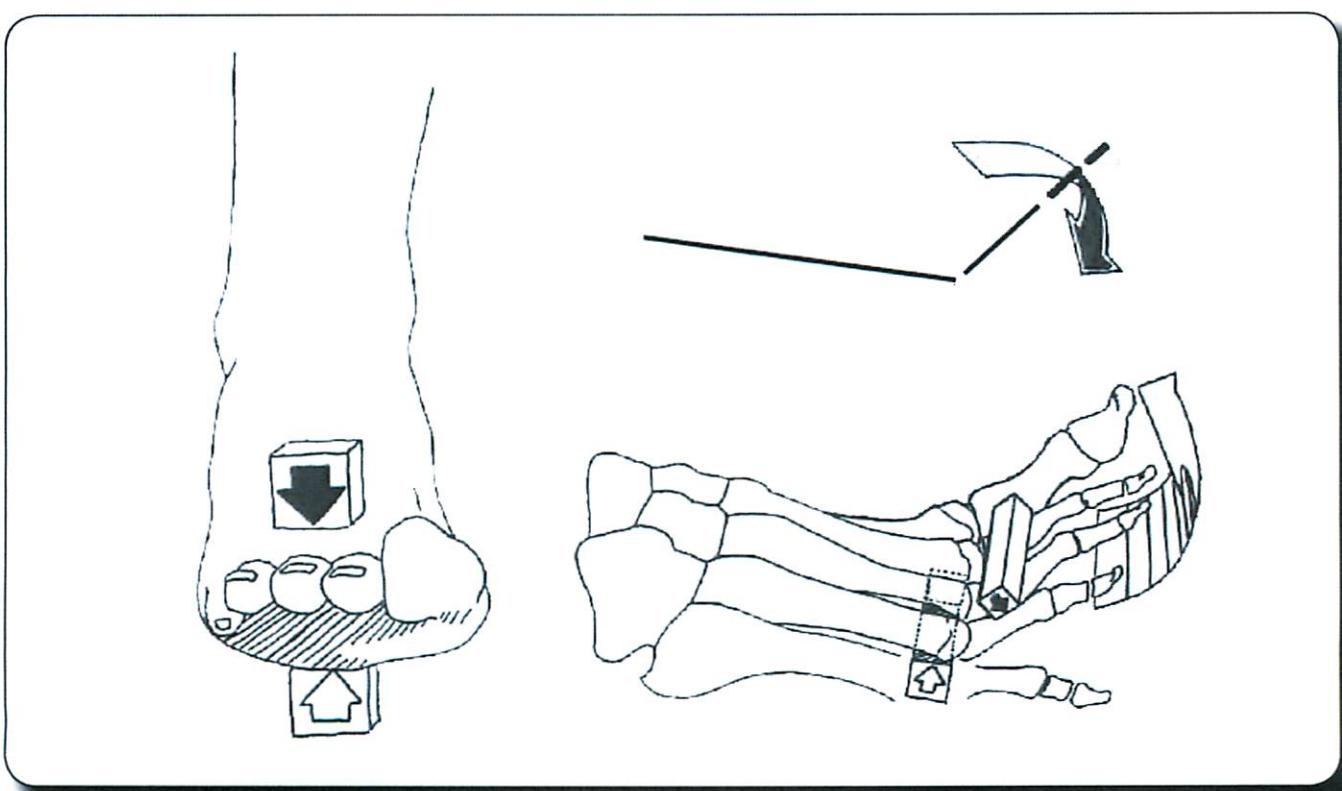
M. M. : S2

CRANIAL: Lacrimal

FOOT: Proximal Phalanx of Second Toe

NUTRIENT SOURCE: Choline

1. Choline (S)
2. Core Choline (N.W.)



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CHAPTER IV:

REFERENCES

ORGAN-MUSCLE RELATIONSHIPS

ADENOIDS

- 526 Extensor Pollicis Brevis Septal Div.
932 Abductor Hallucis, Oblique Head, Peroneus Division

ADRENAL

- 114 Masseter Superficial Div.
302 Sternothyroideus
326 Splenius Cervicis
456 Deltoideus Anterior Scapular Div.
484 Pronator Teres Humeral Div.
504 Flexor Carpi Radialis Flexor Div.
534 Flexor Pollicis Brevis
582 Abductor Digiti Minimi Manus, Flexor Div.
614 Longissimus Thoracis Upper Lumbar Div.
700 Rectus Abdominis First Div.
726 Psoas Major Diaphragmatic Div.
808 Gracilis
810 Sartorius
818 Vastus Medialis Middle Div.
840 Articularis Genu
854 Semitendinosus
856 Semimembranosus Tibial Div.
878 Soleus Medial Div.
968 Abductor Digitus Pedis Third

ANTERIOR PITUITARY

- 100 Orbicularis Oris Lower Div.
314 Longus Capitis
322 Splenius Capitis Mastoid Div.
422 Supraspinatus Fossa Div.
464 Pectoralis Major Costal Div.
520 Extensor Pollicis Longus Ulnar Div.
546 Adductor Pollicis Obliquus
558 Flexor Digitorum Superficialis Lateral Div.
570 Interossei Dorsales Manus First
844 Adductor Magnus Oblique Div.
878 Soleus Medial Div.
900 Flexor Hallucis Longus Tibial Div.
904 Extensor Hallucis Longus Interosseous Div.
908 Flexor Digitorum Longus Medial Div.
910 Flexor Digitorum Longus Lateral Div.
920 Adductor Hallucis Superior Div.

BLADDER

278	Scalenus Anterior
290	Digastricus Anterior Belly Div.
296	Mylohyoideus
392	Trapezius Lower Div.
446	Coracobrachialis Septal Div.
476	Articularis Cubiti
488	Anconeus Olecranon Div.
536	Interossei Pollicis (Palmaris First)
560	Flexor Digitorum Profundus Manus Medial Div.
570	Interossei Dorsales Manus First
610	Spinalis Thoracis Lumbar Div.
648	Serratus Posterior Superior Div.
690	Pyramidalis
708	Rectus Abdominis Fourth Div. Lateralis
726	Psoas Major Diaphragmatic Div.
842	Adductor Magnus Vertical Div.
852	Gluteus Maximus Coccygeal Div.
886	Peroneus Longus Cuneiform Div.
892	Peroneus Brevis Septal Div.
894	Peroneus Tertius
960	Adductor Digitus Pedis Third

BROAD LIGAMENT

844	Adductor Magnus Oblique Div.
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COLON (ASCENDING/DESCENDING)

270	Upper Trapezius Scapular Div.
350	Interspinalis Cervicis
450	Deltoideus Posterior Lateral Div.
510	Extensor Carpi Ulnaris Adductor Div.
692	Obliquus Externus Abdominis Anterior Div.
700	Rectus Abdominis First Div.
710	Iliacus
730	Quadratus Lumborum Costal Div.
790	Tensor Fascia Lata Anterior Div.
824	Biceps Femoris Shorthead
826	Biceps Femoris Longhead Fibular Div.
874	Gastrocnemius Lateral Div.
948	Flexor Digitorum Brevis Lateral Div.

COLON (RECTAL AREA)

- 288 **Platysma Posterior Div.**
- 722 **Psoas Major Lumbar Div.**
- 852 **Gluteus Maximus Coccygeal Div.**
- 880 **Soleus Lateral Div.**
- 938 **Abductor Hallucis Transverse Head Lateral Div.**

COLON (SIGMOID)

- 468 **Biceps Brachii Shorthead**
- 642 **Levatores Costarum Lower Div.**
- 734 **Multifidus Lumbosacral Div.**

COLON (TRANSVERSE)

- 058 **Levator Palpebrae Superioris**
- 102 **Buccinator**
- 418 **Latissimus Dorsi Iliac Div.**
- 798 **Pectineus**

COLON (HEPATIC AND SPLENIC FLEXURE)

- 696 **Obliquus Internus Abdominis Anterior Div.**

DUCTUS DEFERENS

- 070 **Depressor Septi Nasi**
- 278 **Scalenus Anterior**
- 506 **Flexor Carpi Ulnaris Flexor Div.**
- 548 **Extensor Digitorum Communis Manus Medial Div.**
- 734 **Multifidus Lumbosacral Div.**
- 898 **Tibialis Anterior Dorsiflexor Div.**
- 946 **Flexor Digitorum. Brevis Medial Div.**

DUODENUM

- 872 **Gastrocnemius, Medial Division**
- 886 **Peroneus Longus, Cuneiform Division**

DUODENUM (HORIZONTAL PORTION)

- 702 **Rectus Abdominis Second Div.**

DUODENUM (ASCENDING PORTION)

- 706 **Rectus Abdominis Fourth Div. Medialis**

DUODENUM (DESCENDING PORTION)

- 286 **Platysma Anterior Div.**
- 718 **Transverse Abdominis Lower Div.**

DUODENUM (SPECIAL CELLS)

- 514 Extensor Carpi Radialis Brevis
- 816 Vastus Medialis Upper Div
- 872 Gastrocnemius, Medial Div
- 886 Peroneus Longus, Cuneiform Div.

DUODENUM (SUPERIOR PORTION)

- 470 Triceps Longhead

DUODENUM (L-JEJUNUM JUNCTION; R-AMPUILLA OF VATER)

- 800 Adductor Brevis

EAR (EXTERNAL.)

- 410 Subclavius Clavicular Div.
- 432 Teres Major Superior Div.
- 952 Flexor Digitus Pedis Third

EAR (INTERNAL.)

- 060 Orbicularis Oculi Upper Div.
- 272 Upper Trapezius Clavicular Div
- 390 Trapezius Middle Div
- 492 Supinator Radial Div.

EPIDIDYMIS

- 522 Extensor Pollicis Longus Septal Div.
- 864 Gemellus Superior

ESOPHAGUS

- 422 Supraspinatus Fossa Div
- 440 Subscapularis Second Div.
- 502 Flexor Carpi Radialis Abductor Div.
- 566 Interossei Dorsales Manus Third
- 706 Rectus Abdominis Fourth Div. Medialis
- 902 Flexor Hallucis Longus Fibular Div.

EUSTACHIAN TUBE

- 470 Triceps Longhead
- 496 Pronator Quadratus Proximal Div.
- 790 Tensor Fascia Lata Anterior Div.
- 824 Biceps Femoris Shorthead

EYE

270	Upper Trapezius Scapular Div.
298	Geniohyoideus
306	Omohyoideus
426	Infraspinatus Middle Div.
450	Deltoideus Posterior Lateral Div.
696	Obliquus Internus Abdominis Anterior Div.
704	Rectus Abdominis Third Div.
738	Longissimus Lumborum
800	Adductor Brevis
958	Adductor Digitus Pedis Second
962	Adductor Digitus Pedis Fourth

GALLBLADDER

098	Orbicularis Oris Upper Div.
274	Sternocleidomastoid Sternal Div.
282	Scalenus Medius
292	Digastricus Posterior Belly Div.
426	Infraspinatus Middle Div.
454	Deltoideus Middle Anterior Div.
472	Triceps Lateral Head
502	Flexor Carpi Radialis Abductor Div.
596	Palmaris Brevis
642	Levatores Costarum Lower Div.
732	Quadratus Lumborum Lumbar Div.
818	Vastus Medialis Middle Div.
870	Popliteus
888	Peroneus Longus Metatarsal Div.

GALLBLADDER DUCT SYSTEM

052	Occipitalis
134	Rectus Medialis Bulbi
300	Sternohyoideus
428	Infraspinatus Inferior Division
520	Extensor Pollicis Longus Ulnar Div.
524	Extensor Pollicis Brevis, Radial Div.
542	Abductor Pollicis Brevis

GONADS

100	Orbicularis Oris Lower Div.
102	Buccinator
124	Pterygoideus Lateralis (Ext.) Upper Div.-Disc
126	Pterygoideus Lateralis (Ext.) Lower Div.
308	Longus Colli Vertical Div.
402	Serratus Anterior Superior Div.
430	Teres Minor
468	Biceps Brachii Shorthead
480	Brachioradialis Humeral Div.
492	Supinator Radial Div.
538	Opponens Pollicis Flexor Div.
592	Interossei Palmares Third
784	Gluteus Medius Anterior Div.
806	Adductor Longus Superior Div.
840	Articularis Genu
860	Piriformis

HEART

326	Splenius Cervicis
406	Pectoralis Minor Superior Div.
436	Subscapularis Superior Div.
440	Subscapularis Second Div.
460	Pectoralis Major Clavicular Div.
488	Anconeus Olecranon Div.
544	Adductor Pollicis Transversus
564	Interossei Dorsales Manus Fourth
610	Spinalis Thoracis Lumbar Div.
612	Spinalis Thoracis Thoracic Div.
656	Diaphram Number One Right Side Lumbar Div.
744	Pubococcygeus
812	Obturator Externus
864	Gemellus Superior
884	Tibialis Posterior Fibular Div.
906	Extensor Hallucis Longus Fibular Div.
912	Extensor Digitorum Longus Medial Div.
922	Adductor Hallucis Inferior Div.

ILEUM

- | | |
|-----|---|
| 506 | Flexor Carpi Ulnaris Flexor Div. |
| 544 | Adductor Pollicis Transversus |
| 704 | Rectus Abdominis Third Div. |
| 740 | Coccygeus Sacral Div. |
| 804 | Adductor Longus Inferior Div. |
| 820 | Vastus Medialis Lower Div. |
| 834 | Vastus Lateralis Lower Div. |
| 836 | Vastus Intermedius Medial Div. |
| 882 | Tibialis Posterior Tibial Div. |
| 936 | Abductor Hallucis Transverse Head Medial Div. |

ILEUM (SPECIAL CELLS)

- | | |
|-----|--|
| 480 | Brachioradialis Humeral Div. |
| 584 | Abductor Digiti Minimi Manus Abductor Div. |
| 594 | Interossei Palmares Second |
| 858 | Semimembranosis Popliteal Div. |

JEJUNUM

- | | |
|-----|---|
| 478 | Brachialis |
| 562 | Flexor Digitorum Profundus Manus Lateral Div. |
| 586 | Opponens Digitii Minimi Manus |
| 652 | Serratus Posterior Inferior Div. |
| 738 | Longissimus Lumborum |
| 796 | Rectus Femoris Straight Head |
| 876 | Plantaris |
| 896 | Tibialis Anterior Supinator Div. |
| 930 | Flexor Hallucis Brevis Cuboid Div. |
| 940 | Extensor Hallucis Brevis |

JEJUNUM (SPECIAL CELLS)

- | | |
|-----|----------------------------|
| 308 | Longus Colli Vertical Div. |
|-----|----------------------------|

KIDNEY

130	Rectus Superior Bulbi
284	Scalenus Posterior
302	Sternothyroideus
392	Trapezius Lower Div.
408	Pectoralis Minor Inferior Div.
444	Coracobrachialis Coracoid Div.
466	Biceps Brachii Longhead
482	Brachioradialis Septal Div.
486	Pronator Teres Ulnar Div.
498	Pronator Quadratus Distal Div.
500	Palmaris Longus
512	Extensor Carpi Ulnaris Extensor Div.
516	Extensor Carpi Radialis Longus Extensor Div.
554	Extensor Indicis Proprius
712	Iliacus Minor
722	Psoas Major Lumbar Div.
724	Psoas Major Thoracic Div.
872	Gastrocnemius Medial Div.
902	Flexor Hallucis Longus Fibular Div.
910	Flexor Digitorum Longus Lateral Div.
952	Flexor Digitus Pedis Third

LARYNX

276	Sternocleidomastoid Clavicular Div.
590	Interossei Palmares Fourth
822	Obturator Internus
944	Quadratus Plantae Lateral Div.
946	Flexor Digitorum Brevis Medial Div.

LIVER

098	Orbicularis Oris Upper Div.
134	Rectus Medialis Bulbi
138	Obliquus Superior Bulbi
140	Obliquus Inferior Bulbi
380	Constrictor Pharyngis Medius
398	Rhomboid Minor
400	Rhomboid Major
412	Subclavius Scapular Div.
462	Pectoralis Major Sternal Div.
494	Supinator Ulnar Div.
518	Extensor Carpi Radialis Longus Abductor Div.
524	Extensor Pollicis Brevis Radial Div.
562	Flexor Digitorum Profundus Manus Lateral Div.
578	Lumbricales Manus First
730	Quadratus Lumborum Costal Div.
794	Rectus Femoris, Reflected Head
806	Adductor Longus Superior Div.
874	Gastrocnemius Lateral Div.
880	Soleus Lateral Div.
900	Flexor Hallucis Longus Tibial Div.
922	Adductor Hallucis Inferior Div.
956	Flexor Digitus Pedis, Fifth

LUNGS

114	Masseter Superficial Div.
346	Obliquus Capitis Superior
402	Serratus Anterior Superior Div.
404	Serratus Anterior Inferior Div.
406.	Pectoralis Minor Superior Div
408	Pectoralis Minor Inferior Div.
434	Teres Major Inferior Div.
446	Coracobrachialis Septal Div.
452	Deltoideus Middle Posterior Div.
454	Deltoideus Middle Anterior Div.
456	Deltoideus Anterior Scapular Div.
458	Deltoideus Anterior Clavicular Div.
482	Brachioradialis Septal Div.
552	Extensor Digi Minimi Manus
584	Abductor Digi Minimi Manus Abductor Div.
736	Iliocostalis Lumborum
744	Pubococcygeus
784	Gluteus Medius Anterior Div.

LUNGS (CONTINUED)

786	Gluteus Minimus Anterior Div.
816	Vastus Medialis Upper Div.
822	Obturator Internus
862	Gemellus Inferior
890	Peroneus Brevis Fibular Div.
894	Peroneus Tertius
928	Flexor Hallucis Brevis Third Cuneiform Div.
930	Flexor Hallucis Brevis Cuboid Div.
934	Abductor Hallucis Oblique Head Metatarsal Div.
972	Abductor Digitus Pedis Fifth

LYMPHATICS OF COLON

546	Adductor Pollicis Obliquus
572	Lumbricales Manus Fourth
582	Abductor Digiti Minimi Manus, Flexor Div.
694	Obliquus Externus Abdominis Lateral Div.

LYMPHATICS OF DUODENUM

416	Latissimus Dorsi Lumbar Div.
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LYMPHATICS OF FACE AND NECK

276	Sternocleidomastoid Clavicular Div.
530	Abductor Pollicis Longus Ulnar Div.

LYMPHATICS OF GALLBLADDER

132	Rectus Inferior Bulbi
490	Anconeus Ulnar Div.

LYMPHATICS OF GALLBLADDER DUCT SYSTEM

138	Obliquus Superior Bulbi
580	Flexor Digiti Minimi Brevis Manus

Lymphatics Of Ileum

414	Latissimus Dorsi Thoracic Div.
796	Rectus Femoris Straight Head
810	Sartorius
950	Flexor Digitus Pedis Second

LYMPHATICS OF JEJUNUM

140	Obliquus Inferior Bulbi
710	Iliacus
938	Abductor Hallucis Transverse Head Lateral Div.

LYMPHATICS OF LUNGS

- 140 *Obliquus Inferior Bulbi*
- 424 *Infraspinatus, Superior Div.*
- 648 *Serratus Posterior Superior Div.*
- 710 *Iliacus*
- 938 *Abductor Hallucis Transverse Head Lateral Div.*

LYMPHATICS OF RECTAL AREA

- 574 *Lumbicales Manus Third*

LYMPHATICS OF SMALL INTESTINE (INGUINAL LYMPH NODES)

- 656 *Diaphram Number One Right Side Lumbar Div.*

LYMPHATICS OF STOMACH

- 728 *Psoas Minor*
- 924 *Flexor Hallucis Brevis First Cuneiform Div.*

LYMPHATICS OF SUBMANDIBULAR

- 282 *Scalenus Medius*
- 856 *Semimembranosis Tibial Div.*

LYMPHATICS OF THORACIC DUCT

- 522 *Extensor Pollicus Longus Septal Div.*

LYMPHATICS OF THROAT

- 500 *Palmaris Longus*

LYMPHATICS OF THYROID

- 846 *Adductor Magnus Transverse Div.*

LYMPHATICS OF TONSILS

- 876 *Plantaris*

MAMMARY GLAND

- 400 *Rhomboid Major*
- 462 *Pectoralis Major Sternal Div.*
- 614 *Longissimus Thoracis Upper Lumbar Div.*
- 724 *Psoas Major Thoracic Div.*
- 782 *Gluteus Medius Middle Div.*

NOSE

304	Thyrohyoideus
444	Coracobrachialis Coracoid Div.
508	Flexor Carpi Ulnaris Adductor Div.
514	Extensor Carpi Radialis Brevis
530	Abductor Pollicis Longus Ulnar Div.
572	Lumbricales Manus Fourth
652	Serratus Posterior Inferior Div.
690	Pyramidalis
814	Quadratus Femoris
846	Adductor Magnus Transverse Div.
892	Peroneus Brevis Septal Div.
934	Abductor Hallucis Oblique Head Metatarsal Div.
972	Abductor Digitus Pedis Fifth
974	Abductor Digiti Minimi Pedis

OVARIES/TESTICLE

884	Tibialis Posterior Fibular Div.
936	Abductor Hallucis Transverse Head Medial Div.

PANCREAS

110	Temporalis Parietal Div.
136	Rectus Lateralis Bulbi
274	Sternocleidomastoid Sternal Div.
286	Platysma Anterior Div.
322	Splenius Capitis Mastoid Div.
370	Thyroarytenoideus
414	Latissimus Dorsi Thoracic Div.
532	Abductor Pollicis Longus Radial Div.
542	Abductor Pollicis Brevis
550	Extensor Digitorum Communis Manus Lateral Div.
554	Extensor Indicis Proprius
556	Flexor Digitorum Superficialis Medial Div.
580	Flexor Digiti Minimi Brevis Manus
712	Iliacus Minor
786	Gluteus Minimus Anterior Div.
848	Gluteus Maximus Iliac Div.
882	Tibialis Posterior Tibial Div.

PANCREAS (INGUINAL LYMPH NODES)

662	Diaphragm Number Four Left Side Lumbar Div.
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PANCREATIC DUCT SYSTEM

062	Orbicularis Oculi Lower Div.
112	Temporalis Occipital Div.
288	Platysma Posterior Div.
290	Digastricus Anterior Belly Div.
362	Cricoarytenoideus Lateralis
410	Subclavius Clavicular Div.
442	Subscapularis Inferior Div.
490	Anconeus Ulnar Div.
518	Extensor Carpi Radialis Longus Abductor Div.
526	Extensor Pollicis Brevis Septal Div.
528	Flexor Pollicis Longus
566	Interossei Dorsales Manus Third
588	Opponens Digitii Minimi Manus Flex. Div.
618	Longissimus Thoracis Middle Thoracic Div.
740	Coccygeus Sacral Div.
752	Cremaster Number 3
788	Gluteus Minimus Posterior Div.
798	Pectineus
832	Vastus Lateralis Middle Div.
834	Vastus Lateralis Lower Div.
836	Vastus Intermedius Medial Div.
848	Gluteus Maximus Iliac Div.
858	Semimembranosus Popliteal Div.
926	Flexor Hallucis Brevis Tendonial Div.
940	Extensor Hallucis Brevis
958	Adductor Digitus Pedis Second

PARATHYROID

070	Depressor Septi Nasi
888	Peroneus Longus Metatarsal Div.
126	Pterygoideus Lateralis (Ext.) Lower Div.
574	Lumbricales Manus Third
396	Levator Scapula Inferior Div.
576	Lumbricales Manus Second

PENIS/VAGINAL VAULT

058	Levator Palpebrae Superioris
332	Semispinalis Capitis
434	Teres Major Inferior Div.
464	Pectoralis Major Costal Div.
484	Pronator Teres Humeral Div.
708	Rectus Abdominis Fourth Div. Lateralis
780	Gluteus Medius Posterior Div.
788	Gluteus Minimus Posterior Div.

PENIS/VAGINAL VAULT (CONTINUED)

- 792 Tensor Fascia Lata Posterior Div.
- 804 Adductor Longus Inferior Div.
- 870 Popliteus
- 944 Quadratus Plantae Lateral Div.
- 954 Flexor Digitus Pedis, Fourth

PHARYNX

- 110 Temporalis Parietal Div.
- 380 Constrictor Pharyngis Medius
- 540 Opponens Pollicis Abductor Div.
- 548 Extensor Digitorum Communis Manus Medial Div.
- 592 Interossei Palmares Third

PINEAL

- 112 Temporalis Occipital Div.
- 124 Pterygoideus Lateralis (Ext.) Upper Div.—Disc
- 432 Teres Major Superior Div.
- 540 Opponens Pollicis Abductor Div.
- 612 Spinalis Thoracis Thoracic Div.
- 924 Flexor Hallucis Brevis First Cuneiform Div.

POSTERIOR PITUITARY

- 118 Masseter Deep Div.
- 120 Pterygoideus Medialis (Int.) Sphenoid Div.
- 390 Trapezius Middle Div.
- 398 Rhomboid Minor
- 412 Subclavius Scapular Div.
- 436 Subscapularis Superior Div.
- 486 Pronator Teres Ulnar Div.
- 538 Opponens Pollicis Flexor Div.
- 552 Extensor Digiti Minimi Manus
- 578 Lumbricales Manus First
- 714 Transverse Abdominis Upper Div.
- 728 Psoas Minor
- 820 Vastus Medialis Lower Div.
- 850 Gluteus Maximus Sacral Div.
- 854 Semitendinosis
- 914 Extensor Digitorum Longus Lateral Divison
- 974 Abductor Digiti Minimi Pedis

PROSTATE/UTERUS

300	Sternohyoideus
314	Longus Capitis
334	Semispinalis Cervicis
370	Thyroarytenoideus
442	Subscapularis Inferior Div.
460	Pectoralis Major Clavicular Div.
474	Triceps Medial Head
494	Supinator Ulnar Div.
508	Flexor Carpi Ulnaris Adductor Div.
512	Extensor Carpi Ulnaris Extensor Div.
588	Opponens Digitii Minimi Manus Flexor Div.
698	Obliquus Internus Abdominis Lateral Div.
746	Iliococcygeus
782	Gluteus Medius Middle Div.
808	Gracilis
828	Biceps Femoris Longhead Tibial Div.
842	Adductor Magnus Vertical Div.
850	Gluteus Maximus Sacral Div.
860	Piriformis
862	Gemellus Inferior
912	Extensor Digitorum Longus Medial Div
920	Adductor Hallucis Superior Div.
970	Abductor Digitus Pedis Fourth

SALIVARY GLANDS (PAROTID)

362	Cricoarytenoideus Lateralis
396	Levator Scapula Inferior Div.
416	Latissimus Dorsi Lumbar Div.
476	Articularis Cubiti
836	Vastus Intermedius Medial Div.

SALIVARY GLANDS (SUBLINGUAL)

334	Semispinalis Cervicis
472	Triceps Lateral Head
594	Interossei Palmaris Second
596	Palmaris Brevis
702.	Rectus Abdominis Second Div
714	Transverse Abdominis Upper Div.
828	Biceps Femoris Longhead Tibial Div.
838	Vastus Intermedius Lateral Div
942	Quadratus Plantae, Med. Div.
948	Flexor Digitorum Brevis Lateral Div.

SALIVARY GLANDS (SUBMAUDIBULAR)

- 832 Vastus Lateralis Middle Div.
- 928 Flexor Hallucis Brevis Third Cuneiform Div.
- 962 Adductor Digitus Pedis Fourth

SEMINAL VESICLE

- 532 Abductor Pollicis Longus Radial Div.
- 576 Lumbricales Manus, Second

SINUS

- 536 Interossei Pollicis (Palmaris First)

SINUS (FRONTAL.)

- 394 Levator Scapula Superior Div.
- 568 Interossei Dorsales Manus Second
- 692 Obliquus Externus Abdominis Anterior Div.

SINUS (MAXILLARY)

- 420 Supraspinatus Spine Div.
- 498 Pronator Quadratus Distal Div.
- 586 Opponens Digitii Minimi Manus
- 950 Flexor Digitus Pedis Second
- 956 Flexor Digitus Pedis, Fifth

SINUS (NASAL.)

- 964 Adductor Digitus Pedis Fifth

SINUS (SPHENOID)

- 438 Subscapularis Third Div.
- 694 Obliquus Externus Abdominis Lateral Div.

SPLEEN

- 306 Omohyoideus
- 332 Semispinalis Capitis
- 346 Obliquus Capitis Superior
- 394 Levator Scapula Superior Div.
- 448 Deltoideus Posterior Medial Div.
- 452 Deltoideus Middle Posterior Div.
- 466 Biceps Brachii Longhead
- 550 Extensor Digitorum Communis Manus Lateral Div.
- 560 Flexor Digitorum Profundus Manus Medial Div.
- 568 Interossei Dorsales Manus Second

SPLEEN (CONTINUED)

- 590 Interossei Palmares Fourth
- 662 Diaphram Number Four Left Side Lumbar Div.
- 752 Cremaster Number 3
- 812 Obturator Externus
- 826 Biceps Femoris Longhead Fibular Div.
- 898 Tibialis Anterior Dorsiflexor Div.
- 960 Adductor Digitus Pedis Third
- 966 Abductor Digitus Pedis Second

STOMACH

- 736 Iliocostalis Lumborum
- 908 Flexor Digitorum Longus Medial Div.
- 932 Abductor Hallucis Oblique Head Peroneus Div.

STOMACH (BODY)

- 618 Longissimus Thoracis Middle Thoracic Div.

STOMACH (FUNDUS)

- 350 Interspinalis Cervicis
- 496 Pronator Quadratus Proximal Div.

STOMACH (PYLORIC ANTRUM)

- 516 Extensor Carpi Radialis Longus Extensor Div.

STOMACH (PYLORIC VESTIBULE)

- 510 Extensor Carpi Ulnaris Adductor Div

STOMACH (PYLORIC CANAL)

- 742 Coccygeus Coccyx Div.

STOMACH (SPECIAL CELLS)

- 130 Rectus Superior Bulbi
- 132 Rectus Inferior Bulbi
- 458 Deltoideus Anterior Clavicular Div.
- 528 Flexor Pollicis Longus
- 942 Quadratus Plantae Medial Div.

TESTICLE/OVARIES

- 884 Tibialis Posterior Fibular Div.
- 936 Abductor Hallucis Transverse Head Medial Div.

THYMUS

062	Orbicularis Oculi Lower Div.
122	Pterygoideus Medialis (Int.) Palatine Div.
272	Upper Trapezius Clavicular Div.
304	Thyrohyoideus
404	Serratus Anterior Inferior Div.
420	Supraspinatus Spine Div.
428	Infraspinatus Inferior Div.
564	Interossei Dorsales Manus Fourth
718	Transverse Abdominis Lower Div.
742	Coccygeus Coccyx Div.
830	Vastus Lateralis Superior Div.
904	Extensor Hallucis Longus Interosseous Div.
954	Flexor Digitus Pedis, Fourth
966	Abductor Digitus Pedis Second
976	Extensor Digitorum Brevis

THYROID

052	Occipitalis
060	Orbicularis Oculi Upper Div.
118	Masseter Deep Div.
120	Pterygoideus Medialis (Int.) Sphenoid Div.
294	Stylohyoideus
298	Geniohyoideus
424	Infraspinatus Superior Div.
430	Teres Minor
438	Subscapularis Third Div.
474	Triceps Medial Head
504	Flexor Carpi Radialis Flexor Div.
746	Iliococcygeus
792	Tensor Fascia Lata Posterior Div.
794	Rectus Femoris Reflected Head
830	Vastus Lateralis Superior Div.
914	Extensor Digitorum Longus Lateral Divison
970	Abductor Digitus Pedis Fourth

TONSILS

- 122 Pterygoideus Medialis (Int.) Palatine Div.
296 Mylohyoideus
448 Deltoideus Posterior Medial Div.
478 Brachialis
558 Flexor Digitorum Superficialis Lateral Div.
698 Obliquus Internus Abdominis Lateral Div.
732 Quadratus Lumborum Lumbar Div.
838 Vastus Intermedius Lateral Div.
926 Flexor Hallucis Brevis Tendon Div.
964 Adductor Digitus Pedis Fifth
976 Extensor Digitorum Brevis

URETER

- 294 Stylohyoideus
968 Abductor Digitus Pedis Third

URETHRA

- 284 Scalenus Posterior
418 Latissimus Dorsi Iliac Div.
906 Extensor Hallucis Longus Fibular Div.

URETHRA (MEMBRANOUS)

- 136 Rectus Lateralis Bulbi
890 Peroneus Brevis Fibular Div.

URETHRA (PROSTATE PORTION)

- 896 Tibialis Anterior Supinator Div.

UTERUS/PROSTATE

300	Sternohyoideus
314	Longus Capitis
334	Semispinalis Cervicis
370	Thyroarytenoideus
442	Subscapularis Inferior Div.
460	Pectoralis Major Clavicular Div.
474	Triceps Medial Head
494	Supinator Ulnar Div.
508	Flexor Carpi Ulnaris Adductor Div.
512	Extensor Carpi Ulnaris Extensor Div.
588	Opponens Digiti Minimi Manus Flexor Div.
698	Obliquus Internus Abdominis Lateral Div.
746	Iliococcygeus
782	Gluteus Medius Middle Div,
808	Gracilis
828	Biceps Femoris Longhead Tibial Div.
842	Adductor Magnus Vertical Div.
850	Gluteus Maximus Sacral Div.
860	Piriformis
862	Gemellus Inferior
912	Extensor Digitorum Longus Medial Div.
920	Adductor Hallucis Superior Div.
970	Abductor Digitus Pedis Fourth

VAGINAL VAULT/PENIS

058	Levator Palpebrae Superioris
332	Semispinalis Capitis
434	Teres Major Inferior Div.
464	Pectoralis Major Costal Div.
484	Pronator Teres Humeral Div.
708	Rectus Abdominis Fourth Div. Lateralis
780	Gluteus Medius Posterior Div.
788	Gluteus Minimus Posterior Div.
792	Tensor Fascia Lata Posterior Div.
804	Adductor Longus Inferior Div.
870	Popliteus
944	Quadratus Plantae Lateral Div.
954	Flexor Digitus Pedis, Fourth

VEINS OF STOMACH

292	Digastricus Posterior Belly Div.
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VERTEBRAL LEVEL-MUSCLE RELATIONSHIPS

CERVICAL VERTEBRAL LEVELS

LEFT

C1	
C2	398, 464, 526, 578, 860
C3	058, 122, 290, 882
C4	528, 554, 840, 894, 942, 970
C5	402, 444, 452, 516, 652, 898, 902
C6	448, 524, 572, 788, 852
C7	

RIGHT

C1	
C2	844, 858
C3	098, 322, 542, 698, 832
C4	442, 742, 848, 934
C5	424, 460, 974
C6	296, 416, 546, 618
C7	392, 326

THORACIC VERTEBRAL LEVELS

LEFT

T1	100, 564, 806, 924, 954, 972
T2	130, 512, 588, 808, 842
T3	132, 134, 302, 438, 612, 642, 696, 796
T4	308, 362, 426, 436, 704, 800
T5	110, 404, 446, 538, 736, 948
T6	070, 314, 510, 520, 548, 830
T7	136, 414, 434, 530, 576, 804, 966
T8	400, 462, 482, 550, 614, 820, 888
T9	102, 484, 700, 712, 818, 874, 880, 936, 940, 962
T10	272, 492, 570, 586, 800, 912, 914
T11	692, 890, 944, 950, 952
T12	284, 498, 656, 726, 938

RIGHT

T1	286, 514, 532, 740
T2	300, 440, 486, 494, 582, 590, 864
T3	140, 430, 474, 838, 878
T4	332, 732, 780, 794, 910
T5	392, 408, 492, 496, 556, 594, 736, 814, 892
T6	276, 562, 568, 610, 708, 946, 960
T7	398, 420, 490, 528, 566, 714, 834, 884
T8	062, 274, 422, 454, 752, 926, 964
T9	052, 298, 500, 506, 540, 596, 822, 854
T10	346, 534, 592, 810, 846, 932, 950
T11	288, 394, 410, 518, 544, 872, 886
T12	138, 296, 334, 466, 662, 724, 792, 956

LUMBAR VERTEBRAL LEVELS

LEFT

L1	126, 580, 718, 722, 734, 816
L2	270, 396, 412, 450, 456, 536, 558, 648, 784, 896, 968, 976
L3	060, 304, 390, 394, 502, 508, 574, 584, 920, 922, 928
L4	118, 282, 458, 470, 706, 730, 782, 812, 876
L5	350, 476, 478, 480, 826, 856, 930

RIGHT

L1	278, 428, 552, 694, 862, 870
L2	396, 406, 522, 738, 748, 790, 900, 906
L3	112, 114, 306, 370, 380, 432, 504, 690, 904
L4	124, 292, 488, 560, 702, 710, 798, 828, 850, 908, 958
L5	120, 294, 418, 468, 728, 744, 786, 824, 836

CRANIAL BONE-MUSCLE RELATIONSHIPS

CRANIAL BONE	MUSCLE NUMBER
A-P Rockez	722, 862
Ethmoid	284, 292, 422, 538, 544, 572, 580, 582, 614, 800, 886, 920, 946, 954
Frontal	102, 296, 428, 462, 492, 534, 564, 574, 808, 810, 854, 878, 880, 896, 898, 926
Glabella	276, 290, 406, 454, 558, 726, 816, 818, 948
Inferior Conchae	288, 430, 562, 584, 586, 796, 848, 858, 902, 950
Lacrimal	120, 130, 298, 470, 552, 746, 836, 924, 970, 976
Lateral Rocker	062, 122, 282, 392, 840, 860
Mandible	060, 114, 138, 334, 420, 734, 850, 904, 938, 944, 956
Maxillary	272, 404, 434, 442, 468, 496, 498, 530, 578, 648, 656, 662, 698, 706, 712, 728, 738, 742, 780, 788, 798, 842
Nasal	424, 448
Occipital	270, 346, 432, 528, 540, 590, 592, 692, 710, 744, 826, 846, 872, 874, 914, 934, 958
Palatine	126, 440, 466, 476, 560, 732, 736, 740, 852, 906, 930
Parietal	098, 110, 140, 278, 392, 402, 460, 500, 526, 536, 542, 550, 588, 596, 694, 718, 790, 792, 830, 834, 882, 888, 890
Rotation Rocker	124, 326, 724, 784, 794
Sphenoid	100, 134, 302, 390, 394, 416, 426, 486, 488, 490, 494, 506, 514, 568, 576, 612, 702, 832, 844, 856, 884
Styloid	294, 444, 466, 474, 502, 504, 510, 814, 820, 942, 962
Temporal	132, 300, 306, 314, 322, 370, 394, 396, 398, 410, 438, 450, 464, 478, 480, 482, 484, 508, 512, 516, 518, 520, 554, 700, 714, 782, 786, 804, 806, 812, 828, 838, 870, 892, 894, 964, 972
T.M.J.	936
Vomer	112, 118, 400, 446, 524, 532, 556, 594, 642, 690, 730, 822, 900, 966
Zygoma	274, 286, 304, 380, 396, 412, 414, 418, 452, 458, 472, 522, 546, 548, 566, 570, 704, 708, 824, 864, 876

FOOT BONE-MUSCLE RELATIONSHIPS

FOOT BONE	MUSCLE NUMBER
Calcaneus	270, 346, 432, 528, 540, 590, 592, 692, 710, 744, 826, 846, 872, 874, 914, 934, 958
Cuboid	132, 300, 306, 314, 322, 370, 390, 394, 398, 410, 438, 450, 464, 478, 480, 482, 484, 508, 512, 516, 518, 520, 554, 700, 714, 782, 786, 804, 806, 812, 828, 838, 870, 892, 894, 964, 972
Navicular	102, 296, 428, 462, 492, 534, 564, 574, 808, 810, 854, 878, 880, 896, 898, 926
Talus	098, 110, 140, 278, 392, 402, 408, 460, 500, 526, 536, 542, 550, 588, 596, 694, 718, 790, 792, 830, 834, 882, 888, 890, 910
1st Cuneiform	284, 292, 422, 544, 572, 580, 582, 614, 696, 800, 886, 920, 946, 954
2nd Cuneiform	824, 864, 876
3rd Cuneiform	100, 134, 274, 286, 302, 304, 380, 396, 406, 412, 414, 416, 418, 426, 452, 454, 458, 468, 472, 490, 494, 506, 522, 546, 570, 576, 578, 612, 702, 704, 708, 742, 832, 844, 856, 884, 928, 948
1st Metatarsal	126, 440, 476, 538, 560, 732, 740, 852, 906, 930
2nd Metatarsal	112, 118, 298, 400, 446, 524, 532, 556, 594, 642, 690, 730, 822, 842, 900, 912, 966
3rd Metatarsal	272, 404, 436, 442, 452, 486, 488, 514, 530, 566, 568, 656, 662, 726, 728, 738, 780, 788, 798, 908
4th Metatarsal	274, 276, 286, 290, 548, 558, 812, 818
5th Metatarsal	434, 496, 498, 648, 698, 706, 712, 922
Proximal Phalanx - Great Toe	060, 114, 138, 334, 420, 734, 850, 904, 936, 938, 944, 956
Proximal Phalanx - 2nd Toe	120, 130, 288, 298, 430, 470, 552, 562, 746, 836, 848, 858, 902, 924, 950, 970, 976
Distal Phalanx - Great Toe	294, 424, 444, 448, 466, 474, 502, 504, 510, 814, 820, 942, 962
Proximal Phalanx - 4th Toe	584, 586
Distal Phalanx - 4th Toe	796

MUSCLE-ORGAN RELATIONSHIPS

052	Occipitalis Gallbladder Duct System Thyroid	118	Masseter Deep Div. Posterior Pituitary Thyroid
058	Levator Palpebrae Superioris Colon (Transverse) Penis/Vaginal Vault	120	Pterygoideus Medialis, Sphenoid Div. Thyroid Posterior Pituitary
060	Orbicularis Oculi Upper Div. Ear (Internal) Thyroid	122	Pterygoideus Medialis, Palatine Div. Thymus Tonsils
062	Orbicularis Oculi Lower Div. Thymus Pancreatic Duct System	124	Pterygoideus Lateralis, Upper Div. Disc Pineal Gonads
070	Depressor Septi Nasi Ductus Deferens Parathyroid	126	Pterygoideus Lateralis, Lower Div. Gonads Parathyroid
098	Orbicularis Oris Upper Div. Gallbladder Liver	130	Rectus Superior Bulbi Kidney Stomach (Special Cells)
100	Orbicularis Oris Lower Div. Anterior Pituitary Gonads	132	Rectus Inferior Bulbi Lymphatics of Gallbladder Stomach (Special Cells)
102	Buccinator Colon (Transverse) Gonads	134	Rectus Medialis Bulbi Gallbladder Duct System Liver
110	Temporalis Parietal Div. Pancreas Pharynx	136	Rectus Lateralis Bulbi Pancreas Urethra (Membranous)
112	Temporalis Occipital Div. Pineal Pancreatic Duct System	138	Obliquus Superior Bulbi Liver Lymphatics of Gallbladder Duct System
114	Masseter Superficial Div. Adrenal Lungs	140	Obliquus Inferior Bulbi Liver Lymphatics of Jejunum

270	Upper Trapezius Scapular Div. Colon Eye	296	Mylohyoideus Bladder Tonsils
272	Upper Trapezius Clavicular Div. Ear (Internal) Thymus	298	Geniohyoideus Eye Thyroid
274	Sternocleidomastoid Sternal Div. Pancreas Gallbladder	300	Sternohyoideus Gallbladder (Duct System) Prostate/Uterus
276	Sternocleidomastoid Clavicular Div. Larynx Lymphatics of Face and Neck	302	Sternothyroideus Adrenal Kidney
278	Scalenus Anterior Bladder Ductus Deferens	304	Thyrohyoideus Thymus Nose
282	Scalenus Medius Gallbladder Lymphatics of Submandibular	306	Omohyoideus Eye Spleen
284	Scalenus Posterior Kidney Urethra	308	Longus Colli Vertical Div. Jejunum (Special Cells) Gonads
286	Platysma Anterior Div. Duodenum (Descending Portion) Pancreas	314	Longus Capitis Anterior Pituitary Prostate/Uterus
288	Platysma Pneterior Div. Rectum Pancreatic Duct System	322	Splenius Capitis Mastoid Div. Pancreas Anterior Pituitary
290	Digastricus Anterior Belly Div. Pancreatic Duct System Bladder	326	Splenius Cervicis Adrenal Heart
292	Digastricus Posterior Belly Div. Gallbladder Veins of Stomach	332	Semispinalis Capitis Spleen Penis/Vaginal Vault
294	Stylohyoideus Thyroid Ureter	334	Semispinalis Cervicis Prostate/Uterus Salivary Glands (Sublingual)

346	Obliquus Capitis Superior Spleen Lungs	404	Serratus Anterior Inferior Div. Lungs Thymus
350	Interspinalis Cervicis Colon (Ascending/Descending) Stomach (Fundus)	406	Pectoralis Minor Superior Div. Heart Lungs
362	Cricoarytenoideus Lateralis Pancreatic Duct System Salivary Glands (Parotid)	408	Pectoralis Minor Inferior Div. Kidney Lungs
370	Thyroarytenoideus Prostate/Uterus Pancreas	410	Subclavius Clavicular Div. Ear (External) Pancreatic Duct System
380	Constrictor Pharyngis Medius Liver Pharynx	412	Subclavius Scapular Div. Liver Posterior Pituitary
390	Trapezius Middle Div. Ear Posterior Pituitary	414	Latissimus Dorsi Thoracic Div. Lymphatics of Ileum Pancreas
392	Trapezius Lower Div. Bladder Kidney	416	Latissimus Dorsi Lumbar Div. Lymphatics of Duodenum Salivary Glands (Parotid)
394	Levator Scapula Superior Div. Sinus (Frontal) Spleen	418	Latissimus Dorsi Iliac Div. Colon (Transverse) Urethra
396	Levator Scapula Inferior Div. Parathyroid Parotid Gland	420	Supraspinatus Spine Div. Thymus Sinus (Maxillary)
398	Rhomboid Minor Posterior Pituitary Liver	422	Supraspinatus Fosse Div. Esophagus Anterior Pituitary
400	Rhomboid Major Liver Mammary Tissue	424	Infraspinatus Superior Div. Lymphatics of Lungs Thyroid
402	Serratus Anterior Superior Div. Lungs Gonads	426	Infraspinatus Middle Div. Eye Gallbladder

428	Infraspinatus Inferior Div. Gallbladder Duct System Thymus	452	Deltoideus Middle Posterior Div. Lungs Spleen
430	Teres Minor Thyroid Gonads	454	Deltoideus Middle Anterior Div. Gallbladder Lungs
432	Teres Major Superior Div. Ear (External) Pineal	456	Deltoideus Anterior Scapular Div. Lungs Adrenal
434	Teres Major Inferior Div. Lungs Penis/Vaginal Vault	458	Deltoideus Anterior Clavicular Div. Lungs Stomach (Special Cells)
436	Subscapularis Superior Div. Heart Posterior Pituitary	460	Pectoralis Major Clavicular Div. Heart Prostate/Uterus
438	Subscapularis Third Div. Sinus (Sphenoid) Thyroid	462	Pectoralis Major Sternal Div. Liver Mammary Tissue
440	Subscapularis Second Div. Esophagus Heart	464	Pectoralis Major Costal Div. Penis/Vaginal Vault Anterior Pituitary
442	Subscapularis Inferior Div. Prostate/Uterus Pancreatic Duct System	466	Biceps Brachii Longhead Kidney Spleen
444	Coracobrachialis Coracoid Div. Kidney Nose	468	Biceps Brachii Shorthead Colon (Sigmoid) Gonads
446	Coracobrachialis Septal Div. Bladder Lungs	470	Triceps Longhead Duodenum (Superior Portion) Eustachian Tube
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Thyrohyoid	304	III	89
Tibialis Anterior Dorsiflexor Div.	898	V	57
Tibialis Anterior Supinator Div.	896	V	55
Tibialis Posterior Fibular Div.	884	V	43
Tibialis Posterior Tibial Div.	882	V	41
Transverse Abdominis Lower Div.	718	I	51
Transverse Abdominis Upper Div.	714	I	49
Trapezius Lower Div.	392	IV	61
Trapezius Middle Div.	390	IV	59
Triceps Lateral. Head	472	IV	155
Triceps Longhead	470	IV	153
Triceps Medial Head	474	IV	157
Upper Trapezius Clavicular Div.	272	IV	57
Upper Trapezius Scapular Div.	270	IV	55
Vastus Intermedius Lateral Div.	838	II	97
Vastus Intermedius Medial Div.	836	II	95
Vastus Lateralis Lower Div.	834	II	93
Vastus Lateralis Middle Div.	832	II	91
Vastus Lateralis Superior Div.	830	II	89
Vastus Medialis Lower Div.	820	II	79
Vastus Medialis Middle Div.	818	II	77
Vastus Medialis Upper Div.	816	II	75

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GLOSSARY of ABBREVIATIONS

Ant	Anterior
ASIS	Anterior superior iliac spine of ilium
BL	Bilateral
Contralateral	Pertains to opposite side of the body (R or L) from reference
CN	Cranial Nerve
EAC	External Auditory Canal
EOP	External occipital protuberance
I.C.S.	Intercostal space
Ipsilateral	Pertains to same side of the body (R or L) as reference
L	Left or Lumbar
Lat	Lateral
L.B.	Lovett Brother
M.A.P.	Muscle acupuncture point
Midline	Midline of the body or organ
M.M.	Myomere, direct nerve supply to muscle
M.T.P.	Muscle Testing position
Post	Posterior
PSIS	Posterior superior iliac spine of ilium
Sup	Superior
R	Right
SCM	Sternocleidomastoideous muscle
V.L.	Vertebral Level, A level of the spinal column where the somato-visceral relationships are expressed
VOR	Visceral Organ Reflexes

MERIDIANS

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B	Bladder	(NW) Nutri West P.O. Box 950 Douglas, Wyoming 82633 www.nutri-west.com Phone Number: 1-800-443-3333
Cv	Conception Vessel	
Cx	Circulation / Sex	
G	Gallbladder	
H	Heart	
K	Kidney	
Li	Large Intestine	
Lu	Lung	
Lv	Liver	
P	Pericardium (same as Circulation Meridian)	
Si	Small Intestine	
Sp	Spleen	
St	Stomach	
Tw	Triple Warmer	
X	Extra (outside of normal Meridians)	
Gv	Governing Vessel	

