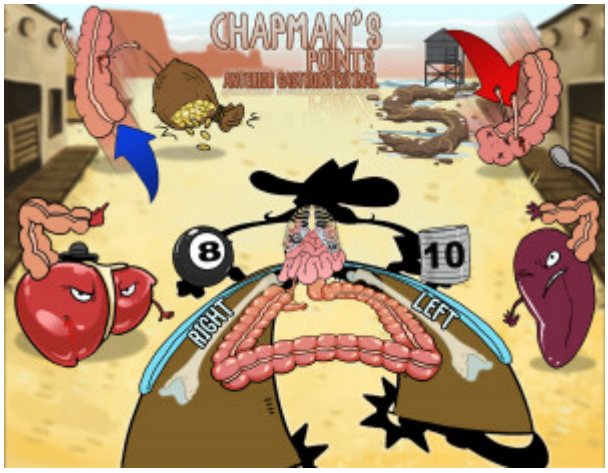
Chapman’s Points - Anterior Gastrointestinal

Chapman's points or Chapman’s reflex points are palpable areas of fascial tissue abnormality that develop secondarily to irritation or dysfunction of a target organ, and they are often considered to be a visceral reflex. They are characteristically small, smooth and firm areas that are 2-3mm in size. They are discretely palpable, and are described as tapioca-like or BB-like. Additionally, the palpable areas are partially fixed and often cannot be displaced. Anterior points correlate to the gastrointestinal system starting with the 8th-10th intercostal space which correlates most often to the small intestines. The large intestine tracks along both legs of the iliotibial bands. Along the left iliotibial band, proximal to distal, we have the sigmoid, descending colon and splenic flexure. Along the right iliotibial band, distally to proximally. we have the hepatic flexure, ascending colon and cecum. Be sure to check out our other Chapman’s points Picmonics.



PLAY PICMONIC

Characteristics

8-10th Intercostal Space
(8) Ball and (10) Tin
The 8th-10th intercostal spaces on both sides of the body are the Chapman’s reflex points that correspond to the small intestines. These spaces are located directly below their corresponding rib numbers.

Small Intestines
Small Intestines
Gentle but firm rotary movement in the 8th-10th intercostal spaces on both sides of the body is the palpatory technique thought to identify irritation or dysfunction of the small intestines.

Along Left Iliotibial Band
Left Band
The location of the Chapman reflex points that correspond to the sigmoid and descending colon and the splenic flexure is along the iliotibial band running from the greater trochanter to just above the knee on the left side.

Sigmoid
S-mud
Deep pressure with longitudinal rotary movement along the iliotibial band running from the greater trochanter to just above the knee on the left side is believed by Chapman to be able to identify irritation or dysfunction in the sigmoid and descending colon as well as the splenic flexure.

Descending Colon
Falling Colon
Deep pressure with longitudinal rotary movement along the iliotibial band running from the greater trochanter to just above the knee on the left side is believed by Chapman to be able to identify irritation or dysfunction in the sigmoid and descending colon as well as the splenic flexure.

Splenic Flexure
Spleen with spoon Flexing
Deep pressure with longitudinal rotary movement along the iliotibial band running from the greater trochanter to just above the knee on the left side is believed by Chapman to be able to identify irritation or dysfunction in the sigmoid and descending colon as well as the splenic flexure.

Along Right Iliotibial Band
Right Band
The location of the Chapman reflex points that correspond to the cecum, ascending colon and hepatic flexure is along the iliotibial band running from the greater trochanter to just above the knee on the right side.

Sign up for FREE at picmonic.com

Hepatic Flexure

Liver Flexing

Deep pressure with longitudinal rotary movement along the iliotibial band running from the greater trochanter to just above the knee on the right side is believed by Chapman to be able to identify irritation or dysfunction in the cecum, ascending colon and hepatic flexure.

Ascending Colon

Rising Colon

Deep pressure with longitudinal rotary movement along the iliotibial band running from the greater trochanter to just above the knee on the right side is believed by Chapman to be able to identify irritation or dysfunction in the cecum, ascending colon and hepatic flexure.

Cecum

Sack-coins

Deep pressure with longitudinal rotary movement along the iliotibial band running from the greater trochanter to just above the knee on the right side is believed by Chapman to be able to identify irritation or dysfunction in the cecum, ascending colon and hepatic flexure.

Sign up for FREE at picmonic.com