

**OTM Lab**  
**Introduction to Palpation I**  
August 27, 28, 2007

Tables:

- Correct height
- No belt or shoes
- Use dominant hand & eye
- Change partners frequently

HIPROT:

Palpation:

- Relax, focus on what you're feeling
- Pads of fingers, no poking or prodding
- At first you won't move any, just perceive
- Think about how to describe what you're feeling!!!!
- Normal vs. abnormal

Perception development: (one supine, one seated)

- Temperature: hand above body & move down till feel temp. change, palm first than dorsum of hand; repeat several times & then do it with other hand;
- close eyes & do it & see if different than when eyes were open—vision at times gets in way of palpation

Touch table & be comfortable

- What feeling? Temperature, texture
- Lay hand on partners post. forearm & conform to the shape
- Compare & contrast to table: temp., texture

Hand on post. forearm:

- Perceive skin with lightest finger pad touch—don't move fingers
- Tight, supple, rough, smooth?
- Move fingers a cm—different texture?
- Palpate ant. forearm & compare to post.—smoother, thinner skin more protected from environment
- Palpate ant. forearm w/ one hand & palm of hand
- w/ other: compare & contrast different temp., texture, moisture—how describe?
- hand cooler & may be more moist if sweating
- Add pressure (no dimple) and compare thickness of skin at palm (thicker) & forearm (thinner)
- Skin roll forearm & palm for thickness

OVER

Posterior Forearm: picture of extensor muscles  
Deeper pressure to muscle & feel direction of fibers  
Palpate perpendicular to fiber direction & pluck  
like a guitar string (ruffle potato chip ridges)  
Feel medial & lateral borders of muscle  
Have partner extend fingers & feel contraction  
Follow muscle to lateral epicondyle of humerus  
Feel bicep muscle med. & lat. borders;  
move distal to myotendinous junct. &  
then tendon to bone—partner to contract to feel  
muscle & tendon better  
Tendon: can't spring, not as elastic  
Bone: firm, hard  
Ligament: radial collateral ligament (space between radial head  
& humerus) —hard but can feel fibers

### BONEY LANDMARKS:

#### Seated:

Radial & ulnar styloid processes; medial & lateral epicondyles of humerus;  
radial head; olecranon process of ulna  
Greater & lesser tubercle of humerus (bicipital groove)  
Clavicle; coracoid process of scapula; acromion process of scapula  
scapular borders, spine of scapula; ribs  
Spinous process & transverse process of spine

#### Supine:

Anterior superior iliac spine (ASIS)  
Greater trochanter of femur; patella; medial & lateral condyles of tibia;  
tibial tuberosity, fibular head

#### Prone:

posterior superior iliac spine (PSIS); ischial tuberosity

“The art of palpation is one that must be developed. The ability to evaluate the ‘feel’ of the tissues can be developed only by practice and conscientious application to an extraordinary degree.”

Dr. Thomas L. Northrup, Reflex Diagnosis. *The Journal of Osteopathy*, Dec, 1961, pp. 18-26.

“As osteopathic machinists we go no further than to adjust the abnormal conditions back to the normal. Nature will do the rest.”

Dr. A. T. Still, *The Philosophy and Mechanical Principles of Osteopathy*, p. 33.