Brief description: Drainage of the nasal passages can be divided into two parts. The first part involves crossing your thumbs over the nasal bone and gently applying pressure to each side of the nose as you move from cephalad to caudad. After this we can also use a sweeping motion from the top of the nose out to the zygoma to enhance the drainage of the nasal passages.

Physician position: Seated

Patient position: Supine

Hand positioning: For part one, cross your thumbs over the nose so that your right thumb is on the left side of the nose and vice versa. For part two, uncross your thumbs and follow the nose down to the maxilla and out to the zygoma.

Technique:

1. Gently rest your fingers on the side of the patient face and cross your thumbs so that your right thumb is on the left side of the nose and your left thumb is on the right side of the nose.
2. Gently apply pressure as you walk your fingers down the nasal bone. Be sure to stay only on the bone.
3. Repeat at least 6 times.
4. Now, uncross your thumbs and while applying gentle pressure, slide your thumbs from the top of the nose, down to the maxilla and out to the zygoma.
5. Repeat at least 6 times.

Models: Biomechanical
Galbreath – Head and neck

**Brief description:** This technique is useful in encouraging drainage from the Eustachian tube. By lifting the mandible while stabilizing the head, you can open the Eustachian tube for drainage.

**Physician position:** Standing opposite the affected side

**Patient position:** Supine

**Hand positioning:** Stabilize the forehead with your cephalad hand and use your caudad hand to contact the mandible at the ramus, angle and body of the mandible.

**Technique:**

1. Stabilize the forehead and place your other hand on the mandible.
2. Gently lift the mandible superiorly and pull it slightly towards yourself to add a slight rotation.
3. Repeat at least 6 times.

**Models:** Biomechanical
Suboccipital muscle release – Head and neck

**Brief description:** Suboccipital muscle release is a useful technique in treating headaches as well as vagus nerve dysfunction. To perform the technique place your fingers in the suboccipital muscles and traction out back and laterally.

**Physician position:** Seated

**Patient position:** Supine

**Hand positioning:** Curl your fingers into the suboccipital muscles by following the occiput down until your fingers sink into muscle.

**Technique:**

1. Place your fingers into the suboccipital muscles.
2. Bring your elbows close to each other in order to induce lateral traction of the muscles.
3. Now, lean back to add a backwards traction on the muscles.
4. Monitor the muscle tension and try to match it. Hold until you feel a release.

**Models:** Biomechanical
Cervical myofascial release (MFR) – Cervical

**Brief description:** Myofascial release of the cervical area is useful in treating hypertonic muscle, which can attach not only in the cervical region, but down to the thoracic cage. In addition, the phrenic nerve runs in the same region.

**Physician position:** Seated

**Patient position:** Supine

**Hand positioning:** Place one hand so that the fingertips reach to the contralateral cervical muscles. Use your other hand to stabilize the head.

**Technique:**

1. Place one hand on the neck with your fingertips on the opposite cervical muscles. Place your other hand on the top of the head to stabilize.
2. Gently sink your fingers into the muscle and traction perpendicular to the muscle.
3. Hold until you feel a release and repeat up and down the cervical region until the entire area is released. (Switch hands to work on the opposite side.)

**Models:** Biomechanical
**Frontal Lift – Cervical**

**Brief description:** Lifting the frontal bone anteriorly and superiorly at a 45-degree angle can help relieve congestion and increase drainage.

**Physician position:** Seated

**Patient position:** Supine

**Hand positioning:** Place your hands above the anterior-superior to the zygomatic process and anterior to the coronal suture so that you are on the frontal bone. Then interlock your fingers.

**Technique:**

1. Place your hands above the anterior-superior to the zygomatic process and anterior to the coronal suture so that you are on the frontal bone.
2. Interlock your fingers to apply pressure to the frontal bone.
3. Gently lift anteriorly and superiorly at a 45-degree angle.
4. Hold the lift until you feel a decrease in the resistance.

**Models:** Biomechanical, Respiratory-Circulatory, Neurological

**Indications:** Congestion, facial pain
Zygomatic Lift – Cervical

Brief description: Lifting the zygomatic bones anteriorly can help relieve congestion, increase drainage and help with motion at the maxilla.

Physician position: Seated

Patient position: Supine

Hand positioning: Place your thenar eminences bilaterally at the zygoma (be sure to stay only on the zygoma and avoid the temporal bone). Then interlock your fingers.

Technique:

1. Place your thenar eminences bilaterally at the zygoma only.
2. Interlock your fingers to apply pressure to the zygoma.
3. Gently lift towards the ceiling.
4. Hold the lift until you feel a decrease in the resistance.

Models: Biomechanical, Respiratory-Circulatory, Neurological

Indications: Congestion, facial pain
Nasion Spread – Cervical

Brief description: The nasion spread is useful in increasing motion between the frontal and nasal bones as well as to help decrease congestion and increase drainage.

Physician position: Seated

Patient position: Supine

Hand positioning: Place one hand on the frontal bone to stabilize it. Using your other hand, place two fingers on the nasal bone (one finger on each side).

Technique:

1. Place one hand on the frontal bone to stabilize it. Using your other hand, place two fingers on the nasal bone (one finger on each side).
2. Using gently contact, spread the suture by pulling the frontal bone superiorly while pulling inferiorly on the nasal bones.
3. Hold the spread until you feel a decrease in the resistance.

Models: Biomechanical, Respiratory-Circulatory, Neurological

Indications: Congestion, facial pain
Frontal Direct Pressure and Drainage – Cervical

Brief description: Drainage of the frontal sinuses can be divided into two parts. The first part involves gently applying pressure to the frontal bone over the sinuses. After this we can use a sweeping motion to aid drainage by starting at the middle of the forehead and moving inferiorly while staying in front of the ears.

Physician position: Seated

Patient position: Supine

Hand positioning: Place your thumbs over the frontal sinuses to apply direct pressure and then as you drain the sinuses move your thumbs inferiorly while staying in front of the ears.

Technique:

1. Place your thumbs over the frontal sinuses (just lateral to the midline of the forehead).
2. Gently apply pressure down to the sinuses approximately 7 times.
3. Now use a sweeping motion from the forehead down to just in front of the ear to help drain the frontal sinuses. Do this approximately 7 times.

Models: Biomechanical, Respiratory-Circulatory, Neurological

Indications: Congestion, facial pain

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Maxillary Direct Pressure and Drainage – Cervical

Figure 1 - Direct pressure to maxillary sinuses

Figure 2 - Maxillary sinus drainage starting point

Figure 3 - Maxillary sinus drainage ending point

Brief description: Drainage of the maxillary sinuses can be divided into two parts. The first part involves gently applying pressure to the maxilla over the sinuses. After this we can use a sweeping motion to aid drainage by starting at the sinuses and moving inferiorly to just below the ear.

Physician position: Seated

Patient position: Supine

Hand positioning: Place your thumbs over the maxillary sinuses to apply direct pressure and then as you drain the sinuses move your thumbs inferiorly until you are just below the ears.

Technique:

1. Place your thumbs over the maxillary sinuses.
2. Gently apply pressure down to the sinuses approximately 7 times.
3. Now use a sweeping motion from the maxillary sinuses down to just below the ears to help drain the maxillary sinuses. Do this approximately 7 times.

Models: Biomechanical, Respiratory-Circulatory, Neurological

Indications: Congestion, facial pain