

# CI -1: Pelvic Blocking Releases for the Ten SB Patterns

*1-day; 8 CE hours. Prerequisite: CSI*

**Investment: \$245 / early: \$195 - [Discounts](#)**

This focus of this workshop is on identification of the 10 compensatory SB patterns and their treatment using pelvic wedges to realign the pelvis. The identification of SB patterns generally utilizes one of three analysis procedures (Flexor-Extensor Muscle Analysis, Deltoid Analysis, or Combination Analysis). SB patterns may also be identified by Sutural Analysis, which involves therapy location to multiple sutures.

The treatment of functional compensatory SB patterns is generally easily accomplished. Unlike the chronic SB Right Torsion and Left Lateral Strain patterns, compensatory SB patterns may be transient and self-correct. If treatment is needed, they are generally easily released by using pelvic wedges to realign the pelvis or by cranial ROM procedures. Although both methods are presented in this workshop, the pelvic blocking method is considered the most efficient.

SB patterns may also be maintained by sutural restrictions. After the 13-Step Protocol has been performed, a quick evaluation of the sutures (using Sutural Analysis) will identify any remaining sutural restrictions. These can be released by individual sutural release procedures.

## **Participants will learn:**

- How to position a patient in a 'neutral' position for evaluation of SB patterns.
- Four methods to quickly identify the 10 SB patterns.
- How to correct each of the SB patterns by realigning the pelvis using wedges.
- How to correct the SB patterns using cranial ROM.
- How to identify SB patterns using Therapy Localization, and correct them using Sutural releases or other techniques.



**Background.** After the CSI procedures have been performed, the structural and functional asymmetries associated with the chronic SB right torsion and SB left lateral strain will be gone. Paired muscles will test strong bilaterally, and there will be no eye or mandible movement patterns. The cranial structures will move comparably into both left and right torsion, and into both right and left lateral strain. Remember that successful treatment of an SB pattern is reestablishing equal movement between the two opposing movements.

The ten SB patterns are mutually compensatory with spinal and pelvic patterns. Each SB patterns results in specific spinal and pelvic patterns; spinal and pelvic patterns result in specific SB patterns. SB patterns, and their associated postural compensations, can occur in compensation for activities of daily living or trauma. They may also result from improperly aligned eyeglasses, worn shoes, ill-fitting dental appliances, personal electronics (cell phones), etc.