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Jun 27, 2016 · The **lesser omentum approach** (the first way) is as follows: **Open the lesser omentum**, left to **cardial area lymph node dissection** (No. 1, 2 LN), right to **hepatoduodenal ligament lymph node dissection** (No. 12a, p LN), which can be described as "M" type of **dissection** (Video core tip).

Author: Yong-Shun Gao, Jian-Gang Sun, Jing-... **Publish Year:** 2016

Surgical anatomy of the omental bursa and the stomach ...

jtd.amegroups.com/article/view/14466/11833 ▾

After entering the **bursa** surgically, opening of the peritoneum above the **pancreas** permits **dissection** of the common **hepatic artery nodes** (station 8a) and from there **dissection** proceeds up to the **liver** along the right **gastric artery** up to the level of proper **hepatic artery** (station 12a).

Cited by: 1 **Author:** Hylke J.F. Brenkman, Nicole I. van der Wi...

Publish Year: 2017

Laparoscopic liver resections - PubMed Central (PMC)

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3001173>

The application of these parallel **occlusion clamps** is very easy particularly with the **HALS approach** and **minimal dissection** is required. The surgeon just makes a small window through an avascular area of **lesser omentum** just proximal to the hepatoduodenal ligament enveloping the **bile duct**, **hepatic arteries** and portal vein.

Cited by: 1 **Author:** Alfred Cuschieri

Publish Year: 2005

Medial Approach for Laparoscopic Total Gastrectomy with ...

[https://www.journalacs.org/article/S1072-7515\(10\)00297-8/fulltext](https://www.journalacs.org/article/S1072-7515(10)00297-8/fulltext)

For treatment of advanced **upper gastric cancer**, **lymph node dissection** along the splenic artery (No. 11) and the splenic hilum (No. 10) is recommended by the Japanese guidelines.¹ In open surgery, in order to achieve complete removal of the **lymph nodes** along the splenic artery, mobilization of the distal pancreas and spleen, as well as the fundus of the stomach, from the retroperitoneum is often ...

Cited by: 60 **Author:** Hiroshi Okabe, Kazutaka Obama, Takats...

Publish Year: 2010

Name of Journal: *World Journal of Gastrointestinal Oncology*

Manuscript NO: 50083

Manuscript Type: ORIGINAL ARTICLE

Case Control study

Laparoscopic Dissection of the hepatic node: The trans lesser omentum approach

Offir Ben-Ishay

Abstract

BACKGROUND

Diagnosis of lympho-proliferative diseases is sometimes challenging. Excisional lymph node biopsy is the standard of care. 5% of the patients will present with abdominal or retroperitoneal lymphadenopathy alone

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Publish Year: 2005

Laparoscopic Liver Resection | Abdominal Key

<https://abdominalkey.com/laparoscopic-liver-resection-2> ▾

The left lobe was lifted by the assistant to divide the **lesser omentum** to the base of the **venous ligament** (for some patients, the **division of the lesser omentum** is not necessary). Enough division is extremely important to the following surgery, and there is no need to expose the **left hepatic vein** or the **inferior vena cava**.

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