THE CHEST *(Gasum)*

The chest is composed of the chest wall, lungs, heart, aorta and vena cava (the big vessels which take blood to and from the heart). The chest wall is composed of the ribs and muscles. These give excellent protection to the internal organs they surround. Consequently, the lungs, the heart or the blood vessels are only rarely injured in Taekwon-Do. It should be noted that the thoracic spine running through the middle of the back of the chest is very vulnerable to direct blows.

A blow to the breast of a woman will cause excruciating pain but serious damage is most unusual.

THE ABDOMEN *(Bokboo)*

The abdomen is a cavity containing many organs. It is formed by the diaphragm above and the plevic diaphragm below. It is surrounded by the abdominal wall in front and on the sides. The back of the abdomen is formed by the lumbar spine and the paraspinal muscles. It should be realized that the lumbar spine, which is composed of 5 vertebrae, is the only solid support the abdomen has. Injury to the spine will result in leg pain or paralysis of the legs. Injury to the paraspinal muscles will cause back pain which may be disabling for many months or years. Solid organs of the abdomen are the liver, spleen, pancreas and kidneys. A direct blow to these may result in their rupture and life-threatening bleeding. The stomach and the intestines are never injured except with knife or gunshot wounds. A blow to the solar plexus is very disabling momentarily but with no long term consequences. In women, blows to the external genitalia are very painful but without serious sequela. In men, the situation is quite different. A blow to the genitalia can cause bleeding inside the testicles and subsequent inability to have children. It is evident that very serious consequences may accompany such a blow.

THE EXTREMITIES *(Pal Gwa Dari)*

The arms are joined to the rest of the body by the clavicle and the shoulder blades. Injury to these is not usually serious. The shoulder can be

easily dislocated and cause compression of the nerves and vessels that pass to the arm through the axilla (armpit). Note that the axilla is not protected whenever the arm is lifted. On the innerside of the elbow passes the ulner nerve. It is very vulnerable to injury at this point. Fractures of the wrist or hand may not appear serious but may cause severe long term disability. The knees are very vulnerable to an attack from the side. Note that once a broken knee, forever a weak knee. Tibias (shins) and feet are easily injured; however, disability is temporary.

All students should understand basic first aid including artificial respiration so it can be administered if needed. In the case of an internal injury, it is important to lay the injured party down quietly and check the party's complexion, state of consciousness, pulse and respiration. Do not move the body in any way and call a doctor immediately.

NEVER MAKE THE PATIENT WALK OR JUMP. IT MAY AGGRAVATE ANY INTERNAL HEMORRAGE.

VITAL SPOTS *(Kupso)*

Vital spot in Taekwon-Do is defined as any sensitive or breakable area on the body vulnerable to an attack. It is essential that a student of Taekwon-Do has a knowledge of the different spots so that he can use the proper attacking or blocking tool. Indiscriminate attack is to be condemned as it is inefficient and wasteful of energy.

The student should realize that in order to cause a significant injury different force may be necessary at different vital spots. For example, small force will cause a great damage if it is applied to the neck. On the other hand, the front of the adbomen, if appropriately strengthened, can withstand large force without significant injury to the internal organs.

Vital spots can be divided into two groups.

Major: Injury to these can lead to death or permanent disability.

Minor: Injury to these is not life threatening but will cause pain and temporary disability.

For the sake of simplicity, the human body can be divided into five groups: the head, chest, abdomen, external genitalia, and the four extremities.

THE HEAD *(Mori)*

The bone structure of the head is composed of the skull which protects the contents of the head. The skull itself is composed of 28 bones, eight of which protect and house the brain. The eyes are set deep in their sockets and thus they are well protected against hand or foot blows, except when attacked by fingers or toes, both of which can cause very serious damage indeed. The nose is composed of a bony part (the bridge of the nose) and the cartilage (the tip of the nose). A blow to the nose can result in fracture (break) and/or troublesome bleeding. Neither of these is usually serious. The mouth is formed by the maxilla into which are set the upper teeth, and the mandible (the jaw) into which are set the lower teeth. The floor of the mouth is filled by the tongue. The lips form the outside covering of the teeth. The upper lip has a groove in the midline called the philtrum (it is of no significance, except as a guiding point). Injuries to the

mouth commonly result in broken teeth, bitten lips or tongue and uncommonly, broken bones. Ears can be divided into the outer and inner portions. The outer portion we can see, the inner we cannot. Injury to the outer portion commonly results in swelling or bleeding. This is rarely serious. However, a blow over the ear canal, which leads to the inner portion of the ear, may result in the rupture of the tympanic membrane and thus cause severe pain and temporary deafness.

It is most important to realize that a blow to ANY part of the head, if severe enough, will result in unconsciousness. This must be seen as a serious injury ALWAYS because even though this may only be a minor concussion, it may also be a sign of impending death.

THE NECK *(Mok)*

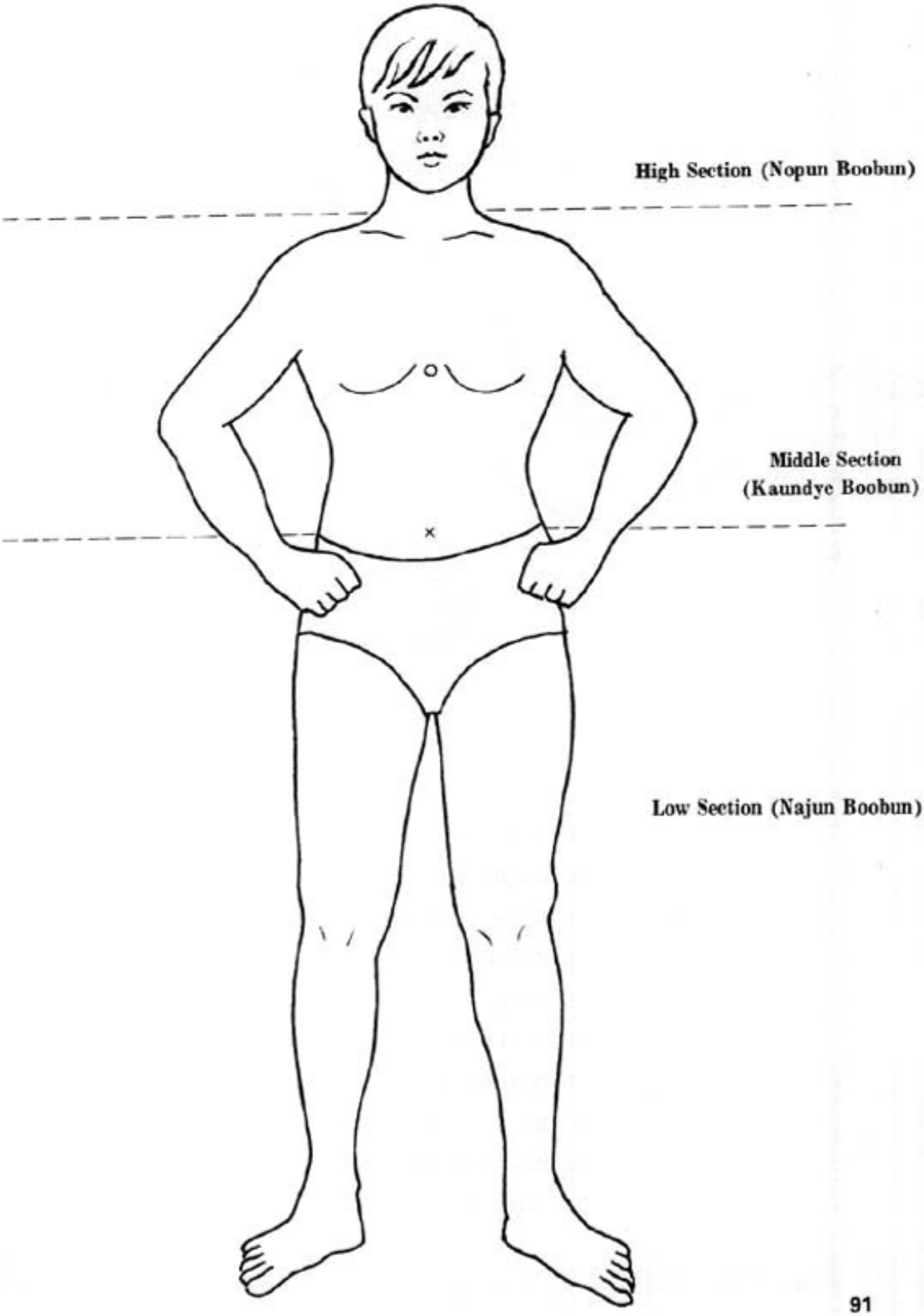
The neck can be seen as a connecting stem between the head, the brain and the rest of the body. It functions as a support of the head as well as a conduit. The support is accomplished by the cervical (neck) spine. This is the first part of the vertebral column (back bone). The other parts are: thoracic (chest) spine, lumbar (abdominal) spine, sacral (the part between the two hip bones) spine and the coccyx.

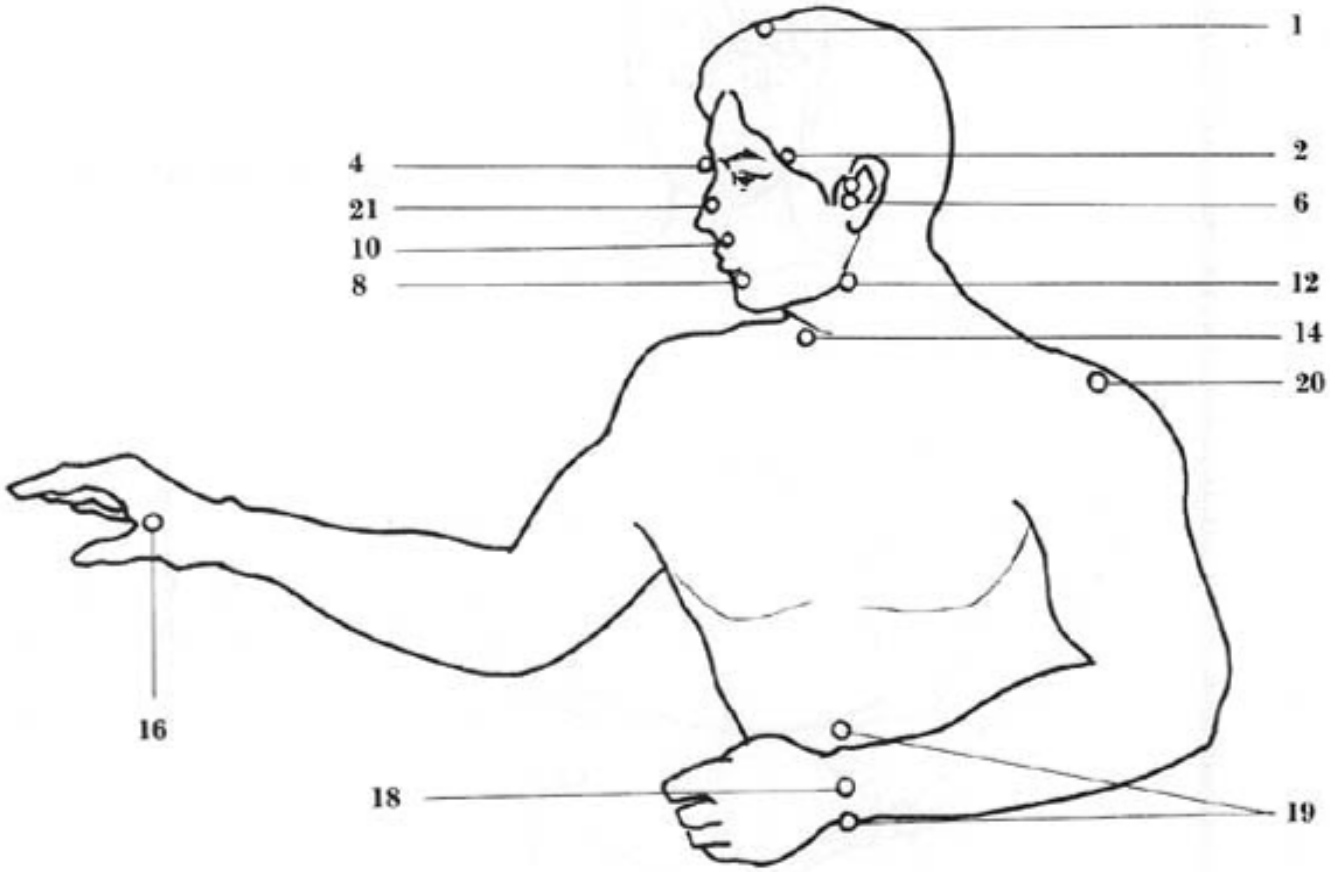
The cervical spine consists of seven vertebrae. Inside of the vertebrae is a canal which contains the spinal cord; The nerves going to the rest of the body exit from the spinal cord between two neighboring vertebrae. Injuries to any part of the spine can lead to the fracture of a vertebra which if displaced will lead to compression or transection of nerves on the spinal cord. This in turn may result in paralysis of the muscles or the part of the body innervated by the nerve or the spinal cord. The conduit part lies in front of the cervical spine. In front of this lies the laryex and the trachea (Adam's apple and the wind pipe) which bring air to the lungs. Behind lies the esophagus (food pipe) which brings food to the stomach. On the side of these are located carotid arteries (one on each side) which take blood from the heart to the brain. Injury to the larynx, trachea or carotid arteries is extremely serious and can lead to rapid death. Injuries to the esophagus are very rare, except with a knife or gunshot wound to the neck.

SECTION OF THE BODY *(Mom Dungboon)*

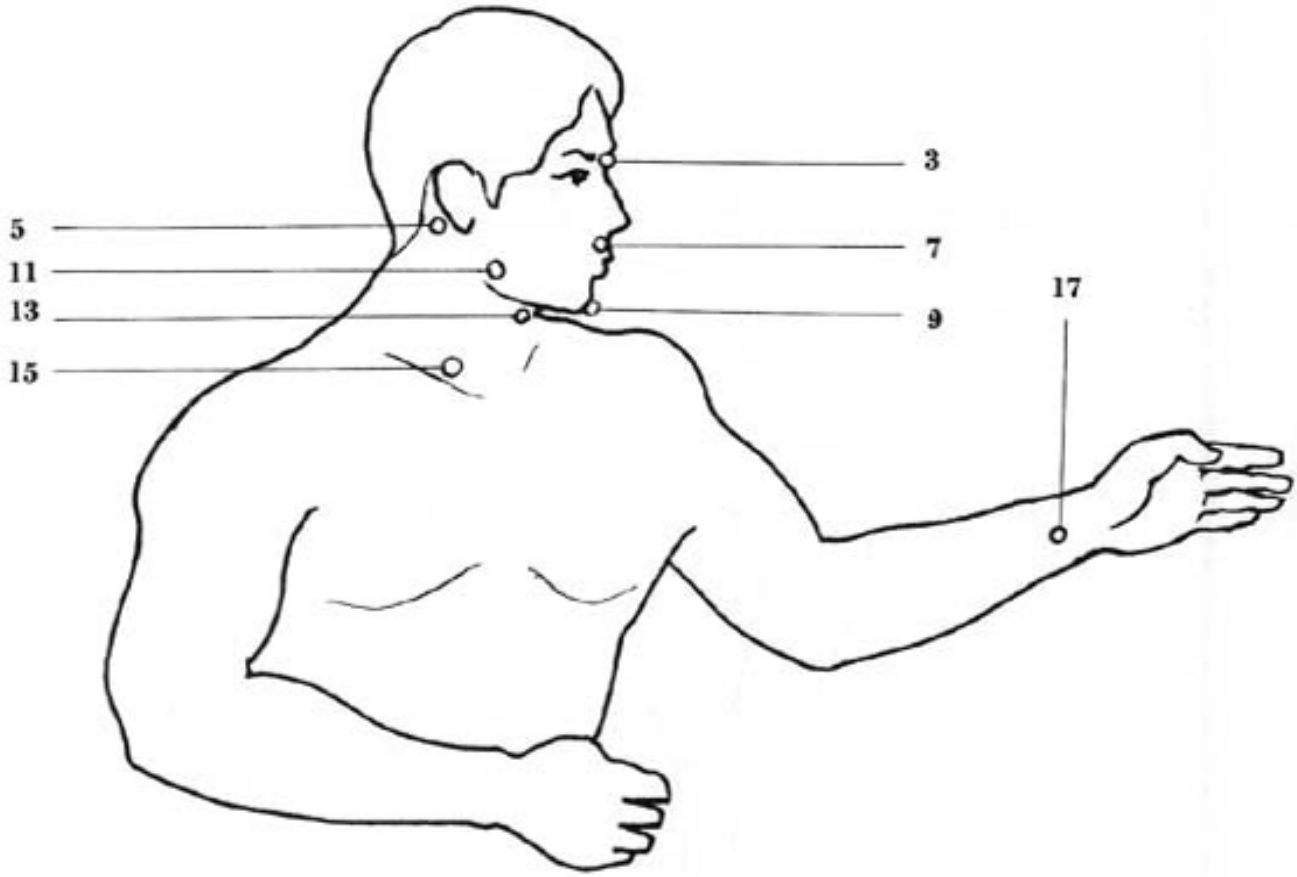
Taekwon-Do training is characterized by its lack of contact. Patterns and many other attack and defence exercises are practised alone against an imaginery opponent. Even sparring is conducted without actually striking or grasping an opponent's body. Under these circumstances it would be extremely difficult, if not impossible, to specify the particular vital spot to be attacked. Furthermore, it would be almost impossible to standardize the location of the hand or foot of the student for attack or defence. To alleviate these problems, the human body has been imaginarily divided into three sections: the high, above the neck; the middle, between the shoulders and umbilicus; and the low, below the umbilicus.

Within these areas are a number of vital spots. In each area, the most accessible vital spot is used to categorize each section: i.e. philtrum for high, solar plexus for middle, and groin for low.

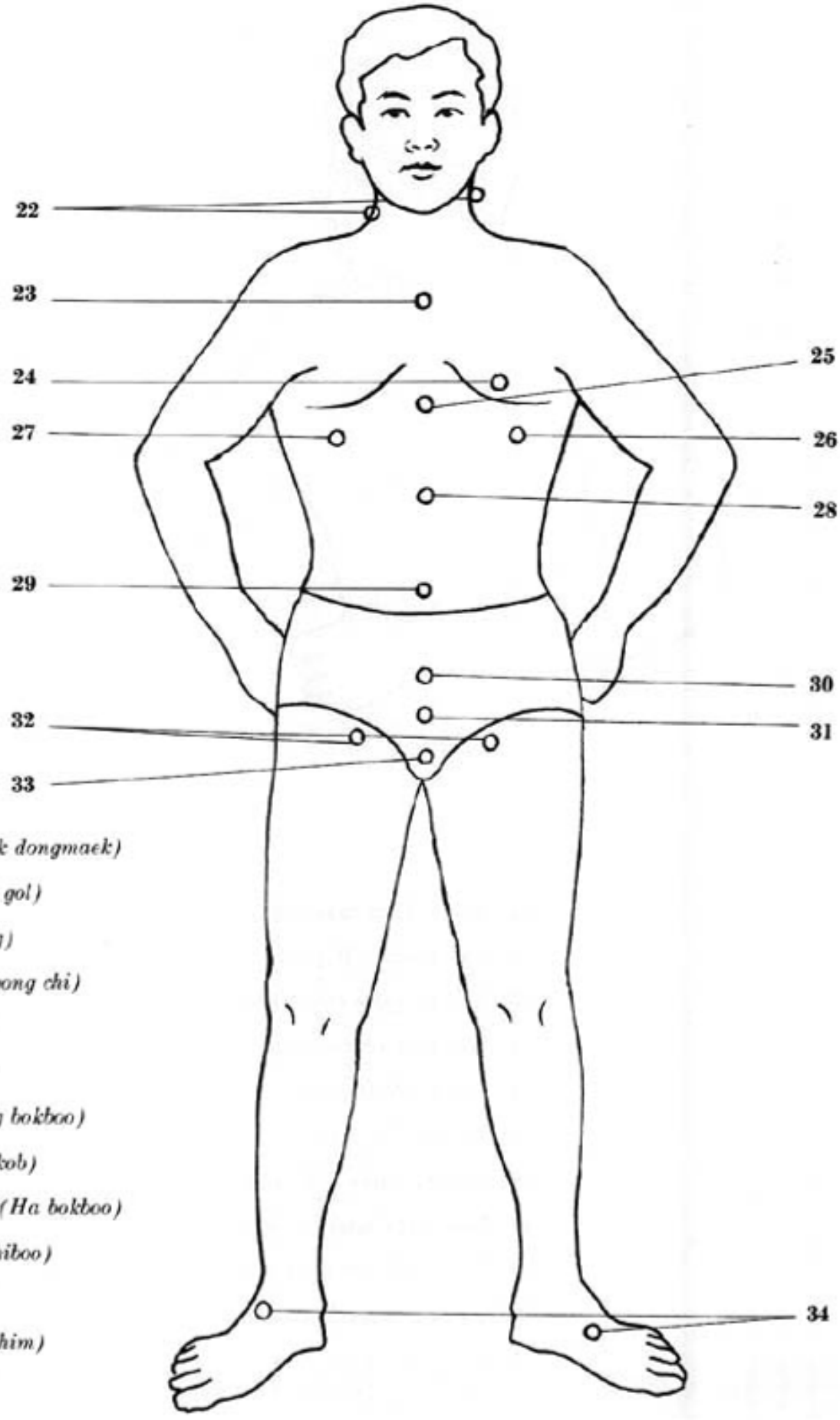




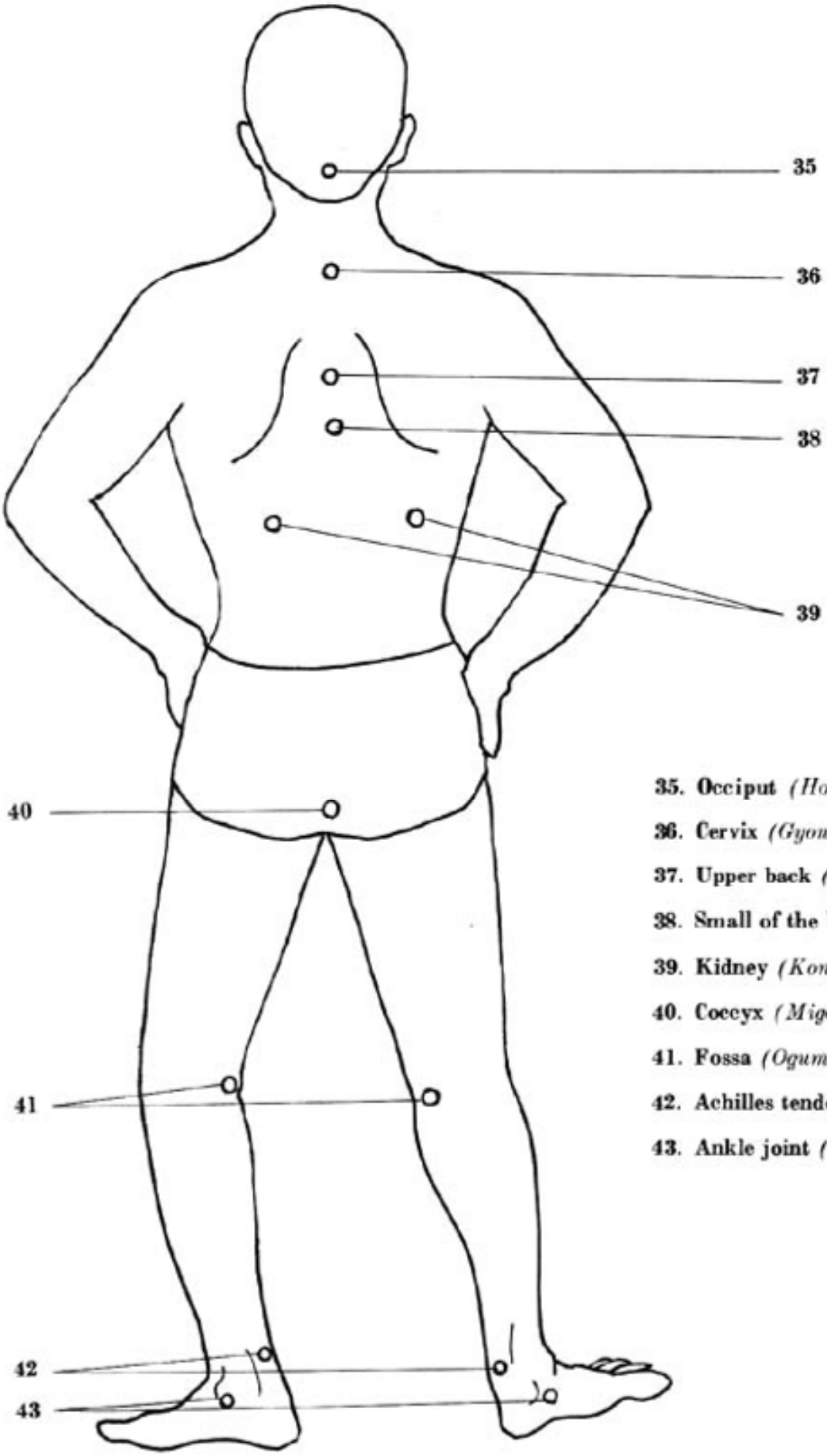
1. **Skull** *(Dae sin moon)*
2. **Temple** *(Gwanja nori)*
3. **Bridge of the nose** *(Migan)*
4. **Eyeball** *(Angoo)*
5. **Mastrid** *(Hoo-i-boo)*
6. **Mandibula** *(Tok gwanjol)*
7. **Philtrum** *(Injoong)*
8. **Jaw** *(Yop tok)*
9. **Point of the chin** *(Mit tok)*
10. **Lips** *(Ipsul)*



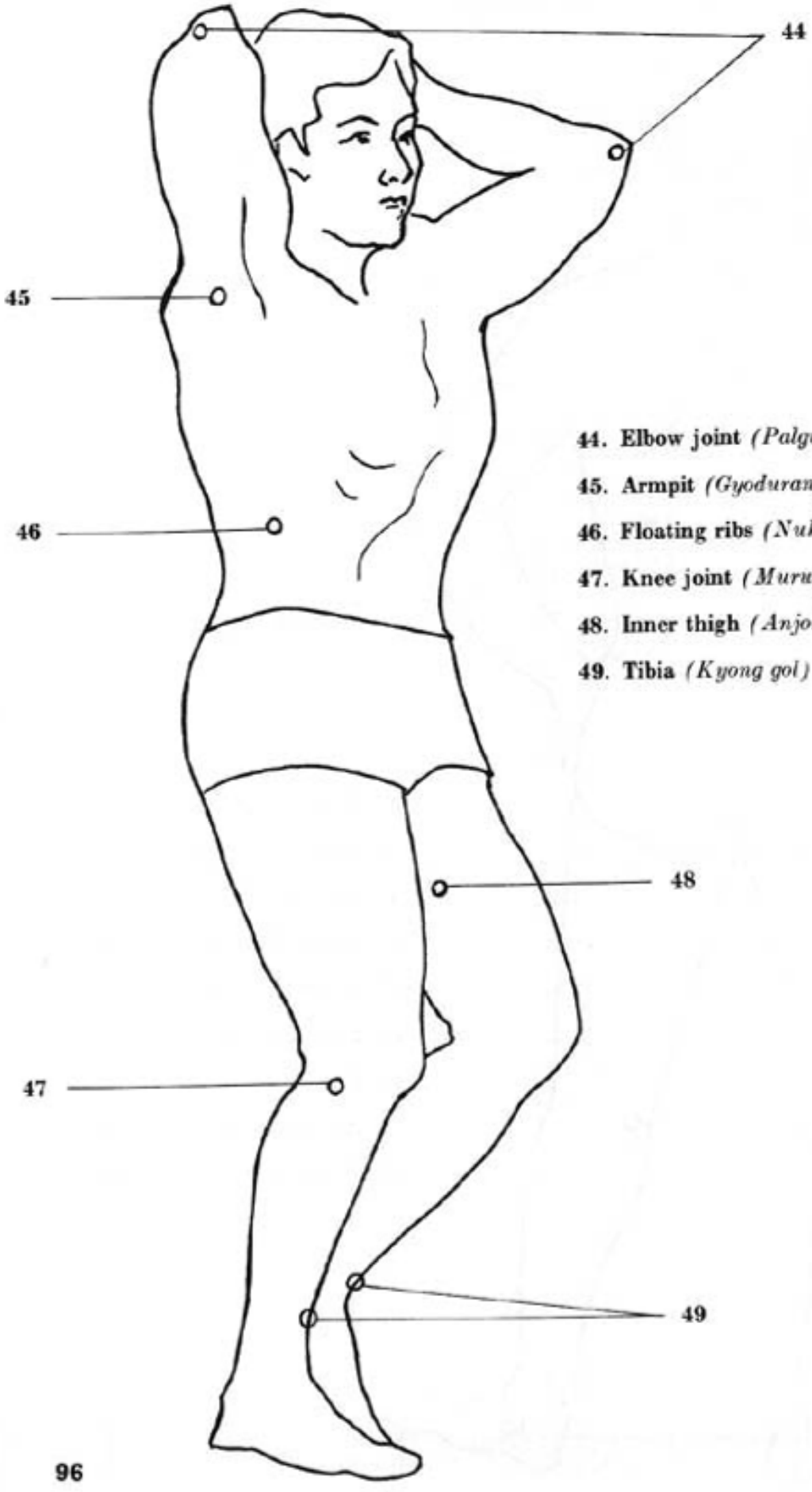
11. **Angle of the mandible** *(Wit tok)*
12. **Upper neck** *(Witmok)*
13. **Adam's apple** *(Gyol hoo)*
14. **Windpipe** *(Soom tong)*
15. **Clavicle** *(Swe gol)*
16. **Thenar** *(Umjigoo)*
17. **Radical artery** *(Maekbak sonmok dongmaek)*
18. **Back wrist artery** *(Dung sonmok dongmaek)*
19. **Wrist joint** *(Sonmok gwanjol)*
20. **Shoulder joint** *(Eukke gwanjol)*
21. **Nose** *(Kotdung)*



22. Neck artery *(Mok dongmaek)*
23. Sternum *(Hyung gol)*
24. Heart *(Shim jang)*
25. Solar plexus *(Myong chi)*
26. Spleen *(Bi jang)*
27. Liver *(Gan jang)*
28. Epigstrium *(Sang bokboo)*
29. Umbilicus *(Baekkob)*
30. Lower Abdomen *(Ha bokboo)*
31. Pubic region *(Chiboo)*
32. Groin *(Sataguni)*
33. Scrotum *(Nang shim)*
34. Instep *(Baldung)*



35. **Occiput** *(Hoodoo)*
36. **Cervix** *(Gyong boo)*
37. **Upper back** *(Gyon gap)*
38. **Small of the back** *(Gyong chu)*
39. **Kidney** *(Kongpat)*
40. **Coccyx** *(Migol)*
41. **Fossa** *(Ogum)*
42. **Achilles tendon** *(Dwichuk himjool)*
43. **Ankle joint** *(Balmok gwanjol)*



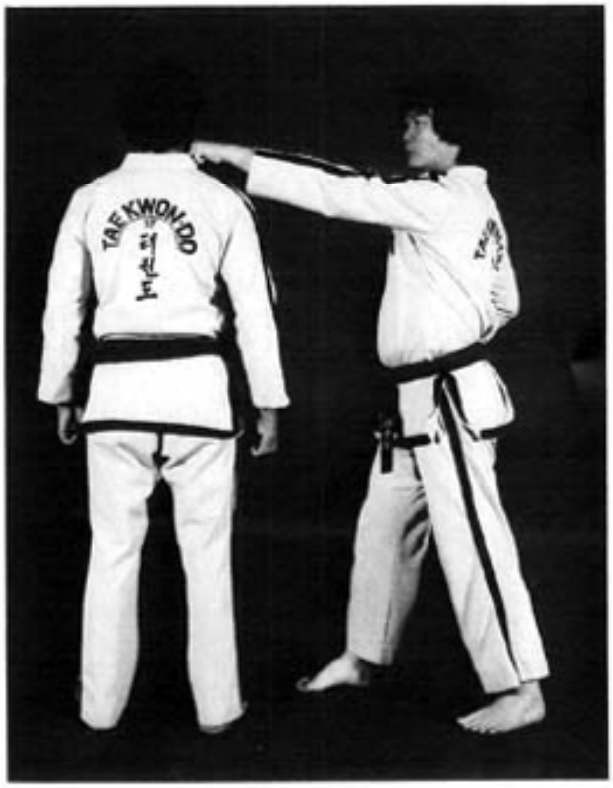
44. **Elbow joint** *(Palgup gwanjol)*
45. **Armpit** *(Gyodurang)*
46. **Floating ribs** *(Nuk gol)*
47. **Knee joint** *(Murup gwanjol)*
48. **Inner thigh** *(Anjok hobok dari)*
49. **Tibia** *(Kyong gol)*

CHECK LIST *(Daejo Pyo)*

The various check lists shown in this chapter should help the student to use the correct attacking tool against the proper target. The relationship between attacking tools and vital spots, and blocking tools and the portions to be blocked are specifically illustrated.

In Taekwon-Do, the uses of the attacking tools against the vital spots are decided on a scientific basis, according to the structure of the human body. If the student knows how and where to use each tool, he or she should be able to achieve the desired result with a minimum of expended energy. If not used correctly, however, the result may be analogous to a carpenter using a hammer instead of a saw for cutting or a chisel instead of a plane for smoothing wood.

It is more effective to attack a vital spot with an appropriate tool.



It is less effective to attack a vital spot with an inappropriate tool.

Forefinger is more effective than the forefist.

Forefist is less effective than a forefinger.

Appropriate tool is used.

Inappropriate tool is used.

Appropriate tool is used.

Inappropriate tool is used.

Appropriate tool is used.

INCORRECT

The ball of the foot is less effective than a footsword.

Block is made at a proper position with an appropriate blocking tool.

INCORRECT

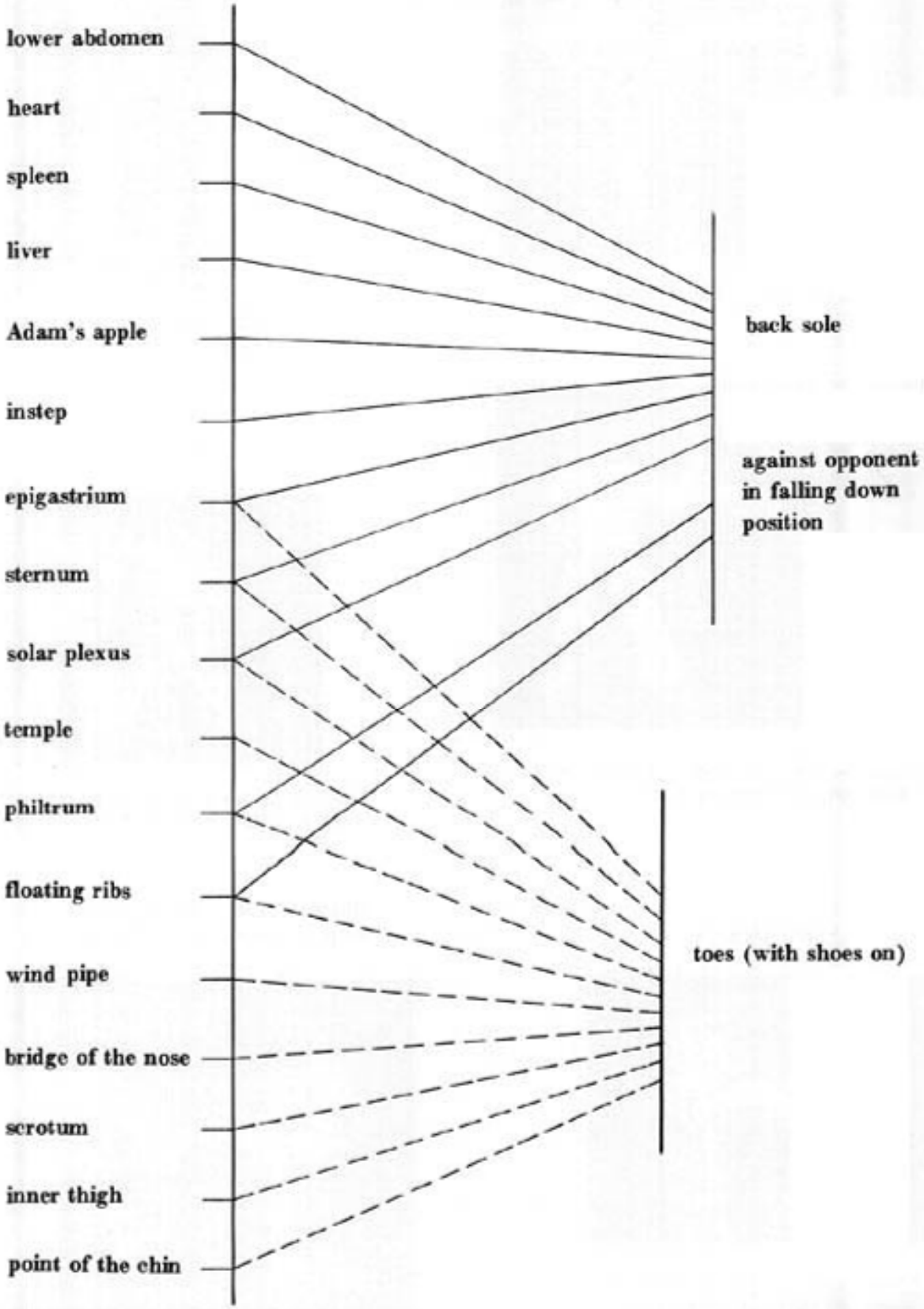
Block is made at an improper position. As a result the defender is attacked.

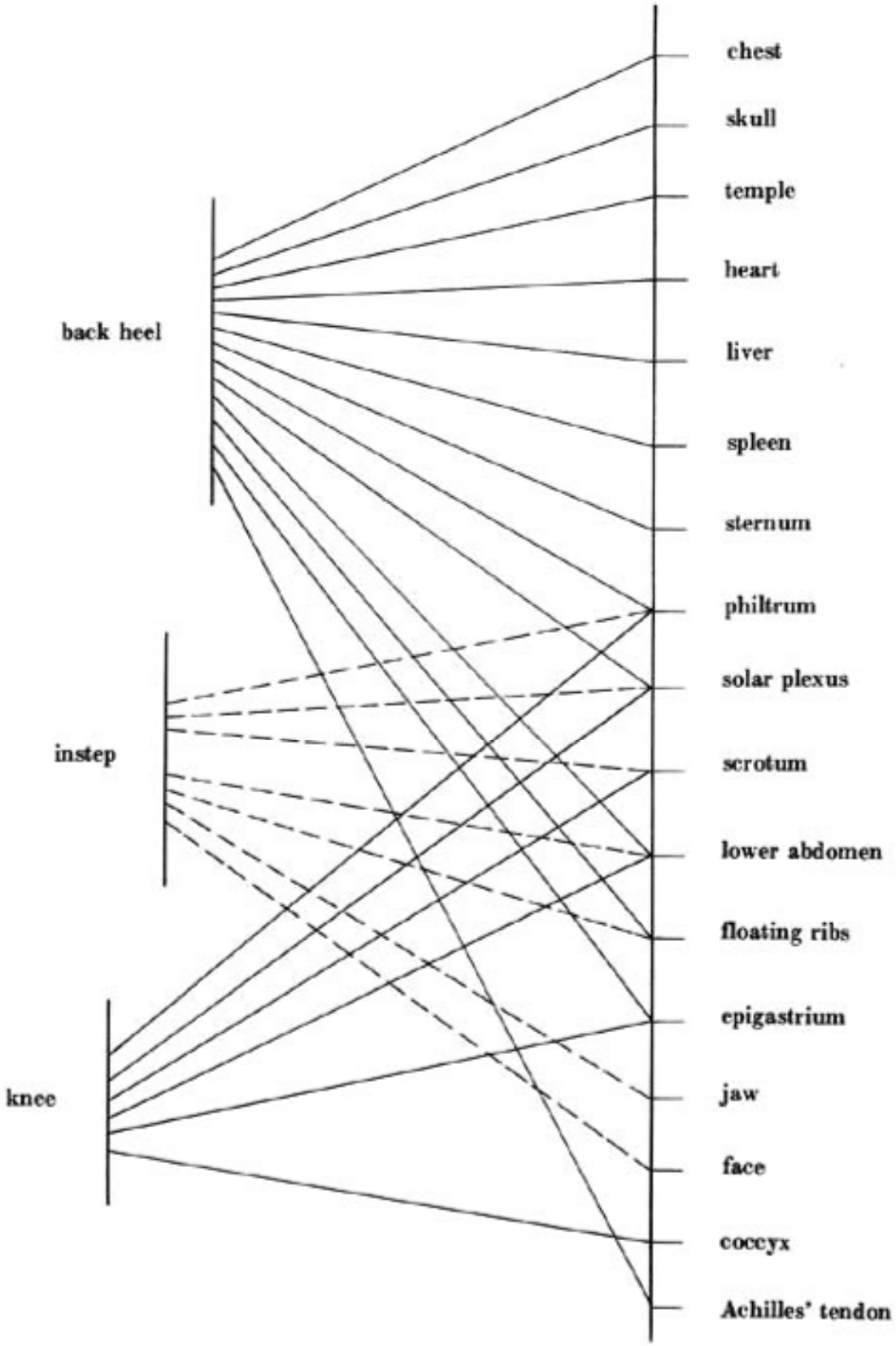
INCORRECT

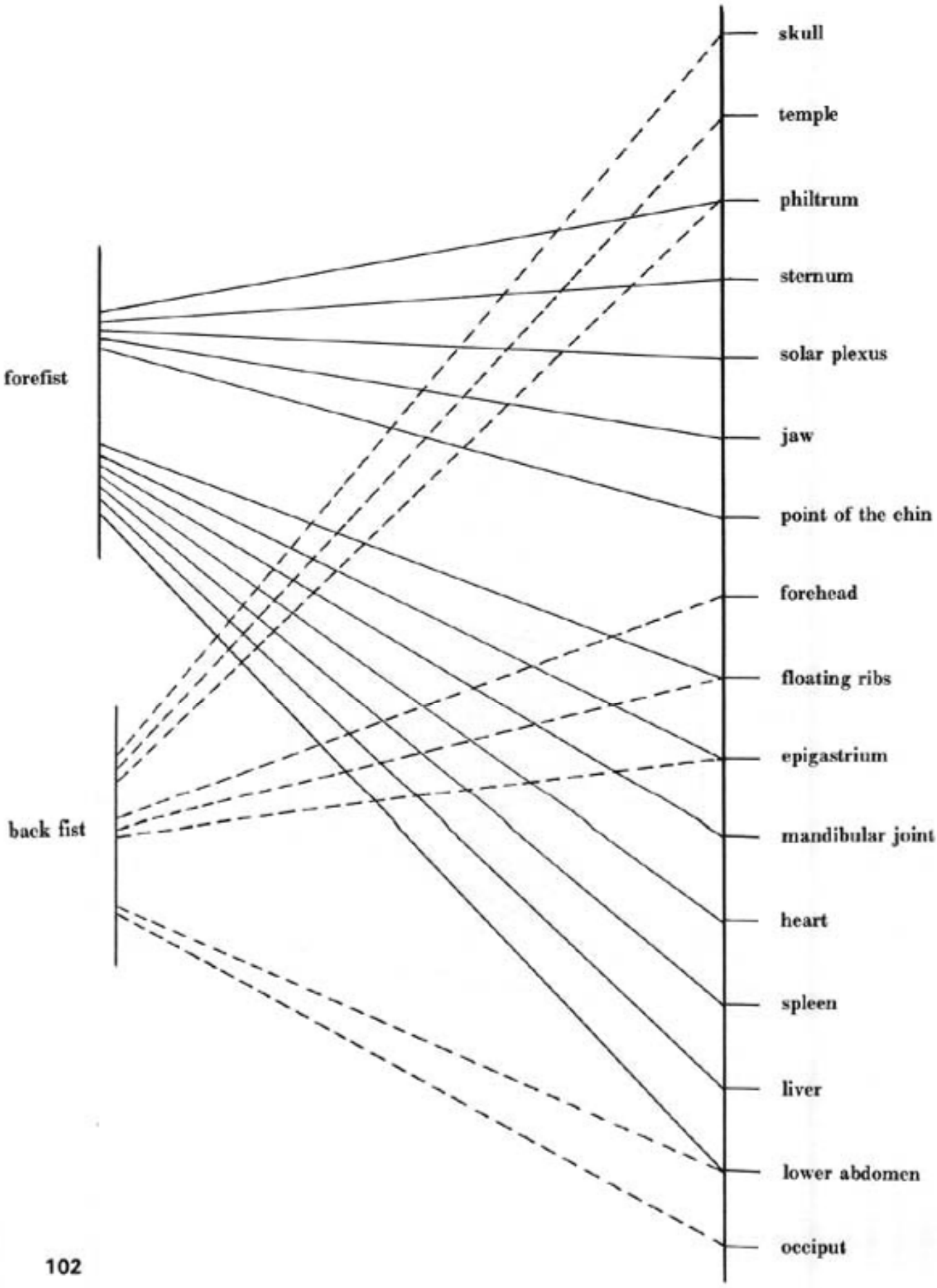
Block with an inappropriate tool; defender became off-balanced.

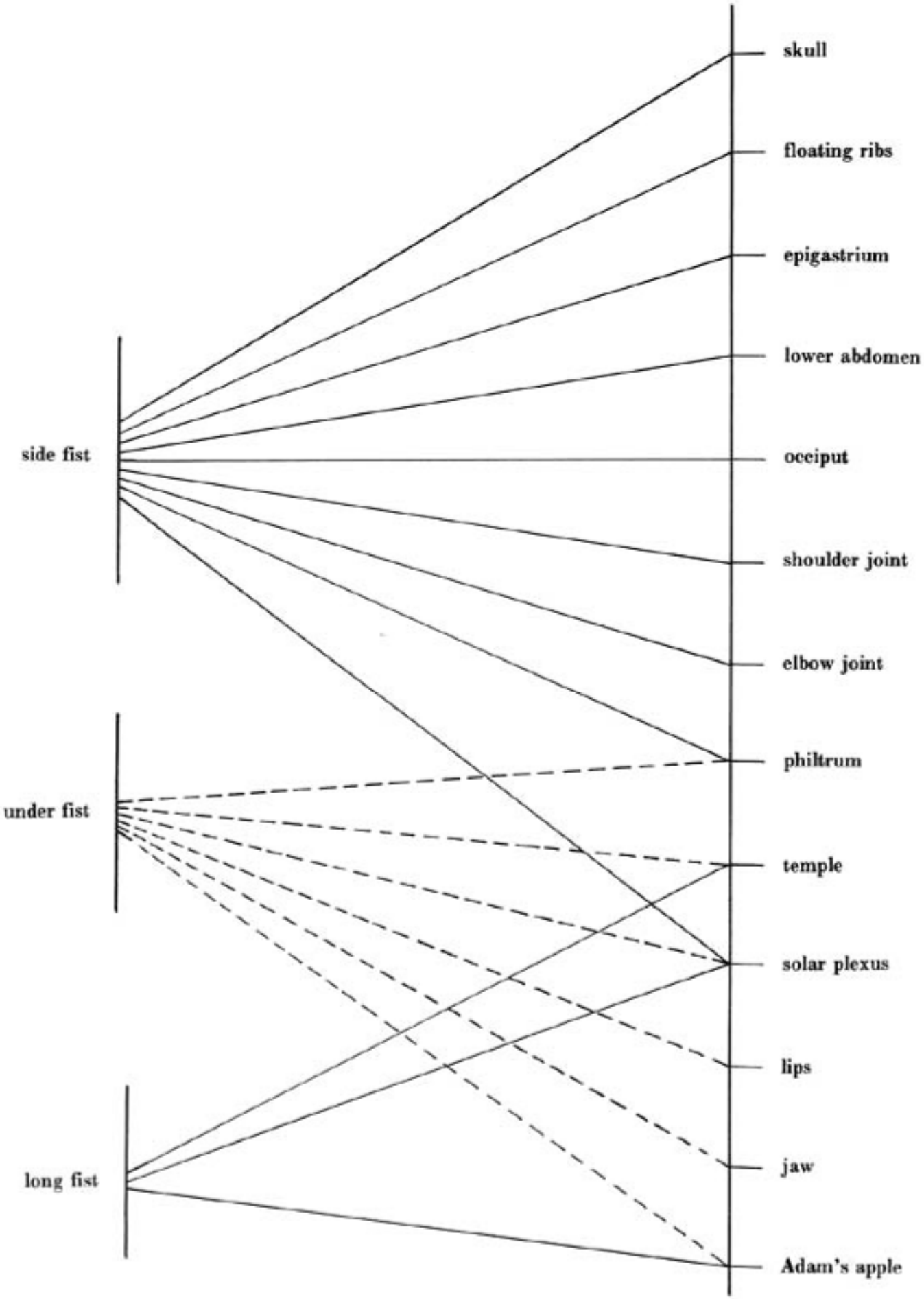
Block is executed at a proper position with an appropriate blocking tool.

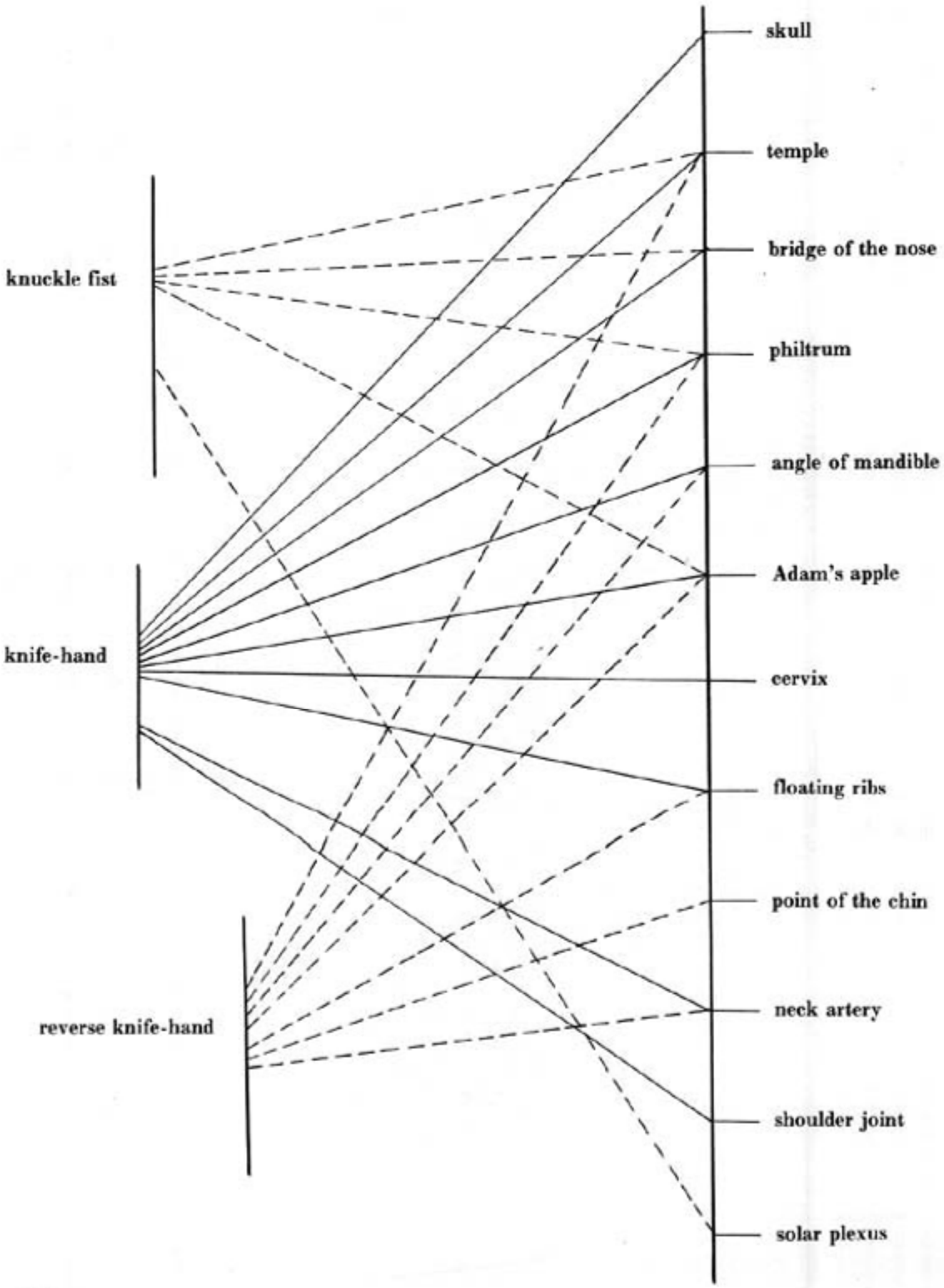
RELATION OF ATTACKING TOOL AND VITAL SPOTS

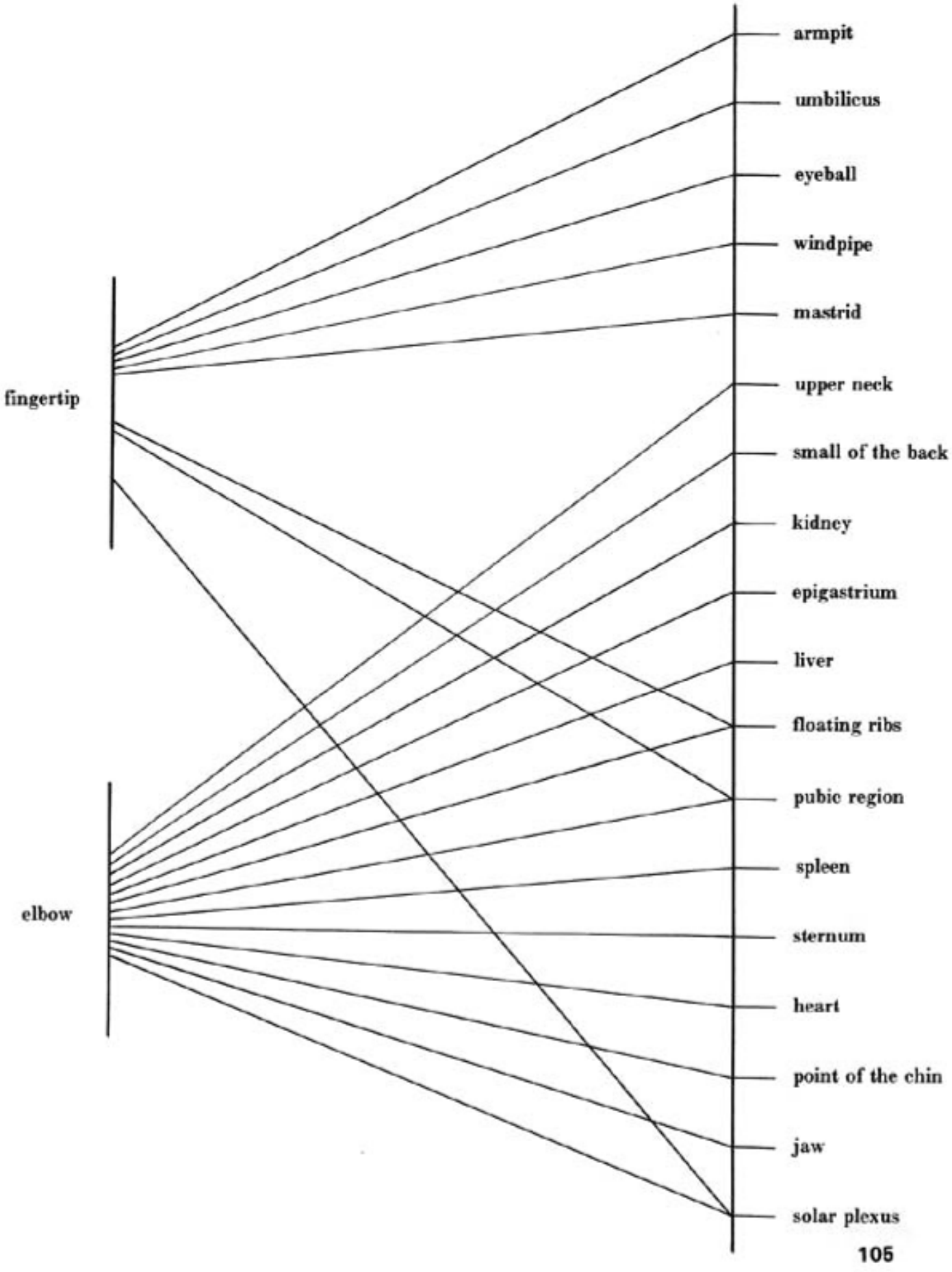


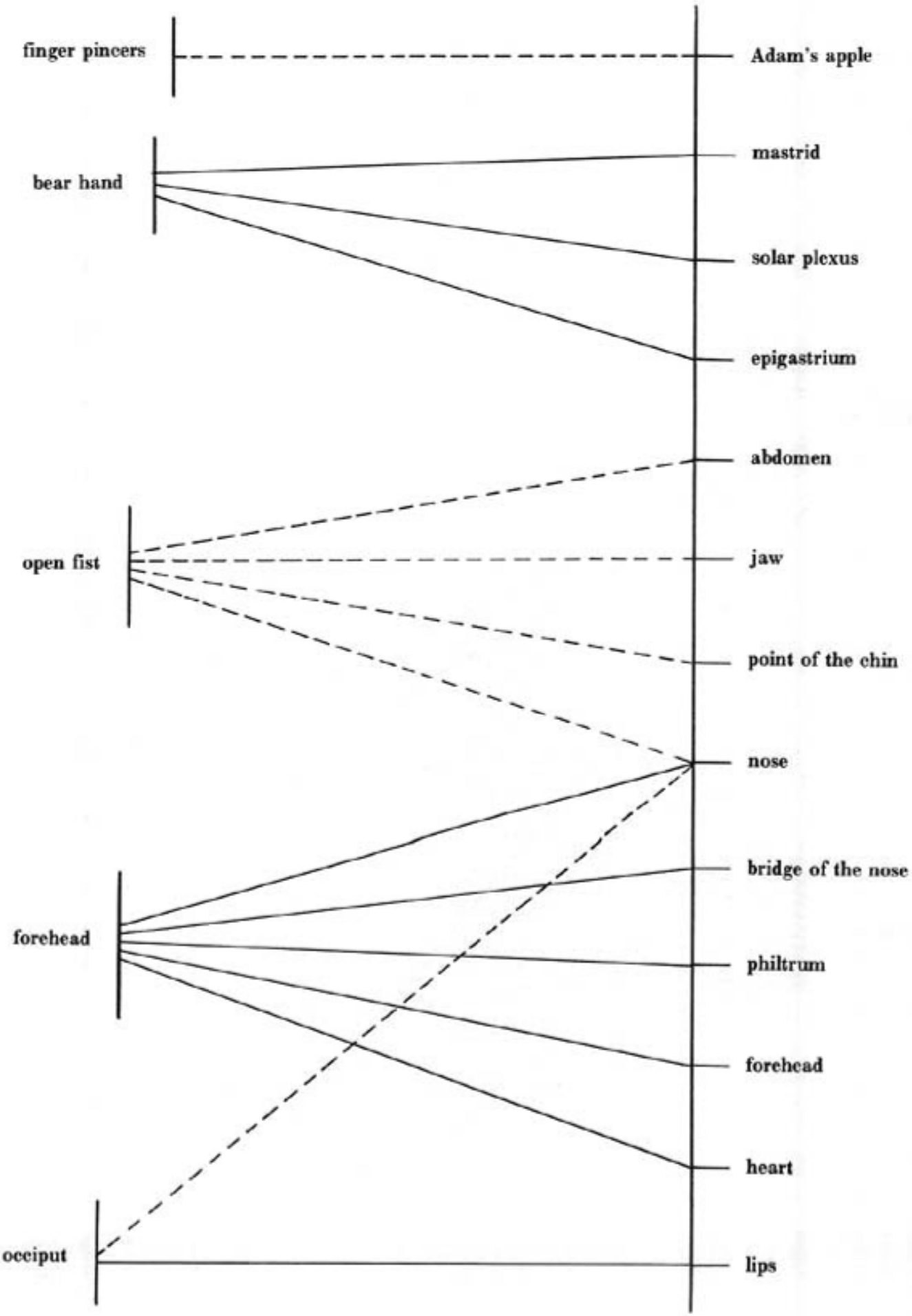


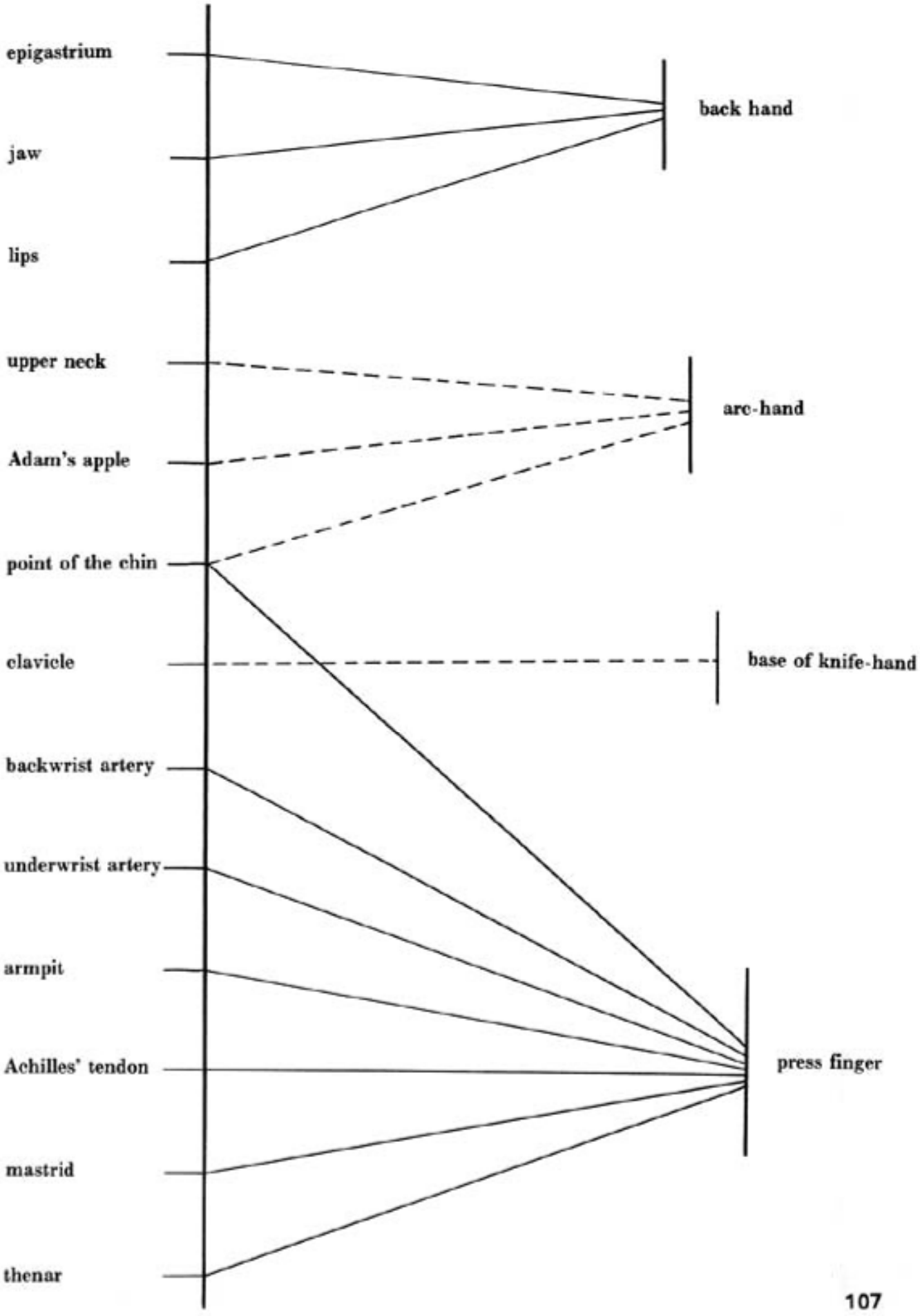


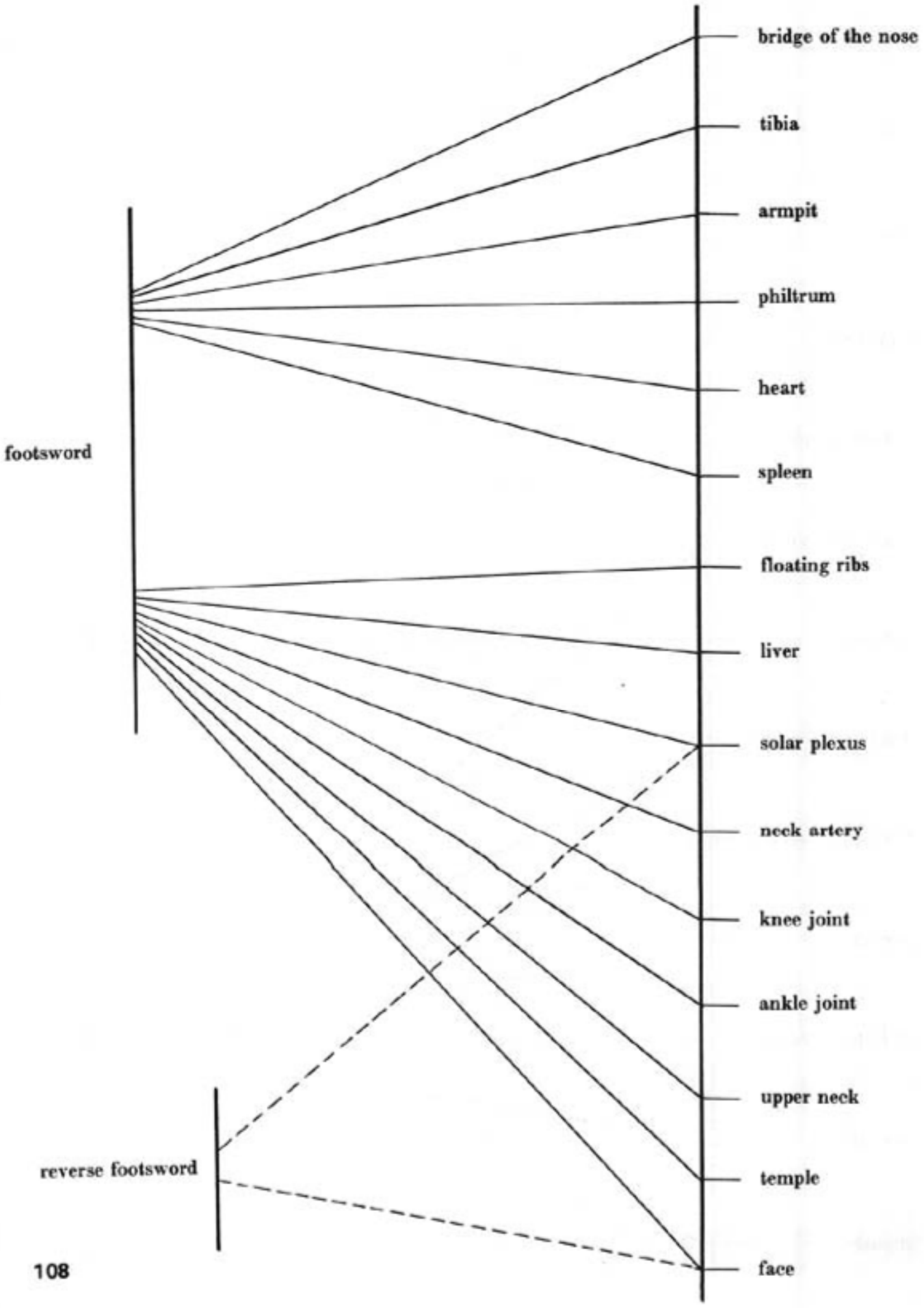


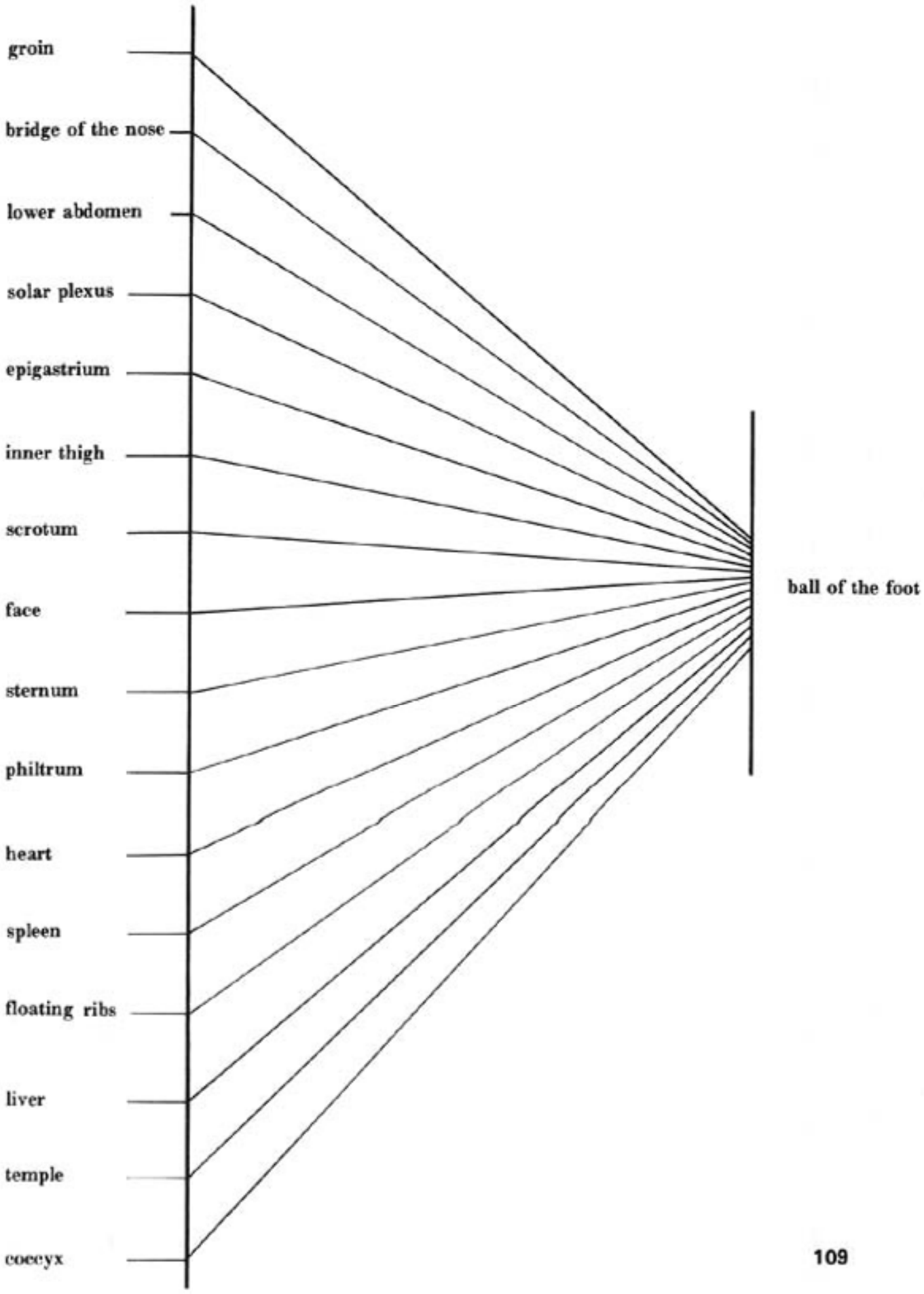












RELATION OF BLOCKING TOOL AND PORTION TO BE BLOCKED