At the start of a laparoscopy, the liver to the right of the falciform ligament may be viewed broadly over its surface.

Peering above the right position of the liver, the posterior positions of segments VIII and IVa and the undersurface of the right diaphragm may be seen.
By lifting up the lower edge of the liver, the main liver blood vessels, the bile duct and the gallbladder may be seen.
Just below the liver in a thin patient, the bend of the colon near the liver, duodenum, and the pancreatic head may be seen.
Just to the left of the falciform ligament, liver segments II and III are easily visualized in most patients.
By lifting up segments II and III of the liver, the smallest lobe of the liver (segment I) may often be seen in thin patients.

Just below to the bend of the colon near the spleen, the start of the small intestine and the main vessels of the left colon are seen.
The bend of the colon near the spleen may be seen by lifting the omentum towards the head. In this thin patient, many of the main colon vessels, the kidney and the pancreas are seen.
By retracting the small bowel to the right side of the abdomen, the attachments of the sigmoid colon and the main vessels of the left colon may be seen.

During the surgical mobilization of the sigmoid colon, the relationships of the gonadal vessels to the testicles and the ureter are appreciated.
During a surgical dissection of the origin of the main left colon artery, the relationships of the hypogastric nerves (for sexual function) and the aorta are appreciated.
With a patient in the head-down position and the right side tilted upward, the end of the ileum (near appendix), cecum, and ligament of trieves may all be visualized.
The major vascular structures of the right colon may be appreciated through the fatty tissues of the right colon along with the right kidney and duodenum, with the small bowel retracted inferiorly and to the left.

As the right colon is mobilized, the structures behind the colon and its mesentery (fatty tissue) are well seen.
In thin patients, the vessels of the transverse colon and major structures in this region may be seen.
In the left inguinal region (groin) from the inside, the relationships of the gonadal vessels to the testicles, vas deferens, and the major vessels exiting to the left leg are well appreciated during laparoscopy.

A broad view of the pelvis is seen during laparoscopy in a woman.
Lifting up on the right fallopian tube and ovary permits appreciation of the relationships of these structures to the pelvis.

After complete mobilization of the rectum, the laparoscopic view affords excellent appreciation of some of the deep pelvic structures (mainly muscles of the pelvic floor).