



In the name of GOD

Musculoskeletal system

For

paramedicine student

By

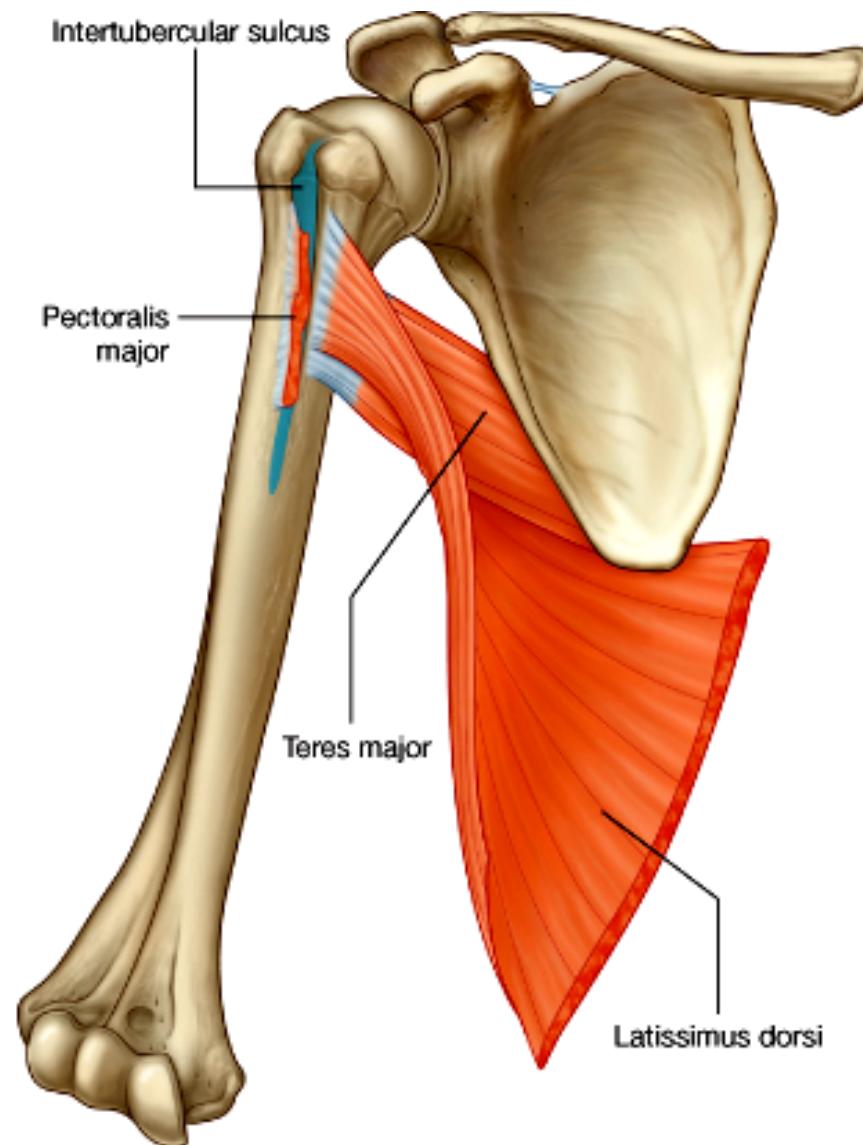
Dr. Saeednia

Anatomy Of Skeletal System

Upper Limb

Shoulder girdle:

- ❖ Consist of scapula & clavicle bones
- ❖ Not articulate with vertebral column
- ❖ 2 clavicles not articulate anteriorly
- ❖ articulation of scapula & humerus is not deep and have motion
- ❖ articulation of clavicle & sternum is small and have motion



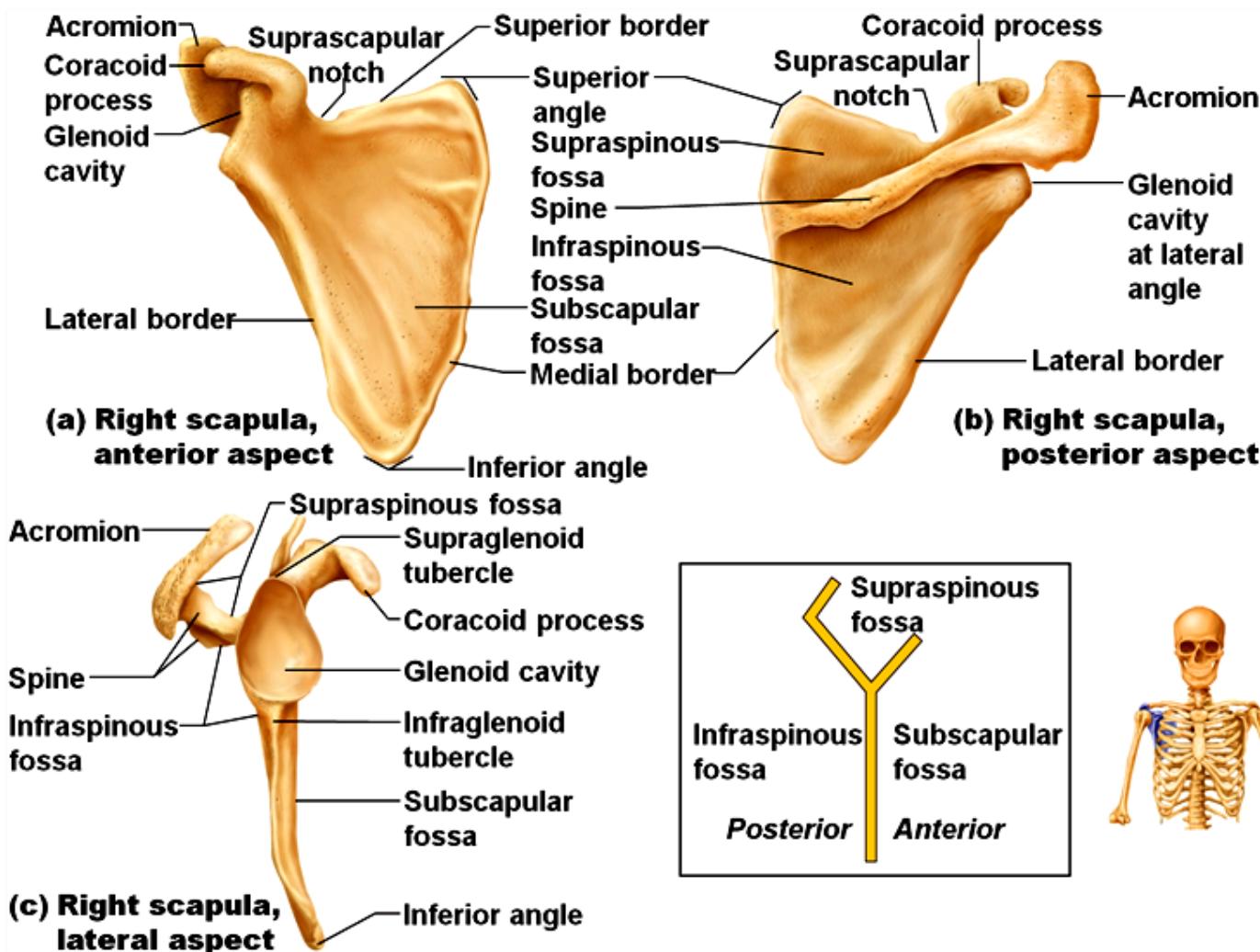
Scapula:

Surfaces: ant./ pos.

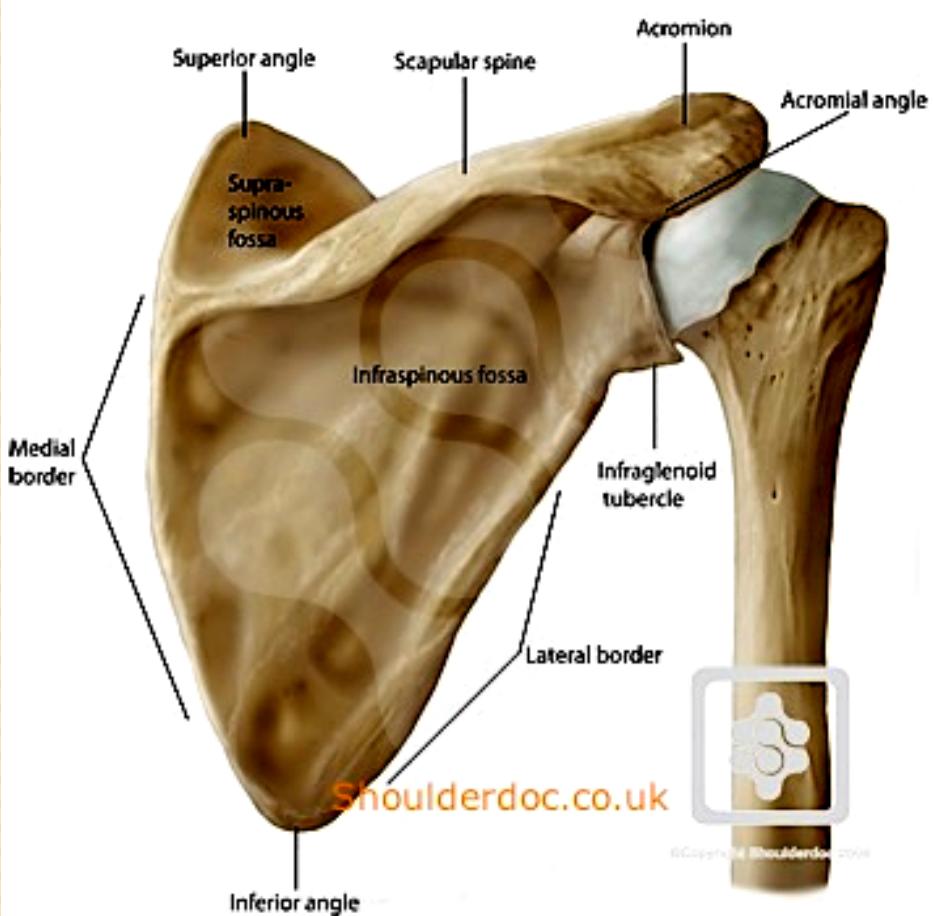
Borders: sup./ med./ lat.

Angles: lat./ sup./ inf.

Process: spinous/ acromion/ coracoid



POSTERIOR VIEW



ANTERIOR VIEW



Clavicle:

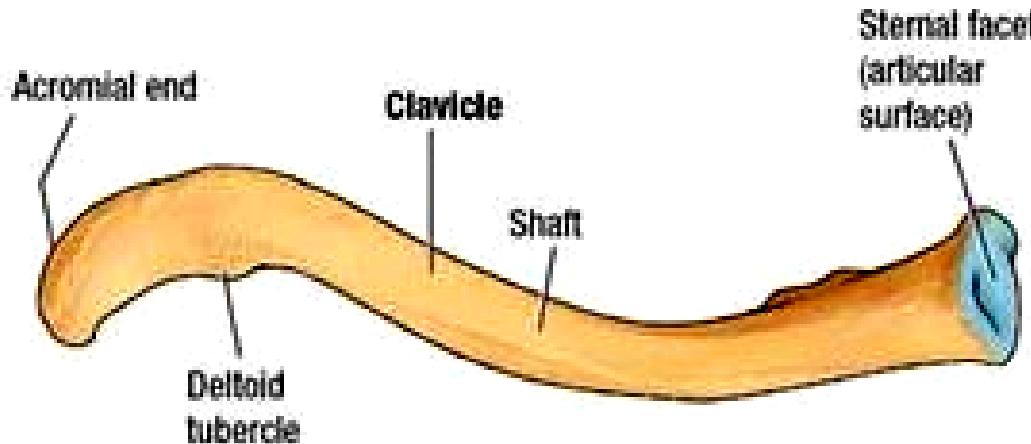
2/3 med.

1/3 lat.

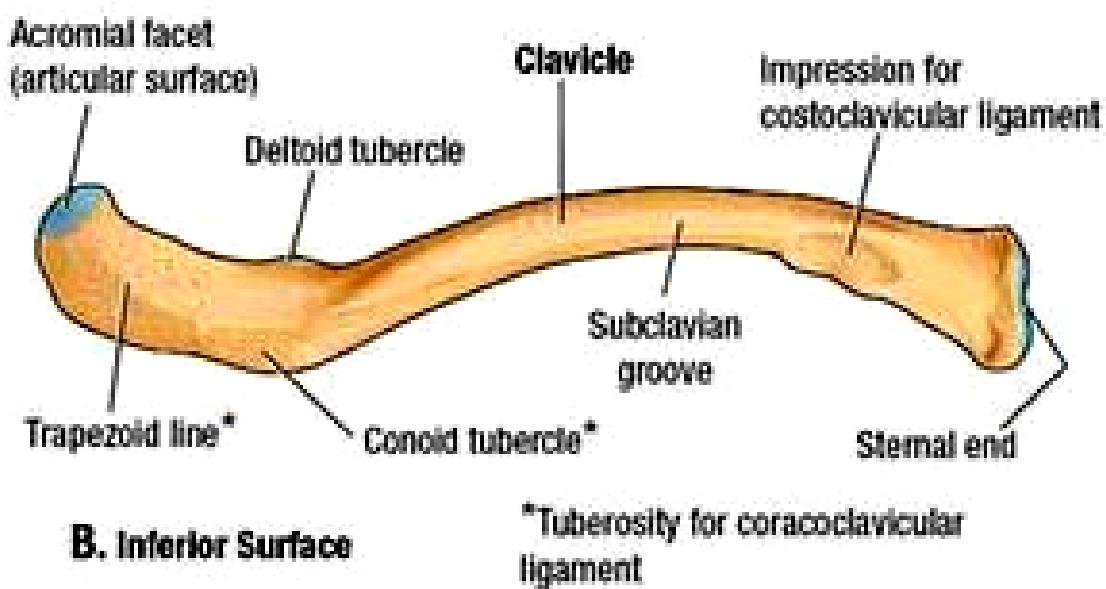
✓ Conoid tubercle

✓ Trapezoid line

✓ Sub clavian groove



A. Superior Surface

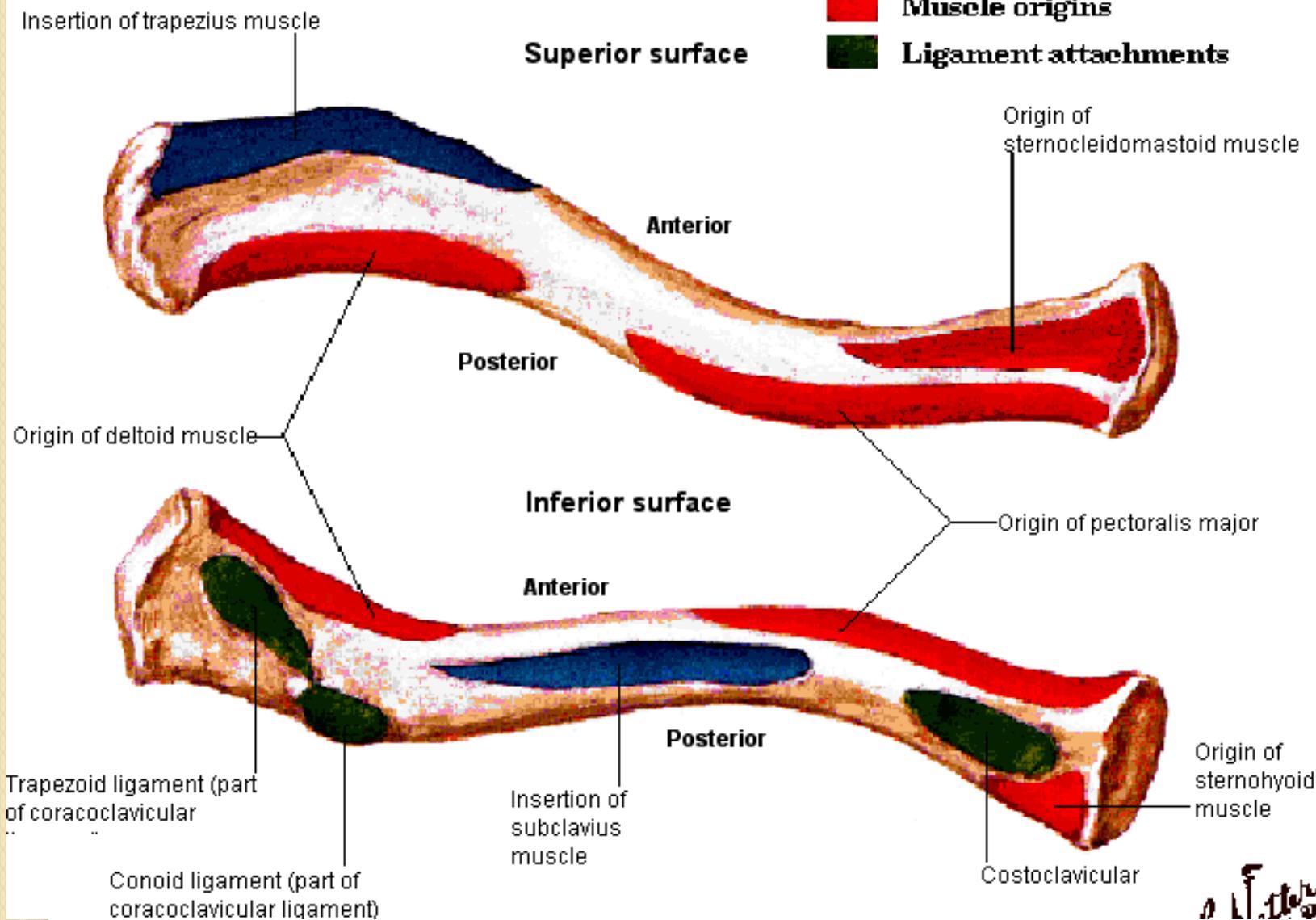


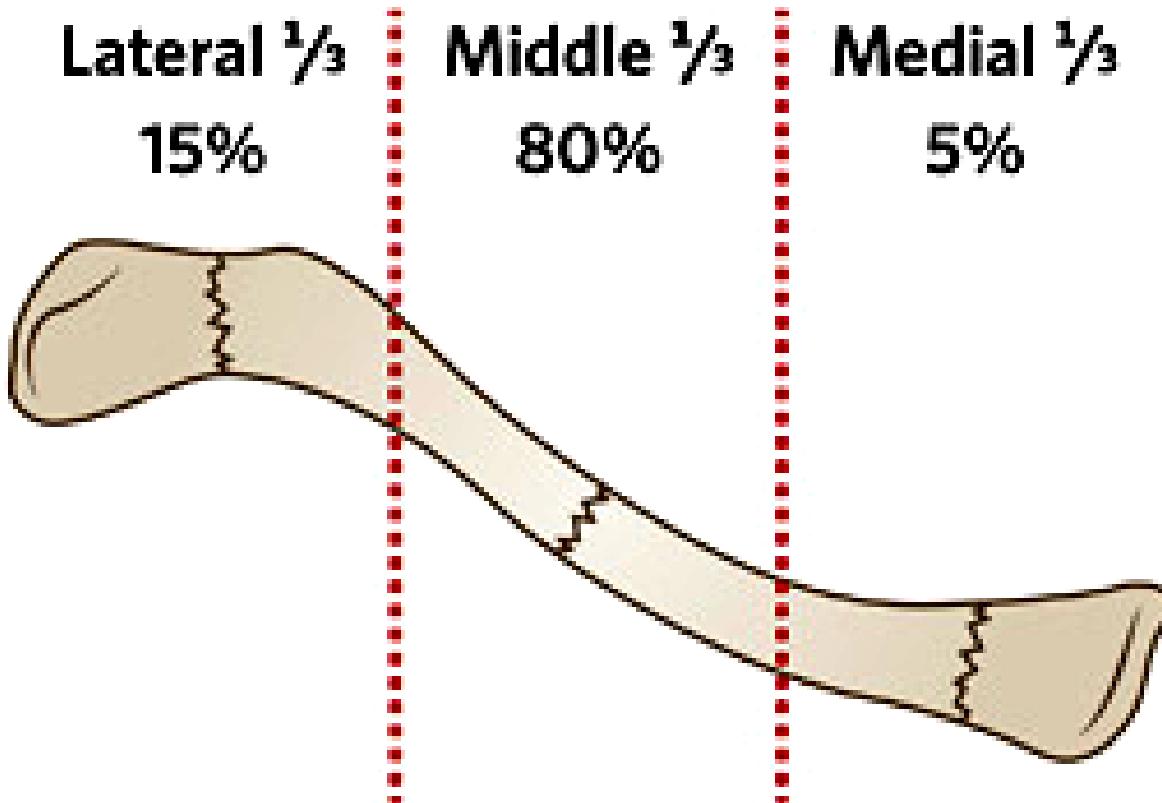
B. Inferior Surface

Right Clavicle - Muscle Attachments

Snapped with HyperSnap-DX
<http://www.hyperionics.com>

- Muscle insertions
- Muscle origins
- Ligament attachments





© The Royal Children's Hospital,
Melbourne, Australia

the clavicle, it is not surprising that it is often fractured. The typical site of fracture is the middle third (Fig. 7.30). The medial and lateral thirds are rarely fractured.

The acromial end of the clavicle tends to dislocate at the acromioclavicular joint with trauma (Fig. 7.31). The outer third of the clavicle is joined to the scapula by the conoid and trapezoid ligaments of the coracoclavicular ligament.

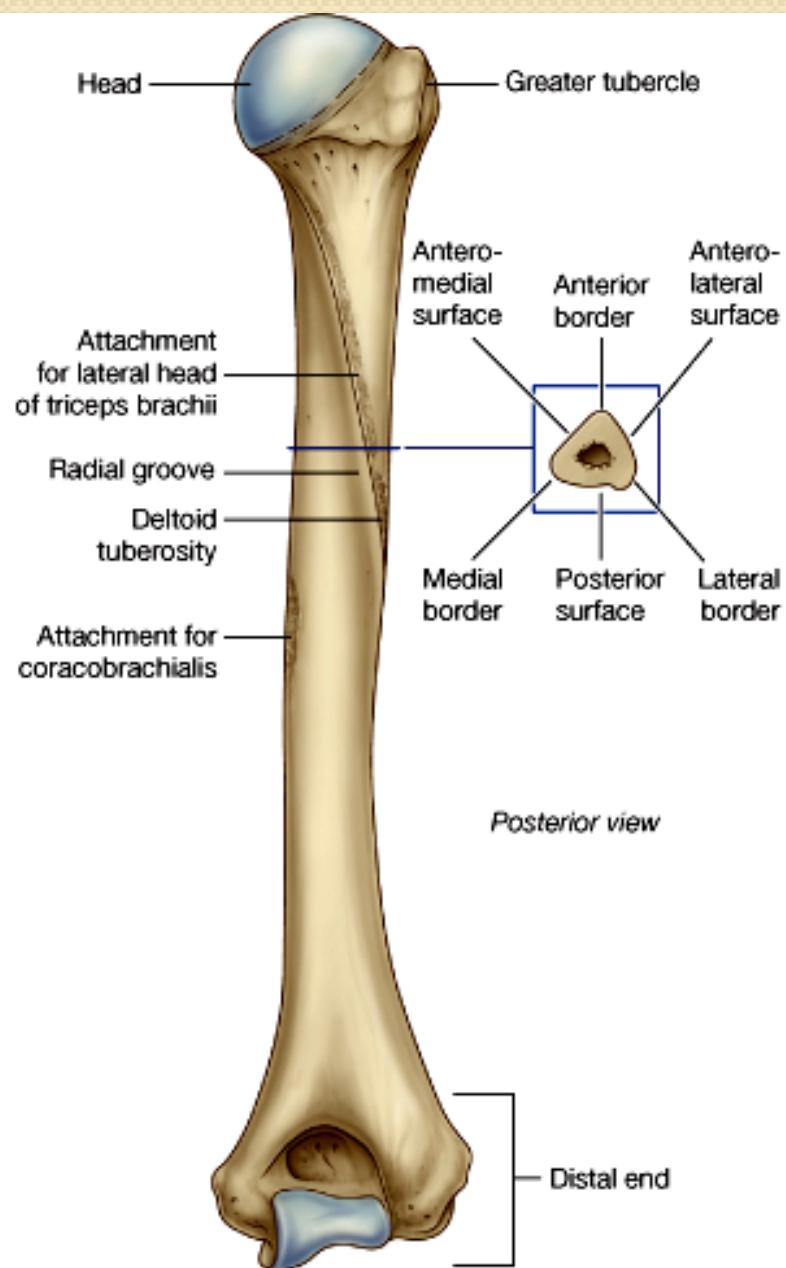
A minor injury tends to tear the fibrous joint capsule and ligaments of the acromioclavicular joint, resulting in acromioclavicular separation on a plain radiograph. More severe trauma will disrupt the conoid and trapezoid ligaments of the coracoclavicular ligament, which results in elevation and upward subluxation of the clavicle.



Fig. 7.30 There is an oblique fracture of the middle third of the right clavicle.



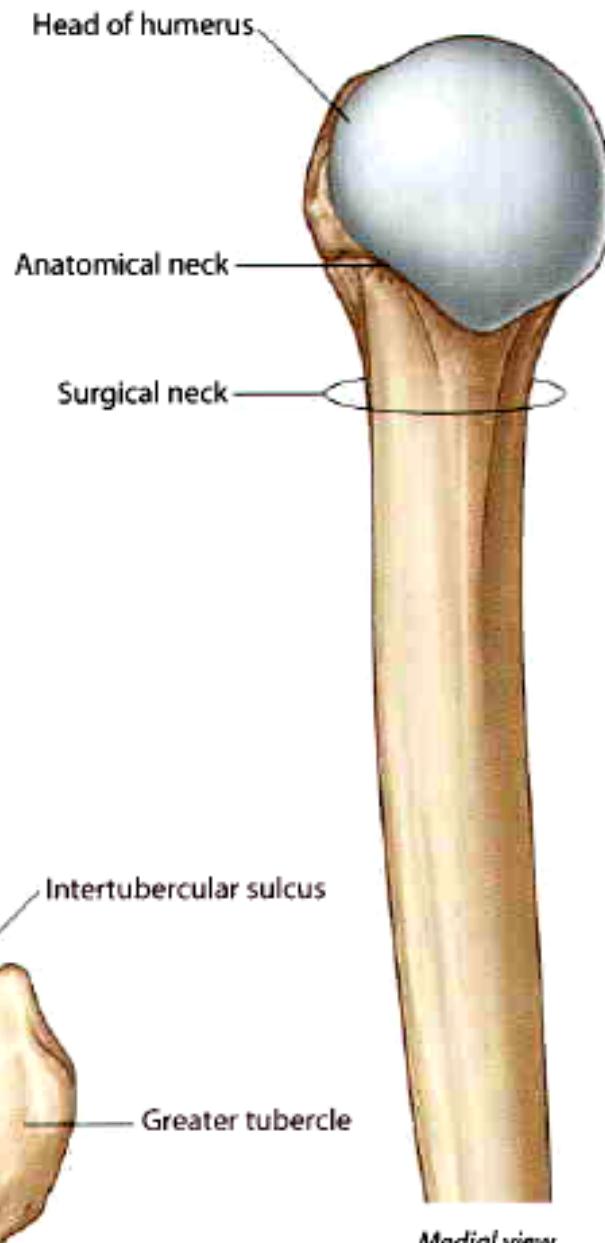
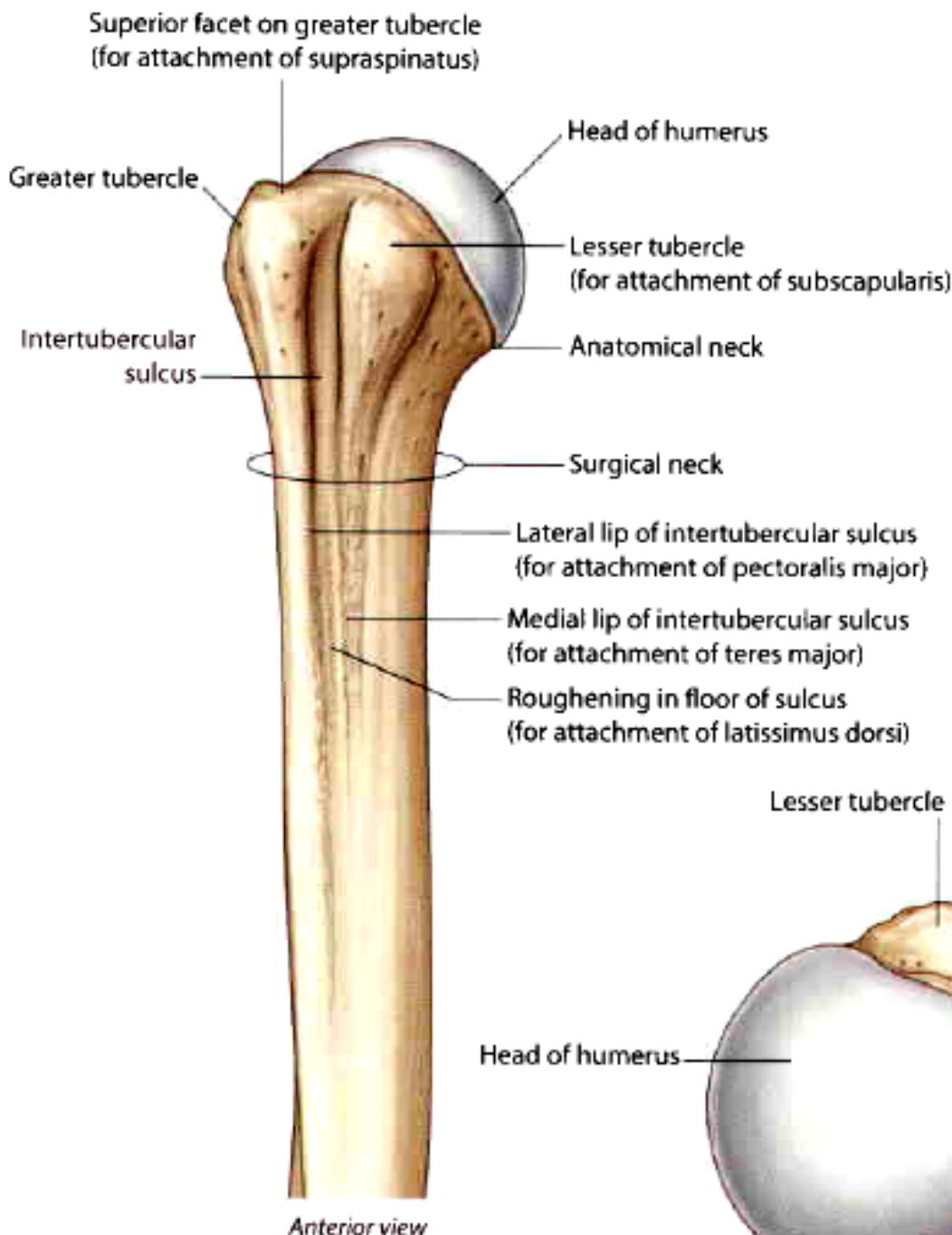
Fig. 7.31 Radiographs of acromioclavicular joints. **A.** Normal right acromioclavicular joint. **B.** Dislocated right acromioclavicular joint.

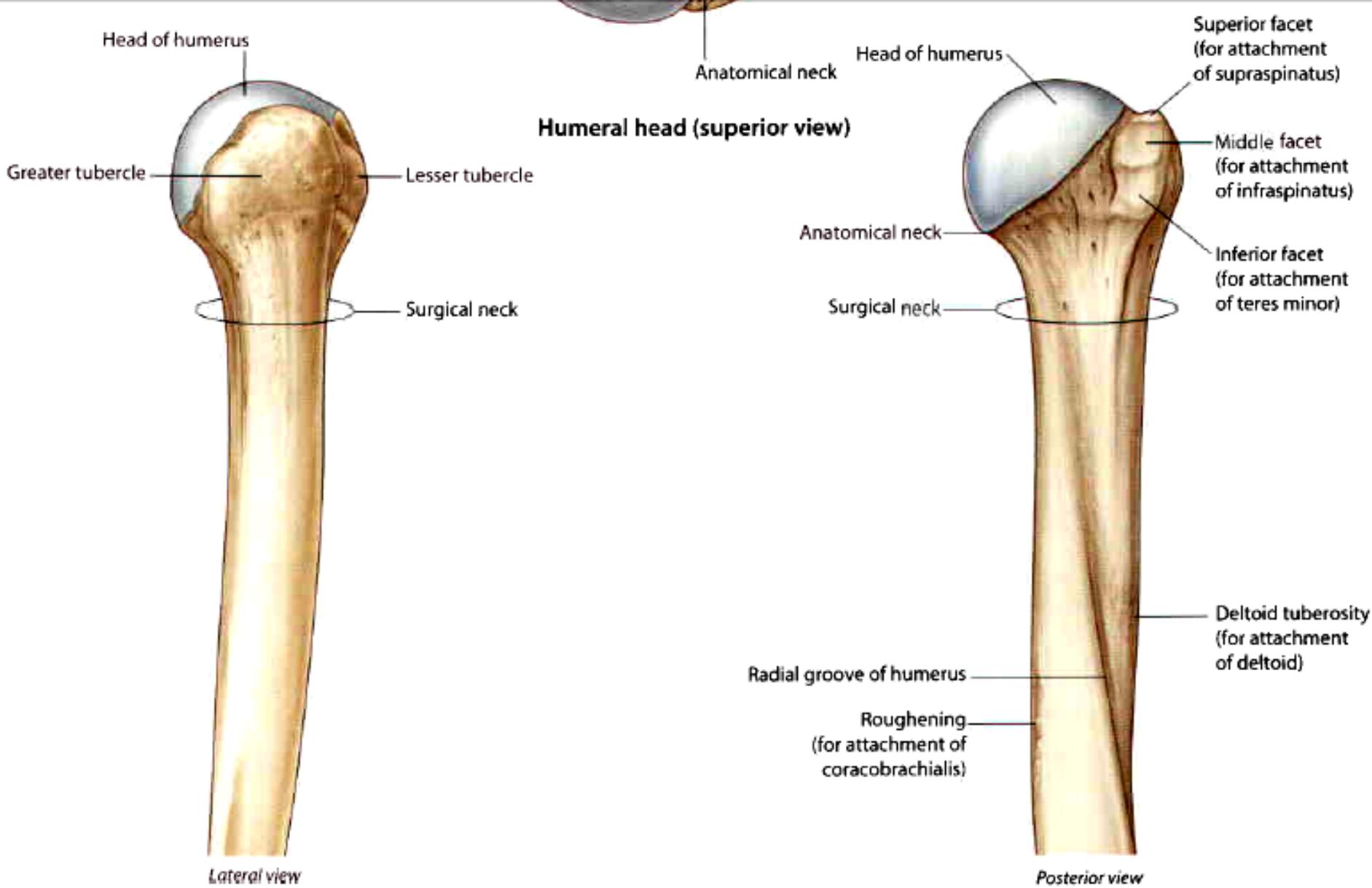


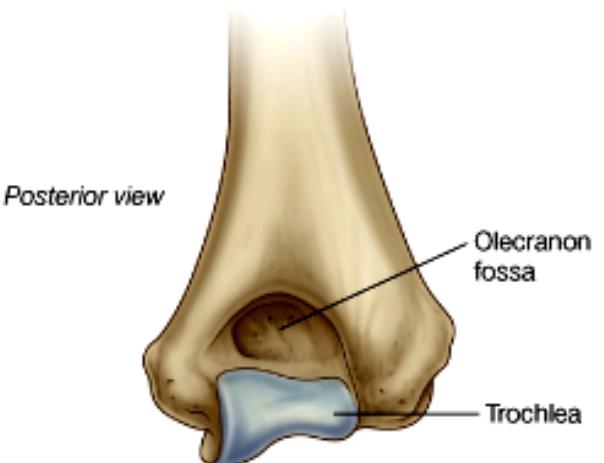
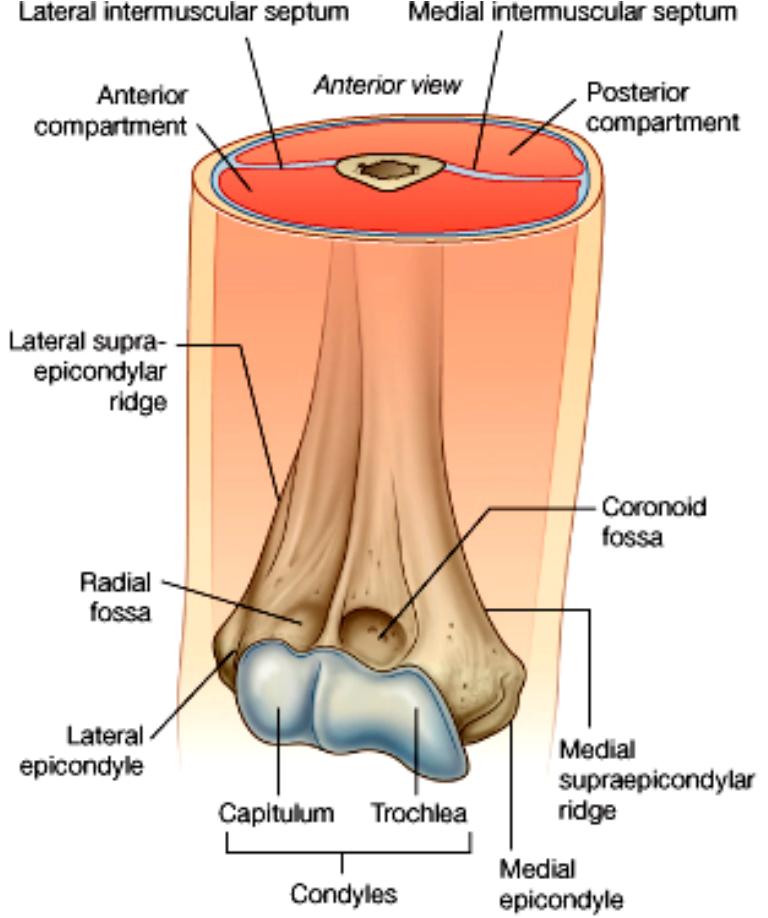
✓ **Humerus:**

upper End
Body (shaft)
Lower End

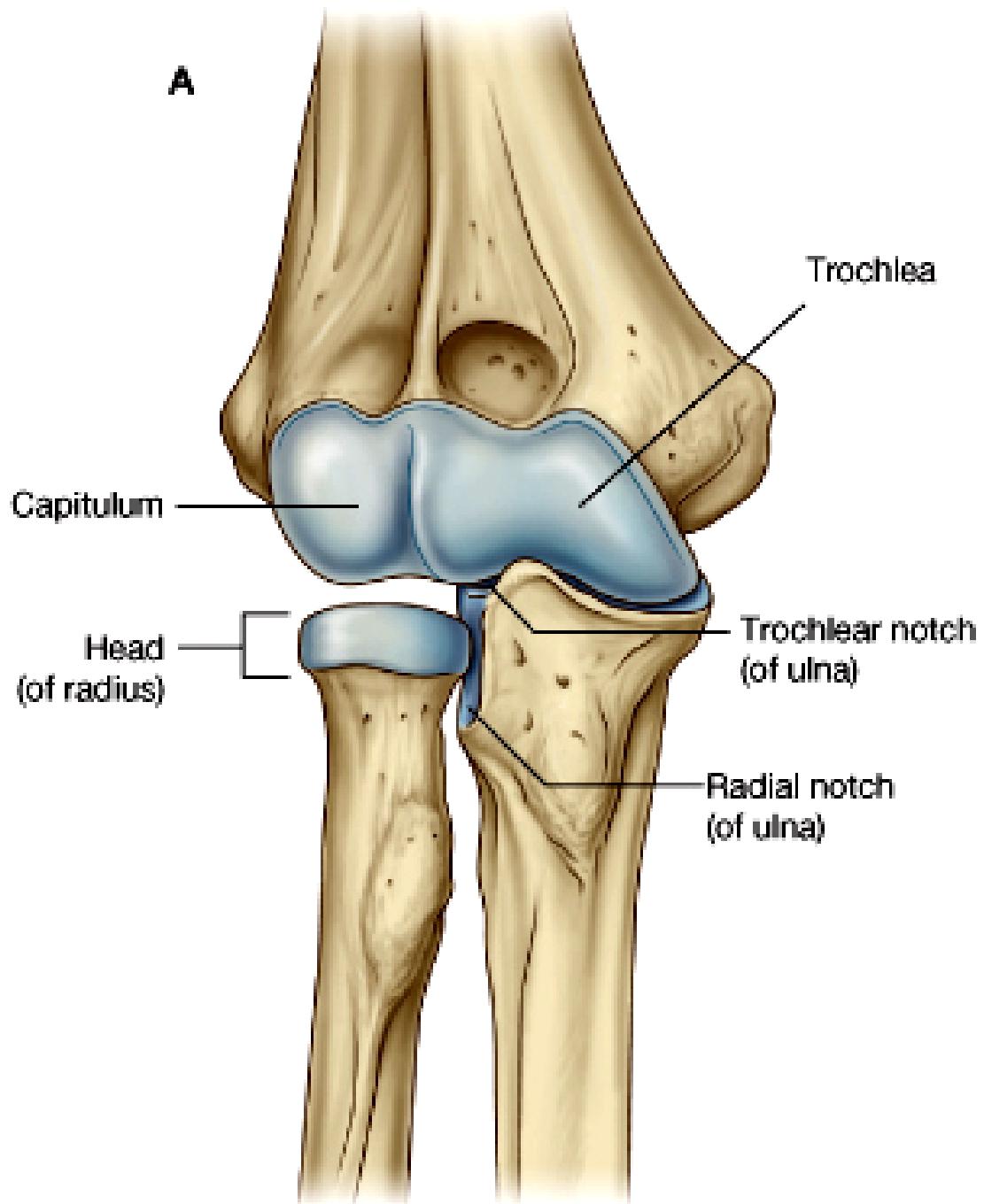
Clinical note







A

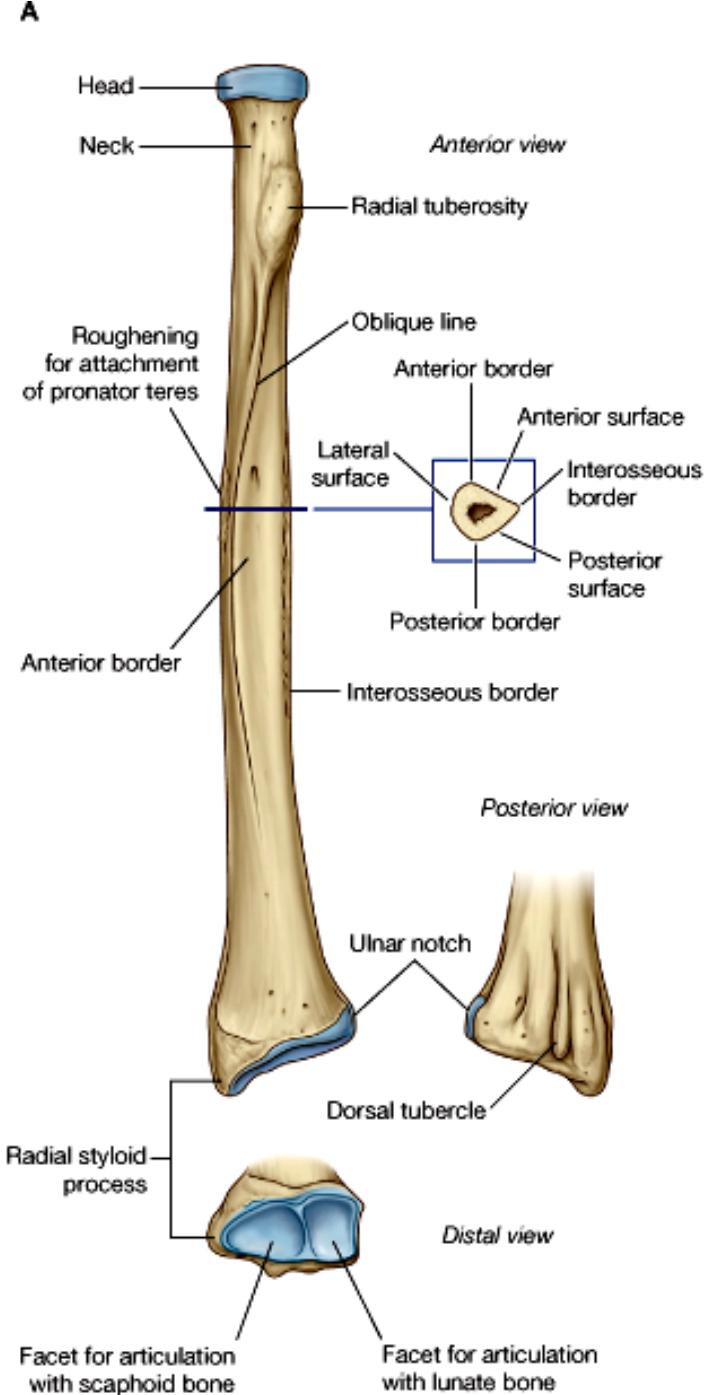


Humerus

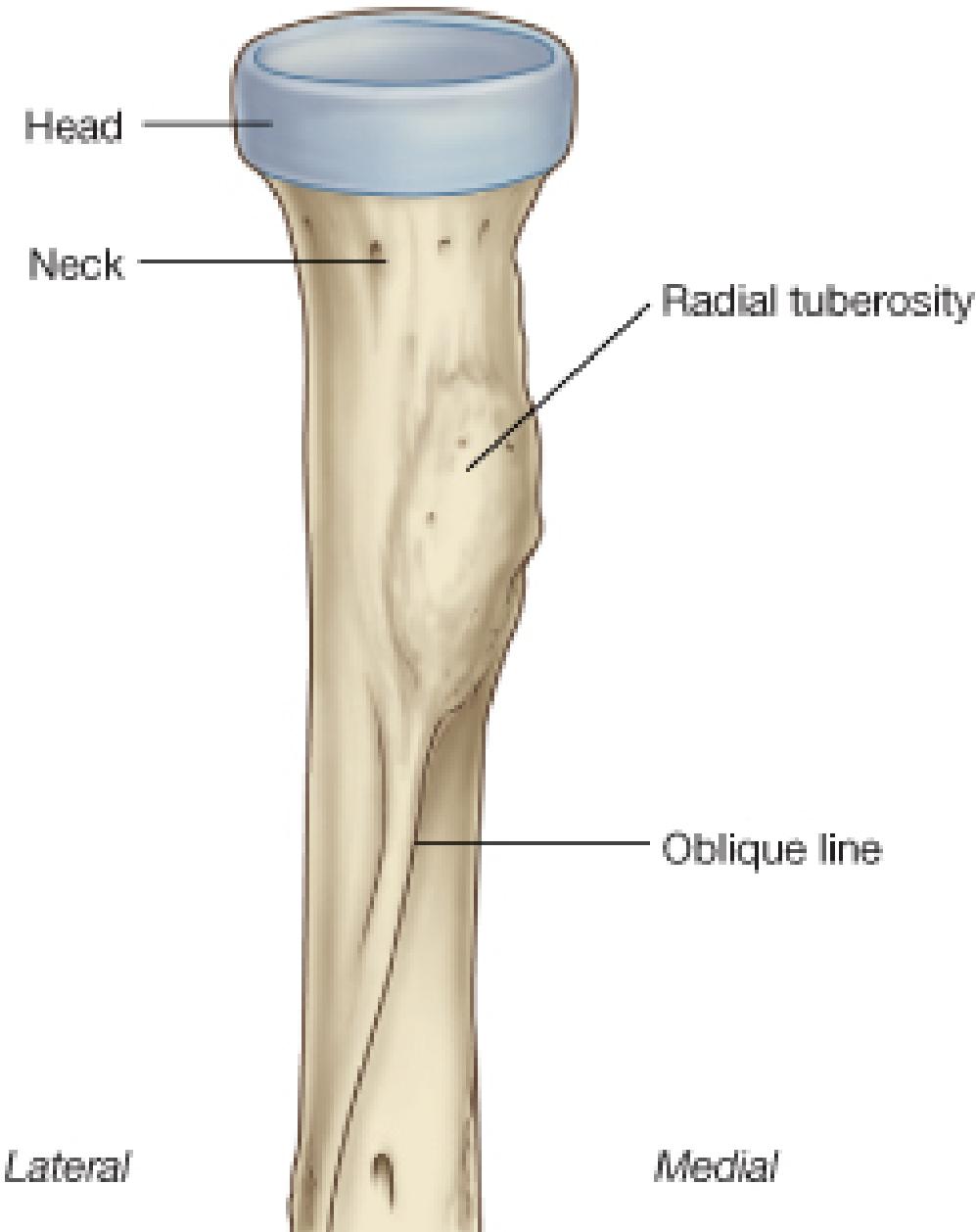


Radius:

- Upper end
- Body
- Lower end

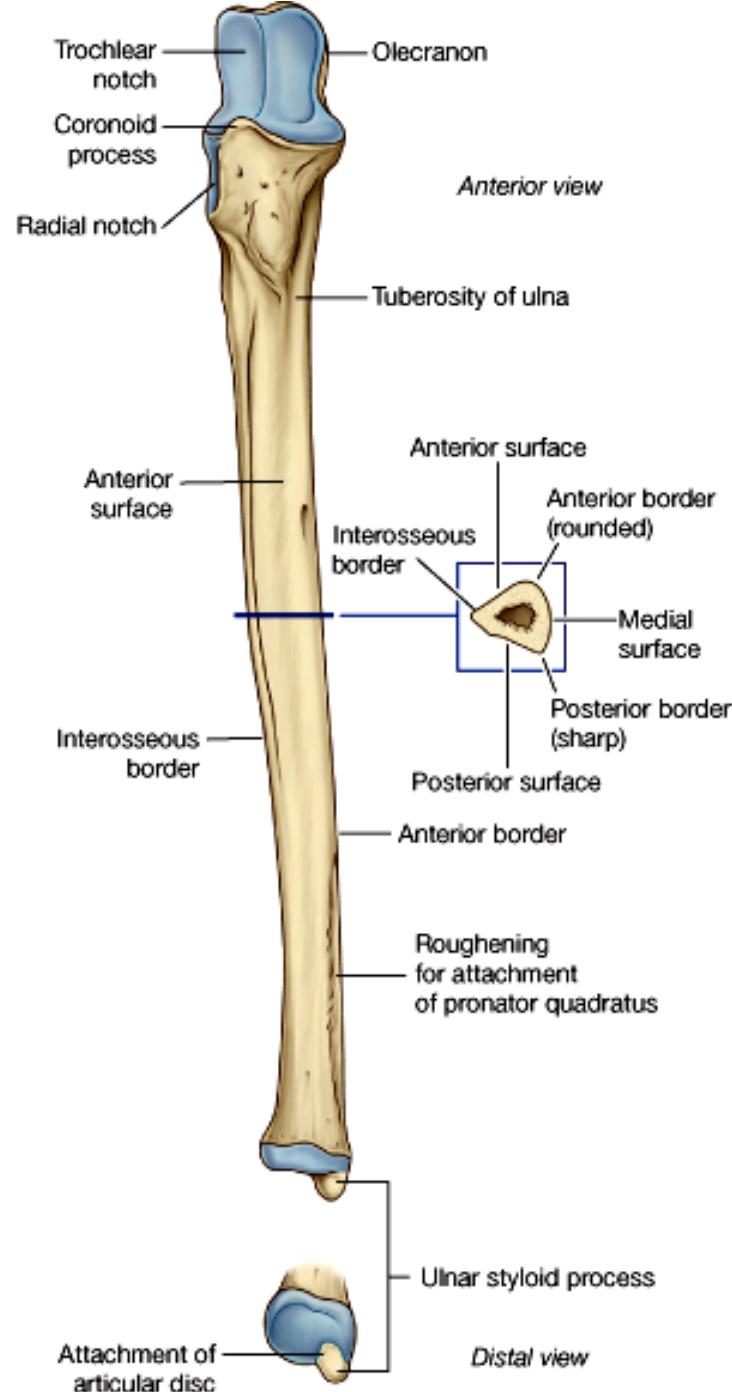


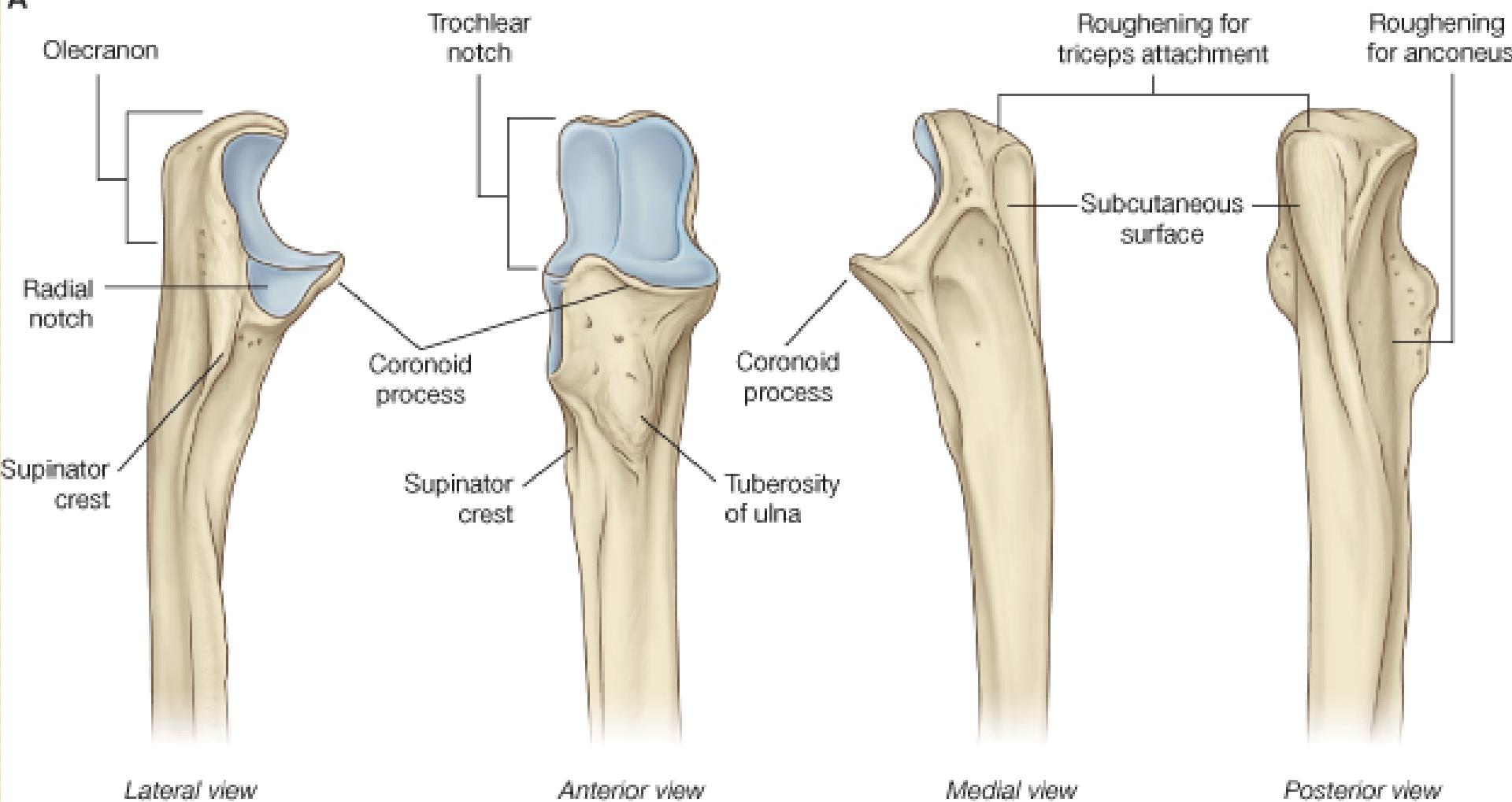
A



Ulna:

- Upper end
- Body
- Lower end



A*Lateral view**Anterior view**Medial view**Posterior view*

B



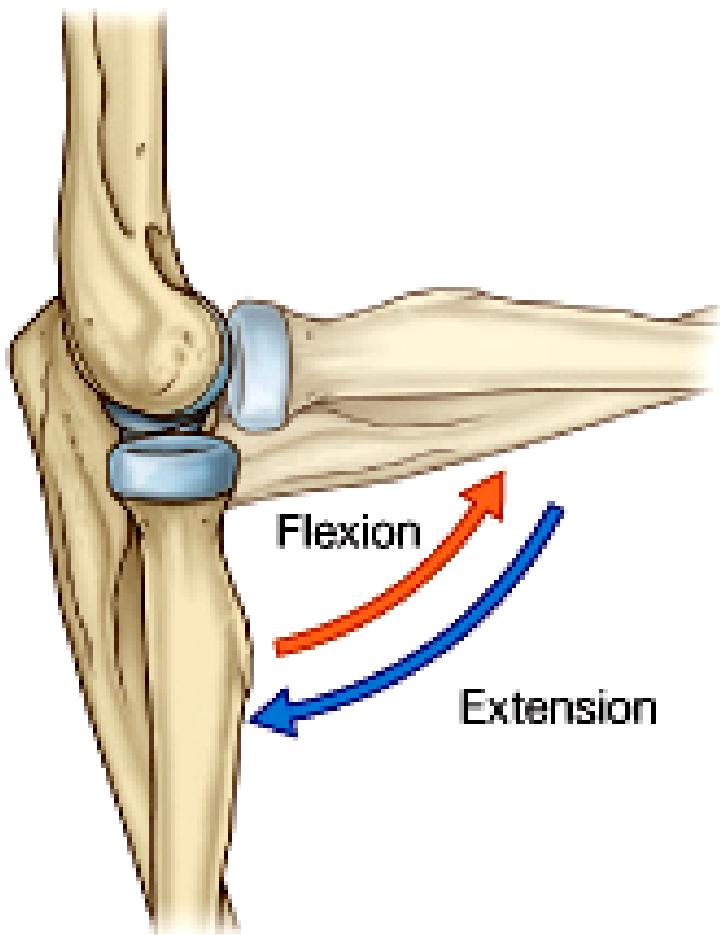
B

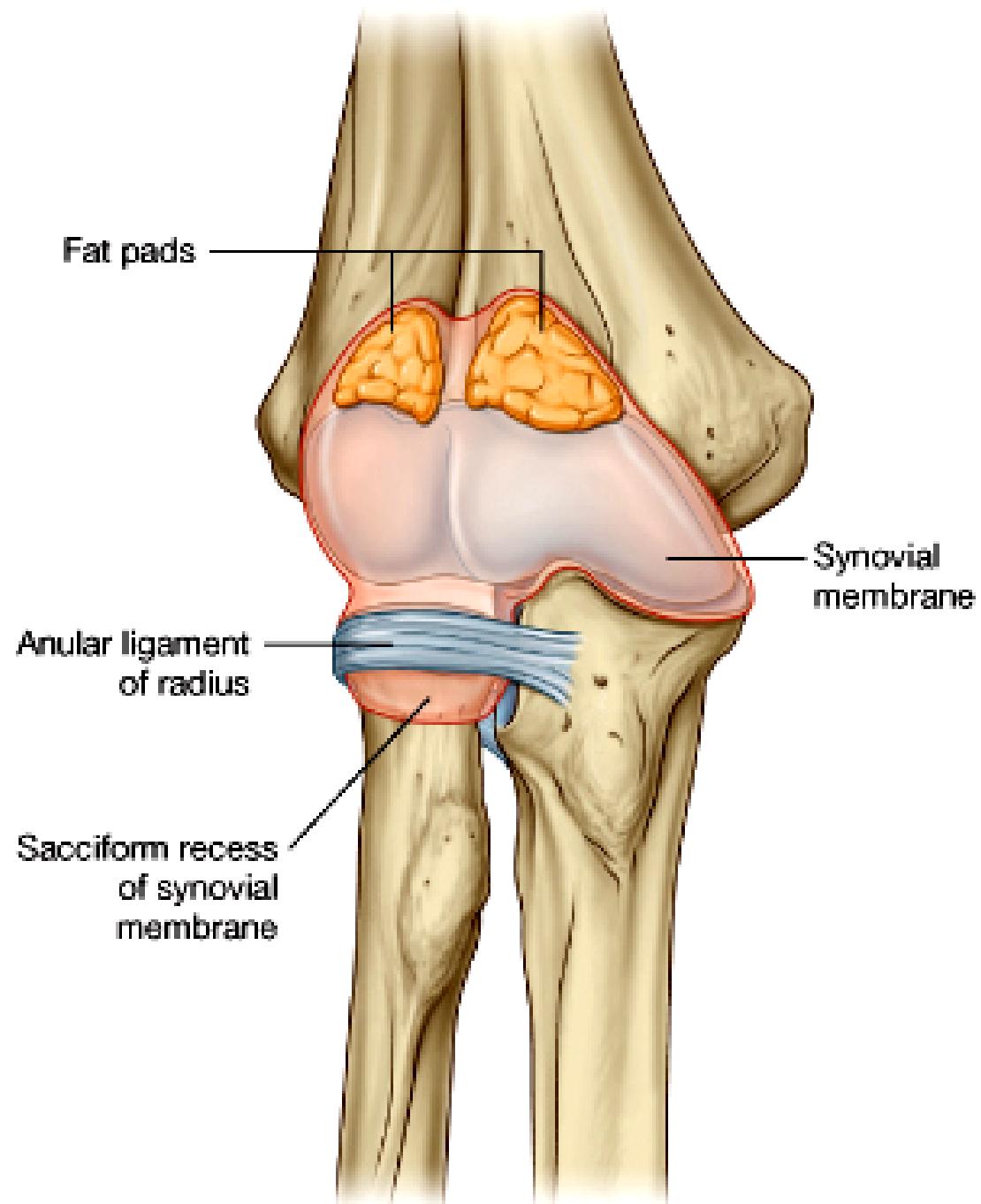


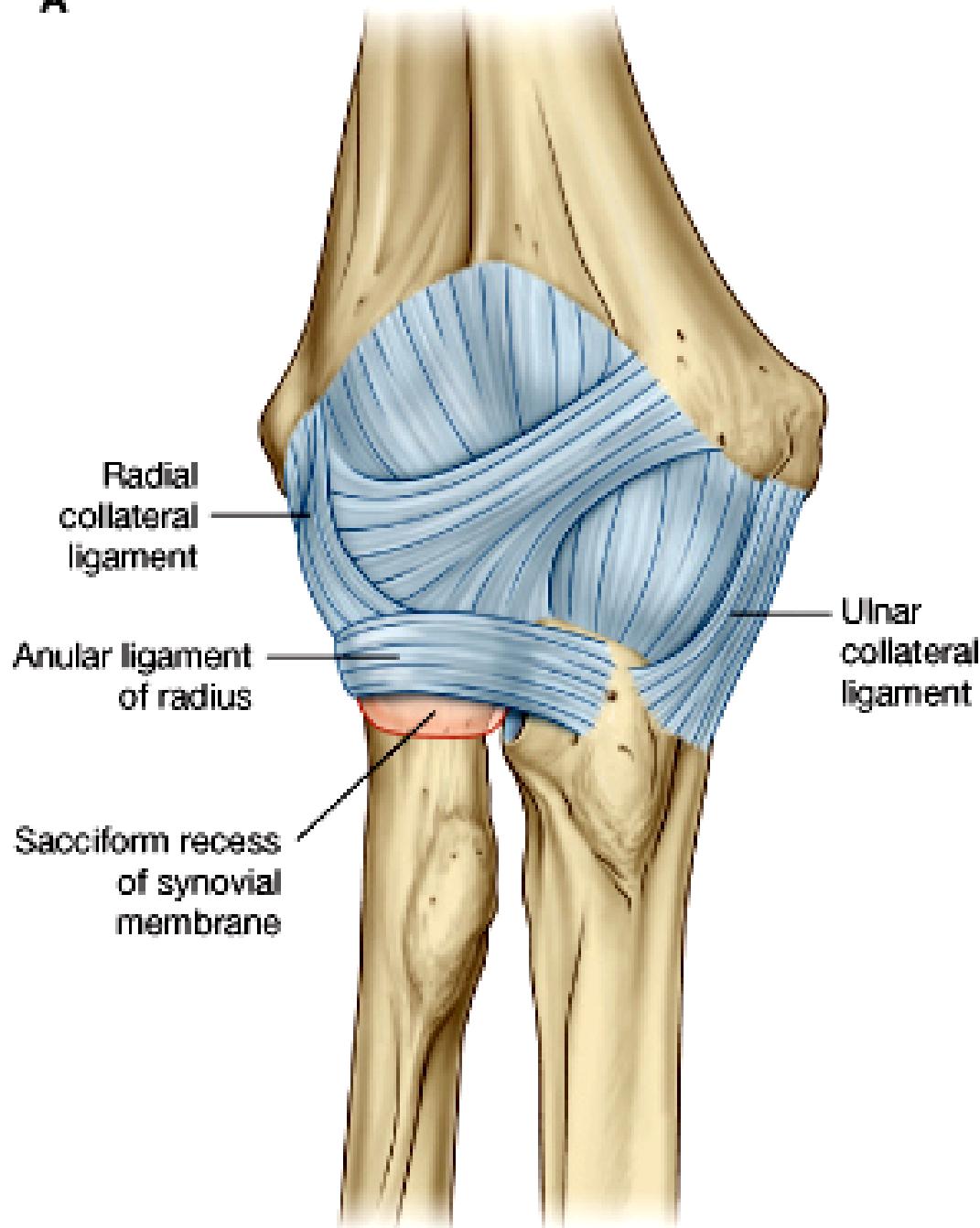
C



B





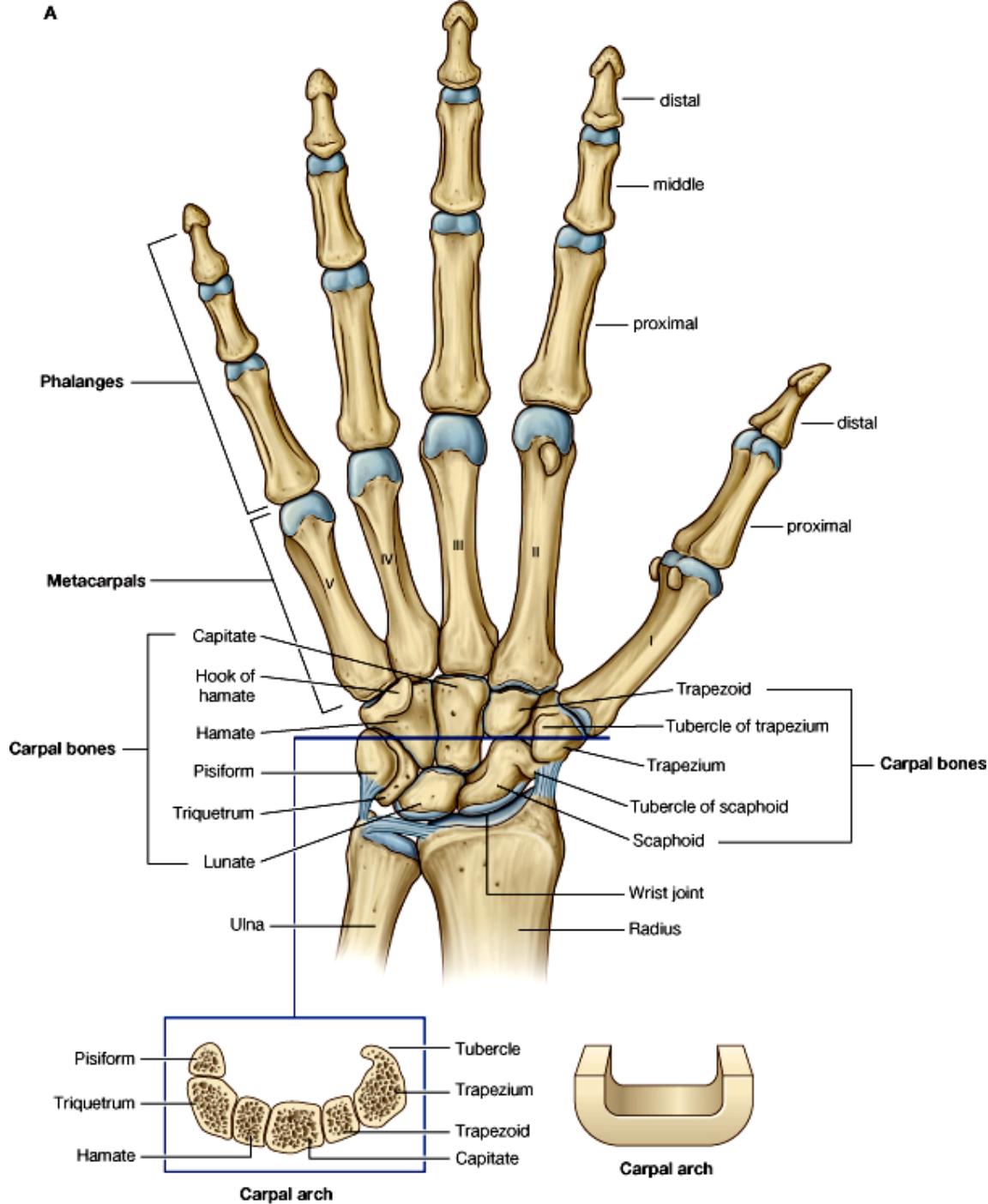
A

Wrist:

❖ Proximal

❖ Distal

❖ Clinical note



Metacarpal bone:

Proximal end (base)

Shaft (body)

Distal end (apex)

Phalanges:

Proximal end (base)

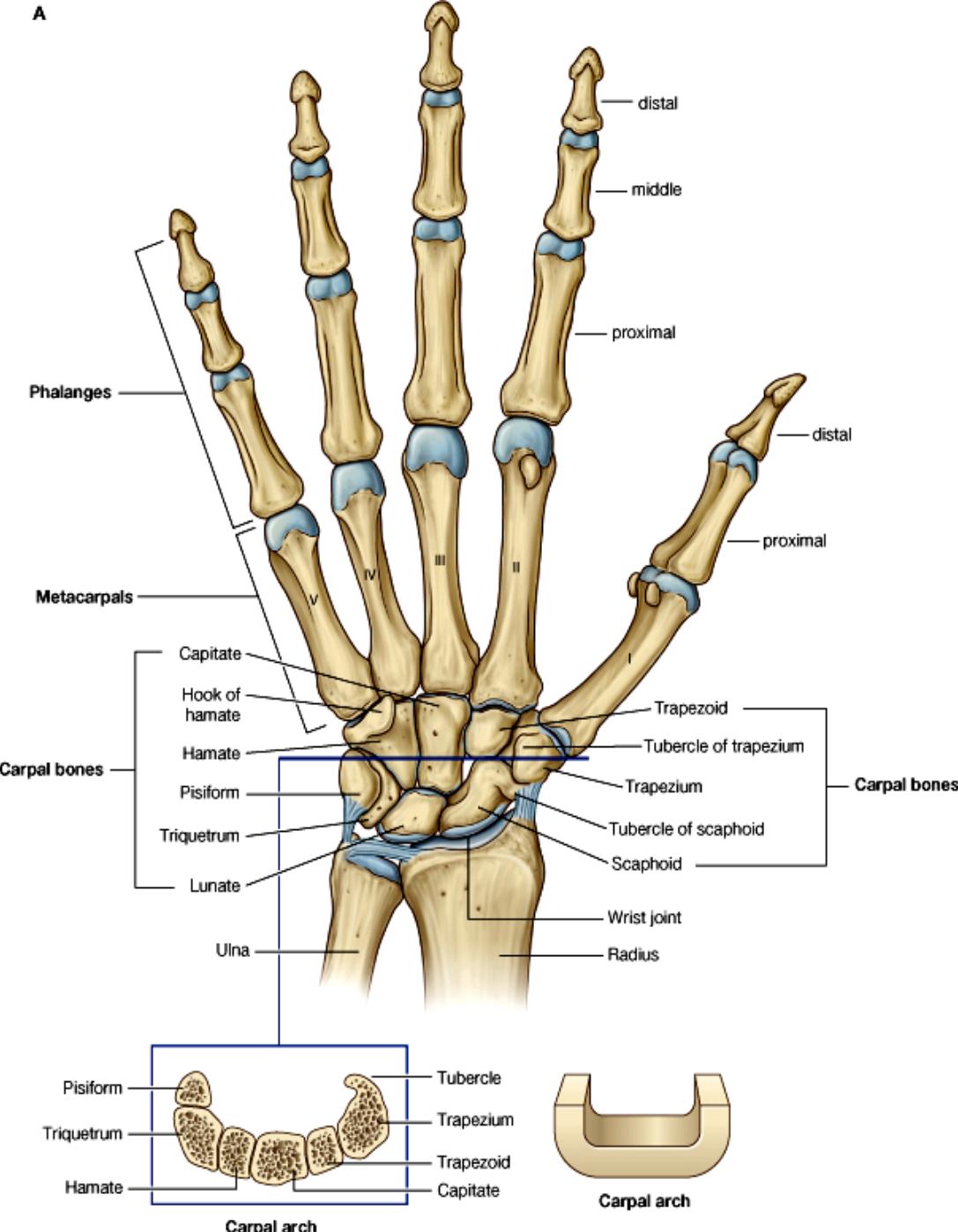
Shaft (body)

Distal end (apex)

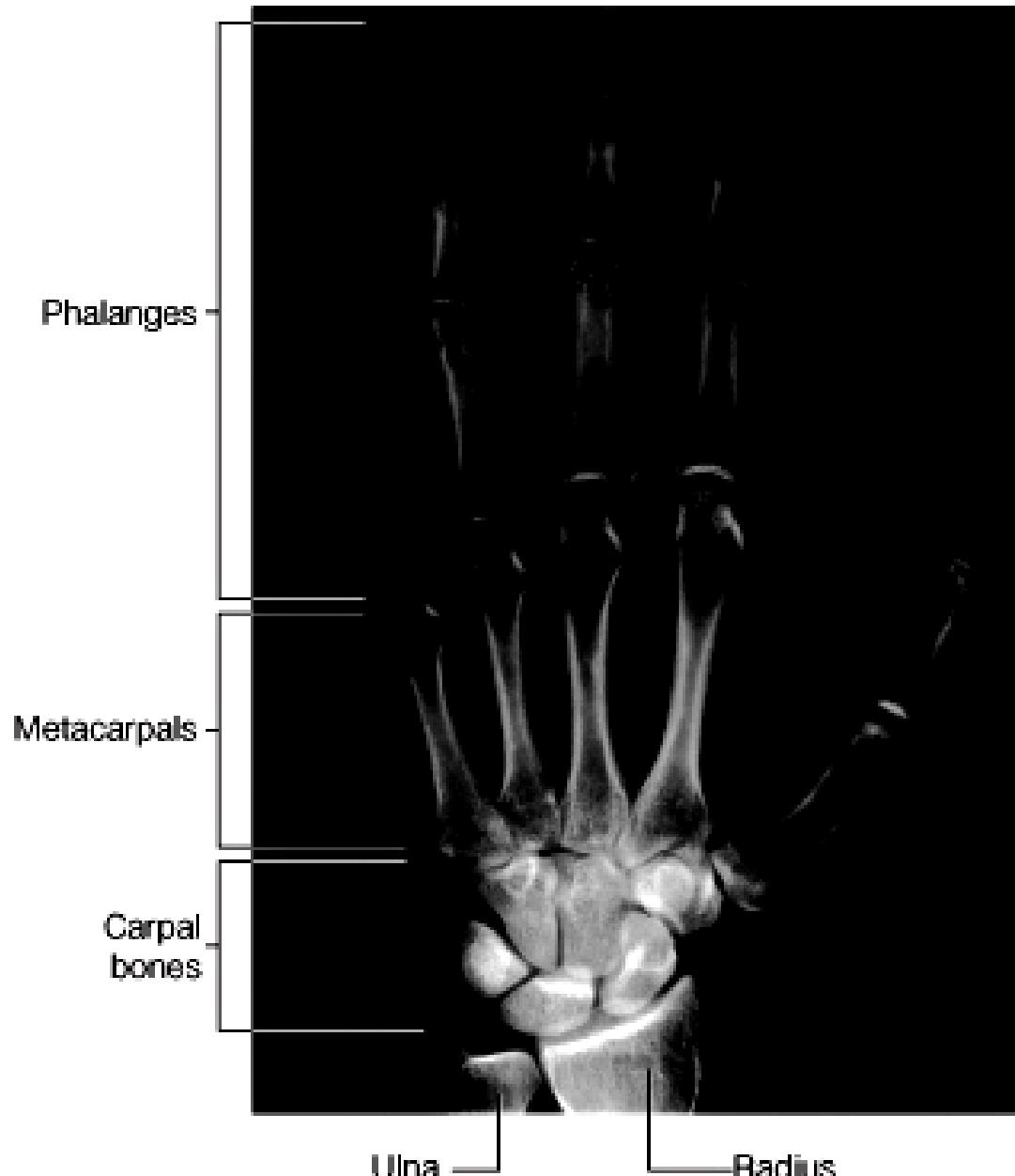
articulation

Proximal inter phalangeal (PIP)

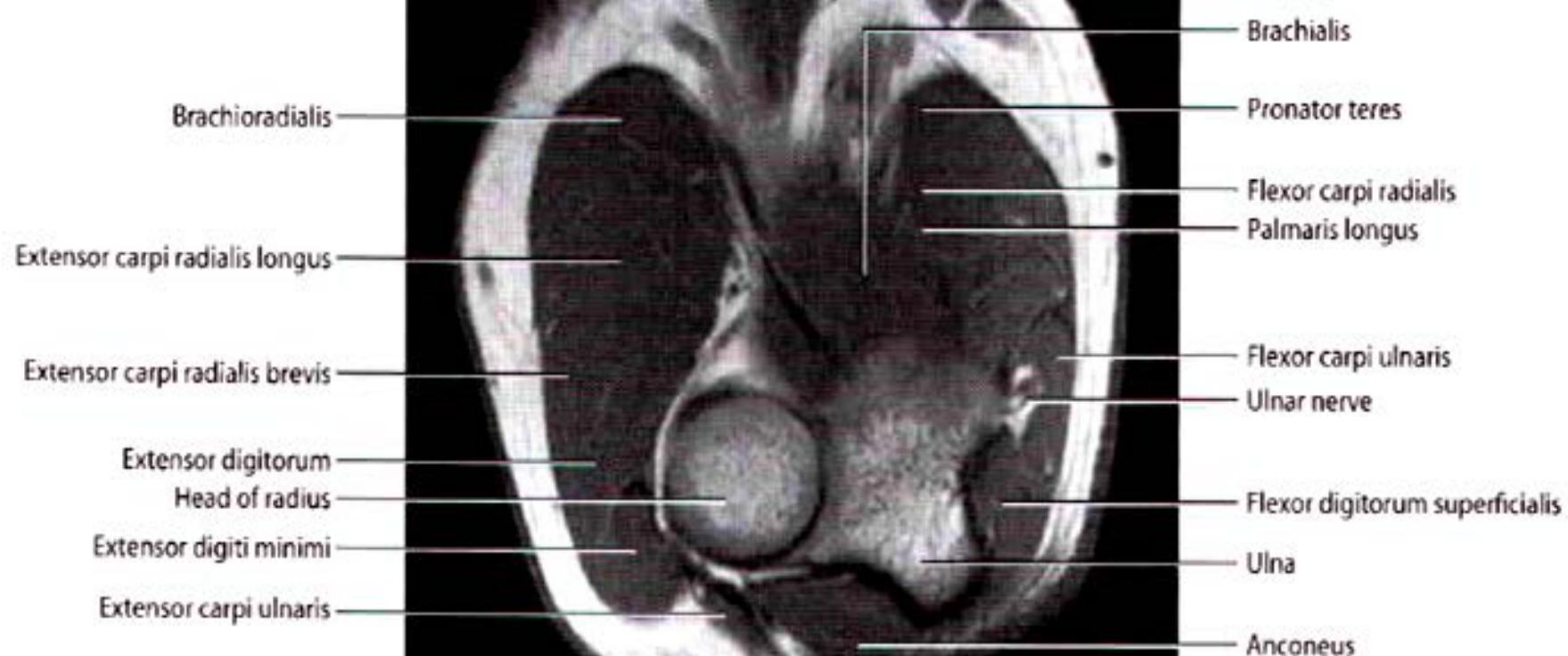
Distal inter phalangeal (DIP)

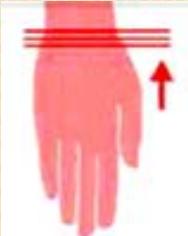


B

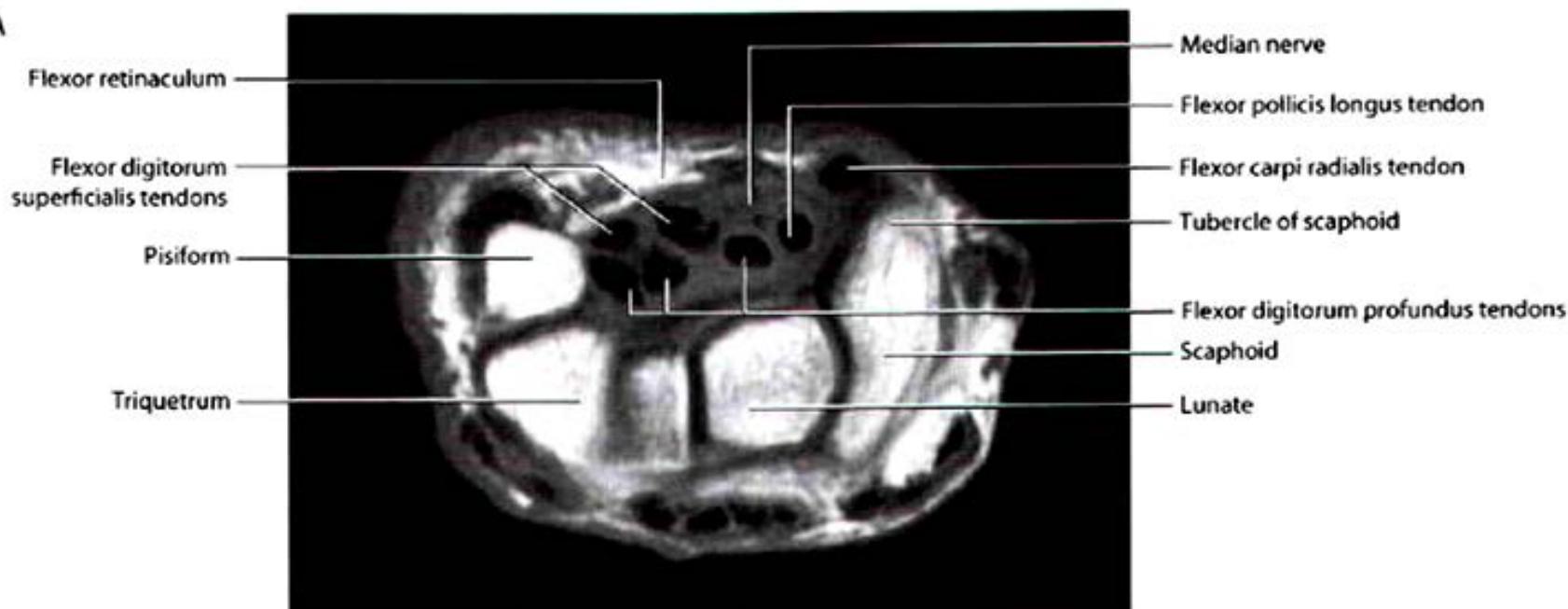


A





A



B

