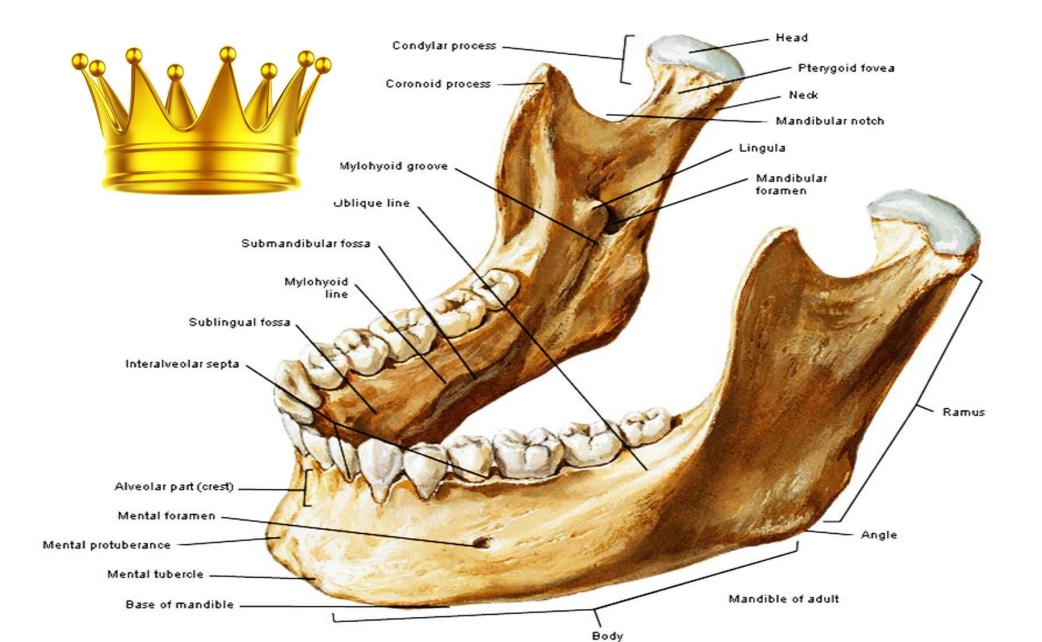
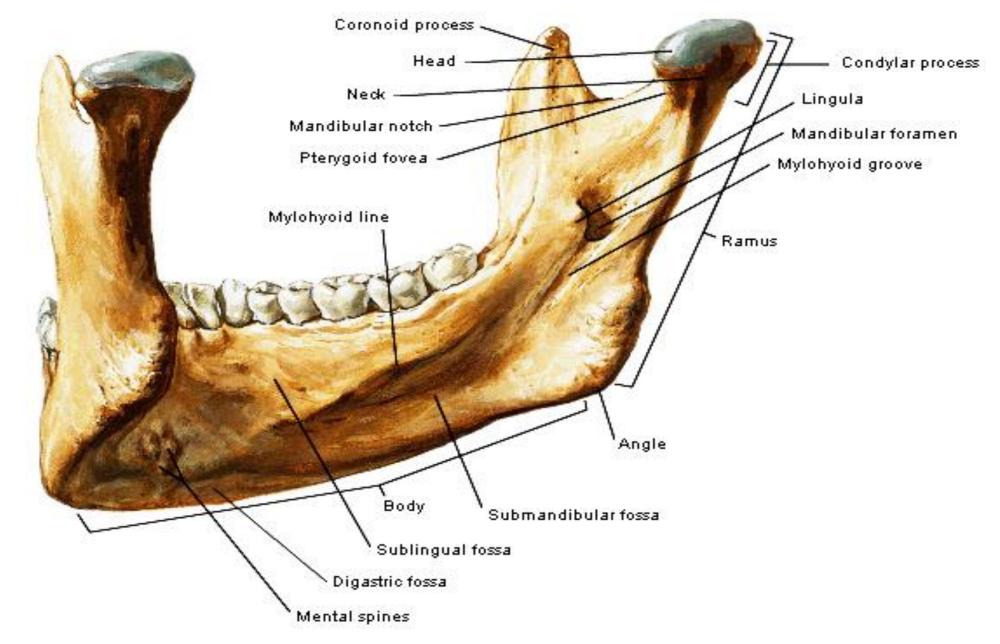
anatomy lab Dr yousef Dr Abulmaaty Mohamed

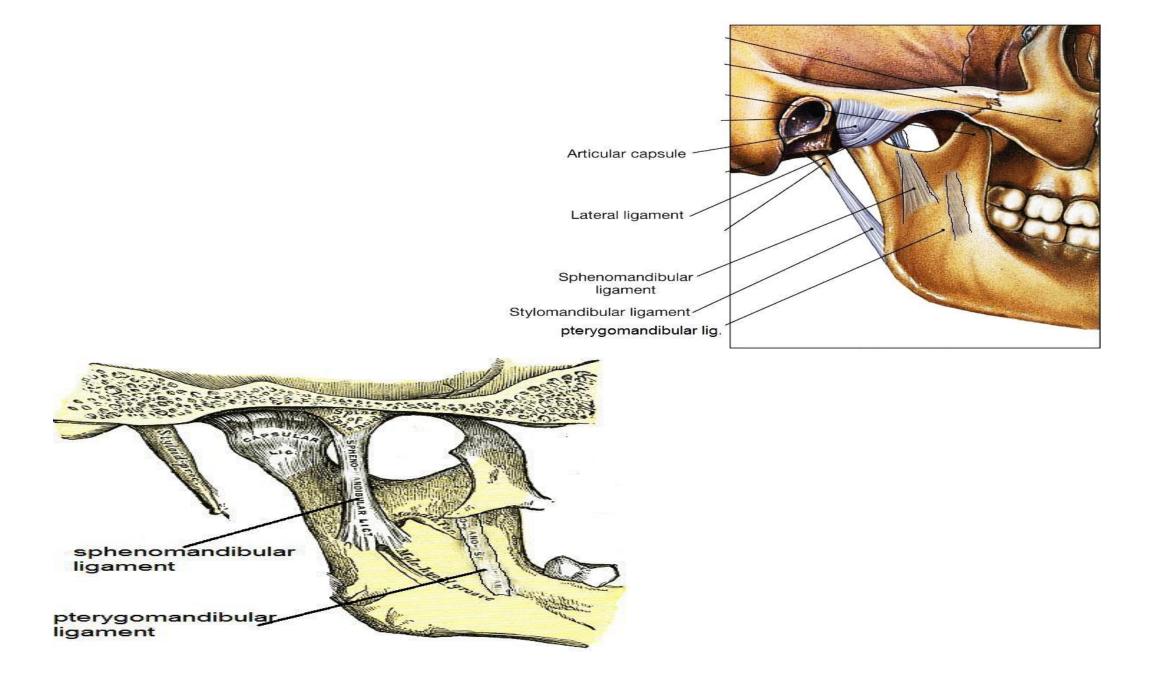


MANDIBLE

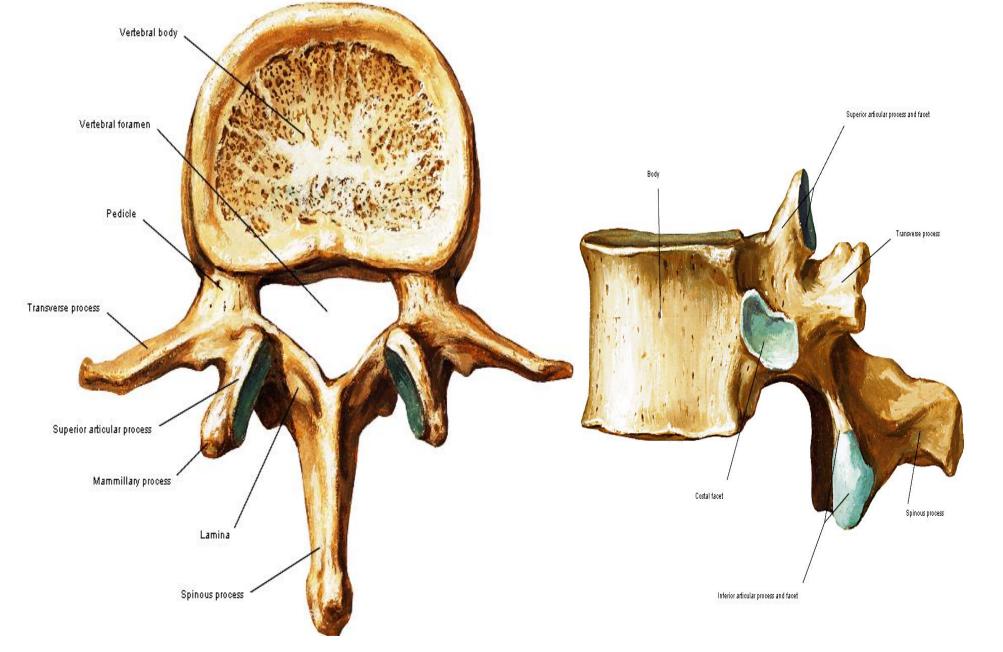


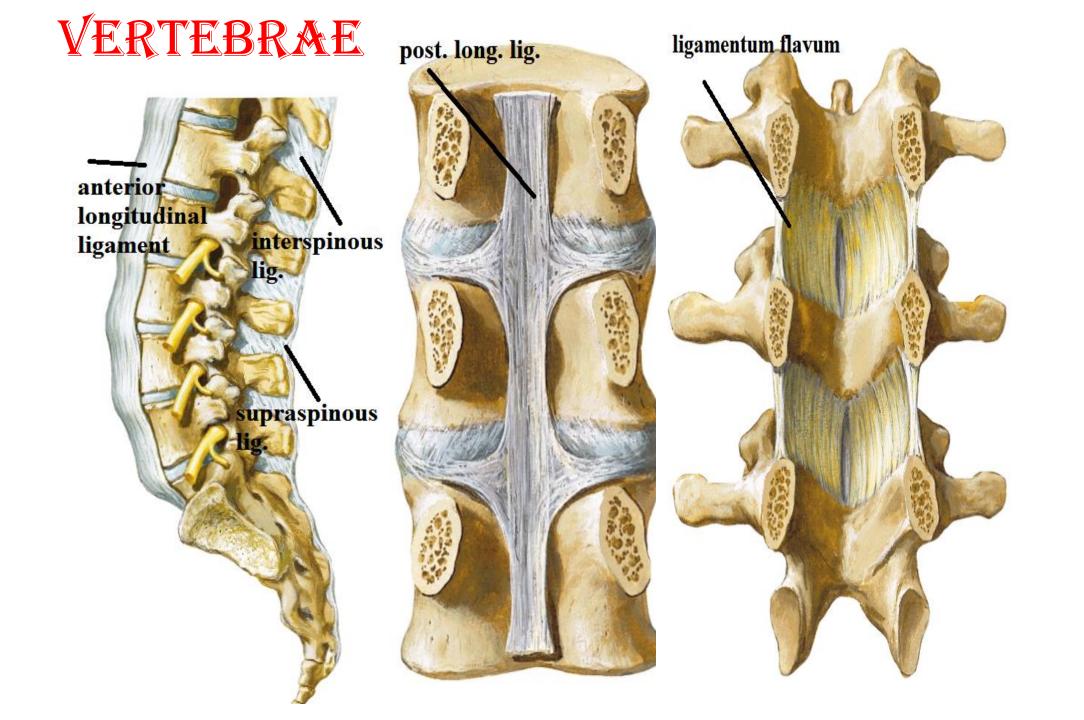
MANDIBLE

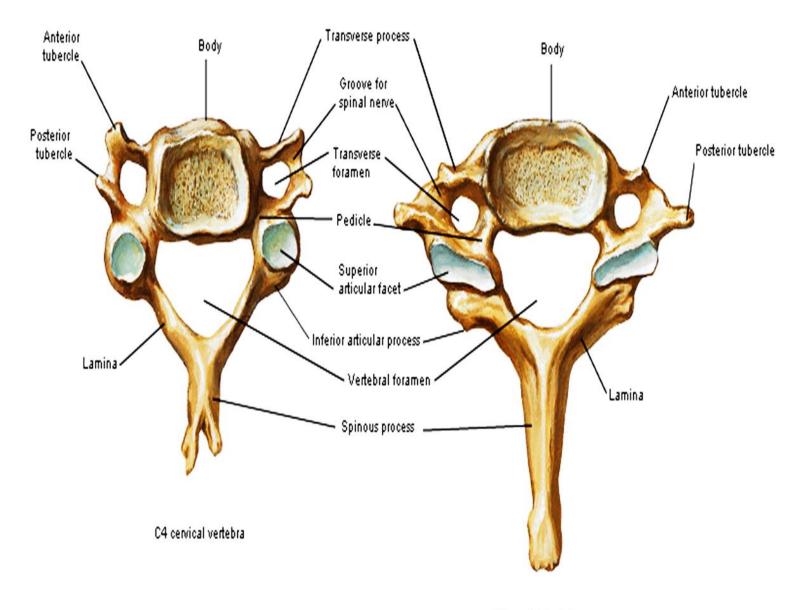




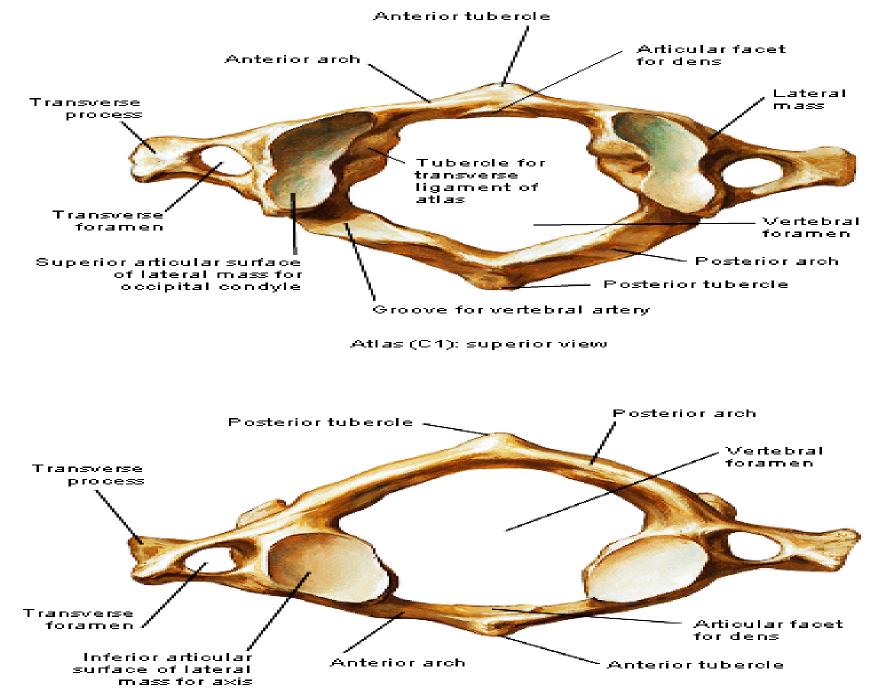




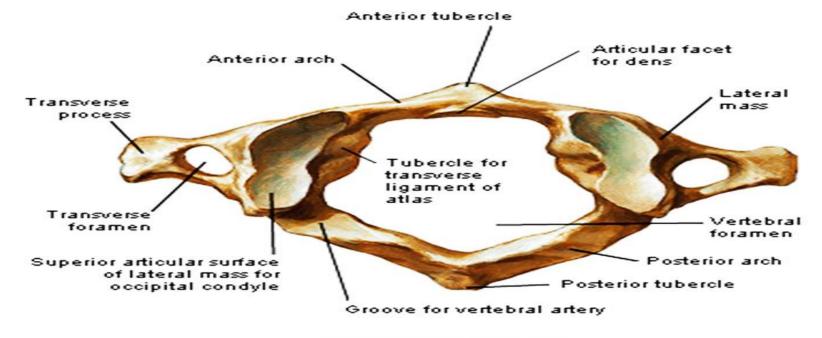




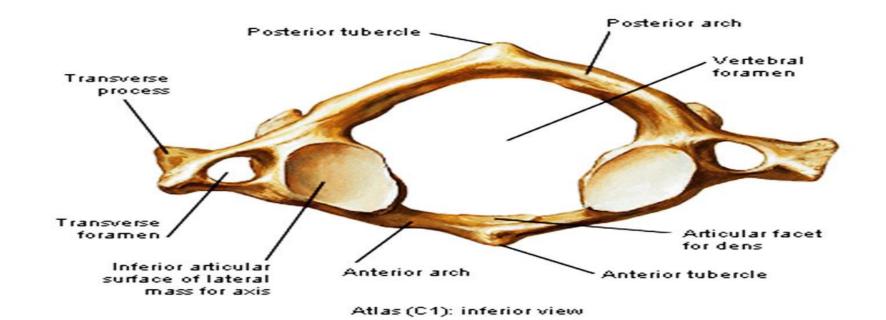
C7 cervical vertebra

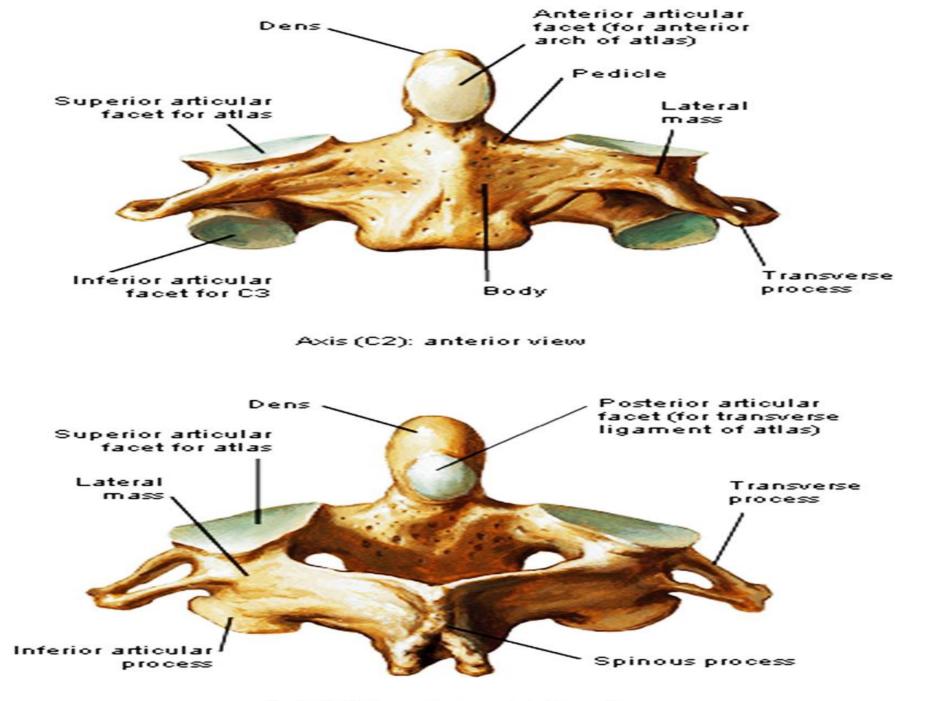


Atlas (C1): inferior view

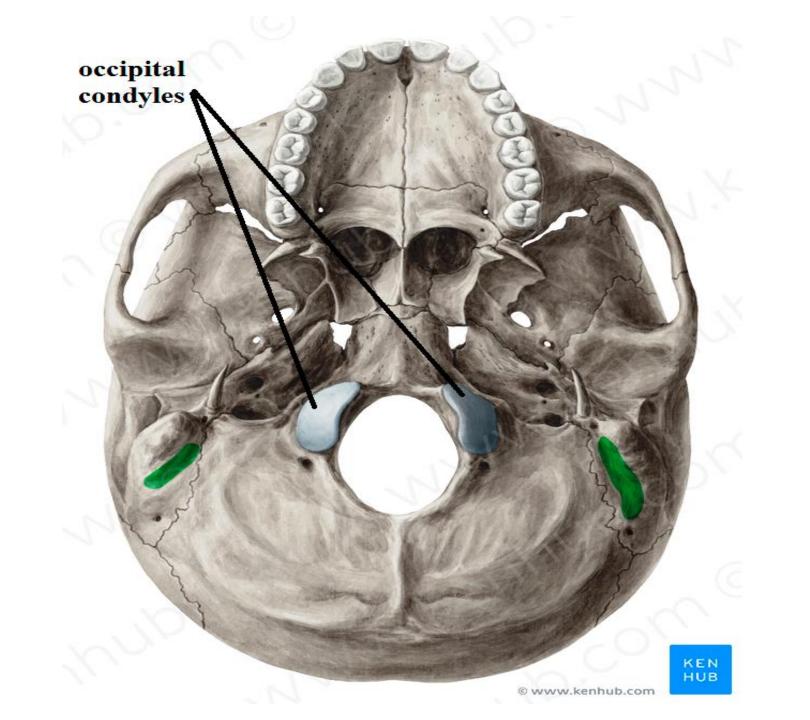


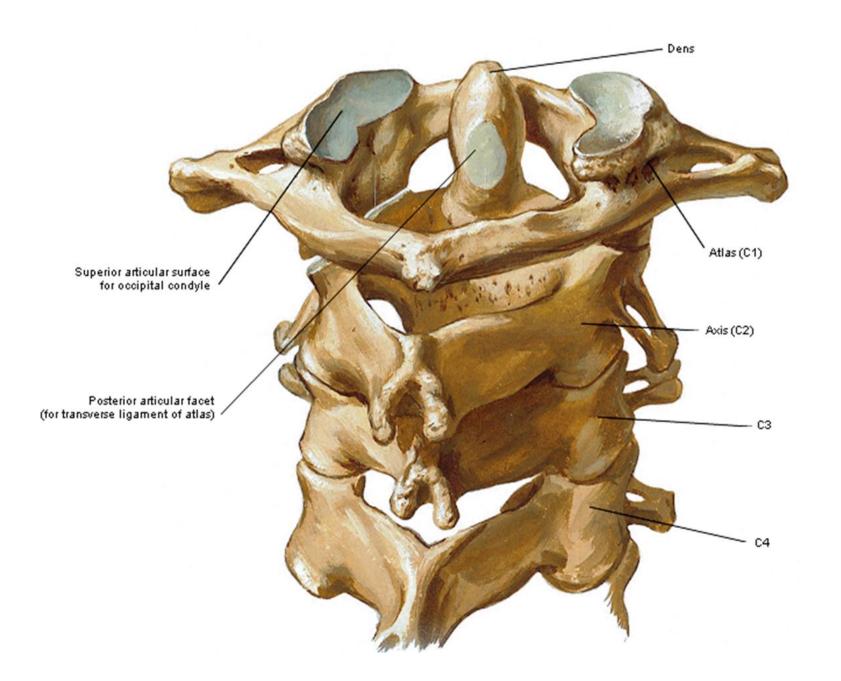
Atlas (C1): superior view



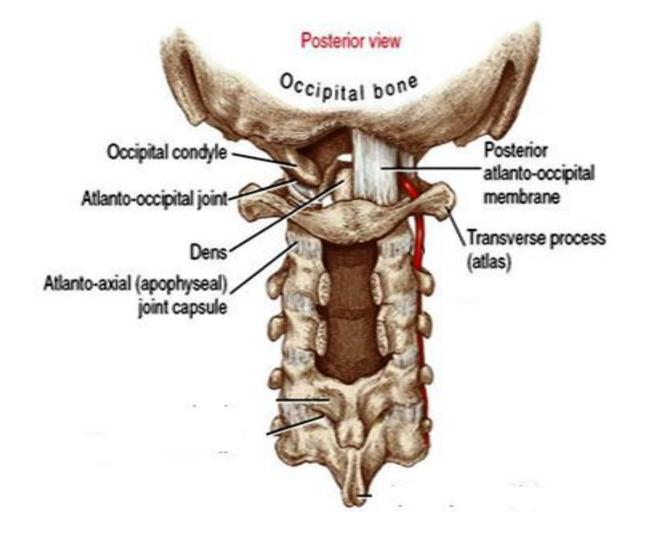


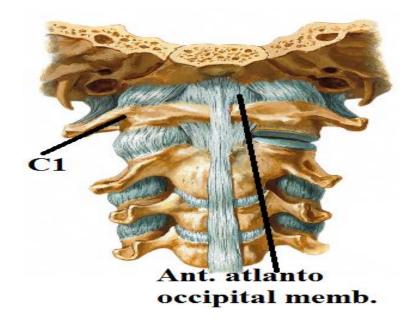
Axis (C2): posterosuperior view



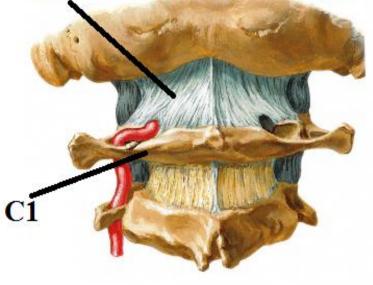


ATLANTO OCCIPITAL JOINT

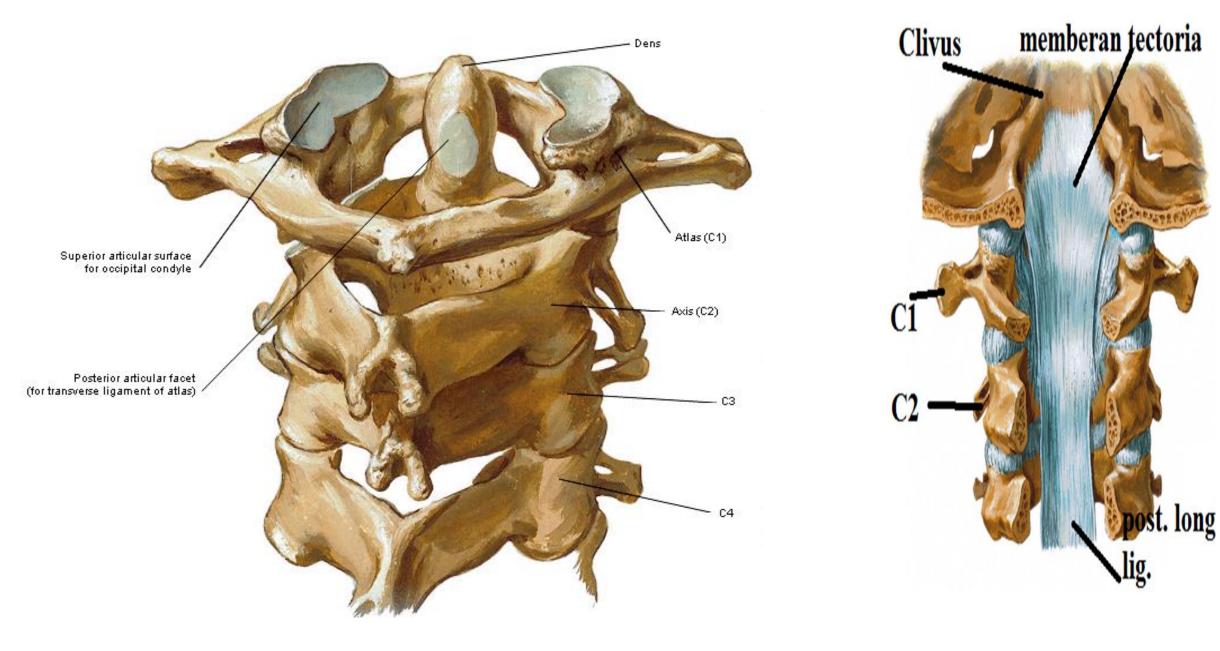




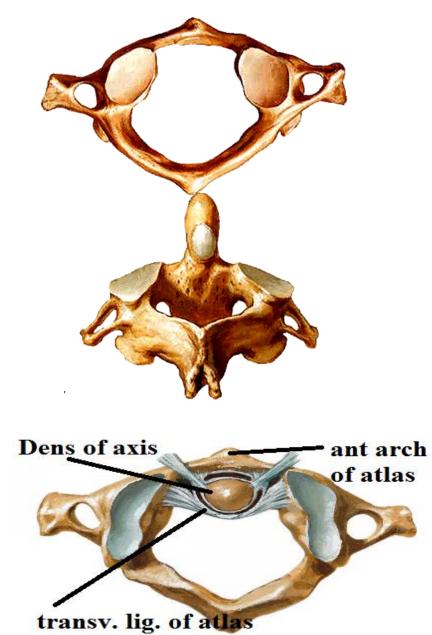
Post. atlanto occipital memb.



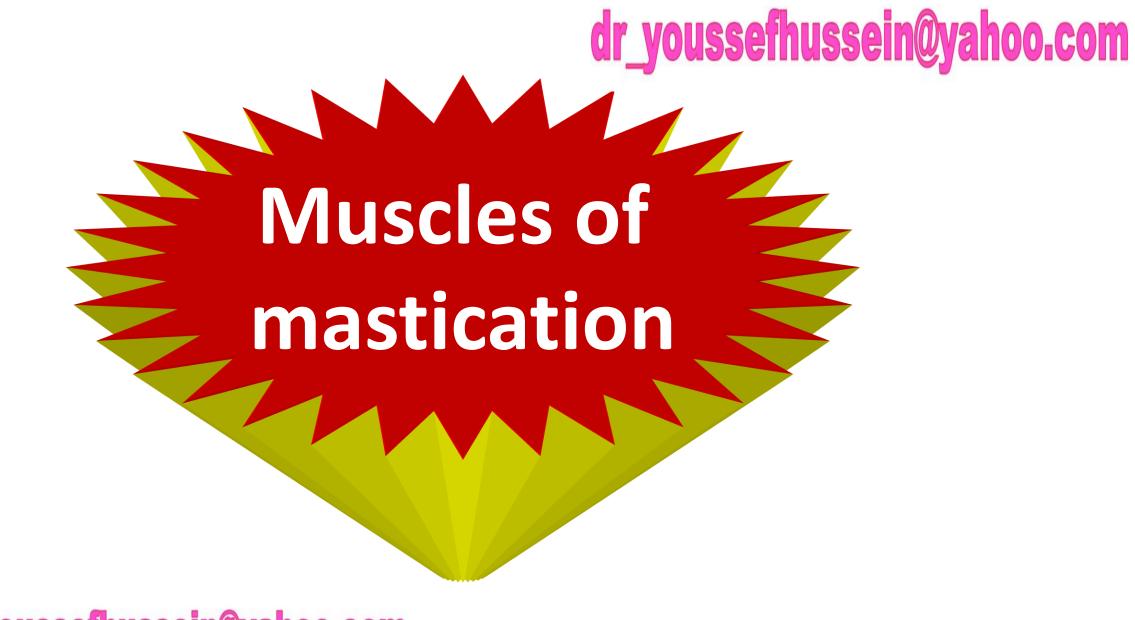
ATLANTO AXIAL JOINTS



ATLANTO AXIAL JOINTS

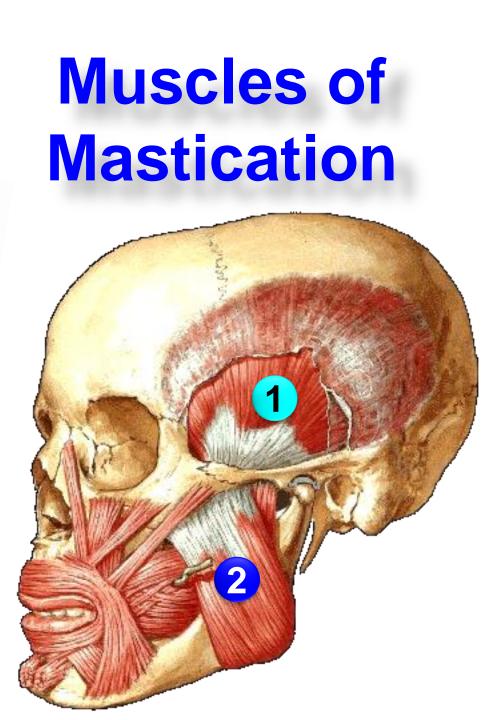


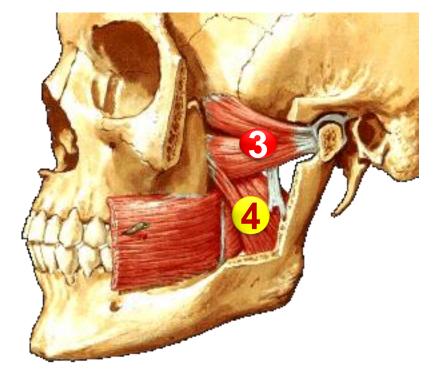
apical ligament Playar? alar ligament alar ligaments vertical trans. lig. of parts of atlas cruciate lig.



dr_youssefhussein@yahoo.com







- I. Temporalis
- 2. Masseter
- 3. Lateral Pterygoid
- 4. Medial pterygoid

Temporalis

Origin From Temporal fossa > and temporal fascia

Zygomatic arch.

Fan shaped muscle

dr_youssefhussein@yahoo.com

Origin From Inferior temporal line

- Direction of fibres;
- Anterior fibers are vertical downward.
- **Posterior** fibers are downward and forward.
- The most posterior

horizontally forward.

Insertion: into the tip, anterior border and posterior border and inner surface of the coronoid process.

dr_youssefhussein@yahoo.com

Origin: Superficial fibers from lower border zygomatic arch

Masseter muscle

Origin: Deep fibers from deep surface of zygomatic arch

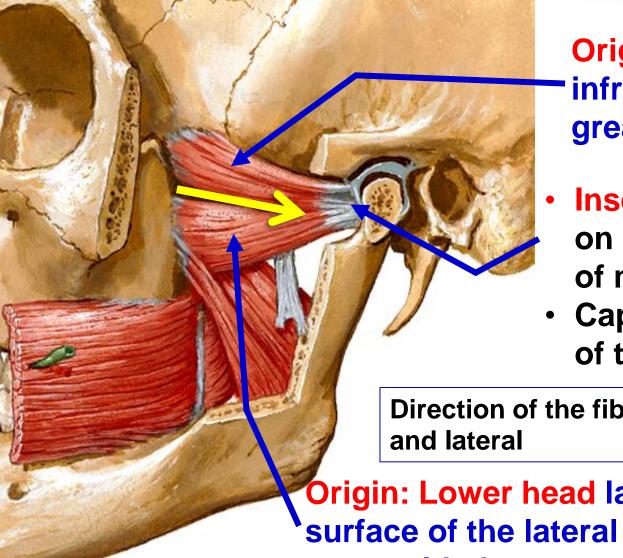
Direction of the fibres:

- Anterior directed downwards and backwards.
- Posterior directed vertically

downwards.

Insertion: Into the outer surface of the ramus of the mandible

dr_youssefhussein@yahoo.com Lateral Pterygoid muscle



Origin: Upper head from infratemporal surface of greater wing of sphenoid

- **Insertion:** Pterygoid fovea on anterior aspect of neck of mandible.
- Capsule and articular disc of temporomandibular joint.

Direction of the fibres: horizontally backward

Origin: Lower head lateral pterygoid plate

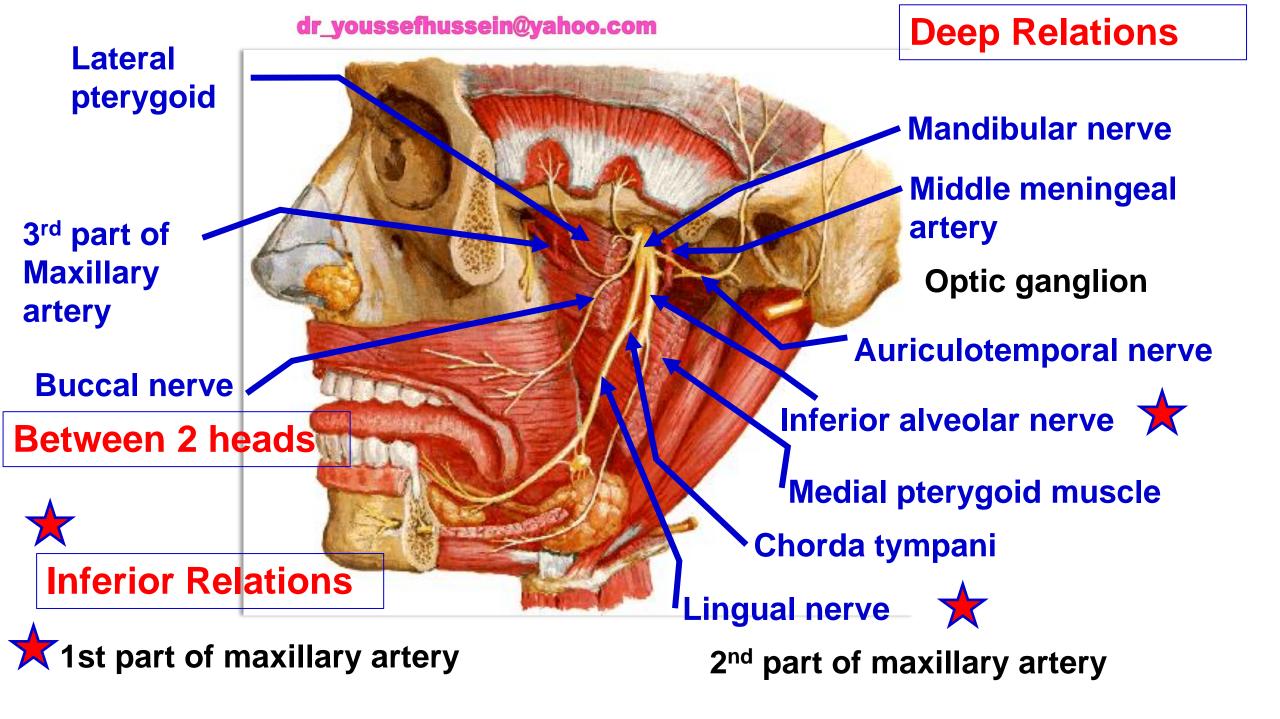
dr_youssefhussein@yahoo.com Medial Pterygoid muscle

Origin: Deep head from medial surface of lateral pterygoid plate

Insertion: Into the inner surface of the ramus and angle of the mandible

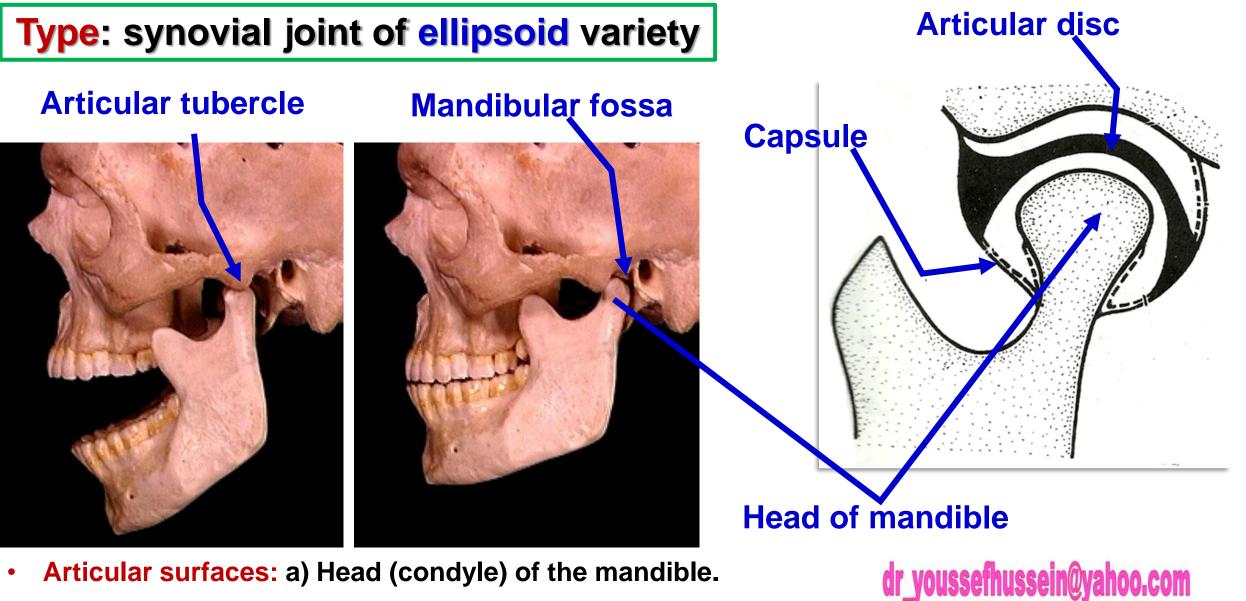
Direction of the fibres: downward, backward and lateral

Origin: Superficial head from maxillary tuberosity



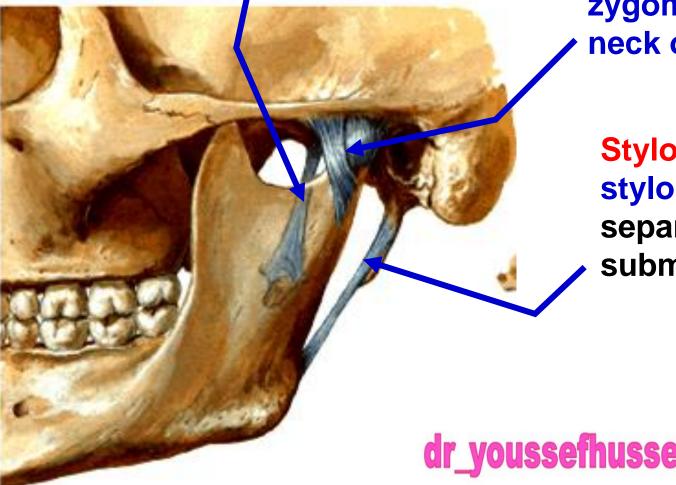


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- b) Articular (glenoid) fossa and articular tubercle of temporal bone.
- c) Articular disc divided the cavity into upper and lower parts.
- Capsule: attached around the articular surfaces. It is lined by synovial membrane.

Sphenomandibular ligament from spine of sphenoid to lingula

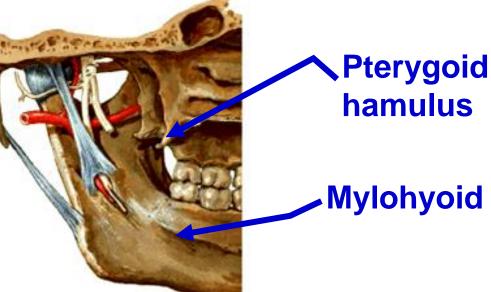


Tempromandibular ligament from articular eminence (root Of zygomatic arch) to lateral side of neck of mandible

Stylomandibular ligament from styloid process to angle of mandible, parotid separates gland from submandibular gland

dr_youssefhussein@yahoo.com

Ligaments of temporomandibular joint



hamulus

Mylohyoid line

Pterygomandibular ligament: extends from pterygoid hamulus to the posterior end of mylohyoid line of mandible.

- It gives origin to buccinator and superior constrictor muscle of the pharynx.

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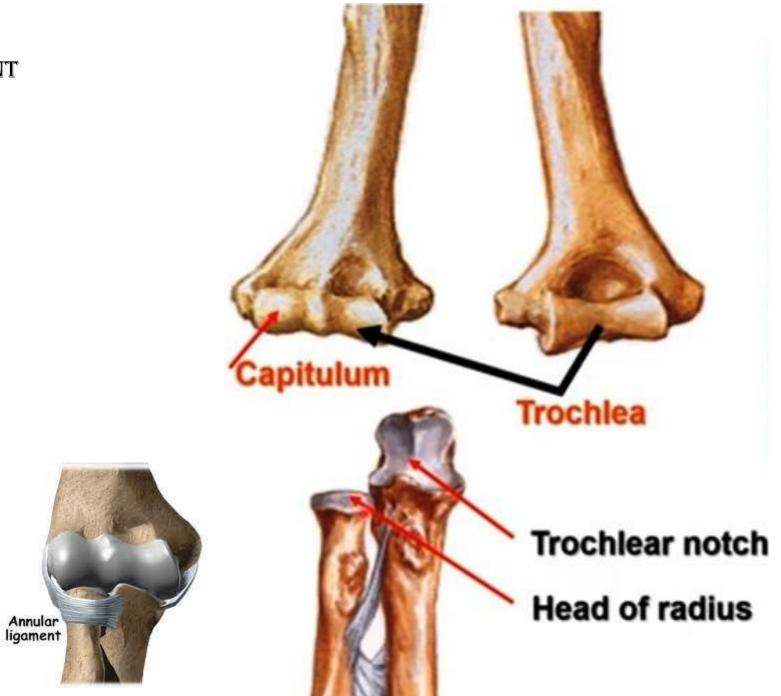
Ligaments of temporomandibular joint

Superior constrictor

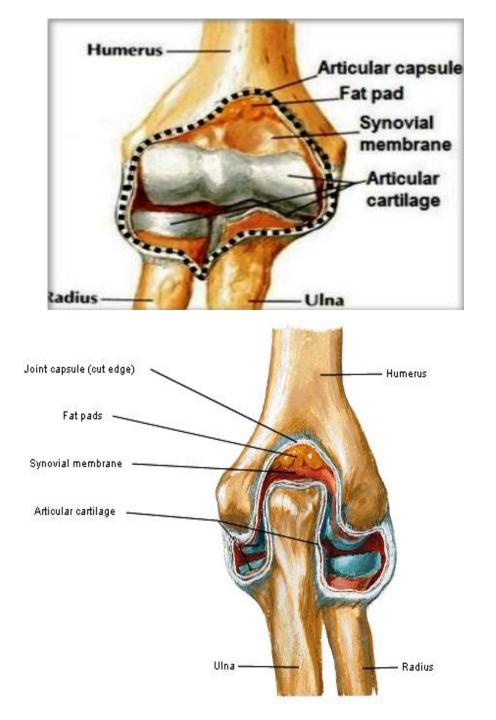
muscle of pharynx

Buccinator



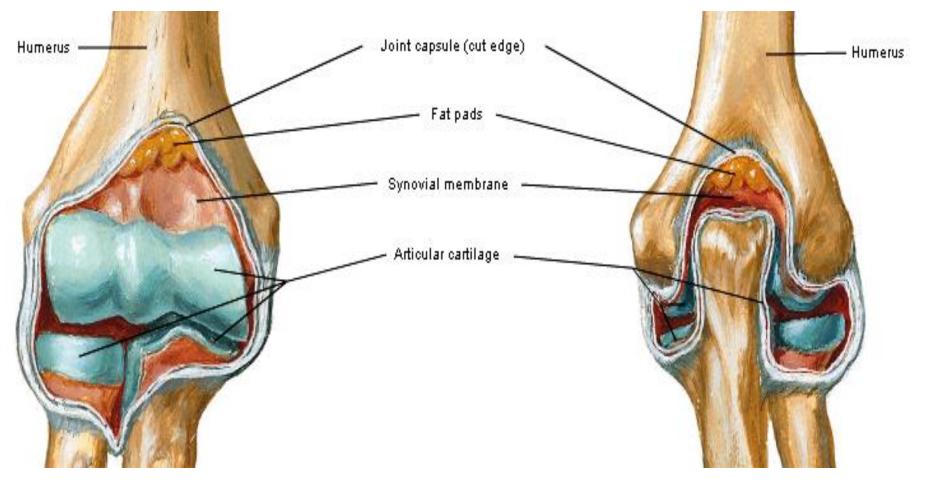




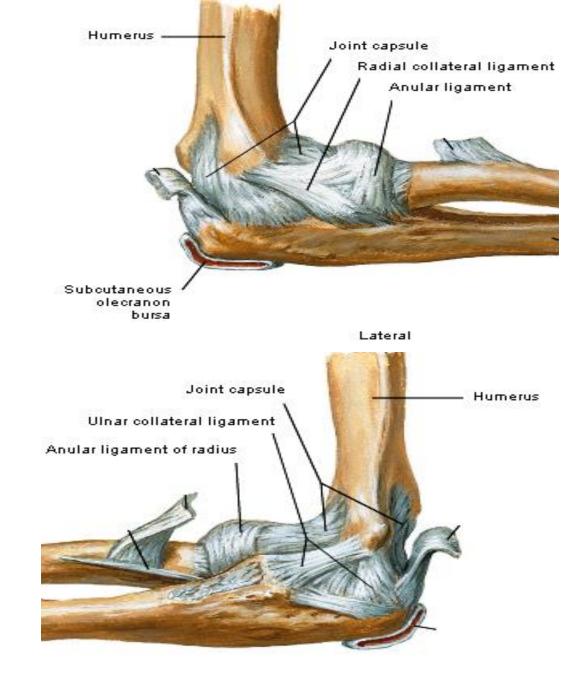


ELBOW JOINT Synovial membrane:-

Lines the capsule and covers the non articular structures

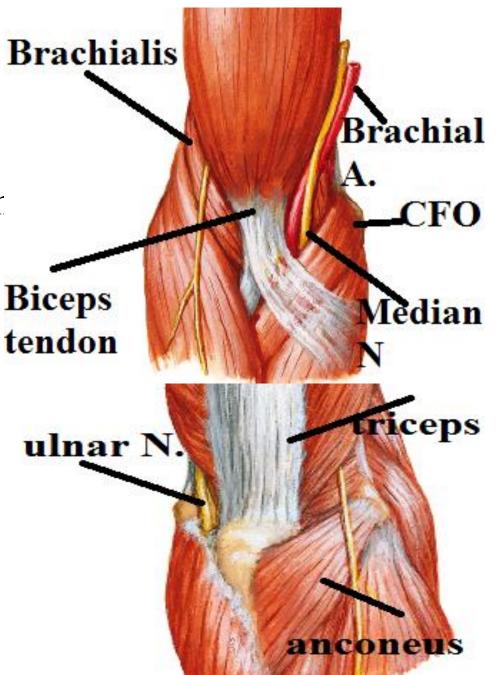


Ligaments:-



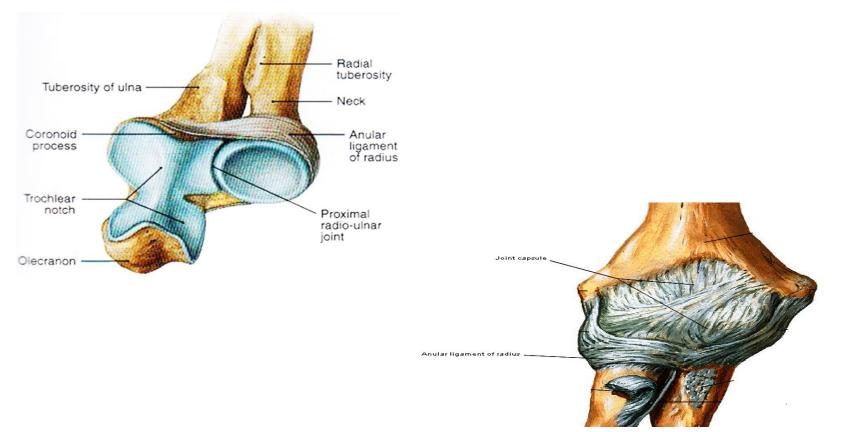
Medial

ELBOW JOINT Relations Anteriorly: Brachialis separating it fror median nerve, brachial artery, biceps tendon Posteriorly: triceps & anconeus Medially: ulnar nerve, CFC Laterally:- radial nerve, CEO

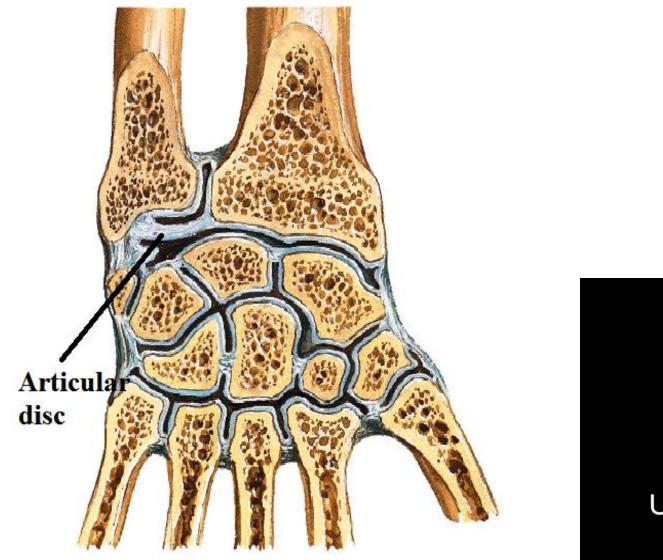


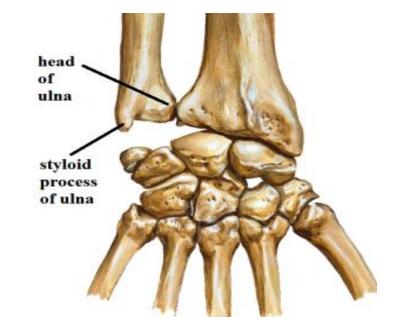
A-SUPERIOR RADIOULNAR JOINT





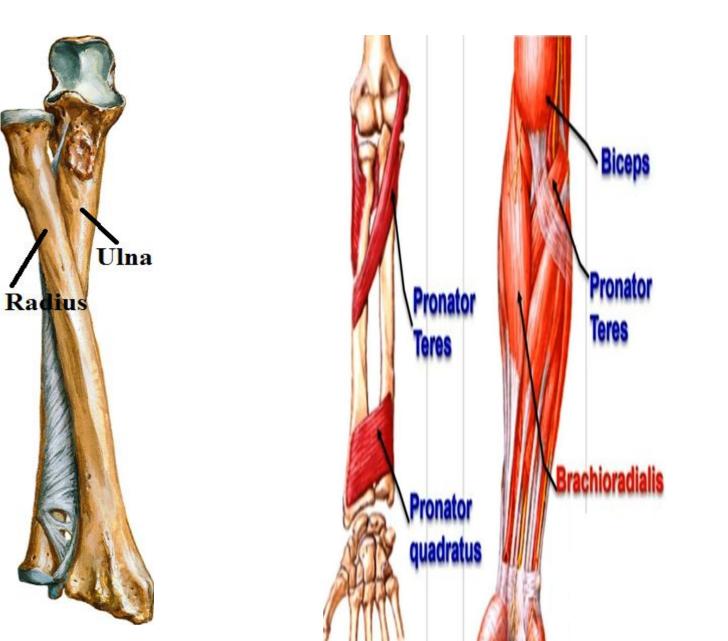
B-INFERIOR R&DIOULN&R JOINT

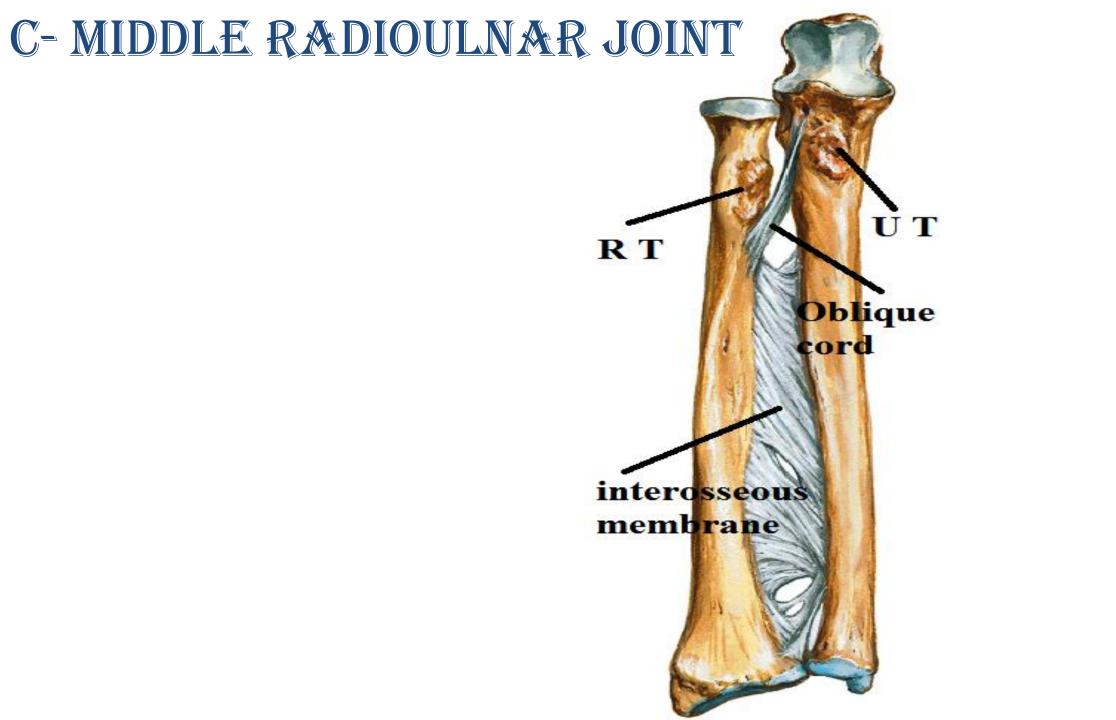


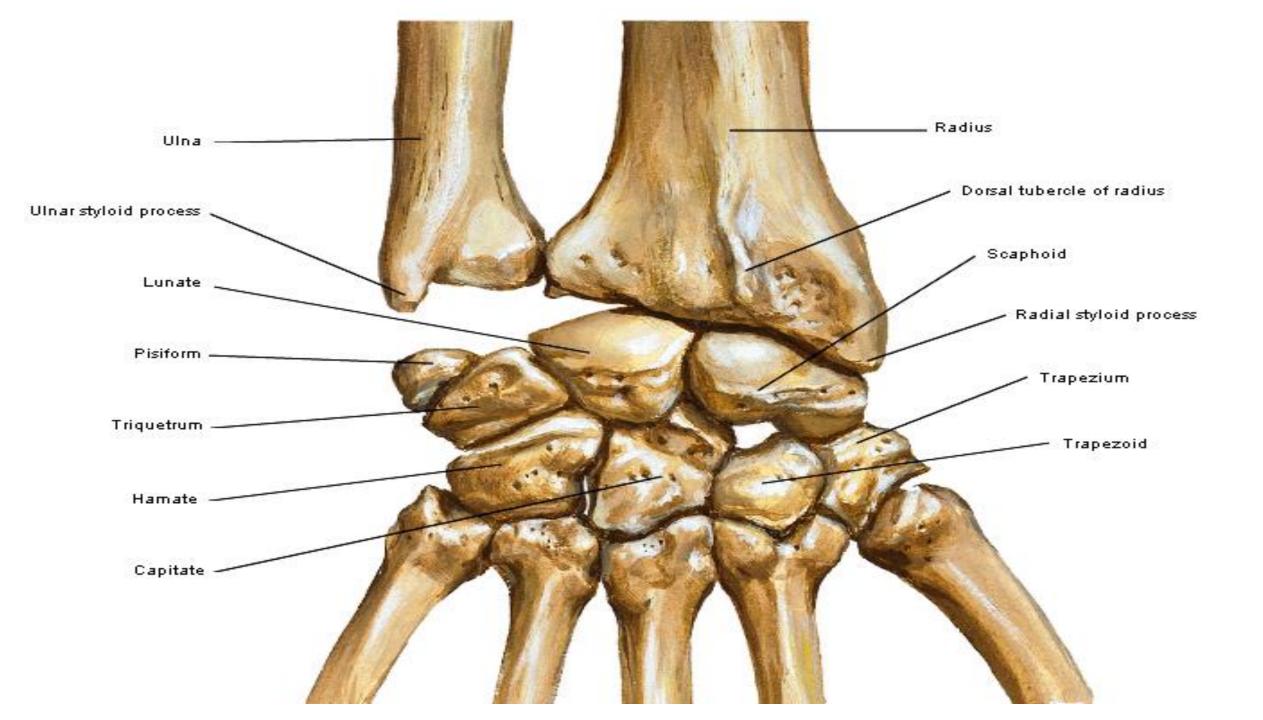


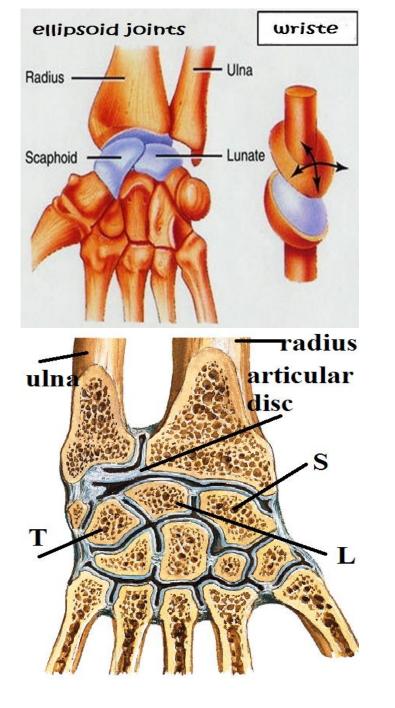


RADIOULNAR JOINT

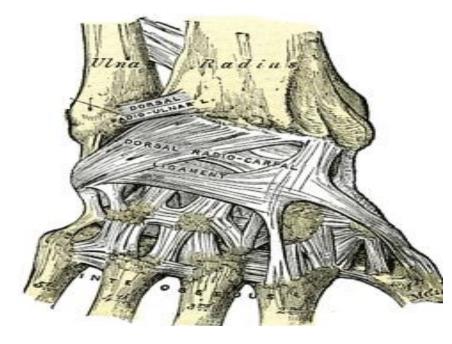


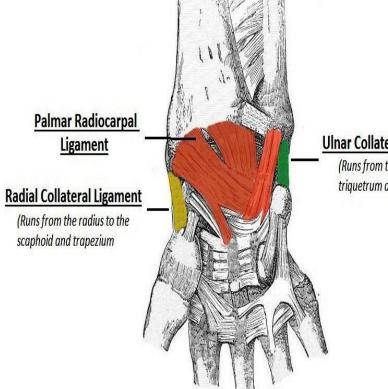




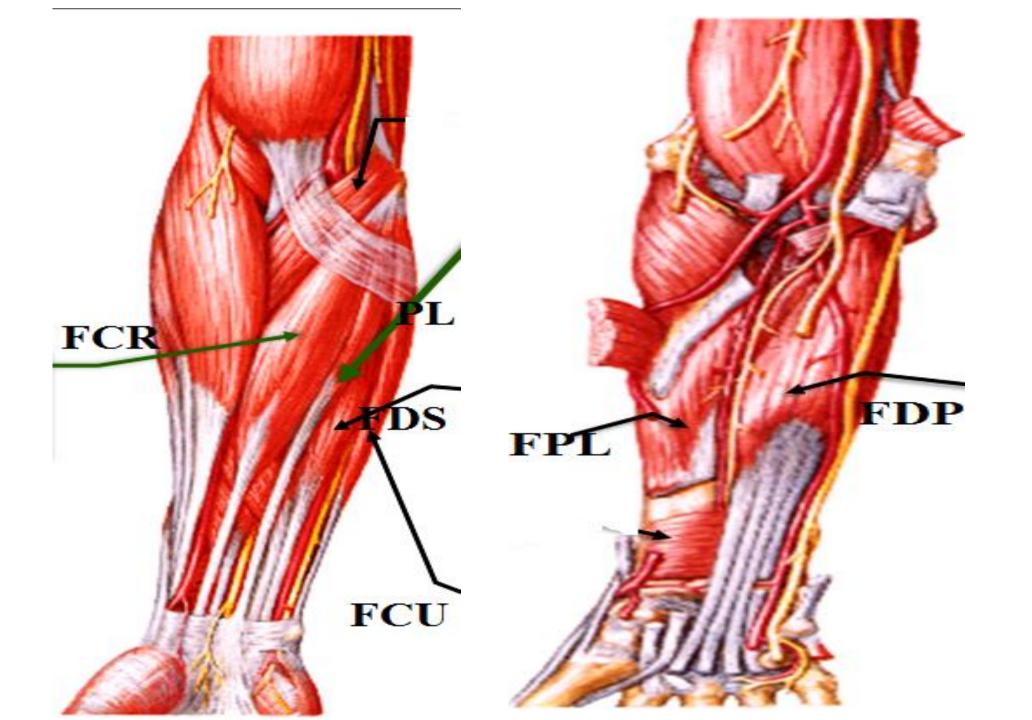


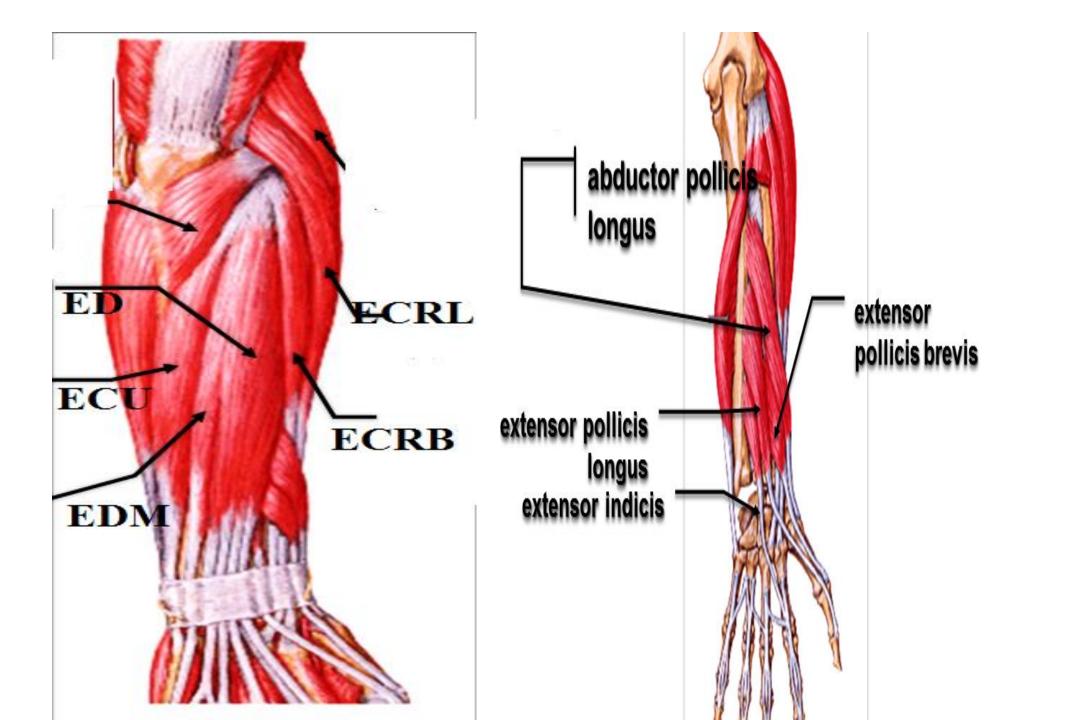
Ligaments:-



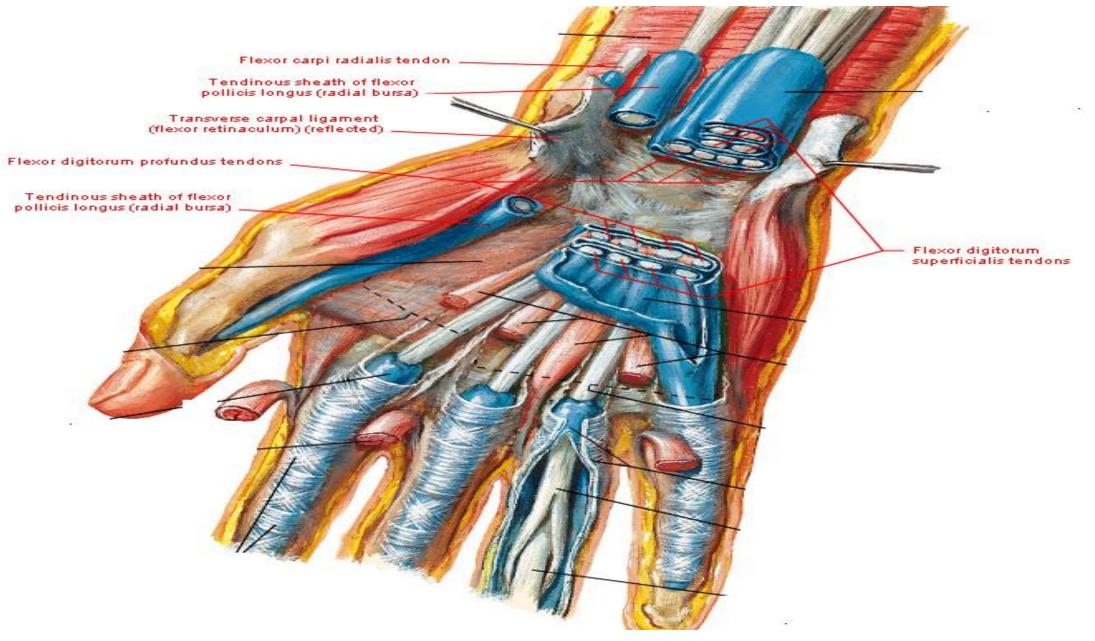


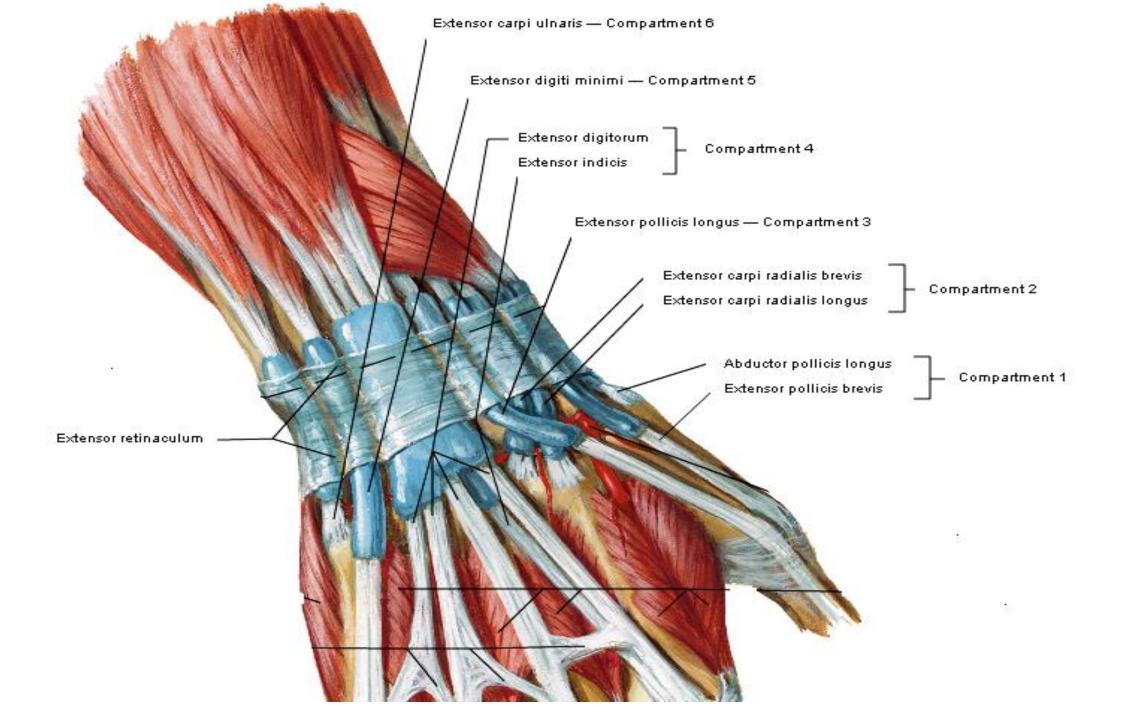
Ulnar Collateral Ligament (Runs from the ulna to the triquetrum and pisiform)



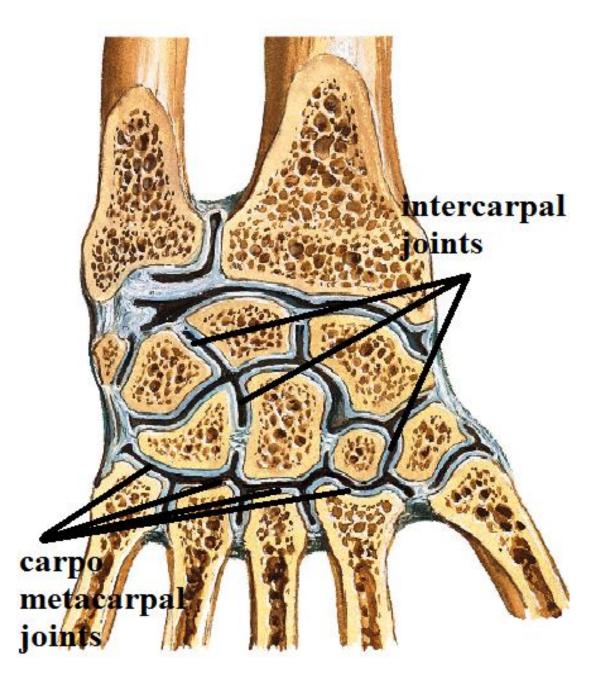


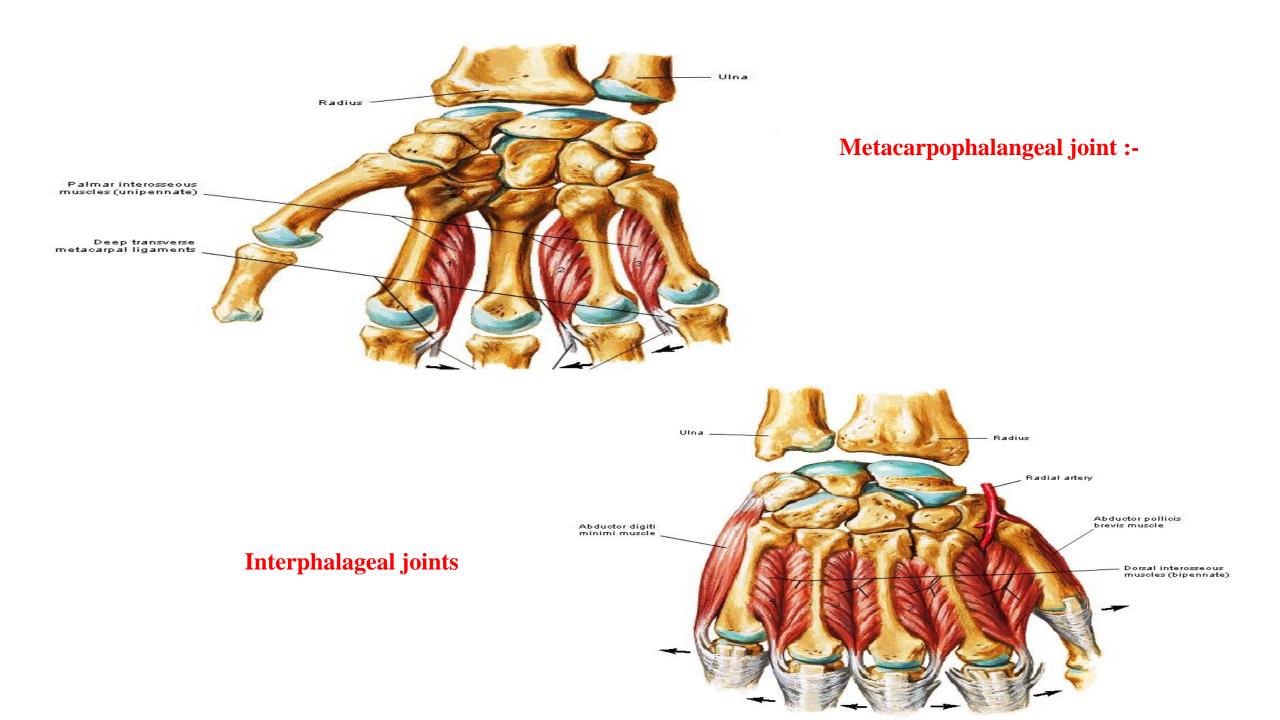
Relations



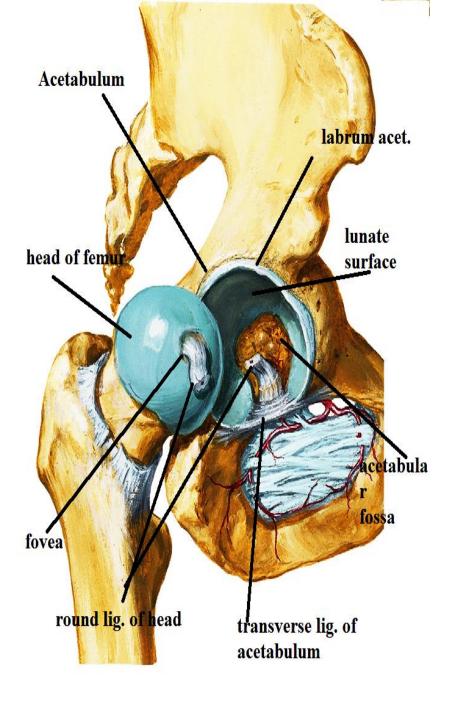


JOINTS OF THE HAND



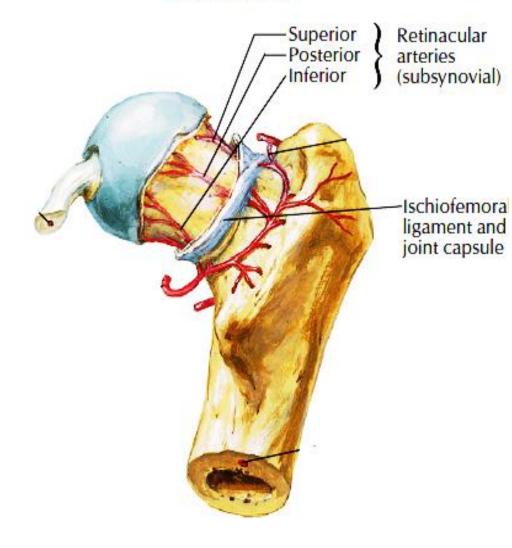


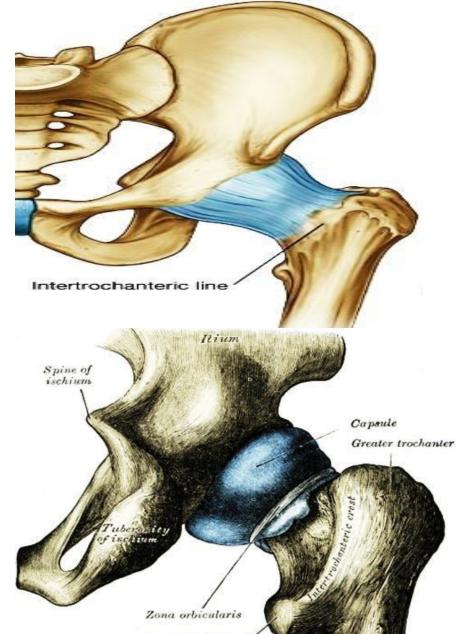
HIP JOINT



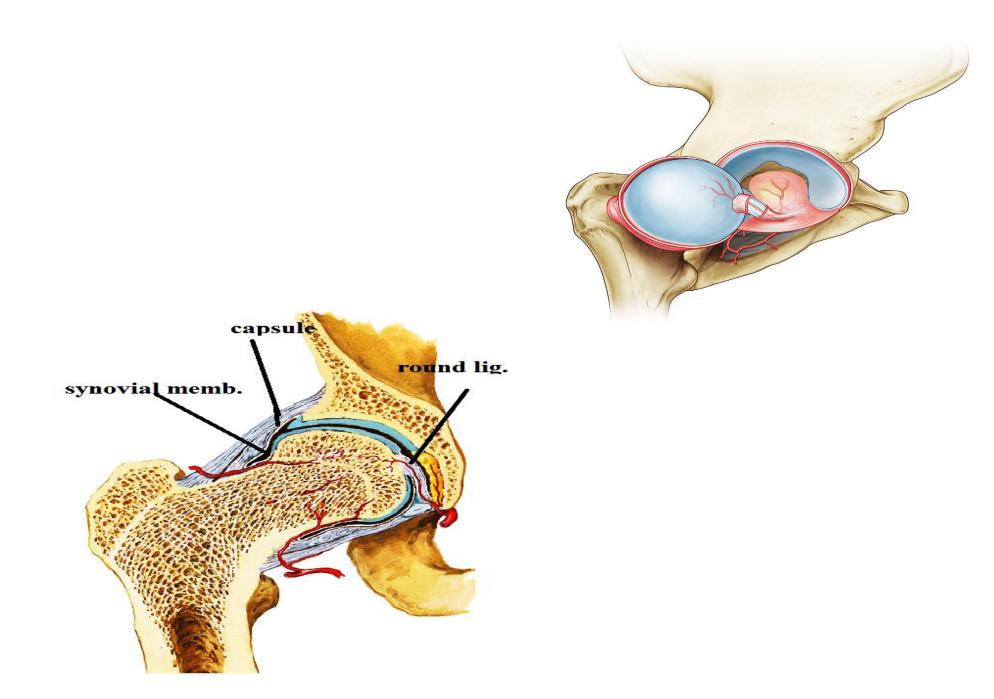


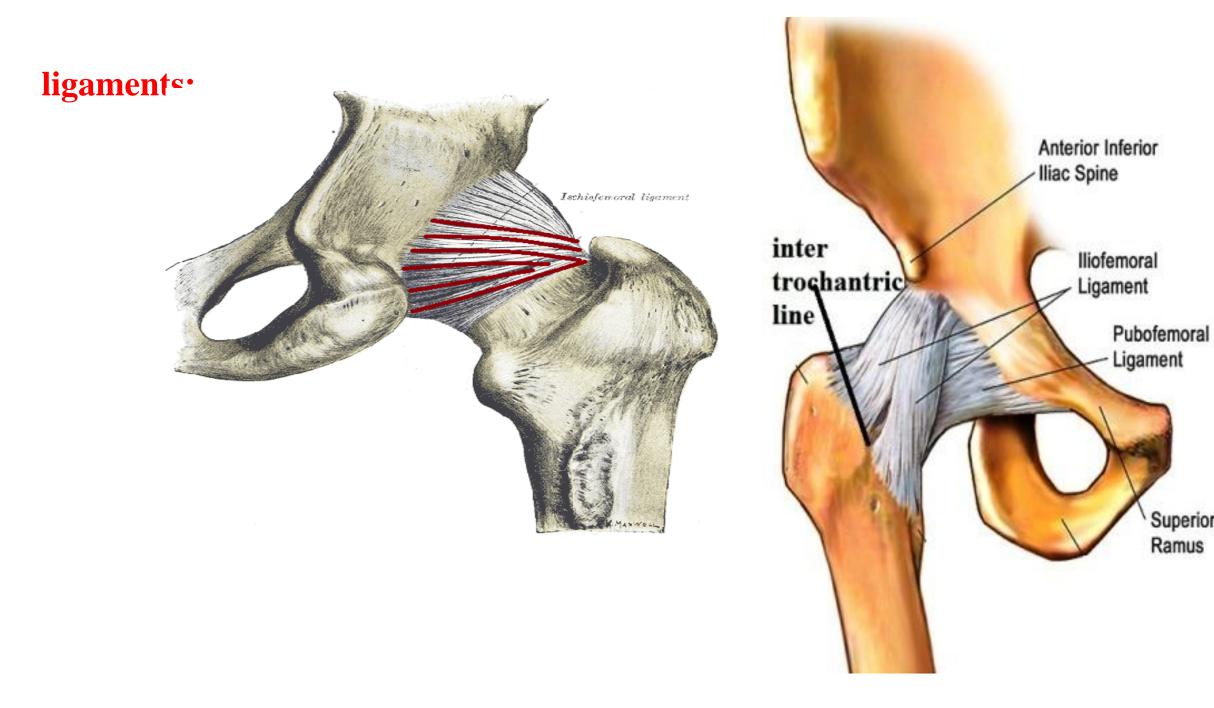
Posterior view



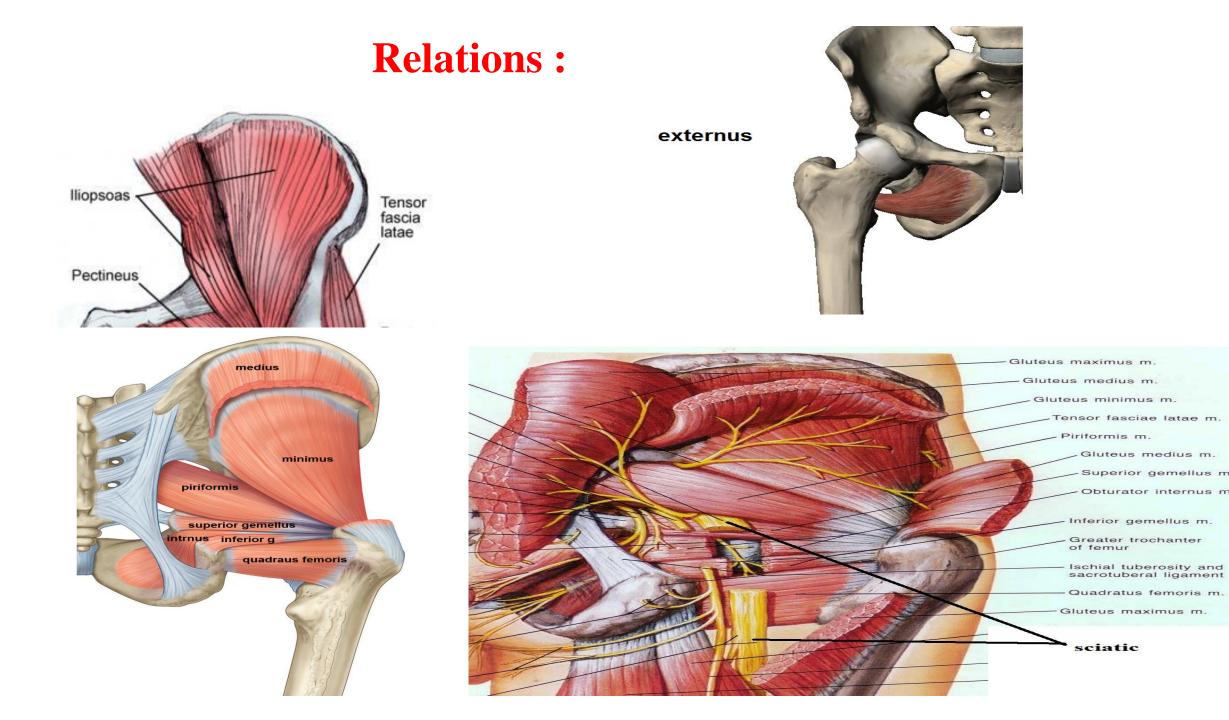


Lesser trochanter

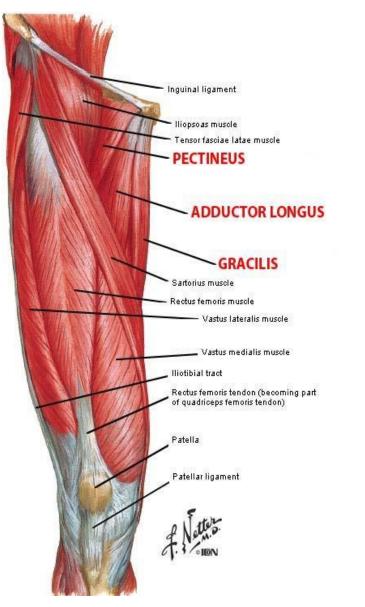


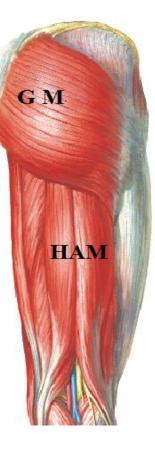


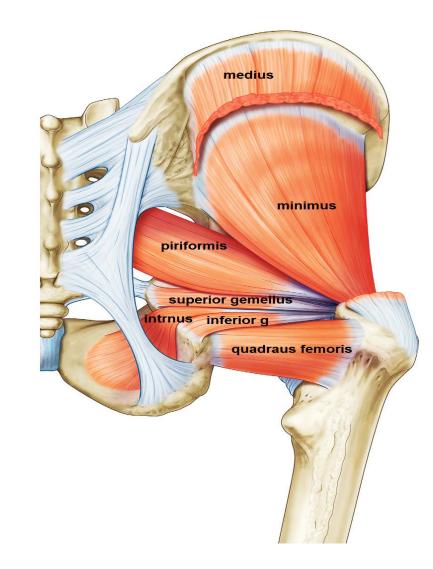
Superior Ramus



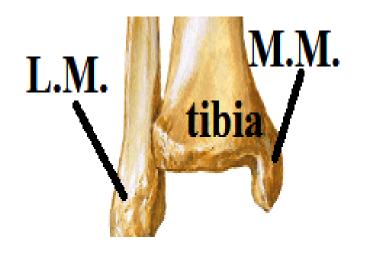
movements & muscles :

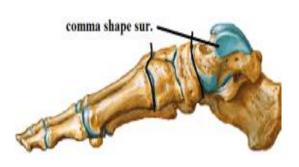


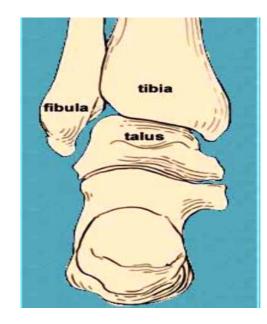


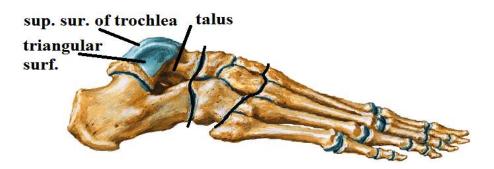


ANKLE JOINT & JOINTS OF FOOT





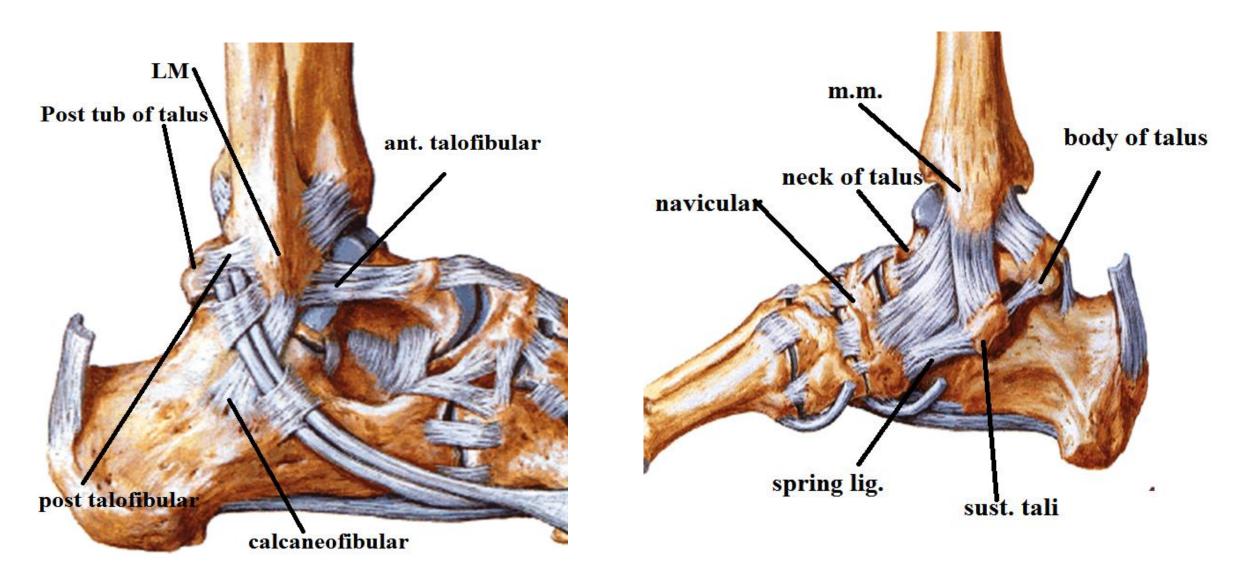




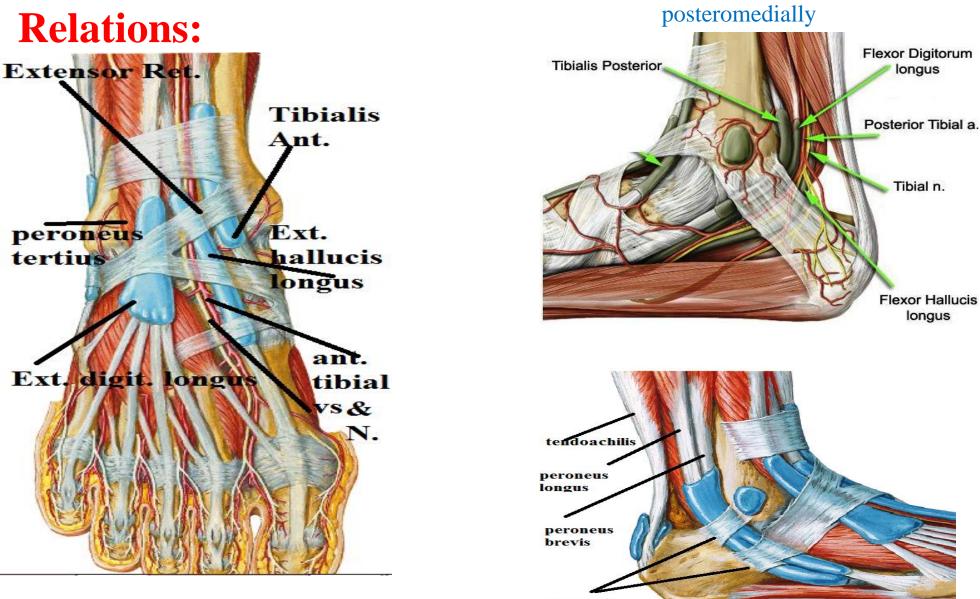


ANKLE JOINT

Ligaments:



ANKLE JOINT

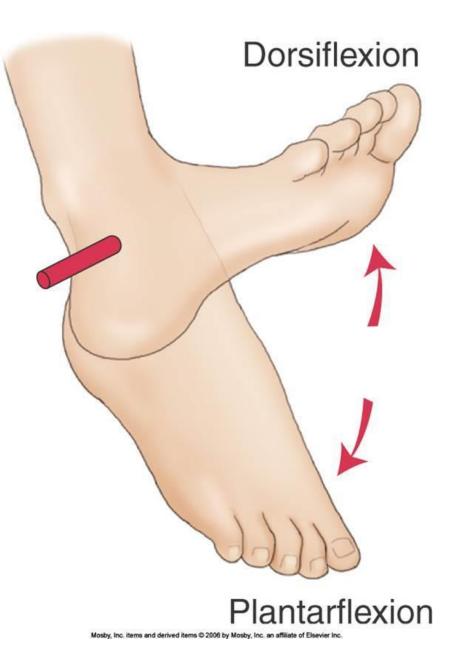


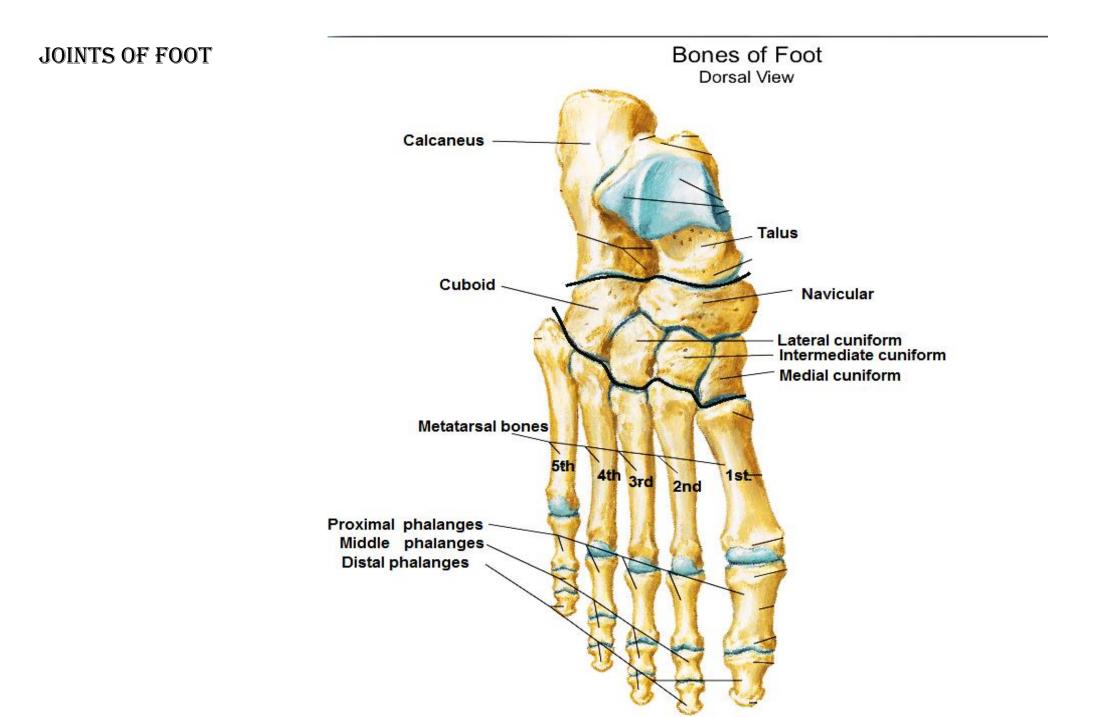
peroneal retinacula Posterolaterally

Anteriorly

ANKLE JOINT

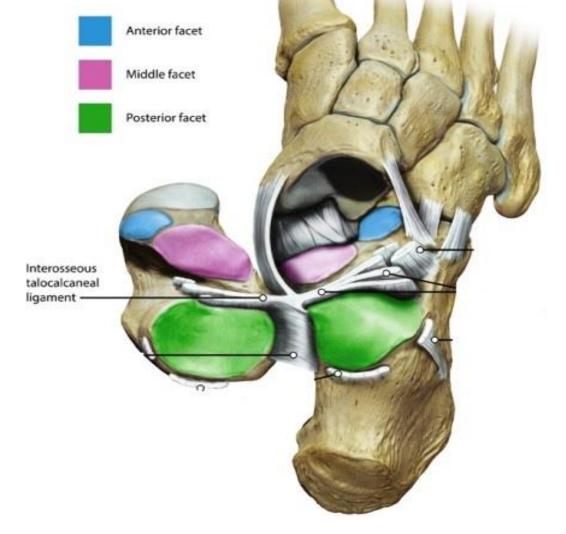
Movements:

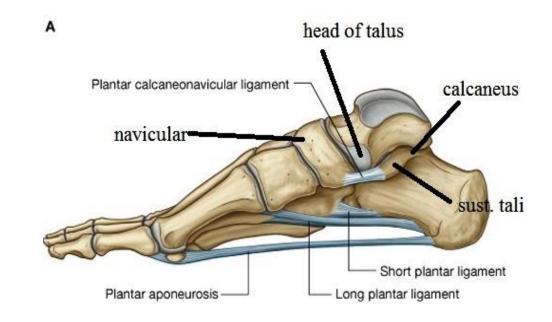




1-SUBTALAR JOINT

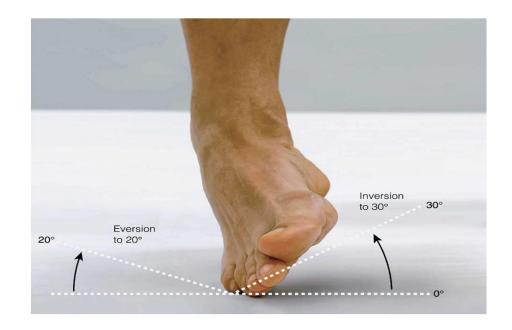
JOINTS OF FOOT 2- T&LOC&LC&NEON&VICUL&R





JOINTS OF FOOT

Movements





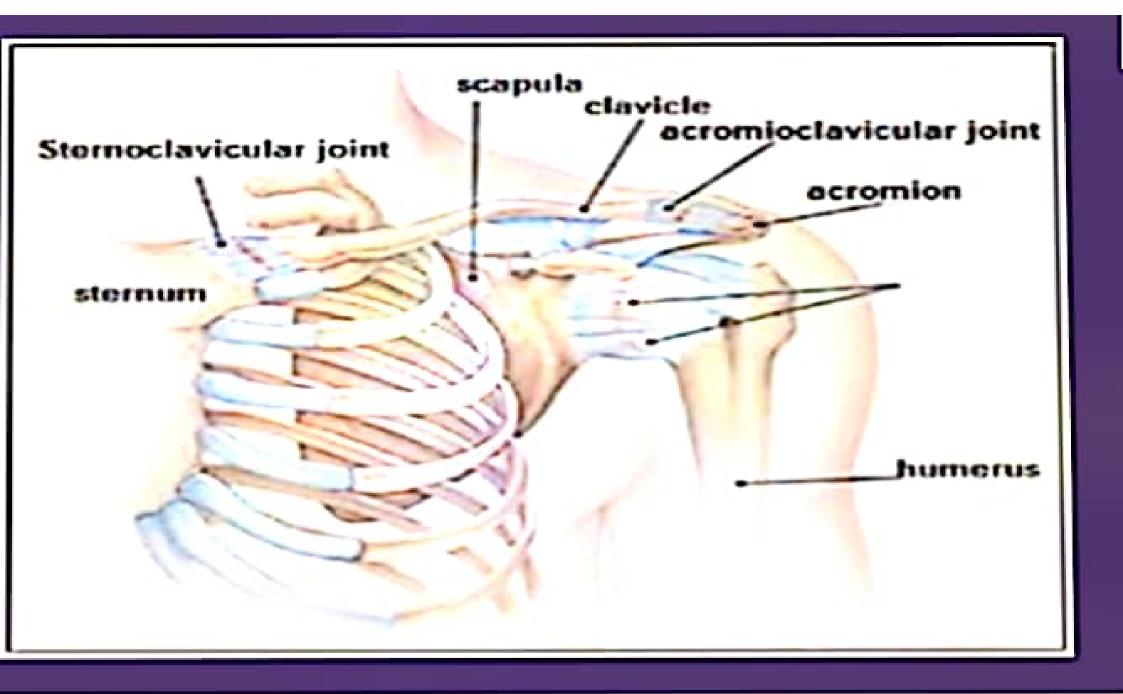
eversion

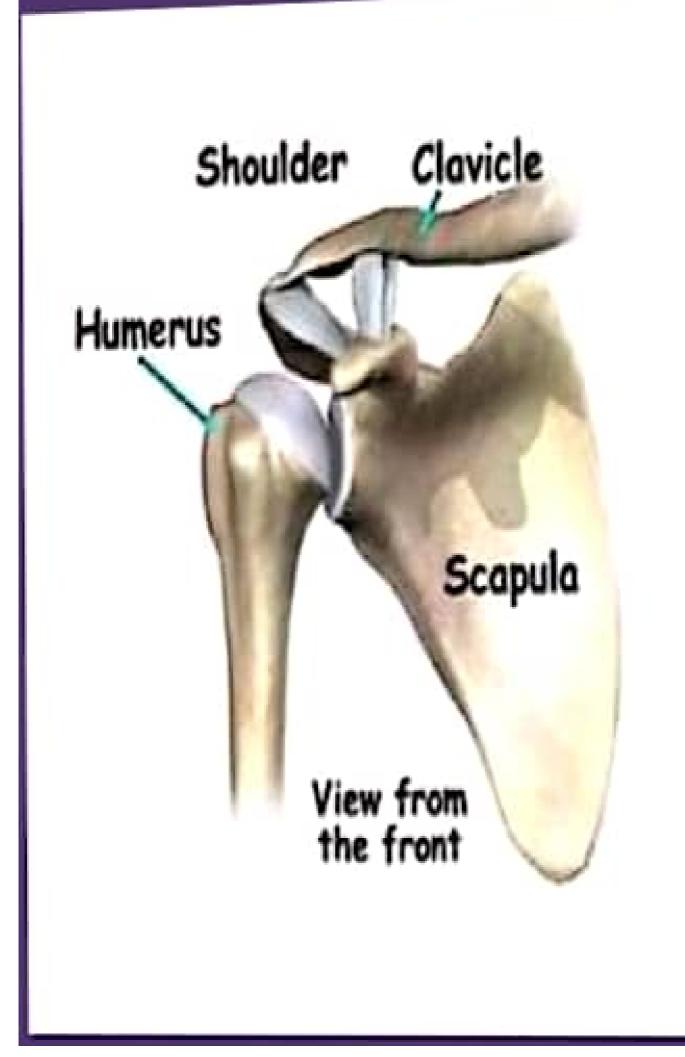
1- Inversion

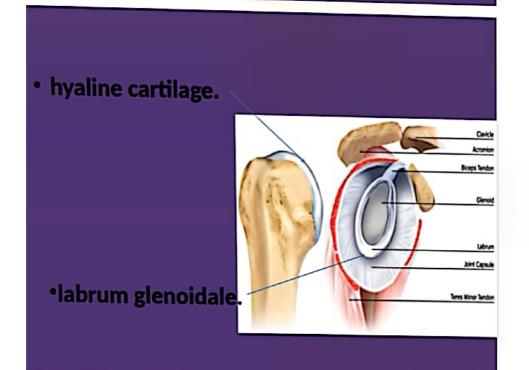
TIBIOFIBUL&R JOINTS

1- superior tibiofibular

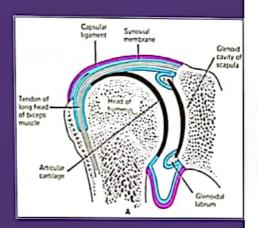






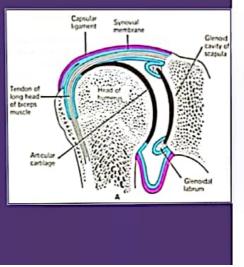


- attached to the margins of the glenoid cavity outside the labrum glenoidal.
- Laterally is attached to the anatomical neck of the humerus, except inferiorly where it extends about 1 cm to the shaft.



Synovial membrane

It lines all the structuresinside the capsule of the shoulder joint EXCEPT the .articular cartilage It forms a tubularsheath around the tendon of long head of biceps so it is an intra-capsular, .extra-synovial structure



JOINT (---- humeral)

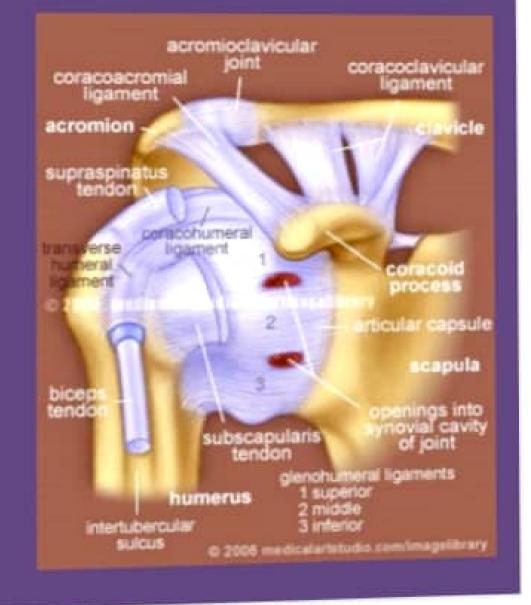
1- False ligaments:

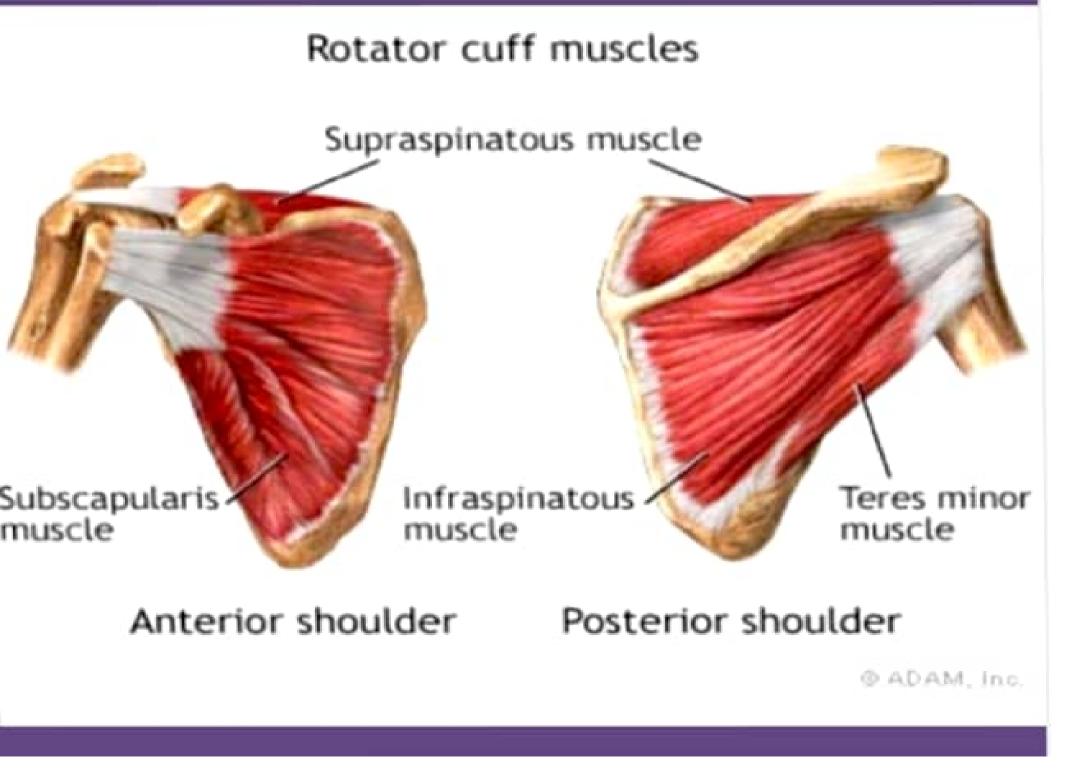
glenohumeral ligaments (Thickenings of the Capsule)

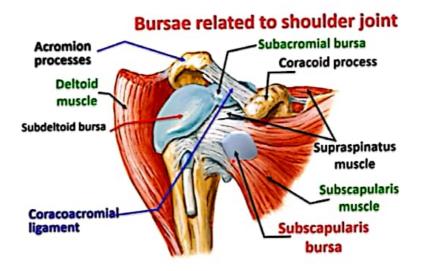
2- True ligaments:

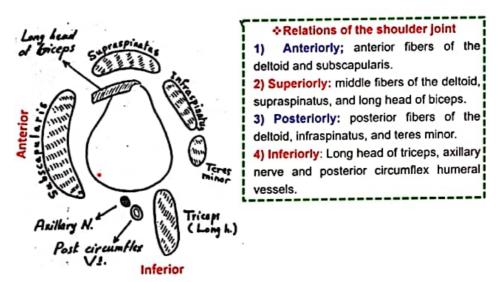
 Coraco-humeral ligament.

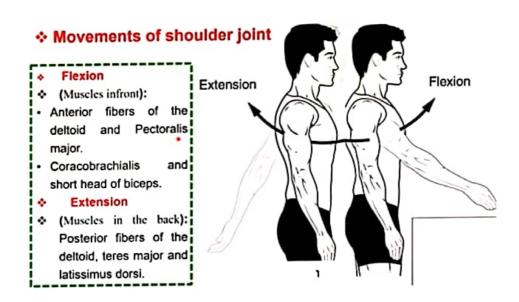
 Transverse humeral ligament (bridges over the bicipital groove).











Shoulder (Glenohumeral Joint)

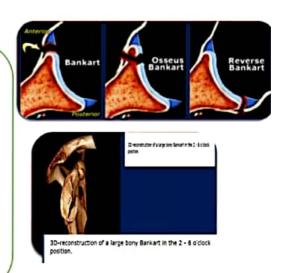


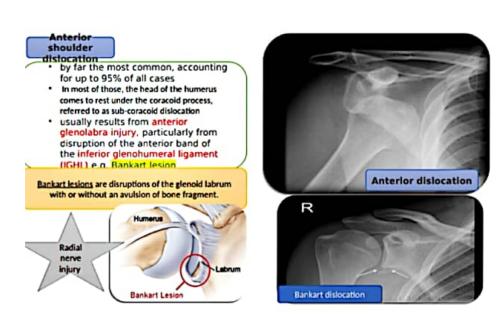
X ray of shoulder joint

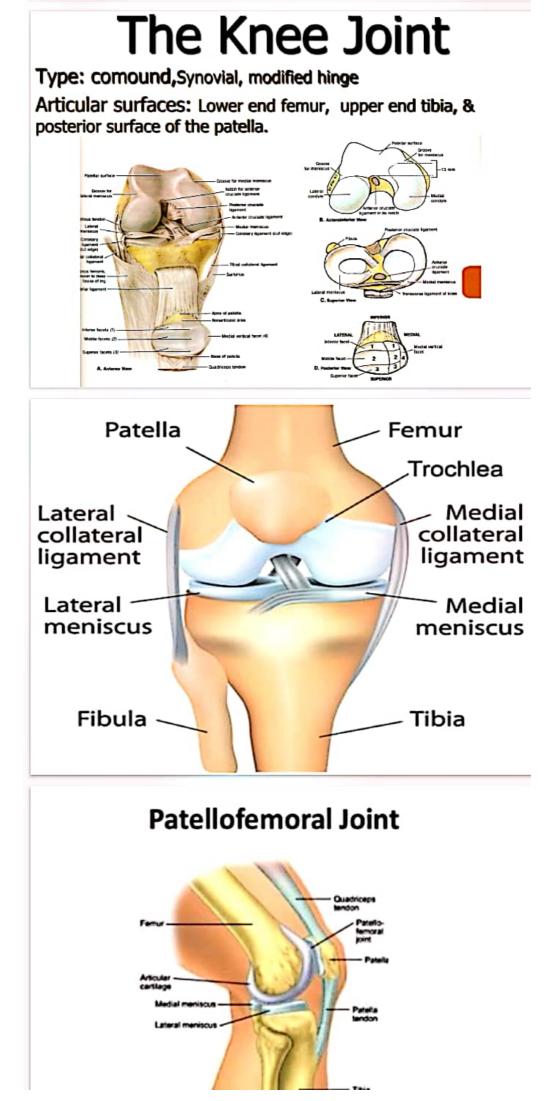


Bankart

Detachment of the anteroinferior labrum (3-6 o'clock) with complete tearing of the anterior scapular periosteum with or without an osseus fragment of the glenoid. Reverse Bankart Detachment of the posteroinferior labrum (6-9 o'clock) with tearing of the posterior scapular periosteum with or without an osseus fragment of the glenoid.

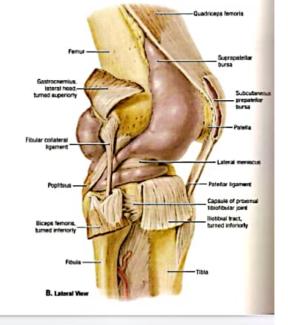






The capsule is thin:

1- In front: It is absent and replaced by quadriceps tendon, patella, and ligamentum patellae.



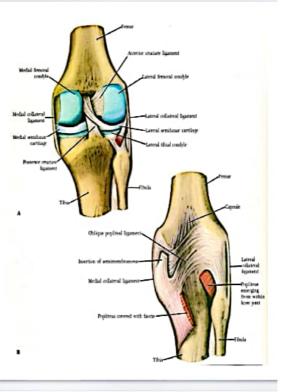
2- Behind: the capsule is thin,

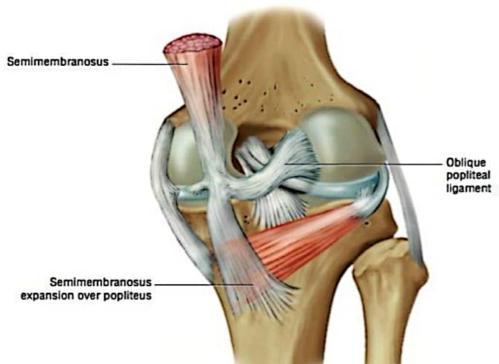
It is thickened by the posterior oblique ligament (strong ligament, prevents hyper extension.
It is perforated by the popliteus tendon.

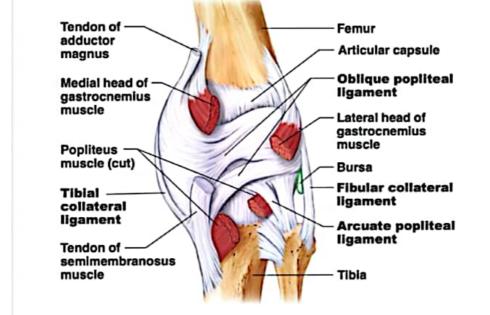
Ligaments (outside the joint):

1- The patellar lig. (ant), 2- The posterior oblique lig.

- 3- The lateral collateral lig.
- 4- The medial collateral lig.
- 5- arcuate lig

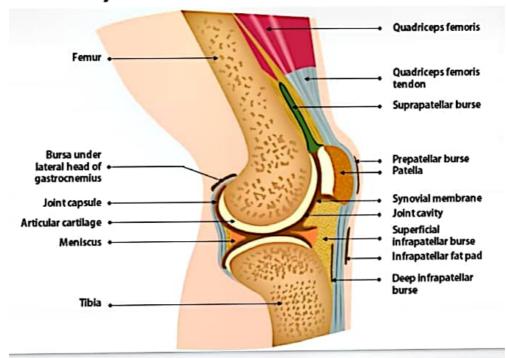






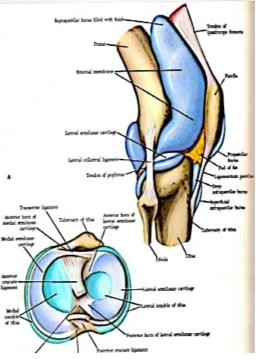
(d) Posterior view of the joint capsule, including ligaments © 2016 Premor Education, Inc.

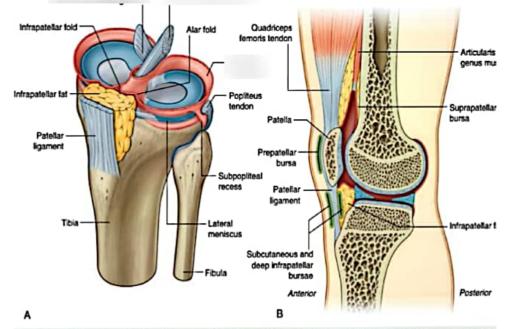


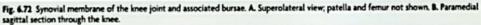


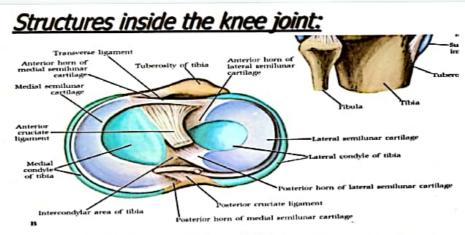
The synovial membrane

- 1- lines the capsule,
- attaches to the peripheral edges of the menisci (semilunar cartilages),
- 3- covers the front of the ant. cruciate ligament, and the back of posterior cruciate ligament.
- 4- communicates with:
 - suprapatellar bursa,
 - popliteus bursa,
 - semimembranosus burse,
 - gastrocnemius bursa.



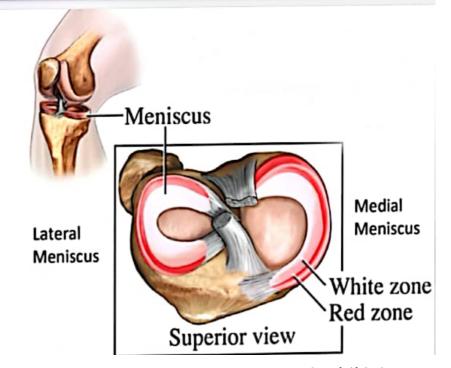






1- The medial semilunar cartilage (Medial meniscus): C-shaped, fixed to the capsule of the knee joint and to the medial collateral ligament (liable to injury), its ant. Horn is attached to the most ant. part of the intercondylar area of the upper end tibla and connected to the lat. semilunar cartilage by the transverse lig.

2- The lateral semilunar cartilage (lat. Meniscus): Circular in shape, more mobile (separated from capsule and lat. collateral lig. by popliteus tendon, so it is more adaptive to twisting movement and less liable to Injury.



Structures inside the knee joint (cont.)

3- Anterior cruciate ligament:

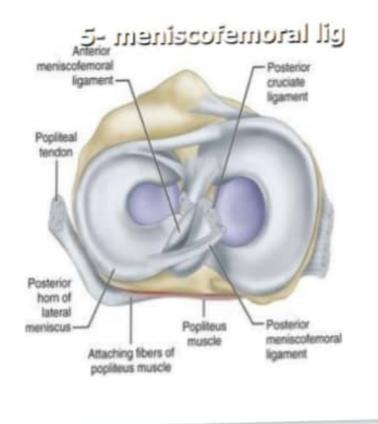
From ant. intercondylar area of tibia - → upward, backward and laterally to the lat. condyle of the femur.
 It is relaxed in knee flexion, tense in

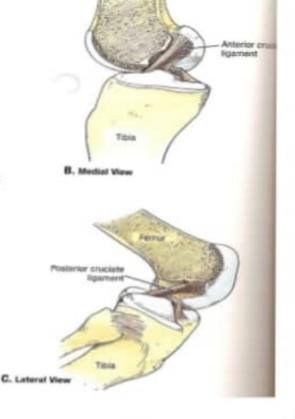
extension so it prevents hyperextension.

4- Posterior cruciate ligament:

From post. Intercondylar area of tibia
→ upwards, forward and medially to ant. part of medial femoral condyle.
It is relaxed in extension, tense in flexion so it prevents anterior femoral dislocation.

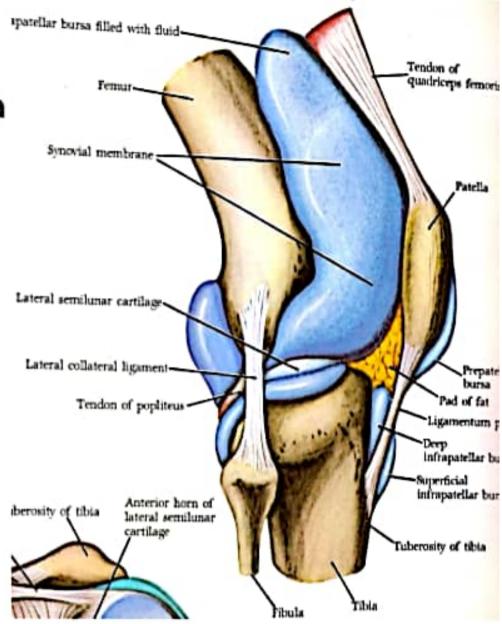
Structures inside the knee joint (cont.)

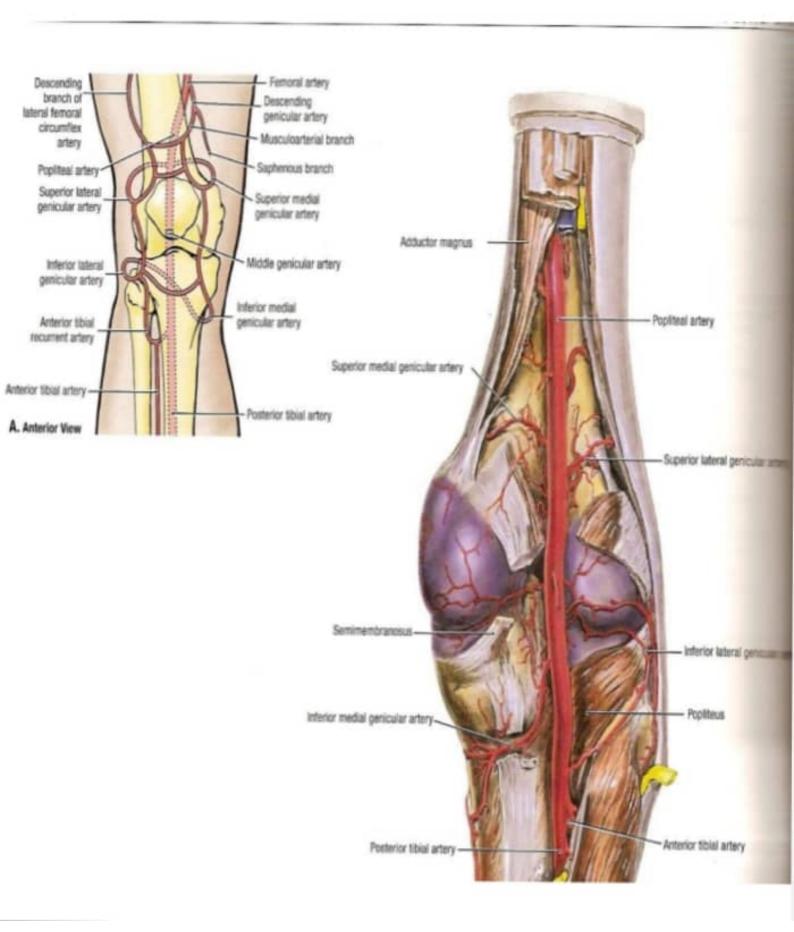


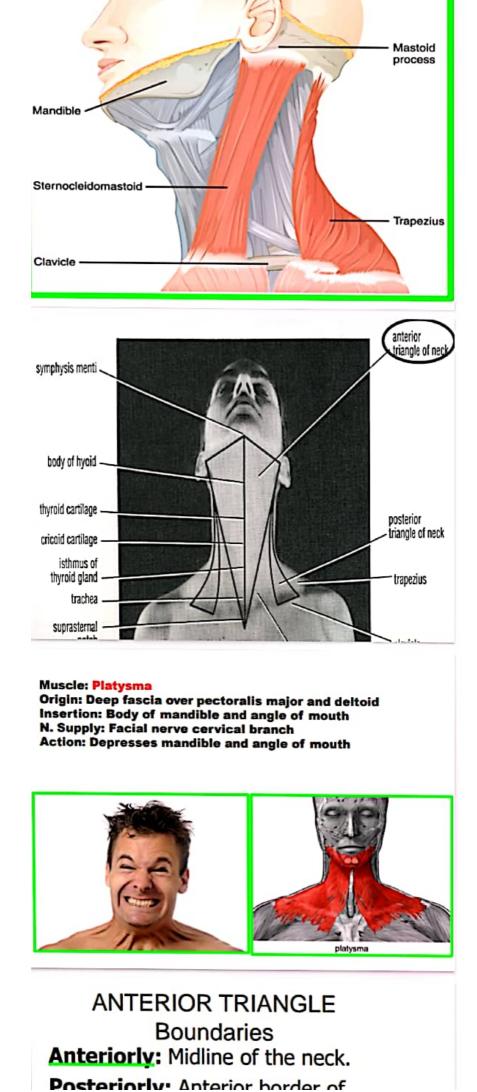


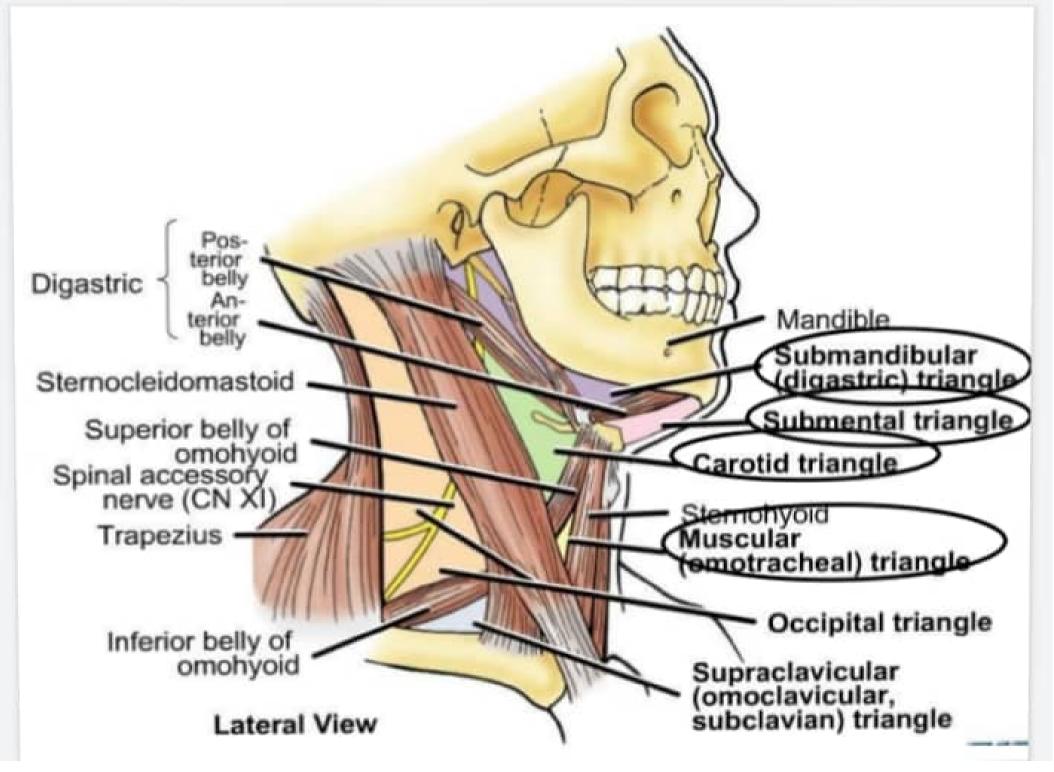
SURSAE related to the knee joint: - Anterior to the knee:

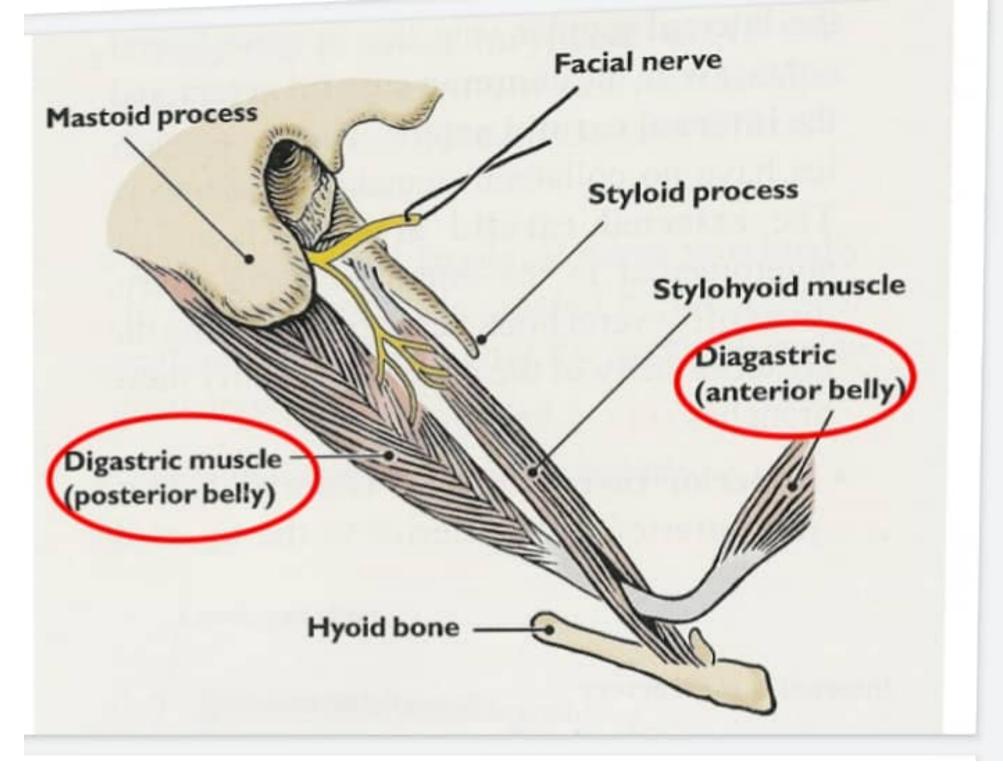
- 1. supra-patellar bursa
- 2. prepatellar bursa
- 3. superficial infra-patellar bursa
- deep infrapatellar bursa
- Posterior to the knee:
 - popliteus bursa
 - semimembrenosus bursa
 - semitendinosus bursa
 - gastrocnemius bursa
 - gracilis bursa
 - biceps bursa
 - sartorius bursa

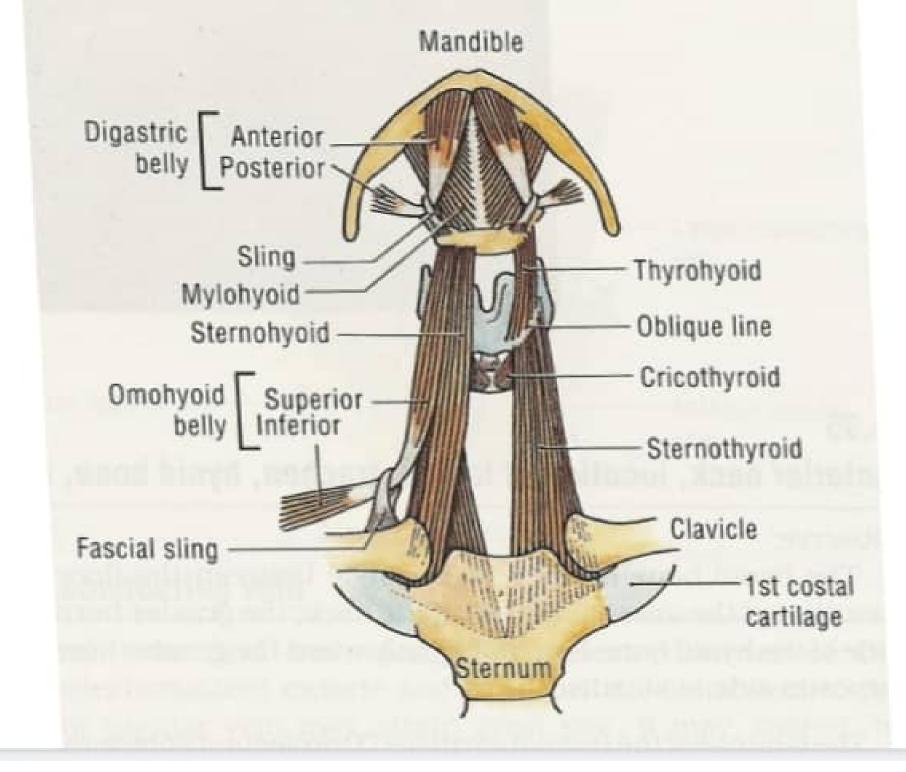


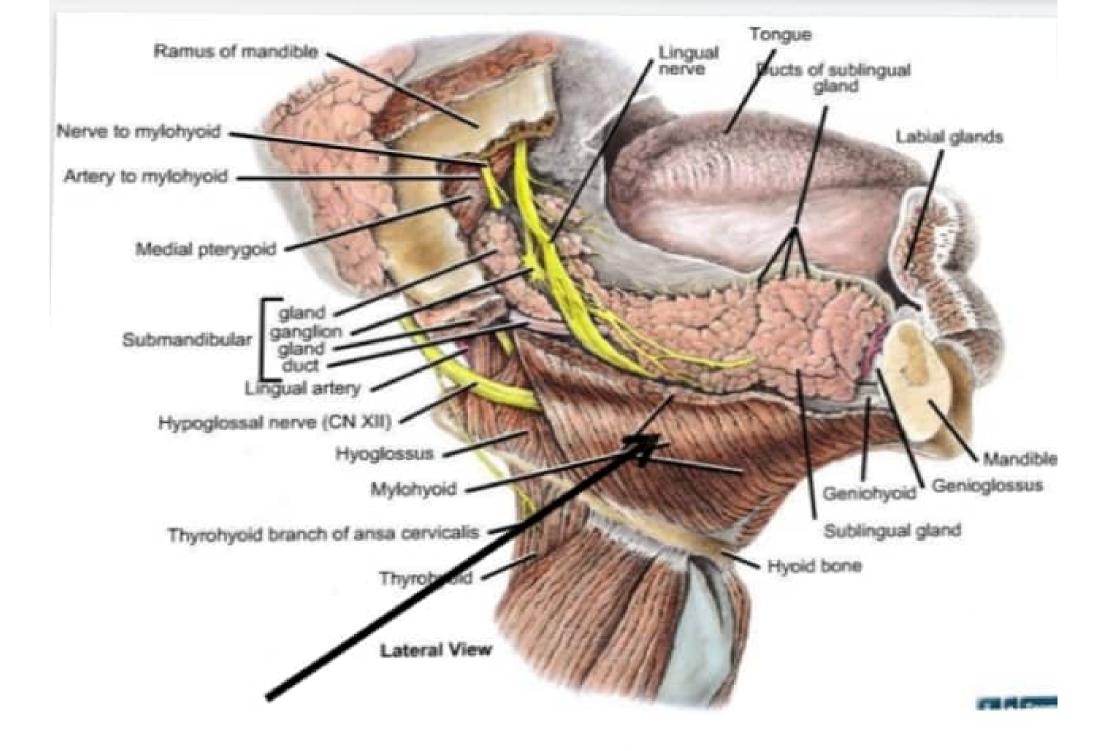


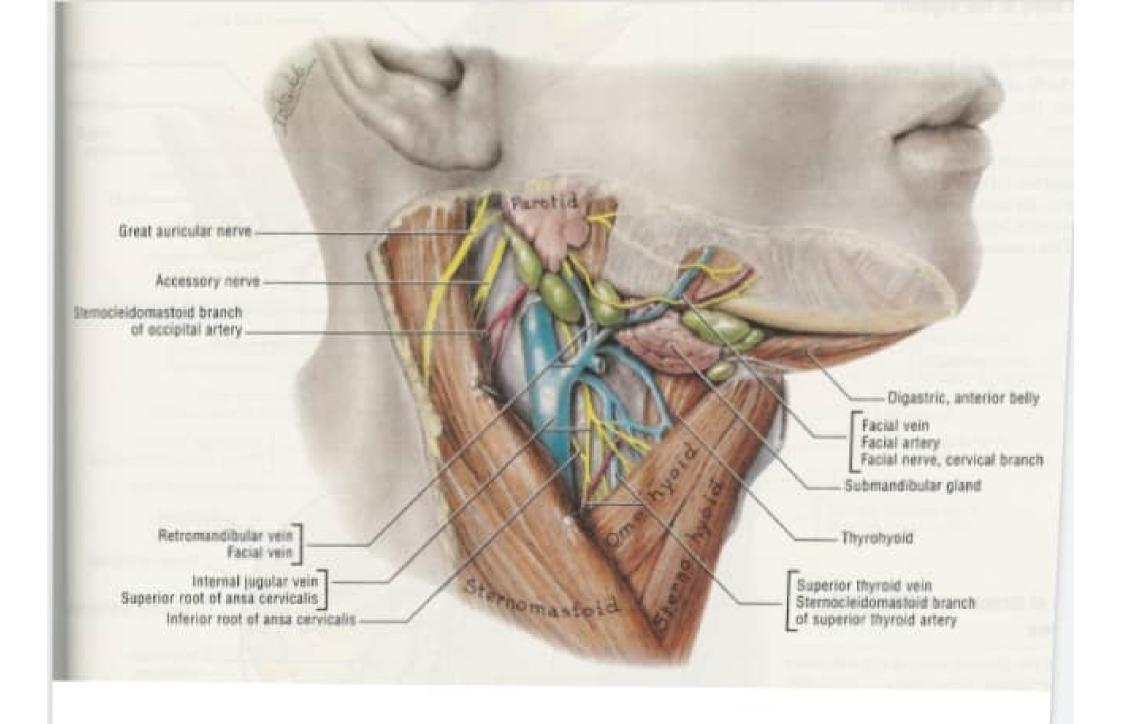


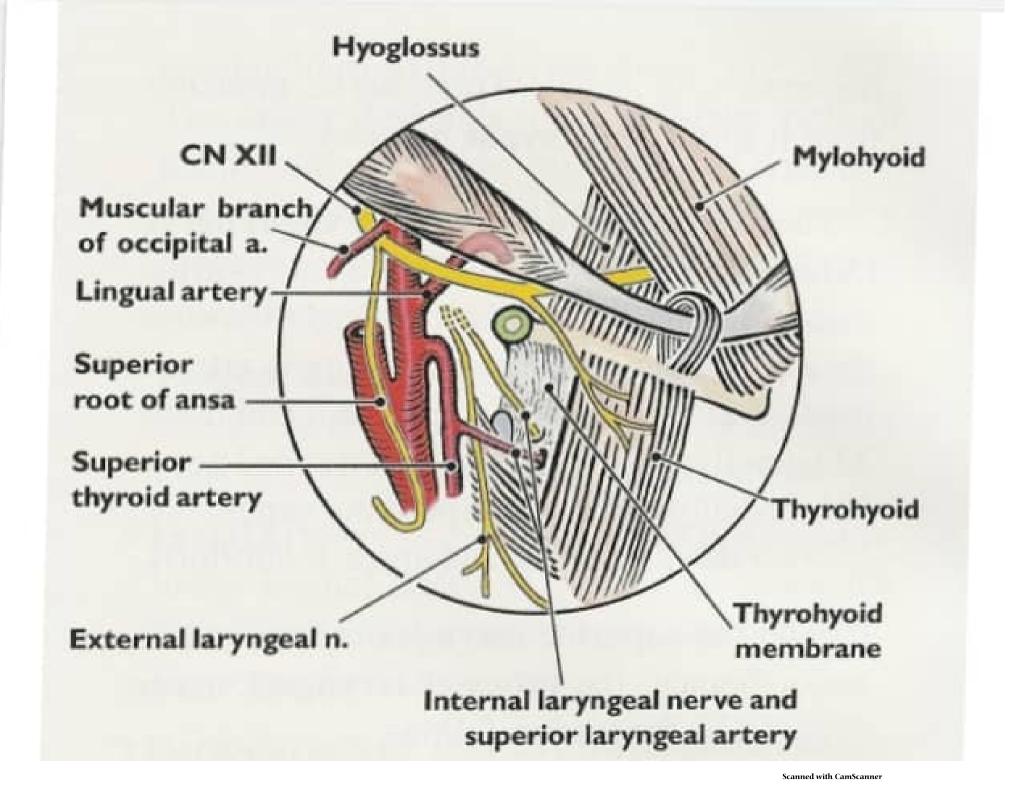


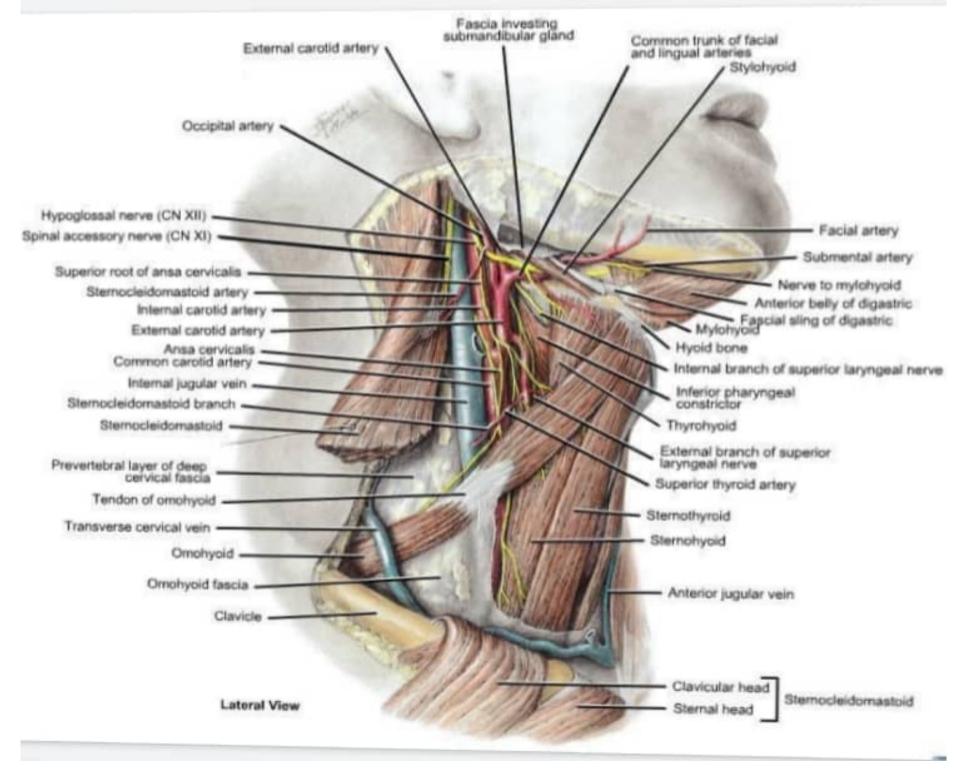


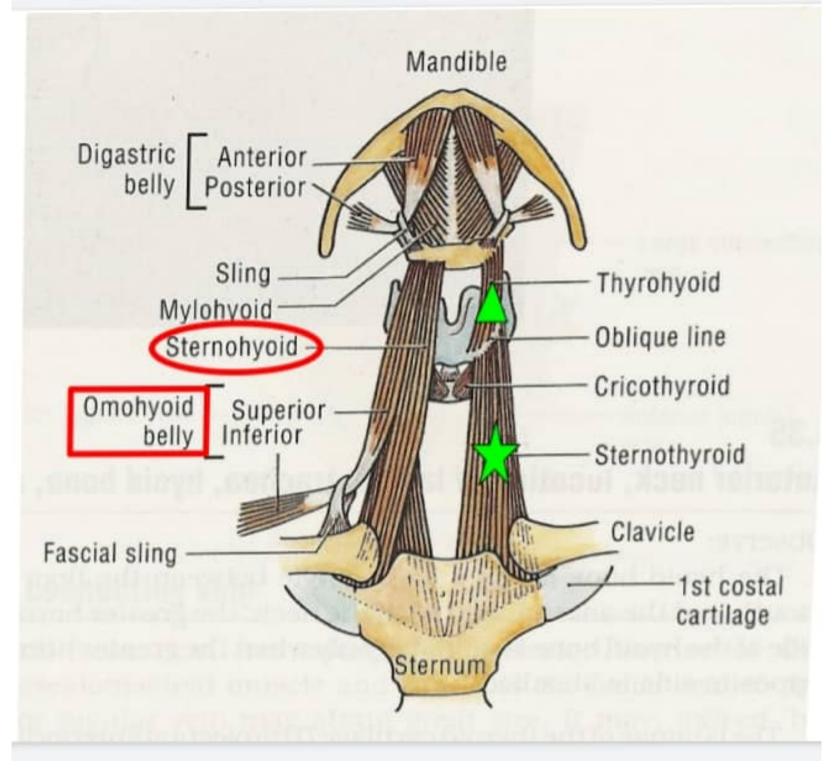












Muscle: Omohyoid Inferior belly

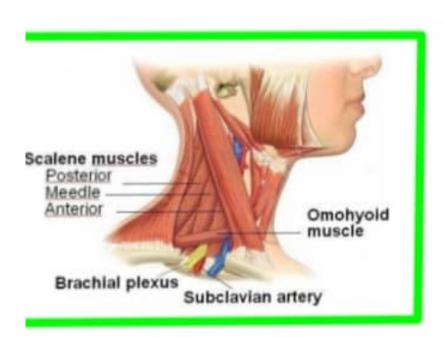
Origin: Upper margin of scapula and suprascapular liga Insertion: Intermediate tendon is held to clavicle and fi by fascial sling

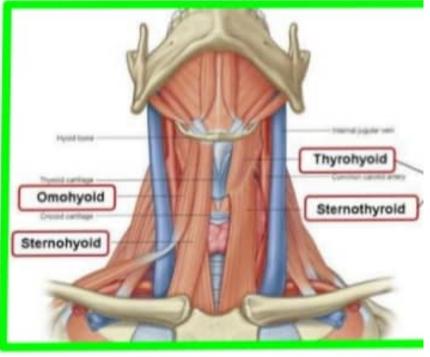
N. Supply: Ansa cervicalis; C1, 2, and 3

Action: Depresses hyoid bone

Superior belly

Origin: Lower border of body of hyoid bone

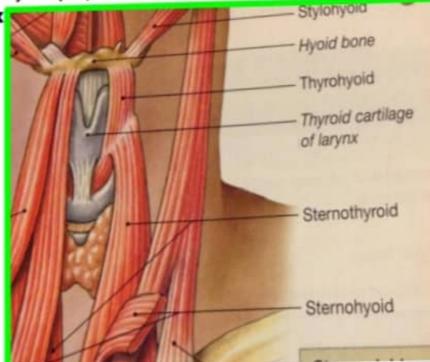


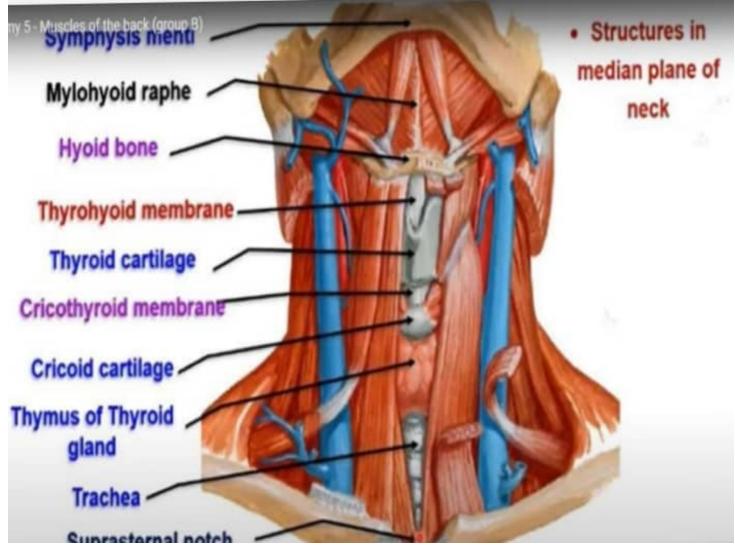


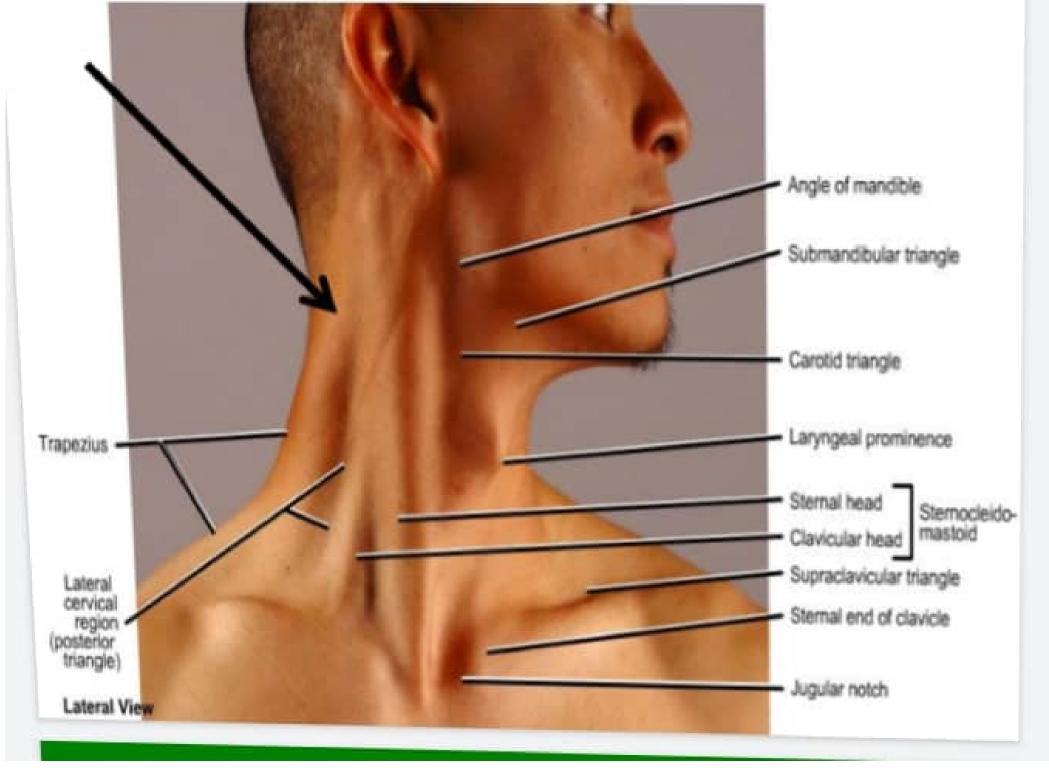
Muscle: Sternothyroid Origin: Manubrium sterni Insertion: Oblique line on lamina of thyroid cartilage N. Supply: Ansa cervicalis; C1, 2, and 3 Action: Depresses larynx

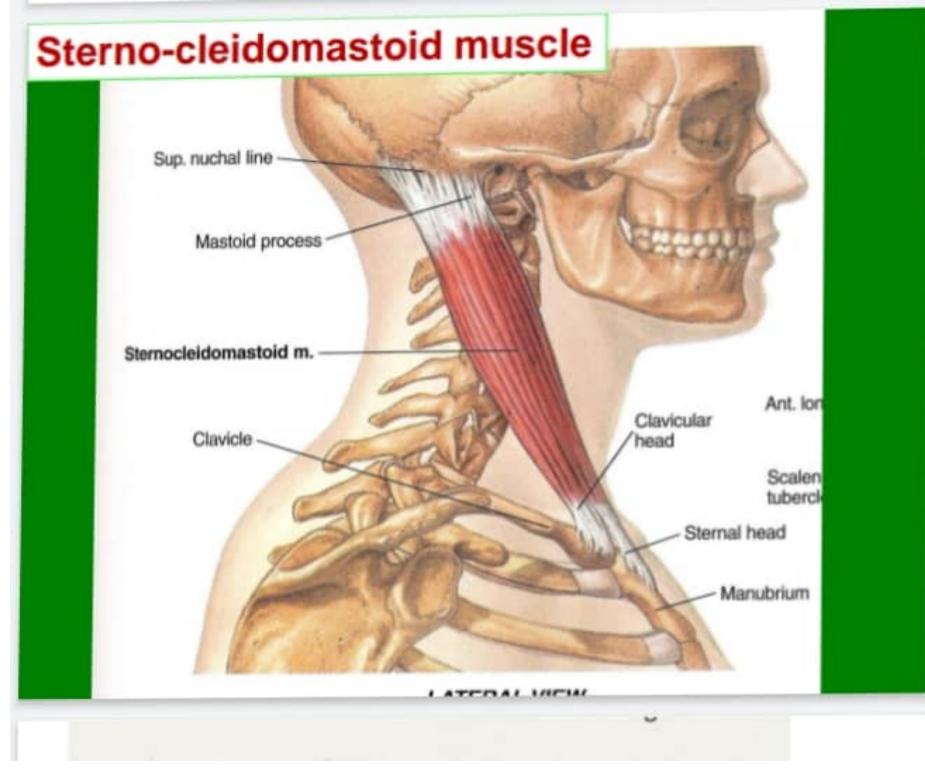
Muscle: Thyrohyoid

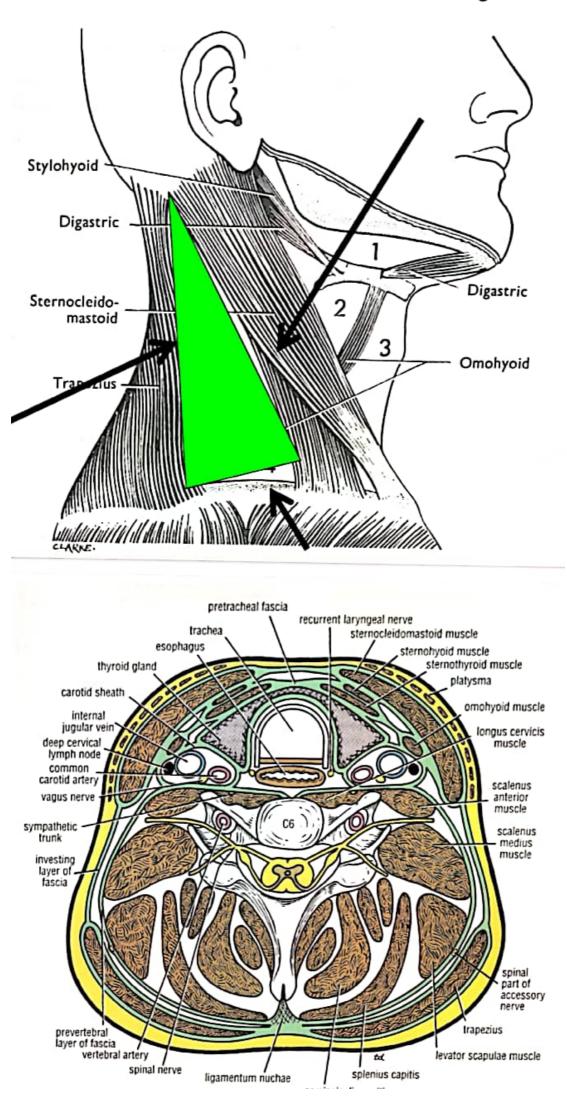
Origin: Oblique line on lamina of thyroid cartilage Insertion: Lower border of body of hyoid bone N. Supply: 1st cervical nerve Action: Depresses hyoid bone or elevates larynx

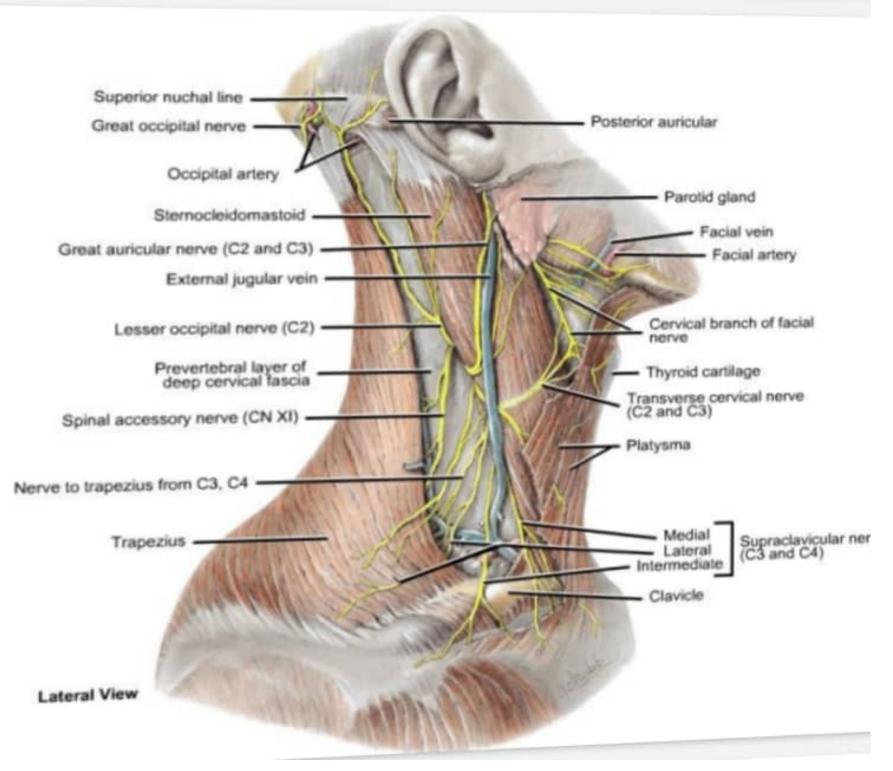


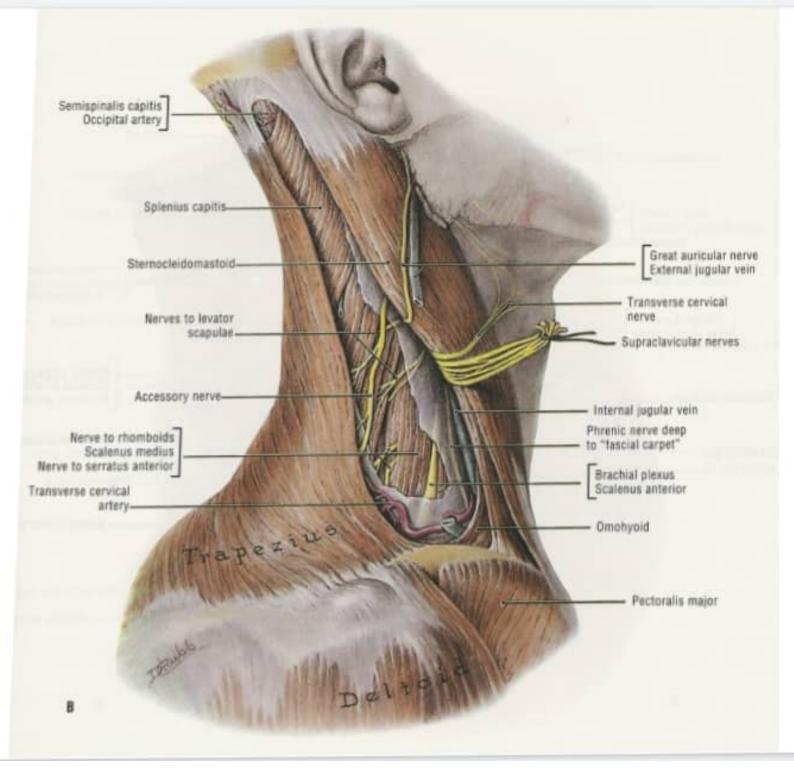






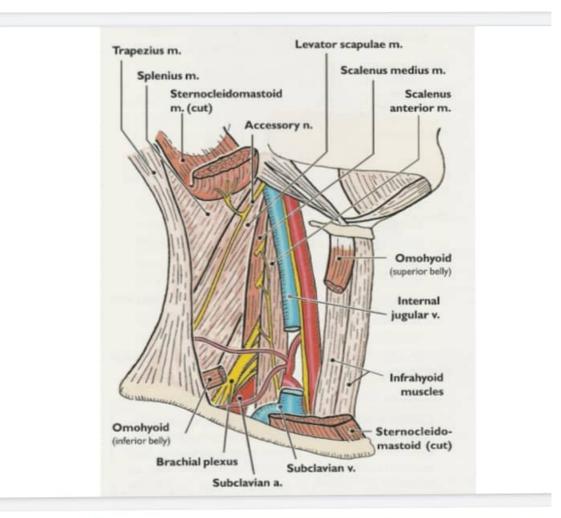


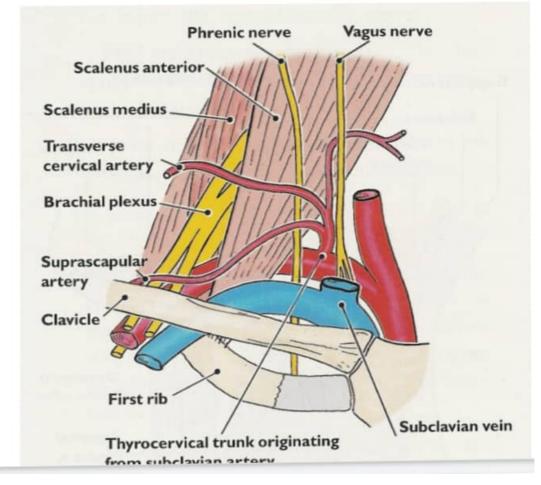




- <u>Muscie</u>.

1. Inferior belly of omohyoid muscle.





Muscles of the Neck

Muscle: Scalenus anterior

Origin: Transverse processes of 3rd, 4th, 5th, and 6th cervical vertebrae Insertion: 1st rib N. Supply: ventral rami C4, 5, and 6 Action: Elevates 1st rib; laterally flexes

cervical part of vertebral column

With the second se

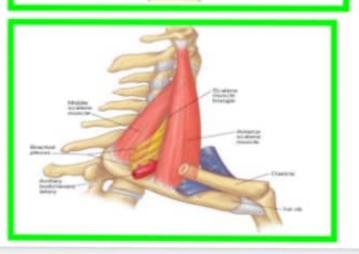
Muscle: Scalenus medius

Origin: Transverse processes of upper six cervical vertebrae

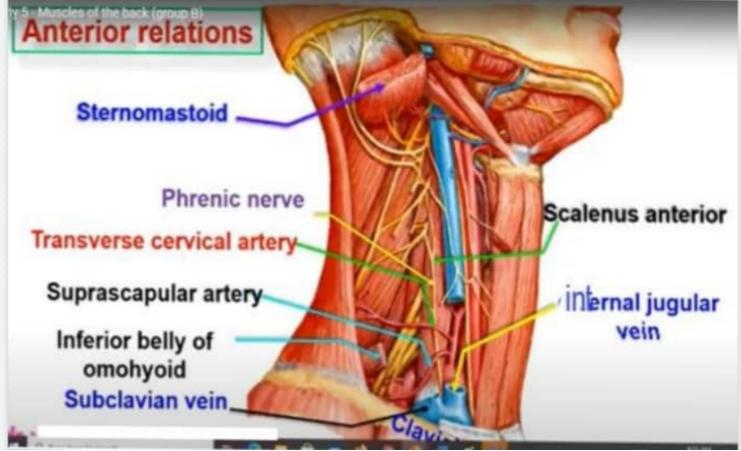
Insertion: 1st rib

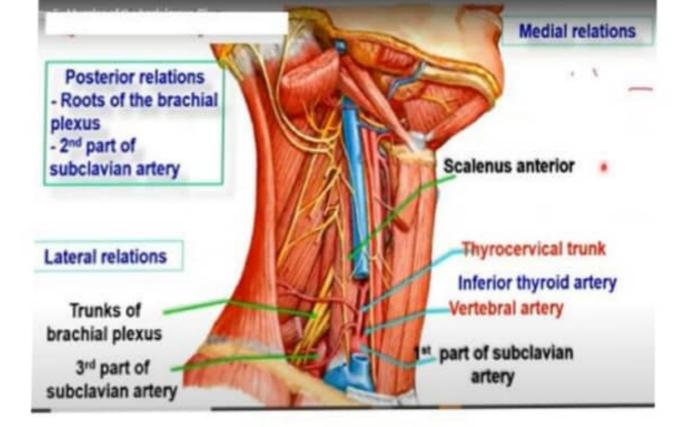
N. Supply: Anterior rami of cervical nerves

Action: Elevates 1st rib; laterally flexes and rotates cervical part of vertebral column



RELATIONS OF SCALENUS ANTERIOR





Muscles of the Neck

Auscle: Scalenus posterior

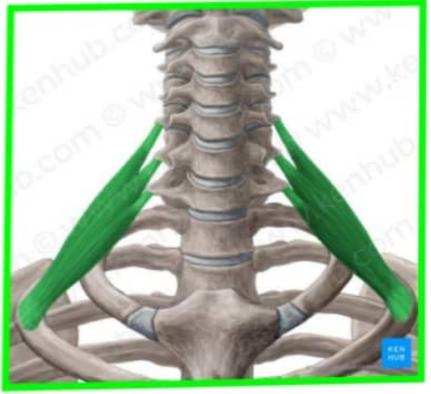
Drigin: Transverse processes of lower cervical vertebrae

nsertion: 2nd rib

I. Supply: Anterior rami of cervical nerves

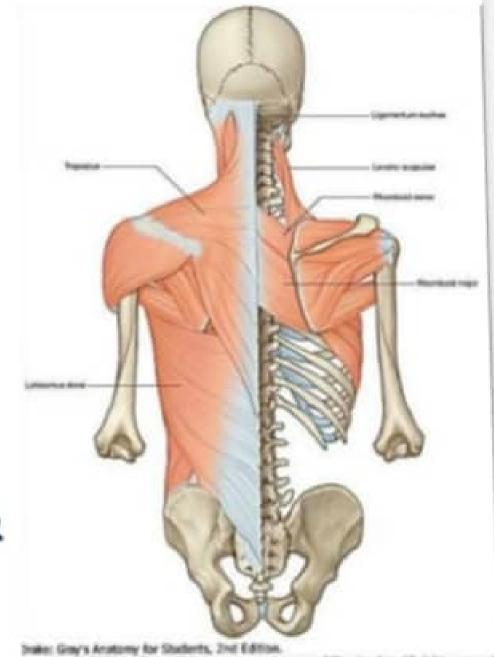
ction: Elevates 2nd rib; laterally flexes cervical part of vertebral

olumn



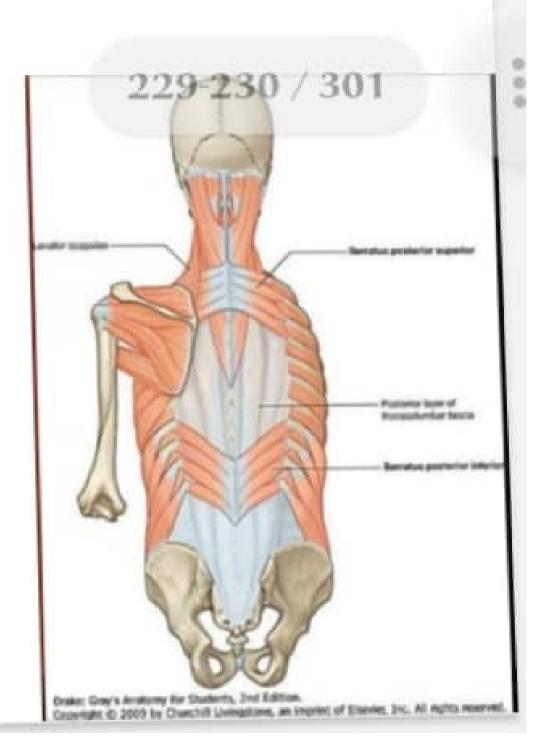
Superficial extrinsic BACK MUSCLES

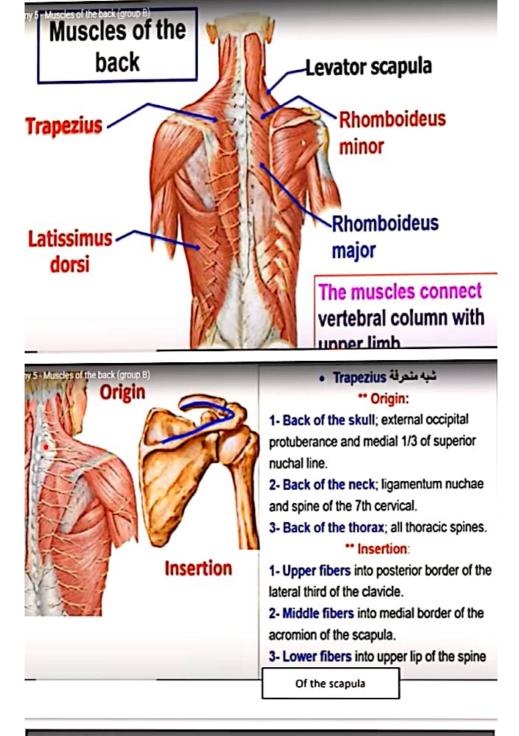
Trapezius Latissimus dorsi Levator scapulae Rhomboids major & minor



Intermediate extrinsic back muscles

Serratus posterior superior & Serratus posterior inferior





y 5 - Muscles of the back (group B)

** Nerve supply (double)

- 1- Motor; spinal part of accessory nerve.
- 2- Sensory (Proprioceptive sensation) from the cervical plexus.

** Actions:

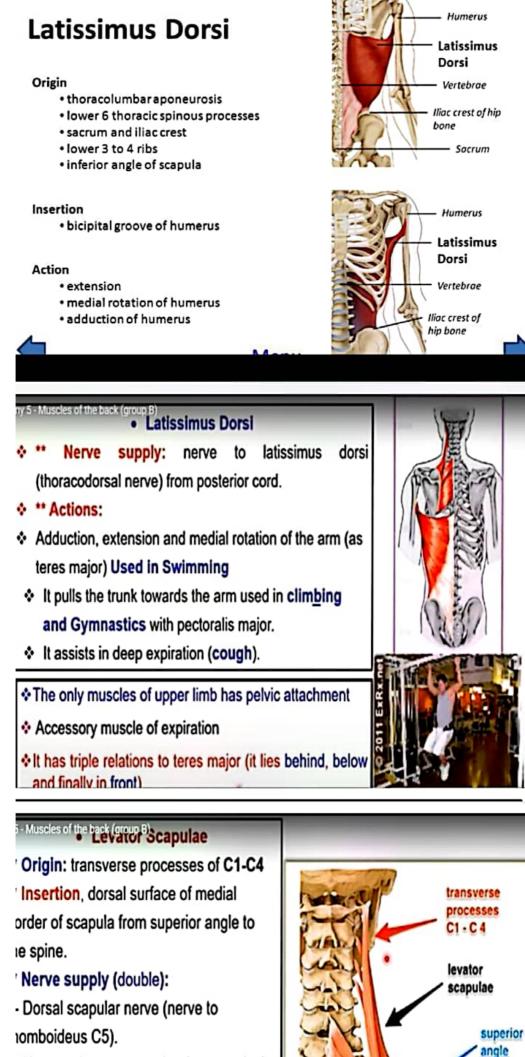
- 1. Upper fibers elevate the scapula.
- 2. Middle fibers retract the scapula.
- Lower fibers Depress the scapula.
- upper fibers Abduction of the arm

more than 90 degree (with lower 5 digitations of the serratus anterior).

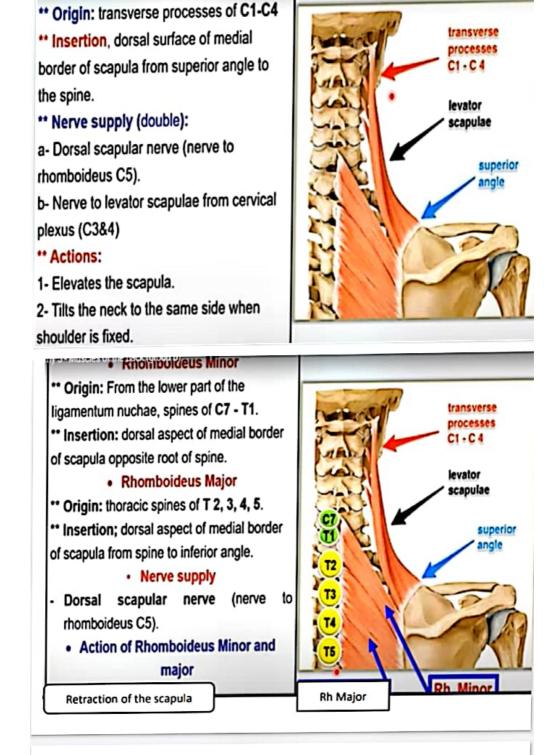
N.B; It is the only muscle of upper limb

- a-Arises from the skull.
- b- Not supplied by the brachial plexus.
- Wasting of the muscles leading to loss the normal lateral slope of the neck with drop shoulder on affected side

Trapezius

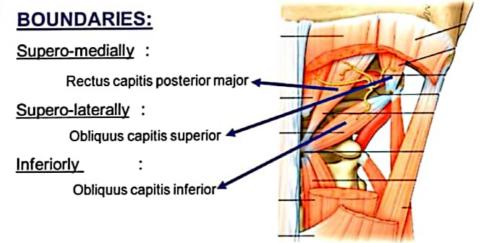


- Nerve to levator scapulae from cervical

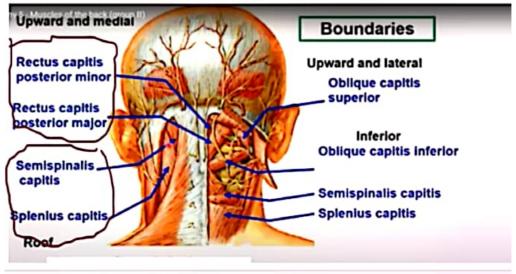


SUBOCCIPITAL TRIANGLE:

These are a pair of muscular triangles situated on each side of the midline in the suboccipital region.

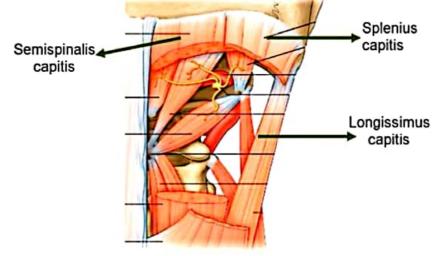


SUBOCCIPITAL TRIANGLE



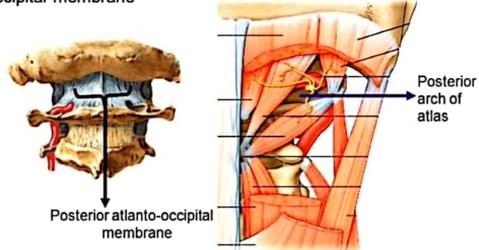
Roof:

- Medially : Dense fibrous tissue covered by the semispinalis capitis
- Laterally : By the longissimus capitis and occassionally the splenius capitis



FLOOR:

Formed by the posterior arch of atlas and posterior atlantooccipital membrane



Contents:

- Third part of vertebral artery
- First cervical nerve (suboccipital nerve)
- Suboccipital plexus of veins

