Articulations

- Did you turn in your pre-lab?
- Did you submit your post-lab from last week and take the terminology Canvas quiz?



Articulations

- Case Study: "The Case of the Wobbly Gymnast" (in pairs)
- Activity 1: Classification of Joints (as a table, 20 minutes times at each station)
- Activity 2: Body in Motion (as a table)
- Putting it all Together

Case Study: "The Wobbly Gymnast"

Case Study: "The Case of the Wobbly Gymnast"

You are a pediatrician for a sports medicine practice. Your next patient is a 12-year-old gymnast. When she dismounted the balance beam during practice, she landed and inverted her right ankle. She has bruising around the lateral aspect of her right ankle, swelling and acute pain around her lateral malleolus, and limited range of motion. She is concerned that she has fractured her ankle and asks you about some common ankle injuries (**Figure 1**).

You tell her that these symptoms may suggest a sprain, a strain, or a fracture. Sprains

and strains involve the stretching of the ligaments, tendons and muscles supporting a joint. A fracture involves the breaking of a bone (usually) at the joint. A less common injury is a high ankle sprain, also referred to as syndesmotic injury. A syndesmosis is a fibrous joint that unites the tibia and fibula by a sheet of connective tissue called the interosseous membrane. In a high ankle sprain, the interosseous membrane is overstretched which causes pain and instability between the tibia and fibula. You explain that ankle injuries are quite common and can range from mild to severe. Moreover, inversion injuries (rolling the ankle outward) are much more common than eversion injuries (rolling the ankle inward) because the medial side of the ankle is more stable due to the large deltoid ligament and the presence of the bony



Figure 1: Surface image of patient's bruised right ankle.

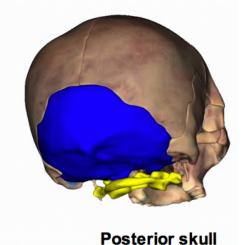
You will be moving around 6 different stations today in lab and answering questions. We will all be moving together. I will time each round to no more than 20 minutes. If you finish your station early, practice labelling the muscle models at that station. Here is an example we will go through together.

Bone articulations: Atlas: superior articular facets Occipital bone: occipital condyles

Structural classification of joint: Condylar

Here is an example we will go through together.

Motion Description of movement		Muscle(s) responsible	
A1	Flexion		
A2	Extension	Sternocleidomastoid	
A3	Lateral Flexion		



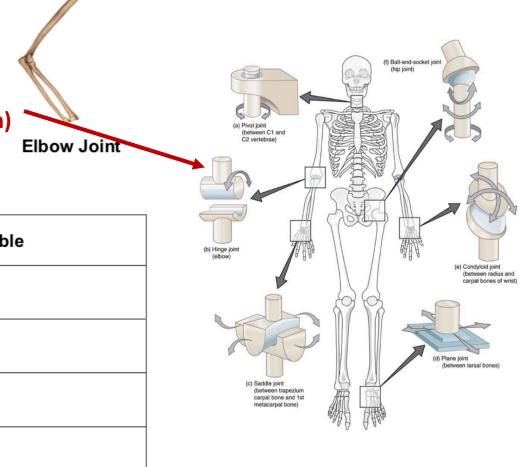
Station 3A: Elbow

Bone articulations: *Humerus: Olecranon fossa, coronoid fossa, trochlea, *Ulna: Olecranon process, trochlear notch, and coronoid process

Structural classification of joint: Hinge (see image at station)

of axis: _____1

Motion	Description of movement	Muscle(s) responsible
		a.
A1		b.
		c.
A2		d.



Station 3A: Elbow

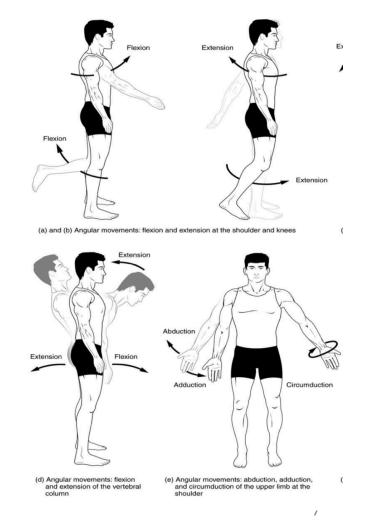
Bone articulations: *Humerus: Olecranon fossa, coronoid fossa, trochlea, *Ulna: Olecranon process, trochlear notch, and coronoid process

Structural classification of joint: Hinge (see image at station)

of axis:____1



Motion	Description of movement	Muscle(s) responsible
A1	Flexion	a.
		b.
		C.
A2	Extension	d.



Station 3A: Elbow

Bone articulations: *Humerus: Olecranon fossa, coronoid fossa, trochlea, *Ulna: Olecranon process, trochlear notch, and coronoid process

Structural classification of joint:

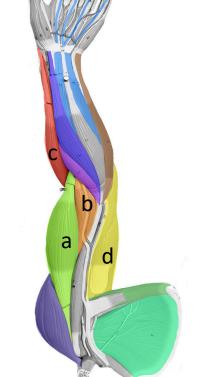
of axis: Flexion

Biceps brachii, brachialis, brachioradialis



sible		

Motion	Description of movement	Muscle(s) responsible
		a. Biceps brachii
A1	Flexion	b. brachialis
		C. brachioradialis
A2	Extension	d. Triceps brachii



View the video to go through one together!

Activity 2: Body in Motion

Joint	Left Side of Body	Right Side of Body
Neck: Atlanto- occipital		
Neck: Atlantoaxial		
Spine: intervertebral		
Glenohumeral		
Elbow		
Radioulnar		
Hip (coaxal)		
Knee: Tibiofemoral joint/Patellofemoral		
Ankle (Talocrural)		
Metacarpo- phalangeal (knuckle)		
Carpo-metacarpal of digit I		