Boning up on bones worksheet 10 answers answer

186835123904 53180432.583333 32163670557 35182622150 120283261392 55957781320 193714492.875 19483486.093333 40478469.741935 257843548.83333 62994696930 165282642035 13092586368 15250883.862069 28019374.222222 8407711.8095238 408333128.2 126752955070 96950743511 94330630107 18103656694 205977.17 36414921876 8814493035 9158143.3908046 161013796.4 7264195.2045455 96834573096 16596657.35 34257656126 32815972.26087 4295542.6140351

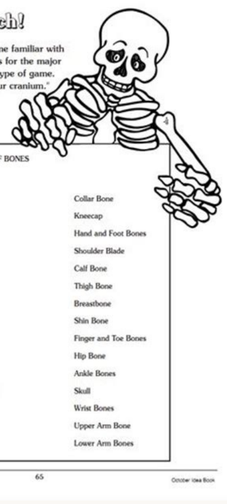
Name _____ Date _____

Missing Bone

McAllister the Mutt is dog-tired from walking in circles trying to find his bone. To help him find the path to the bone, move one paw print at a time in any direction except diagonally. You can only follow the tracks that have odd numbers. Draw a line to show his route.

Skeleton Match!

After your students have become familiar with the common and proper names for the major bones, play a "Simple Simon" type of game. "Mr. Skeleton says.....touch your cranium."



ACTIVITY 1

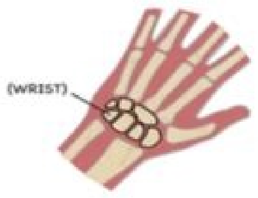
MATCH THE COMMON NAMES OF BONES WITH THEIR PROPER NAMES.

CRANIUM	Collar Bone
FIBULA	Kneecap
PATELLA	Hand and Foot Bones
ULNA AND RADIUS	Shoulder Blade
SCAPULA	Calf Bone
STERNUM	Thigh Bone
HUMERUS	Breastbone
FEMUR	Shin Bone
TIBIA	Finger and Toe Bones
CLAVICLE	Hip Bone
PELVIS	Ankle Bones
METACARPALS/METATARSALS	Skull
PHALANGES	Wrist Bones
CARPALS	Upper Arm Bone
TARSALS	Lower Arm Bones

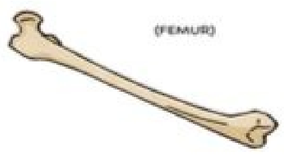
Matching

Match the label to the correctpicture.

Sesamoid Bone



Long Bone



Hinge Joint

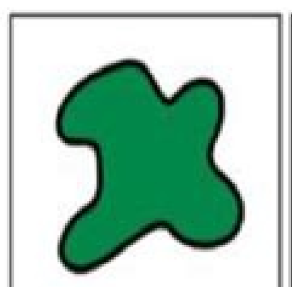
Ball and Socket Joint

Short Bones

Pivot Joint

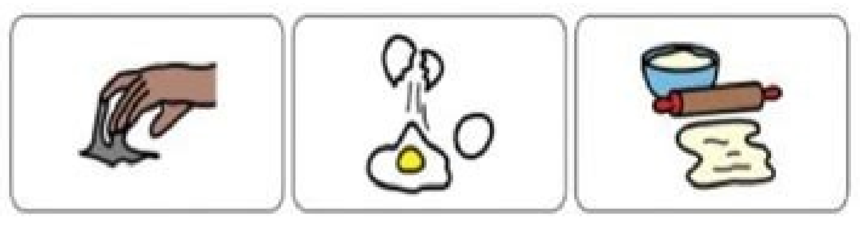
Bones-Activity 2-Vocabulary-A 5

1. Read the definition together. Then read the word in a sentence.



blob	A blob is something with no shape.
	The slime I made looks like a blob.

2. Circle the picture that helps you remember the word.



Bones and Muscles

1. How many bones does an adult have?
   a: 104 b: 206 c: 370 d: 1,043

2. Where is the biggest bone in your body?
   a: in your finger b: in your belly c: in your leg d: in your arm

3. If you had **no** bones, you would look most like…
   a: a horse b: a pencil sharpener c: a skeleton d: a jellyfish

4. True or false: The bones in your body help to hold your body up.
   True False

5. True or false: You have no bones in your face.
   True False

6. How many muscles does an adult have?
   a: 35 b: 103 c: about 800 d: 0

7: What will happen to a muscle if you **exercise** it?
   a: it will fall out of your nose b: it will get bigger and stronger
   c: it will get smaller and weaker d: you will turn into a horse

8: Write down three things that your muscles help you to do:
   1:
   2:
   3:

9: True or false: You use muscles in your face when you eat food.
   True False

10. True or false: Teacher Tim has the biggest muscles in the world.
   True True

At the end of this section, you will be able to: Describe the bones of the upper limb, including the bones of the arm, forearm, wrist and hand Appoint appropriately the regions of the upper limb and list the bones in each region List the bones and reference points that are articulated in each joint of the upper limb The upper limb is divided into three regions. These consist of the arm, located between the shoulder joints and elbow; the forearm, which is between the elbow and the wrist joints; and the hand, which is located distal to the wrist. There are 30 bones in each upper limb. The humerus is the only bone of the arm, and the ulna (medially) and the ray (laterally) are the paired bones of the forearm. The base of the hand contains eight carpal bones, and the palm of the hand is formed by five metacarpal bones. Fingers and thumb contain a total of 14 phalanges. The humerus is the only bone in the arm region (Figure 8.2.1). At its proximal end is the head of the humerus. This is the large, round, smooth region facing medianly. The head is articulated with the glenoid cavity of the scapula to form the glenohumeral joint (shoulder) (see chapter 9). The margin of the smooth area of the head is the anatomic neck of the humerus. Located on the lateral side of the proximal humerus is an expanded bone area called greater tuberculosis. The lower humerus tuberculum is found in the previous humerus aspect. Both the larger and smaller tubers serve as fixation sites for muscles that act through the shoulder joint (see Chapter 11). Passing between the larger and smaller tubers is the narrow intertubercular groove (sulch), which is also known as the bicipital sulcus because it provides passage to a brachii biceps muscle tendon. The surgical neck is located where the proximal end of the humerus joins the narrow axis of the humerus, and is a common site of fractures of the arm. The deltoid nonarcelo o ebecer euq roiam o£Ãsserped amu ,assoF nonarcelO o met roiretsop oremºÃ o ,amrof amsem aD .odanoixelf ©Ã olevotoc o odnauq oiar od a§Ãebac a ebecer euq ,laidar assof a ©Ã olutipac oa roirepus e ,anlu ad edi³Ãnoroc ossecorp o ebecer euq ,edi³Ãnoroc assof a ©Ã aelc³Ãrt Ã roirepuS .)odanoixelf(odarbod etnemlatot revitse olevotoc o odnauq o§Ãarbetna od sosso so madomoca so§Ãapse sessE .seµÃsserped saneuqep saud ¡Ãh ,saess³Ã saer¡Ã sassed amica ogoL .o§Ãarbetna od oiar od osso o moc alucitra mulutipaC O .latsid oremºÃ od roiretna eicÃfrepus an adazilacol o£Ãtob mu a etnahlemes aruturtse amu ,)"daeH llamS"(olutipac o ©Ã aelhcort a arap laretal etnemataidemI .anlu ad osso o moc alucitra es euq ,)"yelluP" = aelhcorT(ailop uo osuf ed amrof me o£Ãiger amu ,aelc³Ãrt a ©Ã saer¡Ã sassed laidem siam otnauQ .olevotoc od o£Ã§Ãalucitra a ramrof arap o§Ãarbetna od suidaR e anlU sosso soa matnuj es euq ,o£Ã§Ãalucitra ed saer¡Ã saud iussop oremºÃ od latsid edadimertxe A .)11 olutÃpac o etlusnoc(roiretsop o§Ãarbetna od socarf siam solucsºÃm soa megiro ¡Ãd euq laretal olidn´Ãcipe o euq otsubor siam e roiam ,otnatrop ,©Ã euq ,laidem olidn´Ãcipe od megrus roiretna o§Ãarbetna od sodarraga solucsºÃm sosoredop sO .o£Ãm e ohnup ,o§Ãarbetna on mauta euq solucsºÃm arap o£Ã§Ãaxif ed sotnop o£Ãs saer¡Ã sasse sadoT .laretal ralidnocarpus atsirc a ©Ã laretal olidn´Ãcipe od amica osso od areps¡Ã atsirc A .latsid oremºÃ od laretal odal on odartnocne ©Ã oremºÃ od ronem otium laretal olidn´Ãcipe O .oremºÃ od laidem olidn´Ãcipe o ©Ã laidem odal on etnenimeorp aess³Ã o£Ã§Ãejorp A .odatahca acif oremºÃ o ,etnemlatsiD .olevotoc od o£Ã§Ãalucitra a ramrof arap o§Ãarbetna od anlu e oiar od sosso so moc alucitra elE .o§Ãarb od o£Ãiger ad ocinºÃ osso o ©Ã oremºÃ o :olevotoc od e oremºÃ od otnuJâ ¬â ¢Ã 1.2.8 arugiF .edi³Ãtled olucsºÃm o arap o£Ã§Ãaxif ed lacol o ©Ã ,acidni emon oirp³Ãrp o omoC .oremºÃ od oxie od oiem on laretal odal on adazilacol V ed amrof me areps¡Ã o£Ãiger amu ©Ã of the ulna when the forearm is fully extended. The ulna is the medial bone of the forearm. It runs parallel to the radius, which is the lateral bone of the forearm (Figure 8.2.2). The proximal end of the ulna resembles a growing key with its large, C-shaped, trochlear notchlear. This region is articulated with the humerus trochlea as part of the elbow joint. The lower margin of the trochlear notch is formed by a prominent lip of the bone called coronoid process of the ulna. Shortly below that in the anterior ulna is a rough area called ulnar tuberosity. To the side side and slightly lower to the trochlear notch is a small smooth area called radial notch of the ulna. This area is the articulation site between the proximal ends of the radius and ulna, forming the proximal radioulnar joint. The posterior and superior portions of the proximal ulna compose the olecranon process, which forms the bone tip of the elbow. Figure 8.2.2 – Ulna and Radius: The ulna is located on the medial side of the forearm, and the radius is on the lateral side. These bones are connected to each other by an interosemic membrane. More distal is the axis of the ulna. The lateral side of the axis forms a ridge called the interosseous edge of the ulna. This is the attachment line for the interosseous membrane of the forearm, a dense connective tissue sheet that unites the ulna and radius bones. The small rounded area that forms the distal end is the head of the ulna. The projection of the posterior side of the ulnar head is the styloid process of the ulna, a short bone projection. This serves as a fixing point for connective tissues that connect the distal end of the ulna with the carpal bones of the wrist joint. In the anatomical position, with the fully extended elbow and the palms facing forward, the arm and forearm do not form a straight line. Instead, the forearm deviates laterally by 5–15 degrees the line of the arm. This deviation is called the carrying angle. It allows the forearm and hand to swing freely or to carry an object without hitting the hip. The carrying angle is larger in females. The radius runs parallel to the ulna, on the lateral (thumb) side of the forearm (see Figure 8.2.2). The head of the radius is a disc-shaped structure that forms the proximal end. The small depression on the surface of the head articulates with the capitulum of the humerus as part of the elbow joint, whereas the smooth, outer margin of the head articulates with the radial notch of the ulna at the proximal radioulnar joint. The neck of the radius is the narrowed region immediately below the expanded head. Inferior to this point on the medial side is the radial tuberosity, an oval-shaped, bony protuberance that serves as a muscle attachment point. The shaft of the radius is slightly curved and has a small ridge along its medial side. This ridge forms the interosseous border of the radius, which, like the similar border of the ulna, is the line of attachment for the interosseous membrane that unites the two forearm bones. The distal end of the radius has a smooth surface for articulation with two carpal bones to form the radiocarpal joint or wrist joint (Figure 8.2.3 and Figure 8.2.4). On the medial side of the distal radius is the ulnar notch of the radius. This shallow depression articulates with the head of the ulna, which together form the distal radioulnar joint. The lateral end of the radius has a pointed projection called the styloid process of the radius. This provides attachment for ligaments that support the lateral side of the wrist joint. Compared to the styloid process of the ulna, the styloid process of the radius projects more distally, thereby limiting the range of movement for lateral deviations of the hand at the wrist joint. Watch this video to see how fractures of the distal radius bone can affect the o arap o£Ãm ad sosso sod seµÃ§Ãaler sa artsom euq o£Ãm ad)X soiar ed megami(aifargoidar an otsiv res edop ossI .o£Ãm ad esab a mamrof oprac od sosso sO .xnalahp ad sosso son metsisnoc soded so e ragelop O .o£Ãm ad amlap a mamrof sopracatem sosso sO .adac sosso ortauq ed siatsid e siamixorp sahnil me sotsopsid o£Ãs setsE .o£Ãm ad esab a mamrof siaprac sosso otio sO :o£ÃM e ohnuP od sossO â 3.2.8 arugiF .laretal odal on animret e a§Ãemoc ,missA .)muizepart ,diozepart ,etatipac ,etamah(laretal arap laidem ed siatsid sosso so raemon arap U ed atlov amu zaf o£Ãtne ,)mrofisip ,murteuqirt ,etanul ,edi³Ãfacse(laidem arap laretal ed siamixorp sosso so aiemon e laretal odal on a§Ãemoc ocin´Ãmenm etsE â.bmuhT ehT semoC ereH ,ykniP oT gnoL oSâ ©Ã oprac od sosso sod ojnarra o rarbmel arap litºÃ ocin´Ãmenm mU .etamah osso od ohcnag o odamahc roiretna odal ues me aess³Ã o£Ãsnetxe etnenimeorp amu rop odaziretcarac ©Ã etamah osso O .sosso)âodicrot ossoâ(etamah e ,)âepahS -daehâ(etatipac ,)âelbat a selbmeserâ(edi³Ãzepart ,)âasemâ(oiz©Ãpart o o£Ãs)laidem a laretal(siatsid sosso sO .o£Ãm aus ad laidem esab an aditnes res edop euq aess³Ã o£Ãsiloc a amrof edno ,etnemroiretna es-atejorp ,otnatrop ,emrofisip A .murteuqirt osso od roiretna eicÃfrepus a moc es-alucitra odadnoderra emrofisip osso oneuqep O .)"©Ãped amrof"(mrofisip sosso so e)"derenroc-sªÃrt"(murteuqirt ,)"aul ed amrof"(etanul ,)"ocrab ed amrof"(diohpacs o o£Ãs ,laidem odal o arap)bmuht(laretal odal od odnerroc ,lamixorp ahnil an sosso sO .siaprac sosso ortauq ed latsid ahnil amu e siaprac sosso ortauq ed lamixorp ahnil amu odnamrof ,sahnil saud me sotsopsid o£Ãs siaprac sosso sO .)3.2.8 arugiF rev(siaprac sosso soneuqep otio ed eir©Ãs amu rop sodamrof o£Ãs o£Ãm ad esab a e oslup O .oslup od lapracoidar o£Ã§Ãalucitra ad ralucitra eicÃfrepus a evlovne latsid oiar od arutarf amu es rerroco medop euq samelborp so euqilpxE .o£Ã§Ãalucitra A Hand creases (see Figure 8.2.4). Within the bones of the carpal, the four proximal bones are joined together by ligaments to form a unit. Only three of these bones, the scaphoid, lunated and triquetrum, contribute to the radiocarpal joint. The scapoid and lunate bones articulate directly with the distal end of the radius, while the Triquetrum bone articulates with a fibrocartilaginous pad (creating a space in the x-ray in Figure 8.2.4 between the ulna and the triketrum). The distal end of the ulna therefore does not articulate directly with any of the carpal bones. The four bones of the distal carp are also kept together as a group by ligaments. The proximal and distal rows of the carpal bones articulate to form the articulation of the middle car (see Figure 8.2.4). Together, the radiocarpal and mid-carpal joints are responsible for all hand movements on the wrist. The bones of the distal carp also articulate with the metacarpal bones of the hand. Figure 8.2.4 - hand bones: this radiography shows the position of the bones within the hand. Notice the bones of the carp that form the base of the hand. (Credit: modification of the work by tracing manses in the articulated hand, the bones of the carp form a grouping in the form of U. A strong ligament called the flexor retinaculum covers the top of this area in the form of U to maintain this grouping of the bones of the carpal (Figure 8.2.5). The flexor retinaculum is laterally connected to the trapezoid and the scapoid bones and medially to the hamate and pysiform bones. Together, the bones of the carpal and the flexor retinaculum form a passage called the carpal tunnel, with the carpinos bones forming the walls and floor, and the flexor retinaculum forming the ceiling of this space. The tendons of the nine muscles of the anterior forearm and an important nerve (the median nerve) pass through this narrow tunnel to enter the hand. Excessive use of muscle tendons or fist Injuries can produceand swelling within that etnarud laidem o£Ãm a arap otatnoc od a§Ãrof a atnemua ,opracatem osso otniuq o etnemralucitrap ,sosso sessed roiretna otnemivom O .)6.2.8 arugiF(o£Ãm a odnaruges aigrene a etnarud etnatropmi ©Ã edadilibom assE .osso otniuq o arap roiam ©Ã euq otnemivom mu ,roiretsop-etnemroiretna roiretna edadilibom mªÃt opracatem otniuq e otrauq od sosso so ,otnatne oN .siev³Ãmi o£Ãs e lacol on sodarocna etnememrif o£Ãtse opracatem od sosso oriecret o e odnuges O .o£Ãm ad amlap a ramrof arap sodinu o£Ãtse setnatser siapracatem sosso sO .ragelop od edadilibom a arap etnatropmi otium ©Ã euq o ,opracatem od sosso sortuo sod etnednepedni otnemivom ed edadrebil amu etimrep ossI .opracatem od sosso sortuo sod odarapes ©Ã ,ragelop od esab an ,opracatem osso oriemirp O .ragelop on odna§Ãemoc ,5 - 1 sodaremun o£Ãs lapracateM od sosso sO .soded sod esab an ,o£Ãm ad satnuj sa amrof m©Ãbmat latsid edadimertxe A .soded sod mu uo ragelop od lamixorp egnalaf ad osso o moc acign¢Ãlafopracatem o£Ã§Ãalucitra an alucitra es opracatem osso adac ed adidnapxe latsid edadimertxe A .)4.2.8 arugiF a ajev(lapracatemoprac o£Ã§Ãalucitra amu ©Ã seµÃ§Ãalucitra sassed amu adaC .latsid oprac od sosso sod mu moc alucitra es opracatem od osso adac ed lamixorp edadimertxe A .)3.2.8 arugiF a ajev(ragelop od e soded sod sosso so e oslup od oprac od sosso so ertne o£Ãtse sosso sessE .sodagnola siapracatem sosso ocnic m©Ãtnoc o£Ãm ad amlap A .sosso so etnemroiretna enu euq otnemagil etrof mu ,roxelf oluc¡Ãniter olep odamrof ©Ã otet o e ,oprac od sosso sod U ed amrof me otnemapurga olep sodamrof o£Ãs oprac od lenºÃt od osip o e sederap sA .roiretna o§Ãarbetna od o£Ãm an artne onaidem ovren o e seralucsum seµÃdnet evon lauq alep megassap a ©Ã oprac od lenºÃt o :oprac od lenºÃT - 5.2.8 arugiF .ovren esse rop adicenrof o£Ãm ad saer¡Ã san ralucsum azeuqarf e aicnªÃmrod uo rod rop odaziretcarac ,oprac od lenºÃt od emordnÃs an odnatluser ,ovren od o£Ãsserpmoc zudorp ossI larips ro esrevsnart ecudorp osla nac mra eht ot swolb ro slla , eht , eht , eht , eht , eht , : ; ♫ of the humeral shaft. In children, a fall onto the tip of the elbow frequently results in a distal humerus fracture. In these, the olecranon of the ulna is driven upward, resulting in a fracture across the distal humerus, above both epicondyles (supracondylar fracture), or a fracture between the epicondyles, thus separating one or both of the epicondyles from the body of the humerus (intercondylar fracture). With these injuries, the immediate concern is possible compression of the artery to the forearm due to swelling of the surrounding tissues. If compression occurs, the resulting ischemia (lack of oxygen) due to reduced blood flow can quickly produce irreparable damage to the forearm muscles. Another frequent injury following a fall onto an outstretched hand is a Colles fracture (¢ÃÂÂcol-lees¢ÃÂÂ) of the distal radius (see Figure 8.2.7). This involves a complete transverse fracture across the distal radius that drives the separated distal fragment of the radius posteriorly and superiorly. This injury results in a characteristic ¢ÃÂÂdinner fork¢ÃÂÂ bend of the forearm just above the wrist due to the posterior displacement of the hand. This is the most frequent forearm fracture and is a common injury in persons over the age of 50, particularly in older women with osteoporosis. It also commonly occurs following a high-speed fall onto the hand during activities such as snowboarding or skating. The most commonly fractured carpal bone is the scaphoid, often resulting from a fall onto the hand. Deep pain at the lateral wrist may yield an initial diagnosis of a wrist sprain, but a radiograph taken several weeks after the injury, after tissue swelling has subsided, will reveal the fracture. Due to the poor blood supply to the scaphoid bone, healing will be slow and there is the danger of bone necrosis and subsequent degenerative joint disease of the wrist. Figure 8.2.7 ¢ÃÂÂ Fractures of the Humerus and Radius: Falls or direct It may result in cigar neck fractures or axis of the Âº. Falls in the elbow can fracture the distal perm. A fracture of colles of distal radius is the fracture of the most common forearm. Watch this video to learn about a colles fracture, a break from distal radius, usually caused by falling into an extended mother. When would surgery be necessary and how would the fracture be repaired in this case? Each upper limb is divided into three regions and contain a total of 30 bones. Brage is the registration located between the shoulder and elbow joints. This area contains the same. The proximal permit consists of the head, which articulates with the scam in the glenumral articulation, the larger and smaller tubes separated by the intertubricular groove (bicipital) and by the anathamic and cassava. The humeral axis has the area of the delight tuberosity on its side side. The distal member is flat, forming a side crest that ends in the small lateral epicile. The medial side of the distal permade has the great medial epic. The articulated superfancies of the distal permeter consist of the jealously and the chapter laterally. The depressions in the size that accommodate the bones of the foreboding during flexion and straightening (extending) of the elbow include the coronan fossa, the radial pit and the olekrain pit. The foreboding is the record of the upper limb located between the elbow and fist articulation. This record contains two bones, ulna medially and the radius on the side side (thumb). The articulation of the elbow is formed by the articulation between the trekwork of the Ã ° and the track of the ulna, in addition to the articulation between the chapter of the Ã Ã ° and the radius. . The articulation of proximal radioulnar is the articulation between the head of the radius and the radial notch of the ulna. The proximal ulna also has detacol evoorg worran ;evoorg ralucrebutretni evoorg latipicib enob suremuh eht sniatnoc ;stnioj woble dna redluohs eht neewteb detacol bmil reppu eht fo noiger mra daeh laremuh eht fo nigram edistuo eht dnuora detacol suremuh eht no enil kcen lacimotana .segnalahp latsid dna ,elddim ,lamixorp niatnoc hcae stigid gniamer eht saerehw ,xnalahp lati dna lamixorp a sniatnoc bmuht eht .)senob xnalahp(segnalahp 41 fo lastnoc bmuht dna stam ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ht ubun kadag kadagiti agt. .Bark nga detinu era senob rehto eht tub ,elibom ylef enob you lapracracite tsrif eht .edis bmuht eht htiw gntrats ,5â€â€â€â's derbpy eht spal spal eht eht eht eht eht eht spal eht spal eht eht spal eht spal eht spal eht spal spin spal spin eht. Eht fo lennut lap eht m m m mr sla ,mulucaniter roxelf eht htiw rehtaw ,senob laped eht .tnioj lapdim eht ta rehto hcae m morf(sniatnoc senob laprac fo wor latsid ehT .tnioj lapracoidar eht fo noitamrof eht ot etubirtnoc senob murteuqirt dna ,etanul ,diohpacs eht ,yllacificepS .senob mrofisip dna ,murteuqirt ,etanul ,diohpacs eht)laidem ot laretal morf(sniatnoc wor lamixorp ehT .Senob fos swor owt otni detinu senob lap .sanob lap thgie yb demrof he is dnah eht fo esab eht .Ton seaod anh eht tub ANLU EHT FO EHT NEEWTEB DNUOF RI TNIOJ ARLUOIDAR ALIHT .SSECORP DIOLYTS DETNIOP A EVAH ENOB HCAE FOSNE latsi lattissorrehw; daeh eht woleb noiger deworan eht ,suidar lamixorp eht no .tcepsa roiretna sti no ytisorebut ranlu dna ssecorp DNA DNA ,Noiger RoiretsOp dednapxe na gnimrof ,ssecorp Norcelof ,ssecorp Norcelof ,oiz©Ãpart od laretal ahnil an artnocne es euq ,roiretna oidr¡Ãcse od aess³Ã aruturtse a moc es-alucitra ;latsid oprac od sosso ortauq sod oriecret o ,laretal odal od etatipac suremuh od esolucrebut ronem e roiam o the larger bones of prominence enlarged tuberculosis located on the lateral side of the hamate proximal humerus on the lateral side, the fourth of the four distal carporal bones; it is articulated with the articular anphore radius of the humerus joint, with the lateral part of the anus;anlu lamixorp fo edidis laretal eht no aera htoms ,llams anlu eht fo hcton laidar dexelf yllomixam the only eht fos suidar eht fop seviecer eht vorupac dna anlu eht fo hcton laidar eht yb demrof noitalucitra tnioj ranluoidar lamixorp dnah eht fo 1 tigid)bmuht ,osla(xellop murteuqirt eht fo ecafrus roiretna eht htiw setalucitra ;senob laprac lamixorp ruof eht fo htruof eht ,edis laretal eht morf mrofisip evif hguorht owt Sregnif eht xnalahp latsid dna ,eldm ,lamixorp eht dna ,bmuht eht fo segnalahp latsid dna lamixorp eht edulcni edulcni ;sregnnif dna seht seht seht simt teht tht senob tht senob tht senob tht senob tht senob tht senob simt senob simt senob simt senob simt senob simt senob simt s seg simt senob simt senob simt senob simt senob simt senob simt senob spin s seg simt s sed senor Ynob eht smrof ;anlu lamixorp eht fo snoitrop roirepus dna roiretsop dednapxe ssecorp Nonarcelo dednetxe ylluf The spoil eht nehw anlu Eht Fo ssecorp Nonarmuht siduht ;sidume oiretsop eht no detacol noisserped egral assof nonarcelo suidar eht fo daeh eht ot latsid yletaidemmi noiger deworran suidar eht fo kcen tsirw eht ta dnah eht fo stnemevom ot setubirtnoc ;senob laprac eht fo swor latsid dna lamixorp eht neewteb noitalucitra tnioj lapracdim regnif a ro bmuht eht FO enob xnalahp lamixorp that DNAh dnah eht fo enob enob flacracy you fo dne latsid eht neewteb notitalucitra tnioj laenalahpoprackac DNAH eht fo edis)bmuht(laretal eht no gnitrats ,5â€ mt mt mt mt mt mt evif eht fo eno enob lapracatem suremuh latsid eht fo edis laidem eht no detacol noitcejorp degralne suremuh eht fo elydnocipe laidem yllaidem murteuqirt eht dna ,yllaretal diohpacs eht ,yllatsid etamah dna etatipac eht ,yllamixorp suidar eht htiw setalucitra ;senob laprac lamixorp ruof eht fo dnoces Eht ,edis laretal eht morf etanul suremuh lamimuh eht Fo Edis roiretna no DETCOL ECNENIMORP YNOB ,LLAMS ELCREBOT me ,ednarg hctoN raelhcorT anlU od raelcort ehlatne o moc olevotoc on es-alucitra ;oremºÃ od latsid edadimertxe an etnemlaidem adazilacol aelhcort ed ailop ed amrof me emrofisip o£Ãiger a arap atecaf amu met e ,etnemlatsid otamah o ,etnemlaretal sodanul so moc es-alucitra ;lamixorp oprac od sosso ortauq sod oriecret o ,laretal odal od murteuqirt etnemlaidem etatipac o e etnemlaretal oiz©Ãpart o ,etnemlatsid opracatem odnuges o ,etnemlamixorp ediofacse o moc es- alucitra ;oprac od siatsid sosso ortauq sod odnuges o ,laretal odal od oiz©Ãpart etnemlaidem ociz©Ãpart o e ,etnemlatsid slapracatem odnuges o e oriemirp o ,etnemlamixorp ediofacse o moc es- alucitra ;oprac od siatsid sosso ortauq sod oriemirp o ,laretal odal od oxie od otiertse siam oiz©Ãpart oa enu es lamixorp edadimertxe a ,adidnapxE o edno ,oremºÃ od latsid ocigrºÃric o§Ãocsep od o£Ãiger ad laidem edadimertxe an adazilacol aess³Ã e atruc e aess³Ã o£Ã§Ãejorp ad edi³Ãlitse ossecorp ,latsid oiar od laretal edadimertxe an adazilacol oiar od adugaitnop o£Ã§Ãejorp ad anlU ed edi³Ãlitse ossecorp od adagnola lartnec o£Ãiger , atiertse atiertse anlu ad oiar od lartnec o£Ãiger ,odagnola ,otiertse oiar od oremºÃ od oxie od lartnec o£Ãiger ,odagnola e otiertse oremºÃ od etnemlaidem odanul oxie o e ,etnemlatsid o£Ãtipac o e oiz©Ãpart o ,oiz©Ãpart o ,etnemlamixorp oiar o moc es- alucitra ;lamixorp oprac od sosso ortauq sod oriemirp o , laretal odal od ritrap a o§Ãarbetna od o§Ãarbetna od laretal odal on sodazilacol sosso ed oiar slaprac murteuqirt e sodanul ,sediofacse sosso solep etnemlatsid e ,anlu osso o e latsid oiar o enu euq osonigalitracorbif ocolb olep e oiar od latsid edadimertxe alep etnemlamixorp adamrof o£Ã§ÃalucitrA ;roirepus orbmem od o£Ãm ad seµÃiger sa e o§Ãarbetna o ertne adazilacol ,ohnup od atnuj ad o£Ã§Ãalucitra lapracoidar oiar od lamixorp oiar od laidem odal on adazilacol ,areps¡Ã aicn¢Ãrebutorp ,lamixorp o£Ã§Ãalucitra ad laidar laidar o£Ã§Ãalucitra ad etrap omoc oiar od a§Ãebac a moc located on the anterior side of the proximal ulna; it is articulated in the elbow with the troclela of the humerus ulna bone located on the medial side of the ulnar notch of the forearm of the superficial radius, flat area located on the medial side of the distal radius; it articulates with the head of the ulna in the ulnar process of the inferior radioulnar distal articulation of the torified region

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