Edition

4

Laboratory Manual for

Clinical Kinesiology and Anatomy

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To students who desire to understand so as to help others.

PREFACE

■ ■ Preface to Fourth Edition

This update of the Laboratory Manual for Clinical Kinesiology and Anatomy permitted us to align terminology used in the manual with generally accepted terminology, make corrections, and revise some activities, particularly in the Pre-Lab worksheets. We were pleased to have the assistance of Christopher Towler, DPT who both reviewed the manual and offered suggestions especially in the cardiovascular and respiratory sections.

The goals for this Laboratory Manual remain the same: to actively engage and challenge the learner and present the material in a way that assists the student to not only learn the material but also to learn how to think about how human movement is generated.

LSL MADM

ACKNOWLEDGMENTS

We appreciate the many individuals at F. A. Davis for their continued commitment to the Lab Manual as a companion text to *Clinical Kinesiology and Anatomy*. In particular we wish to acknowledge Melissa Duffield, Senior Acquisitions Editor, for oversight of this project, and Jennifer Pine, Senior Developmental Editor, who used her editorial skills and patience to guide us on this project.

Mary Alice D. Minor Lynn S. Lippert

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Basic Clinical Kinesiology and Anatomy

1

Basic Information

■ ■ Pre-Lab Worksheets	3. Fill in the following table by:			
Student's Name	A. Listing characteristics that can be observed while examining a personB. Identifying which sensory modality is used to perceive the characteristic			
Date Due				
Complete the questions that follow prior to the lab class.				
1. Define (Refer to Lippert, Clinical Kinesiology and Anatomy, 6e, Chapter 1):	Characteristics	Sensory Modality		
Kinesiology:	EXAMPLE Foot slap while walking	Auditory and visual		
Biomechanics:				
Kinetics:	-			
Kinematics:				
2. The basic information needed to determine the function of a muscle includes:				
A	-			
В	-			

4 PART 1 ■ Basic Clinical Kinesiology and Anatomy

4.	. Enter the letter by the structures in Figure 1-1, next to the correct label for that structure. You can also write the names of the structures on the figure.			
	AnteriorPosterior ProximalDistal SuperiorInferior MedialLateral			
5.	When the right arm and leg are considered together they can be referred to as:			
	(Contralateral or Ipsilateral)			
6.	Using Figure 1-1 and the descriptive terms listed			

Medial	Superior	Proximal	Superficial	Anterior
Lateral	Inferior	Distal	Deep	Posterior

below, describe the location of the body segments

that follow. Terms may be used more than once.

- A. Tibia: The ______bone of the lower leg
- B. Fibula: The ______bone of the lower leg
- C. Ribs in relationship to the scapula:

D.	The	elbow	joint	is	at	which	end	of	the
	hum	erus?_							

- E. The brachialis muscle lies underneath the biceps; therefore, it is ______ to the biceps.
- F. The head is ______ to the chest.
- G. The _____ end of the tibia is at the knee joint.
- H. The great toe is on the _____side of the foot.
- I. The eyes are ______ and _____ to the mouth.
- J. The radius is on the _____side of the forearm.
- K. The ulna is on the ______side of the forearm.
- L. The scapula is on the _____side of the trunk.
- M. The shoulder girdle is _____ to the pelvic girdle.
- N. Skin is ______to muscle.

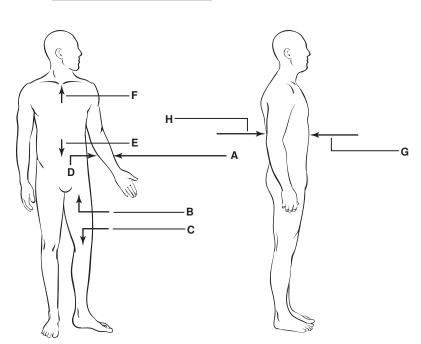


FIGURE 1-1 Descriptive terminology.

7.	Match the major bone or feature of the body segment with the descriptive term for that segment.				
	Arm	A. Cervical vertebrae			
	Forearm	B. Chest			
	Hand	C. Pelvis			
	Thigh	D. Radius			
	Leg	E. Femur			
	Foot	F. Fingers			
	Thorax	G. Tibia			
	Abdomen	H. Humerus			
	Neck	I. Toes			
	Describe and give an example of motion listed below. Rectilinear motion: Curvilinear motion: Angular motion:				
9. In which type of motion do all the parts mov A. The same distance: B. Different distances:					
10.	In Figure 1-2, identify the structure(s) that would be in linear motion and angular motion when the bicycle and rider are in motion.				



FIGURE 1-2 Bicycle rider.

backswing

11.	Match the joint motions correct descriptions. The	reference position is the	Turning your palm posteriorly	J. Inversion
	anatomical position unle Use each answer only on		Moving your arm out to the side	K. Eversion
	Pulling your scap together	ulae A. Flexion	The position of the knee in standing	L. Lateral rotation
	Moving your leg toward the midling	B. Extension	The position of the forearm in	M. Medial rotation
	Rolling your arm	C. Hyperextension	anatomical position	
	outward Moving your han	d D. Abduction	Moving the thigh forward and upward	N. Lateral bending
	toward the thum		-	O. Circumduction
	Turning your foo inward	t E. Adduction	Moving your arm outward from	P. Horizontal abduction
	Moving through cone-shaped arc	a F. Supination	90 degrees of shoulder abduction	
	Moving your arm across the body a		Moving your foot outward	Q. Horizontal adduction
	shoulder level		Moving your scapulae	R. Protraction
	Moving your han down the side of your leg	d H. Ulnar deviation	away from the midline Turning your arm inward	S. Retraction
	Shoulder motion during bowling	I. Radial deviation	mwaru	

F. What type of motion is performed in activity A?

■ ■ Lab Activities

Student's Name				G. What type of motion is performed in activities F		
Dat	te Due				and C?	
	In a group, so that follow.	tudents perform the	active motions	3.	To practice palpation, use the finger pads of your	
	Shoulder: Elbow:	Abduction Abduction Horizontal Horizontal abduction adduction Lateral rotation Medial rotation	lightly on the anterior surface of your legist proximal to the wrist, with your legisted. Extend your left wrist and note sensations in your fingertips as wrist excauses the tendons of the wrist and fing to become taut. Move your fingertips in	right index and middle fingers. Place your fingertipe lightly on the anterior surface of your left forearm, just proximal to the wrist, with your left wrist flexed. Extend your left wrist and note the changing sensations in your fingertips as wrist extension causes the tendons of the wrist and finger flexors to become taut. Move your fingertips medially and laterally (side to side) over the wrist and		
	Hip: Knee:	Flexion Abduction Lateral rotation Flexion	Extension Adduction Medial rotation Extension	sensations as you move over the tendons how lightly you are touching and if you	finger flexor tendons, making note of the changing sensations as you move over the tendons. Note how lightly you are touching and if you are able to palpate the changes. Describe what you feel in	
2.	Perform the a	activities that follow f the speed and distant	as small groups.		your right fingers as you palpate.	your right fingers as you palpate.
		ents up shoulder to nem to walk across straight.				
B. Line students up shoulder to shoulder in the middle of the room and instruct them to walk in a circle with the student on the right end as the pivot or anchor.			uct them to walk	the lateral aspect of your forearm, just distate elbow joint. Using light pressure, move you	Palpate using your finger pads over the muscles on the lateral aspect of your forearm, just distal to the elbow joint. Using light pressure, move your fingers over the area. Describe what you feel (hard, soft,	
(C. Repeat activity B with the student on the left end as the pivot or anchor.				firm).	
]	-	the speed of moven es A, B, and C.	nent of each student			
]		. Compare distance traveled by each student in activities A, B, and C.				

5.	With your finger pads over the muscles on the lateral aspect of your forearm, just distal to the elbow joint, gradually increase the pressure of your palpation until it becomes slightly uncomfortable. Note how much pressure you are using. Patients, particularly those in pain or with fragile tissues, may not tolerate that amount of pressure. Repeat the muscle palpation using your fingertips. What problem may you encounter palpating with your fingertips?	 10. Practice the observation and palpation skills that follow on at least two partners. A. Palpate the biceps brachii muscle belly and tendons. The biceps brachii is on the anterior surface of the humerus. Palpate the relaxed muscle, and then palpate while your partner is contracting the muscle. 1) Describe how you used your hands to palpate (e.g., fingertips, light pressure).
6.	Using your finger pads, palpate over the dorsal aspect of the elbow. This is a bony area. Describe what you feel.	2) Describe the differences you observed when you palpated the relaxed muscle compared to the contracted muscle.
7.	Compare the pressure used to palpate at the wrist, forearm, and elbow. Compare and contrast the sensations you feel at each area.	3) In which state, relaxed or contracted, was the muscle tendon easier to palpate? RelaxedContracted B. Palpate the medial and lateral epicondyles of the humerus—bony projections on the medial and lateral sides at the elbow.
8.	Repeat the previous palpations on your partner. Did you feel the same characteristics as when you palpated yourself? Were you able to adjust your pressure to a comfortable level for your partner while still being able to make the observations you needed?	1) Describe how you used your hands to palpate. 2) Describe what you felt.
9.	Place the dorsum (back) of your hand on the anterior surface of your partner's foot. Gradually move your hand proximally to just proximal to the knee joint. Describe the temperature of your partner's lower extremity.	C. Palpate the patellar tendon—first with the quadriceps muscle relaxed, and then with your partner contracting the muscle. The patellar tendon is on the anterior proximal tibia just distal to the patella (kneecap). 1) Describe how you used your hands to palpate.
		- Furpace.

2)	Describe what you felt.	2)	Describe what you felt.
3)	Did the tendon feel any different when the quadriceps muscle was contracting?	3)	Describe how your partner reacted when you palpated the ulnar nerve with increasing pressure.
4)	If you felt a difference in the tendon between the relaxed state and the contracted state, describe the difference.	com ideal norm	ure examination is a visual observation that pares a person's posture to the normal or l posture. Symmetry and deviation from nal posture are noted. Because you have not
5)	Did contracting the muscle help you to find the tendon?	follo of m stan	ied posture yet, compare the second of the owing two postures to the first, making note najor changes. Example: In the preferred ding position, your partner shifts a major ion of body weight to the left leg.
fo	alpate your partner's pulse at the radial artery, hich is located on the anterior surface of the brearm on the lateral side. Describe how you used your hand to palpate.	st or 4 B. C pr	Observe your partner while he or she is randing erect with weight distributed equally in both feet, which are placed approximately inches apart with the toes pointed forward. Observe your partner standing in his or her referred standing posture. Describe any major differences between the wo postures.
2)	Describe how the pulse felt (weak, strong,	_	
2)	regular, irregular).	parti	
as	alpate the ulnar nerve on the posterior medial spect of the elbow as the nerve passes just teral to the medial epicondyle. (This is the		escribe your partner's physical characteristics uch as weight, height, and hair and eye color.
ne	erve that activates when one hits the "funny one.")	- В. М	Take faces to represent different emotional
1)	Describe how you used your hand to palpate the nerve.	a1 a1	nd physical states such as happy, sad, mad, and in pain. Your partner is to guess which rate you are displaying.

- 13. To practice auditory observations, start with your back to your partner so you cannot see what he or she is doing.
 - A. While your partner is facing away from you, perform some activities of daily living (ADLs) such as taking off your shoes, removing your shirt, and walking. Ask your partner to describe what they heard and to tell you what activity you performed.

B. If you know how, take your partner's blood pressure, paying particular attention to the sounds rather than the pressure reading. What sounds did you hear? Were there periods of silence? If so, when?

C. Using a stethoscope, listen to your partner's heart and lungs. Describe the sounds you heard.

14. Perform as many of the motions that follow as possible while standing, sitting, lying supine, and side-lying.

Shoulder girdle: Elevation and depression

Protraction and retraction Upward and downward rotation Shoulder: Flexion, extension, and

hyperextension

Abduction and adduction Horizontal abduction and

adduction

Medial and lateral rotation

Circumduction

Elbow: Flexion and extension
Forearm: Supination and pronation

Wrist: Flexion and extension

Radial and ulnar deviation

Circumduction

Finger: Flexion and extension

Abduction and adduction

Thumb: Flexion and extension

Abduction and adduction

Opposition

Hip: Flexion, extension, and

hyperextension

Abduction and adduction Medial and lateral rotation

Circumduction

Knee: Flexion and extension

Ankle: Dorsiflexion and plantar flexion

Inversion and eversion

Toe: Extension and flexion

15. Perform the previously listed movements in random order and have your partner name the movement that you are performing.

■ ■ Post-Lab Questions	B. Flexion:
Student's Name	
Date Due	C. Medial rotation:
After you have completed the Worksheets and Lab Activities, answer the following questions without using your book or notes. When finished, check your answers.	D. Osteokinematics:
1. List the senses used when observing a person.	4. List at least two structures of the body that are: A. Superior to the waist:
2. List at least two observable body structures on the:	
A. Anterior surface:	B. Lateral to the sternum:
B. Lateral surface:	C. Inferior to the hip:
C. Posterior surface:	
C. Posterior surface:	D. Distal to the elbow:
3. Define the terms that follow. A. Kinesiology:	
5. What type of motion is occurring in the activities that	t follow?

Activity	Type of Motion
Knee flexion	
Bowling ball rolling down the gutter	
Rounding the curve when running on a track	
A somersault	
A curve ball in baseball	

Skeletal System

■ ■ Pre-Lab Worksheets		4. Match the term to the appropriate description.		
Student's Name			Compact bone	A. Area at each end of long bones
Date Due			Cancellous bone	B. Flared part of bone
Complete the question	ns that follow [prior to the lab class.	Epiphysis	C. Center of bone
1. List five functions of the skeletal system.		Epiphyseal plate	D. Lining of medullary canal	
			Diaphysis	E. Hard, dense outer layer of all bones
			Medullary canal	F. Responsible for bone resorption
			Endosteum	G. Outer membrane of bone
2. Complete the table that follows, indicating whether the listed body parts are part of the axial or		Osteoclasts	H. Area of new bone growth	
appendicular skel	eton.		Metaphysis	I. Main shaft of bone
Body Part	Axial	Appendicular	Periosteum	J. Porous and spongy interior of bone
Arms			5. A pressure epiphysis is lo	
Head			bone	
Vertebrae			A traction epiphysis is loc	
Lower extremities			to	and is subjected
3. The organic (livin bone			6. Where are osteoclasts loca	ated?
The inorganic (no	onliving) comp	onent of bone		

provides bone _

7.	Enter the letter by the structures in Figure 2-1 next to the correct label for that structure. You can also write the names of the structures on the figure.
	Diaphysis
	T : 1 :

Diaphysis
Epiphysis
Endosteum
Epiphyseal plate
Medullary canal
Metaphysis
Periosteum

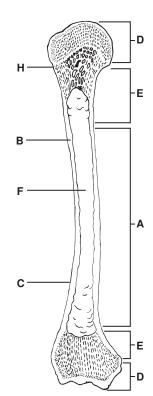


FIGURE 2-1 Longitudinal cross section of a long bone.

8. L	ist five functions of the periosteum.
A	
В	
Ъ	
С	
	-
D	
E	
9. W	There does longitudinal bone growth occur?
0 0	omplete the table that follows, indicating

10.	Complete the table that follows, indicating
,	whether the terms are related to compact or
	cancellous bone.

Characteristic	Compact Bone	Cancellous Bone
Porous and spongy		
Hard and dense		
Covers outside of bone		
Inside portion of bone		

FIGURE 2-2 Types of bones.

■ ■ Lab Activities

Student's Name	

Date Due _____

- 1. The patella can be considered a sesamoid bone. With your partner long sitting (sitting on a mat or table with knees extended) and with muscles relaxed, grasp the patella with the thumb and index finger of one hand proximally and the thumb and index finger of the other hand distally.
 - Gently move the patella medially and laterally, superiorly and inferiorly. Note the amount of motion in each direction.
 - Palpate for other sesamoid bones such as on either side of the flexor hallucis longus on the bottom of the foot, at the head of the first metatarsal, and the flexor tendons of the thumb near the metacarpophalangeal and interphalangeal joints.
- 2. A. Using skeletons and models, find examples of the bony landmarks that follow. Describe where the landmark is located (using terms such as *proximal/distal, medial/lateral, superior/inferior*, and *anterior/posterior*) and give the name of the bone where you found the landmark.
 - B. On your partner, palpate as many of the bony landmarks as possible.

Landmark	Location
EXAMPLE Trochanter	Proximal and lateral on femur
Foramen	
Fossa	
Groove	
Meatus	

Sinus	
Condyle	
Eminence	
Facet	
Head	
Crest	
Epicondyle	
Line	
Spine	
Tubercle	
Tuberosity	
Trochanter	

3. On a skeleton, identify the bones and bone groups that make up the axial skeleton and the appendicular skeleton. List the bones that are found in each group.

Skeleton	Bones and Bone Groups (e.g., carpals, ribs)
Axial	
Appendicular	

4. Using bones in the bone box, arrange the bones of the upper extremity and the bones of the lower extremity in proper anatomical orientation to one another to create the appendicular skeleton. Arrange an entire right side or left side.

5. Compare a cross section of the diaphysis of a long bone and a cross section of the epiphysis of a long bone. Complete the table below.

	Diaphysis	Epiphysis
Type of bone		
Thickness of outer layer of bone		
In living bone, the outer layer is covered in		

6.	Using disarticulated bones, identify the structures
	listed below on several different bones. Can all of
	the parts be found on each bone?

Epiphysis	Epiphyseal plate	Diaphysis
Endosteum	Metaphysis	Periosteum

- 7. Using the skeleton and models:
 - A. Find examples of the types of bones that follow.
 - B. Name an example of each type of bone.

Type of Bone	Example
Short	
Flat	
Long	
Irregular	
Sesamoid	

■ ■ Post-Lab Questions

St	udent's Name
Da	ite Due
Ac us	ter you have completed the Worksheets and Lab tivities, answer the questions that follow without ing your book or notes. When finished, check ur answers.
1.	The function of the skull is to protect the brain. As the skull matures, the bones fuse together. Under what circumstances is this a disadvantage of the mature skull?
2.	Describe the function of the:
	A. Axial skeleton:
	B. Appendicular skeleton:
3.	What is the result of a loss of the inorganic component of bone?
4.	Why is cancellous bone lighter than compact bone?
5.	How does a traction epiphysis affect the shape of a bone?

6. What is the function of the parts of a bone that follow?

Function

7. Identify whether the types of bones listed below are typically part of the axial or appendicular skeleton.

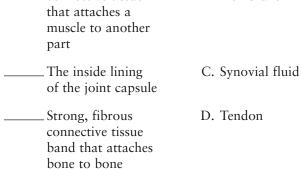
Type of Bone	Axial Skeleton	Appendicular Skeleton
Long		
Short		
Flat		
Irregular		

8. Match the descriptions of bone markings that follow with the correct term. Use each term only once.				_Large depression	K. Meatus	
		Jse each term			_Linear depression	L. Trochanter
	Projection above a	A. Sinus			_ Ridge	M. Epicondyle
	condyle				_Small, rounded	N. Line
	_Rounded projection	B. Tubercle			projection	
	at the end of a joint				_Sharp projection	O. Facet
	Hole	C. Crest	9. Where does growth of long bones occ		bones occur?	
	Sponge-like space filled with air	D. Spine				
	Tube-shaped opening	E. Foramen	10.	Why a bone?	re epiphyseal plates n	ot found in mature
	_Rounded projection	F. Condyle		bone.		
	beyond a narrow neck portion					
	_Less prominent ridge	G. Groove	11	What	function do sesamoid	hones carried
	Large, rounded projection	H. Fossa	11. What function do sesan		function do sesamoid	bones serve:
	Flat articular surface	I. Tuberosity				
	Very large projection	I. Head				
	very rarge projection	i. i icau				

Articular System

■ ■ Pre-Lab Worksheets	5. Give an example of each of the types of fibrous joints that follow.		
Student's Name	A. Synarthrosis:		
Date Due	B. Syndesmosis:		
Complete the questions that follow prior to the lab class.	C. Gomphosis:		
1. What are the three basic types of joints? A	6. What is another name for a synovial joint?		
B	7. Which of the three basic types of joints provides for: A. Mobility:		
2. Which type of joint is the most typical of the joints of the appendicular skeleton?	B. Stability:8. List an example of each of the synovial joints that		
3. Rank the three basic types of joints from most to least amount of movement permitted.	follow. A. Nonaxial joint: B. Uniaxial joint:		
Most:	C. Biaxial joint:		
	D. Triaxial joint:		
Least:			
4. Match the type of fibrous joint with the appropriate description.			
Synarthrosis A. Bolted together			
Syndesmosis B. Ligaments join the bones			
Gomphosis C. Fibrous periosteum between bones			

		-
9.	9. Enter the letter by the structures in Figure 3-1 ner to the correct label for that structure. You can also write the names of the structures on the figure.	
	Articular cartilage	
	Bone	
	Ligament	
	Joint capsule	
	Joint space	
	Synovial fluid	
	Synovial membrane	
10. Match the descriptions with the correct term the follows. Use each term only once.		orrect term that
	Enclosed cavity filled with fluid that prevents friction on moving parts	A. Joint capsule
	Strong cord of connective tissue that attaches a muscle to another	B. Synovial membrane



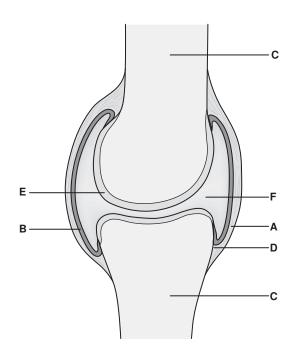


FIGURE 3-1 Synovial Joint.

Flat, thin, fibrous sheet of connective tissue that attaches a muscle to another part	E. Articular cartilage
Fibrous connective tissue that surrounds a joint	F. Bursa
Sheath of connective tissue that surrounds a muscle	G. Aponeurosi
Fluid secreted from inside the lining of the joint capsule that lubricates the joint	H. Ligament
Smooth covering of bone ends	I. Fascia

11. For each drawing (Figs. 3-2 through 3-4), fill in the blanks regarding planes and axes.

A. In Figure 3-2:

This is the _____ plane. It is associated with the ____ axis.

Describe the direction of the axis.

List the motions that occur in this plane around this axis.



FIGURE 3-2

D	T	L.	2	1
к	In	Figure	5 -	٠.

This is the ______plane. It is associated with the ______axis.

Describe the direction of the axis.

List the motions that occur in this plane around this axis.

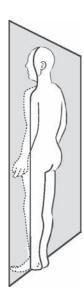


FIGURE 3-3

C. In Figure 3-4:

This is the ______ plane. It is associated with the _____ axis

Describe the direction of the axis.

List the motions that occur in this plane around this axis.

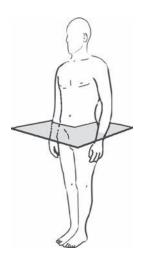


FIGURE 3-4

12. Indicate the degrees of freedom for each of the joints that follow.

Joint	One	Two	Three
Shoulder			
Elbow			
Wrist			
Hip			
Knee			
Ankle			

■ ■ Lab Activities

Student's Name			2) What is another name for this type of joint?	
Date Due			C. 1) Synovial joints:	
	tudents perform the		2) What is another name for this type of joint?	
Shoulder girdle Shoulder	Protraction Flexion Abduction Horizontal adduction	Depression Retraction Extension Hyperextension Adduction Horizontal abduction	D. Nonaxial joints: E. Uniaxial joints: F. 1) Biaxial joints: 2) What is another name for this type of joint? G. 1) Triaxial joints:	
Elbow	Medial rotation Flexion	Lateral rotation Extension	2) What is another name for this type of joint?	
Forearm Wrist	Supination Flexion Radial deviation Flexion	Pronation Extension Ulnar deviation Extension	4. Standing next to a wall so that your left shoulder and hip are against the wall, individually perform flexion and extension of each of the left extremity	
Titalilo	Abduction	Opposition	joints that follow: shoulder, elbow, hip, and knee.	
Hip			A. In what plane were you moving?	
Knee	Abduction Medial rotation Flexion	Adduction Lateral rotation Extension	B. What is the axis for that plane?	
Ankle Foot	Medial rotation Dorsiflexion Inversion	Lateral rotation Plantar flexion Eversion	5. Standing in anatomical position with your back against a wall, perform the motions that follow.A. Slide one arm along the wall until your hand	
2. Using models, locate the components of synovial joints listed below, and note the relationships of the components to one another.		•	points toward the ceiling. B. Return your arm to anatomical position by moving it along the wall.	
Bones Hyaline	Ligaments Articular	Capsule Synovial	C. Move one leg to the side, sliding your heel along the wall.	
cartilage Menisci	cartilage Labrum	membrane Disks	D. Return your leg to anatomical position, keeping it in contact with the wall.	
~	ton or models, iden the types of joints th	•	1) What motion did you perform as you moved your extremity away from your body?	
A. Fibrous jo	oints:		2) What motion did you perform a sure of	
Synarthro	sis:		2) What motion did you perform as you moved your extremity back to the anatomical	
Syndesmo	osis:		position?	
Gomphos	is:			

B. 1) Cartilaginous joints:

3) In what plane were you moving?	8. Using models of joints, a skeleton, and your own body, move the joints listed below through the motions normally permitted to determine the					
4) What is the axis for that plane?	degrees of freedom and the specific motions. Record your findings on the chart that follows.					
6. Stand facing a counter with your upper arms close to your body, your elbows at approximately 90 degrees of flexion, and your forearms pronated,	Joint	Degrees of Freedom	Motions			
placing your hands palm-down on the countertop. Keeping your hands in contact with the surface of the countertop, slide your palms on the countertop:	Shoulder					
away from the midline of your body.toward the midline of your body.	Elbow					
A. What motion did you perform when your palms moved away from the midline of your body?						
	Wrist					
B. What motion did you perform when your palms moved toward the midline of your body?						
C. In what plane were you moving?	Hip					
D. What is the axis for that plane?	Knee					
 7. Sitting on a chair, keeping your knee flexed to about 90 degrees, move your lower leg: away from the midline of your body. toward the midline of your body. 		s the relationship be n and the types of jo	tween the degrees of oint?			
A. What motion did you perform when you moved your leg away from the midline of your body (move your foot out to the side)?	fossa w the pres	rith and without their sence or absence of	etabulum and glenoid ir labrum. How does the labrum change the			
B. What motion did you perform when you moved your leg toward the midline of your body (move your foot in toward your other foot)?	structui 	re of the joint?				
C. In what plane were you moving?						
D. What is the axis for that plane?						

■ ■ Post-Lab Questions

Student's Name	
Date Due	4. List the structure(s) that lubricate and supply nutrition to joint surfaces.
After you have completed the Worksheets and Lab	
Activities, answer the questions that follow without using your book or notes. When finished, check your answers.	5. List the five features of a synovial joint.
1. Compare and contrast fibrous joints, cartilaginous joints, and synovial joints.	
A. What are the structural similarities?	
B. What is the difference in the amount of motion permitted?	6. Place a check in the box that corresponds to the motions that generally occur in each plane about its axis.

2. Diarthrodial joints can be classified based on their characteristics. Fill in the blanks with the appropriate information. There may be more than one example.

Number of Axes	Shape of Joint	Joint Motions Allowed	Example
Nonaxial 0	Plane	Minimal	Metatarsals
Uniaxial 1			
Biaxial 2			
Triaxial 3			

Planes/ Axes	Flexion/ Extension	Adduction/ Abduction	Medial/ Lateral Rotation
Sagittal plane/ Frontal axis			
Frontal plane/ Sagittal axis			
Transverse plane/ Vertical axis			

3. What structure(s) may reinforce a joint capsule?

7. For the joints listed, indicate in which plane the joint normally can actively move.

Plane	Shoulder	Wrist	Knee	Ankle
Sagittal				
Frontal				
Transverse				

8.	De	fine degrees of freedom.
9.	Giv	ve examples of joints that have:
	A.	One degree of freedom:
	В.	Two degrees of freedom:
	C.	Three degrees of freedom:

10.	Of the joints	s that follow,	which	generally	have
	more degree	s of freedom	?		

Axia	l skeleton	 Ap	per	idio	cular	skeleto	n
			1				

11. The more degrees of freedom a joint has, the more likely its function is:

_____ mobility. _____ stability.

12. Underline the correct term inside the parentheses.

The axial skeleton functions to provide (mobility/stability) for the (mobility/stability) of the appendicular skeleton. The abilities of the axial and appendicular skeleton combine to permit the myriad of movements the human uses in daily activities.

Arthrokinematics

St	■ ■ Pre-Lab Works		Accessory joint C. movements resulting from external force	Joint mobilization
	ate Due		Motions that D. facilitate active motion	Manipulation
Ca	omplete the questions that follow p	rior to the lab class.	motion	
1.	Match the types of normal end f definitions to the alternative nan		 Underline the correct term. A convex curved inward/outward. A concave s curved inward/outward. 	
	Has considerable give	A. Hard	5. An ovoid joint is formed by two bon	es forming
	Abrupt limit to motion	B. Soft	a relation bone's surface is	nship. One
	Slight give at end of motion	C. Firm	the other is	
2.	Match the types of abnormal endefinitions.	d feels with their	6. Each of the two bones that make a se saddle-shaped joint have a joint surfais and a j	ace that
	Soft, "wet sponge" feel	A. Bony	that is	
	Rebound movement at end of ROM	B. Boggy	7. Match the terms for arthrokinematic their definitions.	motion with
	Sudden hard stop before end of ROM	C. Muscle spasm	Same point on each A. surface remains in contact with each other	Roll
	Reflex muscle guarding	D. Empty		Spin
	Pain, not mechanical constraint, limits movement	E. Springy block	surface contacts new points on the other surface	Эрш
3.	Match the terms that follow with	h their definitions.	New points on each C. surface come into	Glide
	Passive oscillatory motions applied by external force	A. Component movements	contact throughout the motion	
	Forceful external force applied within a short range	B. Joint play		

8.	Apply the concave-convex rule type of joint surface (concave/ceach of the statements that followerect term.	con	vex) moving in
	A. Which joint surface (concar in the opposite direction as segment?		
	B. Which joint surface (concaving the same direction as the segment moves?		
9.	Match the joint surface position description.	n w	vith its
	Close-packed position	Α.	Congruent joint surfaces
	Open-packed position	В.	Incongruent joint surfaces
10.	Match the type of force with it	ts d	efinition.
	Joint surfaces are pulled apart	A.	Traction, distraction, or tension force

Joint surfaces move

opposite directions

Joint surfaces are

parallel and in

of each other

pushed closer together B. Approximation,

compression

force

C. Shear force

11.	When	bending	the	trunk	to	the	right
-----	------	---------	-----	-------	----	-----	-------

on the left side is _____

A.	The force acting on the right side is because the curve
	on the right side is
В.	The force acting on the left side is
	because the curve

■ ■ Lab Activities

1. Passively extend your partner's elbow. When you reach the end of the range, the humerus and ulna come together, locking the elbow in place. The term used to describe this end feel is

2. Have your partner lie supine. Passively flex his or her hip. When you reach the end of the range, there is more "give" than at the end of elbow

extension. This is because there is much more

end feel is ______.

muscle bulk, and the femur and acetabulum do

not lock together. The term used to describe this

3. With your partner lying prone, passively hyperextend

his or her hip. When you reach the end of the range,

Student's Name __

Date Due ___

4. Perform the motions that follow classmates. Describe the end for Was the end feel for the same of your classmates?	eel of each motion.	
Motion	End Feel	
Elbow flexion		
Elbow extension		
Wrist flexion		
Knee extension		
Hip flexion with knee flexion		
Hip flexion with knee extended		
5. Perform shoulder flexion, first medial rotation and then with Compare the amount of range with each movement.A. Which movement has great	lateral rotation.	
Medial rotation	Lateral rotation	
B. This is an example of what t	type of arthrokinemati	

6.	Sitting and facing your partner, with your		
	partner's hand supported on a table, grasp you		
	partner's index finger middle phalange with on		
	hand and his or her index finger distal phalang		
	with your other hand. While holding the middle		
	phalange stable, move the distal phalange from		
	side to side.		

A.	Can a	person	perform	this	movement
	volunt	arily?			

B. What is this movement called

- 7. Using a skeleton and bones, locate bones whose articular surfaces have the characteristics that follow. Describe where on the bone the characteristic is found (proximal/distal; medial/lateral; anterior/posterior).
 - A. Concave surface:

Bone	Location
Scapula	
Radius	
Tibia	
llium	
Sacrum	

B. Convex surface:

Bone	Location
Humerus	
Femur	
Talus	
Sacrum	

8. Examine the carpometacarpal (CMC) joint of thumb and fingers.		
	Α.	How do the joint surfaces of the thumb differ from the joint surfaces of the fingers?
	В.	What is the type of joint for each?
9.		oserve the distal end of a femur and the oximal end of a tibia.
	Α.	Which has the larger articular surface?
	В.	Move the tibia on the femur as if performing extension and flexion. Does the tibia move over the entire articular surface of the femur?
	C.	As you move the tibia on the femur, as if performing extension, move the femur posteriorly on the tibia. Did the tibia move over more of the articular surface of the femur this time?
	D.	The posterior movement of the femur is an example of what kind of arthrokinematic motion?
	Е.	The movement of the tibia is an example of what kind of arthrokinematic motion?
10.	bo	ing a skeleton or the articulated upper extremity nes, observe the proximal end of the radius tile performing pronation and supination.
	Α.	Describe the movement of the radius on the humerus.
	В.	This movement is an example of what type of arthrokinematic motion?

11. Using a skeleton or disarticulated upper extremity bones, observe the movement of the head of the humerus while performing shoulder joint medial and lateral rotation. Indicate which of the movements that follow occurs as the humerus moves on the glenoid fossa.

_____Roll _____Spin ____Glide

- 12. Place two small sticky notes with large dots on the lateral surface of your partner's arm, with one dot over the lateral epicondyle at the elbow and the other at the shoulder on the greater tubercle. Starting in the anatomical position, have your partner slowly flex the shoulder while you observe the positions of the dots. Underline the correct answers.
 - A. When performing shoulder flexion, which joint surface is moving—the *concave* or the *convex* surface?
 - B. In the starting position, the dot at the elbow is *superior* or *inferior* to the dot at the shoulder.
 - C. At the end of shoulder flexion, the dot at the elbow is *superior* or *inferior* to the dot at the shoulder.
 - D. This is an example of the concave-convex rule describing movement of the convex joint surface. According to the concave-convex rule, the convex joint surface moves in the *same* or *opposite* direction as the body segment's motion.
- 13. Place two small sticky notes with large dots on the lateral aspect of your partner's lower leg, with one dot over the lateral malleolus and the other over the head of the fibula. Starting in the anatomical position, have your partner slowly flex the knee moving the tibia on the femur while you observe the positions of the dots. Underline the correct answers.
 - A. When performing knee flexion and extension, moving the tibia on the femur, the moving joint surface is *concavelconvex*?
 - B. During flexion, the proximal dot moved *superiorly/inferiorly?*
 - C. During flexion, the distal dot moved *superiorly/inferiorly?*
 - D. This is an example of the concave-convex rule describing movement of the concave joint surface. According to the concave-convex rule, the concave joint surface moves in the *same/opposite* direction as the body segment's motion.

14. Using a skeleton or bones, observe and describe the close-packed or open-packed positions of the joints that follow.

Joint	Close-Packed	Open-Packed
Glenohumeral		
Elbow: ulnohumeral		
Interphalangeal		
Hip		
Knee		
Ankle: talocrural		

5. When a person assumes sitting from standing, the

knee is flexing.

■ ■ Post-Lab Questions

Student's Name	A. When performing this movement, is the concave surface moving on the convex surface or is the
Date Due	convex surface moving on the concave surface? Underline the correct response.
After you have completed the Worksheets and Lab Activities, answer the questions that follow without using your book or notes. When finished, check your answers.	B. During assumption of standing from sitting, according to the concave-convex rule, when the surface moves on the surface, the joint surface moves
1. Give an example of each of the end feels that follow. Try to use examples not described in the textbook.	in the direction as the body segment movement.
A. Bony: B. Firm:	6. Is accessory motion or joint play best observed in a close-packed or an open-packed position? Why?
C. Soft:	-
D. Empty end feel:	7. Stand on a footstool with your right leg close to the
E. Springy block:	
2. What arthrokinematic motion(s) accompanies:	The force through the right lower extremity is approximation/traction, and the force through the
A. Shoulder abduction?	left lower extremity is approximation/traction.
B. Knee extension?	Underline the correct answers.
3. A saddle joint is unique because each bone of the joint has surfaces that are:	8. In the sitting position, turn your head and upper body while keeping your lower body stationary. This movement is,
	and it occurs in the plane about the
4. Give an example of each of the descriptions that follow.	axis. The force producing this motion is a force.
A. Joint movement with large amount of roll:	9. Describe typical exercises or activities that apply:
B. Joint movement with large amount of glide:	A. A traction force through the upper extremities:
	B. An approximation force through the lower extremities:
C. Joint movement with large amount of spin:	
	-

10.	. When bending the trunk to the left:			
	Α.	A. On which side are structures compressed?		
	В.	On which side are structures under tension?		
	C. With the trunk erect, what force is applied to the structures of the trunk as the trunk is twisted to one side or the other?			
11.	1. Of the descriptions that follow, a boggy end feel occurring before complete knee flexion is likely indicative of which?			
	bone on bonesoft tissue approximationswellingpain			

12.	Of the causes listed, when motion is stopped by the patient prior to completing full ROM, the likely cause is which?
	muscle spasm pain the patient does not like you swelling

Muscular System

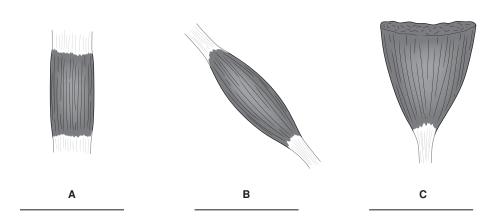
■ ■ Pre-Lab Worksheets			Auscles have origins and insertions. Which is enerally proximal?
Student's Name		_	
Date Due		3. A	The sternocleidomastoid muscle typically
Complete the questions that follow p	prior to the lab class.		flexes the head and neck. The mastoid process (on the head) is the insertion, and the sternum
1. Match the terms that follow wit	h their definitions.		and clavicle are the origin. Is the origin moving toward the insertion, or is the insertion moving
Muscle contraction without joint movement	A. Reversal of muscle action		toward the origin during flexion of the head and neck?
Distance between maximum contracted and extended length	B. Normal resting length	В	When you have worked hard and are short of breath, the sternocleidomastoid helps you to
The origin of the contracting muscle moves toward the insertion	C. Tone	case, is the origin moving towar	take deeper breathes by lifting the chest. In this case, is the origin moving toward the insertion, or is the insertion moving toward the origin?
Constant speed with variable resistance	D. Tenodesis	C	. Muscles acting in this manner are said to be performing a:
Not as effective as the prime mover	E. Isometric contraction		
Slight tension in a muscle	F. Isokinetic contraction		
Position when muscle is unstimulated	G. Assisting mover		
Can produce hand opening and closing	H. Muscle excursion		

4. Match the muscle with the characteristic associated with its name.

	Location	Shape	Action	Number of Heads	Attachments	Direction of Fibers	Muscle Size
Rhomboids							
Abductor digiti minimi							
Biceps brachii							
Quadriceps femoris							
Pectoralis major							
Gluteus medius							
Sternocleidomastoid							

5.	Enter the letter by the structures in Figure 5-1, next to the correct label for that structure. You can	n also	write
	the names of the structures on the figure.		

Bipennate	Multipennate	Strap
Fusiform	Unipennate	Triangular





D E F _____ FIGURE 5-1 Muscle shapes.

11. The advantage of a two-joint muscle that has

because while it is _

12.

13.

opposing actions at the joints it crosses is that it can maintain greater contractility through its range,

6. Using the terms listed in Question 5, name the type of muscle fiber arrangement for each muscle:

Fiber Arrangement
acteristic with the correct erm only once. etched A. Irritability resting

Flexor pollicis longus			
Bicep	os brachii		
Rectu	ıs femoris		
Stern	ocleidomastoid		
	Match the muscle chara description. Use each te		
-	Ability to be strubeyond normal length		A. Irritability
-	Ability to receiv respond to a still		B. Contractility
-	Ability to produ	ce	C. Extensibility
-	Ability to return normal length	ı to	D. Elasticity
l 1	8. A muscle with a resting length of 4 inches can be shortened approximately 2 inches and lengthened 4 inches. Therefore, it has an excursion of		
t t	9. A muscle that cannot be lengthened simultaneously over all the joints it crosses is said to be <i>actively/ passively</i> insufficient. Underline the correct answer.		
I	Stretching a multijoint positioning the joints to n its:		
_	shortened position. resting position. lengthened position. lengthened position.	ion over a	

one joint, it is beingover the other joint.				
		of muscle contra c (E) or concent	action described cric (C).	
	Insertion r Isotonic co Muscle co against gra	g contraction noves toward or noves away from ontraction ntraction moves avity ntraction slows		
	mplete the stat ms listed below	ements that follow.	low using the	
_		Antagonist Stabilizers	Cocontraction Synergists	
Α.	The shoulder g		ct as when one lifts a	
В.	3. When a muscle acts to eliminate undesired motions during an activity, it is functioning as a(n)			
C.	. Contracting the quadriceps and hamstring muscles simultaneously is an example of			
D.	Muscles that are primarily responsible for producing a specific movement are called the			
Е.	. When the biceps are contracting, the triceps muscle is the			
F.	F. The elbow has three muscles that can produce flexion. When more than one muscle is working, the muscles are acting as			
G.		et flexors and ex n, each muscle i	stensors produce s also acting as	

14. The angle of pull of a muscle is determined, in part, by the relationship of the muscle to the	C. The upper extremity when one is supported on crutches
it crosses. 15. Indicate whether each of the activities that follow	D. The lower extremities when one is swinging from an overhead bar
is an example of an open kinetic chain (O) or a closed kinetic chain (C).	E. The lower extremities when one is performing wall slides
A. The upper extremity when one is walking and carrying a book bag	F. The lower extremity being used to kick a ball
B. The upper extremity when one is doing	

■ ■ Lab Activities

Student's Name	-
Date Due	
1 TT	1 11 11 1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1

1. Using a skeleton, locate the attachments of the muscles listed below. Palpate on your partner the origins and insertions of the muscles listed below. Indicate which, origin or insertion, is located proximally and which is located distally. Remember that the proximal attachment is also usually the more stable attachment, and the distal attachment is the more movable attachment.

Muscle	Origin	Insertion	Proximal	Distal
Brachioradialis	Lateral supracondylar ridge on the humerus	Styloid process of radius		
Teres minor	Axillary border of scapula	Greater tubercle of humerus		
Rectus abdominis	Pubis	Costal cartilages of fifth, sixth, and seventh ribs		
Sartorius	Anterior superior iliac spine	Proximal medial aspect of tibia		
Soleus	Posterior tibia and fibula	Posterior calcaneus		

2. Using illustrations from the Lippert text, locate the muscles listed below on your partner and yourself. Use a skin pencil or a water-soluble marker to draw over your partner's muscles, showing the muscle fiber arrangement.

Deltoid Pectoralis major Flexor pollicis longus Biceps brachii Rectus femoris Sternocleidomastoid Rhomboids

- 3. Have your partner assume a supine position. Standing next to your partner's right lower extremity, place the heel of her or his lower extremity in the palm of your right hand. Place your left hand under your partner's right thigh.
 - A. Slowly flex and then extend your partner's hip and knee simultaneously. Note the amount of "resistance" you feel while moving your partner's lower extremity. Some people have a difficult time letting someone else move their body parts; however, if your partner is relaxed, you will feel the normal resting tone of his or her lower extremity muscles.

- 4. With your partner in a supine position, stand next to her or his right lower extremity and place the heel of her or his lower extremity in the palm of your right hand. Place your left hand under your partner's right thigh.
 - A. Slowly flex and then extend your partner's hip and knee simultaneously. Note the amount of hip flexion.
 - B. Next, slowly flex and then extend your partner's hip while keeping the knee extended (straight). Note the amount of hip flexion your partner has when the knee remains extended. Hip flexion with the knee extended (straight) is known as a straight leg raise—SLR.
 - 1) Was the amount of hip flexion more, the same, or less with knee extended compared to hip flexion with the knee flexed?

2)	Was	the	result	what	vou	expected?	

3)	Is this an example of active or passive	
	insufficiency?	

4)	Which muscle(s) was (were) being lengthened
	simultaneously over all the joints they
	crossed when you moved your partner
	through the SLR?

- 5. Perform the activities that follow on your partner.
 - A. With your partner in a supine position, perform simultaneous hip and knee flexion. Note the amount of knee flexion obtained when the hip is flexed.
 - B. Have your partner assume a prone position. Align the thigh in anatomical position. Slowly flex the knee of the same lower extremity you had moved when your partner was supine. Note the amount of knee flexion motion present now that the hip is extended.
 - 1) Was the amount of knee flexion *more*, *the same*, or *less* with the hip extended compared to knee flexion with the hip flexed?
 - 2) Was the result what you expected?
 - 3) Is this an example of *active/passive* insufficiency? Underline the correct answer.
 - 4) Which muscle(s) was (were) being lengthened simultaneously over all the joints they cross when you moved your partner through knee flexion with the hip extended?
- 6. Perform the activities that follow on your partner.
 - A. With your partner sitting over the side of a treatment table with her or his knee at about 90 degrees of flexion, resist your partner's isometric knee flexion. Note how strong the knee flexors are in this position.
 - B. Have your partner assume a prone position with hip extended and the same knee flexed to 90 degrees. Repeat the resisted isometric contraction of the knee flexors, noting the strength of the knee flexors.

- C. Have your partner assume a prone position with hip extended and flex her or his knee through as much of its range of motion as possible (more than 90 degrees). Repeat the resisted isometric contraction at the end of the motion, noting the strength of the knee flexors. Be cautious with the resistance offered because your partner may develop a muscle cramp.
 - 1) Describe the hip and knee position in these three scenarios:

Hip and Knee Position	Hip	Knee
Sitting on side of table		
Prone with knee at 90 degrees		
Prone with maximum knee flexion		

2)	Was	the	stre	ength	of	the	knee	flexors	the	same
	in al	l thi	ree	positi	ons	s?				

3)	If not, in which position were the knee
	flexors strongest?
	weakest?

- 4) Is the weakest position an example of *active/passive* insufficiency? Underline the correct answer.
- 7. When your partner performs the maximum knee flexion possible in the prone position, how do you determine if she or he is experiencing active insufficiency of the knee flexors or passive insufficiency of the knee extensors?

8. As a general rule, the statements that follow describe muscle contractions in relation to gravity.	C. As the leg is raised, select the type of contraction the hip agonist is performing.			
A. When joint movement occurs against gravity, the agonist performs which type of contraction?	IsometricConcentricNone			
IsometricConcentricNone	D. As the leg is lowered, select the type of contraction the hip agonist is performing.			
B. When joint movement occurs against gravity, the antagonist performs which type of contraction?	IsometricConcentricNone			
IsometricConcentricNone	E. Name the muscle group acting at the knee to maintain it extended.			
C. When a muscle contracts to prevent an undesired motion of another muscle, the contraction is usually?	F. Name the antagonist muscle group at the knee			
Isometric Concentric Eccentric None	G. As the leg is raised, select the type of contraction the knee agonist is performing.			
D. When joint movement occurs in the same	IsometricConcentricNone			
direction that gravity would produce movement, the agonist performs which type of contraction? Isometric Concentric Eccentric None E. When performing an eccentric contraction, the agonist is acting to	H. As the leg is lowered, select the type of contraction the knee agonist is performing.			
	IsometricConcentricNone			
	10. Move from a sitting to a standing position:			
<pre> overcome gravity slow down gravity.</pre>	A. The lower extremities are moving in			
F. When performing a concentric contraction, the agonist is acting to	an open kinetic chain.			
overcome gravity.	B. Which hip and knee muscle groups are the agonists?			
slow down gravity.	Extensors Flexors			
9. Throughout this lab manual, you will be asked to analyze activities to determine the type of muscle	C. The agonists are performing what type of contractions?			
contractions required to perform the activity. The general rule is that when a muscle is acting to overcome gravity or body weight, the muscle is performing a concentric (shortening) contraction and when a muscle is acting to slow down gravity, the muscle is performing an eccentric (lengthening) contraction. In the supine position, perform a straight leg raise.	IsometricConcentricNone			
A. Name the muscle group acting at the hip to perform the SLR.				
B. Name the antagonist muscle group at the hip.				

11. From a standing position, sit down.	12. Examine the location of the biceps brachii on the			
A. The lower extremities are moving in	anterior surface of the arm. The insertion of its tendon on the radius indicates that the biceps will			
an open kinetic chain.	flex the elbow and supinate the forearm.			
a closed kinetic chain.	A. When the elbow is in extension with the			
B. Which muscle groups are the agonists?	forearm supinated and the biceps performing an isometric contraction, in terms of angle of pull,			
ExtensorsFlexors	what force does the biceps exert on the elbow?			
C. The agonists are performing what type of	Approximation Traction			
contractions? IsometricConcentricEccentricNone	B. When the elbow is in full flexion with the forearm supinated and the biceps performing an isometric contraction, in terms of angle of pull, what force does the biceps exert on the elbow?			
	Approximation Traction			

extremity is then lowered to anatomical

■ ■ Post-Lab Questions

range of SLR, the hamstrings muscles have been _____. When the lower

= 1 OSt-Lab Questions		the hamstrings					
Student's Name	property	because of the property of 7. A person who has less hip flexion ROM when performing a SLR than when flexing the hip and knee simultaneously would experience insufficiency of the					
After you have completed the Worksheets and Lab Activities, answer the questions that follow without using your book or notes. When finished, check your answers.	performing and knee						
 A. When the agonist is contracting to overcome the resistance of gravity, the body part is movin in the <i>same/opposite</i> direction as the force of gravity. Underline the correct answer. B. In the example described in A, the agonist is contracting: concentrically. eccentrically. A. When the agonist is contracting to slow down the force of gravity, the body part is moving in the <i>same/opposite</i> direction as the force of 	position. possible a descriptio in the RC	Cour upper extr Curl (flex) just and then flex yours ons that follow OM of wrist flex Passive insuffications Passive insuffications Passive insuffications	your fingers abur wrist. Whimay explain to the ciency of the findercy of the f	as much as ich of the he difference inger			
gravity. Underline the correct answer. B. In the example described in A the agonist is contracting concentrically eccentrically isometrically.	E	Passive insuffice extensors Active insuffice flexors Active insuffice	ciency of the	finger			
3. When the agonist is contracting isotonically, generall the antagonist is:		extensors Active insuffic flexors	ciency of the w	rrist			
4. What is the relationship between muscle fiber arrangement and the force that a muscle can produce?	H	H. Active insufficiency of the wrist extensors					
	or locatio table belo	ames often refe on of the muscle ow with muscle ption given.	e on the body.	Fill in the			
5. When a muscle lacks irritability, it will lack the ability to:	Size	Shape	Function	Location			
6. When the lower extremity is held at the end of the							

10. What is the relationship between types of kinetic chain and whether the origin moves toward the insertion or the insertion moves toward the origin during a muscle contraction?	11. What effect does muscle fiber arrangement have on function of a muscle?

Nervous System

	Pre-Lab Works	heets		onducts nerve pulses from		M. White matter	
Student	's Name			e neuron			
	ee e the questions that follow t		loc	ollection of axe cated near the cervertebral fo		N. Gray matter	
Complei	e the questions that follow p	mor to the tab class.	Br	eak in myelin	sheath	O. Motor neuron	
1. Match the terms and descriptors that follow.		Gap between neurons		P. Motor			
	_Transmits impulses toward cell body	A. Neurons				endplate	
	_ Nerve cell	B. Cell body	loc	Collection of dendrites Q. Sensory located near the neuron			
	_ Integrates signals from sensory neurons	C. Myelin		intervertebral foramen What structure connects the right and left cerebra			
	_ Conductor of impulses from the cell body	D. Node of Ranvier	hemispher	nemispheres?			
	_Has cell body in dorsal root ganglion	body in dorsal E. Axon		3. Complete the table that follows about the lobes of the brain:			
Group of myelinated		F. Dendrite	Lobe	Location in	Brain	Main Function	
nerve fibers within central nervous system (CNS)			Frontal				
	_Distal end of axon	G. Anterior root (ventral)	Occipital				
	_ Includes major tracts in the CNS	H. Posterior root (dorsal)	Parietal				
	Large cell body with a long axon	I. Interneuron	Temporal				
	Contains mostly unmyelinated fibers	J. Nerve fiber	4. Match the	e spinal cord c	overings	with their location.	
	Has both dendrites	K. Synapse	Oı	ıter layer	A. A	arachnoid mater	
	and an axon extending from it			iddle layer		Oura mater	

5.	Match each of the structure major function.	es that follow with its	
	Thalamus	A. Hormone function and behavior	
	Hypothalamus	B. Body sensations— where pain is perceived	В
	Basal ganglia	C. Automatic control of respiration	-A
	Midbrain	D. Coordination of motor movement	FIGURE 6-1 Vertebra, superior view.
	Medulla oblongata	E. Control of muscle coordination, tone, posture	9. Label the cross-sectional drawing of the spinal
	Cerebellum	F. Center for visual reflexes	cord using the terms that follow (Fig. 6-2). ——— Anterior horn ——— Gray matter
6.	A. The subarachnoid space which spinal cord cover		Peripheral nerve Posterior column Posterior horn Posterior root White matter Anterior root
	an	d	F G H
	B. What circulates through	the subarachnoid space?	
	C. What is its function?		
			E D C B A
7.	Match the spinal cord elementheir descriptions.	ents that follow with	FIGURE 6-2 Spinal cord.
	Contains neuronal cell bodies and synapses	A. Conus medullaris	10. The conus medullaris is located at approximately the level of the lumbar vertebra.
	End of spinal cord	B. Cauda equina	11. The cauda equina is made up of the nerve roots for what spinal levels?
	Collection of nerve roots	C. Filum terminale	12. The filum terminale is at which end of the spinal cord?
	Non-neural portion of spinal cord	D. Gray matter	ProximalDistal
8.	Label the drawing of a vert follow (Fig. 6-1).	ebra using the terms that	
	Vertebral foramenNeural arch	Body	

-C

13. The corticospinal tract is the main pathway for			is the main p	athway for	18. List the major muscle groups innervated by each of the spinal segments that follow.		
	The tract crosses from one side of the brain to end in the opposite side of the spinal cord at the level of the				A. C1–C3:		
					В. С5–С6:		
		cospinal pathy		in the			
			norn.		C. C6–T1:		
14.	horn cell	motor neuro					
	nerve.				D. T2-T12:		
	Tı	rueFa	lse		E. L2–L4:		
15.	Match th	e cranial nerv mber.	e name with t	the cranial			
	Fa	acial	A. XI		F. L4–S3:		
	S _I	pinal accessory	y B. V		_		
	Trigeminal C. VII			19. For each of the three major nerve plexuses, provide the spinal levels that combine to make			
16.				al nerves that follow exit	the plexus.		
		above or below the vertebra of the same number. If there is not a matching vertebra, indicate which			A. Cervical plexus: B. Brachial plexus:		
	vertebra it exits below.						
_					C. Lumbar plexus:		
	Nerve	Above	Below	Vertebra	Lumbar portion:		
C1					Sacral portion:		
C7							
C8							
T1							
17.	ramus an	al nerve divide d the anterior ion of each ra	(ventral) ram	sterior (dorsal) nus. What is			
	Posterior	(dorsal) ramus:					
	Anterior	(ventral) ramı	ıs:				

20. Enter the letter by the structures in Figure 6-3 next to the correct label for that structure. You can also write the names of the structures on the figure.

_____ Cords _____ Divisions _____ Nerve roots _____ Peripheral nerves _____ Trunks

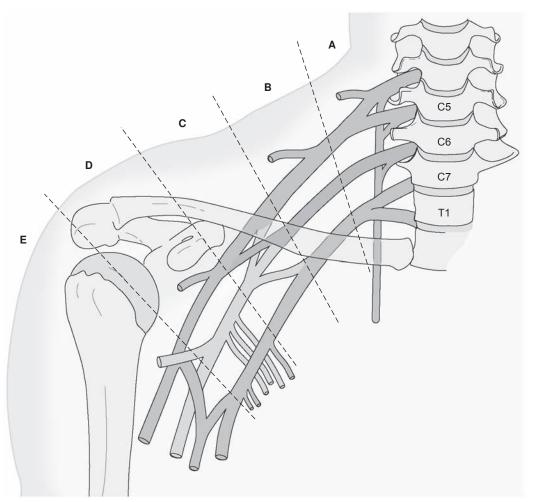


FIGURE 6-3 Brachial plexus.

		Axon terminals Myelin sheath		
	A)	A -C	B)	C G
FIGURE 6-4 Neuron struct 22. Identify which periphoral C5-C6: C6-T1: C8-T1:	eral nerve(s) arise(s)	L2-L4-S3	4: 3:	

2.

■ ■ Lab Activities

Student's Name	4) Median nerve:
Date Due	a. Path:
1. Using models of the brain and skull, locate the	
lobes of the brain. Note the relationship of the lobes within the skull.	b. Sensory distribution:
2. Using a model of the spinal column, locate:	
A. The divisions of the vertebral column—cervical, thoracic, lumbar, sacral, and coccyx	5) Ulnar nerve: a. Path:
B. The intervertebral foramen	
3. Place stockinets on your arm and leg, then draw on the stockinet the path of the peripheral nerves and	b. Sensory distribution:
the sensory distribution of the peripheral nerves. Use the stockinets as study guides for reviewing peripheral nerves and their sensory distribution. Alternatively, use a washable marker or skin pencil to draw on your arm and leg. For the peripheral nerve pathways, refer to Figures 6-23 through 6-33 in the Lippert textbook, 6th edition.	B. Lower extremity: Because the peripheral nerves emerge from the lumbosacral plexus and enter the thigh at the proximal end of the lower extremity as individual nerves, begin drawing at the inguinal ligament anteriorly and below the buttock posteriorly.
A. Upper extremity: Because the peripheral nerves emerge from the brachial plexus as the five individual nerves at approximately the head of the humerus, begin drawing at that level. Describe the path and sensory distribution of each.	1) Obturator nerve: a. Path:
1) Axillary nerve:	b. Sensory distribution:
a. Path:	2) Femoral nerve:
b. Sensory distribution:	a. Path:
2) Musculocutaneous nerve: a. Path:	b. Sensory distribution:
	3) Sciatic nerve:
b. Sensory distribution:	a. Path:
3) Radial nerve:	b. Sensory distribution:
a. Path:	

b. Sensory distribution:

4) Tibial nerve:	
a. Path:	
b. Sensory distribution:	
5) Common fibular nerve:	
a. Path:	
b. Sensory distribution:	
dentify the dermatome area for C5–C6.	

- 5. Using string or yarn of different colors, construct models of the brachial and lumbar plexuses. Alternatively, draw them on a white board.
- 6. Using the skeleton, arrange string or yarn to illustrate the pathways of the peripheral nerves.
- 7. Palpate the ulnar nerve in the groove between the medial epicondyle and the olecranon process. When you rolled or tapped on the nerve, did you feel a "pins and needles" sensation in your little finger?

Describe and assume the postures resulting from the nerve injuries that follow. Identify the nerve involved.

Description	Nerve
	Description