		<u> Skeletal System Notes</u>
<u>1.</u>	Во	ne functions:
	a.	Support organs
	b.	Protect organs
	c.	Allow Movement
	d.	Store Calcium (Ca) and other minerals
	e.	Blood cell formation
	f.	Fat storage
2.	Fiv	ve bone types
	a.	Long bones: slightly curved for strength
		i. Femur
		ii. Humerus
	b.	Short bones: cube-shaped
		i. Carpals
		ii. Tarsals
	c.	Flat bones: thin - provides protection and areas for muscle attachmen
		i. Ribs
		ii. Skull
	d.	Irregular bones: complex shapes
		i. Vertabrae
		ii. Facial bones
	e.	Sesamoid bones: tiny; shaped like a sesame seed
		i. develop in tendons (friction) - not in everyone
		ii. exception - Patella

3.	Во	one structure
	a.	Spongy Bone
		i. Contains many large spaces filled with <u>red marrow</u>
		ii. Found in short bones , <u>flat bones</u> , irregular bones, and the ends of <u>long bones</u> .
	b.	<u>Compact</u> Bone
		i. Contains few spaces between mineral matrix
		ii. Deposited in layers over spongy bone
		iii. Provides <u>support</u> and protection
	c.	Two types of marrow
		i. Red: where blood cells are made
		ii. <u>Yellow</u> : fat storage
		(400 474)
4.		acroscopic structure of long bone (pg. 163-171)
	a.	<u>Epiphysis</u> : enlarged ends of long bone
		i. Arti©ular Cartiြage: hyaline cartilage that cov the joint surfaces of bones
		ii. Secondary center of <u>ossification</u> .
	b.	<u>Diaphysis</u> : shaft of long bone
		i. <u>Periosteum</u> : tough fi®rous CT that covers the
		diaphysis (shaftpand is continou with tendons & ligaments
		ii. Medullary Canal: hollow central canal in shaft⊡ (contains marrow)
		iii. Primary center of <u>ossification</u> .

5.	Microscopic structure of compact bone
	a. Osteon : microscopic unit of structure in compact bone
	b. see attached diagra
6.	Bone development and growth: Ossification
	a. Flat bones originate as <u>membrane</u> Example: fontanels – soft®pots in an infant's skul
	b. Other bones originate as hyaline cartilage
	c. Three types of bones cells involved:
	i. Osteoblast : secrete mineral matrix
	ii. Osteocyte : mature bone cells, maintain bone
	iii. Osteoclast: dissolve mineral matrix
	d. Homeostasis of bone tissue: bone is constantly being remodeled by osteoblasts and osteoclasts in order to:
	i. <u>Regulate blood calcium</u>
	ii. Respond to stress
	iii. Reshape bone as it grows
7.	Joints
	a. Immovable joints: <u>Sutures</u>
	i. Separated by filarous C.T.
	ii. Example - <u>Skull</u>

b. Slightly movable joints
i. Held together by fibrocartilage or by ligaments
ii. Example - Pubic Symphysis
c. Movable joints: Synovial Joints
i. Surface covered in hyaline cartilage
ii. Articular capsule encloses and unite bones; parts include:
1. Ligaments : to hold bones together
2. Synovial Fluid: to lubricate
3. Meniscus : pads of fibrocartilage
for cushioning 4. Bursa: fl@id filed sacs that reduce fricti⊡ with tendons moving
Note - ligaments connect bone to bone and <u>Tendons</u> connect muscle to bone (or muscle to muscle)
8. Types of Synovial joints
a. Ball and socket: allows the greatest movement (ex. Hip and <u>Shoulder</u>)
b. Hinge joint: allows movement in one plane (ex. <u>Elbow</u>)
c. Pivot joint: rotates around an axis (ex. <u>Radius-Ulna</u>)
d. Saddle joint: variety of movements (ex. <u>Thumb</u>)
e. Gliding joint: one surface glides over the other (ex. Vertebrae)
f. Condyloid joint: allows much motion, but not rotation (ex. <u>Metacarpals-Phalanges</u>)

9. Types of joint movements:
a. Flexion vs. <u>Extention</u> vs. <u>Hyperextention</u>
b. Dorsiflexion vs. Plantar Flexion
c. Abduction vs. <u>Adduction</u>
d. Rotati@
e. Pronation vs. <u>Suppination</u>
f. Retraction vs. <u>Protraction</u>
g. Elevation vs. <u>Depression</u>
h. Eversion vs. <u>Inversion</u>
i. Circumducti@
(See pages 252 -257)