

Chapter 1 Foundations of Structural Kinesiology

Manual of Structural Kinesiology R.T. Floyd, EdD, ATC, CSCS

tural Kinesiology

Foundations of Structural Kinesiology

Kinesiology & Body Mechanics

- Kinesiology study of motion or human movement
- · Anatomic kinesiology study of human musculoskeletal system & musculotendinous
- · Biomechanics application of mechanical physics to human motion

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Kinesiology & Body Mechanics

- Structural kinesiology study of muscles as they are involved in science of movement
- · Both skeletal & muscular structures are involved
- Bones are different sizes & shapes particularly at the joints, which allow or limit movement

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Kinesiology & Body Mechanics

- · Muscles vary greatly in size, shape, & structure from one part of body to another
- More than 600 muscles are found in human

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Who needs Kinesiology?

· Anatomists, coaches, strength and conditioning specialists, personal trainers, nurses, physical educators, physical therapists, physicians, athletic trainers, massage therapists & others in health-related fields

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Why Kinesiology?

- · should have an adequate knowledge & understanding of all large muscle groups to teach others how to strengthen, improve, & maintain these parts of human body
- should not only know how & what to do in relation to conditioning & training but also know why specific exercises are done in conditioning & training of athletes

Why Kinesiology?

- · Through kinesiology & analysis of skills, physical educators can understand & improve specific aspects of physical conditioning
- · Understanding aspects of exercise physiology is also essential to coaches & physical educators

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Reference positions

- · basis from which to describe joint movements
 - Anatomical position
 - Fundamental position

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Reference positions

- · Anatomical position
 - most widely used & accurate for all aspects of the body
 - standing in an upright posture, facing straight ahead, feet parallel and close, & palms facing forward
- · Fundamental position
 - is essentially same as anatomical position except arms are at the sides & palms facing the body



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Reference Lines

To further assist in understanding the location of one body part in relation to another

- Mid-axillary line
 - A line running vertically down the surface of the body passing through the apex of the axilla (armpit)
- Anterior axillary line
 - A line that is parallel to the mid- axillary line and passes through the anterior axillary skinfold
- Posterior axillary line
 - A line that is parallel to the mid-axillary line and passes through the posterior axillary skinfold

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Reference Lines

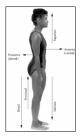
To further assist in understanding the location of one body part in relation to another

- Mid-clavicular line
 - A line running vertically down the surface of the body passing through the midpoint of the clavicle
- Mid-inguinal point
 - A point midway between the anterior superior iliac spine and the pubic symphysis

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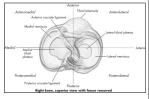
Anatomical directional terminology

- · Anterior
 - in front or in the front part
- · Anteroinferior
 - in front & below
- Anterosuperior
 - in front & above



Anatomical directional terminology

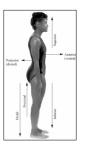
- Anterolateral
 - in front & to the side, especially the outside
- Anteromedial
 - in front & toward the inner side or midline
- · Anteroposterior
 - relating to both front & rear



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Anatomical directional terminology

- · Posterior
 - behind, in back, or in the rear
- Posteroinferior
 - behind & below; in back & below
- · Posterolateral
 - behind & to one side, specifically to the outside

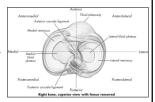


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Anatomical directional terminology

- · Posteromedial
 - behind & to the inner side
- Posterosuperior
 - behind & at the upper part



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Anatomical directional terminology

- Contralateral
 - pertaining or relating to the opposite side
- Ipsilateral
 - on the same side
- Bilateral
 - relating to the right and left sides of the body or of a body structure such as the right & left extremities

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Anatomical directional terminology

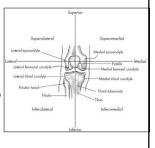
- · Inferior (infra)
 - below in relation to another structure; caudal
- · Superior (supra)
 - above in relation to another structure; higher, cephalic



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Anatomical directional terminology

- · Inferolateral
 - below & to the outside
- Inferomedial
 - below & toward the midline or inside
- · Superolateral
 - above & to the outside
- · Superomedial
- above & toward the midline or inside



Anatomical directional terminology

- Caudal
 - below in relation to another structure: inferior
- · Cephalic
 - above in relation to another structure; higher, superior

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Anatomical directional terminology

- - beneath or below the surface; used to describe relative depth or location of muscles or tissue
- Superficial
 - near the surface; used to describe relative depth or location of muscles or tissue

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Anatomical directional terminology

- Distal
 - situated away from the center or midline of the body, or away from the point of origin
- Proximal
 - nearest the trunk or the point of



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Anatomical directional terminology

- Lateral
 - on or to the side; outside, farther from the median or midsagittal plane
- Medial
 - relating to the middle or center; nearer to the medial or midsagittal plane
- Median
 - Relating to the middle or center; nearer to the median or midsagittal



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Anatomical directional terminology

- - relating to, or situated to the right or on the right side of something
- Sinister
 - relating to, or situated to the left or on the left side of something

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Anatomical directional terminology

- - the body lying face downward; stomach lying
- Supine
 - lying on the back; face upward position of the body

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Anatomical directional terminology

- Dorsal
 - relating to the back; being or located near, on, or toward the back, posterior part, or upper surface of
- Ventral
 - relating to the belly or abdomen, on or toward the front, anterior part of

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Anatomical directional terminology

- Palmar
 - relating to the palm or volar aspect of the
- Volar
 - relating to palm of the hand or sole of the

- relating to the sole or undersurface of the foot

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Body Regions uctural Kinesioloo Foundations of Structural Kinesiology

Body regions

- Axial
 - -Cephalic (Head)
 - -Cervical (Neck)
 - -Trunk
- · Appendicular
 - -Upper limbs
 - -Lower limbs

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Body regions

- Axial
 - -Cephalic (Head)
 - · Cranium & Face
 - -Cervical (Neck)
 - -Trunk
 - Thoracic (Thorax), Dorsal (Back), Abdominal (Abdomen), & Pelvic (Pelvis)

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Body regions

- · Appendicular
 - -Upper limbs
 - Shoulder, arm, forearm, & manual
 - -Lower limbs
 - Thigh, leg, & pedal

Planes of Motion

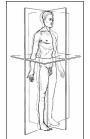
- Imaginary two-dimensional surface through which a limb or body segment is moved
- Motion through a plane revolves around an axis
- There is a ninety-degree relationship between a plane of motion & its axis

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Cardinal planes of motion

- · 3 basic or traditional
 - in relation to the body, not in relation to the earth
- Anteroposterior or Sagittal Plane
- · Lateral or Frontal Plane
- Transverse or Horizontal Plane



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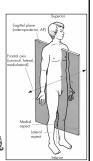
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Cardinal planes of motion

- Sagittal or Anteroposterior Plane (AP)
 - divides body into equal, bilateral segments
 - It bisects body into 2 equal symmetrical halves or a right & left half
 - Ex. Sit-up

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Cardinal planes of motion

- Frontal, Lateral or Coronal Plane
 - divides the body into (front) anterior & (back) posterior halves
 - Ex. Jumping Jacks





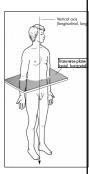
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Cardinal planes of motion

- Transverse, Axial or Horizontal Plane
 - divides body into (top) superior & (bottom) inferior halves when the individual is in anatomic position
 - Ex. Spinal rotation to left or right

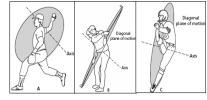


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Diagonal Planes of Motion

- · High Diagonal
- · Low Diagonal
- Low Diagonal



Diagonal Planes of Motion

- · High Diagonal
 - -Upper limbs at shoulder joints
 - -Overhand skills
 - -EX. Baseball Pitch



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Diagonal Planes of Motion

- · Low Diagonal
 - -Upper limbs at shoulder joints
 - -Underhand skills
 - -EX. Discus Thrower
- · Low Diagonal
 - -Lower limbs at the hip joints
 - -EX. Kickers & Punters



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Axes of rotation

- For movement to occur in a plane, it must turn or rotate about an axis as referred to previously
- The axes are named in relation to their orientation

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Axes of rotation

- Frontal, coronal, lateral or mediolateral axis
 - Has same orientation as frontal plane of motion & runs from side to side at a right angle to sagittal plane of motion
 - Runs medial / lateral
 - Commonly includes flexion, extension movements



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Axes of rotation

- Sagittal or anteroposterior axis
 - Has same orientation as sagittal plane of motion & runs from front to back at a right angle to frontal plane of motion
 - Runs anterior / posterior
 - Commonly includes abduction, adduction movements



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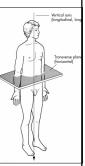


Axes of rotation

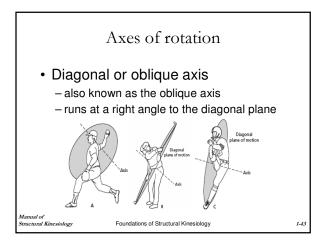
- Vertical, long or longitudinal axis
 - Runs straight down through top of head & is at a right angle to transverse plane of motion
 - Runs superior/ inferior
 - Commonly includes internal rotation, external rotation movements

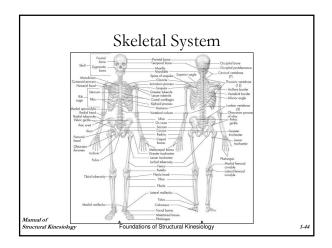


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Osteology

- · Adult skeleton
- 206 bones
 - Axial skeleton
 - 80 bones
 - Appendicular
 - 126 bones
- · occasional variations

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Skeletal Functions

- 1. Protection of heart, lungs, brain, etc.
- 2. Support to maintain posture
- Movement by serving as points of attachment for muscles and acting as levers
- 4. Mineral storage such as calcium & phosphorus
- 5. Hemopoiesis in vertebral bodies, femurs, humerus, ribs, & sternum
 - process of blood cell formation in the red bone marrow

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Types of bones

- · Long bones humerus, fibula
- · Short bones carpals, tarsals
- · Flat bones skull, scapula
- Irregular bones pelvis, ethmoid, ear ossicles
- · Sesamoid bones patella

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Types of bones

- · Long bones
 - Composed of a long cylindrical shaft with relatively wide, protruding ends
 - shaft contains the medullary canal
 - Ex. phalanges, metatarsals, metacarpals, tibia, fibula, femur, radius, ulna, & humerus

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Types of bones

- · Short bones
 - -Small, cubical shaped, solid bones that usually have a proportionally large articular surface in order to articulate with more than one bone
 - -Ex. are carpals & tarsals

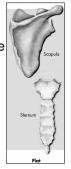


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Types of bones

- Flat bones
 - Usually have a curved surface & vary from thick where tendons attach to very thin
 - -Ex. ilium, ribs, sternum, clavicle, & scapula

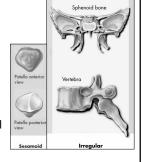


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Types of bones

- · Irregular bones
 - Include bones throughout entire spine & ischium, pubis, & maxilla
- Sesamoid bones
 - Patella, 1st metatarsophalangeal

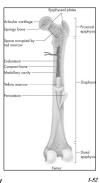


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Typical Bony Features

- Diaphysis long cylindrical shaft
- Cortex hard, dense compact bone forming walls of diaphysis
- Periosteum dense, fibrous membrane covering outer surface of diaphysis



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Typical Bony Features

- Endosteum fibrous membrane that lines the inside of the cortex
- Medullary (marrow) cavity

 between walls of
 diaphysis, containing
 yellow or fatty marrow



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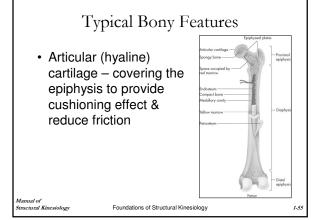
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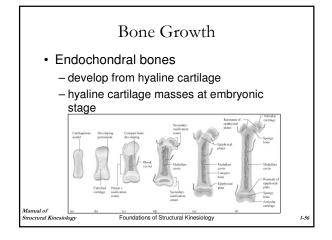
Typical Bony Features

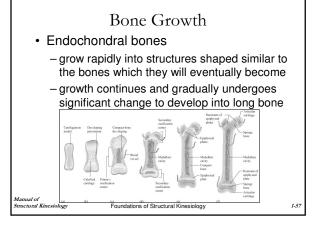
- Epiphysis ends of long bones formed from cancelleous (spongy or trabecular) bone
- Epiphyseal plate -(growth plate) thin cartilage plate separates diaphysis & epiphyses

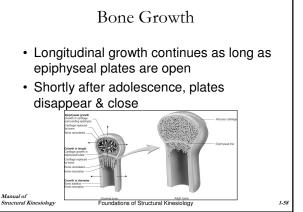


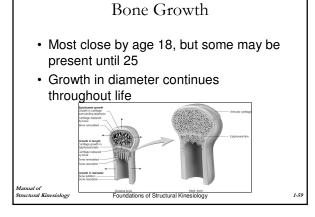
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Internal layer of periosteum builds new concentric layers on old layers Simultaneously, bone around sides of the medullary cavity is resorbed so that diameter is continually increased Osteoblasts - cells that form new bone Osteoclasts - cells that resorb old bone

Bone Growth

Bone Properties

- · Composed of calcium carbonate, calcium phosphate, collagen, & water
 - -60-70% of bone weight calcium carbonate & calcium phosphate
 - -25-30% of bone weight water
- · Collagen provides some flexibility & strength in resisting tension
- · Aging causes progressive loss of collagen & increases brittleness

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Bone Properties

- · Most outer bone is cortical with cancellous underneath
- Cortical bone low porosity, 5 to 30% nonmineralized tissue
- Cancellous spongy, high porosity, 30 to
- Cortical is stiffer & can withstand greater stress, but less strain than cancellous
- Cancellous is spongier & can undergo greater strain before fracturing

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Bone Properties

- · Bone size & shape are influenced by the direction & magnitude of forces that are habitually applied to them
- · Bones reshape themselves based upon the stresses placed upon them
- Bone mass increases over time with increased stress

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Bone Markings

- · Processes (including elevations & projections)
 - Processes that form ioints
 - · Condyle
 - Facet
 - Head

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Bone Markings

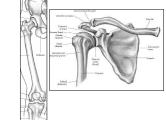
- Processes (elevations & projections)
 - Processes to which ligaments, muscles or tendons attach
 - Crest
 - · Epicondyle
 - Line
 - Process
 - · Spine (spinous process)
 - Suture
 - Trochanter
 - Tubercle
 - Tuberosity



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Bone Markings

- · Cavities (depressions) including opening & grooves
 - Facet
 - Foramen
 - Fossa
 - Fovea
 - Meatus
 - Sinus
- Sulcus (groove)



Classification of Joints

- Articulation connection of bones at a joint usually to allow movement between surfaces of bones
- 3 major classifications according to structure & movement characteristics
 - -Synarthrodial
 - -Amphiarthrodial
 - -Diarthrodial

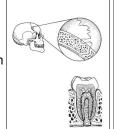
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		Structural classification		
		Fibrous	Cartilagenous	Synovial
Functional classification	Synarthrodial	Gomphosis Suture		
	Amphiarthrodial	Syndesmosis	Symphysis Synchondrosis	
	Diarthrodial			Arthrodial Condyloidal Enarthrodial Ginglymus Sellar Trochoidal

Synarthrodial

- · immovable joints
- Suture such as Skull sutures
- Gomphosis such as teeth fitting into mandible or maxilla

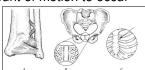


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Amphiarthrodial

- slightly movable joints
- · allow a slight amount of motion to occur
 - -Syndesmosis
 - -Synchondrosis
 - -Symphysis



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Amphiarthrodial

- Syndesmosis
 - Two bones joined together by a strong ligament or an interosseus membrane that allows minimal movement between the bones
 - Bones may or may not touch each other at the actual joint
 - Ex. Coracoclavicular joint, distal tibiofibular jt.



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Amphiarthrodial

- Synchondrosis
 - Type of joint separated by hyaline cartilage that allows very slight movement between the bones
 - Ex. costochondral joints of the ribs with the sternum



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Amphiarthrodial

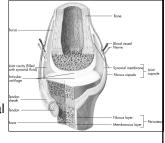
- Symphysis
 - Joint separated by a fibrocartilage pad that allows very slight movement between the bones
 - Ex. Symphysis Pubis & intervertebral discs



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Diarthrodial Joints

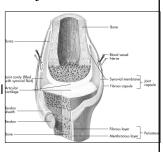
- · known as synovial joints
- · freely movable
- · composed of sleevelike joint capsule
- · secretes synovial fluid to lubricate joint cavity



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Diarthrodial Joints

 capsule thickenings form tough, nonelastic ligaments that provide additional support against abnormal movement or joint opening



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Diarthrodial Joints

- Articular or hyaline cartilage covers the articular surface ends of the bones inside the joint cavity
 - absorbs shock
 - protect the bone
- slowly absorbs synovial fluid during joint unloading or distraction
- secretes synovial fluid during subsequent weight bearing & compression
- some diarthrodial joints have specialized fibrocartilage disks

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Diarthrodial Joints

- · Diarthrodial joints have motion possible in one or more planes
- · Degrees of freedom
 - motion in 1 plane = 1 degree of freedom
 - motion in 2 planes = 2 degrees of freedom
 - motion in 3 planes = 3 degrees of freedom

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Diarthrodial Joints

- six types
- · each has a different type of bony arrangement

-Arthrodial

-Condyloid

-Ginglymus

-Enarthrodial

-Trochoid

-Sellar

Diarthrodial Joints

- · Arthrodial (Gliding) joints
 - –2 plane or flat bony surfaces which butt against each other
 - Little motion possible in any 1 joint articulation
 - Usually work together in series of articulations

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Diarthrodial Joints

- · Arthrodial (Gliding) joints
 - -Ex. Vertebral facets in spinal column, intercarpal & intertarsal joints
 - -Motions are flexion, extension, abduction, adduction, diagonal abduction & adduction, & rotation, (circumduction)

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Diarthrodial Joints

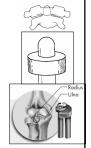
- Ginglymus (Hinge) joint
 - -a uniaxial articulation
 - articular surfaces allow motion in only one plane
 - -Ex. Elbow, knee, talocrural (ankle)

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Diarthrodial Joints

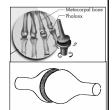
- Trochoid (Pivot) joint
 - -also uniaxial articulation
 - Ex. atlantoaxial joint odontoid which turns in a bony ring, proximal & distal radio-ulnar joints



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Diarthrodial Joints

- · Condyloid (Knuckle Joint)
 - biaxial ball & socket joint
 - one bone with an oval concave surface received by another bone with an oval convex surface



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Diarthrodial Joints

- Condyloid (Knuckle Joint)
 - -EX. 2nd, 3rd, 4th, & 5th metacarpophalangeal or knuckles joints, wrist articulation between carpals & radius
 - flexion, extension,abduction & adduction(circumduction)



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Diarthrodial Joints

- Enarthrodial
 - Multiaxial or triaxial ball & socket joint
 - Bony rounded head fitting into a concave articular surface
 - Ex. Hip & shoulder joint
 - Motions are flexion, extension, abduction, adduction, diagonal abduction & adduction, rotation, and circumduction

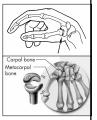


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Diarthrodial Joints

- Sellar (Saddle) Joint
 - unique triaxial joint
 - 2 reciprocally concave & convex articular surfaces
 - Only example is 1st carpometacarpal joint at thumb
 - Flexion, extension, adduction & abduction, circumduction & slight rotation



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Movements in Joints

- Some joints permit only flexion & extension
- Others permit a wide range of movements, depending largely on the joint structure
- Goniometer is used to measure amount of movement in a joint or measure joint angles



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Range of Motion

- area through which a joint may normally be freely and painlessly moved
- measurable degree of movement potential in a joint or joints
- measured with a goniometer in degrees 00 to 3600

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Movements in Joints

- Goniometer axis is placed even with the axis of rotation at the joint line
- As joint is moved, goniometer arms are held in place either along or parallel to long axis of bones on either side of joint
- · Joint angle is then read from goniometer
- Normal range of motion for a particular joint varies in people



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Movements in Joints

- Terms are used to describe actual change in position of bones relative to each other
- · Angles between bones change
- Movement occurs between articular surfaces of joint
 - "Flexing the knee" results in leg moving closer to thigh
 - "flexion of the leg" = flexion of the knee

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Movements in Joints

- Movement terms describe movement occurring throughout the full range of motion or through a very small range
 - Ex. 1 flex knee through full range by beginning in full knee extension (zero degrees of knee flexion) & flex it fully so that the heel comes in contact with buttocks, which is approximately 140 degrees of flexion

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Movements in Joints

- -Ex. 2 begin with knee in 90 degrees of flexion & then flex it 30 degrees which results in a knee flexion angle of 120 degrees, even though the knee only flexed 30 degrees
- -In both ex. 1 & 2 knee is in different degrees of flexion

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Movements in Joints

- -Ex. 3 begin with knee in 90 degrees of flexion and extend it 40 degrees, which would result in a flexion angle of 50 degrees
- Even though the knee extended, it is still flexed

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Movements in Joints

- Some movement terms describe motion at several joints throughout body
- Some terms are relatively specific to a joint or group of joints
 - Additionally, prefixes may be combined with these terms to emphasize excessive or reduced motion
 - · hyper- or hypo-
 - Hyperextension is the most commonly used

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GENERAL

- Abduction
 - Lateral movement away from midline of trunk in lateral plane
 - raising arms or legs to side horizontally



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GENERAL

- Adduction
 - Movement medially toward midline of trunk in lateral plane
 - lowering arm to side or thigh back to anatomical position



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GENERAL

- Flexion
 - Bending movement that results in a ▼ of angle in joint by bringing bones together, usually in sagittal plane
 - elbow joint when hand is drawn to shoulder



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GENERAL

- Extension
 - Straightening movement that results in an ▲ of angle in joint by moving bones apart, usually in sagittal plane
 - elbow joint when hand moves away from shoulder



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GENERAL

- Circumduction
 - Circular movement of a limb that delineates an arc or describes a cone
 - combination of flexion, extension, abduction, & adduction
 - when shoulder joint & hip joint move in a circular fashion around a fixed point
 - also referred to as circumflexion

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GENERAL

- Diagonal abduction
 - Movement by a limb through a diagonal plane away from midline of body
- Diagonal adduction
 - Movement by a limb through a diagonal plane toward & across midline of body

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GENERAL

- · External rotation
 - Rotary movement around longitudinal axis of a bone away from midline of body
 - Occurs in transverse plane
 - a.k.a. rotation laterally, outward rotation, & lateral rotation



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GENERAL

- · Internal rotation
 - Rotary movement around longitudinal axis of a bone toward midline of body
 - Occurs in transverse plane
 - a.k.a. rotation medially, inward rotation, & medial rotation



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ANKLE & FOOT

- Eversion
 - Turning sole of foot outward or laterally
 - standing with weight on inner edge of foot
- Inversion
 - Turning sole of foot inward or medially
 - standing with weight on outer edge of foot

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ANKLE & FOOT

ANKLE & FOOT

- · Dorsal flexion
 - Flexion movement of ankle that results in top of foot moving toward anterior tibia bone
- · Plantar flexion
 - Extension movement of ankle that results in foot moving away from body



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- · Pronation
 - A combination of ankle dorsiflexion, subtalar eversion, and forefoot abduction (toe-out)
- Supination
 - A combination of ankle plantar flexion, subtalar inversion, and forefoot adduction (toe-in)

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RADIOULNAR JOINT

- · Pronation
 - Internally rotating radius where it lies diagonally across ulna, resulting in palm-down position of forearm
- Supination
 - Externally rotating radius where it lies parallel to ulna, resulting in palm-up position of forearm



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SHOULDER GIRDLE

- Depression
 - Inferior movement of shoulder girdle
 - returning to normal position from a shoulder shrug
- · Elevation
 - Superior movement of shoulder girdle
 - shrugging the shoulders

SHOULDER GIRDLE

- Protraction
 - Forward movement of shoulder girdle away from spine
 - Abduction of the scapula
- Retraction
 - Backward movement of shoulder girdle toward spine
 - Adduction of the scapula

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SHOULDER GIRDLE

- · Rotation downward
 - Rotary movement of scapula with inferior angle of scapula moving medially & downward
- · Rotation upward
 - Rotary movement of scapula with inferior angle of scapula moving laterally & upward

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SHOULDER JOINT

- · Horizontal abduction
 - Movement of humerus in horizontal plane away from midline of body
 - also known as horizontal extension or transverse abduction
- · Horizontal adduction
 - Movement of humerus in horizontal plane toward midline of body
 - also known as horizontal flexion or transverse adduction

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SPINE

- Lateral flexion (side bending)
 - Movement of head and / or trunk laterally away from midline
 - Abduction of spine
- · Reduction
 - Return of spinal column to anatomic position from lateral flexion
 - Adduction of spine

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WRIST & HAND

- · Palmar flexion
 - Flexion movement of wrist with volar or anterior side of hand moving toward anterior side of forearm
- · Dorsal flexion (dorsiflexion)
 - Extension movement of wrist in the sagittal plane with dorsal or posterior side of hand moving toward posterior side of forearm

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WRIST & HAND

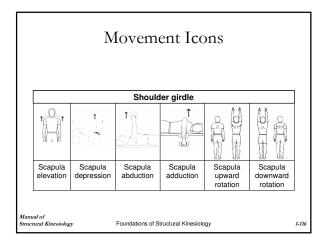
- · Radial flexion (radial deviation)
 - Abduction movement at wrist of thumb side of hand toward forearm
- Ulnar flexion (ulnar deviation)
 - Adduction movement at wrist of little finger side of hand toward forearm

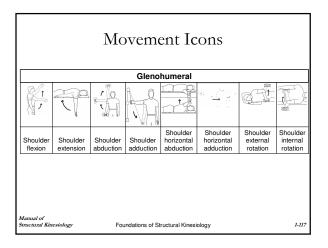


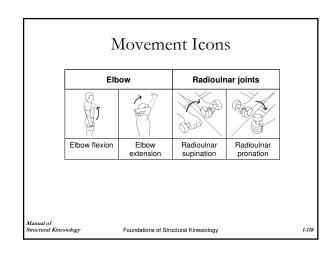
WRIST & HAND

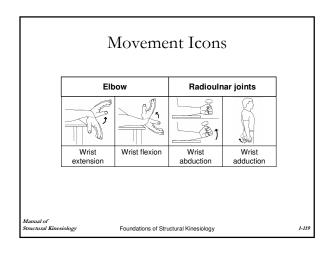
- · Opposition of the thumb
 - Diagonal movement of thumb across palmar surface of hand to make contact with the hand and/or fingers
- · Reposition of the thumb
 - Diagonal movement of the thumb as it returns to the anatomical position from opposition with the hand and/or fingers

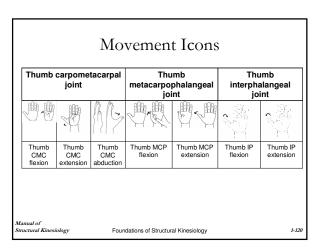
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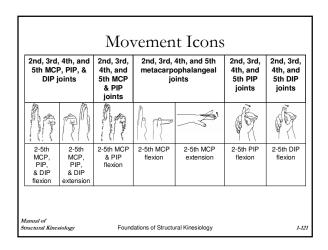


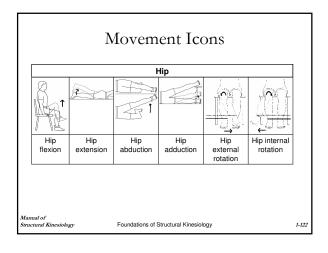


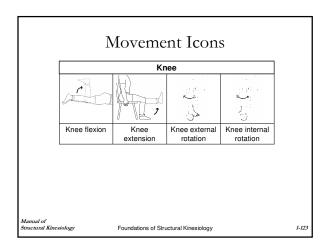


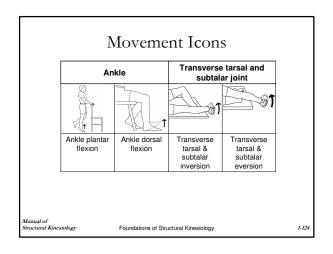


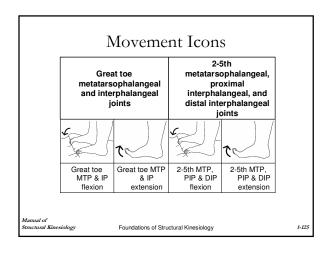


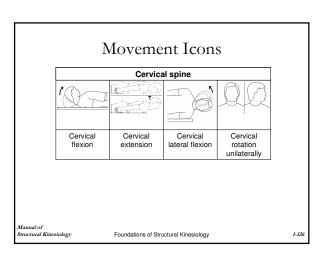












Lumbar spine Lumbar spine Lumbar lateral flexion extension lexion unilaterally Manual of Structural Kinesiology Foundations of Structural Kinesiology 1-127

Physiological movements vs. accessory motions

- Physiological movements flexion, extension, abduction, adduction, & rotation
 - occur by bones moving through planes of motion about an axis of rotation at joint
- Osteokinematic motion resulting motion of bones relative to 3 cardinal planes from these physiological

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Physiological movements vs. accessory motions

- For osteokinematic motions to occur there must be movement between the joint articular surfaces
- Arthrokinematics motion between articular surfaces

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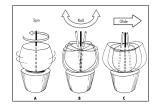
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Physiological movements vs. accessory motions

• 3 specific types of accessory

motion

- -Spin
- -Roll
- Glide



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Physiological movements vs. accessory motions

- If accessory motion is prevented from occurring, then physiological motion cannot occur to any substantial degree other than by joint compression or distraction
- Due to most diarthrodial joints being composed of a concave surface articulating with a convex surface roll and glide must occur together to some degree

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Physiological movements vs. accessory motions

- Ex. 1 as a person stands from a squatted position the femur must roll forward and simultaneously slide backward on the tibia for the knee to extend
 - If not for the slide the femur would roll off the front of the tibia
 - If not for the roll, the femur would slide off the back of the tibia

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Physiological movements vs. accessory motions

- Spin may occur in isolation or in combination with roll & glide
- As the knee flexes & extends spin occurs to some degree
 - In Ex. 1, the femur spins medially or internally rotates as the knee reaches full extension



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Physiological movements vs. accessory

motions

- Roll (rock) a series of points on one articular surface contacts with a series of points on another articular surface
- Glide (slide) (translation) a specific point on one articulating surface comes in contact with a series of points on another surface



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Physiological movements vs. accessory motions

- Spin A single point on one articular surface rotates about a single point on another articular surface
 - Motion occurs around some stationary longitudinal mechanical axis in either a clockwise or counterclockwise direction



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Web Sites

BBC Science & Nature

www.bbc.co.uk/science/humanbody/body/interactives/3djigsaw 02/index.shtml?skeleton

- Allows interactive placement of bone and joint structures

Skeletal system

www.bio.psu.edu/faculty/strauss/anatomy/skel/skeletal.htm

Pictures of dissected bones and their anatomical landmarks

Pictures of dissected bones and their all ExRx Articulations

www.exrx.net/Lists/Articulations.html

 Detailed common exercises demonstrating movements of each joint and listing the muscles involved

Human Anatomy Online

www.innerbody.com/image/skelfov.html

Interactive skeleton labeling

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Web Sites

Radiographic Anatomy of the Skeleton

www.rad.washington.edu/radanat/

- X-rays with and without labels of bony landmarks

Virtual skeleton

www.uwyo.edu/RealLearning/4210qtvr.html

 A 3-dimensional human osteology with Quicktime movies of each bone

Forensic Anthropology

www-personal.une.edu.au/~pbrown3/skeleton.pdf

 A detailed discussion of skeletal anthropology with excellent pictures of dissected bones

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Web Sites

Anatomy & Physiology Tutorials:

www.gwc.maricopa.edu/class/bio201/index.htm

BBC Science & Nature

www.bbc.co.uk/science/humanbody/body/factfiles/skeleton an

atomy.shtml

Describes each bone and allows viewing of each from different angles

BBC Science & Nature

www.bbc.co.uk/science/humanbody/body/factfiles/joints/ball_a nd_socket_joint.shtml

 Describes each type of joint and allows viewing of how the joint moves within the body.

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Web Sites

University of Michigan Learning Resource Center, Hypermuscle: Muscles in action

www.med.umich.edu/lrc/Hypermuscle/Hyper.html#flex

 Describes each motion and allows viewing of the motion preformed.

Articulations

http://basic-anatomy.net/

A thorough discussion of the articulations

Foss Human Body

http://sv.berkeley.edu/showcase/pages/bones.html

- An interactive site which allows assembly of the skeleton Functions of the Skeletal System

http://training.seer.cancer.gov/module_anatomy/unit3_1_bone_functions.html

Several pages with information on bone tissue, bone development and growth, and the joints

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Web Sites

Introductory Anatomy: Joints

www.leeds.ac.uk/chb/lectures/anatomy4.html – Notes on joint articulations

The Interactive Skeleton

www.pdh-odp.co.uk/skeleton.htm

www.puir-oup.co.uwskeietoin.tim

— Point and click to detailed skeletal illustrations

Radiographic Anatomy of the Skeleton

www.szote.u-szeged.hu/Radiology/Anatomy/skeleton.htm

— X-rays with and without labels of bony landmarks

Skeleton: The Joints

www.zoology.ubc.ca/~biomania/tutorial/bonejt/outline.htm

Point and click to detailed joint illustrations

TeachPE.com

www.teachpe.com/Interactivelearning.htm

Interactive questions on bones, joints, muscles

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Web Sites

Wireframe Skeleton www.2flashgames.com/f/f-220.htm

Move around the skeleton's limbs arms legs body and make it do funny things

eSkeletons Project

www.eskeletons.org/
 An interactive site with a bone viewer showing the morphology, origins, insertions, and articulations of each bone

Skeleton Shakedown
 www.harcourtschool.com/activity/skel/skel.html
 Help put a disarticulated skeleton back together

KLB Science Department Interactivities

www.klbschool.org.uk/interactive/science/skeleton.htm

Skeleton labeling exercises

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