Workbook – Self Test: Answer Key

Module 9

- Chapter 7: Femur and Pelvic Girdle
  - Self-Test (Starting on pg. 180): 1-13, 17, 20-24, 27, 29-35, & 37-39
    - 1. Right Hip Bone - **A**
      Left Hip Bone – **B**
      Sacrum – **C**
      Coccyx – **D**
    - 2. Ilium - **A**
      Ischium – **B**
      Pubis – **C**
    - 3. **D** (All of the above)
    - 4. **Obturator Foramen**
    - 5. **B** (Lesser trochanter)
    - 6. Body - **A**
      Ramus – **B**
    - 7. **Pelvic Brim** (aka. Brim of the Pelvis)
    - 8. 1 (True Pelvis) - **B** (Lesser Pelvis)
      2 (False Pelvis) – **A** (Supports the lower abdominal organs)
      3 (False Pelvis) – **A** (Formed primarily by the ala of the ilium)
      4 (True Pelvis) – **B** (Cavity)
      5 (False Pelvis) – **A** (Greater pelvis)
      6 (True Pelvis) – **B** (Forms the actual birth canal)
      7 (True Pelvis) – **B** (Found below the pelvic brim)
    - 9. **Acute; Less than 90°**
    - 10. **A** (Right greater trochanter)
      B (Right femoral neck)
      C (Right fovea capitus)
      D (Right ASIS)
      E (Right Iliac crest)

G (Superior ramus of right pubis)

H (Symphysis pubis)

I (Left Ischial tuberosity)

J (Female)

K (Right femoral neck)

L (Right lesser trochanter)

M (Right greater trochanter)

N (Right ischial tuberosity)

O (Axiolateral inferosuperior projection)

P (Ala of the Left ilium)

Q (Body of Left ilium)

R (Body of Left pubis)

S (Inferior ramus of Left pubis)

T (Right greater trochanter)

U (Right lesser trochanter)

V (Right femoral neck)

W (AP Bilateral Frog-Leg projection)

- 11. Male – **1** (Heart-shaped/oval inlet)
  Male – **2** (Acute pubic arch/less than 90^{o})
  Female – **3** (Iliac wings that are more flared)
  Female – **4** (Obtuse pubic arch/greater than 90^{o})
  Female – **5** (Larger and more rounded inlet)
  Male – **6** (Iliac wings that are less flared)
- 12. **A** (Ischial spines)
- 13. **Fovea capitis**
- 17. **C** (A fractured proximal femur)
- 20. **C** (Limited visibility of the lesser trochanter in profile)
- 21. **B** (Inferior aperture)
- 22. **A** (External rotation)
- 23. **A** (Bilateral Frog-leg/modified cleaves method)
- 24. **C** (20^{o} to 35^{o} cephalad)
- 27. **True**

- 29. **False**
- 30. **D** (None. CR is perpendicular)
- 31. **B** (AP axial "inlet" projection)
- 32. **AP Axial "outlet" projection** (will elongate the pubis and ischium and will define this region more completely)
- 33. **Soft-tissue of the unaffected leg** (is causing the unwanted density) **Flex & elevate unaffected leg** (high enough to keep it from superimposing the affected hip)
- 34. **Only apply a 20^0 to 30^0 femur abduction** (from the vertical rather than 45^o to minimize distortion of the femoral neck)
- 35. **No** (It is an acceptable image because the lesser trochanters should not be visible at all or should be only minimally visible on a well-positioned AP hip projection)
- 37. **B** (Reverse central ray angle)
- 38. **Rotation of the pelvis to the left is demonstrated** (aka. patient was in an LPO position; causing the "elevated"/upside [right] obturator foramen to appear more open as compared to the left "downside")
- 39. **Multiple answers are correct** (Posterior oblique projections [Judet method] will demonstrate possible pelvic ring and acetabular fractures; AP axial "outlet" and AP axial "inlet" projections will demonstrate possible fractures involving the ischium and pubis)