

# Nerves, Arteries and Clinical Terms

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## ? Femoral Nerve

- **Root value:** L2, L3, L4 (posterior divisions of ventral rami).
- **Origin and course:**
  - Arises in the **abdomen** within *psoas major* and emerges at its **lateral border**.
  - Descends between **psoas major** and **iliacus**, passes under the **inguinal ligament** into the thigh, **lateral to the femoral artery**.
- **Branches in the abdomen:** to *psoas major* and *iliacus*.
- **Branches in the thigh:**
  - *Anterior cutaneous branches* (medial and intermediate cutaneous nerves of thigh).
  - *Muscular branches* ? *sartorius*, *pectineus*, *quadriceps femoris*.
  - *Articular branches* ? hip and knee joints.
  - *Saphenous nerve* — the terminal sensory branch supplying the medial leg and foot.

## ?? Obturator Nerve

- **Root value:** L2, L3, L4 (ventral divisions).
- **Course:**
  - Emerges from the **medial border of psoas major**, crosses the pelvic brim, and runs along the **lateral wall of the pelvis** to reach the **obturator foramen**.
  - Divides into **anterior and posterior divisions** separated by **adductor brevis**.
- **Branches:**
  - *Anterior division* ? pectineus, adductor longus, adductor brevis, gracilis, hip joint.
  - *Posterior division* ? obturator externus, adductor magnus (adductor part), knee joint.
  - *Cutaneous branch* to the medial thigh.

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## ?? Accessory Obturator Nerve

- **Present in ? 30 % of people.**
- **Root value:** L3 and L4 (ventral divisions).
- **Course and branches:**
  - Runs along the **medial border of psoas major**, crosses the **superior ramus of pubis**, passes **behind pectineus**.

- Supplies *pectineus*, *hip joint*, and gives a communicating branch to the anterior division of the obturator nerve.

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## ?? Superior Gluteal Nerve

- **Root value:** L4, L5, S1 (dorsal divisions).
- **Course:** Leaves the pelvis through the **greater sciatic foramen above piriformis**, running between *gluteus medius* and *gluteus minimus* to end in *tensor fasciae latae*.
- **Branches:** to *gluteus medius*, *gluteus minimus*, and *tensor fasciae latae*.
- **Clinical note:** Injury ? **Trendelenburg gait** due to loss of hip abductors.

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## ?? Inferior Gluteal Nerve

- **Root value:** L5, S1, S2 (dorsal divisions).
- **Course:** Enters the gluteal region via the **greater sciatic foramen below piriformis**.
- **Branches:** to *gluteus maximus* only — the main antigravity extensor of the hip.
- **Clinical note:** Injury ? difficulty in climbing stairs or rising from sitting.

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## ?? Nerve to Quadratus Femoris

- **Root value:** L4, L5, S1 (ventral divisions).

- **Branches:** to *quadratus femoris*, *inferior gemellus*, and the *hip joint*.

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### ?? Nerve to Obturator Internus

- **Root value:** L5, S1, S2 (ventral divisions).
- **Course and branches:** Leaves the pelvis through the **greater sciatic foramen below piriformis**, enters the **lesser sciatic foramen**, and supplies *obturator internus* and *superior gemellus*.

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### ?? Sciatic Nerve

- **Largest nerve in the body.**
- **Root value:** L4, L5, S1, S2, S3 (mixed dorsal and ventral divisions).
- **Parts:**
  - *Tibial part* — ventral divisions (L4–S3).
  - *Common peroneal part* — dorsal divisions (L4–S2).
- **Course:**
  - Leaves the pelvis through the **greater sciatic foramen below piriformis**.
  - Descends deep to *gluteus maximus*, crosses *gemelli*, *obturator internus*, and *quadratus femoris* to enter the posterior thigh.

- Lies between the **ischial tuberosity** and **greater trochanter**, then beneath the long head of *biceps femoris*.
- **Termination:** At the upper angle of the popliteal fossa, divides into **tibial** and **common peroneal nerves**.
- **Clinical note:** Injury causes *foot drop* and posterior-thigh sensory loss.

## ?? Tibial Nerve

- **Root value:** L4–S3 (ventral divisions).
- **Course:**
  - Larger terminal branch of the **sciatic nerve**.
  - Passes through **popliteal fossa**, deep to soleus, along the posterior leg, and deep to **flexor retinaculum**.
  - Ends by dividing into **medial and lateral plantar nerves**.
- **Branches:**
  - *Muscular:* To gastrocnemius, soleus, plantaris, popliteus, tibialis posterior, flexor digitorum longus, flexor hallucis longus.
  - *Cutaneous:* Medial calcaneal branches to heel.
  - *Articular:* Knee, ankle, and superior tibiofibular joints.

- *Terminal:* Medial and lateral plantar nerves.

- **Clinical note:**

- Injury ? paralysis of plantar flexors and intrinsic sole muscles ? **inability to stand on toes** and **loss of plantar sensation**.
- Leads to **trophic ulcers** on sole due to sensory loss

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## ?? Common Peroneal Nerve

- **Root value:** L4–S2 (dorsal divisions).

- **Course:**

- Smaller terminal branch of the **sciatic nerve**.
- Passes laterally along **biceps femoris tendon**, winds around **neck of fibula**, then divides into **superficial and deep peroneal nerves**.

- **Branches:**

- *Muscular:* To short head of biceps femoris.
- *Cutaneous:* Lateral cutaneous nerve of calf.
- *Articular:* Superior and inferior lateral genicular nerves; recurrent genicular.
- *Terminal:* Deep and superficial peroneal nerves

- **Clinical note:**

- Commonly injured at **neck of fibula**.
- Leads to **foot drop** due to paralysis of dorsiflexors and evertors.

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## ?? Deep Peroneal Nerve

- **Root value:** L4–S1.

- **Course:**

- Begins at the bifurcation of the common peroneal nerve.
- Enters the **anterior compartment of the leg** with the **anterior tibial artery**.
- Passes beneath **extensor retinacula** to end on the **dorsum of the foot** between the first and second toes.

- **Branches:**

- *Muscular:* To tibialis anterior, extensor digitorum longus, extensor hallucis longus, peroneus tertius, and extensor digitorum brevis.
- *Articular:* To ankle and tarsal joints.
- *Cutaneous:* First interdigital cleft.

- **Clinical note:**

- Injury ? sensory loss in **first web space** and weakness of dorsiflexion.

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## ?? Superficial Peroneal Nerve

- **Root value:** L4–S1.

- **Course:**

- Arises in the **lateral compartment** of the leg; descends between *peroneus longus* and *brevis*; pierces fascia in the lower third of leg.

- **Branches:**

- *Muscular:* Peroneus longus and peroneus brevis.
- *Cutaneous:* Skin of lower anterolateral leg and most of the dorsum of foot except first web space.

- **Clinical note:**

- Injury ? sensory loss over **dorsum of foot** with weak eversion

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## ?? Plantar Nerves

Both arise from the **tibial nerve** beneath the flexor retinaculum

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## Medial Plantar Nerve (L4, L5)

- Larger terminal branch — analogous to the **median nerve** of the hand.
- **Course:** Between *abductor hallucis* and *flexor digitorum brevis*.
- **Branches:**
  - *Muscular:* Abductor hallucis, flexor digitorum brevis, first lumbrical, flexor hallucis brevis.
  - *Cutaneous:* Medial 3½ toes and adjacent nail beds.
  - *Articular:* Joints of medial 2/3 of foot.

## Lateral Plantar Nerve (S1, S2)

- Smaller terminal branch — corresponds to the **ulnar nerve** of the hand.
- **Course:** Runs obliquely between the first and second layers of the sole to the base of 5th metatarsal, dividing into **superficial** and **deep branches**.
- **Branches:**
  - *Superficial branch:* Supplies 4th dorsal interosseous, flexor digiti minimi brevis, digital nerves to 4th web space.
  - *Deep branch:* Supplies 2nd–4th lumbricals, adductor hallucis, and all interossei.
- **Cutaneous area:** Lateral 1½ toes and lateral third of sole

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## Arteries of the Lower Limb

Main arteries and their features

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ARTERY	COURSE / BRANCHES	AREA SUPPLIED
<b>Femoral artery</b>	Continuation of external iliac artery; passes through femoral triangle ? adductor canal ? becomes popliteal artery.	Thigh muscles and skin.
<b>Popliteal artery</b>	Continuation of femoral artery through adductor hiatus; ends at lower border of popliteus ? divides into anterior and posterior tibial arteries.	Knee joint, leg muscles.
<b>Anterior tibial artery</b>	Passes through interosseous membrane ? dorsalis pedis artery at ankle.	Anterior leg and dorsum of foot.
<b>Posterior tibial artery</b>	Larger branch; runs with tibial nerve ? divides into medial and lateral plantar arteries.	Posterior leg and sole.
<b>Peroneal (fibular) artery</b>	Branch of posterior tibial artery; runs along fibula.	Lateral and posterior compartments of leg.
<b>Medial and Lateral plantar arteries</b>	Terminal branches of posterior tibial artery; form <b>plantar arch</b> .	Sole and toes.

## ? Clinical Anatomy — Nerves and Arteries of the Lower Limb

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### 1. Femoral Nerve Lesion

- **Causes:** Pelvic or inguinal trauma, retroperitoneal hematoma, diabetic neuropathy.
- **Motor loss:** Paralysis of **quadriceps femoris** ? loss of knee extension and weakened hip flexion.
- **Sensory loss:** Over **anterior thigh** and **medial side of leg and foot** (via saphenous nerve).
- **Clinical sign:** **Knee-jerk reflex absent.**

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### 2. Obturator Nerve Lesion

- **Causes:** Pelvic surgery, obturator hernia, childbirth.
- **Motor loss:** Paralysis of **adductor muscles** ? weakness of thigh adduction.
- **Sensory loss:** Small patch on **medial thigh**.
- **Gait disturbance:** Patient widens stance while walking.

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### 3. Superior Gluteal Nerve Injury

- **Cause:** Faulty gluteal intramuscular injection, pelvic fracture.
- **Effect:** Paralysis of **gluteus medius and minimus**.

- **Sign:** **Positive Trendelenburg sign** — pelvis falls on unsupported side when standing on one leg.
- **Gait:** Compensatory **lurch** toward the affected side.

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#### 4. Inferior Gluteal Nerve Injury

- **Effect:** Paralysis of **gluteus maximus** ? loss of power in **hip extension**.
- **Clinical feature:** Difficulty in **climbing stairs, running, or rising from sitting**.

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#### 5. Sciatic Nerve Lesion

- **Common causes:** Hip dislocation, posterior intramuscular injection, pelvic tumors.
- **Motor loss:** Hamstrings and all muscles below knee ? **foot drop** and **flail limb**.
- **Sensory loss:** Posterior thigh, leg, and most of the foot.
- **Special note:** Pain radiating down leg is **sciatica**, due to L4–S3 root irritation by herniated disc.

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#### 6. Common Peroneal Nerve Injury

- **Vulnerable site:** Around **neck of fibula** (superficial course).
- **Motor loss:** Dorsiflexors and evertors of foot ? **foot drop** with **steppage gait**.
- **Sensory loss:** Lateral and anterior leg and **most of dorsum of foot**.
- **Ankle jerk:** Remains intact (tibial nerve spared).

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## 7. Deep Peroneal Nerve Injury

- **Cause:** Tight footwear, anterior-compartment syndrome.
- **Motor loss:** Weak dorsiflexion of ankle and extension of toes.
- **Sensory loss:** Small area between **first and second toes** (first web space).
- **Result:** “Ski-boot neuropathy.”

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## 8. Superficial Peroneal Nerve Injury

- **Cause:** Lateral leg trauma, fibular fracture.
- **Motor loss:** Weakness of **eversion of foot**.
- **Sensory loss:** Over **anterolateral leg and dorsum of foot** except first web space.

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## 9. Tibial Nerve Lesion

- **Causes:** Popliteal fossa trauma, posterior dislocation of knee, tarsal-tunnel compression.
- **Motor loss:** Paralysis of **plantar flexors** and **intrinsic muscles of sole** ? loss of toe flexion, inability to stand on toes.
- **Sensory loss:** Entire **sole** and plantar aspects of toes.
- **Chronic complication:** **Trophic ulcers** on sole due to anesthesia.

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## 10. Plantar Nerve Lesions

- **Medial plantar nerve:**

- Pain or burning in medial sole and toes (“Jogger’s foot”).
- Loss of sensation over **medial 3½ toes**.

- **Lateral plantar nerve:**

- Affects small intrinsic muscles; loss of sensation on **lateral 1½ toes**.
- May mimic **ulnar-nerve lesion** of the hand.

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## 11. Posterior Tibial Artery Occlusion

- **Cause:** Atherosclerosis at the ankle.

- **Sign:** Absent **posterior tibial pulse** posterior to the medial malleolus.

- **Effect:** Ischemic pain and **ulceration of toes and sole**.

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## 12. Dorsalis Pedis Artery Palpation

- **Site:** Lateral to tendon of **extensor hallucis longus** on dorsum of foot.

- **Clinical relevance:** Absence of pulse indicates **peripheral arterial occlusive disease (PAOD)**.

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## 13. Femoral Artery Aneurysm / Injury

- **Clinical test:** Distinct pulsatile swelling below the inguinal ligament.

- **Complication:** Femoral hernia may compress the artery or vein.
- **Femoral-pulse site:** Mid-inguinal point — crucial for arterial cannulation or pressure control in hemorrhage.

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## 14. Popliteal Artery Aneurysm

- **Clinical sign:** Pulsatile mass in popliteal fossa with bruit.
- **Complication:** May compress tibial nerve ? calf pain and sensory deficit.
- **Palpation:** Flex the knee and feel deeply in the mid-fossa.

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## 15. Compartment Syndrome of Leg

- **Cause:** Increased intracompartmental pressure after trauma or tight cast.
- **Result:** Compression of **deep peroneal nerve** and **anterior tibial vessels**.
- **Sign:** Severe pain, weakness of dorsiflexion, sensory loss in first web space.
- **Management:** Emergency fasciotomy.

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## 16. Atheromatous Disease of Lower Limb Arteries

- **Common sites:** Femoral bifurcation, popliteal artery, posterior tibial artery.
- **Clinical triad:** Claudication pain ? loss of pulse ? ischemic ulcer/gangrene.
- **Diagnosis:** Doppler or angiography.

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## 17. Varicose Veins and Venous Ulcers

- **Cause:** Valve incompetence in **great or small saphenous veins**.
- **Clinical feature:** Dilated, tortuous superficial veins and **pitting edema**.
- **Complication:** Chronic ulceration over the **medial malleolus**.

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## 18. Venous Thrombosis (DVT)

- **Cause:** Prolonged immobilization or hypercoagulability.
- **Sign:** Swelling, tenderness, increased local temperature of calf.
- **Risk:** **Pulmonary embolism** if thrombus dislodges.

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## 19. Arterial vs Venous Ulcer (Contrast)

- **Arterial ulcer:** Painful, distal, with pale necrotic edges and absent pulses.
- **Venous ulcer:** Shallow, over medial malleolus, with pigmentation and edema.

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## 20. Clinical Correlation Summary Table

STRUCTURE INVOLVED	KEY DEFICIT / SIGN	CLASSIC PRESENTATION
Femoral nerve	Weak knee extension	Loss of patellar reflex
Sciatic nerve	Foot drop & sensory loss	Posterior thigh pain
Common peroneal	Painless foot drop	Steppage gait

STRUCTURE INVOLVED	KEY DEFICIT / SIGN	CLASSIC PRESENTATION
Tibial nerve	Loss of plantar flexion	Cannot stand on toes
Posterior tibial artery	Absent pulse	Claudication & ulcer
Dorsalis pedis artery	Absent pulse	Ischemic foot
Great saphenous vein	Dilatation	Varicose veins
Deep peroneal nerve	Loss between toes	Ski-boot neuropathy

## ? Clinical Terms

### 1. Ankle Clonus

Rhythmic involuntary contractions of calf muscles following sudden dorsiflexion of the foot; a sign of upper motor-neuron lesion.

### 2. Anterior Compartment Syndrome

Raised pressure in the anterior compartment of the leg compresses the **deep peroneal nerve** and **anterior tibial artery**, producing severe pain and foot-drop.

### 3. Arterial Claudication

Cramping pain in the calf on walking, relieved by rest, caused by **femoral or popliteal arterial insufficiency**.

### 4. Deep Vein Thrombosis (DVT)

Formation of thrombus in deep veins of the leg (especially in the calf). Presents with pain, swelling, and warmth; dangerous because of risk of **pulmonary embolism**.

## 5. Foot Drop

Paralysis of dorsiflexors due to lesion of **common or deep peroneal nerve**; foot hangs in plantar flexion, producing **steppage gait**.

## 6. Flat Foot (Pes planus)

Loss of medial longitudinal arch from weakening of ligaments or plantar aponeurosis; may be congenital or acquired in long-standing cases.

## 7. Hammer Toe

Hyperextension of metatarsophalangeal joint with flexion of interphalangeal joints, often due to ill-fitting footwear or muscle imbalance.

## 8. Intermittent Claudication

Pain during exercise (walking or running) due to ischemia from **arteriosclerosis obliterans** of femoral or popliteal arteries.

## 9. Ischemic Contracture (Volkmann type)

Necrosis and fibrosis of flexor muscles of leg following ischemia from compartment syndrome; produces claw-like deformity of toes.

## 10. Pes Cavus (Claw Foot)

Exaggerated medial longitudinal arch of the foot, usually from imbalance between flexor and extensor muscles or upper motor-neuron disease.

## 11. Popliteal Aneurysm

Localized dilatation of the popliteal artery causing pulsatile swelling in the fossa and possible compression of the tibial nerve.

## 12. Sciatica

Pain radiating along the course of the **sciatic nerve**, usually from herniation of the lower lumbar intervertebral disc compressing L4–S3 roots.

## 13. Tarsal Tunnel Syndrome

Compression of the **tibial nerve** beneath the **flexor retinaculum** behind the medial malleolus; produces burning pain and paresthesia in the sole.

#### **14. Trendelenburg Gait**

Dropping of the pelvis on the unsupported side due to paralysis of **gluteus medius and minimus** (superior gluteal nerve injury).

#### **15. Varicose Veins**

Dilated, tortuous superficial veins (usually **great saphenous**) caused by valve incompetence and chronic venous stasis; may lead to **venous ulcers**.

#### **16. Shin Splints**

Pain along the tibia from repetitive traction injury to **tibialis anterior origin** during overuse (running, marching).

#### **17. Valvular Incompetence**

Failure of venous valves leading to reflux of blood, venous dilatation, edema, and chronic ulceration.

#### **18. Fasciotomy**

Surgical decompression of a tight fascial compartment to relieve ischemia and prevent muscle necrosis, especially in **anterior compartment syndrome**.

#### **19. Popliteal Pulse**

Palpated with the knee flexed; its absence may indicate **popliteal artery occlusion** or embolism.

#### **20. Posterior Tibial Pulse**

Felt behind the **medial malleolus**; absent in **peripheral arterial occlusive disease**.

## ? Multiple Choice Questions

1. The femoral nerve arises from which spinal segments?

**A. L2–L4 B. L1–L3 C. L3–L5 D. L4–S1**

**? Correct Answer:** A

2. The obturator nerve supplies all of the following except:

**A. Gracilis B. Pectineus C. Adductor longus D. Adductor brevis**

**? Correct Answer:** B

3. The superior gluteal nerve supplies:

**A. Gluteus maximus B. Gluteus medius C. Piriformis D. Quadratus femoris**

**? Correct Answer:** B

4. Injury to the inferior gluteal nerve results in:

**A. Foot drop B. Inability to abduct thigh C. Inability to extend hip D. Loss of knee jerk**

**? Correct Answer:** C

5. Trendelenburg gait occurs due to paralysis of:

**A. Gluteus maximus B. Gluteus medius C. Tensor fasciae latae D. Iliopsoas**

**? Correct Answer:** B

6. The nerve commonly injured at the neck of the fibula is:

**A. Tibial B. Common peroneal C. Deep peroneal D. Sural**

**? Correct Answer:** B

7. Foot drop results from lesion of:

**A. Deep peroneal nerve B. Tibial nerve C. Femoral nerve D. Saphenous nerve**

**? Correct Answer:** A

8. The posterior compartment of the leg is supplied by:

**A. Superficial peroneal nerve B. Tibial nerve C. Deep peroneal nerve D. Sural nerve**

**? Correct Answer:** B

9. Medial plantar nerve is analogous to which nerve of the hand?

**A. Median B. Ulnar C. Radial D. Axillary**

**? Correct Answer: A**

10. Lateral plantar nerve corresponds to which nerve of the hand?

**A. Ulnar B. Median C. Radial D. Musculocutaneous**

**? Correct Answer: A**

11. The main artery of the gluteal region is:

**A. Superior gluteal B. Inferior gluteal C. Femoral D. Profunda femoris**

**? Correct Answer: A**

12. The main artery of the anterior compartment of the leg is:

**A. Posterior tibial B. Anterior tibial C. Peroneal D. Popliteal**

**? Correct Answer: B**

13. The dorsalis pedis artery is a continuation of:

**A. Popliteal artery B. Posterior tibial artery C. Anterior tibial artery D. Peroneal artery**

**? Correct Answer: C**

14. The pulse of the dorsalis pedis artery is felt:

**A. Behind medial malleolus B. Lateral to extensor hallucis longus tendon C. In popliteal fossa D. Over femoral triangle**

**? Correct Answer: B**

15. Varicose veins commonly involve:

**A. Deep veins B. Perforating veins C. Great saphenous vein D. Popliteal vein**

**? Correct Answer: C**

16. Tarsal tunnel syndrome involves compression of:

**A. Common peroneal nerve B. Tibial nerve C. Deep peroneal nerve D. Sural nerve**

**? Correct Answer: B**

17. Foot drop in anterior compartment syndrome is due to involvement of:  
**A. Deep peroneal nerve B. Tibial nerve C. Femoral nerve D. Lateral plantar nerve**  
**? Correct Answer: A**

18. Popliteal artery aneurysm may compress:  
**A. Tibial nerve B. Common peroneal nerve C. Femoral nerve D. Obturator nerve**  
**? Correct Answer: A**

19. The posterior tibial pulse is best felt:  
**A. Over dorsum of foot B. Behind medial malleolus C. In popliteal fossa D. Over adductor canal**  
**? Correct Answer: B**

20. The artery supplying the lateral compartment of the leg is:  
**A. Anterior tibial B. Peroneal C. Posterior tibial D. Dorsalis pedis**  
**? Correct Answer: B**

### **? Spots on Lower Limb**

1. **Femoral triangle**
2. **Adductor canal**
3. **Popliteal fossa**
4. **Great saphenous vein (at ankle)**
5. **Small saphenous vein (behind lateral malleolus)**

6. **Femoral artery (in femoral triangle)**
7. **Popliteal artery**
8. **Posterior tibial artery (behind medial malleolus)**
9. **Dorsalis pedis artery**
10. **Medial malleolus**
11. **Lateral malleolus**
12. **Head of fibula**
13. **Tibial tuberosity**
14. **Patella**
15. **Anterior superior iliac spine (ASIS)**
16. **Ischial tuberosity**
17. **Greater trochanter**
18. **Saphenous opening**
19. **Flexor retinaculum (medial ankle)**
20. **Superior and inferior extensor retinacula**
21. **Gluteal region (site for intramuscular injection)**
22. **Posterior superior iliac spine (PSIS)**

23. **Sciatic nerve (gluteal region)**

24. **Trendelenburg test site**

25. **Popliteal pulse site**

26. **Posterior tibial pulse site**

27. **Femoral pulse site**

28. **Adductor tubercle**

29. **Tendo calcaneus (Achilles tendon)**

30. **Plantar aponeurosis (sole)**

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### ? Answers — Spots on Lower Limb

1. **Femoral triangle:** Upper third of thigh below inguinal ligament, bounded by inguinal ligament, sartorius, and adductor longus.
2. **Adductor canal:** Middle third of thigh between vastus medialis and adductor longus.
3. **Popliteal fossa:** Posterior knee area bounded by biceps femoris (laterally) and semimembranosus + semitendinosus (medially).
4. **Great saphenous vein:** In front of the medial malleolus.
5. **Small saphenous vein:** Behind the lateral malleolus, along the tendocalcaneus.
6. **Femoral artery:** From midinguinal point to adductor tubercle.

7. **Popliteal artery:** Midline of fossa from adductor hiatus to lower border of popliteus.
8. **Posterior tibial artery:** Behind medial malleolus between tendocalcaneus and malleolus.
9. **Dorsalis pedis artery:** Lateral to tendon of extensor hallucis longus on dorsum of foot.
10. **Medial malleolus:** Medial ankle prominence of tibia.
11. **Lateral malleolus:** Lateral ankle prominence of fibula.
12. **Head of fibula:** Palpable on lateral aspect just below knee joint.
13. **Tibial tuberosity:** Below patella, insertion of ligamentum patellae.
14. **Patella:** Largest sesamoid bone in front of knee.
15. **ASIS:** Anterior end of iliac crest; attachment of inguinal ligament.
16. **Ischial tuberosity:** Inferior projection of ischium; weight-bearing while sitting.
17. **Greater trochanter:** Lateral prominence below neck of femur.
18. **Saphenous opening:** 4 cm below and lateral to pubic tubercle.
19. **Flexor retinaculum:** Between medial malleolus and medial side of heel.
20. **Extensor retinacula:** Superior—between tibia and fibula; Inferior—Y-shaped on dorsum of foot.
21. **Gluteal injection site:** Upper outer quadrant of buttock (safe zone).
22. **PSIS:** Dimple on posterior iliac crest level with S2 spine.

23. **Sciatic nerve:** Midway between ischial tuberosity and greater trochanter.
24. **Trendelenburg test:** Standing on one leg to test superior gluteal nerve integrity.
25. **Popliteal pulse:** Deep in popliteal fossa with knee flexed.
26. **Posterior tibial pulse:** Behind medial malleolus.
27. **Femoral pulse:** At midinguinal point.
28. **Adductor tubercle:** Bony projection above medial condyle of femur.
29. **Tendo calcaneus:** Thick tendon behind ankle; insertion of gastrocnemius + soleus.
30. **Plantar aponeurosis:** Thick central fascia in sole maintaining arches of foot.