

## Anatomy & Physiology: Bones—Clavicle.

### STRUCTURE.

- The clavicle is long, flattish, and has a slight S-shape curve to it (but it isn't as pronounced as one may think).
- Easily observed with the naked eye and also easily palpateable.
- Sternal end: the medial end of the clavicle articulates with the manubrium. The sternal end may be identified as it is "blunt" and fairly straight-edged as compared to the acromial end.
- Acromial end: the lateral and more rounded end (almost spoon-like shape) that articulates with the scapula.
- Superior view: (bird's eye view looking down) from the medial/sternal end, the clavicle is slightly concave anteriorly. Proceeding laterally towards the acromial end, the curve changes to slightly convex anteriorly. The superior surface both appears and feels a bit smoother than the inferior side.
- Inferior view: the bone is rougher.

### FUNCTION.

### CLINICAL SIGNIFICANCE.

- The midregion of the clavical where one part of the "S" curve transitions to the other is the weakest point of the clavical. Fractures often occur in this region.
- Falling poorly (i.e. with arms outstretched) and a superior-anterior blow may fracture the clavicle.

## References

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