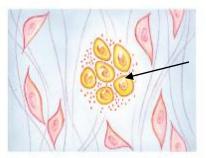
# **Intramembranous Ossification**

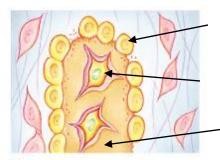


#### osteoblast

- An ossification center appears in the fibrous connective tissue membrane.
  - Selected centrally located mesenchymal cells cluster and differentiate into osteoblasts, forming an ossification center.



- 3 Woven bone and periosteum form.
  - Accumulating osteoid is laid down between embryonic blood vessels, which form a random network. The result is a network (instead of lamellae) of trabeculae (woven bone).
  - Vascularized mesenchyme condenses on the external face of the woven bone and becomes the periosteum.



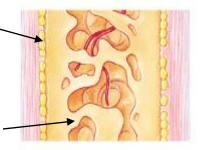
osteoblast

osteocyte

bone matrix

- ② Bone matrix (osteoid) is secreted within the fibrous membrane.
  - Osteoblasts begin to secrete osteoid, which is mineralized within a few days.
  - Trapped osteoblasts become osteocytes.

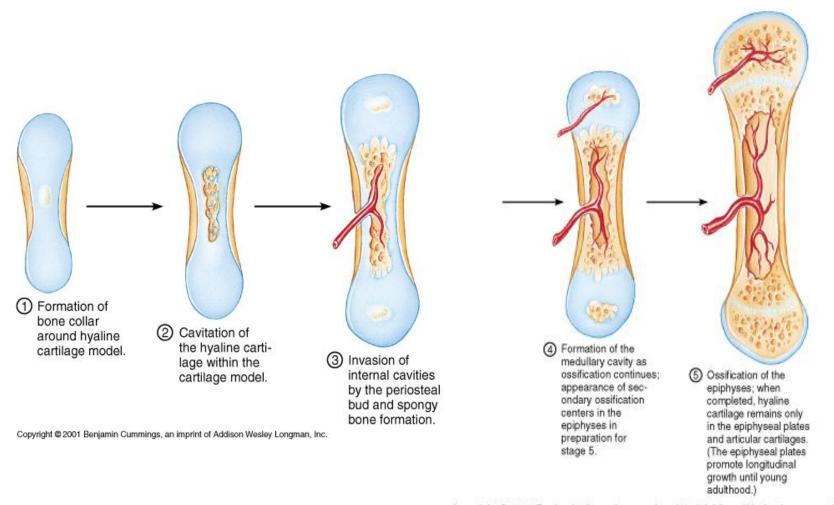
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- 4 Bone collar of compact bone forms and red marrow appears.
  - Trabeculae just deep to the periosteum thicken, forming a woven bone collar that is later replaced with mature lamellar bone.
  - Spongy bone (diploë), consisting of distinct trabeculae, persists internally and its vascular tissue becomes red marrow.

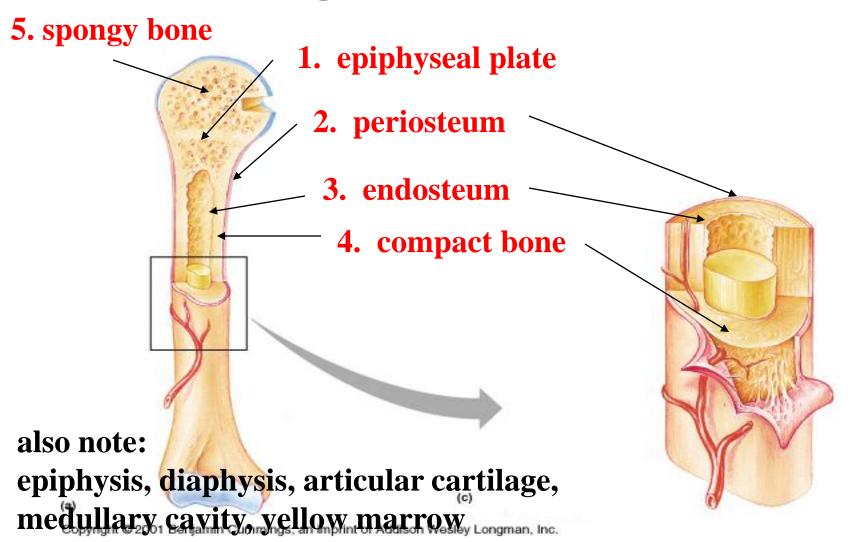
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### **Endochondral Ossification**

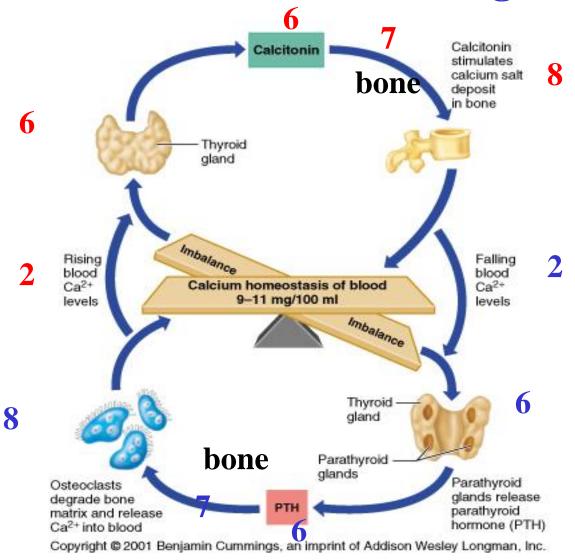


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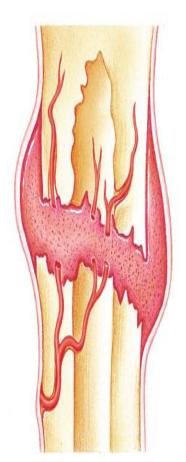
# **Long Bone Active Areas**



## Calcium Homeostasis Diagram



# Fracture Repairs (2)



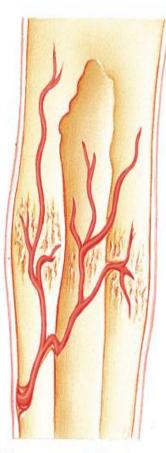
1 Hematoma formation



② Fibrocartilaginous callus formation



3 Bony callus formation



4 Bone remodeling

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# **Special Bone Arrangements**

#### **Uncollected Assignment:**

- location, bone modifications, problems
- focus on these specific uses
- 1) fontanels: delivery, brain growth
- 2) paranasal cavities: mucous, skull weight, speech/singing
- 3) foot arches: body weight, leverage
- 4) coxa: sexual differences, labor/delivery
- 5) sternum: red marrow sample
- 6) sacral hiatus: epidural anesthesia