Competency-Based BD Chaurasia's

Human Anatomy

Regional and Applied | Dissection and Clinical

Ninth **Edition**

Volume 1 UPPER LIMB and THORAX

Volume 2 LOWER LIMB, ABDOMEN and PELVIS

Volume 3 HEAD and NECK

Volume 4 BRAIN-NEUROANATOMY

idely acclaimed as a standard textbook in view of its simple language, comprehensive coverage, lucid presentation and neatly-drawn line diagrams, BD Chaurasia's Human Anatomy remains the most preferred textbook in India and abroad. This edition has been thoroughly revised and updated to make it extremely informative and much more student-friendly.

The ninth edition now features diagrams adapted from the first edition, originally prepared by Dr BD Chaurasia, which have been suitably redrawn, modified and colored appropriately. Many text chapters have citations to videos of osteology and soft parts which are accessible through CBSiCentral App. Clinically oriented FAQs and MCQs, and ECE cases have been included to make the volumes absolutely clinical in nature.

Salient features of the four volumes

- Text follows the CBME Guidelines and all topics are described as per the Competency Based Undergraduate Curriculum for the Indian Medical Graduate prescribed by the National Medical Commission.
- Colour codes used consistently in the drawings of various cells, tissues and organs are given at the beginning of
- Impressive line diagrams, originally hand-drawn by Dr BD Chaurasia, adapted from the first edition of BDC Human Anatomy, have been incorporated in this edition to make drawing of illustrations easier for the students.
- Videos of osteology and soft parts, accessible from CBSiCentral App through scratch code, have been numbered and cited in the respective chapters in all the four volumes. The App also includes answers to FAQs.
- Latest updates on various topics have been provided from standard international publications.
- Clinical orientation has been enthused by structuring many FAQs and MCQs in 'clinical mode'. Early Clinical Exposure (ECE) has been provided in the form of signs, symptoms, investigations and treatment of a particular
- Important features like viva voce questions, molecular regulation, clinicoanatomical problems, ossification, dissection (steps) are continued from the previous editions.

Tables 43, Flowcharts 7, Illustrations 414, Ossification boxes 13, Dissection boxes 37, X-rays 5, Clinical Anatomy boxes 52, Facts to Remember 93, FAQs 99, MCQs 149, Viva Voce questions 259, Videos 47, Clinicoanatomical

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She is author of Manual of Human Anatomy Dissection, Companion Pocketbook—BDC Human Anatomy (Vols 1-3) and BDC Human Anatomy for Dental Students 3/e; coauthor of Textbook of Histology 5/e, Textbook of Neuroanatomy 6/e, Anatomy and Physiology for Nurses, Anatomy and Physiology for Allied Health Sciences, Practical Anatomy Workbook, Practical Histology Workbook and Practical Anatomy Workbook for Dental Students; and editor of Human Embryology 2/e, Handbook of General Anatomy 6/e and BD Chaurasia's Applied Anatomy and Physiology for BSc **Nursing Students**

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catalogue



Competency-Based

BD Chaurasia's

Human Anatomy

Ninth **Edition**

Volume

Regional and Applied Dissection and Clinical

As per the CBME Guidelines | Competency Based Undergraduate Curriculum for the Indian Medical Graduate

Upper Limb Thorax

Scratch Code on Inside Front Cover for Accessing CBSiCentral App

Available Free on CBSiCentral App

- Original Images from First Edition of BDC Human Anatomy (Vols 1–3) hand-drawn by Dr BD Chaurasia
- Videos on Osteology and Soft Parts
- Frequently Asked Questions & Answers

Wall Chart on **Arterial Tree of Human Body**



Many easily reproducible diagrams, originally hand-drawn by Dr BD Chaurasia, now modified and coloured suitably, are given at the relevant locations in the text



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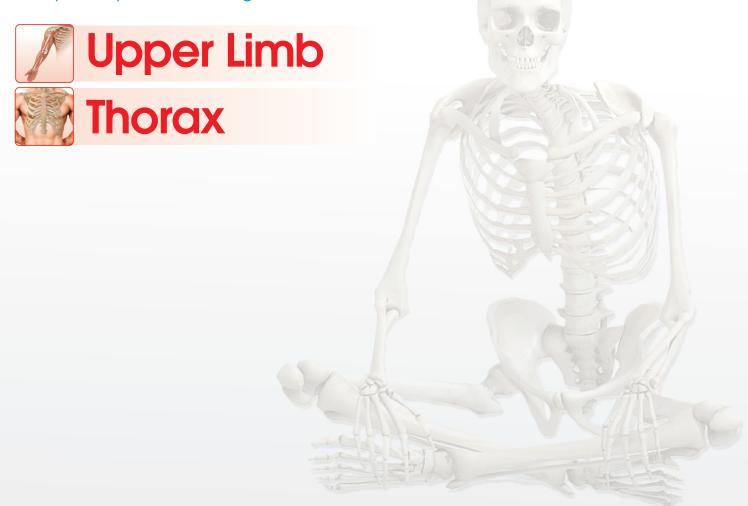


Competency-Based

BD Chaurasia's Human Anatomy

Regional and Applied Dissection and Clinical

As per the latest CBME Guidelines | Competency based Undergraduate Curriculum for the Indian Medical Graduate





Dr BD Chaurasia (1937–1985)

was Reader in Anatomy at GR Medical College, Gwalior.

He received his MBBS in 1960, MS in 1965 and PhD in 1975.

He was elected fellow of National Academy of Medical Sciences (India) in 1982.

He was a member of the Advisory Board of the *Acta Anatomica* since 1981, member of the editorial board of *Bionature*, and in addition member of a number of scientific societies.

He had a large number of research papers to his credit.



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BD Chaurasia's Human Anatomy

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Upper Limb



Thorax

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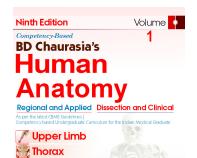
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ISBN: 978-93-5466-473-1

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Ninth Edition: 2023

First Edition: 1979

Reprint: 1980, 1981, 1982, 1983, 1984, 1985, 1986, 1987, 1988

Second Edition: 1989

Reprint: 1990, 1991, 1992, 1993, 1994

Third Edition: 1995

Reprint: 1996, 1997, 1998, 1999, 2000, 2001, 2002, 2003, 2004

Fourth Edition: 2004

Reprint: 2005, 2006, 2007, 2008, 2009

Fifth Edition: 2010 Reprint: 2011, 2012 Sixth Edition: 2013 Reprint: 2014, 2015 Seventh Edition: 2016 Reprint: 2017, 2018, 2019 Eighth Edition: 2020 Reprint: 2021, 2022

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Published by Satish Kumar Jain and produced by Varun Jain for

CBS Publishers & Distributors Pvt Ltd

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to

my teacher Shrí Uma Shankar Nagayach

— BD Chaurasia





UPPER LIMB and **THORAX**

LOWER LIMB, ABDOMEN and PELVIS

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Jolum_e

HEAD and **NECK**

BRAIN-NEUROANATOMY





This human anatomy is not systemic but regional Oh yes, it is theoretical as well as practical Besides the gross features, it is chiefly clinical Clinical too is very much diagrammatical.

> Lots of tables for the muscles are provided Even methods for testing are incorporated Improved colour illustrations are added So that right half of brain gets stimulated

Tables for muscles acting on joints are given Tables for branches of nerves and arteries are given Hope these volumes turn highly useful Editors' hardwork under Almighty's guidance prove fruitful

Preface to the Ninth Edition

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This edition features a number of significant modifications which we have made in the light of the wide-ranging suggestions that we received in the recent months from students, teachers and also the well-wishers of this epic textbook. As the information explodes and knowledge multiplies, appropriate improvements, additions and changes are also required to be made in the contemporary literature. Latest research information sourced from the standard international publications has been selectively incorporated in these volumes.

Numerous unique line diagrams, originally hand-drawn by late Dr BD Chaurasia and used in the first edition of the book, after thoughtful moderation, have now been incorporated in the ninth edition. Our criteria for the selection and manipulation of these drawings were clearly based on the simplicity and lucidity of the anatomic description. These simply structured illustrations can be easily reproduced by the students in multitudes of tests and examinations, including university examinations.

Diagrams form the foundation of anatomy: The drawings create imprints on the brain. Figures, artwork and the dissection are recorded in the right half of the cerebrum while the text is learnt by using left half of cerebrum. Thus, learning by drawing diagrams and steps of dissection help in using both the halves of cerebrum, which is an ideal condition. This textbook lays stress on understanding anatomic structures and details through clear, neat and crisp diagrams.

Earlier, videos of the dissection of all regions had been given free access to the readers on CBSiCentral App. These videos are now uploaded on the App after reorganization of the sequences, numeration and providing appropriate citations in the text. Readers can register on the App and access the enumerated videos through the scratch code given on the inside front cover of each volume. These videos adequately compensate the scarcity of the cadavers in medical institutions for conducting dissection.

The videos of the dissection give three-dimensional image descriptions of tissues and organs which get effectively registered in brain for a longer time.

Processes and steps of dissection given in blue boxes with dissection photographs have been retained as many students and teachers appreciate the same. However, no addition in dissection photographs has been made as a separate CBSPD publication *Manual of Human Anatomy Dissection* (ISBN: 978-93-89688-00-9) with numerous dissection photographs is available to the readers who aspire to learn and enjoy the dissection in a meticulous manner.

We have incorporated all the competencies prescribed by National Medical Commission under the Competency Based Curriculum for the Indian Medical Graduate for spirited implementation of Competency Based Medical Education Guidelines.

Since National Medical Commission has laid stress on teaching and learning clinical aspects from the very beginning of the MBBS study period, the questions asked are mostly clinical. Clinical aspects have been explicitly given in the text such that the students are able to learn, recapitulate and answer the clinically-oriented questions in their examinations.

As NMC curriculum also lays emphasis on Early Clinical Exposure, crisply written and well-presented ECE Cases have been given at the end of every section, which make the book clinical-savvy. These case studies will help the budding doctors in imbibing the salient clinical features, getting appropriate investigations done, and treating the patients satisfactorily once they are in clinical practice.

All the illustrations in the four volumes of this book have been prepared on a common colour scheme applicable to cells, tissues and organs. Colour codes employed in the preparation of the human anatomy illustrations are given in the beginning of each section. This characteristic feature will help the students in identifying the anatomic components clearly and draw appropriately coloured diagram in a schematic manner.

Extensive research by numerous scientists has decoded the molecular control of development of organ tissues of the body. Basics of this molecular control are given briefly in these volumes.

We have continued with the practice of giving one separate wall chart in each volume for easy comprehension of the topics.

Sincere attempt has been made to present all facets of theory and practical anatomy to make these volumes truly holistic. In addition to the descriptive text, the following rich features lend a high pedestal to the book in the context of the international literature.

	Volume 1	Volume 2	Volume 3	Volume 4	Total
Figures	414	653	462	210	1739
Flowcharts	7	4	12	9	32
Dissection Boxes	37	36	12	5	90
X-rays/MRI and CT Scans	5	5	4	16	30
Ossification Boxes	13	12	14	_	39
Tables	43	52	33	23	151
Clinical Anatomy Boxes	52	101	77	41	271
Mnemonics Boxes	22	15	8	4	49
Facts to Remember	93	229	114	67	503
FAQs	99	132	104	52	387
MCQs	149	232	135	72	588
Viva Voce Questions	259	508	227	125	1119
Clinicoanatomical Problems	19	35	20	14	88
Videos	47	50	32	9	138

Chief Editor

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Pragati Sheel Mittal Mrudula Chandrupatla

Preface to the First Edition (excerpts)

The necessity of having a simple, systematized and complete book on anatomy has long been felt. The urgency for such a book has become all the more acute due to the shorter time now available for teaching anatomy, and also to the falling standards of English language in the majority of our students in India. The national symposium on 'Anatomy in Medical Education' held at Delhi in 1978 was a call to change the existing system of teaching the unnecessary minute details to the undergraduate students.

This attempt has been made with an object to meet the requirements of a common medical student. The text has been arranged in small classified parts to make it easier for the students to remember and recall it at will. It is adequately illustrated with simple line diagrams which can be reproduced without any difficulty, and which also help in understanding and memorizing the anatomical facts that appear to defy memory of a common student. The monotony of describing the individual muscles separately, one after the other, has been minimised by writing them out in tabular form, which makes the subject interesting for a lasting memory. The relevant radiological and surface anatomy have been treated in separate chapters. A sincere attempt has been made to deal, wherever required, the clinical applications of the subject. The entire approach is such as to attract and inspire the students for a deeper dive in the subject of anatomy.

The book has been intentionally split in three parts for convenience of handling. This also makes a provision for those who cannot afford to have the whole book at a time.

It is quite possible that there are errors of omission and commission in this mostly single-handed attempt. I would be grateful to the readers for their suggestions to improve the book from all angles.

I am very grateful to my teachers and the authors of numerous publications, whose knowledge has been freely utilised in the preparation of this book. I am equally grateful to my professor and colleagues for their encouragement and valuable help. My special thanks are due to my students who made me feel their difficulties, which was a great incentive for writing this book. I have derived maximum inspiration from Prof. Inderbir Singh (Rohtak), and learned the decency of work from Shri SC Gupta (Jiwaji University, Gwalior).

I am deeply indebted to Shri KM Singhal (National Book House, Gwalior) and Mr SK Jain (CBS Publishers & Distributors, Delhi), who have taken unusual pains to get the book printed in its present form. For giving it the desired get-up, Mr VK Jain and Raj Kamal Electric Press are gratefully acknowledged. The cover page was designed by Mr Vasant Paranjpe, the artist and photographer of our college; my sincere thanks are due to him. I acknowledge with affection the domestic assistance of Munne Miyan and the untiring company of my Rani, particularly during the odd hours of this work.

BD Chaurasia

Acknowledgements

The editors are thankful to Dr SN Kazi (Pune) for providing maximum updates from Gray's Anatomy, 42nd Edition.

Dr Vikas Verma (Lucknow) revised the chapters on Joints and Nerves of Limbs and gave very useful inputs. Dr Tripta Bhagat (Ghaziabad) edited clinical anatomy portions of the volumes.

We have the blessings and good wishes of Prof NA Faruqi (Aligarh); Dr DC Naik (Rewa); Dr SD Joshi and Dr SS Joshi (Indore); Dr (Brig) Rakesh Gupta (Greater Noida); Dr DR Singh (Lucknow); Dr M Kaul; Dr C Anand and Dr I Bahl (Delhi); Dr Mohsin Azmi (Kanpur); Dr Medha Joshi (Ghaziabad); Dr Surbhi Gupta (Delhi); and Dr Nitin Nagarkar (Raipur).

We are thankful to Dr Surjit Ghatak (Jodhpur); Dr Vinay Sharma (Muzzafarnagar); Dr Deepu Singh Kataria and Dr Anup Singh Gurjar (Pali); Dr Jagmohan Sharma; Dr Deepak Sharma; Dr Rajesh Arora and Dr Pooja Garg (Jaipur); Dr Sumit Gupta (Kota); Dr Gopal Sharma and Dr Manoj Sharma (Jhalawar); Dr Rekha Parashar (Chittorgarh); Dr Santosh Kumar (Dholpur); Dr BK Aghera (Sirohi), Dr Isha Srivastav; Dr Aprajita Raizada; Dr Sajan Skaria; Dr Anjali Jain and Dr Kalpana Sharma (Udaipur); for giving feedback for various sections of the volumes.

We are grateful to Dr Hitant Vohra and Dr Anu Sharma (Ludhiana); Dr Anupma Mahajan (Amritsar); Dr Vanita Gupta (Jammu), for editing chapters to enhance the value of the volumes.

We are grateful to Dr Ravikant (Amritsar); Dr Sangeeta and Dr Nusrat Jabeen (Jammu); Dr Kalyan Singh and Dr Rajan Singla (Patiala); Dr Anjali Jain and Dr Aprajita Sikka (Ludhiana); Dr Bashir (Srinagar); Dr Seema and Dr Ritu (Rajouri); Dr Mubeen (Kathua); Dr RK Srivastava (Kanpur); Dr Punita Manik (Lucknow); Dr Binod Kumar; Dr Sunita Nayak and Dr Shambhu Prasad (Patna); Dr AK Dubey (Ranchi); Dr Satyam Khare; Dr Shilpi Jain and Dr Alok Tripathi (Meerut), for promoting the volumes.

We have been getting constant encouragement and support from Dr Ranjana Verma, Dr Muthukrishnan P, Dr Yogesh Yadav, Dr Pullimi Vineel and Dr Anupma Gupta (Greater Noida); Dr Nisha Kaul (Ghaziabad); Dr Vinay Singhal (Saharanpur); Dr RK Ashoka (Mathura); Dr Vineet Guhia (Khandwa); Dr Manisha Sinha (Raipur); Dr Jahan Shirin (Kanpur); Dr Damyanti (Manipur); Dr Daisy Sahni (Chandigarh); and Dr MK Anand (Bhuj).

Our regards and affection to Dr Rewa Choudhry, Dr Shilpa Paul, Dr Smita Kakar, Dr Anita Tuli, Dr Gayatri Rath, Dr Shashi Raheja, Dr Shyama Rajdan, Dr Mangala Kohli, Dr A Sheriff, Dr SB Ray, Dr Vandana Mehta, Dr Sabita Mishra, Dr Renu Chauhan, Dr Jyoti Arora, Dr Sneh Aggarwal and Dr TS Roy (Delhi), for going through the volumes.

We would like to thank Dr Pritha Bhuiyan (Mumbai); Dr Brijendra Singh (Rishikesh); Col. Dr Sushil Kumar (Pune); Dr AK Srivastava (Lucknow); Dr MK Pant (Dehradun); Dr Shakuntala Pai (Manipal); Dr Simmi Mehra (Rajkot); Dr Fatima M De Souza (Goa); Dr Mukesh Mittal (Shivpuri); Dr Priti Sinha (Saharanpur); Dr Rakesh K Verma (Lucknow); Dr Rashmi Malhotra (Rishikesh); Dr Sandiya Kurup (Kalanchery); Dr Simmi Soni (Aziznagar); Dr Sunita Gupta (Ahmedabad) and many-many other teachers all over the globe, for giving us good wishes.

Videos of bones and soft parts of human body, prepared at Kathmandu University School of Medical Sciences, have now been added with the respective chapters and are available at our mobile App CBSiCentral. I (chief editor) am grateful to Dr R Koju, CEO of KUSMS and Dhulikhel Hospital, for his generosity.

The moral support of my (chief editor) family members, Late Dr DP Garg, Dr Suvira Gupta, Dr JP Gupta, Mr Manoj, Ms Rekha, Mr Sanjay, Ms Meenakshi, Dr Manish, Dr Shilpa Garg, Dr Naveen Garg, Dr Manoj, Dr Nalini Shukla, Dr Vikas Verma and Dr Swati Gupta, is appreciated.

The magnanimity shown by Mr SK Jain (Chairman) and Mr Varun Jain (Director), CBS Publishers & Distributors, has been always forthcoming. The unquestionable support of Mr YN Arjuna (Senior Vice President—Publishing, Editorial and Publicity) and his entire team comprising Ms Ritu Chawla (GM—Production), Mr Sanjay Chauhan, Mr Neeraj Prasad and Mr Rohan Prasad (Graphic Artists); Mr Surendra Jha and Mr Prasenjit Paul (Copy Editors); Ms Jyoti Kaur and Mr Tarun Rajput (DTP Operators) has made an excellent contribution to bring out this edition. We are really obliged to them and pray for their prosperity.

Chief Editor

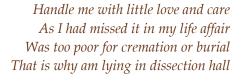
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Editors

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Thus spoke the cadaver



You dissect me, cut me, section me But your learning anatomy should be precise Worry not, you would not be taken to court As I am happy to be with the bright lot

Couldn't dream of a fridge for cold water Now my body parts are kept in refrigerator Young students sit around me with friends A few dissect, rest talk, about food, family and movies How I enjoy the dissection periods Don't you? Unless you are interrogated by a teacher

> When my parts are buried post-dissection Bones are taken out for the skeleton Skeleton is the crown glory of the museum Now I am being looked up by great enthusiasm

If not as skeletons as loose bones I am in their bags and in their hostel rooms At times, I am on their beds as well Oh, what a promotion to heaven from hell

I won't leave you, even if you pass anatomy Would follow you in forensic medicine and pathology Would be with you even in clinical teaching Medicine line is one where dead teach the living

One humble request I'd make
Be sympathetic to persons with disease
Don't panic, you'll have enough money
And I bet, you'd be singularly happy
—Krishna Garg



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Ethical Aspects of Cadaveric Dissection

The cadaver, the dead body, that we dissect, plays an important role in the teaching of anatomy to medical students. The cadaver and the bones become an important part of our life as medical students as some academics have even referred to the cadaver as the 'first teacher' in the medical school.

We must pay due respect to the cadavers and bones kept in the dissection hall or museum. In some medical schools it is mandatory to take an 'oath' before beginning the cadaveric dissection which aims to uphold the dignity of the mortal remains of the departed soul while other medical schools help the student to undertake dissection in a proper manner and empathise with the families of the donor. During the course of dissection the student is constantly reminded of the sanctity of the body he/she is studying so that the noble donation of someone's body is used only as a means of gaining scientific knowledge/progress. Each and every dissected part afterwards is disposed or cremated with full dignity.

Honour of the donor and his/her family is the prime responsibility of the health professional. `The dead teach the living', and the living pledge to use this knowledge for the upliftment of humankind.

Three-dimensional models and computer simulations cannot replace the tactile appreciation achieved by cadaveric dissection and we should always be grateful to those who have donated their bodies and strive to respect them. We have the privilege to study the human being through a body of a fellow human and have to be humble and carry forward the legacy of nobility and selflessness in our careers.

(Contributed by Dr Puneet Kaur)

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Competency-Based **BD** Chaurasia's

Human Anatomy

Regional and Applied | Dissection and Clinical

Ninth Edition

Volume 1 UPPER LIMB and THORAX

Volume 2 LOWER LIMB, ABDOMEN and PELVIS

Volume 3 HEAD and NECK

Volume 4 BRAIN-NEUROANATOMY

idely acclaimed as a standard textbook in view of its simple language, comprehensive coverage, lucid presentation and neatly-drawn line diagrams, BD Chaurasia's Human Anatomy remains the most preferred textbook in India and abroad. This edition has been thoroughly revised and updated to make it extremely informative and much more student-friendly.

The ninth edition now features diagrams adapted from the first edition, originally prepared by Dr BD Chaurasia, which have been suitably redrawn, modified and colored appropriately. Many text chapters have citations to videos of osteology and soft parts which are accessible through CBSiCentral App. Clinically oriented FAQs and MCQs, and ECE cases have been included to make the volumes absolutely clinical in nature.

Salient features of the four volumes

- Text follows the CBME Guidelines and all topics are described as per the Competency Based Undergraduate Curriculum for the Indian Medical Graduate prescribed by the National Medical Commission.
- Colour codes used consistently in the drawings of various cells, tissues and organs are given at the beginning of
- Impressive line diagrams, originally hand-drawn by Dr BD Chaurasia, adapted from the first edition of BDC Human Anatomy, have been incorporated in this edition to make drawing of illustrations easier for the students.
- Videos of osteology and soft parts, accessible from CBSiCentral App through scratch code, have been numbered and cited in the respective chapters in all the four volumes. The App also includes answers to FAQs.
- Latest updates on various topics have been provided from standard international publications.
- Clinical orientation has been enthused by structuring many FAQs and MCQs in 'clinical mode'. Early Clinical Exposure (ECE) has been provided in the form of signs, symptoms, investigations and treatment of a particular
- Important features like viva voce questions, molecular regulation, clinicoanatomical problems, ossification, dissection (steps) are continued from the previous editions.

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Ninth **Edition**

Volume

Regional and Applied | Dissection and Clinical

As per the CBME Guidelines | Competency Based Undergraduate Curriculum for the Indian Medical Graduate

Lower Limb Abdomen and Pelvis

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Available Free on CBSiCentral App

- Original Images from First Edition of BDC Human Anatomy (Vols 1–3) hand-drawn by Dr BD Chaurasia
- Videos on Osteology and Soft Parts
- Frequently Asked Questions & Answers





Many easily reproducible diagrams, originally hand-drawn by Dr BD Chaurasia, now modified and coloured suitably, are given at the relevant locations in the text



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Lower Limb



Abdomen and Pelvis



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He received his MBBS in 1960, MS in 1965 and PhD in 1975.

He was elected fellow of National Academy of Medical Sciences (India) in 1982.

He was a member of the Advisory Board of the *Acta Anatomica* since 1981, member of the editorial board of *Bionature*, and in addition member of a number of scientific societies.

He had a large number of research papers to his credit.



Competency-Based

2

BD Chaurasia's Human Anatomy

Regional and Applied Dissection and Clinical

As per the latest CBME Guidelines | Competency based Undergraduate Curriculum for the Indian Medical Graduate



Lower Limb



Abdomen and Pelvis

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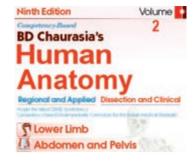
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ISBN: 978-93-5466-476-2

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Ninth Edition: 2023

First Edition: 1979

Reprint: 1980, 1981, 1982, 1983, 1984, 1985, 1986, 1987, 1988

Second Edition: 1989

Reprint: 1990, 1991, 1992, 1993, 1994

Third Edition: 1995

Reprint: 1996, 1997, 1998, 1999, 2000, 2001, 2002, 2003, 2004

Fourth Edition: 2004

Reprint: 2005, 2006, 2007, 2008, 2009

Fifth Edition: 2010 Reprint: 2011, 2012 Sixth Edition: 2013 Reprint: 2014, 2015 Seventh Edition: 2016 Reprint: 2017, 2018, 2019 Eighth Edition: 2020 Reprint: 2021, 2022

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Published by Satish Kumar Jain and produced by Varun Jain for

CBS Publishers & Distributors Pvt Ltd

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to

my teacher Shri Uma Shankar Nagayach

— BD Chaurasia





UPPER LIMB and **THORAX**

LOWER LIMB, ABDOMEN and PELVIS

2



HEAD and **NECK**

BRAIN-NEUROANATOMY





This human anatomy is not systemic but regional Oh yes, it is theoretical as well as practical Besides the gross features, it is chiefly clinical Clinical too is very much diagrammatical.

> Lots of tables for the muscles are provided Even methods for testing are incorporated Improved colour illustrations are added So that right half of brain gets stimulated

Tables for muscles acting on joints are given Tables for branches of nerves and arteries are given Hope these volumes turn highly useful Editors' hardwork under Almighty's guidance prove fruitful

Preface to the Ninth Edition



This edition features a number of significant modifications which we have made in the light of the wide-ranging suggestions that we received in the recent months from students, teachers and also the well-wishers of this epic textbook. As the information explodes and knowledge multiplies, appropriate improvements, additions and changes are also required to be made in the contemporary literature. Latest research information sourced from the standard international publications has been selectively incorporated in these volumes.

Numerous unique line diagrams, originally hand-drawn by late Dr BD Chaurasia and used in the first edition of the book, after thoughtful moderation, have now been incorporated in the ninth edition. Our criteria for the selection and manipulation of these drawings were clearly based on the simplicity and lucidity of the anatomic description. These simply structured illustrations can be easily reproduced by the students in multitudes of tests and examinations, including university examinations.

Diagrams form the foundation of anatomy: The drawings create imprints on the brain. Figures, artwork and the dissection are recorded in the right half of the cerebrum while the text is learnt by using left half of cerebrum. Thus, learning by drawing diagrams and steps of dissection help in using both the halves of cerebrum, which is an ideal condition. This textbook lays stress on understanding anatomic structures and details through clear, neat and crisp diagrams.

Earlier, videos of the dissection of all regions had been given free access to the readers on CBSiCentral App. These videos are now uploaded on the App after reorganization of the sequences, numeration and providing appropriate citations in the text. Readers can register on the App and access the enumerated videos through the scratch code given on the inside front cover of each volume. These videos adequately compensate the scarcity of the cadavers in medical institutions for conducting dissection.

The videos of the dissection give three-dimensional image descriptions of tissues and organs which get effectively registered in brain for a longer time.

Processes and steps of dissection given in blue boxes with dissection photographs have been retained as many students and teachers appreciate the same. However, no addition in dissection photographs has been made as a separate CBSPD publication *Manual of Human Anatomy Dissection* (ISBN: 978-93-89688-00-9) with numerous dissection photographs is available to the readers who aspire to learn and enjoy the dissection in a meticulous manner.

We have incorporated all the competencies prescribed by National Medical Commission under the Competency Based Curriculum for the Indian Medical Graduate for spirited implementation of Competency Based Medical Education Guidelines.

Since National Medical Commission has laid stress on teaching and learning clinical aspects from the very beginning of the MBBS study period, the questions asked are mostly clinical. Clinical aspects have been explicitly given in the text such that the students are able to learn, recapitulate and answer the clinically-oriented questions in their examinations.

As NMC curriculum also lays emphasis on Early Clinical Exposure, crisply written and well-presented ECE Cases have been given at the end of every section, which make the book clinical-savvy. These case studies will help the budding doctors in imbibing the salient clinical features, getting appropriate investigations done, and treating the patients satisfactorily once they are in clinical practice.

All the illustrations in the four volumes of this book have been prepared on a common colour scheme applicable to cells, tissues and organs. Colour codes employed in the preparation of the human anatomy illustrations are given in the beginning of each section. This characteristic feature will help the students in identifying the anatomic components clearly and draw appropriately coloured diagram in a schematic manner.

Extensive research by numerous scientists has decoded the molecular control of development of organ tissues of the body. Basics of this molecular control are given briefly in these volumes.

We have continued with the practice of giving one separate wall chart in each volume for easy comprehension of the topics.

Sincere attempt has been made to present all facets of theory and practical anatomy to make these volumes truly holistic. In addition to the descriptive text, the following rich features lend a high pedestal to the book in the context of the international literature.

	Volume 1	Volume 2	Volume 3	Volume 4	Total
Figures	414	653	462	210	1739
Flowcharts	7	4	12	9	32
Dissection Boxes	37	36	12	5	90
X-rays/MRI and CT Scans	5	5	4	16	30
Ossification Boxes	13	12	14	_	39
Tables	43	52	33	23	151
Clinical Anatomy Boxes	52	101	77	41	271
Mnemonics Boxes	22	15	8	4	49
Facts to Remember	93	229	114	67	503
FAQs	99	132	104	52	387
MCQs	149	232	135	72	588
Viva Voce Questions	259	508	227	125	1119
Clinicoanatomical Problems	19	35	20	14	88
Videos	47	50	32	9	138

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Preface to the First Edition (excerpts)



The necessity of having a simple, systematized and complete book on anatomy has long been felt. The urgency for such a book has become all the more acute due to the shorter time now available for teaching anatomy, and also to the falling standards of English language in the majority of our students in India. The national symposium on 'Anatomy in Medical Education' held at Delhi in 1978 was a call to change the existing system of teaching the unnecessary minute details to the undergraduate students.

This attempt has been made with an object to meet the requirements of a common medical student. The text has been arranged in small classified parts to make it easier for the students to remember and recall it at will. It is adequately illustrated with simple line diagrams which can be reproduced without any difficulty, and which also help in understanding and memorizing the anatomical facts that appear to defy memory of a common student. The monotony of describing the individual muscles separately, one after the other, has been minimised by writing them out in tabular form, which makes the subject interesting for a lasting memory. The relevant radiological and surface anatomy have been treated in separate chapters. A sincere attempt has been made to deal, wherever required, the clinical applications of the subject. The entire approach is such as to attract and inspire the students for a deeper dive in the subject of anatomy.

The book has been intentionally split in three parts for convenience of handling. This also makes a provision for those who cannot afford to have the whole book at a time.

It is quite possible that there are errors of omission and commission in this mostly single-handed attempt. I would be grateful to the readers for their suggestions to improve the book from all angles.

I am very grateful to my teachers and the authors of numerous publications, whose knowledge has been freely utilised in the preparation of this book. I am equally grateful to my professor and colleagues for their encouragement and valuable help. My special thanks are due to my students who made me feel their difficulties, which was a great incentive for writing this book. I have derived maximum inspiration from Prof. Inderbir Singh (Rohtak), and learned the decency of work from Shri SC Gupta (Jiwaji University, Gwalior).

I am deeply indebted to Shri KM Singhal (National Book House, Gwalior) and Mr SK Jain (CBS Publishers & Distributors, Delhi), who have taken unusual pains to get the book printed in its present form. For giving it the desired get-up, Mr VK Jain and Raj Kamal Electric Press are gratefully acknowledged. The cover page was designed by Mr Vasant Paranjpe, the artist and photographer of our college; my sincere thanks are due to him. I acknowledge with affection the domestic assistance of Munne Miyan and the untiring company of my Rani, particularly during the odd hours of this work.

BD Chaurasia

Acknowledgements

The editors are thankful to Dr SN Kazi (Pune) for providing maximum updates from Gray's Anatomy, 42nd Edition.

Dr Vikas Verma (Lucknow) revised the chapters on Joints and Nerves of Limbs and gave very useful inputs. Dr Tripta Bhagat (Ghaziabad) edited clinical anatomy portions of the volumes.

We have the blessings and good wishes of Prof NA Faruqi (Aligarh); Dr DC Naik (Rewa); Dr SD Joshi and Dr SS Joshi (Indore); Dr (Brig) Rakesh Gupta (Greater Noida); Dr DR Singh (Lucknow); Dr M Kaul; Dr C Anand and Dr I Bahl (Delhi); Dr Mohsin Azmi (Kanpur); Dr Medha Joshi (Ghaziabad); Dr Surbhi Gupta (Delhi); and Dr Nitin Nagarkar (Raipur).

We are thankful to Dr Surjit Ghatak (Jodhpur); Dr Vinay Sharma (Muzzafarnagar); Dr Deepu Singh Kataria and Dr Anup Singh Gurjar (Pali); Dr Jagmohan Sharma; Dr Deepak Sharma; Dr Rajesh Arora and Dr Pooja Garg (Jaipur); Dr Sumit Gupta (Kota); Dr Gopal Sharma and Dr Manoj Sharma (Jhalawar); Dr Rekha Parashar (Chittorgarh); Dr Santosh Kumar (Dholpur); Dr BK Aghera (Sirohi), Dr Isha Srivastav; Dr Aprajita Raizada; Dr Sajan Skaria; Dr Anjali Jain and Dr Kalpana Sharma (Udaipur); for giving feedback for various sections of the volumes.

We are grateful to Dr Hitant Vohra and Dr Anu Sharma (Ludhiana); Dr Anupma Mahajan (Amritsar); Dr Vanita Gupta (Jammu), for editing chapters to enhance the value of the volumes.

We are grateful to Dr Ravikant (Amritsar); Dr Sangeeta and Dr Nusrat Jabeen (Jammu); Dr Kalyan Singh and Dr Rajan Singla (Patiala); Dr Anjali Jain and Dr Aprajita Sikka (Ludhiana); Dr Bashir (Srinagar); Dr Seema and Dr Ritu (Rajouri); Dr Mubeen (Kathua); Dr RK Srivastava (Kanpur); Dr Punita Manik (Lucknow); Dr Binod Kumar; Dr Sunita Nayak and Dr Shambhu Prasad (Patna); Dr AK Dubey (Ranchi); Dr Satyam Khare; Dr Shilpi Jain and Dr Alok Tripathi (Meerut), for promoting the volumes.

We have been getting constant encouragement and support from Dr Ranjana Verma, Dr Muthukrishnan P, Dr Yogesh Yadav, Dr Pullimi Vineel and Dr Anupma Gupta (Greater Noida); Dr Nisha Kaul (Ghaziabad); Dr Vinay Singhal (Saharanpur); Dr RK Ashoka (Mathura); Dr Vineet Guhia (Khandwa); Dr Manisha Sinha (Raipur); Dr Jahan Shirin (Kanpur); Dr Damyanti (Manipur); Dr Daisy Sahni (Chandigarh); and Dr MK Anand (Bhuj).

Our regards and affection to Dr Rewa Choudhry, Dr Shilpa Paul, Dr Smita Kakar, Dr Anita Tuli, Dr Gayatri Rath, Dr Shashi Raheja, Dr Shyama Rajdan, Dr Mangala Kohli, Dr A Sheriff, Dr SB Ray, Dr Vandana Mehta, Dr Sabita Mishra, Dr Renu Chauhan, Dr Jyoti Arora, Dr Sneh Aggarwal and Dr TS Roy (Delhi), for going through the volumes.

We would like to thank Dr Pritha Bhuiyan (Mumbai); Dr Brijendra Singh (Rishikesh); Col. Dr Sushil Kumar (Pune); Dr AK Srivastava (Lucknow); Dr MK Pant (Dehradun); Dr Shakuntala Pai (Manipal); Dr Simmi Mehra (Rajkot); Dr Fatima M De Souza (Goa); Dr Mukesh Mittal (Shivpuri); Dr Priti Sinha (Saharanpur); Dr Rakesh K Verma (Lucknow); Dr Rashmi Malhotra (Rishikesh); Dr Sandiya Kurup (Kalanchery); Dr Simmi Soni (Aziznagar); Dr Sunita Gupta (Ahmedabad) and many-many other teachers all over the globe, for giving us good wishes.

Videos of bones and soft parts of human body, prepared at Kathmandu University School of Medical Sciences, have now been added with the respective chapters and are available at our mobile App CBSiCentral. I (chief editor) am grateful to Dr R Koju, CEO of KUSMS and Dhulikhel Hospital, for his generosity.

The moral support of my (chief editor) family members, Late Dr DP Garg, Dr Suvira Gupta, Dr JP Gupta, Mr Manoj, Ms Rekha, Mr Sanjay, Ms Meenakshi, Dr Manish, Dr Shilpa Garg, Dr Naveen Garg, Dr Manoj, Dr Nalini Shukla, Dr Vikas Verma and Dr Swati Gupta, is appreciated.

The magnanimity shown by Mr SK Jain (Chairman) and Mr Varun Jain (Director), CBS Publishers & Distributors, has been always forthcoming. The unquestionable support of Mr YN Arjuna (Senior Vice President—Publishing, Editorial and Publicity) and his entire team comprising Ms Ritu Chawla (GM—Production), Mr Sanjay Chauhan, Mr Neeraj Prasad and Mr Rohan Prasad (Graphic Artists); Mr Surendra Jha and Mr Prasenjit Paul (Copy Editors); Ms Jyoti Kaur and Mr Tarun Rajput (DTP Operators) has made an excellent contribution to bring out this edition. We are really obliged to them and pray for their prosperity.

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Thus spoke the cadaver

Handle me with little love and care As I had missed it in my life affair Was too poor for cremation or burial That is why am lying in dissection hall

You dissect me, cut me, section me But your learning anatomy should be precise Worry not, you would not be taken to court As I am happy to be with the bright lot

Couldn't dream of a fridge for cold water
Now my body parts are kept in refrigerator
Young students sit around me with friends
A few dissect, rest talk, about food, family and movies
How I enjoy the dissection periods
Don't you? Unless you are interrogated by a teacher

When my parts are buried post-dissection
Bones are taken out for the skeleton
Skeleton is the crown glory of the museum
Now I am being looked up by great enthusiasm

If not as skeletons as loose bones
I am in their bags and in their hostel rooms
At times, I am on their beds as well
Oh, what a promotion to heaven from hell

I won't leave you, even if you pass anatomy Would follow you in forensic medicine and pathology Would be with you even in clinical teaching Medicine line is one where dead teach the living

One humble request I'd make
Be sympathetic to persons with disease
Don't panic, you'll have enough money
And I bet, you'd be singularly happy
—Krishna Garg



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The cadaver, the dead body, that we dissect, plays an important role in the teaching of anatomy to medical students. The cadaver and the bones become an important part of our life as medical students as some academics have even referred to the cadaver as the 'first teacher' in the medical school.

We must pay due respect to the cadavers and bones kept in the dissection hall or museum. In some medical schools, it is mandatory to take an 'oath' before beginning the cadaveric dissection which aims to uphold the dignity of the mortal remains of the departed soul while other medical schools help the student to undertake dissection in a proper manner and empathise with the families of the donor. During the course of dissection, the student is constantly reminded of the sanctity of the body he/she is studying so that the noble donation of someone's body is used only as a means of gaining scientific knowledge/progress. Each and every dissected part afterwards is disposed or cremated with full dignity.

Honour of the donor and his/her family is the prime responsibility of the health professional. `The dead teach the living', and the living pledge to use this knowledge for the upliftment of humankind.

Three-dimensional models and computer simulations cannot replace the tactile appreciation achieved by cadaveric dissection and we should always be grateful to those who have donated their bodies and strive to respect them. We have the privilege to study the human being through a body of a fellow human and have to be humble and carry forward the legacy of nobility and selflessness in our careers.

(Contributed by Dr Puneet Kaur)

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Competency based Undergraduate Curriculum for the Indian Medical Graduate

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HUMAN ANATOMY—LOWER LIMB, ABDOMEN AND PELVIS

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Competency-Based BD Chaurasia's

Human Anatomy

Regional and Applied | Dissection and Clinical

Edition

Volume 1 UPPER LIMB and THORAX Volume 2 LOWER LIMB, ABDOMEN and PELVIS

Volume 3 HEAD and NECK

Volume 4 BRAIN-NEUROANATOMY

Widely acclaimed as a standard textbook in view of its simple language, comprehensive coverage, lucid presentation and neatly-drawn line diagrams, BD Chaurasia's Human Anatomy remains the most preferred textbook in India and abroad. This edition has been thoroughly revised and updated to make it extremely informative and much more student-friendly.

The ninth edition now features diagrams adapted from the first edition, originally prepared by Dr BD Chaurasia, which have been suitably redrawn, modified and colored appropriately. Many text chapters have citations to videos of osteology and soft parts which are accessible through CBSiCentral App. Clinically oriented FAQs and MCQs, and ECE cases have been included to make the volumes absolutely clinical in nature.

Salient features of the four volumes

- Text follows the CBME Guidelines and all topics are described as per the Competency Based Undergraduate Curriculum for the Indian Medical Graduate prescribed by the National Medical Commission.
- Colour codes used consistently in the drawings of various cells, tissues and organs are given at the beginning of
- Impressive line diagrams, originally hand-drawn by Dr BD Chaurasia, adapted from the first edition of BDC Human Anatomy, have been incorporated in this edition to make drawing of illustrations easier for the students.
- Videos of osteology and soft parts, accessible from CBSiCentral App through scratch code, have been numbered and cited in the respective chapters in all the four volumes. The App also includes answers to FAQs.
- Latest updates on various topics have been provided from standard international publications.
- Clinical orientation has been enthused by structuring many FAQs and MCQs in 'clinical mode'. Early Clinical Exposure (ECE) has been provided in the form of signs, symptoms, investigations and treatment of a particular
- Important features like viva voce questions, molecular regulation, clinicoanatomical problems, ossification, dissection (steps) are continued from the previous editions.

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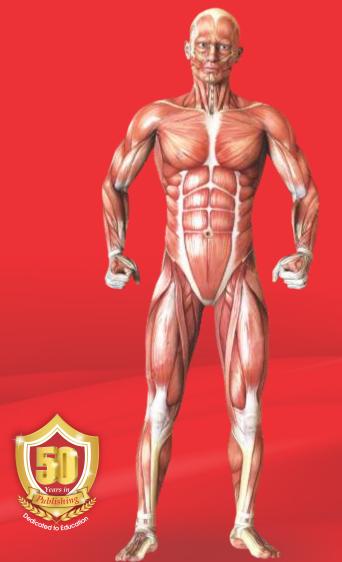


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He had a large number of research papers to his credit.



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Head and Neck

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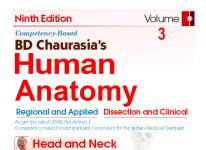
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ISBN: 978-93-5466-477-9

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Ninth Edition: 2023

Reprint: 1980, 1981, 1982, 1983, 1984, 1985, 1986, 1987, 1988

Second Edition: 1989

Reprint: 1990, 1991, 1992, 1993, 1994

Third Edition: 1995

First Edition: 1979

Reprint: 1996, 1997, 1998, 1999, 2000, 2001, 2002, 2003, 2004

Fourth Edition: 2004

Reprint: 2005, 2006, 2007, 2008, 2009

Fifth Edition: 2010 Reprint: 2011, 2012 Sixth Edition: 2013 Reprint: 2014, 2015 Seventh Edition: 2016 Reprint: 2017, 2018, 2019 Eighth Edition: 2020 Reprint: 2021, 2022

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Published by Satish Kumar Jain and produced by Varun Jain for

CBS Publishers & Distributors Pvt Ltd

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to

my teacher Shrí Uma Shankar Nagayach

— BD Chaurasia





UPPER LIMB and **THORAX**

LOWER LIMB, ABDOMEN and PELVIS

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HEAD and **NECK**

BRAIN-NEUROANATOMY





This human anatomy is not systemic but regional Oh yes, it is theoretical as well as practical Besides the gross features, it is chiefly clinical Clinical too is very much diagrammatical.

> Lots of tables for the muscles are provided Even methods for testing are incorporated Improved colour illustrations are added So that right half of brain gets stimulated

Tables for muscles acting on joints are given Tables for branches of nerves and arteries are given Hope these volumes turn highly useful Editors' hardwork under Almighty's guidance prove fruitful

Preface to the Ninth Edition

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This edition features a number of significant modifications which we have made in the light of the wide-ranging suggestions that we received in the recent months from students, teachers and also the well-wishers of this epic textbook. As the information explodes and knowledge multiplies, appropriate improvements, additions and changes are also required to be made in the contemporary literature. Latest research information sourced from the standard international publications has been selectively incorporated in these volumes.

Numerous unique line diagrams, originally hand-drawn by late Dr BD Chaurasia and used in the first edition of the book, after thoughtful moderation, have now been incorporated in the ninth edition. Our criteria for the selection and manipulation of these drawings were clearly based on the simplicity and lucidity of the anatomic description. These simply structured illustrations can be easily reproduced by the students in multitudes of tests and examinations, including university examinations.

Diagrams form the foundation of anatomy: The drawings create imprints on the brain. Figures, artwork and the dissection are recorded in the right half of the cerebrum while the text is learnt by using left half of cerebrum. Thus, learning by drawing diagrams and steps of dissection help in using both the halves of cerebrum, which is an ideal condition. This textbook lays stress on understanding anatomic structures and details through clear, neat and crisp diagrams.

Earlier, videos of the dissection of all regions had been given free access to the readers on CBSiCentral App. These videos are now uploaded on the App after reorganization of the sequences, numeration and providing appropriate citations in the text. Readers can register on the App and access the enumerated videos through the scratch code given on the inside front cover of each volume. These videos adequately compensate the scarcity of the cadavers in medical institutions for conducting dissection.

The videos of the dissection give three-dimensional image descriptions of tissues and organs which get effectively registered in brain for a longer time.

Processes and steps of dissection given in blue boxes with dissection photographs have been retained as many students and teachers appreciate the same. However, no addition in dissection photographs has been made as a separate CBSPD publication *Manual of Human Anatomy Dissection* (ISBN: 978-93-89688-00-9) with numerous dissection photographs is available to the readers who aspire to learn and enjoy the dissection in a meticulous manner.

We have incorporated all the competencies prescribed by National Medical Commission under the Competency Based Curriculum for the Indian Medical Graduate for spirited implementation of Competency Based Medical Education Guidelines.

Since National Medical Commission has laid stress on teaching and learning clinical aspects from the very beginning of the MBBS study period, the questions asked are mostly clinical. Clinical aspects have been explicitly given in the text such that the students are able to learn, recapitulate and answer the clinically-oriented questions in their examinations.

As NMC curriculum also lays emphasis on Early Clinical Exposure, crisply written and well-presented ECE Cases have been given at the end of every section, which make the book clinical-savvy. These case studies will help the budding doctors in imbibing the salient clinical features, getting appropriate investigations done, and treating the patients satisfactorily once they are in clinical practice.

All the illustrations in the four volumes of this book have been prepared on a common colour scheme applicable to cells, tissues and organs. Colour codes employed in the preparation of the human anatomy illustrations are given in the beginning of each section. This characteristic feature will help the students in identifying the anatomic components clearly and draw appropriately coloured diagram in a schematic manner.

Extensive research by numerous scientists has decoded the molecular control of development of organ tissues of the body. Basics of this molecular control are given briefly in these volumes.

We have continued with the practice of giving one separate wall chart in each volume for easy comprehension of the topics.

Sincere attempt has been made to present all facets of theory and practical anatomy to make these volumes truly holistic. In addition to the descriptive text, the following rich features lend a high pedestal to the book in the context of the international literature.

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Pragati Sheel Mittal Mrudula Chandrupatla

Preface to the First Edition (excerpts)

The necessity of having a simple, systematized and complete book on anatomy has long been felt. The urgency for such a book has become all the more acute due to the shorter time now available for teaching anatomy, and also to the falling standards of English language in the majority of our students in India. The national symposium on 'Anatomy in Medical Education' held at Delhi in 1978 was a call to change the existing system of teaching the unnecessary minute details to the undergraduate students.

This attempt has been made with an object to meet the requirements of a common medical student. The text has been arranged in small classified parts to make it easier for the students to remember and recall it at will. It is adequately illustrated with simple line diagrams which can be reproduced without any difficulty, and which also help in understanding and memorizing the anatomical facts that appear to defy memory of a common student. The monotony of describing the individual muscles separately, one after the other, has been minimised by writing them out in tabular form, which makes the subject interesting for a lasting memory. The relevant radiological and surface anatomy have been treated in separate chapters. A sincere attempt has been made to deal, wherever required, the clinical applications of the subject. The entire approach is such as to attract and inspire the students for a deeper dive in the subject of anatomy.

The book has been intentionally split in three parts for convenience of handling. This also makes a provision for those who cannot afford to have the whole book at a time.

It is quite possible that there are errors of omission and commission in this mostly single-handed attempt. I would be grateful to the readers for their suggestions to improve the book from all angles.

I am very grateful to my teachers and the authors of numerous publications, whose knowledge has been freely utilised in the preparation of this book. I am equally grateful to my professor and colleagues for their encouragement and valuable help. My special thanks are due to my students who made me feel their difficulties, which was a great incentive for writing this book. I have derived maximum inspiration from Prof. Inderbir Singh (Rohtak), and learned the decency of work from Shri SC Gupta (Jiwaji University, Gwalior).

I am deeply indebted to Shri KM Singhal (National Book House, Gwalior) and Mr SK Jain (CBS Publishers & Distributors, Delhi), who have taken unusual pains to get the book printed in its present form. For giving it the desired get-up, Mr VK Jain and Raj Kamal Electric Press are gratefully acknowledged. The cover page was designed by Mr Vasant Paranjpe, the artist and photographer of our college; my sincere thanks are due to him. I acknowledge with affection the domestic assistance of Munne Miyan and the untiring company of my Rani, particularly during the odd hours of this work.

BD Chaurasia

Acknowledgements

The editors are thankful to Dr SN Kazi (Pune) for providing maximum updates from Gray's Anatomy, 42nd Edition.

Dr Vikas Verma (Lucknow) revised the chapters on Joints and Nerves of Limbs and gave very useful inputs. Dr Tripta Bhagat (Ghaziabad) edited clinical anatomy portions of the volumes.

We have the blessings and good wishes of Prof NA Faruqi (Aligarh); Dr DC Naik (Rewa); Dr SD Joshi and Dr SS Joshi (Indore); Dr (Brig) Rakesh Gupta (Greater Noida); Dr DR Singh (Lucknow); Dr M Kaul; Dr C Anand and Dr I Bahl (Delhi); Dr Mohsin Azmi (Kanpur); Dr Medha Joshi (Ghaziabad); Dr Surbhi Gupta (Delhi); and Dr Nitin Nagarkar (Raipur).

We are thankful to Dr Surjit Ghatak (Jodhpur); Dr Vinay Sharma (Muzzafarnagar); Dr Deepu Singh Kataria and Dr Anup Singh Gurjar (Pali); Dr Jagmohan Sharma; Dr Deepak Sharma; Dr Rajesh Arora and Dr Pooja Garg (Jaipur); Dr Sumit Gupta (Kota); Dr Gopal Sharma and Dr Manoj Sharma (Jhalawar); Dr Rekha Parashar (Chittorgarh); Dr Santosh Kumar (Dholpur); Dr BK Aghera (Sirohi), Dr Isha Srivastav; Dr Aprajita Raizada; Dr Sajan Skaria; Dr Anjali Jain and Dr Kalpana Sharma (Udaipur); for giving feedback for various sections of the volumes.

We are grateful to Dr Hitant Vohra and Dr Anu Sharma (Ludhiana); Dr Anupma Mahajan (Amritsar); Dr Vanita Gupta (Jammu), for editing chapters to enhance the value of the volumes.

We are grateful to Dr Ravikant (Amritsar); Dr Sangeeta and Dr Nusrat Jabeen (Jammu); Dr Kalyan Singh and Dr Rajan Singla (Patiala); Dr Anjali Jain and Dr Aprajita Sikka (Ludhiana); Dr Bashir (Srinagar); Dr Seema and Dr Ritu (Rajouri); Dr Mubeen (Kathua); Dr RK Srivastava (Kanpur); Dr Punita Manik (Lucknow); Dr Binod Kumar; Dr Sunita Nayak and Dr Shambhu Prasad (Patna); Dr AK Dubey (Ranchi); Dr Satyam Khare; Dr Shilpi Jain and Dr Alok Tripathi (Meerut), for promoting the volumes.

We have been getting constant encouragement and support from Dr Ranjana Verma, Dr Muthukrishnan P, Dr Yogesh Yadav, Dr Pullimi Vineel and Dr Anupma Gupta (Greater Noida); Dr Nisha Kaul (Ghaziabad); Dr Vinay Singhal (Saharanpur); Dr RK Ashoka (Mathura); Dr Vineet Guhia (Khandwa); Dr Manisha Sinha (Raipur); Dr Jahan Shirin (Kanpur); Dr Damyanti (Manipur); Dr Daisy Sahni (Chandigarh); and Dr MK Anand (Bhuj).

Our regards and affection to Dr Rewa Choudhry, Dr Shilpa Paul, Dr Smita Kakar, Dr Anita Tuli, Dr Gayatri Rath, Dr Shashi Raheja, Dr Shyama Rajdan, Dr Mangala Kohli, Dr A Sheriff, Dr SB Ray, Dr Vandana Mehta, Dr Sabita Mishra, Dr Renu Chauhan, Dr Jyoti Arora, Dr Sneh Aggarwal and Dr TS Roy (Delhi), for going through the volumes.

We would like to thank Dr Pritha Bhuiyan (Mumbai); Dr Brijendra Singh (Rishikesh); Col. Dr Sushil Kumar (Pune); Dr AK Srivastava (Lucknow); Dr MK Pant (Dehradun); Dr Shakuntala Pai (Manipal); Dr Simmi Mehra (Rajkot); Dr Fatima M De Souza (Goa); Dr Mukesh Mittal (Shivpuri); Dr Priti Sinha (Saharanpur); Dr Rakesh K Verma (Lucknow); Dr Rashmi Malhotra (Rishikesh); Dr Sandiya Kurup (Kalanchery); Dr Simmi Soni (Aziznagar); Dr Sunita Gupta (Ahmedabad) and many-many other teachers all over the globe, for giving us good wishes.

Videos of bones and soft parts of human body, prepared at Kathmandu University School of Medical Sciences, have now been added with the respective chapters and are available at our mobile App CBSiCentral. I (chief editor) am grateful to Dr R Koju, CEO of KUSMS and Dhulikhel Hospital, for his generosity.

The moral support of my (chief editor) family members, Late Dr DP Garg, Dr Suvira Gupta, Dr JP Gupta, Mr Manoj, Ms Rekha, Mr Sanjay, Ms Meenakshi, Dr Manish, Dr Shilpa Garg, Dr Naveen Garg, Dr Manoj, Dr Nalini Shukla, Dr Vikas Verma and Dr Swati Gupta, is appreciated.

The magnanimity shown by Mr SK Jain (Chairman) and Mr Varun Jain (Director), CBS Publishers & Distributors, has been always forthcoming. The unquestionable support of Mr YN Arjuna (Senior Vice President—Publishing, Editorial and Publicity) and his entire team comprising Ms Ritu Chawla (GM—Production), Mr Sanjay Chauhan, Mr Neeraj Prasad and Mr Rohan Prasad (Graphic Artists); Mr Surendra Jha and Mr Prasenjit Paul (Copy Editors); Ms Jyoti Kaur and Mr Tarun Rajput (DTP Operators) has made an excellent contribution to bring out this edition. We are really obliged to them and pray for their prosperity.

Chief Editor

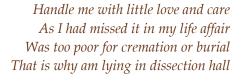
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Editors

Pragati Sheel Mittal Mrudula Chandrupatla

Thus spoke the cadaver



You dissect me, cut me, section me But your learning anatomy should be precise Worry not, you would not be taken to court As I am happy to be with the bright lot

Couldn't dream of a fridge for cold water Now my body parts are kept in refrigerator Young students sit around me with friends A few dissect, rest talk, about food, family and movies How I enjoy the dissection periods Don't you? Unless you are interrogated by a teacher

> When my parts are buried post-dissection Bones are taken out for the skeleton Skeleton is the crown glory of the museum Now I am being looked up by great enthusiasm

If not as skeletons as loose bones I am in their bags and in their hostel rooms At times, I am on their beds as well Oh, what a promotion to heaven from hell

I won't leave you, even if you pass anatomy Would follow you in forensic medicine and pathology Would be with you even in clinical teaching Medicine line is one where dead teach the living

One humble request I'd make
Be sympathetic to persons with disease
Don't panic, you'll have enough money
And I bet, you'd be singularly happy
—Krishna Garg



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Ethical Aspects of Cadaveric Dissection



The cadaver, the dead body, that we dissect, plays an important role in the teaching of anatomy to medical students. The cadaver and the bones become an important part of our life as medical students as some academics have even referred to the cadaver as the 'first teacher' in the medical school.

We must pay due respect to the cadavers and bones kept in the dissection hall or museum. In some medical schools it is mandatory to take an 'oath' before beginning the cadaveric dissection which aims to uphold the dignity of the mortal remains of the departed soul while other medical schools help the student to undertake dissection in a proper manner and empathise with the families of the donor. During the course of dissection the student is constantly reminded of the sanctity of the body he/she is studying so that the noble donation of someone's body is used only as a means of gaining scientific knowledge/progress. Each and every dissected part afterwards is disposed or cremated with full dignity.

Honour of the donor and his/her family is the prime responsibility of the health professional. `The dead teach the living', and the living pledge to use this knowledge for the upliftment of humankind.

Three-dimensional models and computer simulations cannot replace the tactile appreciation achieved by cadaveric dissection and we should always be grateful to those who have donated their bodies and strive to respect them. We have the privilege to study the human being through a body of a fellow human and have to be humble and carry forward the legacy of nobility and selflessness in our careers.

(Contributed by Dr Puneet Kaur)

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Competency-Based BD Chaurasia's

Human Anatomy

Regional and Applied | Dissection and Clinical

Edition

Volume 1 UPPER LIMB and THORAX

Volume 2 LOWER LIMB, ABDOMEN and PELVIS

Volume 3 HEAD and NECK

Volume 4 BRAIN-NEUROANATOMY

idely acclaimed as a standard textbook in view of its simple language, comprehensive coverage, lucid presentation and neatly-drawn line diagrams, BD Chaurasia's Human Anatomy remains the most preferred textbook in India and abroad. This edition has been thoroughly revised and updated to make it extremely informative and much more student-friendly.

The ninth edition now features diagrams adapted from the first edition, originally prepared by Dr BD Chaurasia, which have been suitably redrawn, modified and colored appropriately. Many text chapters have citations to videos of osteology and soft parts which are accessible through CBSiCentral App. Clinically oriented FAQs and MCQs, and ECE cases have been included to make the volumes absolutely clinical in nature.

Salient features of the four volumes

- Text follows the CBME Guidelines and all topics are described as per the Competency Based Undergraduate Curriculum for the Indian Medical Graduate prescribed by the National Medical Commission.
- Colour codes used consistently in the drawings of various cells, tissues and organs are given at the beginning of
- Impressive line diagrams, originally hand-drawn by Dr BD Chaurasia, adapted from the first edition of BDC Human Anatomy, have been incorporated in this edition to make drawing of illustrations easier for the students.
- Videos of osteology and soft parts, accessible from CBSiCentral App through scratch code, have been numbered and cited in the respective chapters in all the four volumes. The App also includes answers to FAQs.
- Latest updates on various topics have been provided from standard international publications.
- Clinical orientation has been enthused by structuring many FAQs and MCQs in 'clinical mode'. Early Clinical Exposure (ECE) has been provided in the form of signs, symptoms, investigations and treatment of a particular
- Important features like viva voce questions, molecular regulation, clinicoanatomical problems, ossification, dissection (steps) are continued from the previous editions.

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- Videos on Osteology and Soft Parts
- Frequently Asked Questions & Answers



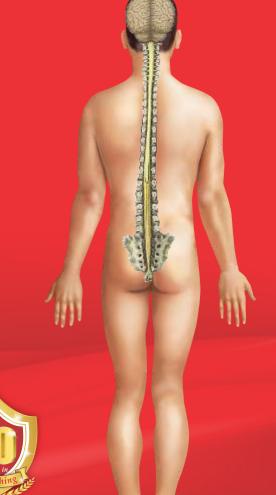


Many easily reproducible diagrams, originally hand-drawn by Dr BD Chaurasia, now modified and coloured suitably, are given at the relevant locations in the text



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He had a large number of research papers to his credit.



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Brain-Neuroanatomy

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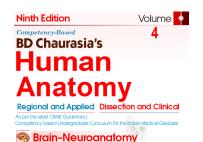
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ISBN: 978-93-5466-477-9

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Ninth Edition: 2023 First Edition: 1979

Reprint: 1980, 1981, 1982, 1983, 1984, 1985, 1986, 1987, 1988

Second Edition: 1989

Reprint: 1990, 1991, 1992, 1993, 1994

Third Edition: 1995

Reprint: 1996, 1997, 1998, 1999, 2000, 2001, 2002, 2003, 2004

Fourth Edition: 2004

Reprint: 2005, 2006, 2007, 2008, 2009

Fifth Edition: 2010 Reprint: 2011, 2012 Sixth Edition: 2013 Reprint: 2014, 2015 Seventh Edition: 2016 Reprint: 2017, 2018, 2019 Eighth Edition: 2020 Reprint: 2021, 2022

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Published by Satish Kumar Jain and produced by Varun Jain for

CBS Publishers & Distributors Pvt Ltd

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to

my teacher Shrí Uma Shankar Nagayach

— BD Chaurasia





UPPER LIMB and **THORAX**

LOWER LIMB, ABDOMEN and PELVIS

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Jolum_e

HEAD and **NECK**

BRAIN-NEUROANATOMY





This human anatomy is not systemic but regional Oh yes, it is theoretical as well as practical Besides the gross features, it is chiefly clinical Clinical too is very much diagrammatical.

> Lots of tables for the muscles are provided Even methods for testing are incorporated Improved colour illustrations are added So that right half of brain gets stimulated

Tables for muscles acting on joints are given Tables for branches of nerves and arteries are given Hope these volumes turn highly useful Editors' hardwork under Almighty's guidance prove fruitful

Preface to the Ninth Edition

This edition features a number of significant modifications which we have made in the light of the wide-ranging suggestions that we received in the recent months from students, teachers and also the well-wishers of this epic textbook. As the information explodes and knowledge multiplies, appropriate improvements, additions and changes are also required to be made in the contemporary literature. Latest research information sourced from the standard international publications has been selectively incorporated in these volumes.

Numerous unique line diagrams, originally hand-drawn by late Dr BD Chaurasia and used in the first edition of the book, after thoughtful moderation, have now been incorporated in the ninth edition. Our criteria for the selection and manipulation of these drawings were clearly based on the simplicity and lucidity of the anatomic description. These simply structured illustrations can be easily reproduced by the students in multitudes of tests and examinations, including university examinations.

Diagrams form the foundation of anatomy: The drawings create imprints on the brain. Figures, artwork and the dissection are recorded in the right half of the cerebrum while the text is learnt by using left half of cerebrum. Thus, learning by drawing diagrams and steps of dissection help in using both the halves of cerebrum, which is an ideal condition. This textbook lays stress on understanding anatomic structures and details through clear, neat and crisp diagrams.

Earlier, videos of the dissection of all regions had been given free access to the readers on CBSiCentral App. These videos are now uploaded on the App after reorganization of the sequences, numeration and providing appropriate citations in the text. Readers can register on the App and access the enumerated videos through the scratch code given on the inside front cover of each volume. These videos adequately compensate the scarcity of the cadavers in medical institutions for conducting dissection.

The videos of the dissection give three-dimensional image descriptions of tissues and organs which get effectively registered in brain for a longer time.

Processes and steps of dissection given in blue boxes with dissection photographs have been retained as many students and teachers appreciate the same. However, no addition in dissection photographs has been made as a separate CBSPD publication *Manual of Human Anatomy Dissection* (ISBN: 978-93-89688-00-9) with numerous dissection photographs is available to the readers who aspire to learn and enjoy the dissection in a meticulous manner.

We have incorporated all the competencies prescribed by National Medical Commission under the Competency Based Curriculum for the Indian Medical Graduate for spirited implementation of Competency Based Medical Education Guidelines.

Since National Medical Commission has laid stress on teaching and learning clinical aspects from the very beginning of the MBBS study period, the questions asked are mostly clinical. Clinical aspects have been explicitly given in the text such that the students are able to learn, recapitulate and answer the clinically-oriented questions in their examinations.

As NMC curriculum also lays emphasis on Early Clinical Exposure, crisply written and well-presented ECE Cases have been given at the end of every section, which make the book clinical-savvy. These case studies will help the budding doctors in imbibing the salient clinical features, getting appropriate investigations done, and treating the patients satisfactorily once they are in clinical practice.

All the illustrations in the four volumes of this book have been prepared on a common colour scheme applicable to cells, tissues and organs. Colour codes employed in the preparation of the human anatomy illustrations are given in the beginning of each section. This characteristic feature will help the students in identifying the anatomic components clearly and draw appropriately coloured diagram in a schematic manner.

Extensive research by numerous scientists has decoded the molecular control of development of organ tissues of the body. Basics of this molecular control are given briefly in these volumes.

We have continued with the practice of giving one separate wall chart in each volume for easy comprehension of the topics.

Sincere attempt has been made to present all facets of theory and practical anatomy to make these volumes truly holistic. In addition to the descriptive text, the following rich features lend a high pedestal to the book in the context of the international literature.

	Volume 1	Volume 2	Volume 3	Volume 4	Total
Figures	414	653	462	210	1739
Flowcharts	7	4	12	9	32
Dissection Boxes	37	36	12	5	90
X-rays/MRI and CT Scans	5	5	4	16	30
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Clinical Anatomy Boxes	52	101	77	41	271
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Facts to Remember	93	229	114	67	503
FAQs	99	132	104	52	387
MCQs	149	232	135	72	588
Viva Voce Questions	259	508	227	125	1119
Clinicoanatomical Problems	19	35	20	14	88
Videos	47	50	32	9	138

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Preface to the First Edition (excerpts)

The necessity of having a simple, systematized and complete book on anatomy has long been felt. The urgency for such a book has become all the more acute due to the shorter time now available for teaching anatomy, and also to the falling standards of English language in the majority of our students in India. The national symposium on 'Anatomy in Medical Education' held at Delhi in 1978 was a call to change the existing system of teaching the unnecessary minute details to the undergraduate students.

This attempt has been made with an object to meet the requirements of a common medical student. The text has been arranged in small classified parts to make it easier for the students to remember and recall it at will. It is adequately illustrated with simple line diagrams which can be reproduced without any difficulty, and which also help in understanding and memorizing the anatomical facts that appear to defy memory of a common student. The monotony of describing the individual muscles separately, one after the other, has been minimised by writing them out in tabular form, which makes the subject interesting for a lasting memory. The relevant radiological and surface anatomy have been treated in separate chapters. A sincere attempt has been made to deal, wherever required, the clinical applications of the subject. The entire approach is such as to attract and inspire the students for a deeper dive in the subject of anatomy.

The book has been intentionally split in three parts for convenience of handling. This also makes a provision for those who cannot afford to have the whole book at a time.

It is quite possible that there are errors of omission and commission in this mostly single-handed attempt. I would be grateful to the readers for their suggestions to improve the book from all angles.

I am very grateful to my teachers and the authors of numerous publications, whose knowledge has been freely utilised in the preparation of this book. I am equally grateful to my professor and colleagues for their encouragement and valuable help. My special thanks are due to my students who made me feel their difficulties, which was a great incentive for writing this book. I have derived maximum inspiration from Prof. Inderbir Singh (Rohtak), and learned the decency of work from Shri SC Gupta (Jiwaji University, Gwalior).

I am deeply indebted to Shri KM Singhal (National Book House, Gwalior) and Mr SK Jain (CBS Publishers & Distributors, Delhi), who have taken unusual pains to get the book printed in its present form. For giving it the desired get-up, Mr VK Jain and Raj Kamal Electric Press are gratefully acknowledged. The cover page was designed by Mr Vasant Paranjpe, the artist and photographer of our college; my sincere thanks are due to him. I acknowledge with affection the domestic assistance of Munne Miyan and the untiring company of my Rani, particularly during the odd hours of this work.

BD Chaurasia

Acknowledgements

The editors are thankful to Dr SN Kazi (Pune) for providing maximum updates from Gray's Anatomy, 42nd Edition.

Dr Vikas Verma (Lucknow) revised the chapters on Joints and Nerves of Limbs and gave very useful inputs. Dr Tripta Bhagat (Ghaziabad) edited clinical anatomy portions of the volumes.

We have the blessings and good wishes of Prof NA Faruqi (Aligarh); Dr DC Naik (Rewa); Dr SD Joshi and Dr SS Joshi (Indore); Dr (Brig) Rakesh Gupta (Greater Noida); Dr DR Singh (Lucknow); Dr M Kaul; Dr C Anand and Dr I Bahl (Delhi); Dr Mohsin Azmi (Kanpur); Dr Medha Joshi (Ghaziabad); Dr Surbhi Gupta (Delhi); and Dr Nitin Nagarkar (Raipur).

We are thankful to Dr Surjit Ghatak (Jodhpur); Dr Vinay Sharma (Muzzafarnagar); Dr Deepu Singh Kataria and Dr Anup Singh Gurjar (Pali); Dr Jagmohan Sharma; Dr Deepak Sharma; Dr Rajesh Arora and Dr Pooja Garg (Jaipur); Dr Sumit Gupta (Kota); Dr Gopal Sharma and Dr Manoj Sharma (Jhalawar); Dr Rekha Parashar (Chittorgarh); Dr Santosh Kumar (Dholpur); Dr BK Aghera (Sirohi), Dr Isha Srivastav; Dr Aprajita Raizada; Dr Sajan Skaria; Dr Anjali Jain and Dr Kalpana Sharma (Udaipur); for giving feedback for various sections of the volumes.

We are grateful to Dr Hitant Vohra and Dr Anu Sharma (Ludhiana); Dr Anupma Mahajan (Amritsar); Dr Vanita Gupta (Jammu), for editing chapters to enhance the value of the volumes.

We are grateful to Dr Ravikant (Amritsar); Dr Sangeeta and Dr Nusrat Jabeen (Jammu); Dr Kalyan Singh and Dr Rajan Singla (Patiala); Dr Anjali Jain and Dr Aprajita Sikka (Ludhiana); Dr Bashir (Srinagar); Dr Seema and Dr Ritu (Rajouri); Dr Mubeen (Kathua); Dr RK Srivastava (Kanpur); Dr Punita Manik (Lucknow); Dr Binod Kumar; Dr Sunita Nayak and Dr Shambhu Prasad (Patna); Dr AK Dubey (Ranchi); Dr Satyam Khare; Dr Shilpi Jain and Dr Alok Tripathi (Meerut), for promoting the volumes.

We have been getting constant encouragement and support from Dr Ranjana Verma, Dr Muthukrishnan P, Dr Yogesh Yadav, Dr Pullimi Vineel and Dr Anupma Gupta (Greater Noida); Dr Nisha Kaul (Ghaziabad); Dr Vinay Singhal (Saharanpur); Dr RK Ashoka (Mathura); Dr Vineet Guhia (Khandwa); Dr Manisha Sinha (Raipur); Dr Jahan Shirin (Kanpur); Dr Damyanti (Manipur); Dr Daisy Sahni (Chandigarh); and Dr MK Anand (Bhuj).

Our regards and affection to Dr Rewa Choudhry, Dr Shilpa Paul, Dr Smita Kakar, Dr Anita Tuli, Dr Gayatri Rath, Dr Shashi Raheja, Dr Shyama Rajdan, Dr Mangala Kohli, Dr A Sheriff, Dr SB Ray, Dr Vandana Mehta, Dr Sabita Mishra, Dr Renu Chauhan, Dr Jyoti Arora, Dr Sneh Aggarwal and Dr TS Roy (Delhi), for going through the volumes.

We would like to thank Dr Pritha Bhuiyan (Mumbai); Dr Brijendra Singh (Rishikesh); Col. Dr Sushil Kumar (Pune); Dr AK Srivastava (Lucknow); Dr MK Pant (Dehradun); Dr Shakuntala Pai (Manipal); Dr Simmi Mehra (Rajkot); Dr Fatima M De Souza (Goa); Dr Mukesh Mittal (Shivpuri); Dr Priti Sinha (Saharanpur); Dr Rakesh K Verma (Lucknow); Dr Rashmi Malhotra (Rishikesh); Dr Sandiya Kurup (Kalanchery); Dr Simmi Soni (Aziznagar); Dr Sunita Gupta (Ahmedabad) and many-many other teachers all over the globe, for giving us good wishes.

Videos of bones and soft parts of human body, prepared at Kathmandu University School of Medical Sciences, have now been added with the respective chapters and are available at our mobile App CBSiCentral. I (chief editor) am grateful to Dr R Koju, CEO of KUSMS and Dhulikhel Hospital, for his generosity.

The moral support of my (chief editor) family members, Late Dr DP Garg, Dr Suvira Gupta, Dr JP Gupta, Mr Manoj, Ms Rekha, Mr Sanjay, Ms Meenakshi, Dr Manish, Dr Shilpa Garg, Dr Naveen Garg, Dr Manoj, Dr Nalini Shukla, Dr Vikas Verma and Dr Swati Gupta, is appreciated.

The magnanimity shown by Mr SK Jain (Chairman) and Mr Varun Jain (Director), CBS Publishers & Distributors, has been always forthcoming. The unquestionable support of Mr YN Arjuna (Senior Vice President—Publishing, Editorial and Publicity) and his entire team comprising Ms Ritu Chawla (GM—Production), Mr Sanjay Chauhan, Mr Neeraj Prasad and Mr Rohan Prasad (Graphic Artists); Mr Surendra Jha and Mr Prasenjit Paul (Copy Editors); Ms Jyoti Kaur and Mr Tarun Rajput (DTP Operators) has made an excellent contribution to bring out this edition. We are really obliged to them and pray for their prosperity.

Chief Editor

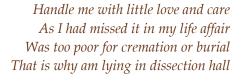
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Pragati Sheel Mittal Mrudula Chandrupatla

Thus spoke the cadaver



You dissect me, cut me, section me But your learning anatomy should be precise Worry not, you would not be taken to court As I am happy to be with the bright lot

Couldn't dream of a fridge for cold water Now my body parts are kept in refrigerator Young students sit around me with friends A few dissect, rest talk, about food, family and movies How I enjoy the dissection periods Don't you? Unless you are interrogated by a teacher

> When my parts are buried post-dissection Bones are taken out for the skeleton Skeleton is the crown glory of the museum Now I am being looked up by great enthusiasm

If not as skeletons as loose bones I am in their bags and in their hostel rooms At times, I am on their beds as well Oh, what a promotion to heaven from hell

I won't leave you, even if you pass anatomy Would follow you in forensic medicine and pathology Would be with you even in clinical teaching Medicine line is one where dead teach the living

One humble request I'd make
Be sympathetic to persons with disease
Don't panic, you'll have enough money
And I bet, you'd be singularly happy
—Krishna Garg



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Ethical Aspects of Cadaveric Dissection



The cadaver, the dead body, that we dissect, plays an important role in the teaching of anatomy to medical students. The cadaver and the bones become an important part of our life as medical students as some academics have even referred to the cadaver as the 'first teacher' in the medical school.

We must pay due respect to the cadavers and bones kept in the dissection hall or museum. In some medical schools it is mandatory to take an 'oath' before beginning the cadaveric dissection which aims to uphold the dignity of the mortal remains of the departed soul while other medical schools help the student to undertake dissection in a proper manner and empathise with the families of the donor. During the course of dissection the student is constantly reminded of the sanctity of the body he/she is studying so that the noble donation of someone's body is used only as a means of gaining scientific knowledge/progress. Each and every dissected part afterwards is disposed or cremated with full dignity.

Honour of the donor and his/her family is the prime responsibility of the health professional. `The dead teach the living', and the living pledge to use this knowledge for the upliftment of humankind.

Three-dimensional models and computer simulations cannot replace the tactile appreciation achieved by cadaveric dissection and we should always be grateful to those who have donated their bodies and strive to respect them. We have the privilege to study the human being through a body of a fellow human and have to be humble and carry forward the legacy of nobility and selflessness in our careers.

(Contributed by Dr Puneet Kaur)

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Glossary •

L: Latin word, Gr: Greek word

Allocortex L. ancient bark Old cortex, i.e. paleocortex and archicortex

White matter on the ventricular surface of hippo-Alveus L. trough

campus

Amygdala L. almond Nucleus in roof of inferior horn of lateral ventricle

Arachnoid Gr. like spider's web Middle meningeal layer

Archicerebellum Gr. old cerebellum Phylogenetic cerebellum area in caudal region

Astereognosis Gr. loss of knowledge Inability to recognise solid objects

Astrocyte Gr. star cells A type of neuroglial cell Loss of muscular coordination Ataxia Gr. negative order

Athetosis Gr. without place Bizzare movements Autonomic Gr. self law Autonomic NS Axolemma Gr. axis back Covering of axon

Basis pedunculi Ventral part of midbrain Brachium Fibres connecting 2 parts L. arm

Brainstem Midbrain + pons + medulla oblongata

Bulb Medulla oblongata

Calamus scriptorum L. reed pen Area in caudal part of IV ventricle

For example, calcarine sulcus, calcar avis Calcar L. spur Cauda equina L. horse's tail Lower lumbar and sacral nerve roots

Caudate nucleus L. comma-shaped Part of corpus striatum

Cerebellum L. little brain Part of brain

Cerebrum L. brain Cerebral cortex + diencephalon Chorea L. dance Involuntary movement of limbs L. ash coloured For example, tubercinerium Cinerium Name of association fibres Cingulum L. girdle

Cistern L. reservoir

Claustrum L. barrier Grey matter between insula and lentiform nucleus

Colliculus For example, dorsal part of midbrain and facial L. small swelling

colliculus

Type of white fibres joining identical parts of 2 cerebral Commissure L. joined together

hemispheres

Corona L. crown like For example, corona radiata Corpus callosum L. body hard Main commissural fibre bundle

Corpus striatum L. body striped Grey matter at base of cerebral hemisphere

Cortex L. bark Outer layer (i.e. grey matter) in cerebellum and cerebrum For example, crus cerebri or basis pedunculi Crus L. leg.

For example, nucleus and fasciculus cuneatus and Cuneus L. wedge

cuneus gyrus in cerebral cortex

Decussation L. like X Crossing over

Dentate L. toothed For example, dentate gyrus of temporal lobe, dentate

nucleus of cerebellum

Diencephalon Thalamus + hypothalamus + epithalamus + Gr. through brain

subthalamus + metathalamus

Dura mater L. hard mother Outer covering of brain One of the nuclei of cerebellum **Emboliformis** Gr. plug like

Endoneurium Gr. within nerve Connective tissue sheath around each nerve fibre Entorhinal Gr. within nose Anterior part of parahippocampal gyrus adjacent to

uncus

Ependyma The lining epithelium of ventricles of brain and the Gr. upon garment

central canal of spinal cord

Upon inner chamber **Epithalamus** Gr. upon inner chamber

L. external + receiver Receiver for external environment Exteroceptor Falx L. sickle For example, falx cerebri, falx cerebelli

Fasciculus L. bundle Bundle of white fibres

Fimbria L. fringe For example, bundle of fibres along medial edge of

hippocampus

Forceps L. pair of tongs For example, forceps minor, forceps major

Fornix L. arch Part of limbic system

For example, dorsal root ganglia, basal ganglia Ganglion Gr. swelling For example, facial nerve, corpus callosum Genu L. knee (bend)

Glia Gr. glue Neuroglia

Globus pallidus L. ball +plate For example, medial part of lentiform nucleus L. ball of thread For example, glomeruli of olfactory bulb Glomerulus

L. slender Nucleus and fasciculus gracilis Gracilis Habenula L. rein Swelling in epithalamus

Violent movement of one side of body due to disease Hemiballismus Gr. half jumping

of subthalamic nucleus

Gr. half stroke Paralysis of one side of the body Hemiplegia

Excessive CSF Hydrocephalus Gr. water in head

Indusium L. garment Grey matter on dorsal surface of corpus callosum

L. funnel Stem of neurohypophysis Infundibulum

Part of cortex lying at the depth of lateral sulcus Insula L. island

Regions of cerebral cortex with 6 layers Isocortex Gr. same bark

Medial lemniscus Gr. ribbon Lemniscus Lentiform L. lens-like Lentiform nucleus

L. border, C-shaped Limbic lobe, limbic system Limbus Ventral part of insula Limen L. threshold

Locus ceruleus L. place dark blue For example, in floor of IV ventricle

L. spot For example, macula lutea Macula

L. nipple-shaped mammillary bodies Mammillary body L. middle medulla oblongata Medulla

Mesencephalon Gr. middle brain midbrain

Metathalamus Gr. after + inner chamber Medial and lateral geniculate bodies For example, pons + cerebellum Metencephalon Gr. after + brain Type of neuroglial cells

Microglia Gr. small + glue

Molecular L. mass Tissue with large number of nerve fibres

Myelencephalon Gr. marrow +brain Medulla oblongata

Caudate nucleus and putamen Neostriatum New + striped region Neurite Gr. of nerve Axons and dendrites of the neurons

Neurobiotaxis Gr. nerve + living attraction Nerve cells moving towards sources of stimuli GLOSSARY xxi

Neuroglia Gr. nerve + glue Cellular, non-nervous cells glueing the neurons Neurolemma or Gr. nerve-husk Sheath around the peripheral nerve fibre neurilemma Gr. nerve + felt Nerve cell process between the bodies of neurons Neuropil Nociceptive L. to injure + to take Response to painful stimuli In fourth ventricle Obex L. barrier Oligodendrocyte Gr. few + processes Type of neuroglia Olive L. oval Olivary nuclei Operculum L. lid Various opercula around the lateral sulcus to hide the insula Paleocerebellum Gr. ancient + small cerebellum Old part of cerebellum Gr. ancient + striped area Old part of corpus striatum, i.e. globus pallidus Paleostriatum Paraplegia Gr. beside + stroke Paralysis of lower part of trunk and both lower limbs Perikaryon Gr. around + nut Neuron Pes L. foot Pes hippocampi Pineal Pineal gland L. pine L. palit Interwoven fibres Plexus Visualisation of ventricles and subarachnoid space by Pneumoencephalogram Air + brain + to write replacing of CSF by air L. bridge Part between midbrain and medulla oblongata Proprioceptive L. one's own + receptor Afferents from joints, tendons, etc. Prosencephalon Gr. before + brain Forebrain part Gr. falling **Ptosis** Drooping of upper eyelid L. cushioned seat Posterior projection of thalamus Pulvinar L. shell Lateral part of corpus striatum Putamen Pyriform L. pear + form Olfactory cortex is pear-shaped in lower animals Paralysis of all four limbs Quadriplegia L. four + stroke Raphe Gr. seam Midline structure Reticular L. net Net formation Rhinal Gr. nose Related to nose Rhinencephalon Gr. nose + brain Components of olfactory system Refers to hindbrain vesicle Rhombencephalon Gr. lozenge-shaped + brain L. beak Beak-shaped portion of corpus callosum Rostrum Rubro L. red Red nucleus Cells around neurons of dorsal root ganglion and Satellite L. attendant autonomic ganglia Septum pellucidum L. partition transparent Septum pellucidum of lateral ventricles Somatic Gr. bodily Skeletal muscles (in neurology) Somesthetic Gr. body + perception Sensation of pain, touch and temperature Gr. bandage Posterior thick end of corpus callosum Splenium Striatum L. furrowed Caudate nucleus and putamen Transitional cortex between hippocampus and para-Subiculum L. decreased layer hippocampal gyrus Collection of small neurons at the apex of posterior Substantia gelatinosa Substance + soft

horn of spinal cord

Substantia nigra
Substance + dark
Subthalamus
L. under + inner chamber
Region beneath thalamus

Synapse Gr. to join Site of contact between neurons
Syringomyelia Gr. pipe + marrow Cavities in grey matter around central canal

Tapetum L. carpet Fibres of body of corpus callosum

TectumL. roofRoof of midbrain comprised of 4 colliculiTegmentumL. to coverDorsal portion of pons and midbrain

Telachoroidea L. web + membrane Vascular connective tissue core of choroid plexus

Telencephalon Gr. end + brain Cerebral hemisphere

Telodendria Gr. end + tree Terminal branches of the axon

ThalamusGr. inner chamberPart of diencephalonTomographyGr. cutting + writeSectional radiography

Transducer L. to change Mechanism which changes one form of energy into

another

Trapezoid body Trapezium like Transverse fibres at the junction of dorsal and ventral

parts of pons for auditory pathway

Uncinate L. hood-shaped Uncinate fasciculus

Uncus L. hood Hook-shaped anterior end of parahippocampal gyrus

Uvula L. little grape Part of inferor vermis of cerebellum

Vallecula L. valley Depressed area on the inferior medullary velum

Ventricle L. diminutive of belly Ventricles of brain

Vermis L. worm Middle region of cerebellum Zona incerta — Grey matter in subthalamus