

the Left axillary artery which anastomosed with anterior circumflex artery and also an extra branch from posterior circumflex artery was observed.

Conflicts of interest

The authors have none to declare.

<https://doi.org/10.1016/j.jasi.2018.06.184>

31

Supratrochlear foramen of humerus bone – an incidental finding



Lattupalli Hema

Narayana Medical College, Chinthareddypalem,
Nellore, India

Introduction: The lower end of the humerus has two large fossae, the olecranon fossa and the coronoid fossa, separated by a thin bony plate that rarely bears an opening known as supratrochlear foramen.

Aim and objectives: This is a rare variant and was seen incidentally. So study was taken up to research this rare variant.

Material and methods: During osteology demonstration classes for undergraduate students a rare variant was observed. This made us search the literature and we investigated on this. 120 dry adult humeri of unknown age and sex were taken for the study from the Department of Anatomy, Narayana Medical College, Nellore. The presence and the shapes of the STF were visualized by observational study. The length, transverse diameter of the foramen was also observed and also the septum was made out. The results were tabulated and photographed.

Results: The foramina were more common on the right side than the left side and also the oval shape was more commonly observed.

Conclusion: This foramen can alter the radiological findings during examination and may get misdiagnosed as osteolytic lesion or cystic lesion. Supratrochlear foramen can alter the line of fracture as it is linked with a small medullary canal, which can modify our decision of point of entry of the nail in the medullary nailing procedure. Therefore, its clinical importance cannot be ignored.

Conflicts of interest

The author has none to declare.

<https://doi.org/10.1016/j.jasi.2018.06.185>

32

Accessory slip of coracobrachialis – a case report



S. Banik*, A. Rajkumari, A.J. Devi

Regional Institute of Medical Sciences, Imphal,
Manipur, India

Objective: To explore a case of accessory slip of coracobrachialis observed during routine dissection.

Methods: Routine dissection of right upper limb of a 55 years old male cadaver in Anatomy Department of RIMS, Imphal.

Results: Accessory slip in addition to the main bulk of the coracobrachialis muscle was found to be arising from the tip of the coracoid process of scapula and inserted in the distal part of the lesser tubercle of the humerus in addition to its normal insertion at medial border of the middle of the shaft of humerus. The median

nerve and brachial artery was found to be passing deep to the accessory slip.

Conclusion: The neurovascular bundle passing below the accessory slip may be compressed due to anomalous insertion producing vascular spasm and median nerve palsy. Knowledge of the anatomical variation is important for radiologists.

Conflicts of interest

The authors have none to declare.

<https://doi.org/10.1016/j.jasi.2018.06.186>

33

Undescended cecum with accessory right colic artery – a rare case report



R. Kumar Praveen, Kujur Babita*, Wakode Naina Santosh, Mishra Pravash Ranjan, R. Gaikwad Manisha

All India Institute of Medical Sciences, Bhubaneswar,
India

Introduction: Midgut malrotation and incomplete rotation are common causes of neonatal intestinal obstruction. At end of tenth week of intrauterine life, cecum is placed in subhepatic region temporarily and descends to right lower quadrant by eleventh week. Arrest of cecum in subhepatic region or undescended cecum is a rare congenital anomaly of mid gut. Usually it remains asymptomatic and is diagnosed incidentally. If any pathology occurs in anomalous part, like appendicitis then the diagnosis and treatment will be challenging in all age groups.

Materials and methods: During routine first year under graduate dissection, we found a rare developmental anomaly of undescended cecum in a male cadaver aged 60 years while demonstrating infracolic compartment.

Results: Conical cecum in sub hepatic region measuring 4 × 3.5 cm was found. Appendix arising from the tip of cecum was located in 12'o clock position measuring 11.5 cm with 'U' shaped bend at its tip. Variation in blood supply have also been reported which can lead to iatrogenic injuries during colonoscopy and surgeries.

Conclusion: Lack of knowledge of these rare variations may lead to delayed diagnosis of appendicitis leading to perforation and surgical emergencies. In the present case, we describe an undescended cecum and its associated variation in branching pattern of superior mesenteric artery.

Keywords: subhepatic, cecum, appendicitis, right colic artery.

Conflicts of interest

The authors have none to declare.

<https://doi.org/10.1016/j.jasi.2018.06.187>

34

High bifurcation of brachial artery – a case report



Dhankar Ruchika*, Kataria K. Sushma, Agarwal Ritu

Dr. S.N. Medical College, Jodhpur, India

Introduction: Variations in the vascular pattern of the upper limb are common in Indian population. Brachial artery is a con-