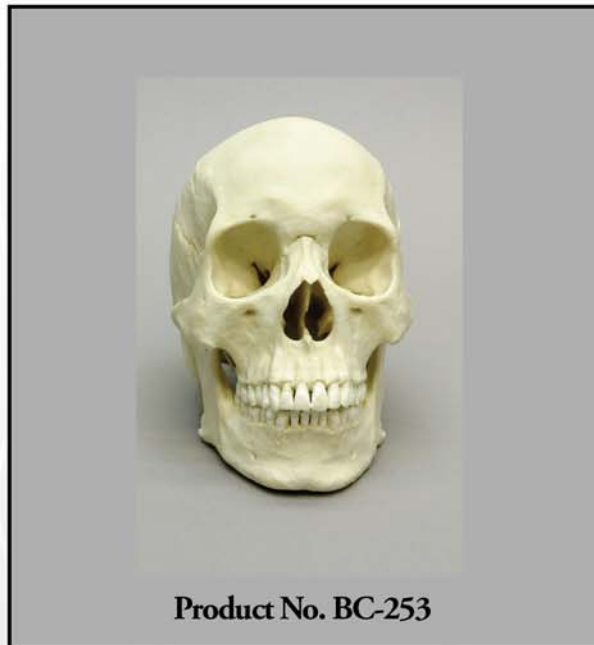


OSTEOLOGICAL EVALUATION

Prepared by
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Product No. BC-253

Human Male Asian Skull



Bone Clones, Inc.

OSTEOLOGICAL REPRODUCTIONS

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Human, Male, Typical Asian

Product Number: BC-253
Cross reference SC-092 (complete skeleton)

Specimen Evaluated: Bone Clones® replica

Skeletal Inventory: 1 intact cranium
1 intact mandible

General observations:

In general, the molding process has preserved significant details necessary for evaluation. The general shape and configuration of the skull is within normal limits. The ectocranial morphology of the individual cranial bones is within normal limits. The sutural patterns are of expected configuration. There is a sutural bone (Wormian ossicle) at the left parietal notch. The foramina are of expected configuration. The skull is atraumatic.

Dentition:

There are 16 teeth in the maxillary arcade and 16 teeth in the mandibular arcade. All teeth have an adult morphology and no deciduous dentition remains. The dentition is atraumatic. There are no dental restorations or prostheses. There is severe attrition. There is mild to moderate buccal furcation involvement of the mandibular first molar teeth, and the maxillary first and second molar teeth.

Features of Race:

The interocular distance is broad. The nasal root is depressed and the nasal angle is obtuse. The zygomatic bones are broad. The nasal aperture is narrow superiorly and broader inferiorly. The anterior nasal spine is slightly prominent, and the inferior margin of the nasal aperture is smooth. The maxillary dental arcade has a somewhat rounded-shape. There is mild alveolar prognathism. The maxillary incisors are shovel-shaped. There is no edge-on-edge incisal bite. There is a slight post-bregmatic depression. The calvarial sutures are complex.

The totality of features is most in keeping with those of an Asian individual.

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Features of Sex:

There is mild prominence of the cranial sites for musculofascial attachment including especially:

- the nuchal lines
- the external occipital protuberance
- the mastoid processes of the temporal bones
- the temporal lines
- the supraorbital tori
- the masseteric tuberosities of the mandible
- the supramastoidal crest

There is a broad ascending mandibular ramus. The occipital condyles are prominent.

The nasion is smooth, and the supraorbital margins are blunted.

The inferior border of the mandible is somewhat squared.

The totality of features is most in keeping with male sex.

Features of Age:

There are no identifiable fontanelles. The spheno-occipital synchondrosis is fused.

Ten ectocranial osteologic landmarks are evaluated for degree of suture closure according to the Meindl and Lovejoy method*.[1] Scores are assigned as follows:

1	1
2	1
3	2
4	1
5	1
6	1
7	1
8	2
9	2
10	1

* As is always the case with casting, there is a tendency towards overscoring.

The sum of scores for the cranial vault (landmarks 1 through 7) is 8. This corresponds to an estimated age of 39.4 +/- 9.1 years.

The sum of scores for the anterior cranium (landmarks 6 through 10) is 7. This corresponds to an estimated age of 45.5 +/- 8.9 years.

SUMMARY:

1. Asian.
2. Male.
3. 36.6 to 48.5 years of age; range 30.3 to 54.4 years of age.
4. No evidence of trauma.
5. No evidence of significant osteologic variations or pathology.

EDUCATIONAL RESOURCES:

1. This is an excellent example of a skull from an Asian individual.[2]
2. The concept of race assessment is controversial. It may be worthwhile to review the varying schools of thought on this issue. Short summaries from the perspective of the forensic anthropologist[3] and forensic pathologist[2] are readily available.
3. In many circumstances, the skull alone will allow an investigator to correctly determine sex.[4] However, the findings in the skull should never be treated in isolation; rather, they should be incorporated into your 'whole case' database. This database should include information obtained from all other aspects of the case. From an osteologic perspective, this includes (importantly) the bones of the pelvis. In this circumstance, sex assessment was also possible through examination of the post-cranial skeletal elements.
4. Age assessment of skeletal remains is best done in the context of the entire skeleton. Assessment of the degree of suture closure can be used with some degree of success[1]; however, there is tremendous variability in the degree of closure process. Students must be cautioned that statistical data is based on **populations**, and may not necessarily be reflective of reality in an **individual**. For additional information regarding age estimates for this individual, please refer to the disarticulated skeleton (SC-092).
5. It may be appropriate to discuss the concept of sutural (Wormian) bones and what role they may play in the forensic evaluation of cranial remains. It is most important that students understand sutural bones are normal variants which may be present with somewhat increased frequency in some racial groups; they must not be misdiagnosed as fractures.

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REFERENCES:

1. Meindl, R.S. and Lovejoy, C.O. (1985). Ectocranial suture closure: a revised method for the determination of skeletal age at death based on the lateral-anterior sutures. *American Journal of Physical Anthropology*, 68(1): 57-66.
2. Matshes, E. and Lew, E. (2006). Forensic osteology. In *Forensic Pathology: Principles and Practice*, D. Dolinak, E. Matshes, and E. Lew, Editors. San Diego, CA: Elsevier (Academic Press).
3. Gill, G. (1998). Craniofacial criteria in the skeletal attribution of race. In *Forensic Osteology: Advances in the Identification of Human Remains*, K. Reichs, Editor. Springfield, IL: Charles C. Thomas.
4. Krogman, W. and Iscan, M. (1986). *The Human Skeleton in Forensic Medicine*. 2 ed. Springfield, IL: Charles C. Thomas.

DISCLAIMERS:

This report is meant only as a teaching tool for introductory level students of the anatomical, anthropology or forensic sciences who might be using this specimen to learn human and forensic osteology. Evaluation of osteologic material is best done with original specimens. My evaluation was based solely upon studies of a Bone Clones® replica. My opinions are based solely upon the material presented to me. This is somewhat artificial as in real forensic investigations additional studies would be undertaken prior to the formulation of diagnoses and the production of a report. These studies might include plain film radiography, computed tomography (CT) studies, histology, etc. My opinions regarding race and sex are based only upon non-metric analyses. Evaluation of cranial suture closure is most accurately assessed endocranially as the sutures are known to close from the endocranial table towards the ectocranium. My opinions regarding this skull were made with access to the postcranial skeleton.

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