

Femoral triangle $\rightarrow$ The femoral triangle is a subfascial formation, is a triangular landmark useful in dissection and understanding relationships in the groin. In living people. It appears as a triangular depression inferior to the inguinal ligament when the thigh is flexed, abducted and laterally rotated. The femoral triangle is bounded superiorly by

$\rightarrow$ Superiorly by the inguinal ligament (thickened inferior margin of the external oblique aponeurosis) that forms the base of the femoral triangle.

$\rightarrow$ Medially by the lateral border of the adductor longus.

$\rightarrow$ Laterally by the sartorius; the apex of the femoral triangle is where the medial border of the sartorius crosses the lateral border of the adductor longus.

The muscular floor of the femoral triangle is formed by iliopsoas laterally and pectineus muscle medially. The roof of the femoral triangle is formed by the fascia lata and cribriform fascia, subcutaneous tissue and skin.

The inguinal ligament is actually serves as a flexor retinaculum, retaining structures that passes anterior to the hip joint against the joint during flexion of the thigh. Deep to the inguinal ligament, the retro-inguinal space (created as the inguinal ligament spans the gap between the two bony prominences to which it is attached, the ASIS and pubic tubercle) is an important passageway connecting the trunk / abdominopelvic cavity to the lower limb.

The retro-inguinal space is divided into 2-compartments. By a thickening of iliopsoas fascia, the ilipectineal arch. Which passes between the deep surface of the inguinal ligament and the iliopectic eminence. Lateral to the ilipectineal arch is the muscular compartment of the retro-inguinal space, through which the iliopsoas muscle and femoral nerve pass from the greater pelvis into the anterior thigh. Medial to the arch the vascular compartment of the retro-inguinal space allows passage of the major vascular structures between the greater pelvis and the femoral triangle of the anterior thigh. As they enter the femoral triangle the names of the vessels change from external iliac to femoral.

• Femoral sheath and its contents:

- Femoral artery and several of its branches
- Femoral vein and its proximal tributaries
- Deep inguinal lymph nodes and associated lymphatic vessels.

The femoral triangle is bisected by the femoral artery and vein, which passes to and from the adductor canal inferiorly at the triangle's apex. The adductor canal is an intermuscular passageway deep to the sartorius by which the major neurovascular bundle of the thigh traverses the middle third of the thigh.

Femoral nerve →

The femoral nerve (L₂-L₄) is the largest branch of the lumbar plexus. The nerve originates from the pelvis within the psoas major and descends posterolaterally through the pelvis to approximately the midpoint of the inguinal ligament. It then passes deep to this ligament and enters the femoral triangle, lateral to the femoral vessels.

After entering the femoral triangle, the femoral nerve divides into several branches to the ~~major~~ several branches to the anterior thigh muscles.

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It also sends articular branches to the hip and knee joints and provides several cutaneous branches to the anteromedial side of the thigh.

The terminal cutaneous branch of the femoral nerve, the saphenous nerve descends through the femoral triangle lateral to the femoral sheath containing the femoral vessels. The saphenous nerve accompanies the femoral artery and vein through the adductor canal and become superficial by passing b/w the sartorius and gracilis when the femoral vessels traverse the adductor hiatus at the distal end of the canal. It runs antero-inferiorly to supply the skin and fascia on the anteromedial aspects of the knee, leg and foot.

Femoral sheath → The femoral sheath is a funnel shaped fascial tube of varying length (usually 3-4 cm) that passes deep to the inguinal ligament, lining the vascular compartment of the retro-inguinal space. It terminates inferiorly by blending with the adventitia of the femoral vessels. The sheath encloses proximal parts of the femoral vessels and creates the femoral canal medial to them.

The femoral sheath is formed by an inferior prolongation of transversalis and iliopectineal fascia from the abdomen. The femoral sheath does not enclose the femoral nerve because it passes through the muscular compartment. When a long femoral sheath occurs, its medial wall is pierced by the great

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Saphenous vein and lymphatic vessels.

The femoral sheath allows the femoral artery and vein to glide deep to the inguinal ligament during movements of the hip joint.

The femoral sheath lining the vascular compartment is sub-divided internally into 3-smaller compartments by vertical septa of extraperitoneal connective tissue that extends from the abdomen along the femoral vessels.

The compartments of the femoral sheath are →

- Lateral compartment for the femoral artery
- Intermediate compartment for the femoral vein
- Medial compartment which is the femoral canal.

Femoral Canal → The femoral canal is the smallest of the three compartments of the femoral sheath. It is conical and short and lies b/w the medial edge of the femoral sheath and the femoral vein. The femoral canal

- Extends distally to the level of the proximal edge of the saphenous opening.