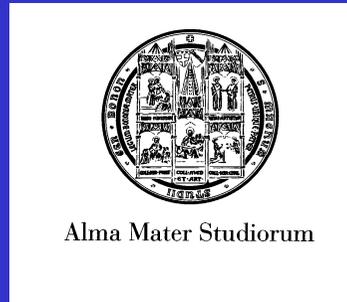
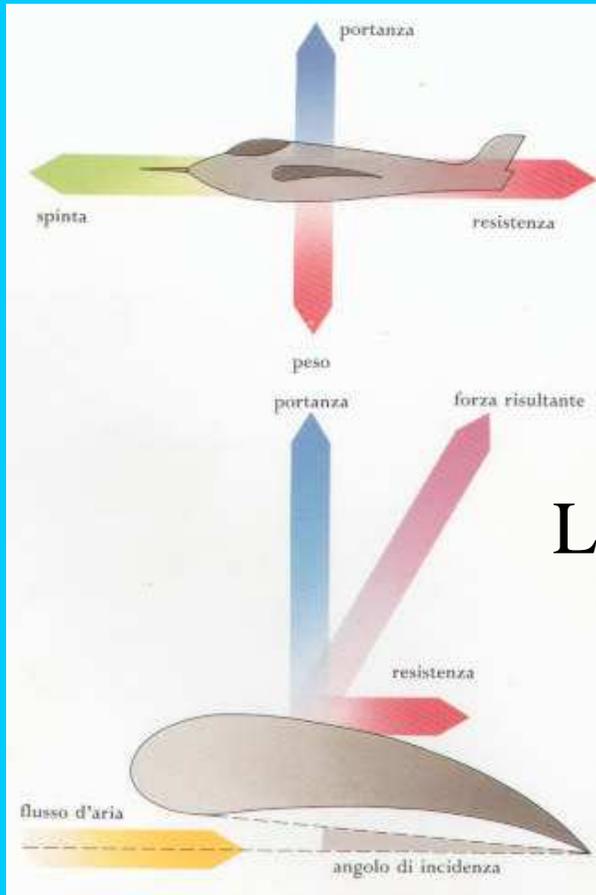


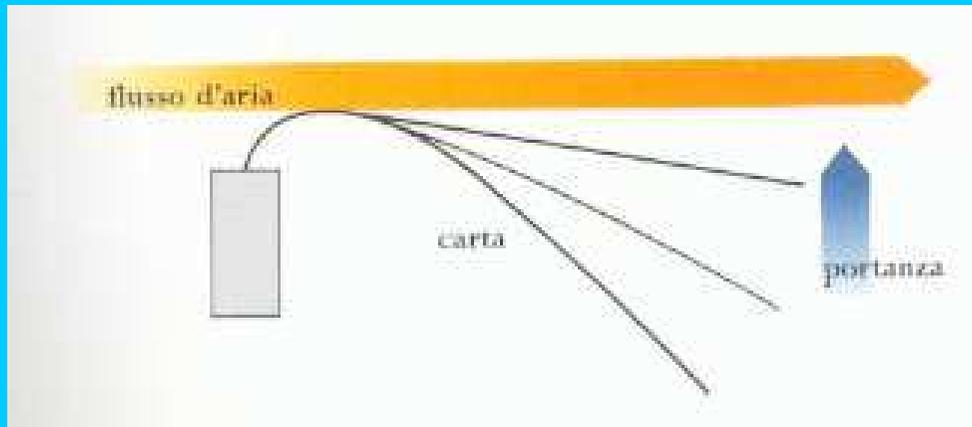
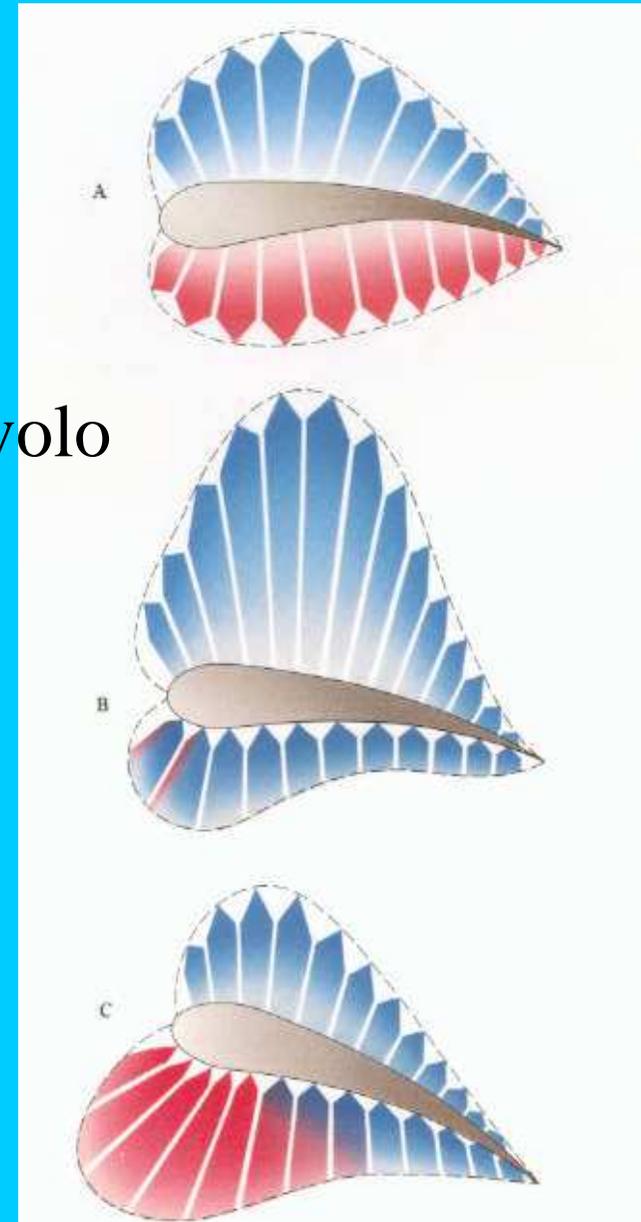
Chirurgia funzionale dell'ala negli uccelli

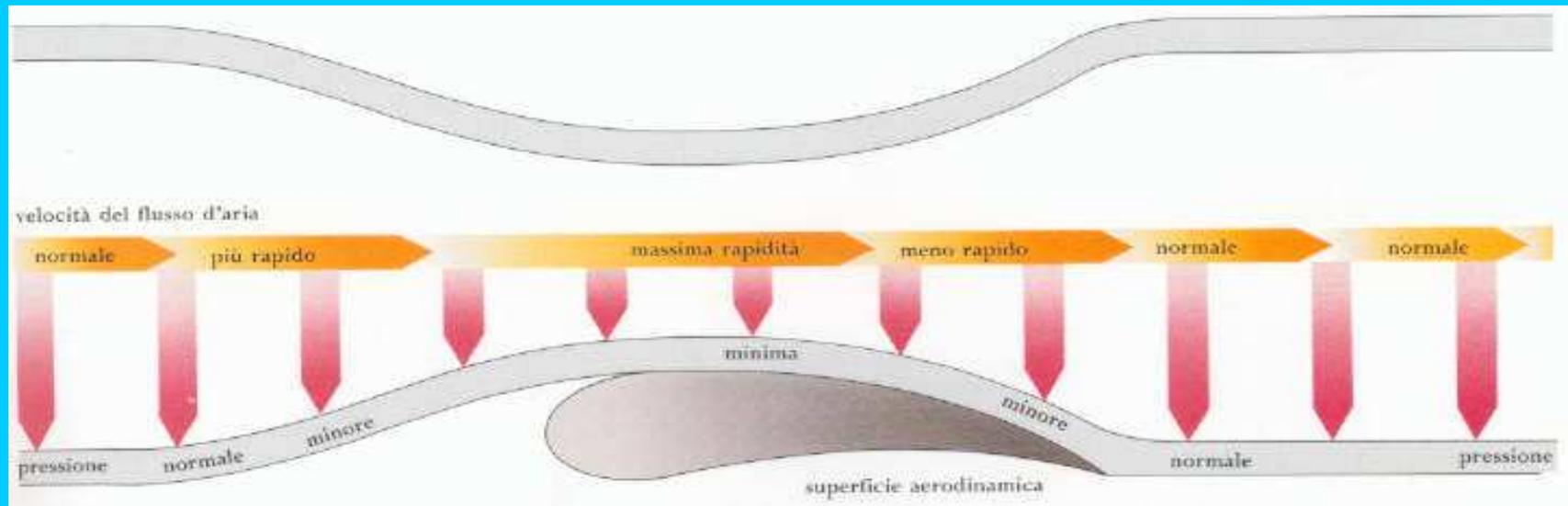


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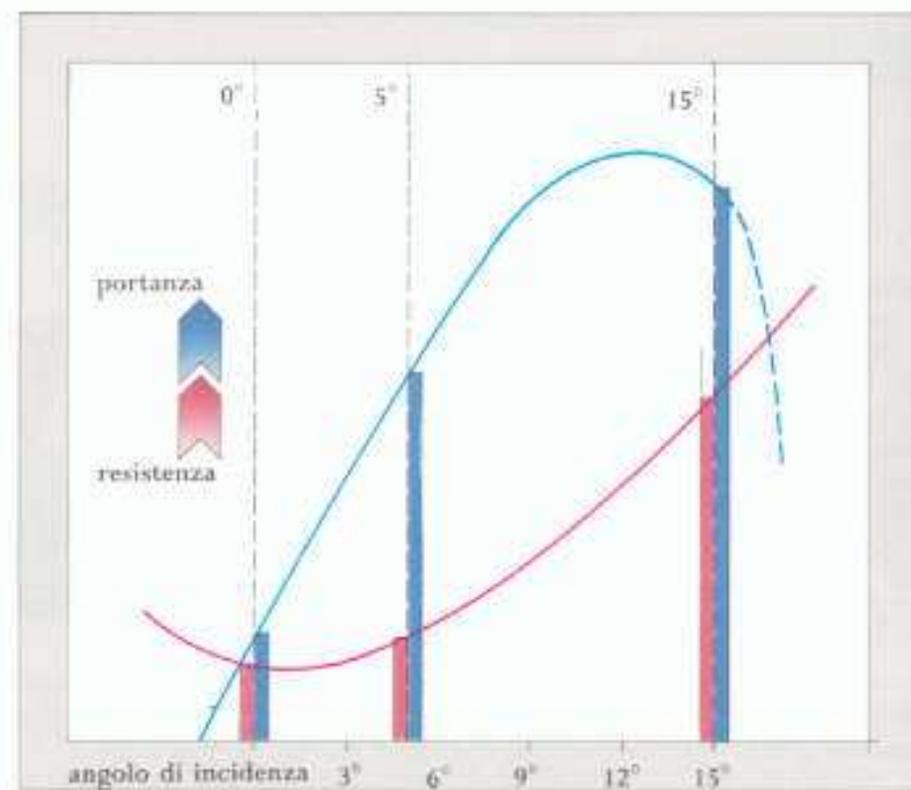
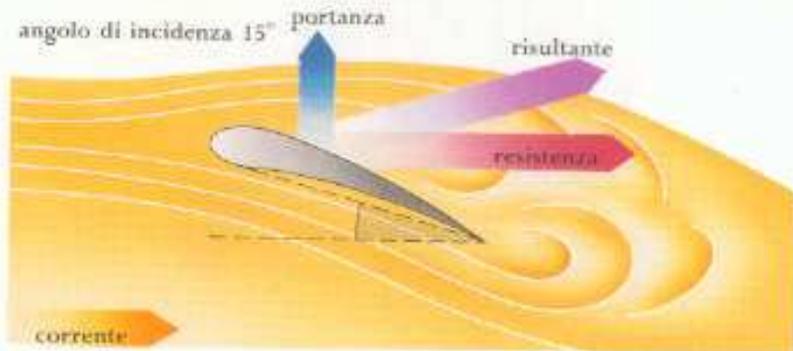
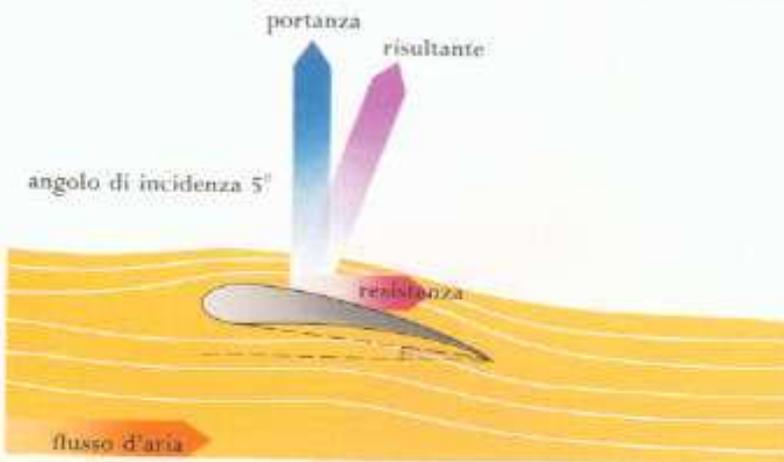
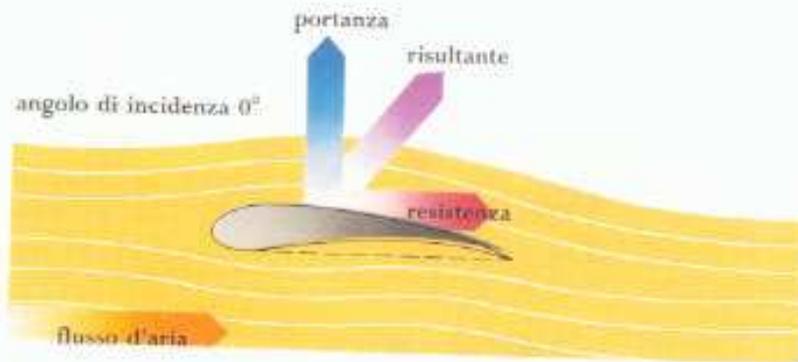
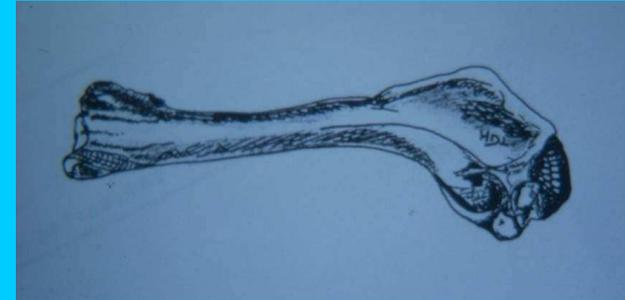
La portanza e il volo



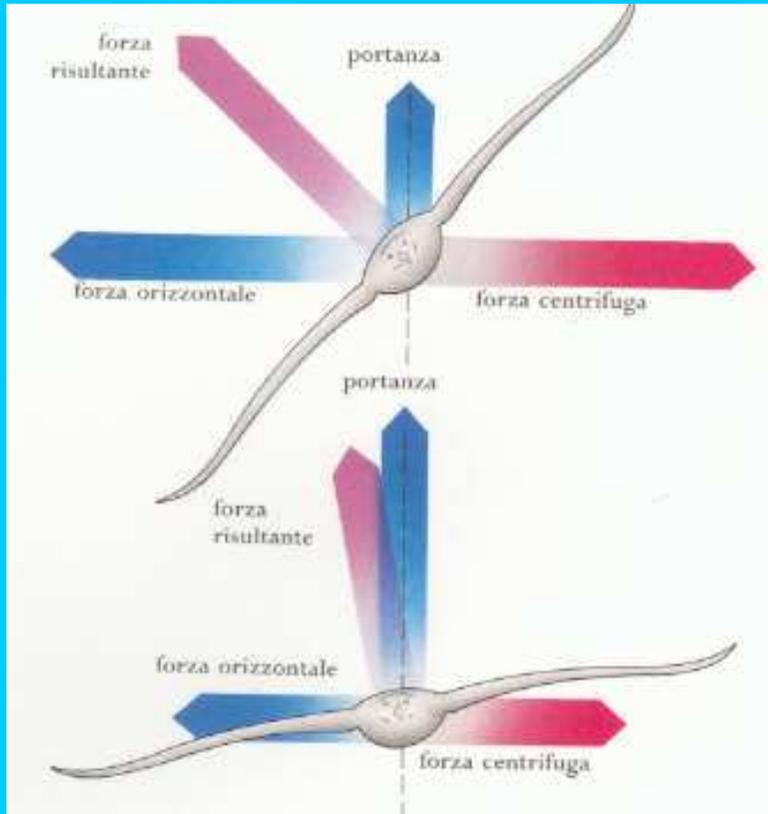


Portanza e teorema
di Bernoulli

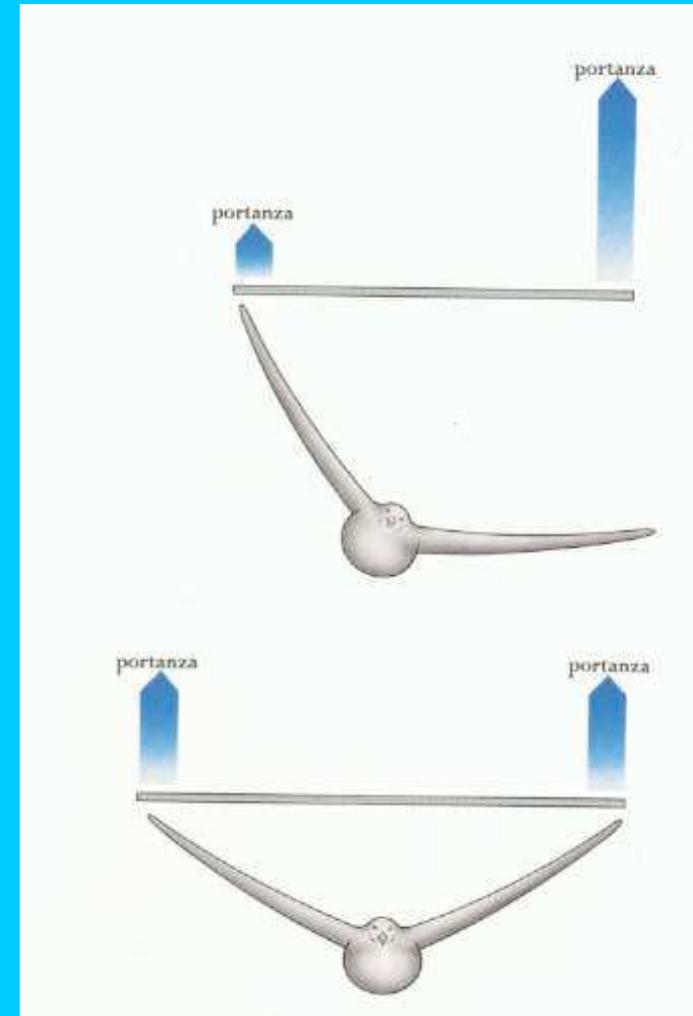
Angolo di incidenza: il ruolo dell'omero



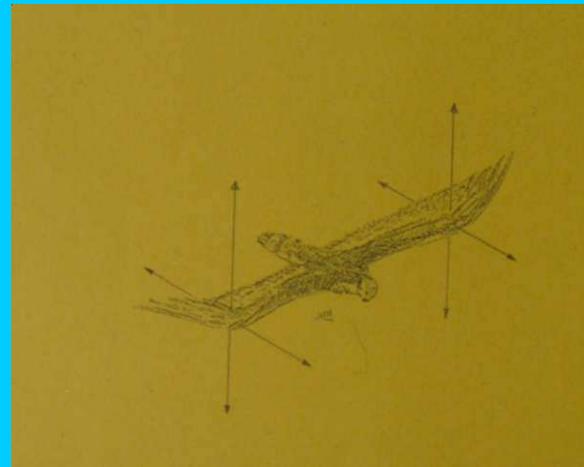
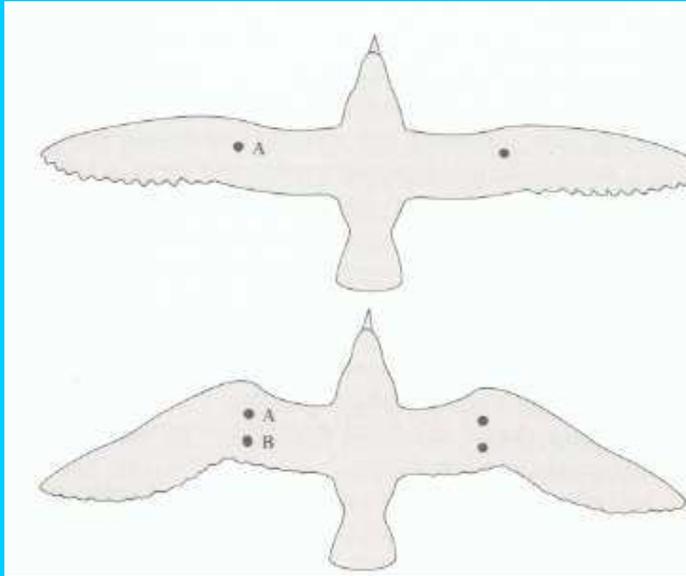
Il volo inclinato

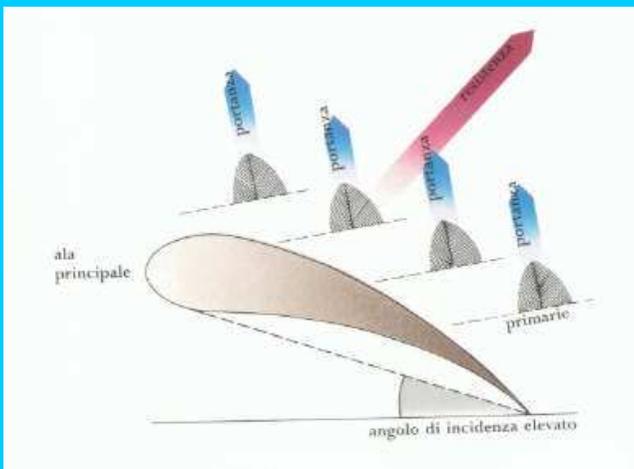
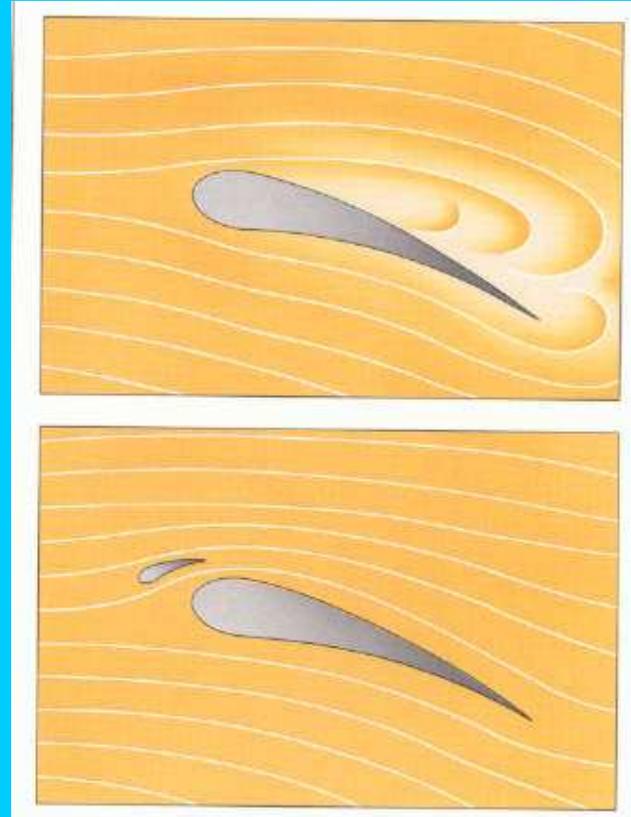


Diagnostica clinica e portanza



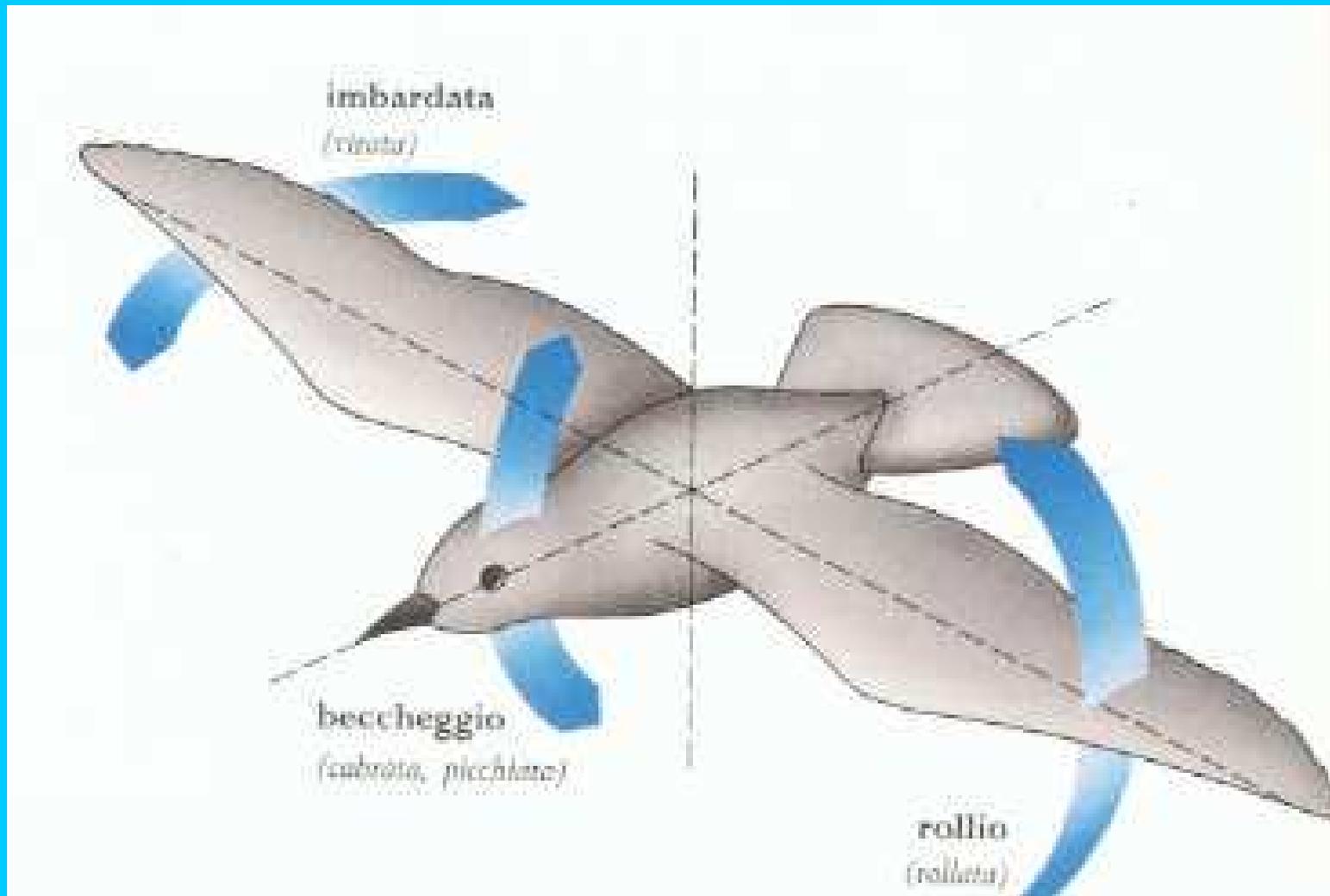
Coefficiente di allungamento alare e punti di pressione





Ipersostentatori

I movimenti del corpo in volo

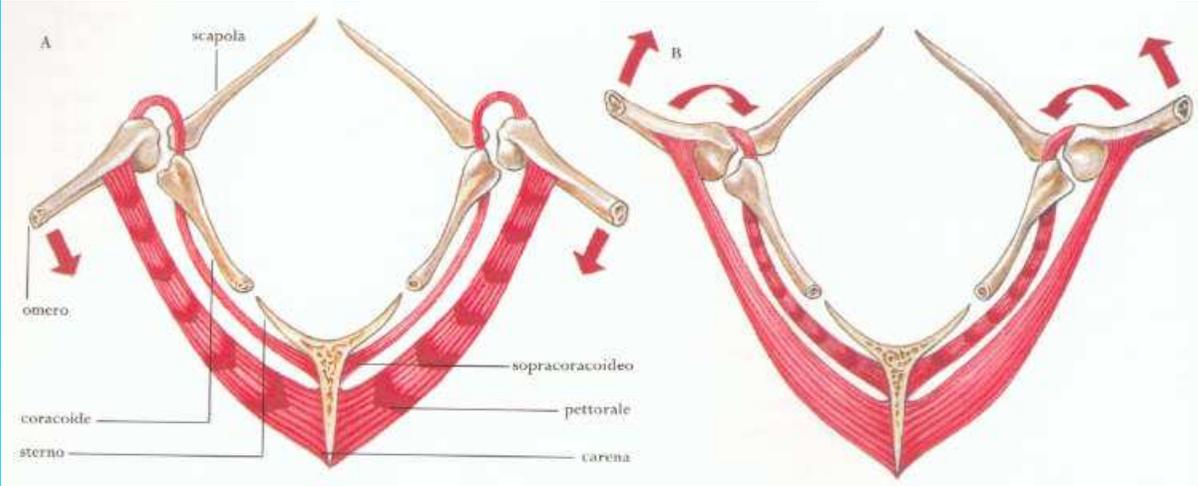
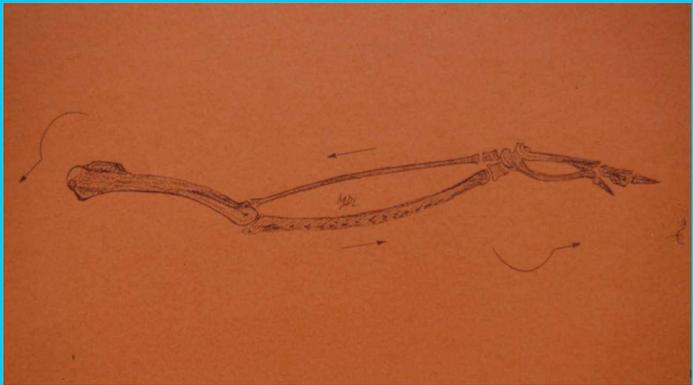
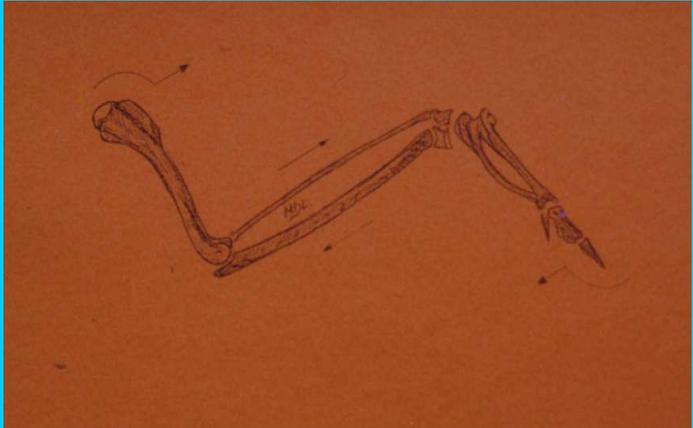
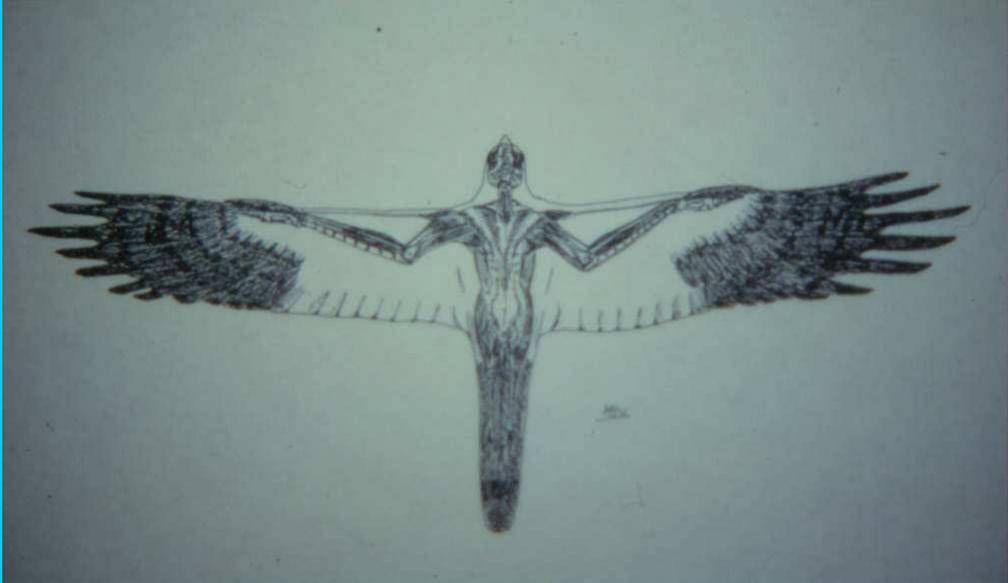




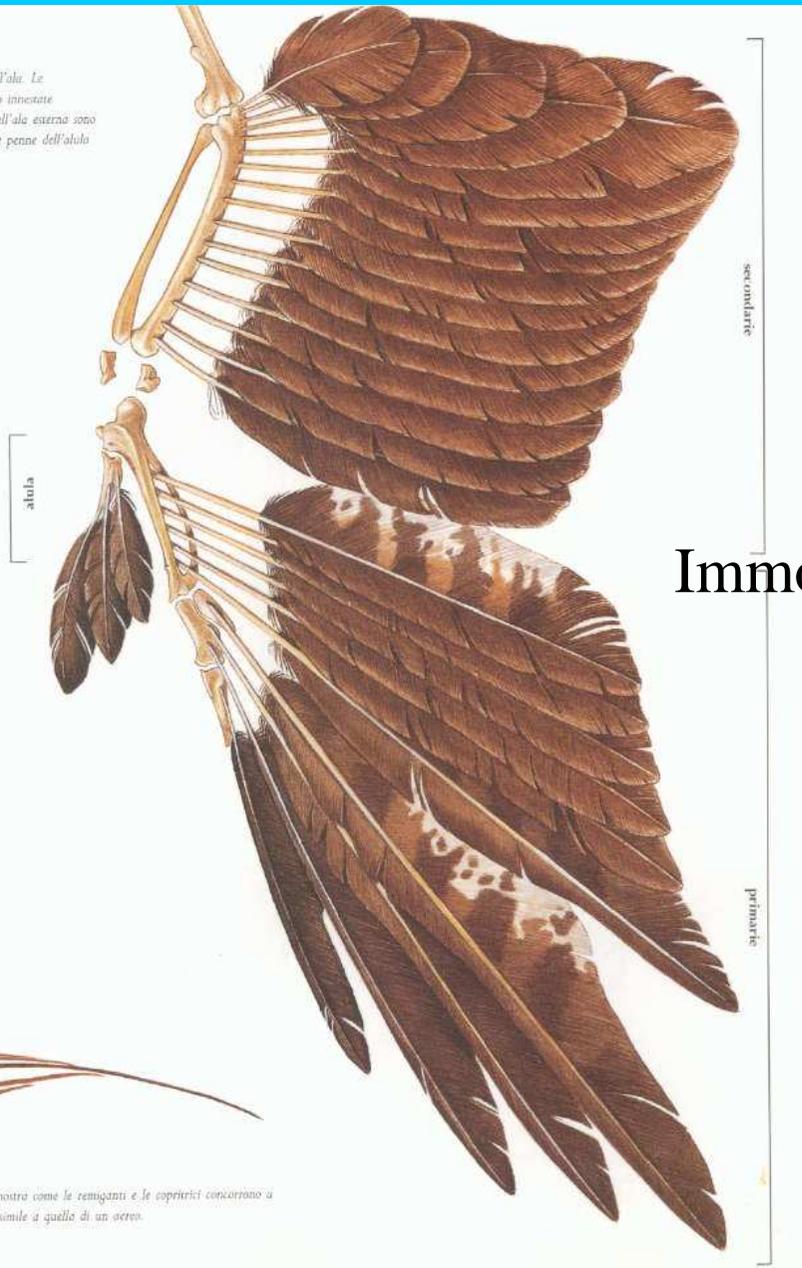
Il carico alare



Biomeccanica dell'ala



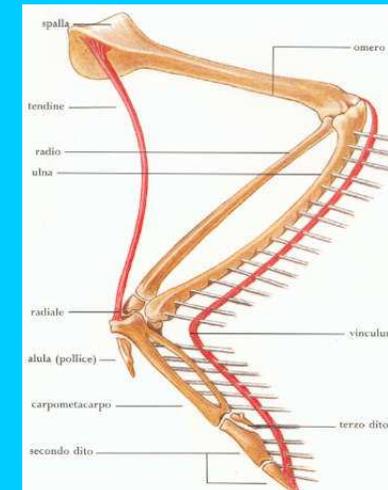
La disposizione delle penne sull'ala. Le secondarie dell'ala interna sono innestate sull'ulna mentre le primarie dell'ala esterna sono fissate alle ossa della mano. Le penne dell'alula sono impostate sul pollice.

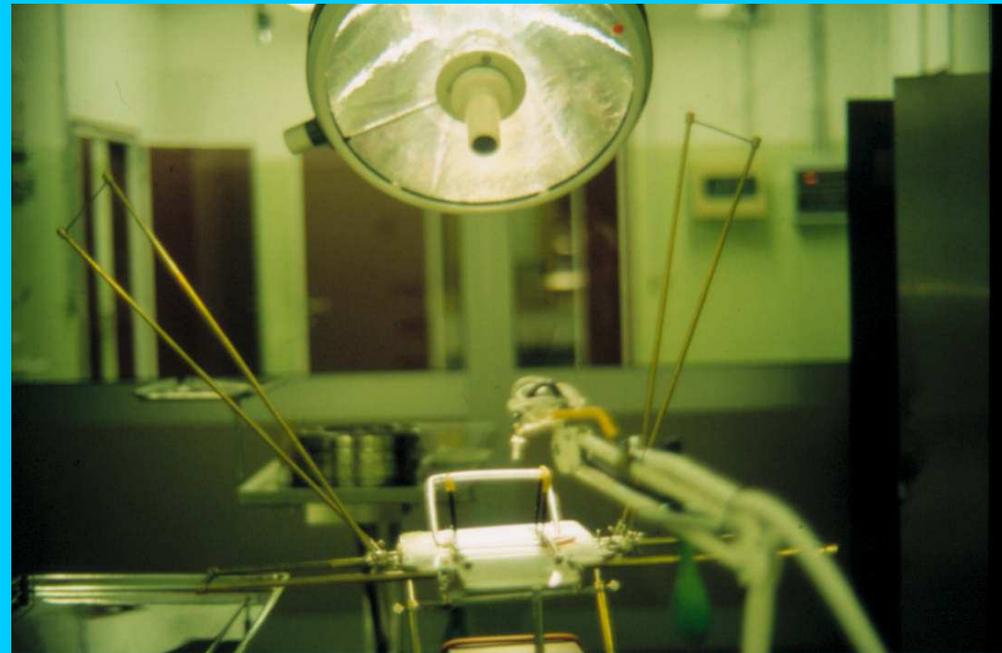
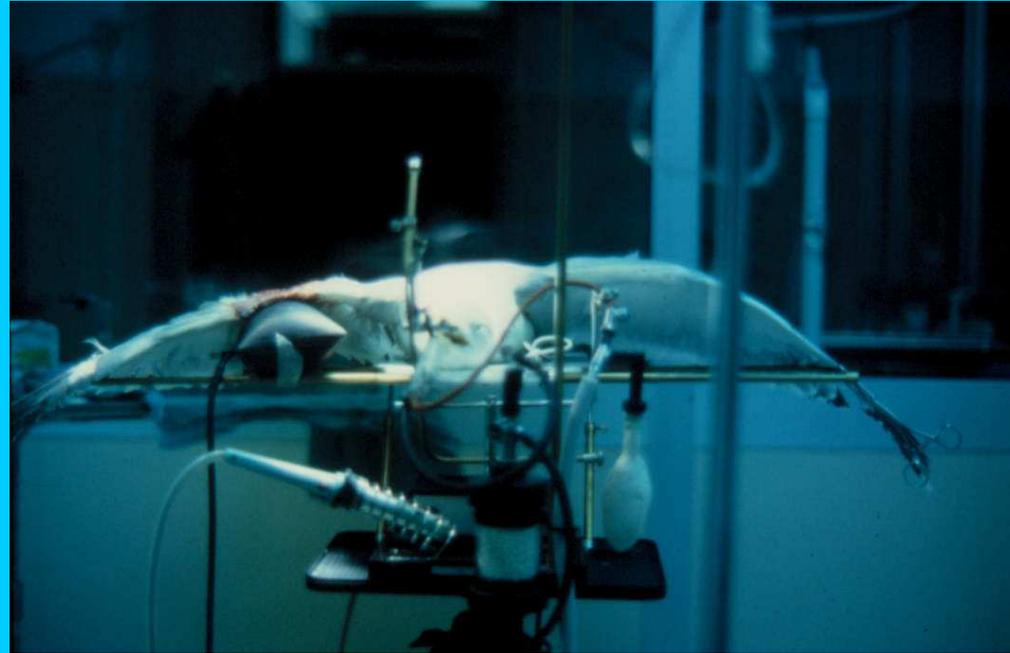


sopra La sezione di un'ala mostra come le remiganti e le copritrici concorrono a formare una superficie alare simile a quella di un aereo.



Immobilizzazione delle fratture





Posizionamento dell'ala
per la chirurgia

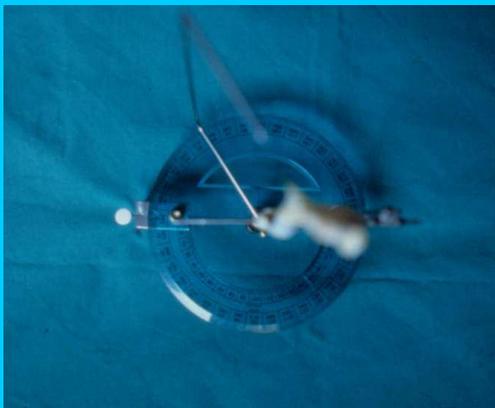
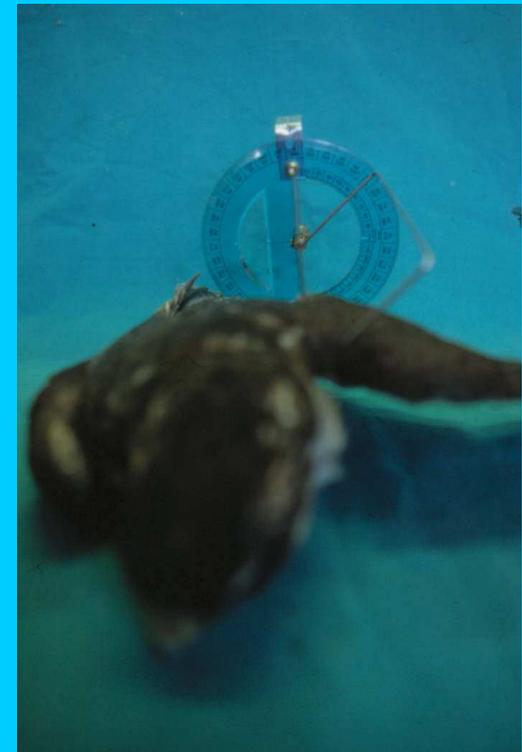
Le vie chirurgiche di accesso



Infibulazione centromidollare dell'omero

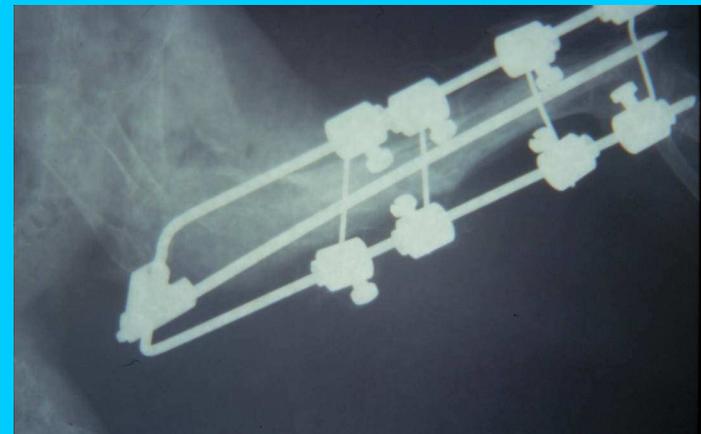
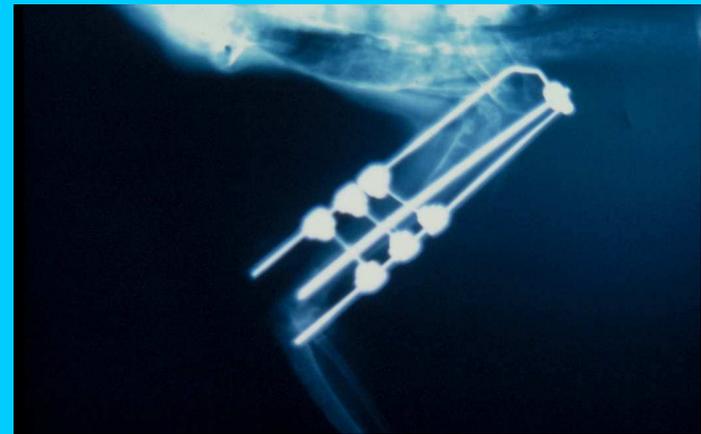


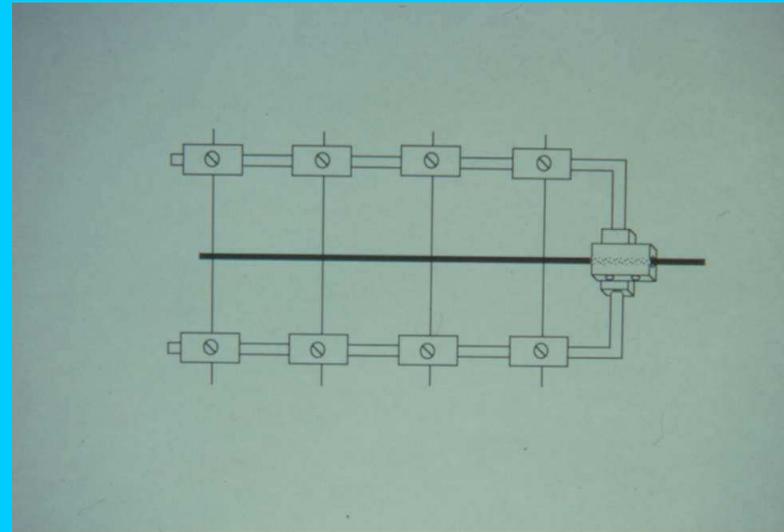
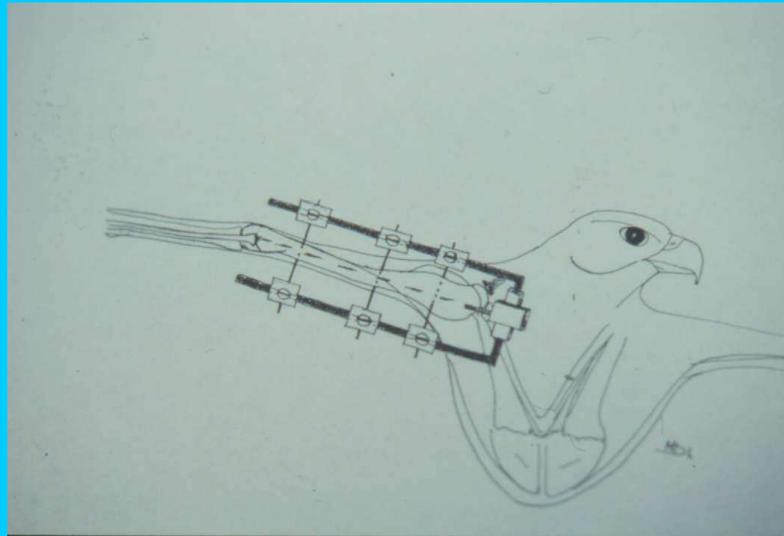
Ripristino dell'angolo alare di incidenza



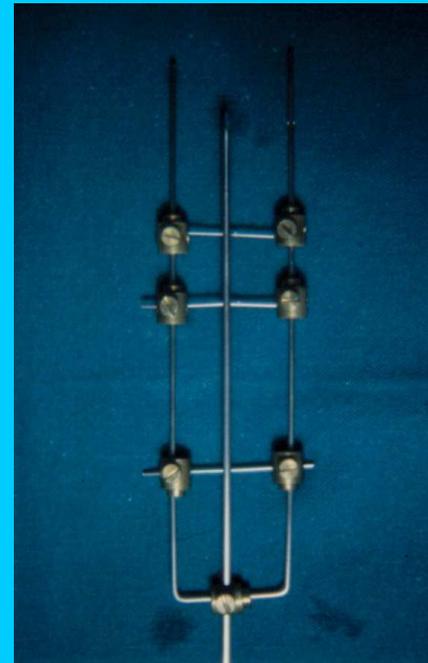
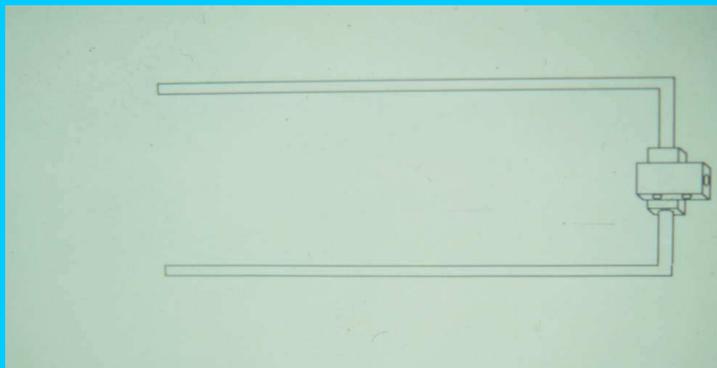
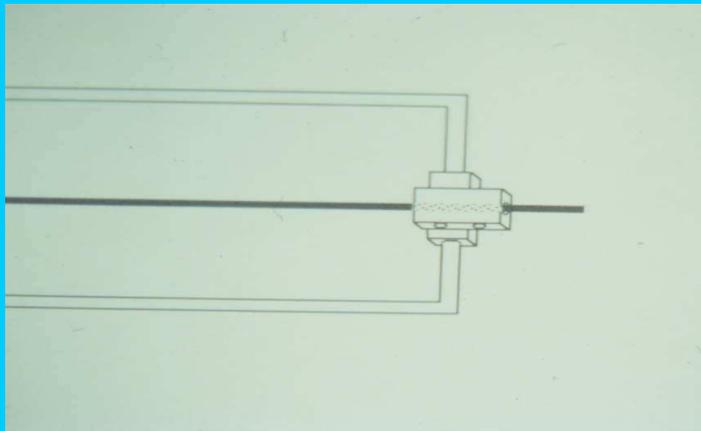


F E M

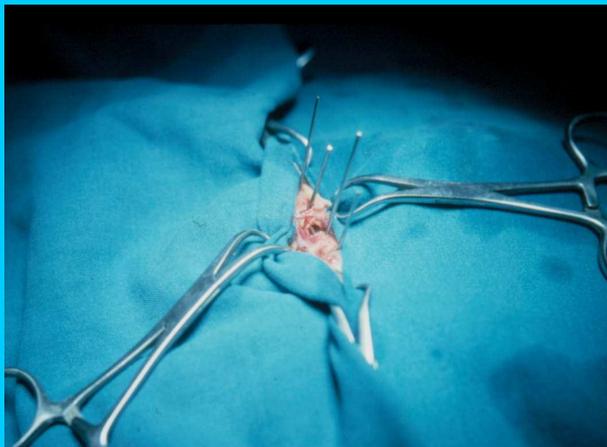




FEM



FEM

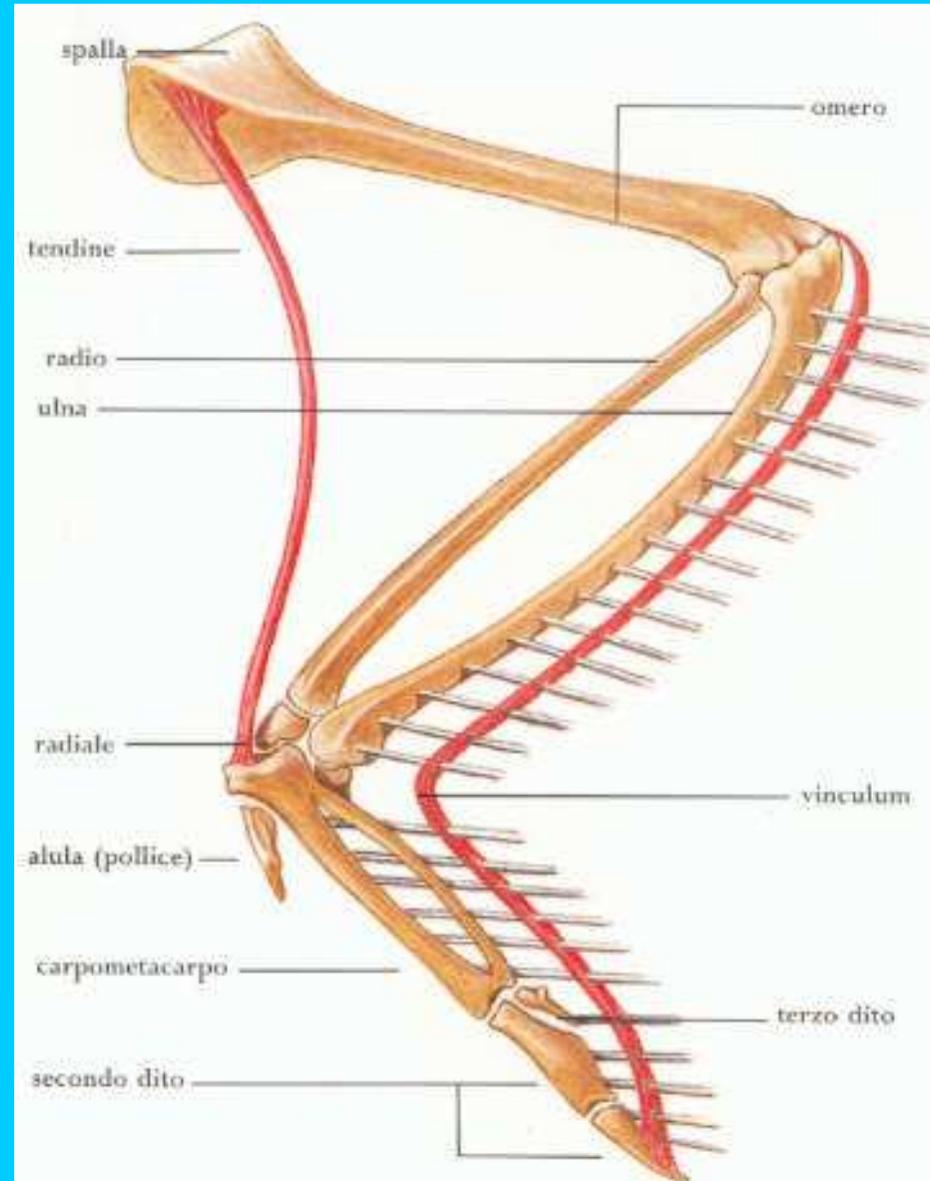
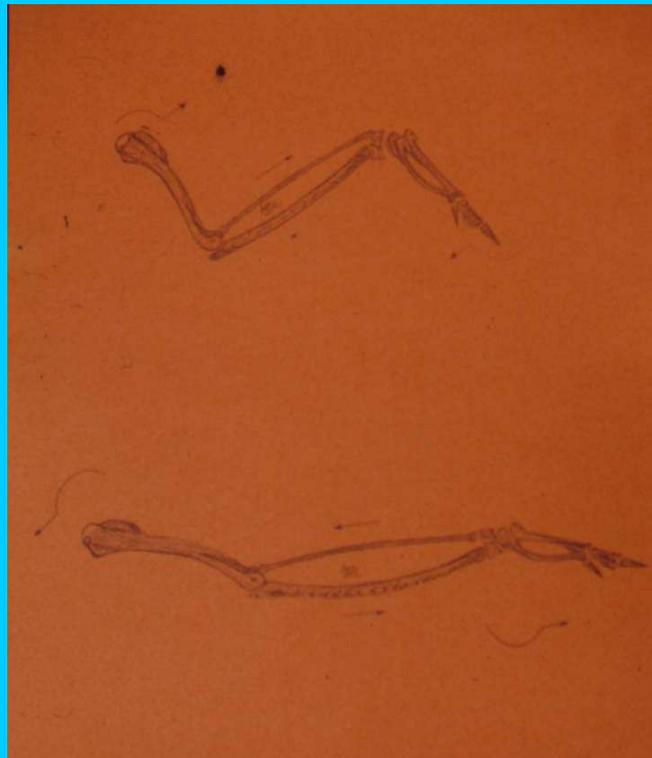
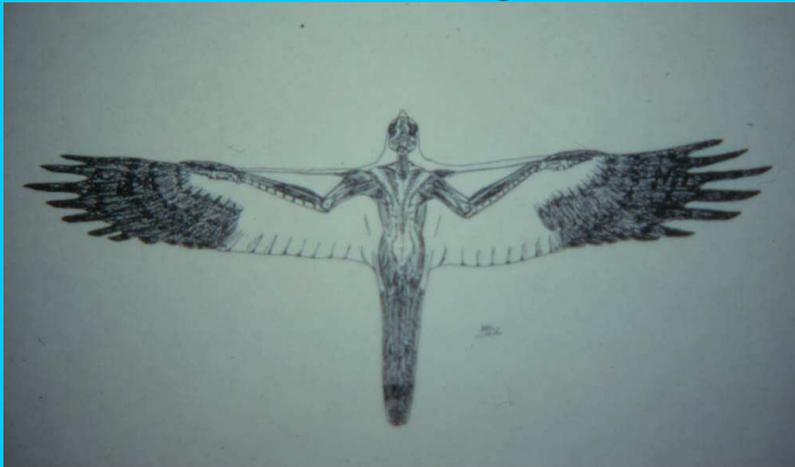




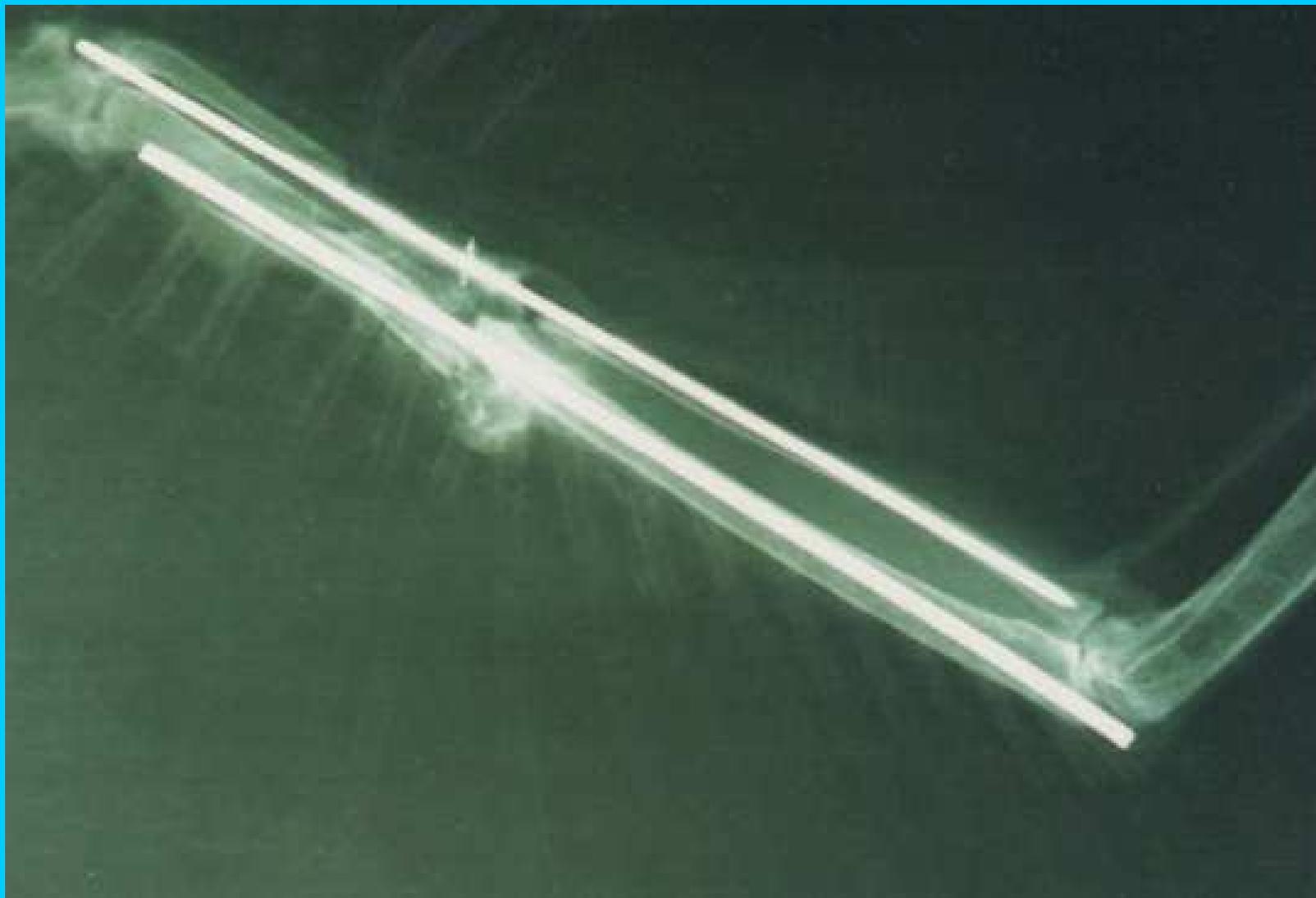
Riabilitazione nella
chirurgia dell'omero

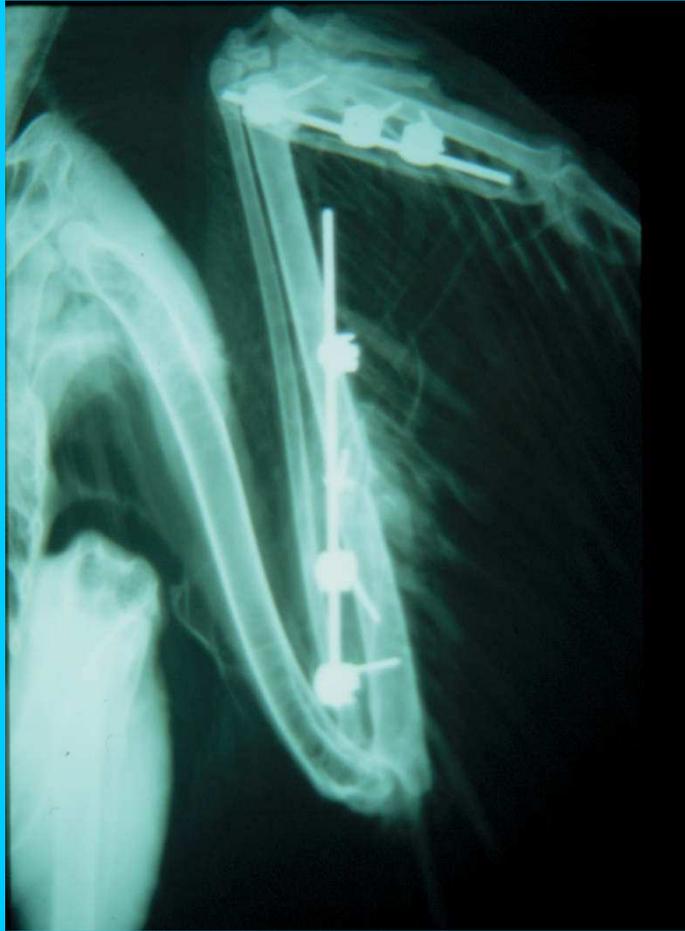


Chirurgia dell'Avambraccio



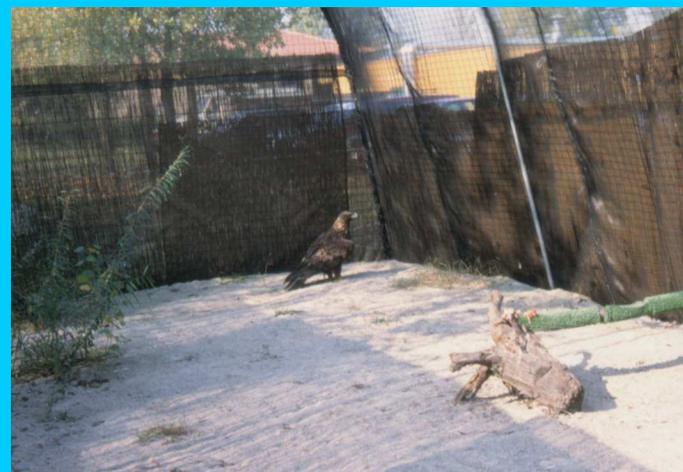
Infibulazione centromidollare di radio e ulna





Chirurgia dell'avambraccio
fissazione esterna

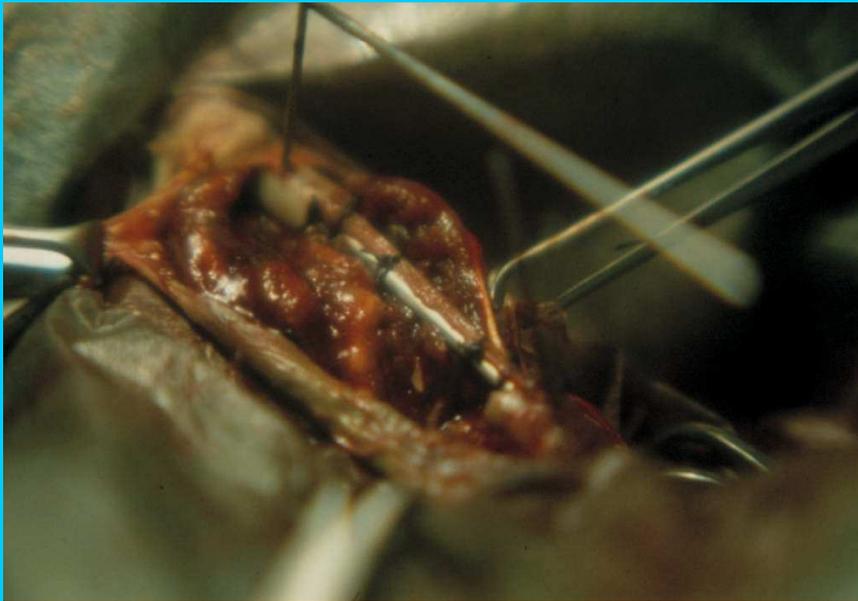
Riabilitazione per l'avambraccio

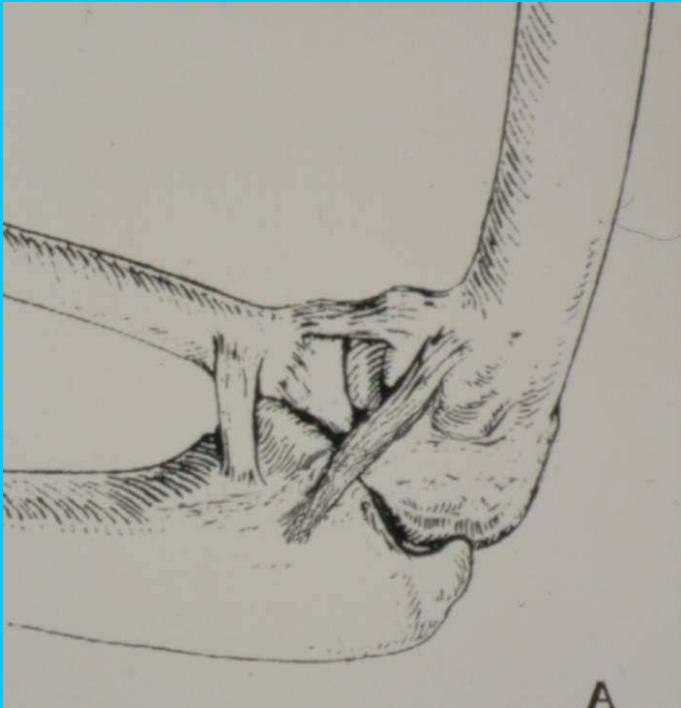


Chirurgia del propatagio



Rigenerazione Guidata Dei Tessuti





Chirurgia dei legamenti omero ulnari