

is termed the **superior nuchal line**. That part of the squama which lies above the highest nuchal lines is named the **planum occipitale**, and is covered by the Occipitalis muscle; that below, termed the **planum nuchale**, is rough and irregular for the attachment of several muscles. From the external occipital protuberance a ridge or crest, the **median nuchal line**, often faintly marked, descends to the foramen magnum, and affords attachment to the ligamentum nuchæ; running from the middle of this line across either half of the nuchal plane is the **inferior nuchal line**. Several muscles are attached to the outer surface of the squama, thus: the superior nuchal line gives origin to the Occipitalis and Trapezius, and insertion to the Sternocleidomastoideus and Splenius capitis: into the surface between

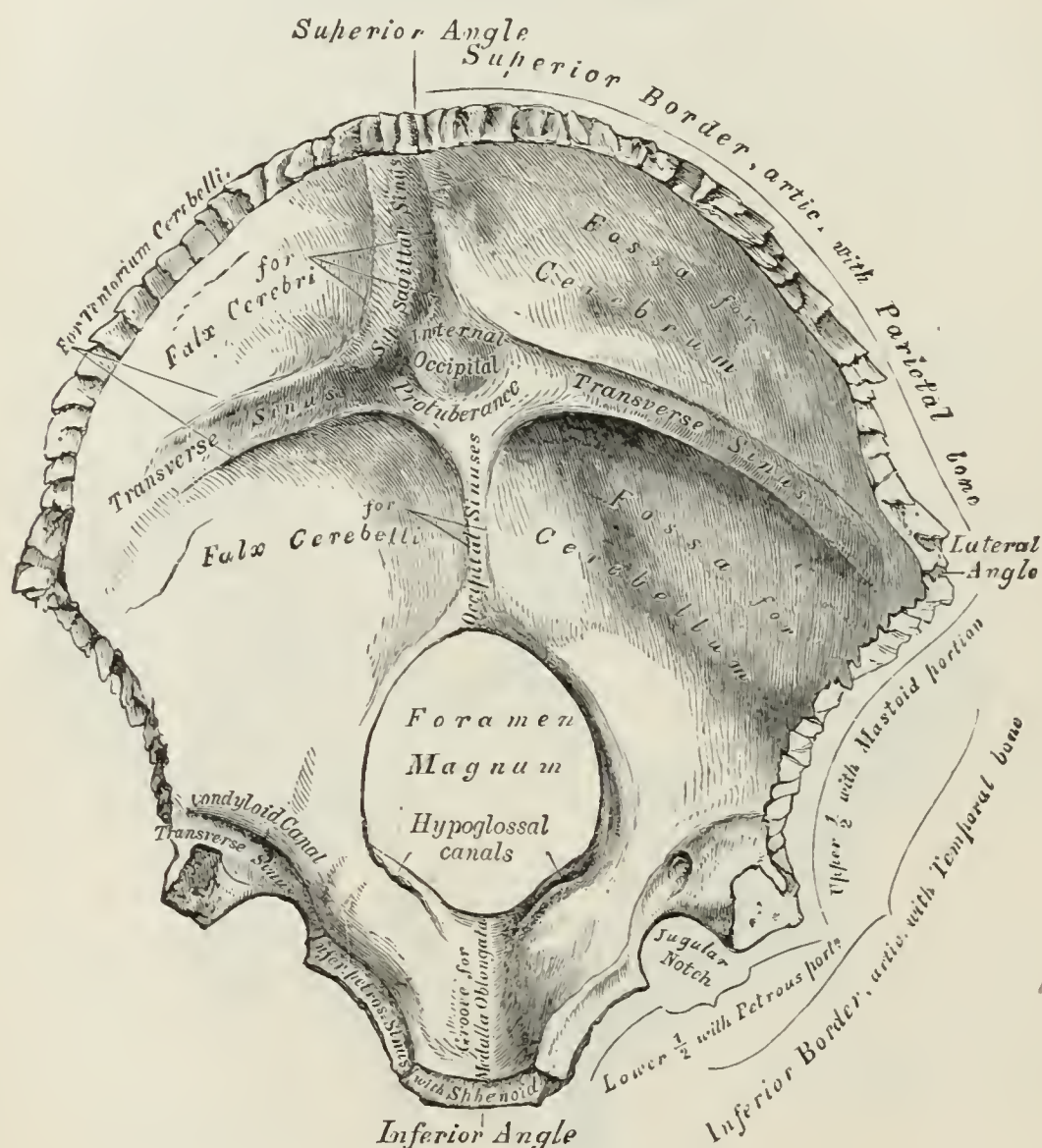


FIG. 130.—Occipital bone. Inner surface.

the superior and inferior nuchal lines the Semispinalis capitis and the Obliquus capitis superior are inserted, while the inferior nuchal line and the area below it receive the insertions of the Recti capitis posteriores major and minor. The posterior atlantooccipital membrane is attached around the postero-lateral part of the foramen magnum, just outside the margin of the foramen.

The **internal surface** is deeply concave and divided into four fossæ by a **cruciate eminence**. The upper two fossæ are triangular and lodge the occipital lobes of the cerebrum; the lower two are quadrilateral and accommodate the hemispheres of the cerebellum. At the point of intersection of the four divisions of the cruciate eminence is the **internal occipital protuberance**. From this protuberance the upper division of the cruciate eminence runs to the superior angle of the bone, and on