1: The Body Plan

Anatomy and Physiology

anatomy: study of the body's structures and features associated with those structures

physiology: study of the processes and functions of those structures and their development

form = function

Functional Levels

chemical: interaction of atoms

cell: structural and functional unit of living

organisms

tissue: group of similar cells and the

materials surrounding them

organ: two or more tissues working

together

organ system: ground of organs

functioning together

organism: any living thing; organ systems work together to maintain homeostasis

Directional Terminology

right/left: describes the subject's
right/left, not the viewer's

anatomical position: body erect, face forward, feet together, palms face forward,

standing

supine: lying face upward
prone: lying face downward
superior/inferior: up/down

cephalic/caudal: towards head/tail (used

for torso)

medial/lateral: towards the middle/sides proximal/distal: close to/far from a starting point (typically the torso; used for

linear structures)

superficial/deep: close to/far from the

surface

anterior/posterior: front/back

ventral/dorsal: front of body/back of body

Body Planes

sagittal: vertically through right and left
(can be midsagittal or parasagittal)
frontal/coronal: vertically through anterior

and posterior

transverse/cross: horizontally through superior and inferior, or cut at a right angle

to the length of an organ **oblique**: non-90 degree angles

longitudinal: cut along the length of an

organ

Dorsal Body Cavities

cranial cavity: houses the brain
vertebral cavity: houses the vertebral
canal

Ventral Body Cavities

thoracic cavity: contains lungs and heart mediastinum region: thoracic cavity sans lungs

abdominal cavity: below the diaphragm; contains stomach, intestines, liver, spleen, pancreas, kidneys, etc.

pelvic cavity: within the pelvic bones; contains urinary bladder, some large intestine, reproductive organs, etc.

Serous Membranes

Thin layer of epithelial tissue that covers the organs and cavity walls.

Continuous membrane that **folds on itself** to form two layers with **fluid between them** to reduce **friction**.

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visceral serous membrane: inner membrane surrounding the organ parietal serous membrane: outer membrane in contact with the cavity walls pericardium: around the heart pleura: around the lungs peritoneum: around organs of the abdominal cavity; each organ is

surrounded individually by the continuous membrane, forming peritoneal folds (mesenteries)

retroperitoneal organs: organs found in the abdominal and pelvic regions behind (outside) the serous membranes

Head Region

frontal: forehead orbital: eyes nasal: nose oral: mouth otic: ear buccal: cheek mental: chin cranial: skull

occipital: base of skull

Neck Region

cervical: neck clavicular: collarbone nuchal: base of neck

Trunk Region

thoracic: thorax

pectoral: chest
sternal: breastbone
mammary: breast
abdominal: abdomen
umbilical: navel

pelvic: pelvis
inguinal: groin
pubic: genital
dorsal: back

scapular: shoulder blade vertebral: spinal column

lumbar: loin

sacral: between hips
gluteal: buttock
perineal: perineum

Upper Limb Region

acromial: point of shoulder

axillary: armpit

brachial: arm (shoulder to elbow)
antecubital: front of elbow
olecranon: point of elbow
antebrachial: forearm
manual: hand

manual: nand
carpal: wrist
palmar: palm
dorsum: back of hand
digital: fingers

Lower Limb Region

coxal: hip
femoral: thigh
patellar: kneecap

popliteal: hollow behind knee
crural: leg (knee to ankle)

sural: calf
pedal: foot
talus: ankle
dorsum: top of foot
plantar: sole
calcaneal: heal
digital: toes

2: Homeostasis

Homeostasis

homeostasis: existence and maintenance of a relative constant environment within the body; the tendency of an organism to maintain internal equilibrium by adjusting its physiological processes set point: ideal normal value of a variable; can change temporarily

Feedback Systems

stimulus: the factor that causes deviation

from the set point

receptor: monitors the value of some variable (sends out signal if it changes) control center: establishes the set point, decides if a response is needed, usually found in the CNS

effector: changes the value of the variable **response**: produced by the effector based

on control center

Negative Feedback

negative feedback system: resists any deviation from the set point; makes up most feedback systems

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One example is **temperature control**. **Thermal receptors** detect the change, and neurons in the pre-optic area of the hypothalamus interpret these signals. This **stimulates heat losing or promoting** centers in the hypothalamus. When we get **too hot**, the body **releases sweat**. To prevent blood pressure from dropping, the **heart speeds up** and we get **thirsty**. Blood vessels near the skin **dilate** so warm blood is cooled by the surface. When we get **too cold**, our muscles contract and we **shiver**. Blood vessels in the skin **constrict** to decrease flow of warm blood near the surface.

Positive Feedback

positive feedback system: exacerbates the deviation from the set point; typically occurs due to a pathological issue

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Hemorrhage is an example of a problematic positive feedback system. There is a drop in blood pressure, so the heart can't pump and slows down, so the blood pressure drops more.

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Birth contractions are an example of a normal positive feedback system.

Contractions occur, which dilates the cervix, sending impulses to the brain to trigger oxytocin release. This diffuses through the pituitary gland to the uterus and stimulates more forceful contractions.

3: Embryology I

Reproductive Basics

gametes: sex cells, produced by gonads **ovaries**: female gonads; there are two

bilateral ovaries

menstrual cycle: way of tracking female

reproductive cycles

menstruation: bleeding; c. day 1-7 **ovulation**: one ovary matures a female gamete cell and prepares to release it; c. day 14

secondary oocytes: the cells released by ovulation; have only finished the first meiotic division; haploid cell uterine/fallopian tube: passage for secondary oocytes

ampulla: site of fertilization; about 100-200

sperm make it here

vagina: about 20 million sperm are deposited here; sperm are self-propelled uterus: about 1% of sperm make it here; connected to vagina through cervix; sperm are propelled by contractions caused by oxytocin and semen released during sex fertilization: can occur 6 days before ovulation (sperm can survive 6 days) or 1 day after (oocytes are viable for 24 hours)

Prenatal Development

germinal period: first two weeks of development; cells are multiplying and forming the primitive germ layers **embryonic period**: week 3-8; organ

systems develop

fetal period: week 9-38 (birth); organ

systems grow and mature

Timing Age

clinical age: based on the first day of the last menstrual period; during the first two weeks of this age, the cells don't actually exist; pregnancies are about 40 clinical weeks

embryological/post-ovulatory age: starts at actual fertilization; 14 days less than clinical age; 38 weeks on average; this is what we normally use

Secondary Oocytes

haploid cell: have half the number of chromosomes held within the nucleus polar body: the other cell created during meiosis; smaller than the secondary oocyte, and serves no purpose other than getting rid of genes

corona radiata: loosely packed follicular cells around the oocyte

follicle: series of cells surrounding the oocyte and helping to support it

navigation: sperm can navigate here on their own

zona pellucida: layer adhering to the plasma membrane of the oocyte

ZP3 glycoprotein: species specific receptor required for the sperm to make it through **acrosomal reaction**: tip of sperm binds to ZP3 and starts digesting zona pellucida; multiple sperm are required

plasma membrane: covers the secondary oocyte

integrin a1β6: receptor on the plasma membrane that prevents polyspermy fast block to polyspermy: binding causes fast depolarization

slow block to polyspermy: calcium ions and water are released, causing the oocyte to shrink, the zona pellucida to nature, and the ZP3 to deactivate

Fertilization

sperm tail: disintegrates after binding **ovum**: secondary oocyte nucleus moves to the side and undergoes second meiotic division

pronuclei: sperm head becomes male pronucleus and ovum nucleus becomes female pronucleus

zygote: diploid formed by the fusion of the two haploid pronuclei

cleavage: within 24 hours, the zygote cleaves to form two cells; this continues **morula**: day 5; 12+ cells that have formed a solid ball thing, about the same size as the original cell; during hatching, it breaks free from the zona pellucida

totipotent: at this point, the cells can differentiate into every different cell type

blastocyst: day 6; cells are pushed to the side and the middle is filled with fluid

trophoblast: the cell layer; forms placenta, embryonic membrane, etc.
blastocele: the fluid-filled cavity inner cell mass: will become the embryo

proper

pluripotent: at this point, the cells can differentiate into many different cell types but not all

Day 7: Implantation

implantation: day 7; inner cell mass is oriented towards the uterine endometrium; allows formation of placenta and sharing of nutrients

uterine endometrium: wall closest to the cavity of the uterus; thick and vascular at time of implantation

Days 8-12: Differentiation

syncytiotrophoblasts: invade into uterine wall and digest some of the blood cells to create a blood connection

multinucleated: lose their plasma membranes and mush together

human chorionic gonadotropin hormone: released into maternal blood supply to stop menstrual cycle; also detectable in urine

cytotrophoblasts: maintain a wall between the maternal blood and the embryo proper

Days 14-20

connecting stalk: embryo proper forms a connecting stalk between it and the placenta; eventually becomes the umbilical cord

cytotrophoblasts: start to form finger-like projections

syncytiotrophoblasts: digest walls of the maternal arterioles

lacuna(e): pools of maternal blood used as a supply of nutrients and oxygen for the embryo

Month 1

cytotrophoblast chords: form from the projections; surround the syncytiotrophoblasts and lacunae to prevent maternal/embryonic blood mixing embryo: starts making its own blood and blood vessels

extraembryonic mesoderm cells: start building extra blood cells outside the embryo

primitive chorion: syncytiotrophoblast,
cytotrophoblast, extraembryonic
mesoderm

developing placenta: primitive chorion, lacunae, endometrium

Mature Chorion

chorion: created by chorionic villi to separate maternal/embryonic blood, made of syncytiotrophoblasts and a thin basement membrane around the fetus chorionic villi: fill in with blood vessels from the fetus, surrounded by lacuna; connected to fetus via umbilical cord

umbilical arteries: carry deoxygenated blood
away from fetus's heart
umbilical veins: carry oxygenated blood

toward fetus' heart

4: Embryology II

Bilaminar Embryonic Disk

inner cell mass: organized into two chambers surrounded by cells; similar to two balloons squished on top of another epiblast: top layer; will become the embryo hypoblast: lower layer; will help form some extraembryonic tissues

amniotic sac/amnion: layer of cells above the hypoblast; will eventually surround the whole embryo

yolk sac: not important in humans; gets smaller as important things happen extraembryonic tissues: hypoblast cells, amniotic sac, and syncytiotrophoblast contribute to these

Days 13-14: Gastrulation

gastrulation: differentiation of the epiblast into 3 germ layers

primitive streak: cells proliferate in the epiblast to form a thickened layer of cells; forms closer to the caudal end

endoderm: cells move to the hypoblast and take over; eventually forms the digestive system and lungs

mesoderm: cells sandwich between endoderm and epiblast; eventually form the blood supply, bones, and muscle ectoderm: cells stay where they were; eventually form the skin and nervous system

trilaminar embryonic disk: endoderm, mesoderm, and ectoderm; forms between the epiblast and hypoblast

Day 16-18: Notochord

notochord: solid cells from the mesoderm forming a cylinder under the ectoderm; involved in induction to signal the thickening of the neural plate neural plate: thickened region of the ectoderm; primitive version of the CNS oropharyngeal membrane: thinner region on the cephalic side; becomes the mouth cloacal membrane: thinner region on the caudal side; becomes the anus

Days 18-26: Neural Tube

neural folds: lateral ends of neural plate begin to rise

neural groove: formed by neural folds; begins in midline and moves towards cephalic and caudal ends

neural crests: formed from neural folds as they get higher; start moving together neural crest cells: cells in the region of the crests that start to break off as the crests come together

neural tube: cylinder is closed and eventually becomes spinal cord and brain; top layer becomes skin, crests form sensory and post-ganglionic autonomic portions of the PNS, as well as some connective tissue in the head somites: formed from the mesoderm layer alongside the neural tube; eventually become vertebral column, ribs, and some skeletal muscle