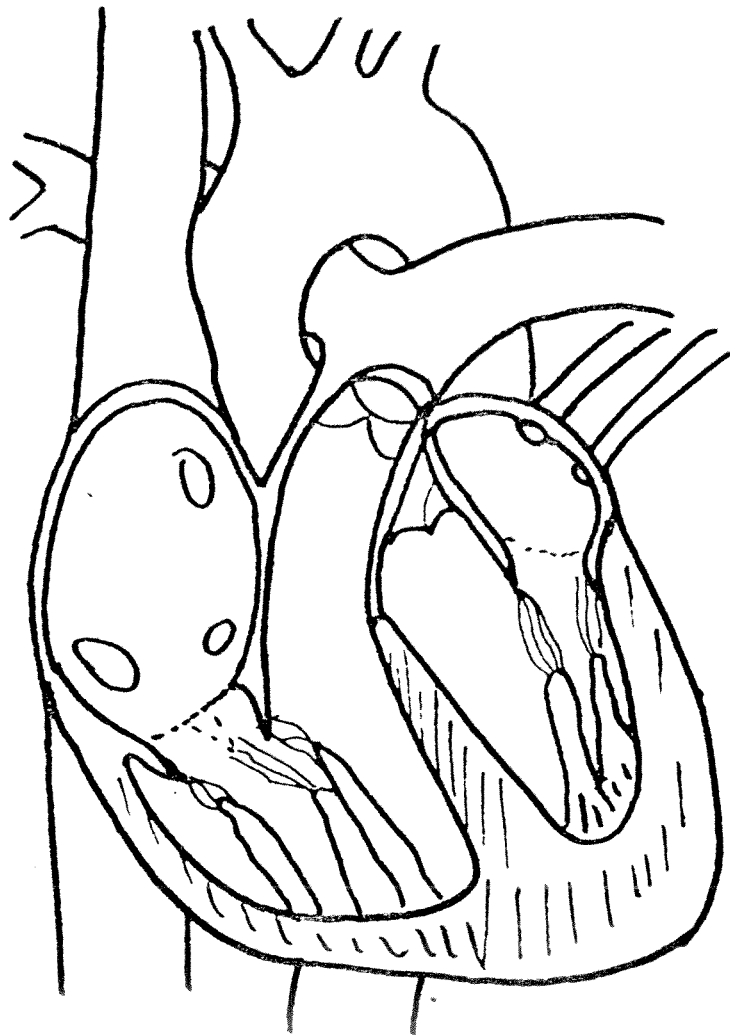


# ANATOMY

DR. KATHERINE T. SCHMEIDLER





**INTRODUCTION:** While a particular text may be officially recommended text for this course from time to time, any good anatomy text **organized systemically** (not regionally) will suffice. It is assumed that each student has access to some equivalent text (see instructor if you are not sure), and the supplementary materials included here have been chosen with this in mind. This handout includes many of the illustrations that will be used during lecture as well as an abbreviated outline of the topics covered and *most* of the vocabulary words. The intent is that this will enable the student to spend more time listening and thinking, since much of the drawing and spelling will have been done. Therefore, it is recommended that this handout be brought to lecture and be used as a reference and guide while taking notes. However, it is a **supplement**, not a substitute for lecture notes.

The course requirements will be described in lecture, and exams will be based primarily on material covered in lecture, although some reading assignments will be included as well. As you consult your syllabus or handouts, do not consider chapter references to be exhaustive but rather use them as a guide to the first place to look for information. You might want to use other source material in the library for instance. There are many excellent Anatomy texts and atlases. Do not limit yourselves to any one source.

*what is anatomy?*

**TERMINOLOGY:** Anatomy, by its nature, involves a large vocabulary as we attempt to have a specific, precise name for each identifiable structure or component of a structure. We also must have precise vocabulary for describing the relative positions, shapes, and in some cases movements and functions of these structures. In order to increase the precision of these descriptions, we have developed a specialized vocabulary. In many cases the etymology of a word will help decipher its meaning (e.g. in "muscular dystrophy" dystrophy comes from "dys" - faulty + "trophe" - nourishment; "myasthenia gravis": "mys" - muscle + "astheneia" - weakness + "gravis" - heavy). Often your text elaborates these explanations; other good sources are medical dictionaries and other anatomy textbooks. You are responsible for the terminology used this semester but the etymology (the explanations) are for your benefit only.

Throughout the semester, the handouts will include much of the required vocabulary, but the handouts are **not** intended to be exhaustive. Any material covered in lecture or cited in your textbook is to be considered "required".

**You are responsible for proper grammar e.g. proper singular and plural forms, distinguishing nouns from adjectives, spelling, etc.**

**BODY ORGANIZATION:**

#### A. DIRECTIONS and RELATIVE POSITIONS

anatomical position

dorsal - ventral (palmar, plantar)

anterior - posterior

superior - inferior

proximal - distal

superficial - deep

medial - lateral (median, paramedian sagittal planes)

sagittal - coronal (vertical) - transverse (horizontal)

internal - external

parietal - visceral

ipsilateral - contralateral

supine - prone

extension - flexion

abduction - adduction - opposition

medial rotation - lateral rotation (supination - pronation)

circumduction

inversion - eversion

protraction - retraction

B. REGIONS: body cavities; axial - appendicular; membranes;  
dermatomes

C. SYSTEMIC ORGANIZATION: cell - tissue - organ - system

D. OVERVIEW

fascia(e)

membranes: serous

mucous

synovial

cutaneous

nervous system

central - peripheral

somatic - autonomic

sympathetic - parasympathetic

endocrine system

exocrine

skeletal system

bone

cartilage

muscle

skeletal

cardiac

smooth

joints

fibrous - cartilaginous - synovial

ligaments - tendons - bursae

circulatory system - cardiovascular system

blood vessels

heart

lymphatics

respiratory system

digestive system - alimentary canal - gastrointestinal tract

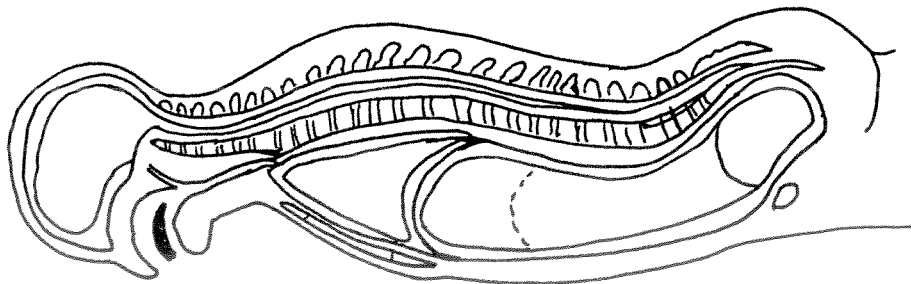
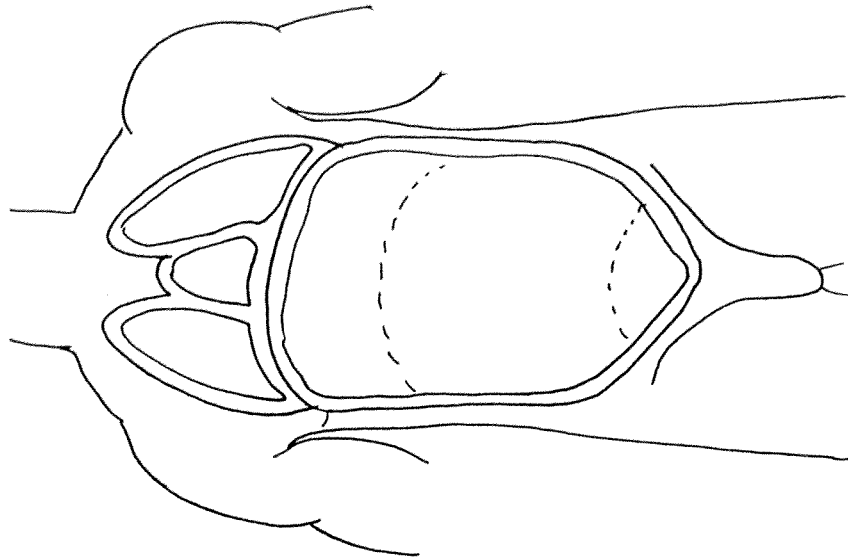
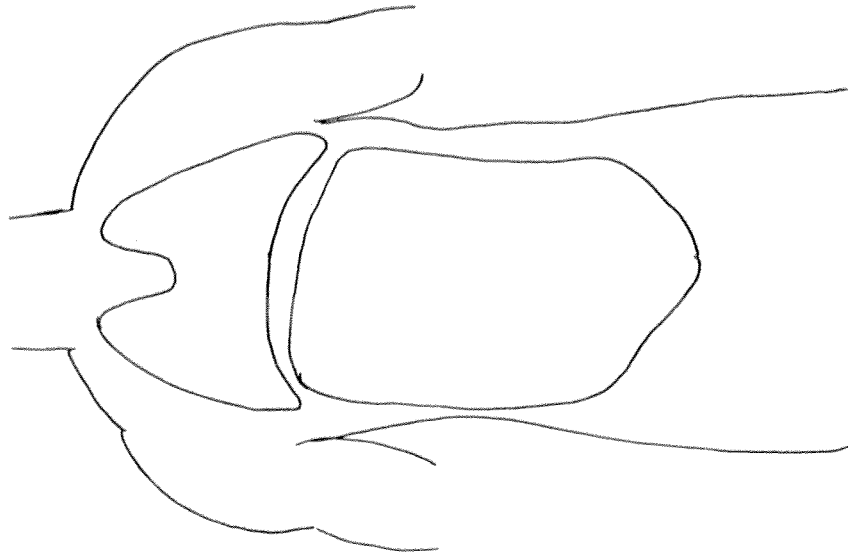
urogenital systems

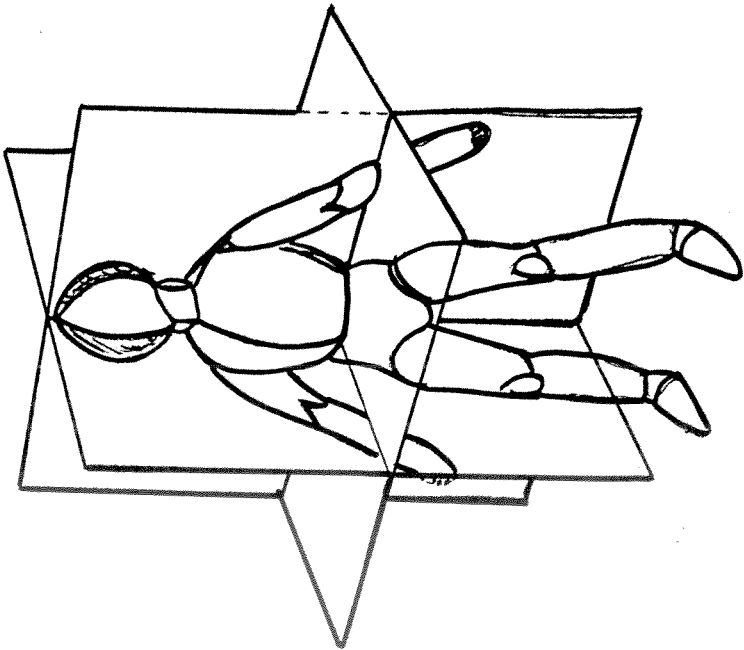
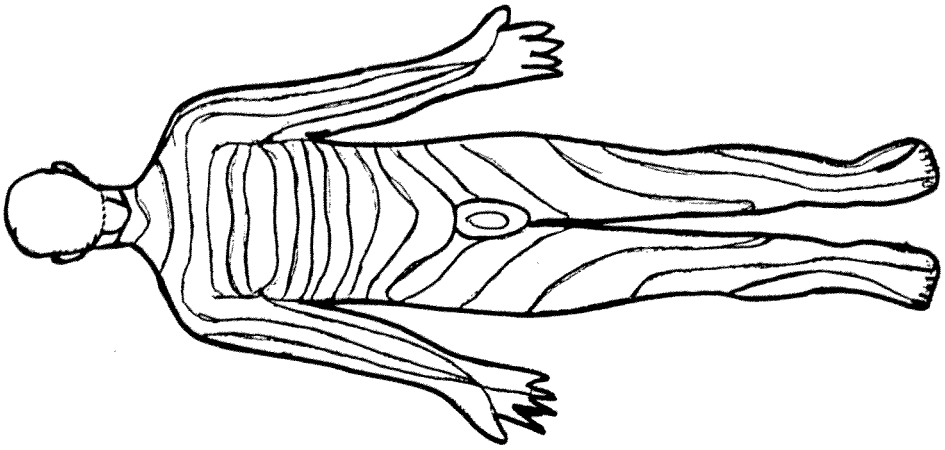
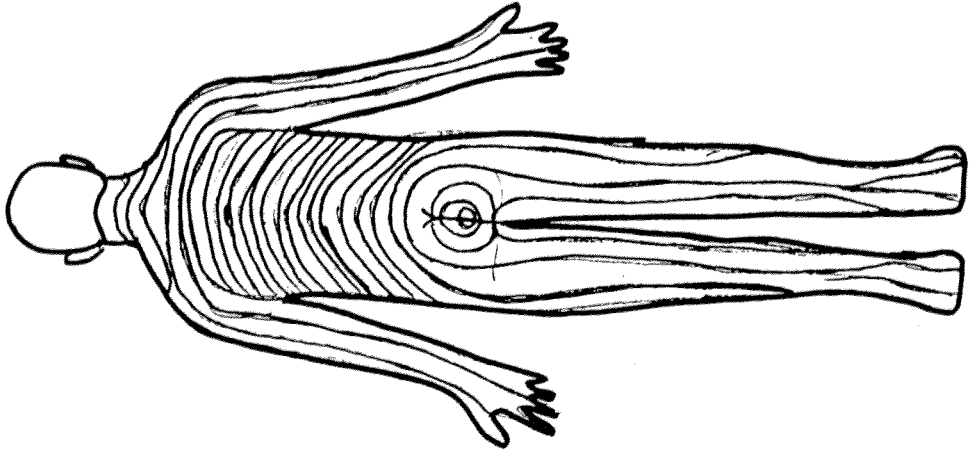
urinary tract

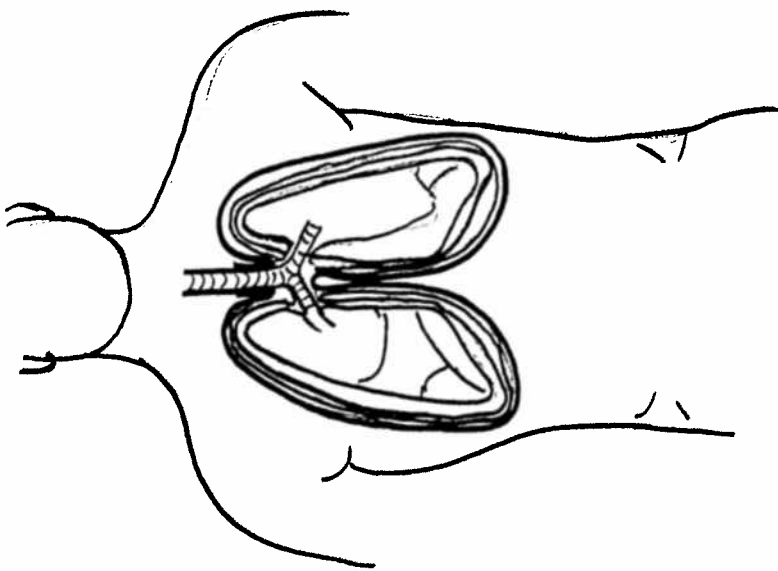
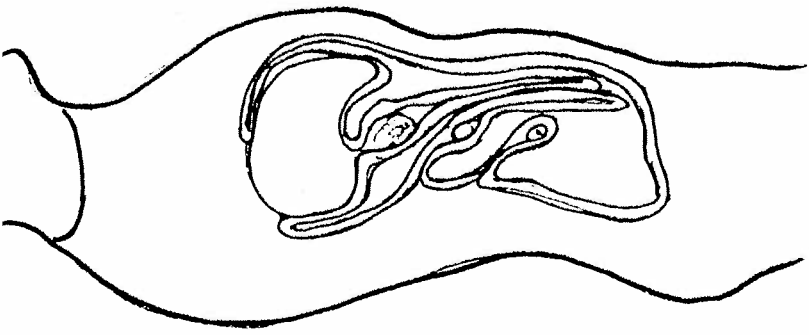
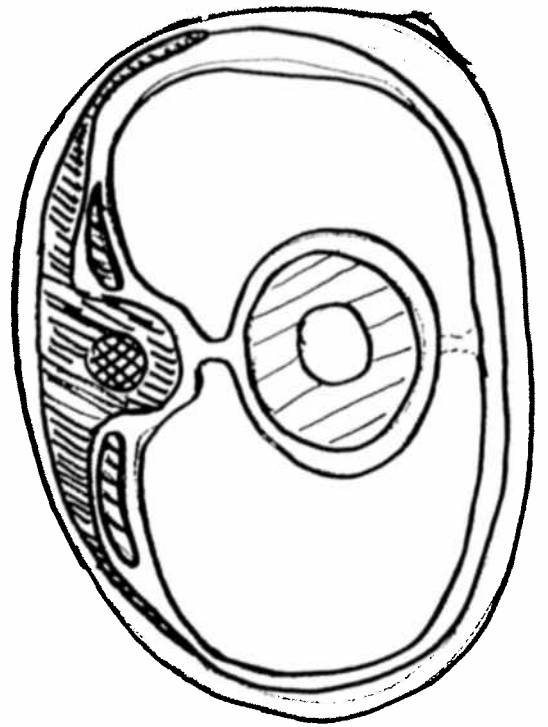
reproductive systems: ♂ -- ♀

gonad

gamete







MICROANATOMY

## PLASMA MEMBRANE - PLASMALEMMA

phospholipid bilayer -- cholesterol  
 integral membrane proteins; peripheral proteins  
 fluid mosaic model

receptor, signal, anchor, enzyme, channel

- boundary - encloses & protects contents; separates in & out!! \*life!\*
- cell shape, locomotion; endocytosis & exocytosis; cell division, etc
- receptor sites
- enzyme anchorage (inside & outside)
- selective permeability
  - diffusion; osmosis -- concentration gradient
  - carrier-mediated diffusion - "facilitated"
  - active transport
  - endocytosis (phagocytosis, pinocytosis) & exocytosis

## CYTOPLASM = CYTOSOL

## NUCLEUS

nuclear envelope, nucleoplasm, nucleolus, chromatin

## MITOCHONDRION/ \_\_IA

## ENDOPLASMIC RETICULUM

- ROUGH
- SMOOTH

## GOLGI COMPLEX (APPARATUS)

## LYSOSOMES

## RIBOSOME

## CYTOSKELETON

microfilament = actin  
 intermediate filament  
 microtubule = tubulin

## CENTRIOLE (BASAL BODY) -- cilia; flagella

other inclusions such as glycogen, lipid, melanin, specialized structures, etc.

## EXTRACELLULAR MATRIX = ECM

## CELL DIVISION = MITOSIS: prophase, metaphase, anaphase, telophase + CYTOKINESIS

MEIOSIS: prophase, metaphase, anaphase, telophase I & II

somatic cells -- germ cells = gametes = sperm & ovum/a = egg -- fertilization



TISSUES:

## I. EPITHELIUM/ \_\_IA

apical, basal

junctions: tight junctions

intermediate junction -- terminal web

desmosome -- tonofilaments

hemidesmosomes

gap junction

basement membrane = basal lamina + reticular lamina

A. simple: one cell layer thick

B. stratified: &gt;1 " "

C. pseudostratified (columnar only)

&gt;&gt; glandular epithelia - a class of its own &lt;&lt;

1. squamous: flattened cells

2. cuboidal

3. columnar

4. transitional (stratified only)

A1. simple squamous epithelium

A2. simple cuboidal epithelium

A3. simple columnar epithelium

B1. stratified squamous epithelium: keratinized -- non-keratinized

B2. stratified cuboidal epithelium

B3. stratified columnar epithelium

B4. transitional epithelium - umbrella cells

C. pseudostratified columnar epithelium:  $\pm$  ciliatedD. glandular epithelia : *mucous* (--> mucus-type secretion) or *serous* (--> watery secretion)

ENDOCRINE = ductless \ \ EXOCRINE = ducted

unicellular e.g. goblet cells

multicellular: tubular; acinar (flask-like); tubuloacinar \ \ branched = compound or simple

holocrine

merocrine

apocrine

## II. CONNECTIVE TISSUE [CT]

cells:

1. fibroblast

2. macrophage &lt;-- monocyte

3. plasma cells &lt;-- B-lymphocytes

4. mast cells: heparin = anti-coagulant, &amp; probably serotonin &amp; histamine = vasodilators

5. adipocytes

6. leucocytes = WBC

7. erythrocytes = RBC

ECM:

ground substance: hyaluronic acid; chondroitin sulfate; dermatan sulfate, keratan sulfate, etc

+ fibers: collagenous  
 elastic  
 reticular

Classes of CT:

I. embryonic: mesenchyme = fluid ground substance; mucous CT = gel or viscous ground substance

II. mature CT's:

## a. FIBROUS CT

1. loose fibrous CT:

- a. areolar CT
- b. adipose -- "signet ring"
- c. reticular

2. dense fibrous CT

- a. regular
- b. irregular
- c. elastic (yellow CT)

## b. CARTILAGE -- chondrocyte (chondroblast = immature)

lacuna(e)  
 perichondrium  
 appositional -- interstitial growth

1. hyaline: most common: amorphous matrix; smooth, shiny

2. fibrocartilage

3. elastic cartilage

## c. BONE = OSSEOUS TISSUE -- osteoblasts -- osteocytes -- osteoclasts

lacuna(e)  
 canaliculi  
 hydroxy(l)apatite = mostly calcium phosphate + calcium phosphate  
 spongy bone -- compact bone  
 intermembranous or enchondrous growth  
 remodeling

Haversian system = osteon

Haversian = central canal

Volkman's = perforating canal

d. BLOOD = RBC + WBC + PLASMA

e. MUSCLE: SMOOTH, STRIATED = CARDIAC + SKELETAL

f. NERVOUS & GLIAL TISSUES

## INTEGUMENTARY SYSTEM (SKIN)

integument - largest organ = skin + structures derived from it  
epidermis

hair & follicles  
glands - sebaceous, sweat  
nails - bed, root, fold

### EPIDERMIS

keratinocyte  
melanocyte  
non-pigmented granular dendrocytes  
= Langerhans' cells  
& Granstein cells

### layers:

Stratum basale = germinativum  
S. Spinosum  
S. Granulosum  
S. Lucidum - eleidin  
S. Corneum

### DERMIS

-- papillary region  
\*\* Meissner's corpuscles  
-- reticular region  
sebaceous glands  
sweat = sudoriferous gland ducts  
arrector pili  
Pacinian corpuscles

### *sudoriferous glands:*

- (a) eccrine
- (b) apocrine
- (c) ceruminous
- (d) mammary

### HYPODERMIS (SUBCUTANEOUS)

color:

melanin (melanocytes)  
carotene  
hemoglobin (red blood cells)

surface patterns

flexion lines & creases  
friction ridges (fingerprints)  
lines of cleavage

BLOOD SUPPLY: cutaneous plexus & papillary plexus

