THE LIVER AND BILIARY SYSTEM

Learning Objectives

Upon completion of this session, the student will be able to:

- 1. Recognize parts of the liver and describe the relationships of its portal venous, hepatic arterial and hepatic venous circulation.
- 2. Identify the structures passing into and out of the porta hepatis.
- 3. Describe the anatomy of the biliary system.
- 4. Explain the peritoneal relationships of the liver and gallbladder.
- 5. Clarify the discrepancy between the external lobulations of the liver and the internal segmentation of the liver based on the branching of the intrahepatic arteries, veins, and ducts.
- 6. Identify the normal appearance of the liver, pancreas, gall bladder and biliary system in ultrasound and other imaging modalities. Outline the diagnostic features of gallstones, liver and pancreatic space occupying lesions.

Required Materials

- Cadaver/ Model of Abdomen/ Abdominal Cavity and Liver
- Handouts/ Atlases of Human Anatomy
- Visual and Electronic Media
- Images

Instructions:

- There are 3 stations of activities in this practical.
- When you have completed a particular task you should put a tick in the box before to it, the group's supervisor can question you about it and expect a correct answer.
- Keep these sheets for future reference and revision.
- Make sure that you answer the questions at the end of the activities.

STATION 16.1

	tify that the <i>liver</i> is the largest gland in the body lies in the right upper drant of the abdomen.	
Locate the <i>falciform ligament</i> , observable on the front of the liver, divides the liver into a left and a much larger right lobe.		
Note that the liver has a convex <i>diaphragmatic surface</i> (anterior, superior, and some posterior), which is covered with visceral peritoneum, except posteriorly in the <i>bare area of the liver</i> .		
or).	Note that the liver has a flat or concave <i>visceral surface</i> (postero-inferior). Note that from the visceral surface, the two additional lobes are located between the right and left lobes, which are the <i>caudate</i> and <i>quadrate</i> .	
In th	e visceral surface identify the followings:	
	Ligamentum venosum and the round ligament of the liver (ligamentum teres).	
	An important anatomical landmark, the <i>porta hepatis</i> (hilum).	
	Inferior vena cava.	
	Gallbladder fossa.	

(Figure 16.2.1)

	Colic impression , formed by the hepatic flexure.
	Renal impression accommodating part of the right kidney.
	Suprarenal impression it lodges the right suprarenal gland.
	Duodenal impression for duodenum.
	Gastric impression for stomach plane that divides the liver functionally into right and left lobes runs from ight side of the gall bladder towards the right side of the inferior vena cava.
Loca	te the structures within the hilum of the liver:
	Hepatic artery to the left and its right and left branches.
	Common bile duct lies to the right side of the artery. It is formed from the union of the common hepatic duct and the cystic duct.
	Portal vein lies posteriorly.
Obs	erve the peritoneal covering of the liver and locate the following:
	Upper coronary ligament: covers the area from the upper border of bare area of liver and the undersurface of diaphragm.
	Lower coronary ligament: starts from the lower border of bare area of liver and continuous by combining with the right layer of lesser omentum.
	Right triangular ligament: located at the right limit of the bare area, and is a small fold that passes to the diaphragm, being by the union of the upper and lower layers of the coronary ligament.
	Left triangular ligament: connects the posterior part of the upper surface of the left lobe of the liver to the diaphragm; its anterior layer is continuous with the left layer of the falciform ligament.
	N 16.2 LIARY SYSTEM

Identify the gall bladder lies in its fossa on the visceral surface and is com-

posed of a fundus, body, neck, and cystic duct.

Observe the *fundus of the gall bladder* that approaches the surface behind the anterior end of the ninth right costal cartilage close to the lateral margin of the rectus abdominis muscle.

Identify the *cystic duct* joins with the *common hepatic duct* to form the *common bile duct*.

Identify the *cystic artery*, which is a branch from the *right hepatic artery*.

Observe an important descriptive triangle is formed by the common hepatic duct, cystic duct, and the surface of the liver that usually has the cystic artery running across it. It is known as *Callot's* triangle.

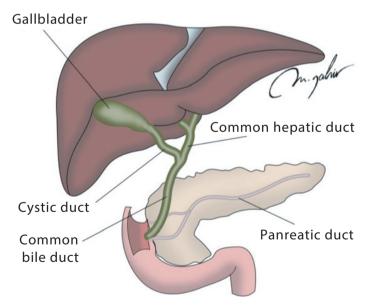


Fig. 16.2.1 Anatomy of the biliary system

STATION 16.3

IMAGING

(Figure 16.3.1 - 16.3.3)

- Identify the liver, stomach, pancreas, spleen, kidneys, aorta, crura, inferior vena cava, portal vein and suprarenals in Fig 16.3.1.
- Identify the liver and GB. Note the acoustic shadow of the large gallstone in Fig.16.3.2.
- Identify the liver, spleen, aorta, inferior vena cava, stomach and crura in Fig.16.3.3.



Fig. 16.3.1 CT upper abdomen



Fig.16.3.2 Ultrasound of the liver and GB

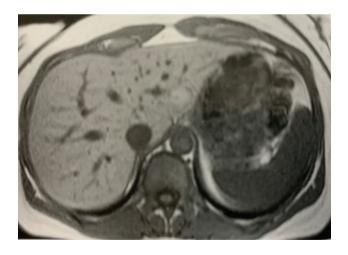


Fig. 16.3.3 MRI liver and spleen. Idenity: liver, aorta, crura, inferior vena cava, spleen, stomach

PRACTICAL 16

Questions

- 1. Name the surfaces of the liver?
- 2. From which peritoneal fold in the fetus are the falciform ligament and lesser omentum formed?
- 3. What structures are present in the porta hepatic?
- 4. What is the relationship of the I.V.C. to the liver?
- 5. Where is the "bare area" of the liver?
- 6. What are the peritoneal ligaments of the liver?
- 7. What are the components (parts) of the extra-hepatic biliary system?
- 8. Name the parts of the gallbladder.
- 9. What are its main relations?
- 10. What is the surface marking of the fundus of gall bladder?
- 11. Where and how is the common bile duct found?
- 12. Trace the course of the common bile duct to its termination in the duodenum.
- 13. Where are the most probable anatomical sites for obstruction in the biliar system?

THE PANCREAS, SUPRARENAL AND THYROID GLANDS

Learning Objectives

Upon completion of this session, the student will be able to:

- 1. Identify and describe the parts of the pancreas and their peritoneal relationships.
- 2. Describe the vascular supply of the pancreas.
- 3. Trace the pathway and entry of the bile ducts and pancreatic ducts into the 2nd part of the duodenum.
- 4. Explain the relationships of the suprarenal glands to adipose and facial coverings, lower ribs and other abdominal organs.
- 5. Identify the blood supply and venous drainage of the suprarenal glands.
- **6.** Identify the thyroid gland and describe its specific features.
- 7. Identify the parathyroid glands.
- 8. Consider the thyroid/parathyroid gland relationship in terms of vascular supply and surgical intervention.
- 9. Identify and describe the contents of the carotid sheath and their relationships with surrounding structures.
- 10. Locate the pituitary gland and pineal gland and describe their specific features.
- 11. Identify the endocrine organs

Required Materials

- Cadaver/ Abdominal Cavity/ Brain/ Sagittal Section of the Brain
- Handouts/ Atlases of Human Anatomy
- Visual and Electronic Media
- Images.

Instructions

- There are 5 stations of activities in this practical.
- When you have completed a particular task you should put a tick in the box before to it, the group's supervisor can question you about it and expect a correct answer.
- Keep these sheets for future reference and revision.
- Make sure that you answer the questions at the end of the activities.

STATION 17.1

PANCREAS

Not	iceable that the main source of digestive enzymes in the body is the pancreas.		
Locate the <i>pancreas</i> mostly posterior to the stomach. It extends across the <i>posterior abdominal wall</i> from the duodenum to the spleen.			
	Review the shape and parts of the pancreas: <i>head, uncinate process, neck, body</i> and <i>tail.</i>		
Review the peritoneal arrangement of the pancreas and its relation to the lesser sac (the posterior wall of the lesser sac is formed by the peritoneum that covers the diaphragm, pancreas, left kidney and suprarenal gland, and duodenum).			
Identify the principal structures related to the pancreas:			
	Diaphragm.		
	Duodenum.		
	Spleen.		
	Abdominal aorta.		
	Inferior vena cava.		
	ntify the <i>main</i> and <i>accessory pancreatic ducts</i> , and their termination in duodenum, including related <i>sphincter</i> of <i>pancreatic duct</i> .		
Review the arterial supply of the pancreas:			

		Splenic artery supplies neck , body and tail .
		Superior and inferior pancreaticoduodenal arteries supply head.
	Revi	ew that the venous return into the:
		Splenic vein.
		Superior pancreaticoduodenal vein into the portal vein
		Inferior pancreaticoduodenal vein into the superior mesenteric vein.
	Revi	ew the lymphatic drainage of the pancreas:
		Head of the pancreas drains into pancreaticoduodenal lymph nodes, pre- pyloric and postpyloric lymph nodes.
		<i>Pancreatic body</i> and <i>tail</i> drain into mesocolic lymph nodes (around the middle colic artery) and into lymph nodes along the hepatic and splenic arteries.
		Last drainage follows the celiac, superior mesenteric, and <i>para-aortic</i> and <i>aortocaval</i> lymph nodes.
	teric	e that the pancreas receives <i>parasympathetic</i> nerve fibers from the posor vagal trunk via its celiac branch. While, <i>sympathetic</i> supply arises from 10 via the thoracic splanchnic nerves and the celiac plexus.
STA	ATIO	N 17.2
SU	PRA	RENAL (ADRENAL) GLANDS
	whice adre	e that the <i>adrenal glands</i> (suprarenal glands, colloquially, kidney hats), the are endocrine glands that locate at the upper of the kidneys; the right enal gland is triangular in shaped, while the left adrenal gland is semilunar naped.
	Noti	ce that the glands are surrounded by an adipose capsule and renal fascia.
		ew the blood supply of the adrenal glands, three arteries that supply adrenal gland:
		Superior suprarenal artery: from the inferior phrenic artery.

		Middle suprarenal artery: from the abdominal aorta.
		Inferior suprarenal artery: from the renal artery.
	Vend	ous drainage of the adrenal glands is done via the suprarenal veins:
		Right suprarenal vein: drains into the inferior vena cava.
		Left suprarenal vein : drains into the left renal vein or the left inferior phrenic vein.
	corte	e that the adrenal glands consist of an outer connective tissue <i>capsule</i> , a <i>ex</i> and a <i>medulla</i> . Veins and lymphatics leave each gland via the <i>hilum</i> , arteries and nerves enter the glands at numerous sites.
STA	TIOI	N 17.3
TH	YRO	ID GLAND
	two	tify the <i>thyroid gland</i> , is an endocrine gland in the neck, and consists of <i>lobes</i> connected by an <i>isthmus</i> . It is found at the front of the neck, below Adam's apple.
	mus	e that the thyroid has an anterolateral surface covered by the <i>infrahyoid</i> cles and the sternocleidomastoid muscle and a medial surface facing trachea and esophagus.
	lden	tify the following structures of the thyroid glands:
		Right and left lobes joined by a central isthmus. The upper limit of the lobes reaches to the <i>oblique line on the lamina of the thyroid cartilage</i> and inferiorly to the level of the <i>sixth tracheal ring</i> .
		Isthmus overlies the second, third, and fourth tracheal rings.
	glan	te on the posterior aspect of the gland are situated four parathyroid ids . These are usually difficult to see because they are small and have a r similar to that of the gland.
	lden	tify the arterial supply of the gland:
		Superior thyroid artery of the external carotid artery .

	Inferior thyroid artery of the first part of the subclavian artery.
	The gland has three veins: the superior, middle, and inferior thyroid veins. The superior and middle empty in the internal jugular vein while the inferior will empty in the left brachiocephalic as it crosses from left to right.
	Lymphatic drainage of the thyroid gland flows multidirectionally to the: <i>prelaryngeal</i> , <i>pretracheal</i> , and <i>paratracheal</i> nodes along the <i>recurrent laryngeal</i> nerve and then to mediastinal lymph nodes.
	Identify the two important nerves which are related to the gland and both supply the laryngeal muscles:
	Superior laryngeal nerve.
	Recurrent laryngeal nerve.
ST/	TION 17.4
PIT	JITARY GLAND AND PINEAL GLAND
PIT	JITARY GLAND AND PINEAL GLAND Identify the <i>pituitary gland</i> , which is a pea-sized gland that lies in a protecting bony enclosure called the sella turcica.
PIT	Identify the <i>pituitary gland</i> , which is a pea-sized gland that lies in a protect-
PIT	Identify the <i>pituitary gland</i> , which is a pea-sized gland that lies in a protecting bony enclosure called the sella turcica.
PIT	Identify the <i>pituitary gland</i> , which is a pea-sized gland that lies in a protecting bony enclosure called the sella turcica. It is composed of three lobes:
PIT	Identify the <i>pituitary gland</i> , which is a pea-sized gland that lies in a protecting bony enclosure called the sella turcica. It is composed of three lobes: Anterior.
PIT	Identify the <i>pituitary gland</i> , which is a pea-sized gland that lies in a protecting bony enclosure called the sella turcica. It is composed of three lobes: Anterior. Intermediate.

STATION 17.5

IMAGING

(Figure 17.5.1 - 17.5.3)

- Identify the pituitary fossa in Fig.17.5.1.
- Identify the thyroid lobes, isthmus and the trachea in Fig.17.5.2.
- ☐ Identify the adrenal glands in Fig.16.3.1.
- Identify the pancrea, liver, aorta and crura in Fig.17.5.3.

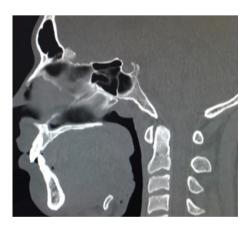


Fig. 17.5.1 CT skull showing the pituitary fossa

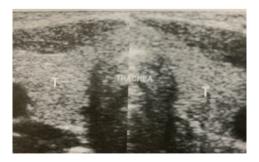


Fig. 17.5.2 Thyroid US. Identify: trachea, thyroid lobe and isthmus, strap muscles



Fig. 17.5.3 CT MRI Pancreas and liver, note simple cyst in left kidney Identify: aorta, crura, kidneys, liver, spleen, head, body and tail of pancreas

Questions

- 1. What is the relation of the pancreas to structures on the posterior abdominal wall?
- 2. Where does the tail of pancreas lie? In which peritoneal fold it found?
- 3. What is the blood supply to the pancreas?
- 4. Where is the adrenal gland located?
- 5. What is the function of the adrenal gland?
- 6. What is the lymphatic drainage of the adrenal gland?
- 7. Where is the thyroid gland located?
- 8. What is the blood supply of the thyroid gland?
- 9. What is the lymphatic drainage of the thyroid gland?

RENAL SYSTEM UPPER AND LOWER URINARY TRACTS

Learning Objectives

Upon completion of this session, the student will be able to:

- 1. Identify the posterior abdominal wall muscles, the nerves and vascular supply, and their significant function.
- 2. Describe the vertebral level for all branches of the abdominal aorta and the inferior vena cava.
- 3. Describe the formation of the lumbar plexus and its relationship to the posterior abdominal wall muscles.
- 4. Explain the relationships of the kidneys and suprarenal glands to adipose and facial coverings, lower ribs and other abdominal organs.
- 5. Describe the anatomy of the kidney.
- 6. Describe the blood supply and venous drainage of the kidneys.
- 7. Identify the ureter and notice it is formation, passway, constrictions, and terminations.
- 8. Observe the urinary bladder in either its expanded or contracted position, and determine the extent of its peritoneal covering.
- 9. Recognize the internal orifices of the bladder and differentiate the trigone region from the rest of the bladder lining.
- 10. Define the relationships of the bladder to other pelvic organs in both sexes.
- 11. Identify the urethra and differentiate between male urethra and female urethra.
- 12. Identify the renal cortex, medulla and pelvis in ultrasound images.
- 13. Identify the major and minor calices, renal pelvis, ureter, bladder and urethra in IVU images.

14. Describe the relationship between the kidneys, diaphragmatic crura, adrenals and blood vesses in axial CT images passing through the kidneys

Required Materials

- Cadaver/ Abdominal Cavity/ Transverse Section of the Kidney/ Demonstration for the Nephron of the Kidney/ Sagittal Section of Male & Female Pelvis
- Handouts/ Atlases of Human Anatomy
- Visual and Electronic Media
- Images.

Instructions

- There are 4 stations of activities in this practical.
- When you have completed a particular task you should put a tick in the box before to it, the group's supervisor can question you about it and expect a correct answer.
- Keep these sheets for future reference and revision.
- Make sure that you answer the questions at the end of the activities.

STATION 18.1

KIDNEY BED AND POSTERIOR ABDOMINAL WALL:

(Figure 18.1.1)

KIDNEY BED

Locate the structures forming kidney bed:		
	Psoas major.	
	Quadratus lumborum.	
	Transverses abdominis.	
	Diaphragm.	

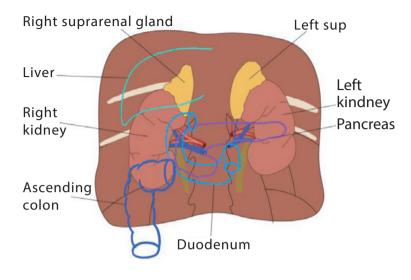


Fig. 18.1.1 Kidney bed

Lumbar plexus

Lui	IIDai	piekus
	abdo	tify the branches of the lumber plexus which appear in the posterior or or minal wall and they emerge either medial or lateral to psoas major or ugh its anterior surface:
		Medial: obturator nerve (L2, 3,4), lumbo-sacral trunk (L4, 5)
		Lateral: ilio-inguinal, ilio-hypogastric (L1), lateral cutaneous nerve of thigh (L2,3), femoral nerve (L2,3,4)
		Anterior: genito-femoral nerve (L1, 2)
		e that subcostal nerve, ilio-inguinal and ilio-hypogastric nerves lie be- kidney in the " kidney bed ".
AB	_	INAL AORTA that the abdominal aorta has two groups of branches

- Single Branches
 - Coelic artery
 - Left gastric.

☐ Splenic.
Short gastric arteries.
Splenic arteries.
Left gastroepiploic.
☐ Common hepatic.
☐ Cystic.
Right gastric.
☐ Gastroduodenal.
Right gastroepiploic.
Superior pancreaticoduodenal.
Right hepatic.
Left hepatic.
Superior mesenteric artery
Jejunal and ileal arteries.
Inferior pancreaticoduodenal.
Middle colic.
Right colic.
☐ Ileocolic.
☐ Anterior cecal.
Posterior cecal (appendicular).
□ lleal.
☐ Colic.
Inferior mesenteric artery
Left colic.
Sigmoid arteries.
Superior rectal

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	☐ Median sacral artery
	Paired branches
	Phrenic arteries.
	Middle suprarenal arteries.
	Renal arteries.
	Gonadal arteries.
	Lumbar arteries.
	Common iliac arteries:
	External iliac.
	☐ Internal iliac.
CTATIO	W 40 2
STATIO	ON 18.2
KIDNE	Y: EXTERNAL AND INTERNAL FEATURES
side	tate the <i>kidneys,</i> which are a pair of organs located in the right and left e of the abdomen. The kidneys remove waste products from the blood and educe urine
	ntify the following in each kidney:
	Upper and lower poles.
	Anterior and posterior surfaces.
	Medial and lateral borders.
	Hilum that is located medially.
	The right kidney sits a little bit lower than the left one because it is being pushed by the right lobe of the liver.
	Each kidney has a suprarenal gland on its upper pole. The right suprarenal gland is pyramidal in shape while the left one is crescenteric in shape.
	The kidney and its suprarenal gland are enveloped in a fatty capsule called the perirenal fat or fascia of <i>Gerota</i> . However each one has a separate compartment inside this fascial envelope.

Observe that posteriorly the left kidney is related to the tenth, eleventh and twelfth ribs covered by the diaphragm and the right one related to the eleventh and twelfth ribs, both kidneys sitting on the psoas major muscle medially and the quadratus lumborum laterally.		
Observe that anteriorly the right kidney is related to the quadrate lobe of the liver, transverse colon and duodenum, while the left one is related to the lesser sac, pancreas and the spleen.		
Notice that the <i>hilum of the kidney</i> has the <i>renal vein</i> , <i>artery</i> , and <i>pelvis</i> in order from anterior to posterior but the branches of the artery may sometimes enter the kidney anterior to the vein.		
Observe in the isolated specimen whether the kidney is right or left: the hilum faces medial, the renal pelvis is posterior, and the ureter points down to the lower pole.		
In a sagittal section of the kidney identify the following:		
	Renal sinus (contains calyces, pelvis, blood vessels, and fat).	
	Outer zone: cortex that appears granular due to glomeruli.	
	<i>Inner zone</i> : medulla that appears striated due to presence of renal tubules.	
	Renal columns.	
	Renal pyramids	
	Renal papilla.	
	Major and minor calyces.	
Using the plastic model trace the branches of a Segmental branch of renal artery including the following arteries:		
	Interlobar.	
	Interlobular.	
	Arcuate.	

stones.

	☐ Intralobular.
	Afferent and efferent glomerular arterioles.
	Using the plastic model identifies the parenchyma of the kidney which is formed of the following:
	☐ Nephrons.
	☐ Collecting tubules.
	Notice that the nephron is formed of:
	Malpighian renal corpuscle which has the following parts:
	Bowmans capsule.
	Glomerulus of blood capillaries.
	Afferent and efferent arterioles.
	Proximal and distal convoluted tubules.
	Loop of Henle.
ST	ATION 18.3
UF	RETER: URINARY BLADDER AND URETHRA
UR	ETER
	Locate the ureter as it continues distally from the renal pelvis on the posterior abdominal wall, noting its relation to the psoas major and to the great vessels.
	Note that the ureter lies in 2 regions: posterior abdominal wall and pelvis. Locate where the ureter crosses the pelvic brim at the bifurcation of the common iliac artery.
	Note that ureter has three narrowing parts on its way to the urinary bladder

and these narrowing parts are common parts for the localization of urinary

Identify the first narrowed part is the pelvi-ureteric junction, the second is the crossing point of ureter to the iliac vessels and the third one is the point

where the ureter enters to the urinary bladder.

	Note its relation to ovary in female pelvis.	
	Note its relation to vas deferens in male pelvis.	
	Locate the ureter as it enters the bladder (intramural part)	
BL	ADDER	
	Locate the general position of the bladder in the pelvis including relation to pubic bones and symphysis pubis.	
	Note its shape is globular in the living, pyramidal in the cadaver and locate the following:	
	Superior, inferior and lateral surfaces Apex, base, neck and fundus Define relation of bladder to peritoneum. It covers only upper surface (fundus) and upper part of base. And note the following:	
	Recto-vesical pouch. Utero-vesical pouch. Note the close relations of bladder:	
	Female: uterus and vagina. Male: seminal vesicles, vas deferens, ejaculatory ducts and prostate. Locate point of entrance of ureters into base of bladder	
	Examine internal features of bladder:	
	Smooth trigone (triangular in shape) with entrance of ureters at supero-lateral angles and internal urethral orifice at inferior angle. Notice that immediately surrounding urethral orifice is bladder neck. Notice that the trigone area is fixed and does not expand as bladder fill rough (trabeculated) appearance of remainder of interior, particularly in the empty contracted bladder, due to underlying bundles of detrussor muscle.	
UR	THRA	
	Locate the 3 parts of the urethra in the male and compare their lengths:	
	Prostatic: traverses prostate.	
	Membranous: traverses urogenital diaphragm.	

Penile: in corpus spongiosum.
Locate membranous urethra passing through urogenital diaphragm. It is sur-
rounded by striated sphincter urethrae muscle and the chief control of uri-
nary continence. It is supplied by branches of the pudendal nerve (\$2,3,4).
Locate external urethral orifice and navicular fossa in male penile urethra.
Locate female urethra and compare its length with that in male.
Locate female external urethral orifice in vaginal vestibule.

STATION 18.4

IMAGING

(Figure 18.4.1 - 18.4.6)

Identify the liver, right kidney and diaphragm shown in ultrasound image in
Fig.18.4.1.

Idenity the vessels shown in Fig.15.2.2.

Identify the ureters and name the pelvicalyceal structures in Fig.18.4.2.

Identify the kidneys and relations shown in the coronal CT in Fig. 18.4.3 and 18.4.5.

Identify the vessels shown in Fig.18.4.5.

☐ Identify the urinary bladder and ueters shown in Fig.18.4.6.



Fig.18.4.1 U/S RT kidney and liver. Identify: diaphragm, liver, right kidney, psoas muscle

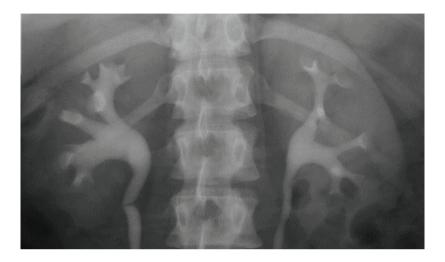


Fig. 18.4.2 Intravenous urography showing functional kidneys



Fig. 18.4.3 Coronal CT showing both kidneys, liver, spleen and psoas muscles



Fig. 18.4.4 Axial CT of kidneys



Fig. 18.4.5 MRA kidney and spleen arteries. Identify: aorta, renal, hepatic and splenic arteries.



Fig. 18.4.6 US urinary bladder. Identify: urinary bladder, ureters, rectal gas

Questions:

- 1. What are the localizations of right and left kidney?
- 2. What are the branches of renal artery in kidney?
- 3. What are the adjacent structures of the anterior and posterior surfaces of kidneys?
- 4. What are the structures found in the renal medulla and renal cortex?
- 5. Which vertebrae are lying parallel to the ureter till the ureter (abdominal part) passes to the pelvic inlet?
- 6. What are the important structures that are crossed by ureter?
- 7. What are the close relations of male and female urinary bladder?
- 8. What are the differences between male and female urethra?
- 9. Name the abnormalities seen in image 18.4.5

REPRODUCTIVE SYSTEM: PELVIS FRAMEWORK

Learning Objectives

Upon completion of this session, the student will be able to:

- 1. Demonstrate the bony framework of the pelvis.
- 2. Identify the two sciatic foramina and list the muscles, nerves, and vessels that pass through each.
- 3. Explain the origins of the piriformis and obturator internus muscles.
- 4. Identify the pelvic diaphragm and classify its components.
- 5. Trace the branches of the internal iliac vessels in both male and female; identify the branches by their relationships to pelvic organs.
- 6. Explain the formation of the sacral plexus, its relationship to the piriformis muscle and gluteal vessels.
- 7. Identify the boney parts of the pelvis framework in radiographs

Required Materials

- Cadaver/ Pelvis Framework/ Pelvic Cavity
- Handouts/ Atlases of Human Anatomy
- Visual and Electronic Media
- Images

Instructions

- There are 6 stations of activities in this practical.
- When you have completed a particular task you should put a tick in the box before to it, the group's supervisor can question you about it and expect a correct answer.
- Keep these sheets for future reference and revision.
- Make sure that you answer the questions at the end of the activities.

STATION 19.1

BONY FRAMEWORK OF PELVIS

Note that the bony pelvis is formed by the union of the two hip bones and teriorly at the symphysis pubis and posteriorly each hip articulates with the sacrum to from the pelvic girdle.	
Note that each hip bone consists of the three fused pelvic bones <i>ilium, ischum</i> and <i>pubis</i> .	
Locate the <i>acetabulum</i> , which is area where the three parts of hip bon fused.	
Within the <i>ilium</i> which lies superiorly identify the following:	
	Upper border of the ilium (<i>iliac crest</i>), which extends from the anterior superior iliac spine to the posterior superior iliac spine.
	Anterior border extent from the anterior superior iliac spine to the anterior inferior iliac spine.
	Posterior border of the ilium between the posterior superior and posterior inferior iliac spines.
	Gluteai lines from where the gluteai muscles take their origin.
	Iliac fossa from where the iliacus muscle originates.

With	nin the <i>ischium</i> which lies postero-inferiorly. Identify the following:
	Ischial body, the upper thick portion which joins with pubis and ilium at the acetabulum.
	Inferior ramus of the ischium joints the inferior ramus of the pubis (pubic arch) to enclose the obturator foramen.
	Spine of the ischium projects medially to divide the greater from the lesser sciatic notch.
	Ischial tuberosity is rough prominence, divides by ridges into areas to give attachment to many muscles of the back of the thigh.
	Obturator foramen is ringed by the sharp margins of the pubis and ischium.
With	in the <i>pubis</i> which lies anterio-inferiorly identify the following:
	Body of the pubis with superior ramus which join the ilium, ishcium at the acetabulum and inferior ramus which fuses with the ischium below the obturator foramen.
	Pubic crest and the pubic tubercle.
lden	tify the <i>sacrum</i> bone; it's triangular in shape, and locate the following:
	Its base lies in the upper border.
	Ala of the sacrum.
	Sacral promontory.
	Anterior surface , possess on each side four foramina to transmit the anterior rami of sacral nerves.
	Sacral canal that terminates at the caudal opening sacral hiatus.
	Posterior surface , possess on each side four foramina to transmit the posterior rami of the sacral nerves between the median crest.
Loca	ite the structure passes through the sacral canal :
	Dural sac.

		Sacral and coccygeal nerves.
		Filum terminate.
		tify the coccyx , which consist of four vertebrae fused together from a ll triangular bone.
ST/	OITA	N 19.2
FΕ	MAL	RENCES BETWEEN THE MALE AND E PELVIS
(Fig	ure 19	.2.1)
		erentiate between female and male pelvic framework, and recognize the owing:
		The female pelvis is more broad and flattened, whereas the male pelvis is taller and narrow (because the iliac crests are higher).
		In the female the pubic arch forms an obtuse angle (>90 degrees), whereas in the male pelvis the pubic arch forms a much more acute angle (v-shaped) (<90 degrees).
		The female pelvic inlet is more circular and wider, whereas the male pelvic inlet is narrower and heart shape.
		Female pelvis has a sacrum that is wider, shorter, and less curved, whereas male pelvis has a longer and narrower sacrum.
		Female pelvis' coccyx is flexible and straight, whereas the male pelvis' coccyx is projected inwards and immovable.
		In the female pelvis the obturator foramen is oval, whereas in the male pelvis is round.
	Perc	eive the types of female pelvis:
		Gynaecoid Pelvis: (is the proper female pelvic shape): has round pelvic inlet (allow normal child birth), shallow pelvic cavity, and short is chial spines.
		Anthropoid Pelvis: has oval shaped inlet, large anterioposterior diameter with relatively smaller transverse diameter and blunt ischial spine.

- Platypelloid Pelvis: has kidney shaped inlet and blunt ischial spine.
- Android Pelvis (possible in tall women): has triangular or heart-shaped inlet, narrower transverse outlet diameter and prominent ischial spines.

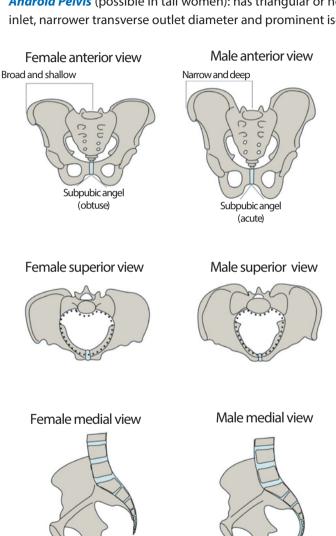


Fig. 19.2.1 Differences between female and male pelvis

STATION 19.3

PELVIC JOINTS AND LIGAMENTS

		ate the <i>sacroiliac joints</i> : which are strong synovial joints between the san and iliac bones, and identify the following ligaments:	
		Anterior sacroiliac.	
		Posterior sacroiliac.	
		Interosseous sacroiliac.	
		ate the <i>symphysis pubis</i> : is cartilaginous joint between the two public es no movement is possible.	
		Locate the sacro-coccygeal joint: is cartilaginous joint. A great deal of movement is possible at this joint.	
	Locate the sacro-tuberous ligament extends from the sacrum and coccyx and the posterior inferior iliac spine to the ischial tuberosity.		
		ate the <i>sacro-spinous ligament</i> triangular in shape; it's attached to the um and coccyx and to the ischial spine.	
		te the <i>obturator membrane</i> fibrous sheet closes the obturator foramening a small obturator canal for passage of obturater nerve and vessels.	
STA	ATIO	N 19.4	
PEL	_VIC	MUSCLES	
	Loca	te the <i>piriformis muscle</i> .	
		Origin: the front of the sacrum.	
		Insertion : through the greater sciatic foramen to the greater. trochanter of the femur.	
	Loca	ate the <i>obturator internus muscle</i> .	
		Origin: pelvic surface of the obturator membrane.	

		Insertion: through the lesser sciatic foramen to the greater tronchanter-of the femur.
		ate the <i>levator ani muscle</i> , which form the inferior pelvic wall or pelvic or or pelvic diaphragm with <i>coccygeus muscle</i> .
		Origin: back of the body of the pubis, obturator internus fascia and spine of the ischium.
		Insertion: median raphe extents from the prostate or vagina then to the perineal body surround the anal canal and anococcygeal body to the tip of the coccyx.
		Direction of the fibres:
		Anterior fibres; levator prostate or sphincter vaginae muscle.
		Intermediate fibres; the puborectalis muscle.
		Posterior fibres; iliococcygeus muscle.
	Loca	te the coccygeus muscle:
		Origin: ischial spine.
		Insertion: lower end of the sacrum and coccyx.
ST	ATIO	N 19.5
SA	Loca	L PLEXUS AND INTERNAL ILIAC ARTERY ate the sacral plexus which is formed by the lumbosacral trunk and the trail rami of the upper three and upper part of the fourth sacral nerves.
	Note	e that the plexus lies in front of the <i>piriformis</i> muscle
	The	branches of the plexus are:
		Muscular twigs to the:
		Piriformis (S1, 2).
		Levator ani (S4).
		Coccygeus (S4).
		Pelvic splanchnic (S2 - S4).

		Superior gluteal (L4, L5, S1).
		Inferior gluteal (L5, S1, S2).
		Perforating cutaneous (S2, S3).
		Nerve to quadratus femoris (L4, L5, S1).
		Nerve to obturator internus (L5, S1, S2).
		Posterior cutaneous of the thigh (S1, S2, S3).
		Pudendal (S2, S3, S4).
		Sciatic (L4, L5, S1, S2, S3).
the pelvis, the buttock, the reproductive organs, and the		tify the internal iliac artery, which supplies the walls and viscera of pelvis, the buttock, the reproductive organs, and the medial compart- t of the thigh. The vesicular branches of the internal iliac arteries supply bladder. Identify the following branches:
		Iliolumbar artery.
		Lateral sacral artery.
		Superior gluteal artery.
		Obturator artery (occasionally from inferior epigastric artery):
		Inferior gluteal artery.
		Umbilical artery.
		Uterine artery (female).
		Vaginal artery (female) The artery usually takes the place of the inferior vesical artery that present in the male.
		Middle rectal artery.
		Internal pudendal artery.

STATION 19.6

IMAGING (Figs. 19.6.1-19.6.4)

- Identify the bony parts of the pelvis in a AP and lateral radiographs in Figs. 19.6.1, 19.6.2, 19.6.3.
- ☐ Identify the blood vessels seen in angiograms.



Fig. 19.6.1 AP radiograph of pelvis. Note hip joint, iliac fossa, sacrum



Fig. 19.6.2 3D CT pelvis. Identify: public symphasis, sacroiliac joint, sacrum and coccyx, structures in the upper end of femur.

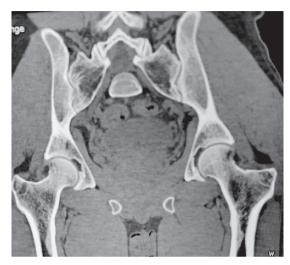


Fig. 19.6.3 CT coronal of pelvis showing hip and sacroiliac joints



Fig. 19.6.4 Axial CT of pelvic muscles. Identify: gluteus maximus, obturator externus, muscles of anterior compartment of thigh, boundaries of the femoral triangle

- 1. Describe the boundaries of the pelvis.
- 2. What are the parts of the hip bone?
- 3. What is the pelvic floor?
- 4. Mention the parts of the levator ani muscle?
- 5. Mention the branches of the sacral plexus.
- 6. Mention the organs that are the supply by the internal iliac artery.

MALE REPRODUCTIVE TRACT

Learning Objectives

Upon completion of this session, the student will be able to

- 1. Define the position and relationships of all organs of the male reproductive tract.
- 2. Identify the testis, its coverings, and tubules.
- 3. Identify the epididymis and its subdivisions.
- 4. Trace the entire course of the ductus deferens and identify its ampulla, observe its relationship to the ureter.
- 5. Identify the seminal vesicle and explain the formation and course of the ejaculatory duct.
- 6. Identify the structures of the male copulatory organ.
- 7. Identify the prostatic gland and define the features of the prostatic urethral wall.
- 8. Identify the testes in ultrasound images and diagnose hydrocele, varicocele and masses.
- 9. Identify and assess the volume of the prostate in ultrasound images.

Required Materials

- Cadaver/ Pelvic Cavity/ Sagittal Section of Male Pelvis
- Handouts/ Atlases of Human Anatomy
- Visual and Electronic Media
- Images.

Instructions

- There are 3 stations of activities in this practical.
- When you have completed a particular task you should put a tick in the box before to it, the group's supervisor can question you about it and expect a correct answer.
- Keep these sheets for future reference and revision.
- Make sure that you answer the questions at the end of the activities.

STATION 20.1

SCROTUM, TESTIS AND SPERMATIC CORD

(Figure 20.1.1)

Locate the <i>testis</i> within the <i>scrotum</i> and notice each testis lies in a corre sponding half of scrotum.	
Review the different layers of the scrotum from outside inwards: skin, darto fascia and muscle, external spermatic fascia, cremasteric fascia, internal spermatic fascia, and tunia vaginalis.	
Not	e that the scrotum is supplied by:
	Ilioinguinal nerve.
	Genital branch of genitofemoral nerve.
	Perineal branch of the posterior cutaneous nerve of the thigh.
	Internal pudendal artery.
	External pudendal artery.
Rev	iew the general shape of the testis and locate its borders and surfaces:
	Anterior border.
	Posterior border.
	Mediactinum of testis

	Tunica albuginea.
Obs	erve that the testis is attached to the scrotum by the spermatic cord.
Not test	ice the epididymis that is closely applied to the posterior border of the is.
In a	coronal section of testis, notice the:
	Highly convoluted tubules (seminiferous tubules), which are the functional units of the testis.
	Tubulus recti.
	Rete testis.
	Efferent ductules.
	iew the general shape of the <i>epididymis</i> and note its different parts, head, y and tail.
	ow the tail of the epididymis that is continuous with the <i>ductus deferens</i> represents one of the contents, of the spermatic cord.
Rev	iew other structures that form the <i>spermatic cord</i> :
	Ductus deferens.
	Artery of the ductus deferens.
	Testicular artery.
	Pampiniform plexus.
	Testicular vein.
	Cremaster muscle.
	Cremasteric artery.
	Genitofemoral nerve.
	Lymph vessels.
cia t	the different layers that cover the spermatic cord : external spermatic fas- the outer covering, cremasteric fascia (the middle covering that contains os of cremasteric muscle) and internal spermatic fascia.

Follow the course of the *ductus deferens* (vas deferens) when passing out from the deep inguinal ring: Epididymic part, inguinal part and pelvic part.

Observe that the ductus deferens that is covered by the peritoneum of the side wall of the pelvis.

Observe that the ductus deferens crosses the lower end of the ureter.

Identify the seminal vesicle (gland).

Follow the ducts deferens to the base of the urinary bladder where it forms dilation called ampulla, the two ampullae are related laterally to the seminal vesicles, anteriorly to the base of the urinary bladder and posteriorly to the rectum.

Notice that the ducts deferens narrows again and joins with the duct of the seminal vesicle to form the ejaculatory duct, which opens in to the prostate.

Identify the external and internal iliac lymph nodes.

Identify the pre-aortic lymph nodes.

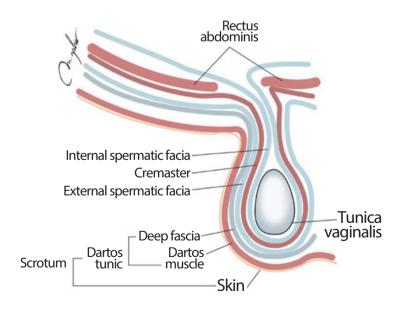


Fig. 20.1.1 Layers of the scrotum

STATION 20.2

PENIS

Note that the <i>penis</i> is formed of two main parts:
Root of the penis, which lies in the superficial perineal pouch.
Body of the penis, which is the free part to the penis.
Recognize the <i>glans penis</i> , which is the dilated terminal part of the penis.
Notice the <i>external urethral orifice</i> , which lies in the tip of the glans penis.
Note that the projecting margin of the base of the glans penis called the corona glandis.
Note the <i>neck of the penis</i> , which is the constriction at the junction of the base of the glans penis and body.
Note that the skin covering the glans penis is called the <i>prepuce</i> (foreskin). <i>Circumcision</i> is a surgical removes the greater part of the prepuce.
Identify the frenulum of the prepuce, which a thin median skin folds which connect the ventral of the glans penis with the prepuce.
Recognize the superficial fascia of the penis, which is devoid of fat, like that of the anterior abdominal wall and perineum, it is differentiated into superficial areolar layer and deep membranes layer.
Note the deep membranous layer of superficial fascia called fascia penis.
Identify the superficial dorsal vein which lies in the fascia while the deep dorsal vain, dorsal arteries and dorsal nerves of the penis run deep to it.
In cross section of the penis, identify the following:
Two corpora cavernosa that lies dorsal to the corpus (bulbus) spongiosum.
Notice the thick capsule, which covers the corpora cavernosa (tunica albuginea).
Note that the <i>deep dorsal artery of the penis</i> runs in a longitudinal tortous corse in the center of the corpus cavernosum on each side.
Also notice the thin capsule, which covers the corpus spongiosum (this is why it remains soft during erection of the penis).

	Identify the urethra (penile), which traverses the whole length of the corpus spongiosum and the urethral arteries along the urethra on each side.
	Identify the superficial and deep inguinal lymph nodes.
STA	ATION 20.3
PRO	OSTATE, URETHRA AND OTHER ACCESSORY GLANDS
	Identify the prostatic gland inferior to the bladder.
	Note the shape of the gland, which is roughly like an inverted pyramid with the apex downwards and the base upwards.
	Identify the following parts of the prostate:
	Right / left lobe.
	Isthmus (anterior lobe) of prostate.
	Middle lobe of prostate.
	Prostatic capsule.
	Prostatic ducts.
	Identify the prostatic venous plexus and sacral lymph nodes.
	Identify bulbo-urethral (Cowper) glands and seminal vesicle gland.
	Identify the parts of male urethra:
	Prostatic urethra.
	Membranous urethra.
	Spongy urethra.
STA	ATION 20.4
IM	AGING (Figs. 20.4.1-20.4.2)
	Note the shape and echotecture of the testis in ultrasound (Fig.20.4.1)
	Note the appearance of hydrocele (Fig.20.4.2).

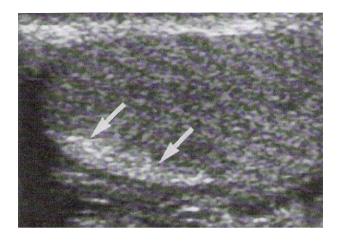


Fig. 20.4.1 US normal testis, arrows show hilum



Fig. 20.4.2 US of a hydrocele

- 1. What's the importance of localization of testes out of body? Please discuss this different localization.
- 2. What are the anatomic structures related with the production and the conduction of sperms?
- 3. What's the mechanism of erection of penis and ejaculation? Please discuss the mechanism by forming a relation with its anatomy.
- 4. What are the coverings of the testis?
- 5. What do we mean by hydrocele?
- 6. Mention the contents of the spermatic cord?
- 7. What is the arterial supply of the testis, scrotum and penis?
- 8. What do we mean by cremastric reflex?

FEMALE REPRODUCTIVE TRACT

Learning Objectives

Upon completion of this session, the student will be able to:

- 1. Define the position and relationships of all organs of the female reproductive tract.
- 2. Identify the uterus and its subdivisions and describe the continuity of its lumen with that of the vagina and the uterine tubes.
- 3. Differentiate between the internal and external os of the cervix of the uterus.
- 4. Trace the continuity of the abdominal peritoneum with that of the pelvis, and identify the peritoneal pouches of the pelvis.
- 5. Identify the broad ligament and distinguish its parts.
- 6. Identify the uterine tube and its subdivisions.
- 7. Identify the ovary and ovarian ligaments and discuss its functional significance.
- 8. Identify the vagina, and note the angle formed at its junction with the uterus.
- 9. Identify the uterus, vagina and adnexae in ultrasound images.
- 10. Identify the uterus and tubes, and diagnose patent and obstructed tube in a hysteron-salpinogram.

Required Materials

- Cadaver/ Pelvic Cavity/ Sagittal Section of Female Pelvis
- Handouts/ Atlases of Human Anatomy
- Visual and Electronic Media
- Images.

Instructions

- There are 2 stations of activities in this practical.
- When you have completed a particular task you should put a tick in the box before to it, the group's supervisor can question you about it and expect a correct answer.
- Keep these sheets for future reference and revision.
- Make sure that you answer the questions at the end of the activities.

STATION 21.1

EXTERNAL GENITAL ORGANS

and its different parts are:	
	Mons pubis: it is a collection of fat overlying the pubis (After puberty it becomes covered with hair.
	Labia majora: this is a pair of skin folds enclosing some fat; they are covered by hair after puberty.
	Labia minora: is a pair of skin fold between the labia majora.
	Clitoris: this is the homologue of the penis (in male), but is not traversed by the urethra it lies above and in front of the urethral orifice.
	Vestibule: this is the interval between the two labia minora.
Loca	ite each of the:
	Anterior labial commissure.
	Posterior labial commissure.
	Pudendal cleft.
Obs	erve the urethral orifice anteriorly.
Obs	erve the vaginal orifice posteriorly.
Notice that the margins of the urethral orifice are prominent and can be felt	
	and

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	by the fingertip through the vestibule.
	Notice that the vaginal orifice is partly closed by the hymen in virgins. (The hymen is a thin membrane at variable shapes and extent.
	Identify the greater and lesser vestibular glands and their orifice.
	Identify the following:
	☐ Ilioinguinal nerve.
	Genital branch of genitofemoral nerve.
	Perineal branch of the posterior cutaneous nerve of the thigh.
	☐ Internal pudendal artery.
	External pudendal artery.
	Superficial and deep inguinal lymph nodes.
ST	ATION 21.2
	TERNAL GENITAL ORGANS
Ute	erus
	Locate the uterus between the rectum posteriorly and the urinary bladder anteriorly.
	Notice that the uterus has a normal forward inclination.
	Identify the different parts of the uterus: the <i>fundus</i> , the <i>body</i> , the <i>cervix</i> and the <i>isthmus</i> .
	The fundus is the free anterosuperior edge. It is convex in all directions and covered by peritoneum.
	Identify the angle of anteversion and anteflexion of uterus.
	The body of uterus is located over the empty urinary bladder and it turns inferiorly. The angle between the body of uterus with vagina is called as anteversion angle.

es of the body. The isthmus is the constriction between the body and the cervix. Identify the parts of the cervix of uterus: supravaginal part of vaginal part of cervix. Identify the peritoneal ligament of uterus: broad ligament of uterus: ovarian vine vessels, uterine tubes, uterus, proper ovarian ligament, round uterus, the pelvic part of ureter, lymph and nerve plexuses. Note the other ligaments of uterus as supporting bands to keep round ligament (ligamentum teres), cardinal ligament (transveligament, Mackenrodt ligament), pubocervical ligament, and seligament. Observe the peritoneum reflection and identify: The utero-vesical pouch: it is formed by reflection of the pethe junction of the body with the cervix on to the upper surinary bladder. The recto-uterine pouch (Douglas pouch): it is the deepest price is a site of accumulation of fluid, it is formed by reflection of		The angle between the body of uterus with the cervix of uterus is termed as anteflexion angle.	
Identify the parts of the cervix of uterus: supravaginal part of vaginal part of cervix. Identify the peritoneal ligament of uterus: broad ligament of uterus: ovarian vine vessels, uterine tubes, uterus, proper ovarian ligament, round uterus, the pelvic part of ureter, lymph and nerve plexuses. Note the other ligaments of uterus as supporting bands to keep round ligament (ligamentum teres), cardinal ligament (transveligament, Mackenrodt ligament), pubocervical ligament, and soligament. Observe the peritoneum reflection and identify: The utero-vesical pouch: it is formed by reflection of the pethe junction of the body with the cervix on to the upper surinary bladder. The recto-uterine pouch (Douglas pouch): it is the deepest pis a site of accumulation of fluid, it is formed by reflection of from the front of the rectum to the upper part of the post the vagina. Notice that the wall of the uterus forms of three layers: Endometrium. Myometrium. Perimetrium.		The body is the middle part. Observe the peritoneum that covers both surfaces of the body.	
Identify the peritoneal ligament of uterus: broad ligament of uterus: ovarian vine vessels, uterine tubes, uterus, proper ovarian ligament, round uterus, the pelvic part of ureter, lymph and nerve plexuses. Note the other ligaments of uterus as supporting bands to keep round ligament (ligamentum teres), cardinal ligament (transveligament, Mackenrodt ligament), pubocervical ligament, and suligament. Observe the peritoneum reflection and identify: The utero-vesical pouch: it is formed by reflection of the pethe junction of the body with the cervix on to the upper sulurinary bladder. The recto-uterine pouch (Douglas pouch): it is the deepest prisalise as ite of accumulation of fluid, it is formed by reflection of from the front of the rectum to the upper part of the posterior the vagina. Notice that the wall of the uterus forms of three layers: Endometrium. Myometrium. Perimetrium.		The isthmus is the constriction between the body and the cervix.	
 Identify the structures in the broad ligament of uterus: ovarian vine vessels, uterine tubes, uterus, proper ovarian ligament, round uterus, the pelvic part of ureter, lymph and nerve plexuses. Note the other ligaments of uterus as supporting bands to keep round ligament (ligamentum teres), cardinal ligament (transveligament, Mackenrodt ligament), pubocervical ligament, and suligament. Observe the peritoneum reflection and identify: The utero-vesical pouch: it is formed by reflection of the pethe junction of the body with the cervix on to the upper sulurinary bladder. The recto-uterine pouch (Douglas pouch): it is the deepest pis a site of accumulation of fluid, it is formed by reflection of from the front of the rectum to the upper part of the post the vagina. Notice that the wall of the uterus forms of three layers: Endometrium. Myometrium. Perimetrium. 		Identify the parts of the cervix of uterus: supravaginal part of cervix and vaginal part of cervix.	
ine vessels, uterine tubes, uterus, proper ovarian ligament, round uterus, the pelvic part of ureter, lymph and nerve plexuses. Note the other ligaments of uterus as supporting bands to keep round ligament (ligamentum teres), cardinal ligament (transve ligament, Mackenrodt ligament), pubocervical ligament, and so ligament. Observe the peritoneum reflection and identify: The utero-vesical pouch: it is formed by reflection of the per the junction of the body with the cervix on to the upper surinary bladder. The recto-uterine pouch (Douglas pouch): it is the deepest prise a site of accumulation of fluid, it is formed by reflection of from the front of the rectum to the upper part of the post the vagina. Notice that the wall of the uterus forms of three layers: Endometrium. Myometrium. Perimetrium.		Identify the peritoneal ligament of uterus: broad ligament of uterus.	
round ligament (ligamentum teres), cardinal ligament (transver ligament, Mackenrodt ligament), pubocervical ligament, and soligament. Observe the peritoneum reflection and identify: The utero-vesical pouch: it is formed by reflection of the per the junction of the body with the cervix on to the upper solurinary bladder. The recto-uterine pouch (Douglas pouch): it is the deepest price is a site of accumulation of fluid, it is formed by reflection of from the front of the rectum to the upper part of the post the vagina. Notice that the wall of the uterus forms of three layers: Endometrium. Myometrium. Perimetrium.		Identify the structures in the broad ligament of uterus: ovarian vessels, uterine vessels, uterine tubes, uterus, proper ovarian ligament, round ligament of uterus, the pelvic part of ureter, lymph and nerve plexuses.	
 □ The <i>utero-vesical pouch</i>: it is formed by reflection of the per the junction of the body with the cervix on to the upper surinary bladder. □ The <i>recto-uterine pouch</i> (Douglas pouch): it is the deepest price is a site of accumulation of fluid, it is formed by reflection of from the front of the rectum to the upper part of the poster the vagina. □ Notice that the wall of the uterus forms of three layers: □ Endometrium. □ Myometrium. □ Perimetrium. 		Note the other ligaments of uterus as supporting bands to keep its position: round ligament (ligamentum teres), cardinal ligament (transverse cervical ligament, Mackenrodt ligament), pubocervical ligament, and sacrouterine ligament.	
the junction of the body with the cervix on to the upper surinary bladder. The recto-uterine pouch (Douglas pouch): it is the deepest pois a site of accumulation of fluid, it is formed by reflection of from the front of the rectum to the upper part of the poster the vagina. Notice that the wall of the uterus forms of three layers: Endometrium. Myometrium. Perimetrium.		Observe the peritoneum reflection and identify:	
is a site of accumulation of fluid, it is formed by reflection of from the front of the rectum to the upper part of the post the vagina. Notice that the wall of the uterus forms of three layers: Endometrium. Myometrium. Perimetrium.	[The <i>utero-vesical pouch</i> : it is formed by reflection of the peritoneum at the junction of the body with the cervix on to the upper surface of the urinary bladder.	
Endometrium.Myometrium.Perimetrium.	[The <i>recto-uterine pouch</i> (Douglas pouch): it is the deepest pouch and it is a site of accumulation of fluid, it is formed by reflection of peritoneum from the front of the rectum to the upper part of the posterior wall of the vagina.	
Myometrium.Perimetrium.		Notice that the wall of the uterus forms of three layers:	
Perimetrium.	[☐ Endometrium.	
	[Myometrium.	
☐ Identify the uterine arteries and the uterine venous plexus.	[Perimetrium.	
		Identify the uterine arteries and the uterine venous plexus.	

	lden	tify the external, internal iliac and the sacral lymph nodes.
Ute	rine '	Tubes
	lden	tify the uterine tube with its different parts:
		Infundibulum: a funnel – shaped depression. The fimbriae project out from the margins of the infundibulum.
		Ampulla: this is the widest part of the tube. (Notice that it is the site of fertilization).
		Isthmus: This is a narrow and slight part of the tube.
		Intramural part: this is the part that is embedded in the uterine wall and it is the narrowest part.
Ova	ary	
	Loca	te the position of the ovary in the posterolateral wall of the pelvis.
	Noti	ce the ligaments of the ovary:
		The ovaries are suspended from the posterior leaf of the broad ligament by the mesovarium.
		Identify the proper ligament of ovary
		They also have a suspensory ligament from the side wall of the pelvis through which travels its vessels and nerves.
		The round ligament goes to the corner of the uterus and from there through the inguinal canal to the labium majus as the round ligament of the uterus.
	Iden	tify the following:
		Cortex of ovary.
		Medulla of ovary.
		Ovarian follicle.
	Ider	ntify the ovarian vessels.

Vagina

	Locate the vagina between the base of the bladder and urethra anteriorly and the rectum and anal canal posteriorly.		
	Locate the lower part of the vagina in the urogenital triangle of the perineum and its upper part within the pelvis.		
	Identify the fornix of vagina:		
	Anterior part.		
	☐ Posterior part.		
	☐ Lateral part.		
	Notice that the vaginal examination is done by inserting the index finger or both index and middle fingers through the vagina and we can examine:		
	☐ The wall of the vagina.		
	☐ The base of the urinary bladder and female urethra.		
	Levator ani, ischial spine and ischial tuberosity.		
	☐ Douglas pouch, rectum and anal canal.		
	Identify the vaginal branch of the internal iliac artery and the internal pudendal artery.		
	Identify the pudendal nerve and the inferior hypogastric plexus.		
STA	ATION 21.3		
IM	AGING (Figs. 21.3.1)		
	Identify the vagina, uterus and urinary bladder in Fig.21.3.1.		



Fig. 21.3.1 US of uterus and vagina

- 1. Description of normal position of uterus.
- 2. What are the structures that are feel in a vaginal examination?
- 3. When does ecttopic pregnancy occur and where are the common site?
- 4. What is the arterial supply, venous and lymphatic drainage of the different parts of female genital system?

PERINEUM

Learning Objectives

Upon completion of this session, the student will be able to:

- 1. Define the skeletal and ligamentous boundaries of the perineum, and identify the anal and urogenital triangles.
- 2. Define the position and boundaries of the ischiorectal fossa.
- 3. Define the structure, contents, and course of the pudendal canal.
- 4. Trace the branches of the internal pudendal vessels and the pudendal nerve.
- 5. Differentiate between the internal and external anal sphincters in both structure and function.
- 6. Distinguish between male and female urethrae.
- 7. Identify the components of the external genital organs and provide the homologues in each of both sexes.
- 8. Trace the blood and nerve supply of the external genital organs.
- 9. Identify the lymphatic drainage of the perineum.

Required Materials

- Cadaver/ Pelvic Cavity/ Bony Skeleton of the Pelvis
- Handouts/ Atlases of Human Anatomy
- Visual and Electronic Media
- Images.

Instructions

- There are 4 stations of activities in this practical.
- When you have completed a particular task you should put a tick in the box before to it, the group's supervisor can question you about it and expect a correct answer.
- Keep these sheets for future reference and revision.
- Make sure that you answer the questions at the end of the activities.

THE ANATOMICAL POSITION OF THE PERINFLIM

STATION 22.1

	e that the pelvic cavity is divided by the <i>pelvic diaphragm</i> into the main vic cavity above and the perineum below.
lder	ntify the muscles that form the pelvic diaphragm: levator ani and coccygeus.
Note that the perineum is a narrow region between the proximal parts of the thigh. However, when the lower limbs are abducted, the perineum is a discussion of the state of the thigh laterally and the gluteal folds and upper end of the intergluted cleft posteriorly.	
Ider	ntify the structures which form the boundaries of the perineum:
	Pubic symphsis anteriorly.
	Inferior pubic rami and ischial rami anerolaterally.
	Ischial tuberosities laterally.
	Sacrotuberous ligaments posterolaterally.
	Inferiormost part of sacrum and coccyx posteriorly.
	e that the transverse line joining the anterior ends of the ischial tuberosi- divides the perineum into two triangles:
	Urogenital anteriorly.
	Anal posteriorly.

STATION 22.2

<i>317</i>	11101	1 22.2
		RIANGLE contents of the anal triangle:
		Lower opening of the anal canal, lies in the midline.
	Revi	Ischiorectal fossa, on each side. ew the relations of anal canal:
		Anococcygeal body posteriorly.
		Fat–filled ischiorectal fossa laterally.
In n	nale ar	nteriorly:
		Perineal body, the urogenital diaphragm, the membranous part of the urethra, and bulb of the penis.
In f	emale	anteriorly:
	Loca	Perineal body, the urogenital diaphragm and the lower part of the vaginal te the external sphincter which can be divided into three parts:
		Subcutaneous part: which is encircles the lower end of the anal canal and has bony attachment.
		Superficial part: is attached to the coccyx behind and perineal body in front.
		Deep part: which encircles the upper end of the anal canal and has no bony attachment.
		te the position of <i>ischiorectal fossa</i> (wedge-shaped) on each side of the canal and notice its boundaries:

The base of the wedge is superficial and formed by skin.

muscle covered with pelvic fascia.

The medial wall formed by the sloping levator ani muscle and anal canal.

The lateral wall is formed by the lower part of the obturator internus

STATION 22.3

MA	LE U	ROGENITAL TRIANGLE	
	Notice the superficial fascia of the urogenital triangle can by divided into fatty and membranous layers.		
	Notice the urogenital triangle is divided by the preineal membrane into:		
		Superficial perineal pouch.	
		Deep perineal pouch.	
	Identify the contents of superficial perineal pouch:		
		Root of penis (blub & right/ left crus).	
		Superficial perineal muscles: bullospongiosus, ischiocavernosus and superficial transverse perineal muscles.	
	Identify the contents of deep perineal pouch:		
		Membranous part of the urethra – sphincter urethra – bulbourethreal gland – deep transverse perineal muscles – internal pudendal vessels and dorsal nerve of penis.	
ST/	ATIOI	N 22.4	
	MALE ure 22.	UROGENITAL TRIANGLE 4.1)	
	Note that urogenital diaphragm is a musculofascial diaphragm situated in the anterior part of the perineum and filling in the gap of pubic arch. Formed by sphincter urethra and deep transverse perineal muscles.		
	Revi	Review the contents of the superficial perineal pouch:	
		Root of clitoris (blub and right/ left crus).	
		Superficial perineal muscles: bulbospongiosus, ischiocavernosus and superficial transverse perineal muscles.	

Review of contents of the deep perineal pouch:

Part of the urethra – part of the vagina – sphincter urethrae - deep transverse perineal muscles – Internal pudendal vessels – dorsal nerve of the clitoris.

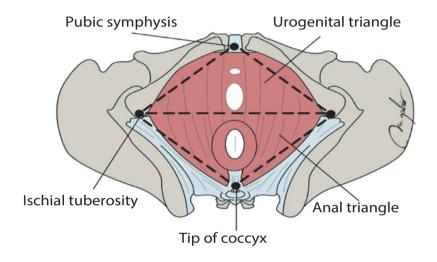


Fig. 22.4.1 Anal and urogenital triangles

- 1. Please discuss the anatomy and the clinical importance of perineal body.
- 2. Which structure can be palpated on rectal examination?
- 3. What're the differences of urogenital diaphragm according to the gender?