Course Title:	Anatomy & embryology
Coordinator /contact:	Dr Grzegorz Goncerz /e-mail: grzegorz.goncerz@uj.edu.pl

Address:	Department of Anatomy, 12, Kope	ernika St.
Year:	1-6	
Total number of hours:		
- lectures:	36	
<ul> <li>labs/practicals:</li> </ul>	154	
Conduct/Dress Code:	white coat	

In the first semester the labs will be held on Tuesdays and Thursdays 8.00-9.30 for groups 5–8 and 9.45–11.15 for groups 1-4:

- groups 1 and 5 - prosectorium 1

- groups 2 and 6 - prosectorium 3

– groups 3 and 7 – prosectorium 6

- groups 4 and 8 - prosectorium 8

The lectures will be online on Fridays 7.45–9.15.

## Student's Evaluation:

## **1. Credit requirements**

The whole material of the course has been divided into 5 parts including:

1) general anatomy (incl. osteology and arthrology, skull), general embryology

2) thorax, upper limb

3) abdomen and pelvis, lower limb

4) head and neck

5) central nervous system.

CAUTION: During the course of anatomy, the student is supposed to have the knowledge acquired from all previous practical and theoretical classes.

Much of the course work is carried out in the dissection rooms. Student will need to provide and bring a clean white lab coat to the dissection room, with name on the front where it can be read by staff, and wear it always in the dissection room. Unauthorized persons are not allowed to enter the dissection rooms.

The mid-semestral exams consist of two parts:

a) <u>laboratory</u> (identification of parts of organs) – 20 questions (for each correct answer one can receive maximally 1 point), there is 30 seconds per each specimen for its recognition.

Passing the laboratory part is NOT a prerequisite for participation in the second part of the mid-semestral test.

b) <u>theoretical</u> (multiple choice test, matching, etc.) – 40 questions. For each correct answer a student receives 1 point. The test includes embriology questions.

The list of specimens placed in the end of syllabus is a supplementary list only (it is only a help for the Students), so both during the mid-semestral and final practical exams specimens out of the list can be used.

It is not possible to postpone a mid-semestral test.

Only students who received  $\geq$ 150 points ( $\geq$ 50%) of all mid-semestral tests get the credit and are allowed to take the final exam.

Student who received less than 150 points to be allowed to take the final exam will have to pass a credit test ( $\geq$ 50%).

2. Attendance requirements

Participation in classes and lectures is <u>obligatory</u>. Maximum 6 absences per 2 semesters are allowed, but each missed lab has to be passed. If not a Student will loose 5 points. A student who exceeds the allowed number of six absences fails to get the credit and has to repeat the course in the following year.

## 3. Type of the final exam

The final exam, held in July, is the ultimate basis for the completion of the course. Only students who have not exceeded the allowed number of absences and have received at least 150 points (50%) of all tests are allowed to take the final exam.

Evaluation of the anatomy course is based on the results of the final exam, however we consider also the results of the mid-semestral tests.

The final exam, covering the whole material of the course consists of two parts: a) <u>laboratory</u>: identification of specific structures shown on cadavers; their parts; separate organs or bones (20 questions: bones (3), skull (1), upper & lower limb (4), thorax (2), abdomen & pelvis (3), head & neck (3), central nervous system (4). A Student receives 2 points for correct answer.

Passing the laboratory part is NOT a prerequisite for participation in the second part of the final exam!!! This rule is valid for the make-up exam, as well.

b) <u>theoretical</u>: (multiple choice test, matching, etc., similar form to the mid-semestral tests). <u>Questions may also include problems based on histology and</u>

<u>embryology</u>. The test consists of 100 questions which cover the whole theoretical material.

Grading system for the final exam is as follows:

- very good (5.0) approximately ≥90% of all available points
- good plus (4.5) ≥80%
- good (4.0) ≥70%
- satisfactory plus (3.5) ≥ 60%
- satisfactory (3.0) ≥ 50%
- failed (2,0) <50%.

A Student is exempted from the final practical exam if results of practical mid-semestral tests exceed 90%.

To pass the exam one should receive at least 50% on practical and 50% on test <u>separately</u>.

The final grade consists of: value of points received during final practical + number of points received during final test and a bonus points (1 point for each next 10 points above 200) received during the mid-semestral tests, i.e. a Student received 218 points during all six mid-semestral tests, later on the final practical exam he (she) received 28 points out of 40 and on the final test 68 points out of 100. His (her) final grade is: 2 (18 points above 200) + 28 + 65 = 95 points (63,3%) = satisfactory plus

## 4. Retake information

The retake credit test and the retake exam will be held in September. The exam has a form of both practical exam and test. Students who passed practical exam or theoretical exam during first option DO NOT have to repeat it in September.

DATE	CLASS	SUBJECT
		General anatomy (incl. osteology, arthrology, skull), general embryology

1 OCT	Lab 1	Vertebral column. General characteristics of
1.00.		a vertebra. Cervical thoracic, lumbar
		vertebrae Sacrum coccyx Intervertebral
		disc Joints of vertebral column Atlanto-
		accipital joints Atlantoaxial joints Curves
		of vortabral column
Bractical	vortobra : body arch vortobral	Theoretical knowledge:
Practical	faraman nadiela lamina aningus	1 place define characteristic features of
After the	roramen, pedicie, lamina, spinous	1. please define characteristic realures of
	process (spine), transverse	cypical cervical vertebra (i.e. CS-CO).
	process, superior and interior	2. define reatures of atlas, axis and
student	articular processes, superior and	
ought to	inferior vertebral notches,	3. describe thoracic and lumbar vertebrae
know	intervertebral foramen	focusing on their special features
where are	atlas : anterior and posterior	4. describe details in the sacrum and coccyx
the	arch, anterior and posterior	5. name major ligaments of the vertebral
following	tubercle, lateral mass, superior	column. Find their origins and insertions.
elements ?	articular surface of lateral mass	6. name ligaments and joints that unite two
	for occipital condyle, inferior	adjacent vertebrae
	articular surface of lateral mass	7. describe the structure of the
	for axis, articular facet for dens	intervertebral disk
	(fovea dentis), transverse	8. describe the atlanto-occipital joint using
	process, transverse foramen,	the following pattern: articular surfaces,
	groove for vertebral artery.	articular capsule, ligaments, movements
	axis : odontoid process (dens),	9. describe the atlanto-axial joint (same
	anterior articular facet (for	pattern as above)
	anterior arch of atlas), posterior	10. discuss formation of the curves of
	articular facet (for transverse	vertebral column.
	ligament of atlas), superior	11. describe movements of the vertebral
	articular facet for atlas, inferior	column
	articular process, spinous	
	process, transverse process,	
	transverse foramen	
	cervical vertebra : transverse	
	foramen (foramen	
	transversarium), anterior and	
	posterior tubercle, groove for	
	spinal nerve	
	thoracic vertebra : superior	
	costal facet, inferior costal facet,	
	transverse costal facet	
	lumbar vertebra : mammillary	
	process, accessory process	
	sacrum : auricular surface,	
	promontory, sacral canal, sacral	
	hiatus, lateral part of sacrum,	
	anterior (pelvic) and posterior	
	(dorsal) sacral foramina, sacral	
	cornu (horn), lumbosacral	

	articular surface, median sacral	
	crest, intermediate sacral crest,	
	lateral sacral crest, sacral	
	tuberosity.	
3 OCT	Lab 2	Ribs. Sternum. The thoracic cage. Bones of
		the shoulder girdle: scapula and clavicle.
		Acromioclavicular and Sternoclavicular
		joints.
Practical	rib : head (superior and inferior	Theoretical knowledge:
knowledge:	articular facets for vertebral	1. composition of bony thorax
After the	body), tubercle of rib (articular	2. define true, false and floating ribs
lab 2	facet for transverse process of	3. what is the importance of the sternal
student	vertebra), angle of rib, neck of	angle?
ought to	rib, costal groove	4. joints between the ribs and sternum; ribs
know	1 <sup>st</sup> rib – scalene tubercle, groove	and vertebral column – pay attention to
where are	for subslavian artery, groove for	movements that occur there
the	subclavian vein	5. joints and ligaments between sternum
following	2 <sup>nd</sup> rib – anterior serratus muscle	and clavicle, clavicle and the scapula –
elements ?	tuberosity (tuberosity for	movements.
	serratus anterior)	6. thoracic inlet and outlet - limitations.
	clavicle : acromial end (facet),	7. development of the clavicle – clinical
	sternal end (facet), <u>nutrient</u>	aspects
	foramen, impression for	
	costoclavicular ligament,	
	trapezoid line, conoid	
	tubercle, subclavian groove,	
	superior surface, inferior	
	surface.	
	scapula : acromion, coracoid	
	process, supraglenoid and	
	infraglenoid tubercles,	
	subscapular fossa, lateral,	
	medial and superior borders,	
	superior, lateral and inferior	
	angles, suprascapular notch,	
	glenoid cavity, spine,	
	supraspinous and	
	infraspinous fossa), <u>articular</u>	
	<u>facet for clavicle</u> , neck of	
	scapula,	
4 OCT	lecture	Introduction to embryology. Development
		periods. Gametogenesis. Cell divisions
		(mitosis, meiosis). Primodial germ cells.
8 OCT	lab	Humerus. Shoulder joint. Radius. Ulna.
		Bones of the hand. Elbow joint. Wrist joint.
		The carpal tunnel. The hand as a functional
		unit.

Practical	humerus : head, anatomical neck,	Theoretical knowledge:
knowledge:	surgical neck, greater and	1. shoulder joint – ligaments
After the	lesser tubercle, crest of	(incl.attachments), movements
lab 3	greater and lesser tubercles,	2. possible fractures of humerus – their
student	intertubercular sulcus,	clinical side effect
ought to	deltoid tuberosity, shaft,	3. elbow joint – ligaments (incl,.
know	radial groove, medial and	attachments), movements
where are	lateral epicondyles, trochlea,	4. possible fractures of bones of forearm i.e.
the	radial fossa, coronoid fossa,	Colles' fracture
following	olecranon fossa, groove for	5. joints between radius and ulna
elements ?	ulnar nerve, capitulum,	6. radio-carpal joint (wrist joint) –
	medial and lateral	movements
	supracondylar ridge, <u>nutrient</u>	7. carpal tunnel – limitations and contents –
	<u>foramen</u>	read about carpal tunnel syndrome
	radius : head, neck, <u>fovea (fossa)</u>	8. movements of the joints of hand
	of the head, articular	
	circumference of the head,	
	radial tuberosity (bicipital	
	tuberosity), interosseous	
	border, anterior border,	
	posterior border, anterior	
	surface, posterior surface,	
	lateral surface, radial	
	(lateral) styloid process,	
	ulnar notch, dorsal tubercle,	
	inferior articular surface	
	(area for scaphoid bone, area	
	for lunate bone), groove for	
	extensor digitorum and	
	extensor indicis muscle,	
	groove for extensor pollicis	
	longus muscle, groove for	
	extensor carpi radialis longus	
	and brevis muscle.	
	ulna : olecranon, trochlear notch,	
	coronoid process, radial	
	notch, shaft, interosseous	
	border, posterior border,	
	anterior border, anterior	
	surface, posterior surface,	
	medial surface, <u>supinator</u>	
	<u>crest, head of ulna, articular</u>	
	circumference of the head,	
	ulnar (medial) styloid	
	process, ulnar tuberosity)	
	bones of the hand : scaphoid	
	(tubercle of scaphoid),	
	lunate, triquetral, pisiform,	
	trapezium(tubercle of	

	trapezium), trapezoid,	
	capitate, hamate (hook of	
	hamate).	
	metacarpals (base, shaft, head)	
	and proximal, middle, distal	
	phalanges (distal phalanges –	
	hase shaft head	
	tuberosity)	
10 OCT	lab	The bony pelvis. Hip bone. Sacrum. Coccyx. Sacroiliac joints. Symphysis pubis. Greater & lesser sciatic foramina. Inquinal ligament. Sex differences of the pelvis. Femur. Acetabulum. Hip joint
Practical	hip bone : ilium : body,	Theoretical knowledge:
knowledge:	wing of ilium	1. orientation of pelvis – composition, joints
After the	(ala), iliac crest,	(pubic symphysis, sacrospinous and
lab 4	outer lip, inner	sacrotuberous ligaments, inguinal ligament,
student	lip,	obturator membrane)
ought to	intermediate	2. sex differences of the pelvis
know	zone, iliac fossa,	3. ligaments (incl. attachments) of the hip
where are	anterior	joint; movements
the	superior iliac	
following	spine, anterior	
elements ?	inferior iliac	
	spine, posterior	
	superior iliac	
	spine, posterior	
	inferior iliac	
	spine,	
	tuberculum of	
	ilium, auricular	
	surface,	
	iliopubic	
	eminence,	
	arcuate line	
	(iliopectinate	
	line), posterior	
	gluteal line,	
	anterior gluteal	
	line, inferior	
	gluteal line, iliac	
	tuberosity.	
	pubis : <u>body</u> ,	
	superior and interior	
	pubic rami, pubic	
	tubercle, <u>pubic crest</u> ,	
	symphyseal surface,	
	obturator	

	crest, obturator	
	groove	
	ischium : body,	
	ramus of	
	ischium, ischial	
	spine, ischial	
	tuberosity,	
	greater sciatic	
	notch, lesser	
	sciatic notch,	
	obturator	
	foramen	
	acetabulum :	
	<u>acetabular fossa</u> , acetabular	
	notch, lunate surface, margin	
	(limbus) of acetabulum.	
11 OCT	lecture	Female reproductive cycle.
		Spermatogenesis. Sperm. Sperm
		maturation. First week of development.
		Formation of the bilaminar germ disc.
15 OCT	lab	Tibia. Fibula. Patella. Knee joint. (intra- &
		extracapsular ligaments) Menisci. Bones of
		the foot. Ankle joint. Tarsal joints. The foot
		as a functional unit.
Practical	femur : head, fovea for ligament	Theoretical knowledge:
knowledge:	of head, neck, greater and	1. knee joint – articular capsule, ligaments
After the	lesser trochanter,	(incl. attachments), movements, bursae
lab 5	trochanteric fossa,	2. menisci – attachments – role, possible
student	intertrochanteric line,	injuries – i.e. unhappy triad of the knee (of
ought to	intertrochanteric crest,	Beck)
know	<u>quadrate tubercle</u> , calcar,	3. joints between the bones of the leg
where are	shaft (linea aspera, medial	4. ankle joint (subdivision; ligaments,
the	and lateral lip of linea	movements)
following	aspera, <u>medial supracondylar</u>	5. Postural role of the foot (foot arches);
elements ?	ridge, adductor tubercle,	joints of foot
	lateral supracondylar ridge,	
	gluteal tuberosity, pectineal	
	line, popliteal surface, lateral	
	and medial condyles,	
	intercondylar fossa, medial	
	and lateral epicondyles,	
	patellar surface, nutrient	
	foramen.	
	patella	
	tibla : lateral and medial condyles	
	of tibla, superior articular	
	surface of tibia (medial and	
	lateral facet), anterior and	

posterior intecondylar area,	
intercondylar eminence,	
lateral and medial	
intercondylar tubercle,	
<u>circular articular facet for the</u>	
<u>head of the fibula</u> , shaft,	
tibial tuberosity, Gerdy's	
tubercle (insertion of the	
iliotibial tract), soleal line,	
medial border, interosseous	
border, anterior border,	
medial surface, lateral	
surface, posterior surface,	
medial malleolus, articular	
facet of medial malleolus,	
fibular notch, groove for	
tibialis posterior and flexor	
digitorum longus tendon,	
groove for tendon of flexor	
hallucis longus, nutrient	
foramen, inferior articular	
surface	
fibula : head (apex of fibula),	
neck of fibula, interosseous	
border, medial crest, lateral	
surface, medial surface,	
posterior surface, lateral	
malleolus (articular facet,	
malleolar fossa of lateral	
malleolus)	
calcaneus : calcaneal sulcus,	
anterior, middle and	
posterior talar surfaces,	
tuberosity (medial and	
lateral process of tuberosity),	
sustentaculum tali, fibular	
(peroneal trochlea), articular	
surface for cuboid bone,	
groove for fibularis	
(peroneus) longus tendon	
talus : (head, neck, trochlea,	
<u>sulcus tali - sinus tarsi,</u>	
articular facet for articulation	
with the lateral and medial	
malleolus, groove for tendon	
of flexor hallucis longus	
muscle, posterior process	
(medial and lateral tubercle).	
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	anterior, middle and	
	posterior calcaneal surfaces	
	navicular bone (tuberosity)	
	cuboid bone (groove for fibularis	
	(peroneus) longus muscle	
	cuneiform bones	
	metatarsal bones (base, shaft,	
	head), tuberosity of 5 <sup>th</sup>	
	metatarsal and phalanges	
	(proximal, middle and distal).	
17 OCT	lab	Divisions of the skull. Bones of the
		neurocranium: frontal, occipital, sphenoid,
		ethmoid & parietal.
Practical	Frontal bone : supraorbital notch	Theoretical knowledge:
knowledge:	& margin, frontal notch,	1. present main composition of each bone
After the	glabella, zygomatic process,	discussed in the lab
lab 6	frontal sinus, foramen	2. describe details on each bone (mostly
student	cecum, frontal crest	indicated in the syllabus)
ought to	Occipital bone : pharyngeal	3. define "sinus"
know	tubercle, clivus, occipital	4. name cranial nerves and present their
where are	condyles, condylar fossa, jugular	exits from the skull
the	tubercle, jugular notch, ext. & int.	5. discuss major components of the cranial
following	occipital protuberance, sup., inf.,	nerves
elements ?	supreme nuchal lines,	6. name the structures traversing each
	hypoglossal canal, condyloid	opening in the skull
	(condylar) canal, foramen	
	magnum, jugular foramen	
	<u>Sphenoid bone</u> : body, sella	
	turcica, dorsum sellae, ant.,	
	middle & posterior clinoid	
	processes, tuberculum sellae,	
	prechiasmatic sulcus, ethmoid	
	spine, carotid sulcus, lesser wing,	
	greater wing, pterygoid process	
	(medial & lateral lamina),	
	scaphoid & pterygoid fossa,	
	sphenoid sinus, hamulus,	
	foramen rotundum, ovale,	
	spinosum, lacerum	
	Ethmoid bone : cribriform plate,	
	perpendicular plate, crista	
	galli, superior and middle	
	nasal concha	
	Parietal bone: granular foveolae,	
	groove for superior sagittal sinus,	
	parietal foramen	
18 OCT	lecture	Second week of development. Trilaminar
		germ disc. Gastrulation. Neurulation.

		Development of the somites. Formation of
		the notochord. Early development of
		cardiovascular system. Folding of the
		embryo.
22 OCT	lab	Temporal bone. Anterior, middle and
		posterior cranial fossae. Sutures of the vault
		of the skull.
Practical	Temporal bone : articular	Theoretical knowledge:
knowledge:	tubercle, arcuate	1. name and show major parts of the
After the	eminence, trigeminal	temporal bone
lab 7	impression, subarcuate	2. discuss its role
student	fossa, jugular fossa,	3. name major sutures in the skull
ought to	petrous fossula, styloid	4. find the limitations of the cranial fossae –
know	process, mastoid	and make the list of their communications
where are	foramen, stylomastoid	(incl. the contents of the foramina, canals,
the	foramen, petrotympanic	fissures etc.)
following	fissure, carotid canal,	
elements ?	internal auditory meatus	
24 OCT	lab	Bones of the visceral cranium: mandible,
		hyoid, maxilla, palatine, inferior nasal
		concha, lacrimal, vomer & zygomatic.
		Orbital cavity. Nasal cavity. Oral cavity.
		Paranasal sinuses.
Practical	Mandible : oblique line,	Theoretical knowledge:
knowledge:	mylohyoid line, buccinator	1. discuss general composition and details
After the	crest, retromolar triangle,	on each of the bones discussed in the lab.
lab 8	sublingual fossa, mandibular	2. describe the borders of the orbit, nasal
student	notch, mandibular foramen ,	and oral cavities.
ought to	mylohyoid sulcus (groove),	3. discuss communication. Name contents
know	submandibular fossa,	of the canals and foramina which
where are	pterygoid fovea, lingula,	communicate these cavities. Name the
the	mental spine, condylar	spaces (fossas etc) which are united to the
following	process, coronoid process,	cavities discussed.
elements ?	masseter tuberosity,	4. discuss the location and role of paranasal
	pterygoid tuberosity,	sinuses
	digastric fossa, mental	5. discuss connections (communication) of
	foramen	the paranasal sinuses.
	Maxilla : zygomatic, frontal,	
	alveolar, palatine processes,	
	maxillary sinus,	
	zygomaticoalveolar crest,	
	infraorbital foramen.	
	Palatine bone : horizontal &	
	perpendicular laminae	
	<u>zygomatic bone</u> : temporal	
	process, zygomaticofacial	
	foramen.	
	ralate : Greater & lesser palatine	
	canal, incisive canal	

	Orbit: optic canal, superior &	
	inferior orbital	
	fissure	
	Coronal, lambdoid, sagittal suture	
	Superior sagittal, transverse,	
	sigmoid, superior petrosal,	
	inferior petrosal, cavernous	
	sulci	
	Median palatine suture,	
	transverse palatine suture	
25 OCT	lecture	The bony ear.
29 OCT	lab	Temporomandibular joint. Pterygopalatine,
		retromandibular, temporal & infratemporal
		cranial fossae – limitations and
		communication.
Practical	Articular fossa, mandibular fossa,	Theoretical knowledge:
knowledge:	articular tubercle, head	1. discuss the articular surfaces of the
After the	of mandible, articular	temporomandibular joint
lab 9	disc,	2. discuss the attachments of the ligaments
student	Pterygoid canal, pterygopalatine	of the joint and movements that occur there
ought to	fossa, infratemporal	3. discuss limitation and communication
know	fossa, retromandibular	(plus contents and contents of the
where are	fossa.	communications) of each fossa from the
the	-stylomastoid foramen, styloid	topic of the lab.
following	process, vagina of the	
elements ?	styloid process.	
31 OCT	lab	Practical review
1 NOV	-	-
5 NOV	lab	Practical review
7 NOV	lab	Practical exam
8 NOV	lecture	Test
		Thorax & upper limb
12 NOV	lab	Introducton to the nervous system – spinal
		nerve. Surface anatomy of the thorax (lines
		of orientation). Thoracic walls – muscles,
		vessels, nerves (intercostal spaces).
		Diaphragm. Endothoracic fascia The
		mammary gland. The thoracic cavity.
		Mediastinum.
Practical	OSTEOLOGY of thorax	Theoretical knowledge:
knowledge:	internal thoracic artery & vein	1. what are the main subdivisions of the
After the	diaphragm – central tendon,	nervous system from anatomical,
lab 10	sternal, costal, lumbar part.	histological and functional point of view?
student	external intercostal muscle	2. what is the definition of the spinal nerve?
ought to	(membrane); internal intercostal	3. where are the cell bodies of spinal nerve?
know	muscle (membrane); m.	4. define spinal nerve plexus – name known
where are	transversus thoracis	plexuses.

the	pericardiacophrenic vessels.	5. Where are cell bodies of mixed, motor
following	Intercostal nerve, posterior	and sensory peripheral perve?
elements ?	intercostal artery and vein	6 divide muscles of the thoracic wall
ciciliento .	right and left superior intercostal	7 define attachments of dianhragm and
	vein	name structures that traverse it (what are
		contents of the main dianhragmatic
		foramina?)
		8 define structures of neurovascular bundle
		of the intercostal space $(VAN)$ – describe
		their origin
		9. discuss the blood supply, venous
		drainage and lymphatic drainage of
		mammary gland? Tell why is it so much
		important?
		10, discuss main subdivisions of
		mediastinum
14 NOV	lab	Thymus, Pleura, pleural cavity, Trachea.
		Lungs, Mechanism of respiration, Pulmonary
		veins. Pulmonary trunk.
Practical	trachea : carina (tracheae): right	Theoretical knowledge:
knowledge:	and left principal bronchi;	1. discuss the role of thymus
After the	eparterial bronchus (right	2. describe pleura – say something about its
lab 11	superior lobar bronchus);	innervation.
student	right superior, middle &	3. describe structure of trachea and bronchi
ought to	inferior lobar bronchi; left	4. find major anatomical differences
know	superior and inferior lobar	between the right and the left lungs
where are	bronchi	5. describe pulmonary circulation
the	esophagus	6. describe blood supply, innervation and
following	<b>lung</b> : lingula (left lung); oblique	lymphatic drainage of the lungs
elements ?	fissure; horizontal fissure;	
	right and left pulmonary	
	artery; superior lobar branch	
	of the right pulmonary	
	artery; bronchial artery;	
	superior & inferior (right and	
	left) pulmonary veins;	
	pulmonary ligament; aortic	
	impression of the left lung	
15 NOV	=	-
19 NOV	lab	Pericardium. Structure of the heart
		(chambers of the heart) Conducting system
		of the heart. Arterial supply & venous
		drainage of the heart.
Practical	heart : sulcus terminalis – crista	Theoretical knowledge:
knowledge:	terminalis; fossa ovalis,	1. define composition of the cardiac wall –
After the	limbus fossae ovalis;	find major differences between atria and
lab 12	trabeculae carneae; papillary	ventricles
student	muscles (ant., post. of the	

ought to	right and left ventricle);	2. what is the location of main elements of
know	coronary sulcus;	the heart conductive system?
where are	septomarginal trabecula,	3. discuss arterial and venous supply of the
the	pectinate muscles; right &	heart
following	left auricle; interventricular	4. describe positions at which heart valves
elements ?	septum (membranous and	are heard best (auscultation)
	muscular part); cusps of the	5. describe principles of the systemic and
	atrioventricular and	pulmonary circulation
	semilunar valves	
	vessels of the heart : coronary	
	sinus, right coronary artery;	
	posterior interventricular	
	branch; left coronary artery;	
	anterior interventricular	
	branch (LAD); circumflex	
	branch; great cardiac vein;	
	small cardiac vein; middle	
	cardiac vein; posterior vein	
	of the left ventricle, oblique	
	vein of left atrium; ascending	
	aorta, pulmonary trunk	
21 NOV	lab	Large vessels of the thorax: Superior &
		inferior vena cava. Aorta. Esophagus.
		Azygos veins. Lymph drainage of the
		thorax.
Practical	aortic arch : brachiocephalic	Theoretical knowledge:
knowledge:	trunk, left common carotid	1. name branches of the thoracic aorta
After the	artery, left subclavian artery;	2. name tributaries of superior vena cava
lab 13	ligamentum arteriosum	3. discuss topography of the esophagus –
student	superior & inferior vena cava;	what causes esophageal constrictions?
ought to	right & left brachiocephalic	4. discuss system of azygos vein
know	veins	5. discuss the lymphatic drainage – thoracic
where are	azygos vein, hemiazygos vein,	duct and the right lymphatic duct.
the	accessory hemiazygos vein	
following		
elements ?		
22 NOV	lecture	Heart development. Heart defects
26 NOV	lab	Vagus nerves. Phrenic nerves. Thoracic part
		of the sympathetic trunk.
Practical	left & right vagus nerve, left	1. describe course of vagus and phrenic
knowledge:	recurrent laryngeal nerve	nerves in the chest
After the	left & right phrenic nerve	2. which structures are supplied by these
lab 14		two nerves?
student		3. define the sympathetic trunk – discuss its
ought to		connections. What is the greater, lesser and
know		least splanchnic nerve?
where are		
the		

following		
elements ?		
28 OCT	lab	Muscles of the scapula. The axilla & its
		contents. Axillary artery, vein, and lymph
		nodes. Brachial plexus.
Practical	1. pectoralis major & minor m.	Theoretical knowledge:
knowledge:	2. subscapularis muscle	1. name attachments, functions and
After the	3. latissimus dorsi m.; deltoid m.	innervation of the muscles from the list for
lab 15	4. teres major m., teres minor m.	this lab.
student	5. supra- & infraspinatus m.	2. discuss topography of axillary artery and
ought to	6. trapezius m.	vein
know	7. rhomboid m.	3. name branches of axillary artery
where are	8. serratus anterior m.	4. discuss organization of the lymph nodes
the	9. axillary artery and vein	within the axilla
following	10. Supreme thoracic vessels	5. summarize the composition of the
elements ?	11. lateral thoracic artery	brachial plexus – name the nerves that
	12. subscapular artery –	originate from it and structures supplied.
	circumflex scapular artery;	6. discuss effect of potential lesions of the
	thoracodorsal artery	nerves and other components of plexus –
	13. anterior and posterior	i.e. upper brachial plexus lesion, lower
	circumflex humeral arteries	brachial plexus lesion
	14. thoracoacromial artery	
	15. brachial plexus: upper, middle	
	& lower trunk of the brachial	
	piexus	
	17 modial lateral & posterior	
	17. medial, lateral & posterior	
	19 modial & lateral portoral	
	nerves	
	19. long thoracic nerve.	
	20. thoracodorsal nerve	
	21. suprascapular nerve;	
	musculocutaneous nerve;	
	lateral cutaneous nerve of	
	the forearm	
	22. lateral & medial roots of the	
	median nerve	
	23. ulnar nerve	
	24. medial cutaneous nerve of	
	the arm & forearm	
	25. radial nerve	
	26. axillary nerve	
	27. upper & lower subscapular	
	nerve	
	28. upper lateral cutaneous nerve	
	of the arm (lateral cutaneous	
	nerve of the arm	

	29. lower lateral cutaneous nerve	
	of the arm (posterior	
	cutaneous nerve of the arm	
	30. posterior cutaneous nerve of	
	the forearm	
	31 intercostobrachial nerve	
29 OCT		Skeletal system Development of the bones
25 001		and cartilages Limbs development Limbs
		defects Examination of musculo-skeletal
		cystom - anatomical asports
	lah	System - anatomical aspects.
3 DLC		Nerves of the arm. The subital faces
Dup ati an l	biographyschiims (longhood Q	The custical lunguiladae.
Practical	- biceps brachii m. (long head &	
knowledge:	short head)	1. name attachments, functions and
After the	-brachialis muscle	innervation of the muscles from the list for
lab 16	- triceps brachii muscle (long,	this lab.
student	medial & lateral heads)	2. name branches of the brachial artery.
ought to	- anconeus muscle	3. describe the course and the basilica and
know	- brachial artery and veins – deep	cephalic veins
where are	brachial artery, superior and	
the	inferior ulnar collateral arteries	
following	- cephalic vein	
elements ?	- basilic vein	
	hraphial plasma (and the set	
	- brachial plexus (see above)	
5 DEC	lab	Fascial compartments of the forearm.
5 DEC	lab	Fascial compartments of the forearm. Muscles of the anterior compartment of the
5 DEC	lab	Fascial compartments of the forearm. Muscles of the anterior compartment of the forearm. Radial and ulnar artery & veins.
5 DEC	lab	Fascial compartments of the forearm. Muscles of the anterior compartment of the forearm. Radial and ulnar artery & veins. Superficial veins of the upper limb. Nerves
5 DEC	lab	Fascial compartments of the forearm. Muscles of the anterior compartment of the forearm. Radial and ulnar artery & veins. Superficial veins of the upper limb. Nerves of the forearm.
5 DEC	- practilai piexus (see above) lab - palmaris longus m.	Fascial compartments of the forearm. Muscles of the anterior compartment of the forearm. Radial and ulnar artery & veins. Superficial veins of the upper limb. Nerves of the forearm. Theoretical knowledge:
5 DEC Practical knowledge:	- practilai piexus (see above) lab - palmaris longus m. - flexor carpi ulnaris m.	Fascial compartments of the forearm. Muscles of the anterior compartment of the forearm. Radial and ulnar artery & veins. Superficial veins of the upper limb. Nerves of the forearm. Theoretical knowledge: 1. name attachments, functions and
5 DEC Practical knowledge: After the	- practilai piexus (see above) lab - palmaris longus m. - flexor carpi ulnaris m. - flexor digitorum superficialis &	Fascial compartments of the forearm. Muscles of the anterior compartment of the forearm. Radial and ulnar artery & veins. Superficial veins of the upper limb. Nerves of the forearm. Theoretical knowledge: 1. name attachments, functions and innervation of the muscles from the list for
5 DEC Practical knowledge: After the lab 17	<ul> <li>- brachiai piexus (see above)</li> <li>lab</li> <li>- palmaris longus m.</li> <li>- flexor carpi ulnaris m.</li> <li>- flexor digitorum superficialis &amp; profundus muscle</li> </ul>	Fascial compartments of the forearm. Muscles of the anterior compartment of the forearm. Radial and ulnar artery & veins. Superficial veins of the upper limb. Nerves of the forearm. Theoretical knowledge: 1. name attachments, functions and innervation of the muscles from the list for this lab.
5 DEC Practical knowledge: After the lab 17 student	<ul> <li>- practilal plexus (see above)</li> <li>lab</li> <li>- palmaris longus m.</li> <li>- flexor carpi ulnaris m.</li> <li>- flexor digitorum superficialis &amp; profundus muscle</li> <li>- pronator teres m.</li> </ul>	Fascial compartments of the forearm. Muscles of the anterior compartment of the forearm. Radial and ulnar artery & veins. Superficial veins of the upper limb. Nerves of the forearm. Theoretical knowledge: 1. name attachments, functions and innervation of the muscles from the list for this lab.
5 DEC Practical knowledge: After the lab 17 student ought to	<ul> <li>- bracmar piexus (see above)</li> <li>lab</li> <li>- palmaris longus m.</li> <li>- flexor carpi ulnaris m.</li> <li>- flexor digitorum superficialis &amp; profundus muscle</li> <li>- pronator teres m.</li> <li>- flexor pollicis longus m.</li> </ul>	Fascial compartments of the forearm. Muscles of the anterior compartment of the forearm. Radial and ulnar artery & veins. Superficial veins of the upper limb. Nerves of the forearm. Theoretical knowledge: 1. name attachments, functions and innervation of the muscles from the list for this lab.
5 DEC Practical knowledge: After the lab 17 student ought to know	<ul> <li>- bracinal plexus (see above)</li> <li>lab</li> <li>- palmaris longus m.</li> <li>- flexor carpi ulnaris m.</li> <li>- flexor digitorum superficialis &amp; profundus muscle</li> <li>- pronator teres m.</li> <li>- flexor pollicis longus m.</li> <li>- flexor carpi radialis m.</li> </ul>	Fascial compartments of the forearm. Muscles of the anterior compartment of the forearm. Radial and ulnar artery & veins. Superficial veins of the upper limb. Nerves of the forearm. Theoretical knowledge: 1. name attachments, functions and innervation of the muscles from the list for this lab.
5 DEC Practical knowledge: After the lab 17 student ought to know where are	<ul> <li>- bracmar piexus (see above)</li> <li>lab</li> <li>- palmaris longus m.</li> <li>- flexor carpi ulnaris m.</li> <li>- flexor digitorum superficialis &amp; profundus muscle</li> <li>- pronator teres m.</li> <li>- flexor pollicis longus m.</li> <li>- flexor carpi radialis m.</li> <li>- pronator quadratus m.</li> </ul>	Fascial compartments of the forearm. Muscles of the anterior compartment of the forearm. Radial and ulnar artery & veins. Superficial veins of the upper limb. Nerves of the forearm. Theoretical knowledge: 1. name attachments, functions and innervation of the muscles from the list for this lab.
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10 DEC	lab	Muscles of the lateral & posterior
		compartment of the forearm. Muscles of the
		hand. The carpal tunnel. Superficial & deep
		palmar arch. Skin innervation of the upper
		limb. Lymph nodes & lymph drainage of the
		upper limb.
Practical	- brachioradialis m.	Theoretical knowledge:
knowledge:	- extensor carpi radialis longus &	1. name attachments, functions and
After the	brevis m.	innervation of the muscles of forearm
lab 18	- supinator m.	2. discuss composition and branches of the
student	- superficial and deep radial	superficial and deep palmar arches.
ought to	nerve	3. discuss the lymphatic drainage of the
know	- posterior interosseous nerve	upper limb
where are	- posterior cutaneous branch of	4. discuss the cutaneous innervation of the
the	the ulnar nerve, ramus dorsalis	upper limb
following	manus of ulnar nerve	
elements ?	- extensor digitorum m.	
	- extensor digiti minimi m.	
	- extensor carpi ulnaris m.	
	- abductor pollicis longus	
	- extensor pollicis brevis m.	
	- extensor pollicis longus m.	
	- extensor indicis	
	- cephalic & basilic veins; median	
	cubital vein –	
	- palmar cutaneous branch of the	
	median & ulnar	
	- flexor & extensor retinaculum	
	<ul> <li>deep &amp; superficial branches of</li> </ul>	
	the ulnar nerve	
	- superficial palmar branch of the	
	radial artery	
	- deep palmar branch of the ulnar	
	artery	
	- superficial palmar arch	
	- deep palmar arch	
	- muscles of thenar: abductor	
	pollicis brevis, flexor pollicis	
	brevis, adductor pollicis,	
	opponens pollicis	
	- hypothenar mm: abductor digiti	
	minimi, flexor digiti minimi	
	(brevis); opponens digiti	
	minimi	
	- palmaris brevis m.	
	- lumbrical mm.	
	- interossei mm.: palmar and	
	dorsal	
12 DEC	lab	Review

13 DEC	-	-
17 DEC	lab	Review
19 DEC	lab	Practical exam
20 DEC	lecture	TEST
		Abdomen, pelvis & lower limb
7 JAN	lab	Abdomen –main divisions, lines and planes.
		Abdominal wall (structure) – muscles,
		fascial & peritoneal lining, blood supply,
		innervation. Surface anatomy –
		(landmarks): xiphoid process, costal
		margin, iliac crest, pubic tubercle,
		symphysis pubis, inguinal ligament, linea
		alba, umbilicus. Inquinal canal. Peritoneal
		cavity. Peritoneal pouches, fossae, spaces
		and gutters. Bursa omentalis. Peritoneal
		ligaments, omenta and mesenteria.
Practical	rectus abdominis muscle;	Theoretical knowledge:
knowledge:	external abdominal oblique	1. describe regions of abdominal wall
After the	and aponeurosis; internal	2. define stable reference points in anterior
lab 19	abdominal oblique,	abdominal wall. What is linea alba,
student	transversus abdominis	semilunar line, arcuate line?
ought to	- inguinal ligament; superficial	3. describe what is hernia?
know	inguinal ring	4. where are the weak points in abdominal
where are	- spermatic cord	wall where hernia may occur?
the	- ductus deferens,	5. differentiate direct and indirect inguinal
Ionowing	- round ligament of the uterus	difu ferrioral herrids
elements :	- Interior epigastric artery & vein;	(losser cac) = how does it arise?
	voin	7 define organs which are intraneritoneal
	- median umbilical fold: medial	extraneritoneal (primarily retroperitoneal
	umbilical folds (umbilical	and secondarily retroperitoneal
	ligament umbilical artery):	subperitoneal, preperitoneal)
	lateral umbilical folds	8. what is mesentery – say something
	- medial, lateral inguinal fossa.	about its role and origin
	supravesical fossa	9. describe greater and lesser omentum –
	- lesser omentum	define their contents
	(hepatoesophageal,	10. name other peritoneal gutters
	hepatogastric,	
	hepatoduodenal ligaments)	
	- greater omentum (gastrocolic	
	ligament + epiploe)	
	- mesentery	
	- sigmoid mesocolon	
	- transverse mesocolon	
	- mesoappendix	
9 JAN	lab	Gastrointestinal tract: abdominal portion of
		esophagus, stomach, duodenum. Spleen.
		Pancreas. Celiac trunk.

Practical	pancreas : (head, body, tail)	Theoretical knowledge:
knowledge:	spleen : (upper and lower pole,	1. describe topography and anatomical
After the	anterior and posterior	structure of stomach, duodenum, spleen,
lab 20	margin, hilus)	pancreas
student	abdominal aorta : celiac trunk,	2. describe blood, lymphatic and nerve
ought to	superior & inferior	supply of organs mentioned above
know	mesenteric arteries, renal	3. name branches of the celiac trunk. Which
where are	arteries, testicular or ovarian	organs are supplied by this vessel?
the	arteries, lumbar arteries,	4. name major branches of abdominal
following	common iliac arteries,	aorta.
elements ?	external & internal iliac	
	arteries, median sacral artery	
	celiac trunk : (left gastric artery,	
	common hepatic artery -	
	gastroduodenal artery /	
	proper hepatic artery, right	
	and left hepatic arteries,	
	right gastric artery/, splenic	
	artery – short gastric	
	arteries), right	
	gastroepiploic, sup. at. &	
	post. pancreaticoduodenal	
	arteries, left gastroepiploic	
	artery	
	stomach : cardia, fundus, body,	
	greater and lesser	
	curvatures, pylorus	
	Duodenum: superior,	
	descending, transverse,	
	ascending parts. Papilla of	
	Vater, circular folds	
10 JAN	_	-
14 JAN	lab	Jejunum, ileum. Superior mesenteric artery
		& vein. Large intestine (ileocecal valve,
		cecum, vermiform appendix, colon,
		rectum). Inferior mesenteric artery and
		vein.
Practical	-Mesentery	Theoretical knowledge:
knowledge:	superior mesenteric artery :	1. describe blood, lymphatic and nerve
After the	(inferior	supply of small and large intestine
lab 21	pancreaticoduodenal artery,	2. describe major anatomical differences
student	middle colic artery /right and	between small and large intestine
ought to	left branches/, right colic	3. name branches of superior and inferior
know	artery /ascending and	mesenteric arteries
where are	descending branches/,	4. pay attention to variations of the position
the	intestinal arteries, ileocolic	of the appendix
following	artery : colic artery, ileal	
elements ?	artery, anterior and posterior	

	cecal branches, appendicular	
	artery)	
	inferior mesenteric artery : (left	
	colic artery /ascending and	
	descending branch/, sigmoid	
	arteries, superior rectal	
	artery)	
	- epiploic appendage	
	- taenia coli (libera, mesocolica,	
	omentalis)	
16 JAN	lab	The liver, portal vein & porto-systemic
		anastomoses. Gallbladder. Bile ducts.
Practical	liver : quadrate lobe of the liver,	Theoretical knowledge:
knowledge:	caudate lobe of the liver –	1. describe position of the liver and its
After the	caudate & papillary processes;	relationships
lab 22	ligamentum teres hepatis (round	2. describe blood supply of the liver (incl.
student	ligament of the liver), fissure for	portal hepatic circulation)
ought to	the round ligament of the liver,	3. what are liver vascular lobuli?
know	bare area of the liver (area nuda);	4. describe intra- and extrahepatic biliary
where are	ligamentum venosum (fissure for	tracts
the	lig. venosum), falciform ligament	5. discuss possible consequences of portal
following	(left & right triangular ligaments);	hepatic hypertension – pay attention to
elements ?	gallbladder (fossa for the	consequences of portal-hepatic
	gallbladder), fissure for the	anastomoses
	inferior vena cava – hepatic	
	veins; omental tuber; porta	
	hepatis; cystic duct; common	
	hepatic duct (right and left	
	hepatic ducts), ductus	
	choledochus (common bile duct),	
	portal vein, proper hepatic artery	
	(right & left hepatic arteries,	
17 JAN	lecture	Development of the gastrointestinal system.
21 JAN	lab	Retroperitoneal space. Kidneys. Suprarenal
		glands. Ureters. Abdominal aorta. Inferior
		vena cava. Lymph drainage of the
		abdomen.
Practical	<b><u>kianey</u></b> : pyramid, renal column,	I neoretical knowledge:
After the	renai papilia, minor calyx, major	1. describe position and topography of
	caryx, renai pervis); ureter; renal	Runeys and suprarenal yidnas
au 23	allery, renarveni, suprarenar gland	- what clinical consequences may arise
ought to	abdominal aorta : colias trunk	from this specific course?
know	autorinia auria : cellac trunk,	discuss the lymphatic drainage of major
where are	arteries repairerior testicular	abdominal organs - nay attention to
the	or ovarian artorics, lumbar	abuominal organs - pay allention to
following	arteries, common iliac arteries	which use lymphating system for spreading
elemente ?	external & internal ilias artorias	(dissemination)
	median sacral artery	

	inferior vena cava: inferior	4. discuss tributaries of inferior vena cava -
	phrenic veins, renal veins, right	pay attention to differences between
	and left testicular/ovarian vein;	branches of abdominal aorta and tributaries
	lumbar veins, common iliac veins	of IVC
		5. discuss differences between male and
		female urinary systems – pay attention to
		developmental aspects
23 JAN	lab	Orientation of the pelvis. False & true
		pelvis. Surface landmarks of the pelvis.
		Floor of the pelvis. Pelvic peritoneum.
		Nerves and vessels of the pelvis. Urinary
		bladder. Urethra. Male genital organs
Practical	<ul> <li>urinary bladder (the trigone);</li> </ul>	Theoretical knowledge:
knowledge:	internal os of urethra (male	1. discuss course of the peritoneum within
After the	or female)	male and female pelvis
lab 24	- male & female urethra; male	2. discuss anatomy of pelvic floor
student	urethra – prostatic part, penile	3. intraperitoneal, subperitoneal and
ought to	urethra	subcutaneous spaces of pelvis
know	- rectum and anal canal	4. name branches of the internal iliac artery
where are	(transverse folds of the	5. discuss structure of the inferior
the	rectum, inferior, middle &	hypogastric plexus and its innervation – pay
following	superior)	attention to composition of the pelvic
elements?	- rectovesical pouch	splanchnic nerves
	- testis – epididymis (head, body	6. discuss anatomy of the urinary bladder
	and tail), seminal vesicles,	and male urethra
	vas deferens, ampulla of	7. discuss anatomy of male internal and
	ductus deferens, ,	external genitalia
	ejaculatory duct	
	prostate gland,	
	scrotal ligament	
	- internal iliac artery – superior &	
	inferior gluteal artery,	
	umbilical artery, obturator	
	artery; middle rectal artery,	
	inferior vesical artery).	
	- internal iliac vein: obturator	
	vein	
	- femoral, lateral cutaneous	
	femoral, ilioinquinal,	
	iliohypogastric, genitofemoral,	
	obturator, subcostal nerves	
	- sympathetic trunk, -	
	lumbosacral trunk	
	<ul> <li>levator ani muscle, obturator</li> </ul>	
	internus muscle	
24 JAN	lecture	Development of the genital system.
(Winter brea	k)	
25 FEB	lab	Orientation of the pelvis. False & true
		pelvis. Surface landmarks of the pelvis.

		Floor of the pelvis. Pelvic peritoneum.
		Nerves and vessels of the pelvis. Urinary
		bladder. Urethra. Male genital organs
Practical	<ul> <li>urinary bladder (the trigone);</li> </ul>	Theoretical knowledge:
knowledge:	internal os of urethra (male	1. discuss course of the peritoneum within
After the	or female)	male and female pelvis
lab 25	- male & female urethra; male	2. discuss anatomy of pelvic floor
student	urethra – prostatic part, penile	3. intraperitoneal, subperitoneal and
ought to	urethra	subcutaneous spaces of pelvis
know	- rectum and anal canal	4. name branches of the internal iliac artery
where are	(transverse folds of the	5. discuss structure of the inferior
the	rectum, inferior, middle &	hypogastric plexus and its innervation – pay
following	superior)	attention to composition of the pelvic
elements ?	- rectovesical pouch	splanchnic nerves
	- testis – epididymis (head, body	6. discuss anatomy of the urinary bladder
	and tail), seminal vesicles,	and male urethra
	vas deferens, ampulla of	7. discuss anatomy of male internal and
	ductus deferens, ,	external genitalia
	ejaculatory duct	
	prostate gland,	
	scrotal ligament	
	- internal iliac artery – superior &	
	inferior gluteal artery,	
	umbilical artery, obturator	
	artery; middle rectal artery,	
	inferior vesical artery).	
	- internal iliac vein: obturator	
	vein	
	- femoral, lateral cutaneous	
	femoral, ilioinquinal,	
	iliohypogastric, genitofemoral,	
	obturator, subcostal nerves	
	- sympathetic trunk, -	
	lumbosacral trunk	
	- levator ani muscle, obturator	
	internus muscle	
27 FEB	lab	Female genital organs. Perineum. The back.
		Lymph drainage of the pelvis.
Practical	uterus : broad ligament of	Theoretical knowledge:
knowledge:	uterus, round ligament of the	1. discuss anatomy of external and internal
After the	uterus, ovarian ligament,	female genitalia (what is anteflexion and
lab 26	suspensory ligament of the	anteversion of uterus, what is pelvic axis,
student	ovary, cervical canal, cervix,	recall pelvic planes)
ought to	isthmus, fundus); uterine	2. define major lymphatic routes in the
know	tubes; rectouterine pouch (of	pelvis – pay attention to their clinical
where are	Douglas);	importance.
the	- mesovarium	3. discuss arrangement of the muscles of
following	- mesosalpinx	the back – pay attenbtion to their functions
elements ?	- mesometrium	and innervation

	<ul> <li>vesicouterine pouch</li> </ul>	
	ovaries	
	vagina (ant., post. & lateral	
	fornix)	
	major pudendal labium	
	minor pudendal labium	
28 FEB	-	-
4 MAR	lab	Muscles of the anterior & medial fascial
		compartment of the thigh. Femoral sheath.
		Femoral triangle. Femoral artery and vein.
		Subsartorial canal. Lumbar plexus.
Practical	-psoas major muscle	Theoretical knowledge:
knowledge:	-psoas minor muscle	1. define lumbar plexus – distinguish nerves
After the	-iliacus muscle	which originate from it. What do these
lab 27	- <u>lumbar plexus</u> : obturator nerve;	nerves supply?
student	iliohypogastric nerve;	2. discuss origins and insertions, function
ought to	ilioinquinal nerve; lateral	and innervartion of muscles of anterior and
know	cutaneous nerve of thigh (lat.	medial compartment of the thigh
where are	cut. femoral n.),	3. define limitation and contents of the
the	genitofemoral nerve (genital	femoral triangle
following	and femoral branch); femoral	4. name branches of femoral artery
elements ?	nerve (its branches :	5. discuss limitations and content of the
	muscular and anterior	subsartorial (adductor = Hunter's) canal
	cutaneous femoral nerves,	
	sartorial branches, nerve to	
	vastus medialis, saphenous	
	nerve);	
	-external iliac artery and vein :	
	inferior epigastric artery &	
	vein , deep circumflex iliac	
	artery & vein)	
	-femoral artery and vein :	
	superficial epigastric artery,	
	superficial circumflex iliac	
	artery, external pudendal	
	aa., descending genicular	
	artery, profunda femoris	
	artery : medial and lateral	
	circumflex femoral arteries,	
	perforating branches)	
	-sartorius muscle	
	-quadriceps femoris muscle :	
	rectus femoris, vastus	
	medialis, intermedius and	
	lateralis	
	-tensor fasciae latae : iliotibial	
	tract	

	- pectineus muscle, adductor	
	longus, brevis and magnus,	
	gracilis muscle.	
	-anterior division of obturatory	
	nerve and vessels	
6 MAR	lab	Regions of the lower limb. Muscles of the
		buttock, subgluteal space. Greater & lesser
		sciatic foramina. Muscles of the posterior
		fascial compartment of the thigh. Sacral
		plexus. Popliteal fossa.
Practical	- gluteus maximus muscle	Theoretical knowledge:
knowledge:	- gluteus medius and minimus	1. discuss origins and insertions, function
After the	muscle	and innervartion of muscles of buttock.
lab 28	- piriformis muscle	Discuss cutaneous innervation of the
student	- gemellus superior muscle,	buttock
ought to	tendon of internal obturator	2. define sacral plexus – distinguish nerves
know	muscle, gemellus inferior	which originate from it. What do these
where are	muscle, guadratus femoris	nerves supply?
the	muscle	3. discuss limitations and content of the
following	- superior gluteal nerve and	greater and the lesser sciatic foramina
elements ?	vessels	4. discuss origins and insertions, function
	- inferior gluteal nerve and	and innervartion of muscles of posterior
	vessels	compartment of the thigh. What are the
	- nosterior cutaneous femoral	hamstring muscles?
	nerve (nost cut n of thigh)	5. name branches of popliteal artery. Pay
	- sciatic nerve	attention to its relationship with the vein
	- nudendal nerve internal	and surrounding nerves
	nudendal vessels	6. define limitation and contents of popliteal
	- sacrosninous ligament	fossa.
	sacrotuberous ligament	
	- hicens femoris muscle (long	
	head and short head)	
	- semitendinosus muscle	
	semimembranosus muscle	
	- popliteal artery and yein - sural	
	arteries (med & lat ).	
	genicular artorios	
	- common neroneal (fibular)norvo	
	- lateral and medial cutanoous	
	- lateral and medial cutalleous	
7 MAR		_
	lab	Muscles of the of the lower lea Posterior
		and anterior tibial vessels. Tibial and
		common fibular nerves. Muscles of the foot
		Arterial & venous supply of the foot Foot as
		a functional unit Innervation of the skin of
1		

		the lower limb. Lymph drainage of the lower
		limb. Superficial veins of the lower limb.
Practical	- deep and superficial peroneal	Theoretical knowledge:
knowledge:	nerves	1. discuss origins and insertions, function
After the	- anterior and posterior tibial	and innervartion of muscles of the leg
lab 29	vessels – peroneal artery	(anterior, lateral, posterior group)
student	- peroneus longus and brevis	2. discuss topography of tibial nerve,
ought to	muscles	common, deep and superficial fibular nerves
know	- tibialis anterior muscles,	and the adjacent vessels
where are	extensor digitorum longus	3. divide muscles of the foot into groups,
the	muscle, extensor hallucis	discuss their innervation.
following	longus muscle, peroneus	4. discuss cutaneous innervation of the
elements ?	tertius muscle	lower limb
	- gastrocnemius muscle – medial	5. discuss the course of main superficial
	& lateral head	veins of the lower limb – pay attention to
	- soleus muscle	clinical aspects
	- plantaris muscle	6. discuss the lymphatic drainage of the
	- tibialis posterior muscle	lower limb.
	- flexor hallucis longus muscle	
	- flexor digitorum longus muscle	
	- extensor digitorum brevis	
	muscle	
	- lateral and medial plantar nerve	
	and vessels	
	- quadratus plantae muscle	
	- abductor halluces muscle	
	- flexor halluces brevis muscle	
	- abductor digiti minimi muscle	
	- plantar aponeurosis,	
	- calcaneal (Achilles) tendon	
	- great & small saphenous vein;	
	saphenous nerve	
13 MAR	lab	Practical review
14 MAR	lecture	Test
18 MAR	lab	Practical exam
20 MAR	lab	Review of the scull. Muscles of the neck.
		Thyroid and parathyroid glands. Cervical
		plexus. Accessory nerve
Practical	Sternocleidomastoid muscle	Theoretical knowledge:
knowledge:	-spinal accessory nerve	1. discuss major communication and
After the	digastric (ant. and post. belly)	contents of the cranial fossas, canals,
lab 30	stylohyoid muscle	fissures of the skull
student	sternohyoid muscle	2. name muscles of the neck, divide them
ought to	omohyoid muscle (sup. and inf.	into groups, pay attention to their
know	belly)	innervation and function
where are	thyrohyoid muscle	3. discuss position of the thyroid gland –
the	lateral lobe of thyroid gland	pay attention to clinical aspects
following	superior thyroid artery	
elements ?	external laryngeal nerve	

	anterior and middle scalene	4. discuss location of parathyroid glands –
	muscles	pay attention to blood supply of thyroid and
	-cervical plexus – greater	parathyroid glands
	auricular, lesser occipital,	5. define cervical plexus – distinguish
	supraclavicular nerves	nerves which originate from it. What do
	-phrenic nerve	these nerves supply?
	- supraclavicular portion of	6. discuss course of accessory nerve – what
	brachial plexus	does it innervate, what are potential causes
		of its lesion and potential effects?
21 MAR	lecture	Development of the head and neck;
		pharyngeal arches.
25 MAR	lab	External & Internal Carotid Arteries.
_		External & Internal Jugular Veins, Lymph
		Drainage of the Neck.
Practical	- internal jugular vein, external	Theoretical knowledge:
knowledge:	jugular vein, subclavian vein	1. name major branches of the external
After the	- common carotid artery (left and	carotid artery – what do they supply?
lab 31	right)	2. what is carotid sinus and carotid body
student	- internal & external carotid	(glomus)?
ought to	artery	3. discuss main veins of the neck, their
know	- maxillary & superficial temporal	drainage – potential and real connections
where are	arteries	between dural venous system and them
the	- superior thyroid artery,	4. define major lymph nodes of the neck –
following	ascending pharyngeal artery	define their connections and lymphatic
elements ?	- superior laryngeal, posterior	routes.
	auricular artery	
	- lingual artery, occipital, facial	
	arteries, facial vein	
	vertebral artery	
27 MAR	lab	Submandibular gland & sublingual gland.
		Submandibular ganglion. Vagus & phrenic
		nerves. Cervical portion of the sympathetic
		trunk.
Practical	- submandibular gland	Theoretical knowledge:
knowledge:	- sublingual gland	1. discuss location and drainage of
After the	- vagus nerve, hypoglossal nerve	submandibular and sublingual salivary
lab 32	- superior & internal laryngeal	glands.
student	branch of vagus	2. define location, character and innervation
ought to	- right recurrent laryngeal nerve	of the submiandibular ganglion
know	- phrenic nerve	3. discuss course of vagus and phrenic
where are	- superior cervical ganglion	nerves – what do they innervate, what are
the	- cervical portion of sympathetic	potential causes of its lesion and potential
following	trunk	effects?
elements ?		4. recall definition of the sympathetic trunk.
		Localize the ganglia of the cervical portion –
		what do they innervate. What is their
		relationship with the center of the
		sympathetic nervous system in the spinal

		cord? What are potential effects of their
		lesion?
28 MAR	-	-
1 APR	lab	Muscles of facial expression. Blood and
		nerve supply of the face (facial artery &
		ophtalmic nerve). Facial nerve. Parotid
		gland.
Practical	infraorbital nerve and artery;	Theoretical knowledge:
knowledge:	mental nerve and artery	1. divide muscles of facial expression into
After the	<ul> <li>Parotid gland and duct</li> </ul>	groups – describe their main actions and
lab 33	<ul> <li>Facial nerve (parotid</li> </ul>	innervation
student	plexus and its	2. discuss blood and nerve supply of the
ought to	ramifications)	face – pay attention to important clinical
know	<ul> <li>Facial artery: superior</li> </ul>	aspects.
where are	and inferior labial	3. discuss course of facial nerve – what
the	arteries, nasal rami,	does it innervate, what are potential causes
following	submental artery,	of its lesion and potential effects?
elements ?	angular artery, facial	4. discuss location and drainage of the
	vein	parotid gland. Which structures are located
	<ul> <li>Major zygomatic muscle,</li> </ul>	within the substance of this gland?
	orbicularis oculi muscle,	
	orbicularis oris muscle.,	
	levator labii superioris,	
	buccinators muscle,	
	platysma, depressor	
	anguli oris	
3 APR	lab	The Orbit & its walls. Structure of the
		eyeball. Nerve & blood supply of the
		eyeball. Ciliary ganglion. The accessory
		organs of the eyeball (muscles, eyelids,
		lacrimal apparatus). Optic nerve.
		Oculomotor nerve. Trochlear nerve.
		Abducent nerve. Opnthalmic nerve.
Practical	-optic nerve	Ineoretical knowledge:
After the	-lacrimal giand	1. discuss initiation and communication of
Alter the	Superior modial lateral and	2 name major elements of the wall of
idu 34	inforior roctus musclos	
ought to	Superior and inferior oblique	3 discuss contents of the evenal
know	muscles	4 describe circulation of the aqueous
where are	Cavernous sinus	humor
the	Trigeminal ganglion on thalmic	5. describe the drainage of the tears
following	maxillary and mandibular nerves	6. describe accessory organs of the eveball
elements ?		including muscles which move eveball
		7. discuss course of optic, oculomotor.
		trochlear and abducens nerves – what do
		they innervate, what are potential causes of
		its lesion and potential effects?

		8. describe ciliary ganglion – what does it
		innervate?
		9. name major branches of ophthalmic
		artery
		10. discuss connections of ophthalmic veins
		with facial veins and venous dural sinuses –
		pay attention to clinical aspects.
4 APR	lecture	Far (external middle & internal)
		Vestibulocochlear nerve
8 ADD	lab	Ptervgopalating fossa Maxillary division of
0 AI K		V-th perve Ptervgopalating ganglion Dura
		mater – venous sinuses. (Venous drainage
		of the head) Blood & nerve supply of the
		meninges
Practical	superior & inferior sagittal	Theoretical knowledge:
knowledge	sinuses	1 define limitations and contens plus
After the	straight sinus	communication of ntervisionalating fossa
lah 35	transverse & sigmoid sinuses	2 name major branches of the maxillary
student	superior and inferior petrosal	perve – localize ptervgopalatine ganglion
ought to	sinuses	and its roots. Name structures supplied by
know	shenonarietal sinus	this ganglion
where are	occinital sinus	3 divide venous dural sinuses – describe
the	cavernous sinus	their connections with the extracranial
following	sigmoid sinus	venous system
elements ?	internal jugular vein	4 describe meningeal arrangement – define
	falx cerebri falx cerebelli	blood supply and innervation of meninges
	tentorium cerebelli	blood supply and intervation of menniges
	-greater palatine nerve	
	descending palatine artery	
10 APR	lab	Temporomandibular joint Temporal
		infratemporal & retromandibular fossa
		Muscles of mastication Mandibular division
		of V-th nerve. Otic ganglion. Maxillary
		artery
Practical	-masseter, temporalis, medial	Theoretical knowledge:
knowledge:	and lateral ptervgoid muscles:	1. define limitations and contens plus
After the	- inferior alveolar, lingual,	communication of infratemporal fossa
lab 36	auriculotemporal nerves; inferior	2. name major branches of the mandibular
student	alveolar artery, middle meningeal	nerve – localize otic and submandibular
ought to	artery	ganglia and their roots. Name structures
know	deep temporal arteries,	supplied by each ganglion.
where are	external acoustic meatus	3. describe course and name major
the	earlobe, helix, anthelix, tragus,	branches of maxillary artery
following	antitragus, intertragic notch,	4. describe muscles of mastication and pay
elements ?	triangular fossa, scapha, cymba	attention to their function and innervation.
	conchae, cavity conchae	
11 APR	-	-
24 APR	lab	Pharynx. Parapharyngeal space.
		Glossopharyngeal nerve. Vagus nerve.

		Accessory nerve. Oral cavity. Teeth.
		Gingiva. Tongue. Tonsills. Hypoglossal
		nerve.
Practical	pharyngeal tonsil, palatine tonsil,	Theoretical knowledge:
knowledge:	tubal tonsil (torus tubarius),	1. discuss topography of pharynx. Which
After the	lingual tonsil.	elements are visible in the naso-, oro- and
lab 37	posterior wall of the pharynx;	laryngopharynx?
student	pharyngeal recess	2. discuss course of glossopharyngeal nerve
ought to	soft palate (sagittal section);	- what does it innervate, what are potential
know	palatoglossal &	causes of its lesion and potential effects?
where are	palatopharyngeal	3. describe anatomy of the tongue and
the	arches(folds)	palate
following	auditory tube ; salpingopalatine	4. name major tonsils. Are you able to
elements ?	& salpingopharyngeal folds	localize them?
	vallecula, median and lateral	5. discuss course of hypoglossal nerve –
	glossoepiglottic folds,	what does it innervate, what are potential
	foramen cecum	causes of its lesion and potential effects?
	<ul> <li>Hypoglossal nerve</li> </ul>	6. name contents of the parapharyngeal
	-oral vestibule; frenulum of the	space – what are connections of this space
	upper and lower lips	<ul> <li>what are potential clinical aspects of these</li> </ul>
		relationships?
25 APR	lecture	Cranial nerves – clinical appearances
29 APR	lab	Larynx, nasal cavity, paranasal sinuses –
		structure, blood supply and innervation.
Practical	piriform recess, aryepiglottic	Theoretical knowledge:
knowledge:	folds, vestibular ligament (cord,	1. describe bony structure of nasal cavity.
After the	fold) = false vocal fold; ventricle	Pay attention to its connections and
lab 38	of larynx, vocal ligament (cord,	drainage of the paranasal sinuses.
student	fold) = true vocal fold; esophagus,	2. describe blood supply and innervation of
ought to	trachea; Cricoid, thyroid,	the nasal cavity – pay attention to cause of
know	epiglottic cartilages of larynx	nasal bleeding (epistaxis)
where are	cricothyroid mucles. Posterior	3. discuss topography composition of
the	acricoarytenoid muscle,	larynx. Pay attention to important clinical
following	interarytenoid notch	aspects of laryngeal topography.
elements ?	nasal septum, superior, middle,	4. Describe the role of different groups of
	inferior nasal concha,	laryngeal muscles – pay attention to their
	sphenoiethmoidal recess,	innervation and possible cause of nerve
	superior, middl, inferior nasal	injury.
	meatus, limen nasi, nasal	
	vestibule, sphenoid, frontal,	
	maxillary sinus, ethmoidal air	
	cells (anterior, middle and	
C MAX	posterior)	
		Practical review
	lecture	Nain anatomical terms related to the CNC
12		Principal cord Spinol porto Maningas, ari
		spinal colu. Spinal herve. Meninges – epi-,
		subuural space, subarachnold space.

Practical	-conus medullaris, cauda equina,	Theoretical knowledge:
knowledge:	denticulate ligaments, spinal	1. describe main subdivisions of the central
After the	nerve, dorsal root ganglion,	nervous system
lab 39	anterior spinal artery; anterior	2. describe anatomical structure of spinal
student	median and posterior median	cord and its position within vertebral canal.
ought to	sulcus	Pay attention to meningeal arrangement.
know		3. recall definitions of: spinal nerve,
where are		nucleus, ganglion, etc.
the		4. describe blood supply of the spinal cord
following		
elements ?		
15 MAY	lab	Brainstem – medulla, pons and midbrain.
		Cerebellum. Fourth ventricle. Cranial
		nerves' nuclei.
Practical	- tectum, tegmentum (midbrain)	Theoretical knowledge:
knowledge:	- superior & inferior colliculus of	1. describe external view of the medulla,
After the	tectum	pond and the midbrain.
lab 40	- brachium of the superior and	2. describe major collections of gray matter
student	inferior colliculus	(nuclei) within the brainstem – pay
ought to	- substantia nigra, red nucleus	attention to nuclei of the cranial nerves and
know	- cerebral peduncle (crus cerebri),	nuclei of extrapyramidal system
where are	interpeduncular fossa	3. name major parts of cerebellum – and
the	- superior, middle, inferior	associate them to different functions
following	cerebellar peduncle, dentate	4. define the exits of the cranial nerves
elements ?	nucleus, arbor vitae cerebelli	from the brainstem
	(tree of life of cerebellum),	5. describe limitations of the fourth ventricle
	cerebellar tonsil	
	- basilar sulcus	
	- rhomboid fossa: facial colliculus,	
	medial eminence, sulcus	
	limitans, striae acusticae	
	trigeminal nerve (origin from the	
	pons)	
	<ul> <li>bulbopontine sulcus</li> </ul>	
	(inferior pontine sulcus),	
	superior pontine sulcus	
	<ul> <li>preolivary &amp; postolivary sulcus</li> </ul>	
	- olive, pyramid	
	- gracile, cuneate tubercle &	
	fasciculus	
	- anterior & posterior median	
	sulcus	
	-vertebral, basilar, posterior	
	cerebral, middle cerebral,	
	anterior cerebral arteries,	
	anterior communicant,	
	posterior communicant,	
	internal carotid artery, great	
	cerebral vein, superior	

ment of the central nervous system. halon. (thalamus, hypothalamus, mus, metathalamus). III-rd e. ical knowledge: ibe topography of thalamus. e structures of epithalamus, lamus, subthalamus. What is the ilamus? ibe limitations of the third ventricle connections
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lamus, subthalamus. What is the lamus? ibe limitations of the third ventricle connections
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ibe limitations of the third ventricle connections
connections
ohalon - cerebral lobes, cortical
subcortical nuclei (basal ganglia).
ng tracts of CNS.
cal knowledge:
main gyri of frontal, parietal,
and occinital lobes. Localize insula
ibe the role of basal ganglia – pay
ibe the role of basal ganglia – pay n to their localization
ibe the role of basal ganglia – pay n to their localization e tracts of central nervous system
ibe the role of basal ganglia – pay n to their localization e tracts of central nervous system diate different types of superficial,
ibe the role of basal ganglia – pay n to their localization e tracts of central nervous system diate different types of superficial, nscious and deep unconscious
ibe the role of basal ganglia – pay n to their localization e tracts of central nervous system diate different types of superficial, nscious and deep unconscious on – name them and trace their
ibe the role of basal ganglia – pay n to their localization e tracts of central nervous system diate different types of superficial, nscious and deep unconscious on – name them and trace their paying attention to localization of
ibe the role of basal ganglia – pay n to their localization e tracts of central nervous system diate different types of superficial, nscious and deep unconscious on – name them and trace their paying attention to localization of urons and possible effects of their
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phalon – cerebral lobes, cortical subcortical nuclei (basal gangliang tracts of CNS. ical knowledge: main gyri of frontal, parietal,

	- caudate nucleus (head, body,	
	tail)	
	- putamen & globus pallidus	
	(lentiform nucl.)	
	- external and extreme	
	capsules	
	- claustrum	
	- internal capsule (anterior	
	limb deput posterior limb)	
	- corpus callosum (rostrum	
	denu trunk splenium)	
23 MAY		_
27 MAV	lab	Descending tract of CNS_Blood supply of
27 MAT		CNS. Strake, Circulation of carebra chinal
Practical	- superior medullary velum	Theoretical knowledge:
knowledge:	- septum pellucidum	1. divide tracts of central nervous system
After the	- anterior horn of the lateral	that mediate motion – name them and trace
lab 43	ventricle,	their courses paying attention to localization
student	- stria terminalis,	of their neurons and possible effects of their
ought to	- thalamostriate vein	lesion.
know	- great cerebral vein	2. name arteries of circle of Willis – describe
where are	- vertebral, basilar, posterior	course of anterior, middle and posterior
the	cerebral, middle cerebral,	cerebral artery – name major structures
followina	anterior cerebral arteries.	supplied by them, and syptoms of occlusion
elements ?	anterior communicant	3 describe circulation of the cerebrospinal
ciemento .	nosterior communicant	fluid
	internal caratid arteny great	
	Internal carotid artery, great	
	cerebral vein, superior	
	cerebellar artery, anterior	
	inferior cerebellar artery	
29 MAY	lab	Pathways: optic olfactory, olfactory,
		gustatory, auditory, Vestibular
Practical	- cortical centers	Theoretical knowledge:
knowledge:	- structures formed by the	1. position of neurons of the tracts
After the	pathways (studied before)	2. axons
lab 44		3. cortical centers
student		4. clinical correlations
ought to		
know		
where are		
the		
following		
olomente 2		
elements ?		
30 MAY	-	-
3 JUN	lab	Practical review
5 JUN	lab	Practical exam
6 JUN	lecture	Test
10 JUN	lab	Practical review
12 JUN	lab	Practical review

13 JUN	-	-
17 JUN	lab	Practical review Credit test
30 JUN		FINAL PRACTICAL EXAM
1 JUL		FINAL TEST