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## Fetal pig dissection lab answers day 2

The fetal pig that you dissect was injected with a colored latex (gum) compound. The arteries were filled with red latex and the veins were blue. The incision was made on the side of the neck to make injections. The cut can be seen in the first photo below. Several different pig autopsies were used to obtain the photos below. As a result, the structure displayed in one photo may look different from the same structure shown in another photo. Click on one of the photos to see the magnification. Links to high-resolution and unscripted photos are also available for many photos. Orientation The following words will be used to identify the location of structures. The front refers to the end of the head. If the structure is anterior to the second, then it is closer to the head. The back refers to the back end. The pig in Figure 1 lies on the dorsal side. The ventral side is the abdominal side. It's across from the dorsal side. The pig in Figure 1 below has its ventral side up. External structures Get the amniotic pig and identify the structures shown in Figure 1. Use images 1-4 below to identify your gender. Use your pig and also a pig of the opposite sex to identify the structures in the photos below. The word urogenital refers to a hole that serves both the urinary (excretion) and reproductive systems. Figure 1. Female: injection site, nipples, umbilical cord Figure 2. Female: genital papilla, urogenital opening, rectum Figure 3. Male: Scrotum Figure 4. Male: urogenital opening, penis, anus Preparation and initial incises Connect one front leg of the animal with a string that passes under the autopsy pelvis to the other leg. Repeat with the back foot. Figure 5. Insert one blade of scissors over the wall of the body on one side of the umbilical cord and cut posteriorly to the base of the foot, as shown in Figure 6. Continue cutting from the front end of this cut so that it resembles an upside down U. Your finished cut will be front to the navel and along each side of the navel. The flap of the body wall, which contains the navel, can be folded posteriorly to reveal the internal organs of the abdomen. Figure 6. Figure 7. Figure 8. Pull one incision along the center line of the ventral surface of the animal to about 2 cm. from the chin. Cut completely through the body walls in the abdominal area, but keep the incision shallow in the neck area. Figure 9. The incision is made on the side of the animal from the point just back to the membrane dorsally. A similar incision is made on the other side. These two incises allow you to spread the open abdominal cavity. Figure 10. Mouth and neck area Use a scalpel to cut off the sides of the mouth so that the lower jaw can be opened for easier viewing (see Figure 11). You will need to cut through the muscles and joint that holds jaw to the skull. Figure 11. Open the jaw wide enough to be exposed to glottis and epiglottis. Epiglottis projects up through the soft palate into an area called the nosophrate. The hard palate and soft palate separate the nasal and oral cavities. When breathing, air passes through the nasal passages into the pharynx. Pharynx is the space at the back of the mouth through which both food and air pass. From the pharynx, the glottis passes into the trachea. Figure 12. Hard floor, soft floor, glottis, epiglottis and tongue. Carefully peel the skin from the incision in the neck area with the help of a blunt probe (needle or point scissors will do if there is no blunt probe). Use a probe to exfoliate muscle tissue until the thymus is exposed on each side of the trachea. Using the probe, separate the two lobes of the thymus and further separate the muscles above the trachea. The thyroid gland is darker and lies between the posterior ends of the two lobes of the thymus. Figure 13. Thymus Figure 14. Surrounding tissues have been separated to reveal the thyroid gland. Continue separating the tissue with a probe until the trachea and esophagus are exposed. The esophagus is dorsal to the trachea. A large hard structure attached to the trachea is the larynx. Contains vocal cords. In the photo below, the heart and blood vessels in the neck area have been removed so that the trachea can be seen more clearly. You should not remove these structures even because you need to identify blood vessels later in dissection. Figure 15. esophagus, larynx, trachea, trachea and lungs. Respiratory system Observe how the membrane binds to the wall of the body and separates the abdominal cavity from the lungs (pleural) and cardiac (pericardial) sinuses (Figure 16 and 18 below). Contraction of the membrane forces air into the lungs. You have already seen the nosophrate, hard palate, soft palate, epiglottis, glottis, trachea and larynx. Follow the trachea where it branches into two bronchi and observe that each bronchus leads to the lungs. The left lung contains three lobes, and the right lung contains four. Each lung is located in the body cavity called the pleural cavity. Figure 16. Membrane. Figure 17. Lungs 18. Lungs, diaphragm. Figure 19. Lungs, diaphragm (incision) Figure 20. esophagus, larynx, trachea, trachea and lungs. Digestive system You have already seen how the esophagus runs from the pharynx through the neck area. With the help of a probe, follow the esophagus to the stomach. Identify the small intestine and large intestine. Find the back of the large intestine called the rectum and note that it leads to the rectum. Look for an appendix where the small intestine connects with the large intestine. Identify the liver. Lift the right lobe and find This structure stores bile produced by the liver. Find the bile duct that leads to the small intestine. The pancreas is located dorsal and posterior to the stomach. It extends along the length of the stomach from the left side of the body (right) to the point where the stomach connects with the small intestine. Pick up the stomach and identify this bright organ. The spleen is an elongated, flattened, brownish organ that extends along the back of the ventral stomach to the (top) pancreas. A blind jacket is an appendix, where the small intestine connects with the large intestine. It houses bacteria used to digest plant materials such as cellulose. Cecum is big in herbivores, but much of it was lost during evolution in humans. The appendix in humans is the evolutionary remains of a larger appendix in human ancestors. Figure 21. Duodenum, gallbladder, liver, lungs, large intestine, pancreas, small intestine, stomach. The liver was picked up to reveal the gallbladder. Figure 22. bile duct, gallbladder, colon, liver and small intestine. The liver was picked up to reveal the gallbladder. Figure 23. Colon, liver, small intestine, spleen and stomach. Figure 24. small intestine, large intestine, pancreas, spleen, stomach – the spleen has been moved aside to reveal the pancreas. Figure 25. The stomach and liver are raised to show the pancreas. Figure 26. Colon, pancreas, small intestine, spleen, and stomach. Figure 27. appendix, liver, small intestine, spleen. Cecum is located in the place where the small intestine connects the large intestine. Figure 28. Colon, liver, small intestine, spleen and stomach. Circulatory systems 29 and 30 summarize the mammalian circulatory system. Figure 29. Circulatory system Figure 30. Circulatory system The drawings below show some of the main arteries that carry blood to the body. Blood vessels that branch from the aorta carry blood to most of the body. The pulmonary artery is able to deliver a large amount of blood to the lungs, but the lungs are not needed to acidize the fetal blood, so most of the blood is diverted to the aorta. This diagram shows that the arteriosus duct connects the pulmonary artery to the aorta and diverts blood that would otherwise go into the lungs. Shortly after birth, the ductus arteriosus closes, and the blood in the pulmonary artery goes to the lungs instead of the body. Blood passes from the left ventricle through the arch of the aorta and the aorta into the body. The first branch of the aorta is a brachiocephalic artery. The second branch is the left subclavian artery, which leads to the left anterior leg. The right subclavian carries blood to the right anterior leg, and carotids carry blood to the head. Figure 31. The main artery of the pericardium is the membrane that surrounds the heart and lines the pericardial cavity. It's lubricating fluid and isolates the heart from movements of the body, such as expansion and contraction of the nearby pleural (pulmonary) cavity. To view the details of the arch of the aorta, ductus arteriosus and pulmonary artery, it will be useful to remove the left lung. After removal of the left lung, the heart can be pushed to the right side to reveal the aorta and other blood vessels shown in figures 33-42. Figure 32. Diaphragm, heart, lungs and pericardium Figure 33. Aortic arch, coronary artery, left sine, left ventricle, pulmonary artery, right sine, right ventricle. Figure 34. Aorta, aortic arch, left sine, brachiocephalic artery, ductus arteriosus, lungs, pulmonary artery, pulmonary trunk, left submissive artery. Figure 35. Aorta, aortic arch, left sine, brachiocephalic artery, left common carotid artery, right split artery, hollow artery, pulmonary artery, pulmonary trunk, left subclature artery, right arch artery, trachea, left ventricle 36. Aortic arch, left atrium, brachiocephalic artery, left common carotid artery, right split artery, larynx, lung trunk, left subclavian, right subclavian artery, left ventricle. Figure 37. Anterior hollow vein, coronary artery, larynx, posterior vena cava, right subclaves, trachea. Figure 38. Anterior hollow vein, coronary artery, right outer jugular vein, right inner jugular vein, larynx, lungs, right subclavian vein, trachea Figure 39. Front vena cava, rear vena cava. Figure 40. Heart, liver, lungs, posterior hollow vein, thymus, thyroid Figure 41. Aorta, colon, kidneys, posterior hollow vein, renal artery, renal vein, testicles, testicles, umbilical artery, urethra, bladder, vas deferens. The renal artery passes blood from the aorta to the kidneys. The renal vein returns blood from the kidneys to the posterior hollow vein. Figure 42. Aorta, large intestine (large intestine), diaphragm, heart, kidneys, lungs, renal artery, posterior vena cava, renal vein, lungs, renal artery, posterior vena cava, renal vein, small intestine, spleen, stomach, urinary tract. Figure 43. External hip artery, kidneys, large intestine, posterior vena cava, renal vein, small intestine, testicles, umbilical artery, bladder, bladder. Figure 44. Left atrium, brachiocephalic artery, left common carotid artery, right carotid artery, coronary artery, outer hip artery, external icing vein, posterior venoral vein, pulmonary trunk, renal artery, renal vein, left subclaine artery, right subclain artery, umbilical artery, left ventricle. Excretion system Figure 45. Aorta, large intestine (large intestine), diaphragm, heart, kidneys, lungs, renal artery, posterior vena cava, renal vein, small intestine, spleen, stomach, urinary tract. Figure 46. Aorta, kidneys, liver, posterior hollow vein, renal artery, renal vein, spleen, bladder, bladder. Figure 47. Kidneys, liver, posterior hollow vein, renal vein, spleen, bladder, bladder System (Woman) Figure 48. Urogenital papilla, armem Figure 49. Colon, horn of uterus, ovary, bladder Figure 50. Colon, body of uterus, horn of uterus, ovaries, urethra, bladder, genitourinary sinus reproductive system (Male) Figure 51. Penis, scrotum, urogenital opening Figure 52. Seminal vsicle, testicles, bladder, bladder, vas deferens Figure 53. Bulranetal gland, spermatic cord, testicles, urethra, bladder, vas deferens Figure 54. The path of urine flow

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