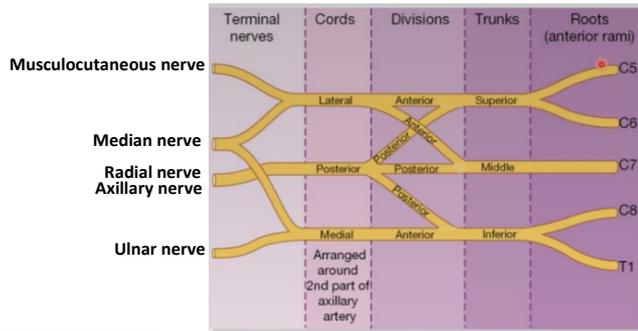


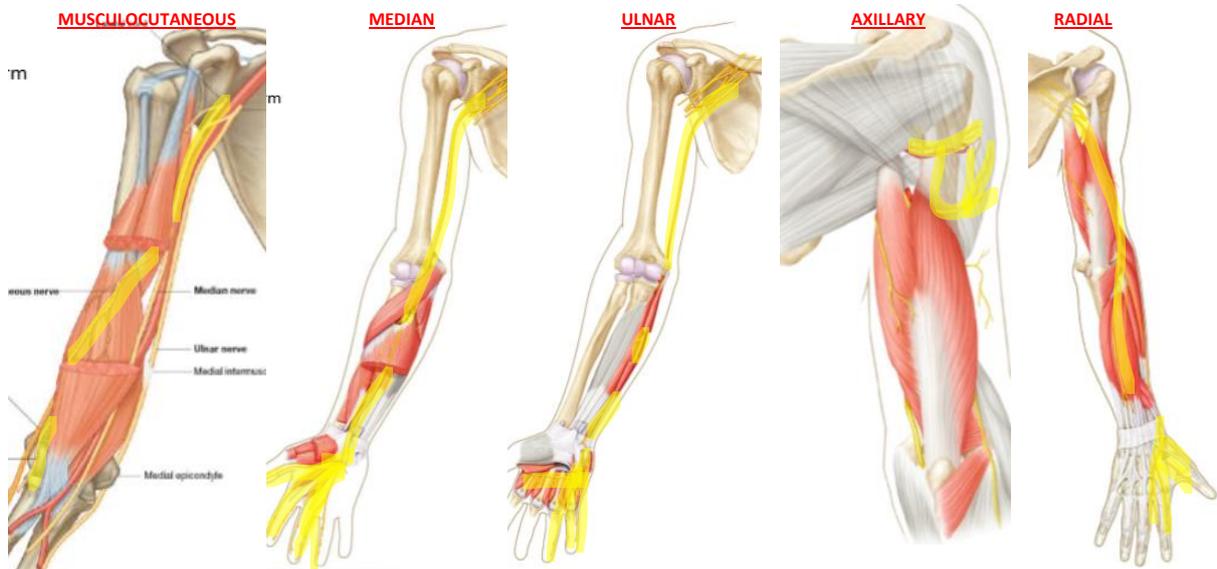
SAMPLENOTES

ANAT20006

anterior compartments and posterior (extensor) divisions go to posterior compartments



- ANTERIOR**
- **Musculocutaneous**: from lateral cord, C5, C6, C7, **motor**: flexors of elbow like biceps, **sensory**: skin of the lateral forearm, **injury**: rarely as it is well protected
 - **Median**: from lateral and medial cords, C5, C6, C7, C8, T1, **motor**: most anterior in forearm, carpal tunnel, recurrent branch for thumb muscles, **sensory**: palmar, 3.5 lateral digits and nailbeds, **injury**: carpal tunnel syndrome sensation in fingers, not in palm bc nerve goes over FR
 - **Ulnar**: superficial, runs posterior to medial epicondyle, from medial cord, C8, T1, **motor**: most intrinsic in hand, **sensory**: medial 1.5 digits, palmar dorsal, **injury**: at medial epicondyle, handlebar of bike results in compression, passes over FR
- POSTERIOR**
- **Axillary**: via quadrangular space, from posterior cord, C5, C6, **motor**: deltoid, **sensory**: shoulder skin, military badge area, **injury**: shoulder dislocation, fracture of surgical neck of Humerus
 - **Radial**: via triangular interval between medial and lateral triceps heads in radial groove, from posterior cord, C5, C6, C7, C8, T1, **motor**: extensor of elbow, wrist and fingers, **sensory**: posterior skin of arm and part of back of hand, **injury**: humeral shaft fracture, Saturday night palsy (compression with arm around back of chair, results in wrist drop as can't extend)

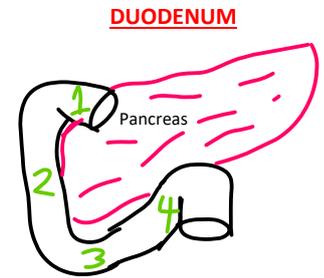


- **Dermatomes**: remain true to embryological origins, used with pain to determine if it is a nerve root or peripheral neurosome origin. Runs out and back
- **Myotomes**: muscle group supplied by single spinal cord nerve root, same action at joint = same myotome. Runs out: shoulder C5 → hand T1

- **Body**: main section
- **Pyloric part**: narrowing of body, shaped like a funnel
 - **Pyloric antrum**: wider part of funnel
 - **Pyloric canal**: narrower part of funnel

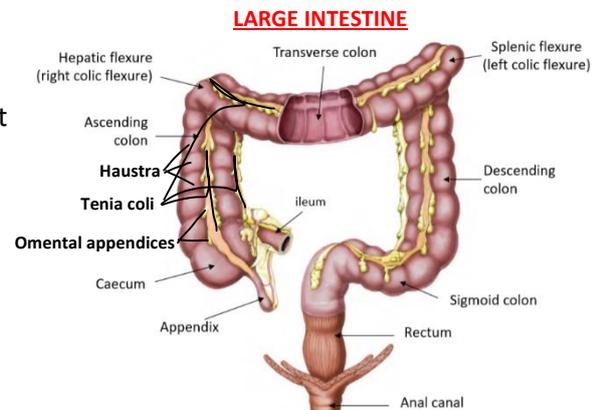
Small Intestine

- **Duodenum**: 25cm (short), retroperitoneal (posterior wall), C shape, 4 parts
 1. Short, ascends
 2. Descending, between right kidney and pancreas, has two hilum
 - **Major duodenal papilla**: entrance of enzymes and bile from the main pancreatic duct and the common bile duct
 - **Minor duodenal papilla**: superior, some enzymes through here, no bile
 3. Around head of pancreas, transverse, longest
 4. Ascend, leaves abdominal wall
- **Jejunum and ileum**: jejunum is in LUQ, 40%, ileum in RLQ, 60%, 4-7m long, no distinct changeover, intraperitoneal, massive mesentery, highly mobile, wall of small intestine is two complete muscle layers (outer longitudinal, inner circular) differences between the two...
 - **Location**: J is more proximal as more absorption here than I
 - **Calibre**: J's diameter is larger than I
 - **Circular (mucosal) folds**: lots of folds in J for absorption, not as many in I
 - **Wall**: thicker in J than I as there is more mucosa
 - **Vascularity**: J has more as it needs the bloody supply for absorption, more pink than I
 - **Fat in mesentery**: less in J, more in I and vessels are more opaque



Large Intestine

- **Large intestine**: larger diameter than small intestine, frames small intestine, has tenia coli which is the outer longitudinal coat split into 3 muscular bands that are thin/transparent, TC is shorter than the actual intestine, hence the bunching known as haustra, also has lots of fatty tags on it (omental appendices)
- **Caecum**: RLQ, intraperitoneal, blind pouch inferior to ileo caecum junction, mobile
- **Appendix**: RLQ, intraperitoneal, inferior to caecum, attaches where 3 tenia coli meet, doesn't really function, variable position in people
- **Colon**: ascending (retroperitoneal) → hepatic flexure/right colic flexure → transverse (intraperitoneal, longest, most mobile) → splenic flexure/left colic flexure → descending colon (retroperitoneal) → S shaped sigmoid colon (intraperitoneal) → rectum
- **Rectum**: no tenia coli as they merge to form a complete muscular coat (2 layers), no haustra, no omental appendices



Gastrointestinal Tract 3

Liver

- **Liver**: 1.5kg, largest solid organ in the body, mainly URQ, intraperitoneal but not entirely covered but has mesentery, partially protected by thoracic cage and diaphragm, 2 surfaces...
 - **Diaphragmatic**: superior and anterior, smooth, big falciform ligament separating it into left (small) and right (large) lobes which are functionally independent

LIVER (DIAPHRAGMATIC)

