

PRACTICAL CLASS № 3

Topic: “Blood and lymph circulation disorders (Hemodynamic disorders). Disorders of blood filling (hyperemia, ischemia). Arterial hyperemia. Venous congestion. Bleedings. Hemorrhages. Stasis. Thrombosis. Embolism. Shock. Intravascular disseminated syndrome. Ischemia. Infarction”

1. STUDY AND DESCRIBE THE FOLLOWING MACROPREPARATIONS.

PLAN OF MACROPREPARATIONS DESCRIPTION

1. Organ

The macropreparation is presented It is advisable to indicate whether the organ is presented in full or in a fragment, by the anatomical department (indicate which).

2. The size of the organ (reduced, increased, within normal limits). The form of the body (indicate if modified).

Organ color (indicate color changes that occurred during the development of the pathological process and under the influence of the fixing solution). Consistency (flabby, elastic, dense, homogeneous or with focal changes).

3. The state of the surface of the organ (smooth, granular, tuberos, with the presence of cicatricial depressions, areas with a changed color).

Describe the organ cover (usually a capsule or serous membrane - normal: smooth, shiny, thin, transparent).

To note the presence of subcapsular formations (hemorrhages, hematomas, etc.), overlays on the capsule (fibrinous films, purulent-necrotic plaque, etc.).

4. View of the organ in section.

To note the state and ratio of anatomical structures such as: a characteristic anatomical pattern, the condition of the cavities (enlarged, narrowed) and their contents (in normal and pathological conditions).

5. If there are pathological inclusions, nodal and cystic formations, foci of suppuration, hemorrhage, etc. in the test drug, you must specify:

- number of entities (1, 2 or multiple);
- localization (which anatomical parts of the organ affects);
- shape (irregular, round, wedge-shaped, etc.);
- color;

- the size and consistency of this education.

* If there is a ulcerative defect, indicate the depth see and characterize the bottom and edges of the defect. In the presence of cystic cavities and abscesses, indicate the nature of the contents (liquid, creamy, the presence of necrotic masses, stones, foreign bodies) and the state of the walls of the formation (by what they are presented, their thickness see).

6. The name of the pathological process.

7. Diseases in which this pathological process most often develops (paragraphs 6 and 7 may coincide).

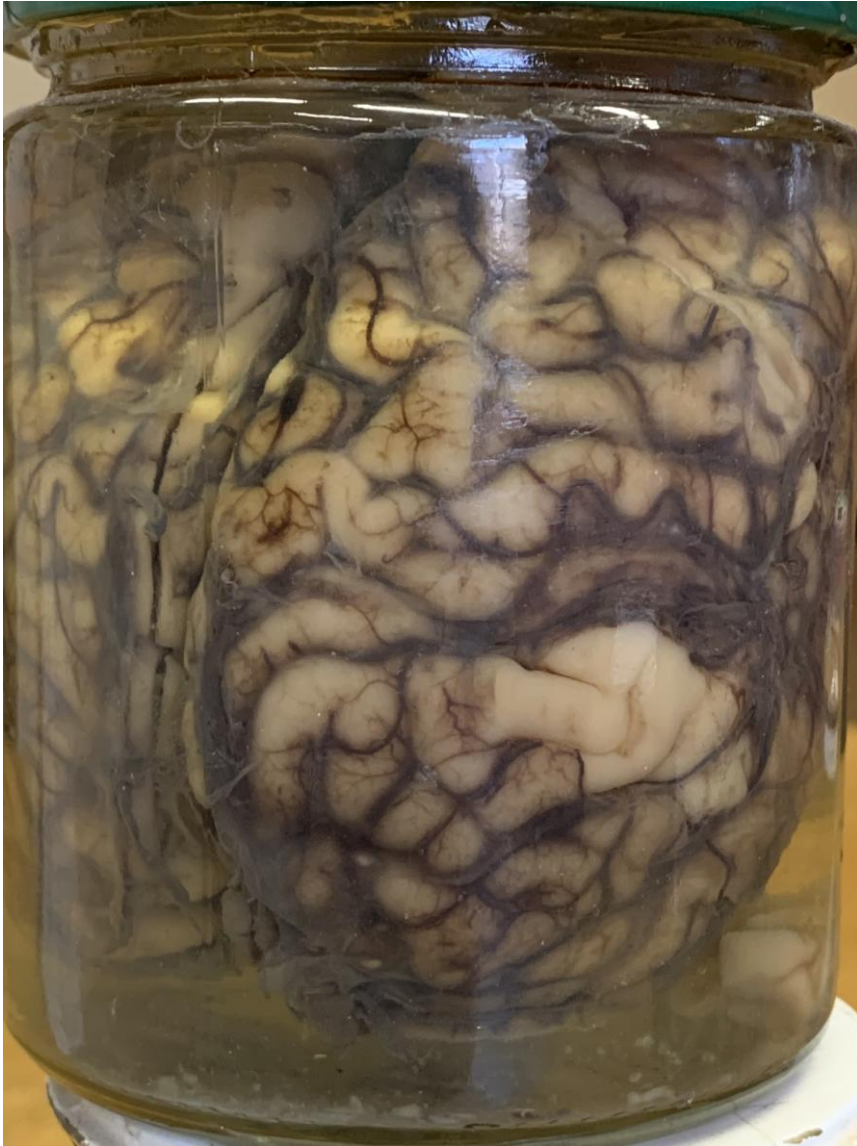
8. Briefly describe the etiology and pathogenesis of the pathological process and education.

9. Possible complications, the development of which is directly related to the presence of this pathological process.

10. Outcome, (favorable, unfavorable). Forecast.

11: Possible causes of death.

Note: When describing preparations of various organs, it is necessary to supplement the presented scheme or change its design in paragraphs 2 to 5



Macropreparation. Hyperemia of the brain vessels.



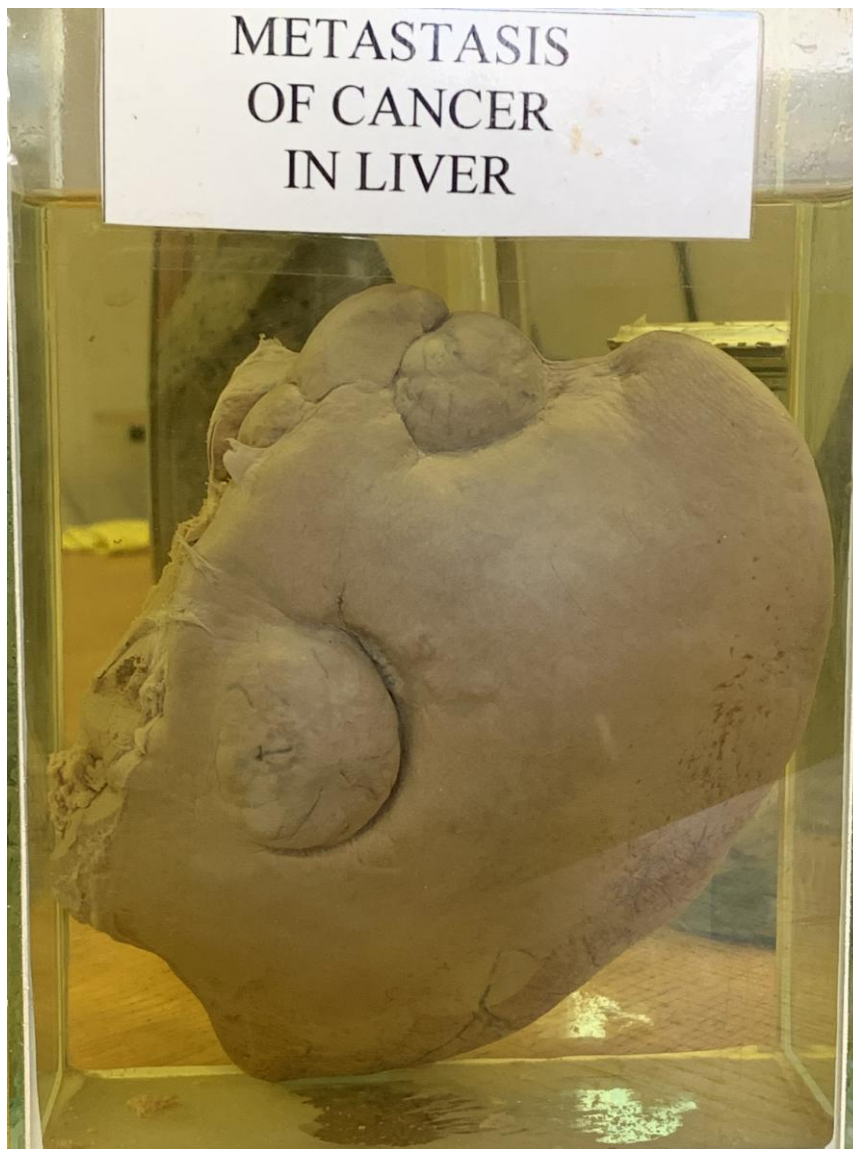
Macropreparation. Hemorrhage in the brain.



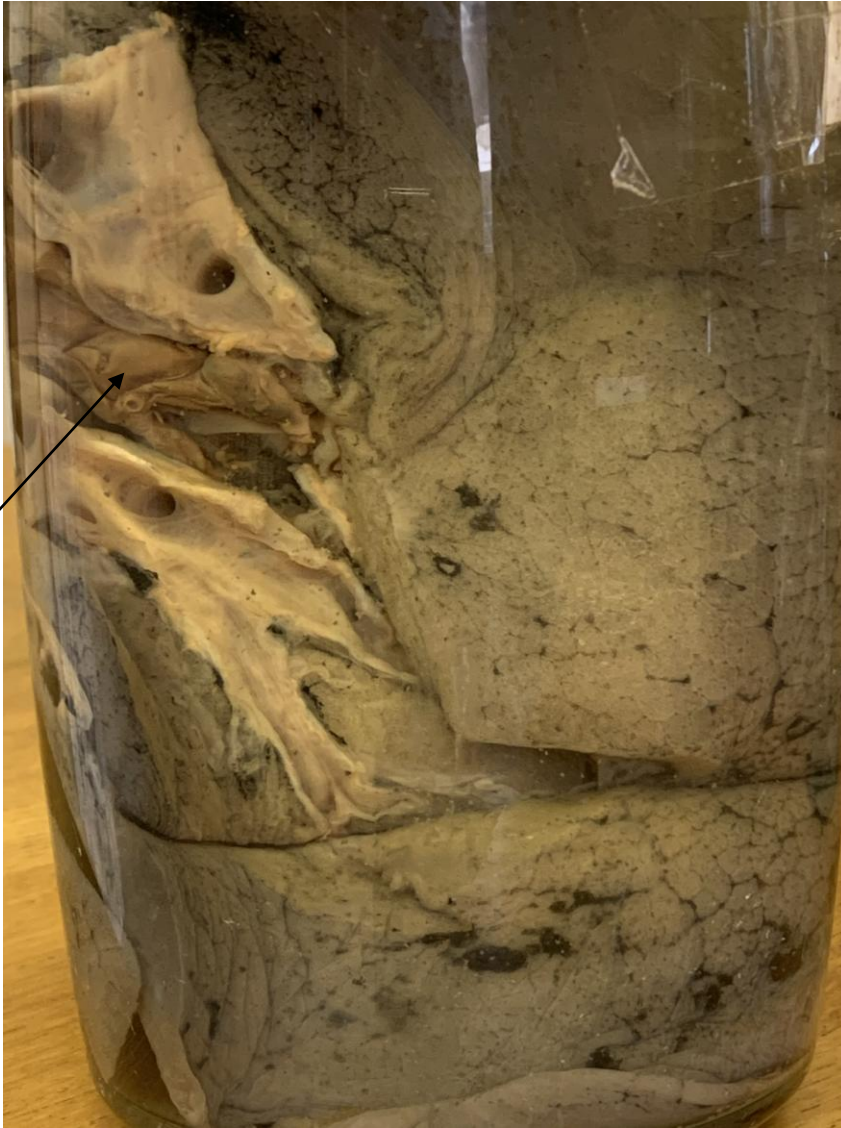
Macropreparation. Nutmeg liver.



Macropreparation. Brown induration of the lung.



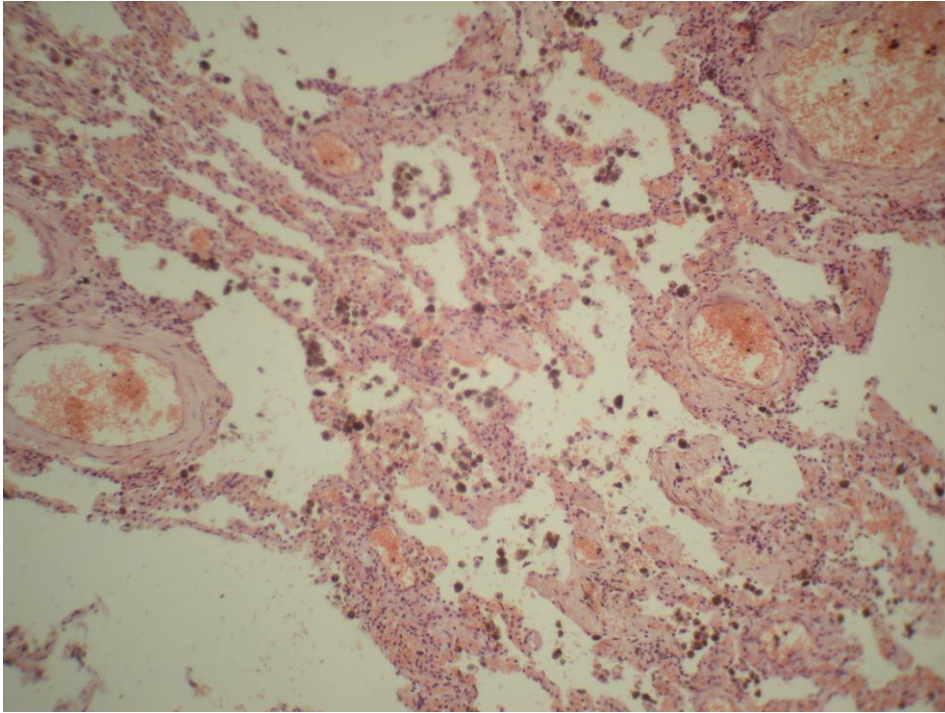
Macropreparation. Metastasis of carcinoma in the liver.



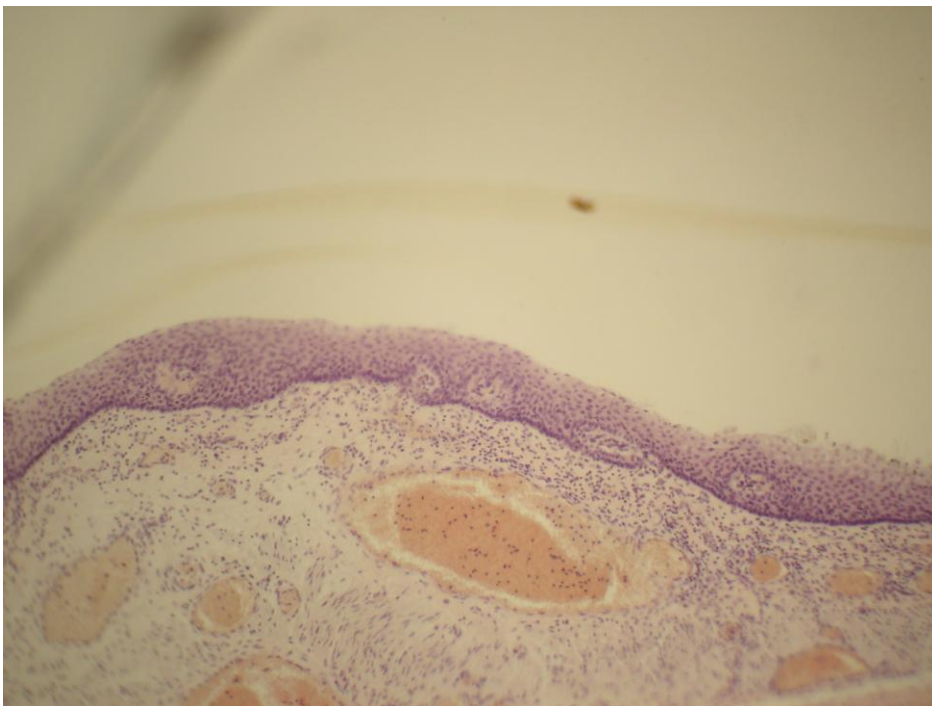
Macropreparation. Thromboembolism of pulmonary artery.

2. SCHEME FOR THE STUDY AND DESCRIPTION OF MICROPREPARATIONS

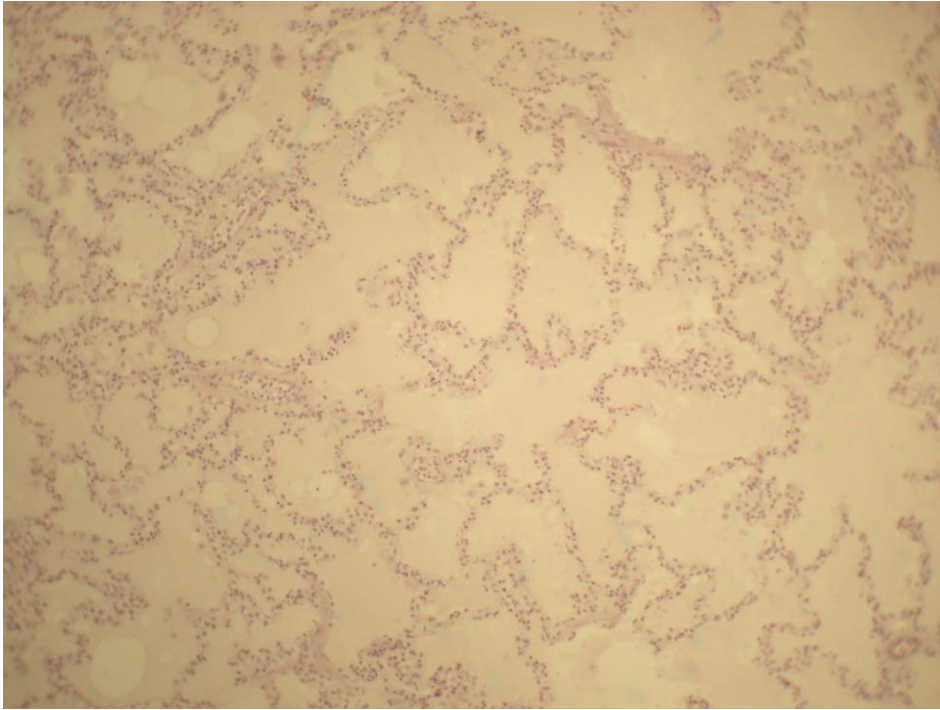
1. Determine the organ, tissue, indicate the method of staining
2. Find the basic structural elements of the body (parenchyma, stroma)
3. Determine the pathological process (violation of the structure, the appearance of pathological structures, inclusion, etc.), comparing it with the norm.
4. After identifying pathological changes, indicate:
 - a) Changes in parenchymal elements (cell sizes, features of the cytoplasm and cell nucleus, the presence of pathological inclusions, etc.):
 - parenchyma cells, the state of the membrane and cytoplasm of cells, their nuclei, attitude to dyes, the presence of inclusions in cells, their relationship, the correct formation of parenchyma by cells in various structures are described in detail;
 - a description of the glandular structures begins with a description of the cellular elements that make up the gland. The lumen of the glandular structures is described;
 - excretory ducts are described separately, both small and large, then the contents of their lumens, the state of the vessels.
 - b) changes in the stroma (state of fibrous structures, vessels - the width of their lumen, wall thickness, the presence of inclusions, etc.):
 - attention is drawn to the nature of the fibrous structures, the cellular composition of the connective tissue, the presence (absence) of edema, hemorrhages, inflammation, inclusions (including foreign ones).
 - Vessels are described (separately arteries, veins, capillaries), the state of the entire wall and its individual layers, the nature of the contents of the lumen of the vessel are noted.
5. Write the conclusion to the album (annotation on micropreparation)
6. If the name of the micropreparation does not coincide with the macropreparations, name the etiology, pathogenesis, complications, outcomes, functional value.



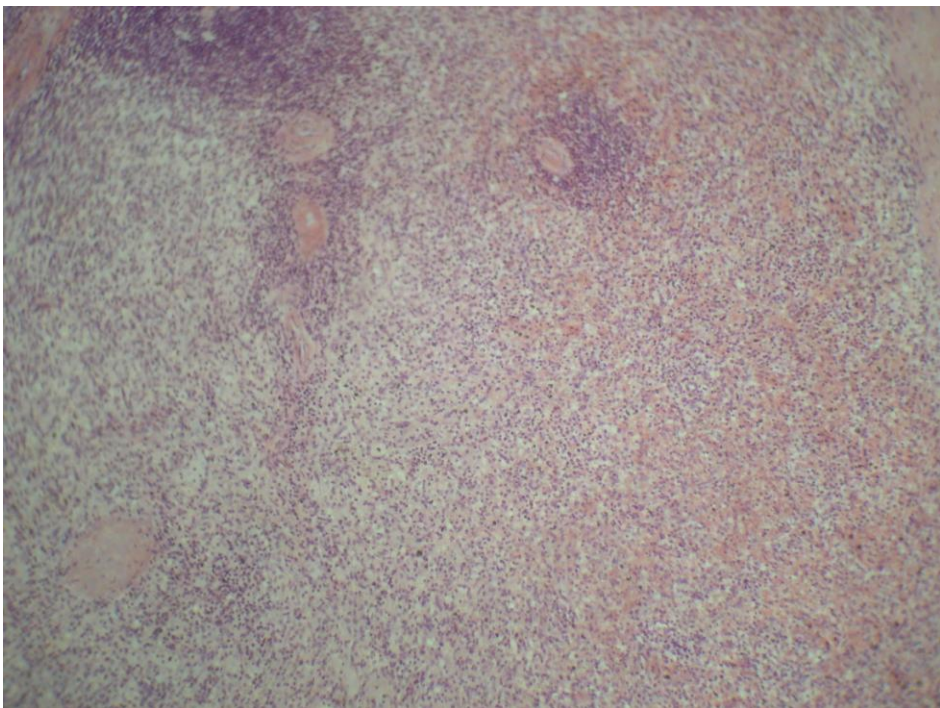
Micropreparation. Brown induration of the lung. H&E.



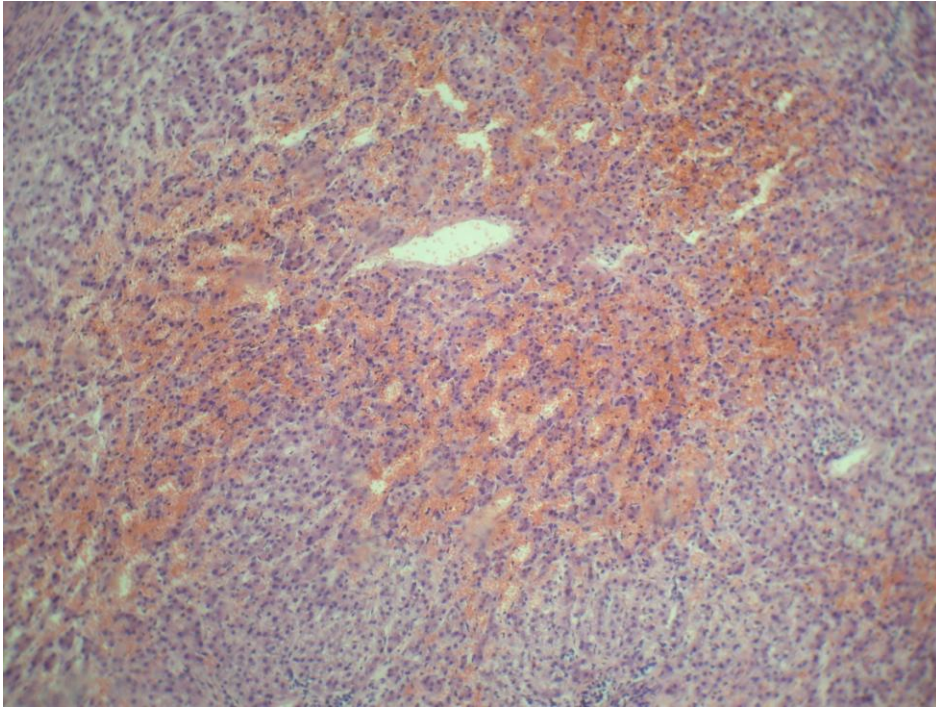
Micropreparation. Collateral hyperemia of esophagus veins. H&E.



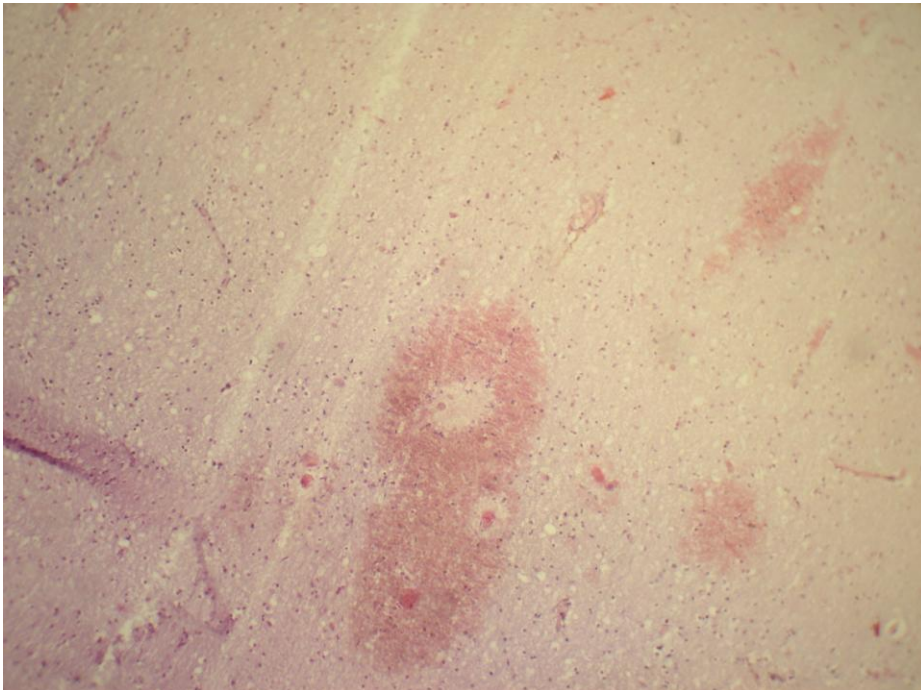
Micropreparation. Edema of the lung (pulmonary edema). H&E.



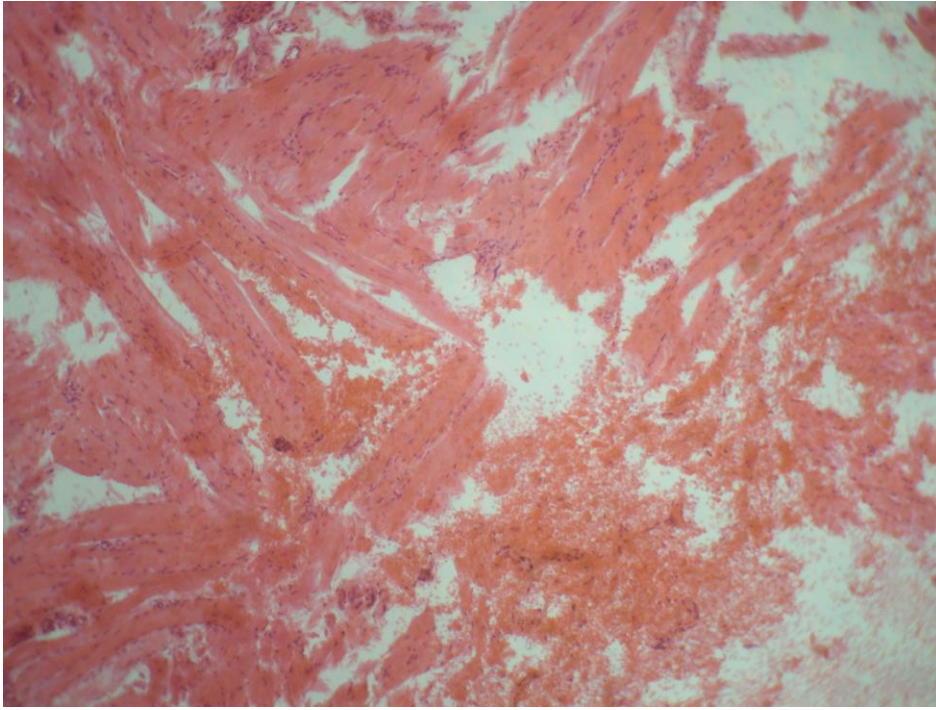
Micropreparation. Cyanotic induration of the spleen. H&E.



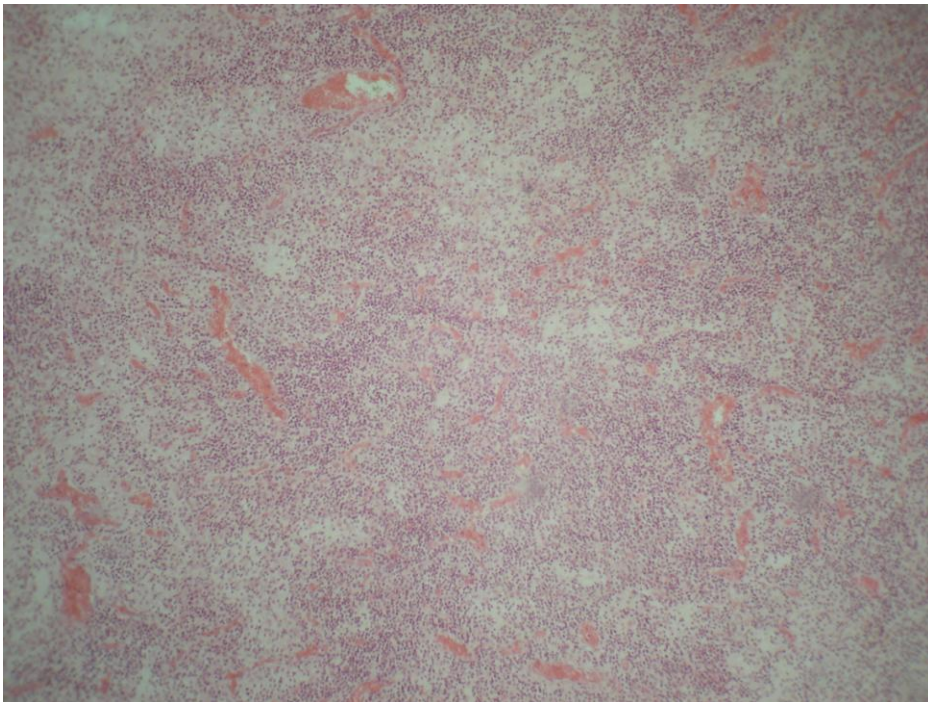
Micropreparation. Nutmeg liver. H&E.



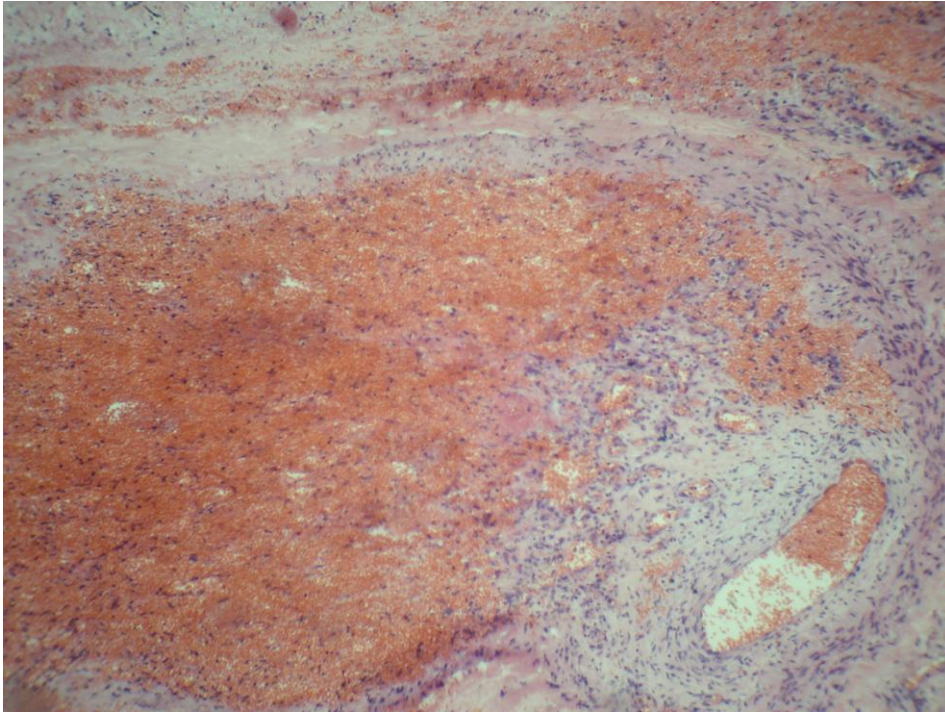
Micropreparation. Hemorrhage in the brain. H&E.



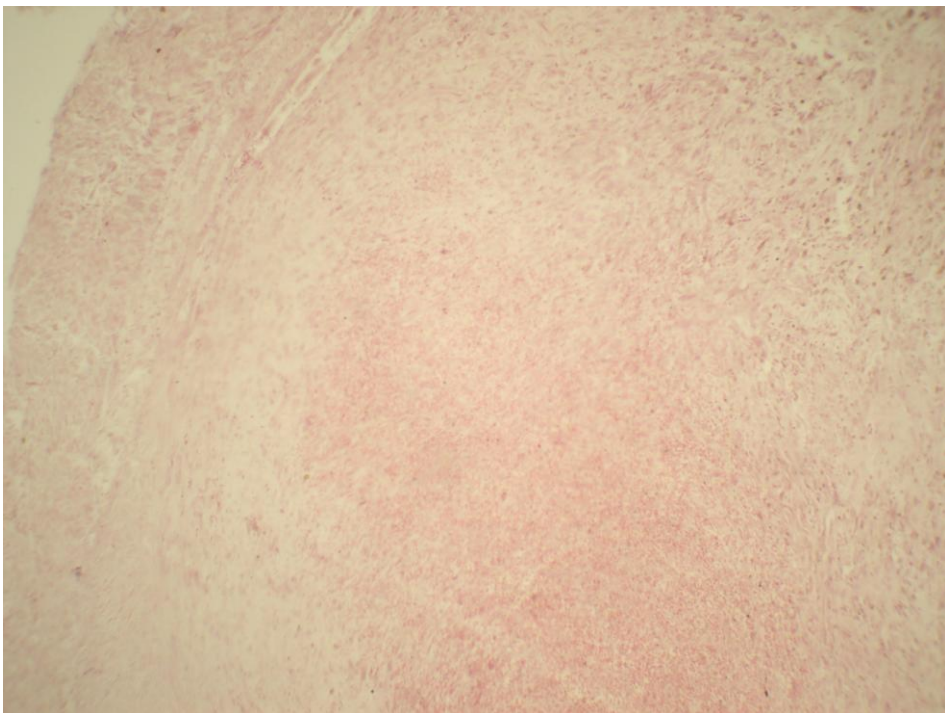
Micropreparation. Hemorrhage in the tongue muscles. H&E.



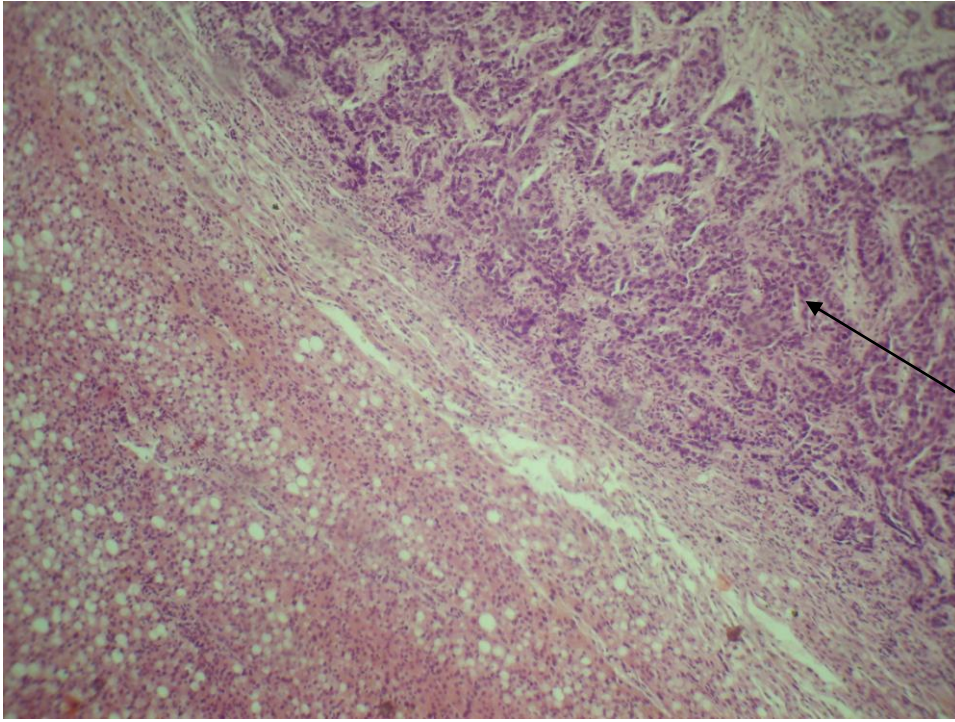
Micropreparation. Stasis in the capillaries of the lymph node. H&E.



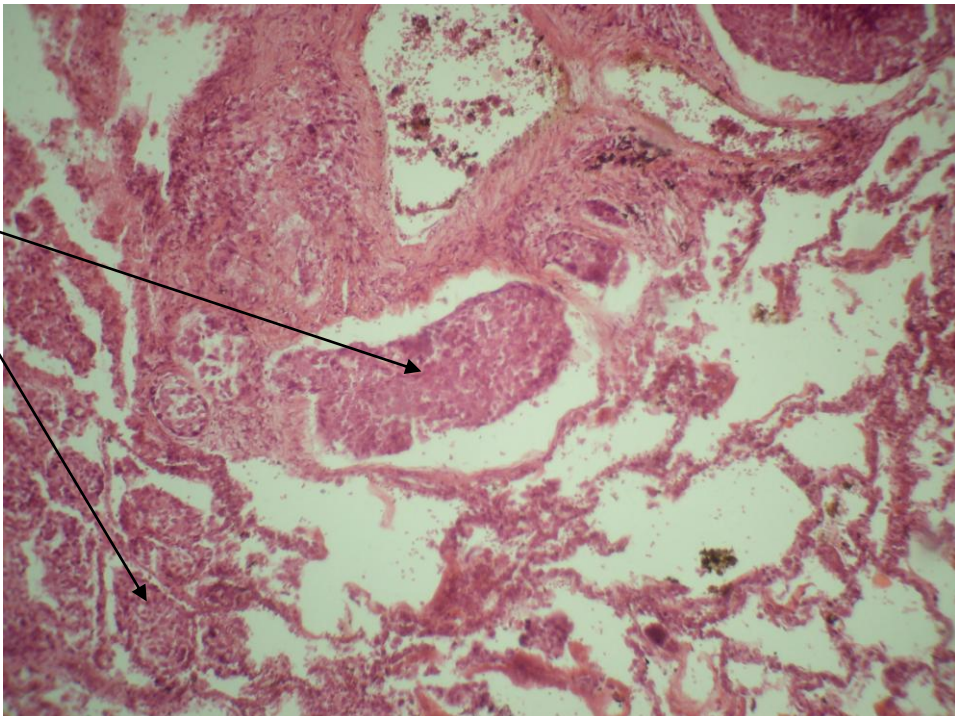
Micropreparation. Mixed thrombus in the lumen of pulmonary artery. H&E.



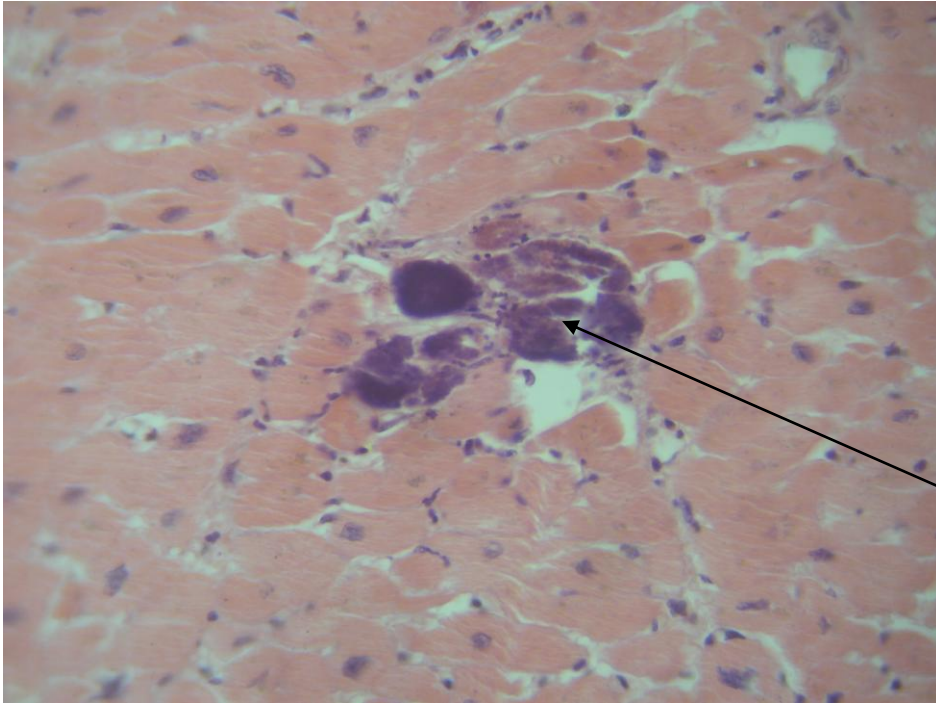
Micropreparation. Organization of thrombus. H&E.



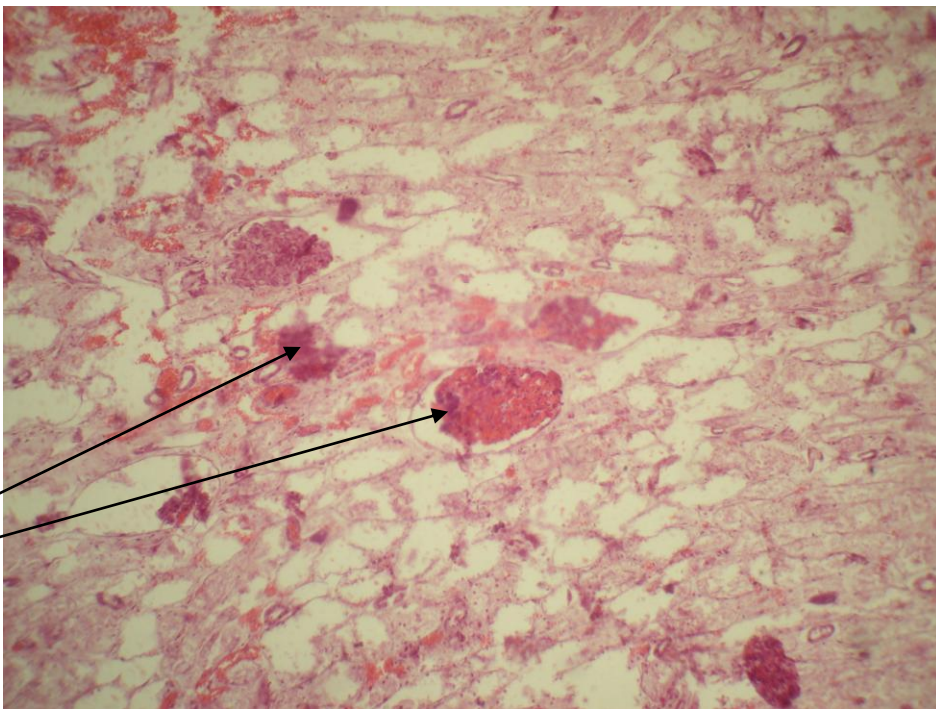
Micropreparation. Metastasis of carcinoma in the liver. H&E.



Micropreparation. Metastasis of carcinoma in the lung. H&E.



Micropreparation. Bacterial emboli in the myocardium. H&E.



Micropreparation. Bacterial emboli in the kidney. H&E.