DISCUSSION SESSION: GROSS ANATOMY

ONN BLOCK

Feb 3, 2021

Welcome to Head and Neck

DISCUSSION SESSIONS – will review clinically relevant material from lectures; next sessions start anatomy questions/clinical vignette questions

THIS SESSION -

- 1. Overview of next two weeks.
- 2. Some things to get down in first lectures.

OVER VIEW OF THIS BLOCK

TOO MUCH MATERIAL, TOO LITTLE TIME

- This year: very short duration to study Head and Neck (8 days + one later in ONN block)
- Problem: Cover large amount of material (text: Head and Neck ~300 pages; Upper Extremity ~100 pages);
- This material is needed for study of Neuroanatomy/Neurology, as well as questions on Step 1 Exam

Approach:

- Focus upon clinical anatomy and topics related to step one board exams, Neuroanatomy/Neurology

However, also need vocabulary and knowledge anatomy for Neuro and ENT.

Task: Lots of memorizing (particularly, if you have not had material before) but try to maintain clinical focus throughout.

<u>Plan</u>:

- 1) Lecture handouts have almost all relevant material (short) to answer quiz questions.
- 2) Lecture PowerPoints illustrate and elucidate material from handouts (plus some other)
- 3) Lecture Videos Videos follow slides in PowerPoints. Note: watching lecture videos is dull. Posted edited videos from past years (live audience reactions).

<u>Problem</u>: watching all the videos takes time. Unclear what is really essential.

<u>Strategy</u> – Discussion sessions – Go over material extracted from lectures Powerpoints/videos of (particularly things in red boxes, often with asterisks).

This will be strongly emphasized on quiz.

Videos and Powerpoints of Discussion sessions will be available on my website.

EVERYONE STUDIES AT THEIR OWN PACE: EITHER GO TO DISCUSSION SESSIONS OR WATCH VIDEOS/READ POWERPOINTS OF DISCUSSION SESSIONS.

LABS

I am not allowed to go into the lab while you are there.

MS IV students will be available to help you.

All prosections are in lab with labeled photos (laminated) on tables.

All questions on lab exam will be on photos. Questions will be about labeled structures.

I am making videos of lab prosections and will have lab review next week.

PROSECTIONS

- 1- Some new and excellent -
- 75 Bisected Head with Intact Falx Cerebri great for orientation.
- 76 Carotid Endarterectomy Surgical Prosection One side is surgery to expose Carotid artery; other side is full dissection of neck to fully see structures exposed in surgery
- 2- Some old, very old but still usable See what you can find; please let me know about broken structures (I will post file with list of structures at end and exclude anything broken).

75 Good for overall orientation

76 One side surgical approach; other side Full Dissection

BISECTED HEAD WITH INTACT FALX CEREBRI

75

BRIDGING
VEIN

TENTORIUM
CEREBELLI
(cut)

CEREBELLI
(cut)

PITUITARY
OLAND
TURCICAL
SPHENOID
SINUS
(air sinus)

CEREBELLUM
BRAINSTEM

PHARYNX
(oropharynx)

ESOPHAGUS
TRACHEA

PIGLOTTIS
VESTIBULAR FOLD
(False Vocal Fold)

VOCAL FOLD (True Vocal Fold)

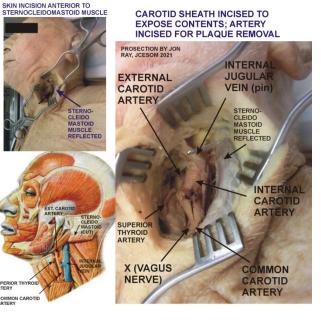
Note: Bridging Vein - cut when brain removed but still attached and entering Sup. Sagittal Sinus

SURGICAL PROSECTION: CAROTID ENDARTERECTOMY

76

DISSECTION OF ANTERIOR NECK

76





LECTURES VIDEOS

This week heavily front loaded – lots of lectures; eases up somewhat next week.

Thursday (tomorrow) – Skull session video and live session; go through bones and openings in Skull.

<u>Friday – Start Discuss Lectures – Areas</u> <u>emphasized and questions</u>

Final Reviews Thursday Feb 11 and Friday Feb 12

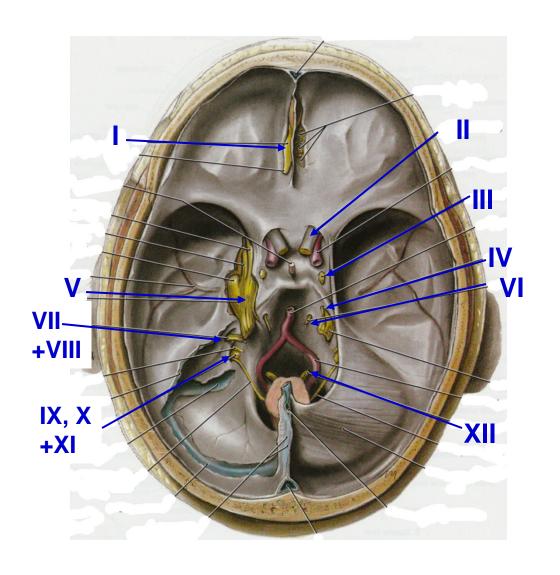
– Will go over relevant material from lab
(prosections) and Discussion sessions.

THINGS TO GET DOWN RIGHT AWAY

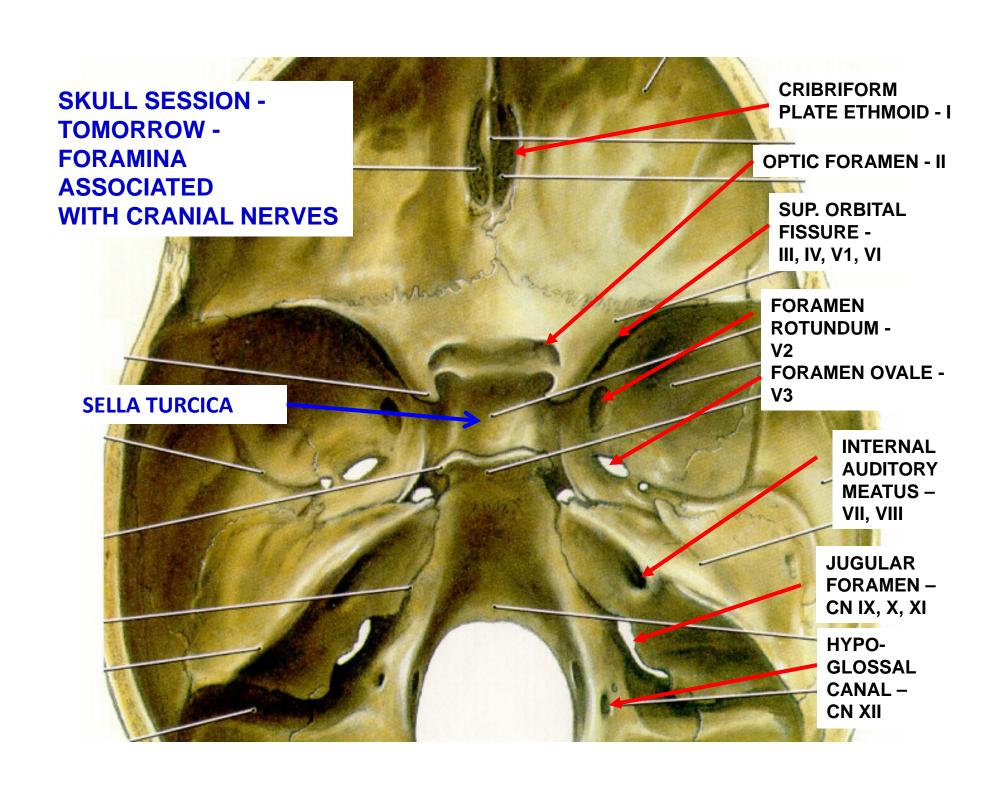
FACE

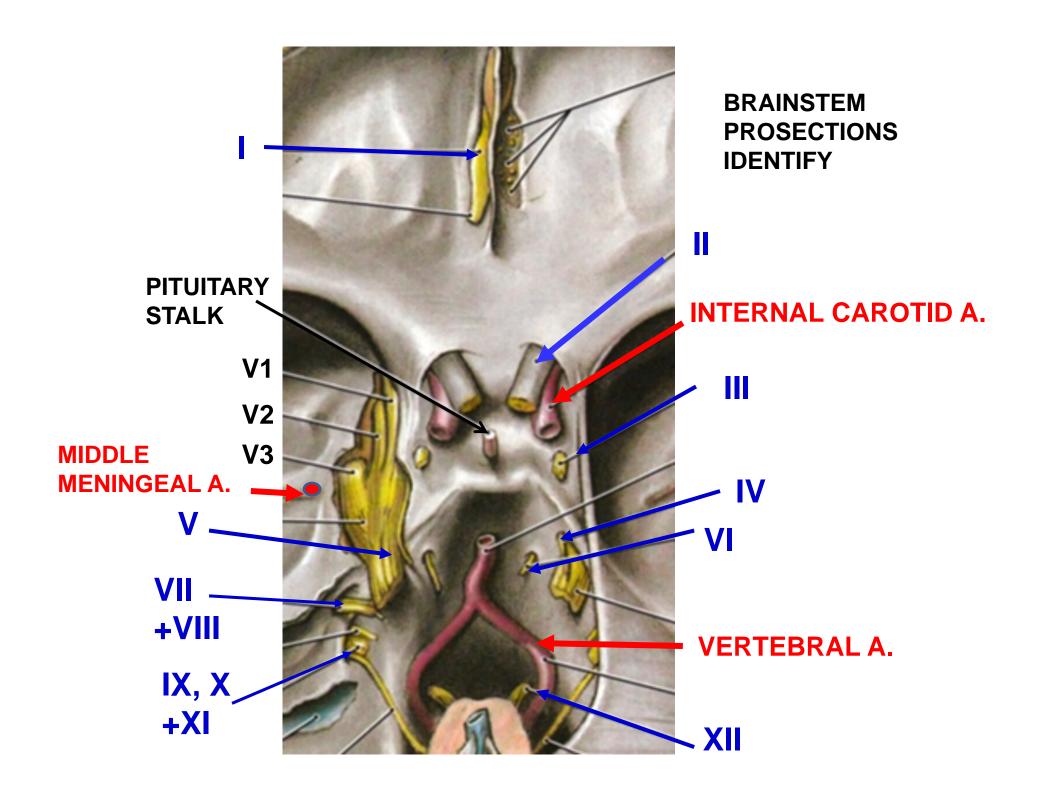
- 1- Bell's palsy Actions of some facial muscles important Orbicularis Oculi (close eye paralysis can damage cornea, Buccinator board question difficulty eating (actually cheek keeping food between teeth)
- 2- Arterial Supply and Venous Drainage of Face Branches of Carotid Artery (Pulses), infections, later Neck.
- 3- Embryology Cleft lip; later Cleft palate; also formation nasolacrimal duct.

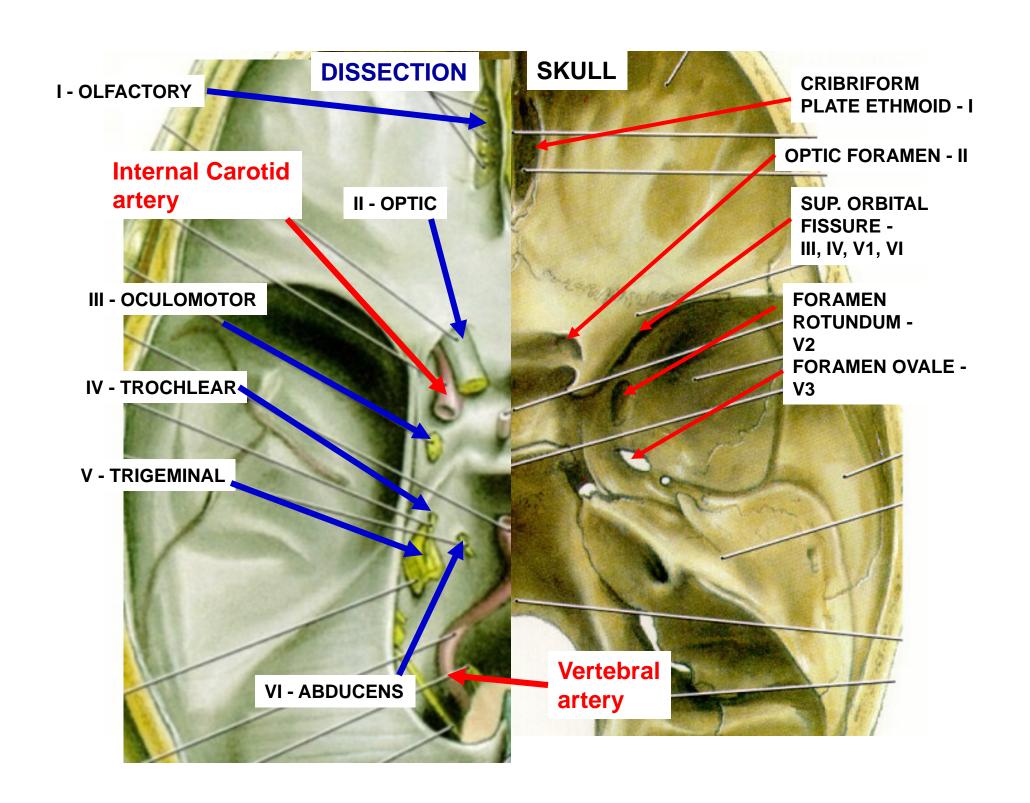
LEARN NAMES AND NUMBERS OF CRANIAL NERVES



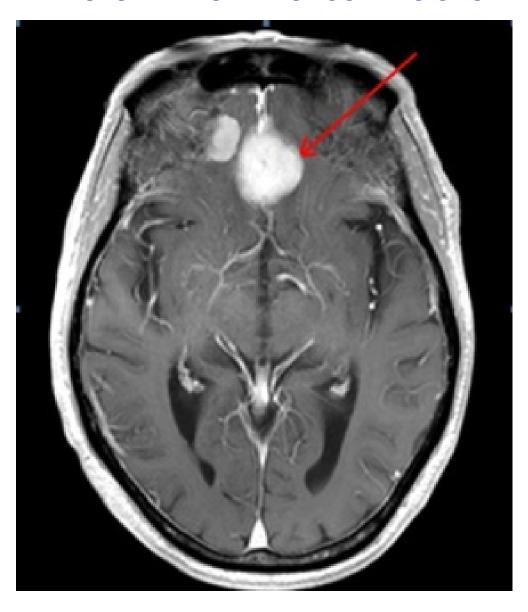
I. OLFACTORY - sense of smell II. OPTIC - vision III. OCULOMOTOR - eye movement IV. TROCHLEAR - eye movement V. TRIGEMINAL - touch, general sensation to skin, oral cavity, nasal cavity + more VI. ABDUCENS - eye movement VII. FACIAL - muscles of facial expression + lots more VIII. VESTIBULO-COCHLEAR hearing and balance IX. GLOSSOPHARYNGEAL sensory to pharynx +more X. VAGUS - larynx, pharynx + rest of body XI. ACCESSORY sternocleidomastoid, trapezius XII. HYPOGLOSSAL - muscles of tongue







WHY STUDY THIS? DIAGNOSE LESIONS IN CRANIAL CAVITY



MENINGIOMA IN ANTERIOR CRANIAL FOSSA.

WHICH CRANIAL NERVE AFFECTED?

I Olfactory **II Optic** III Oculomotor VI **Abducens**

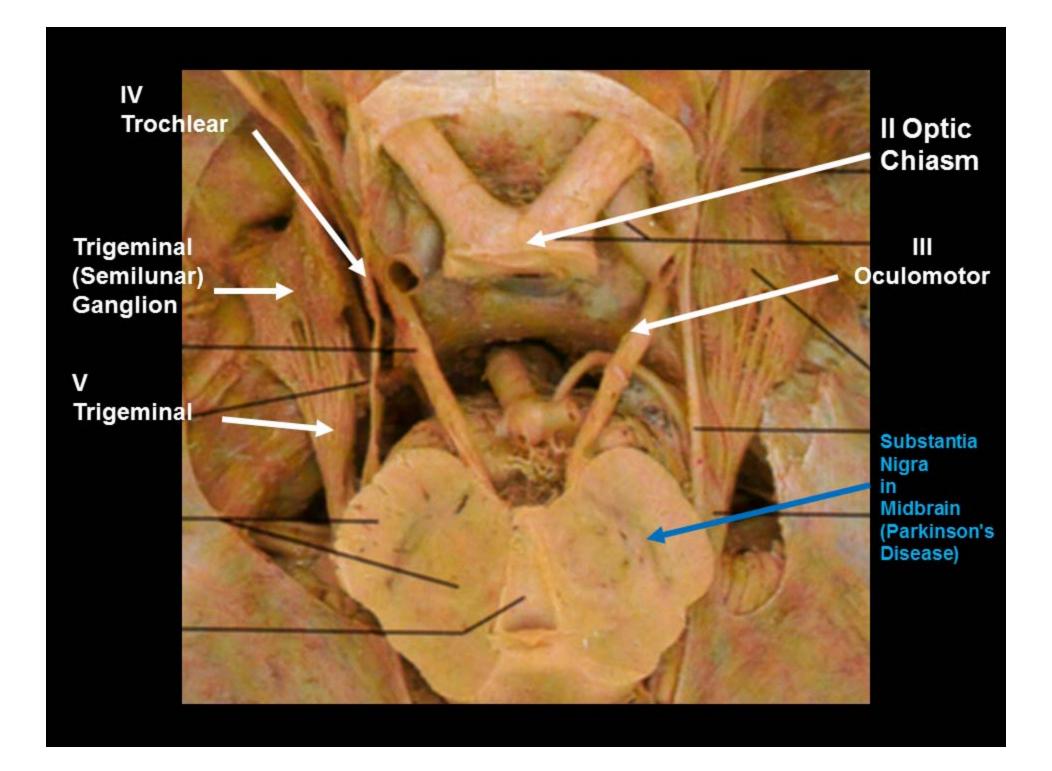
INTERNAL CAROTID A.

Pituitary stalk

IV Trochlear

V Trigeminal

VII + VIII



LET ME KNOW IF YOU HAVE ANY QUESTIONS:

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fastest: sensillum@aol.com

ALSO AVAILABLE FOR CHAT ON ZOOM: I WILL LET YOU KNOW ABOUT HOURS AND LINKS.

PLEASE CHECK YOUR EMAIL IN THE NEXT TWO WEEKS.

THINGS POSTED TO MY WEBSITE BECAUSE DELAY IN GETTING POSTED TO MED HUB.

THANKS AND GOOD LUCK!