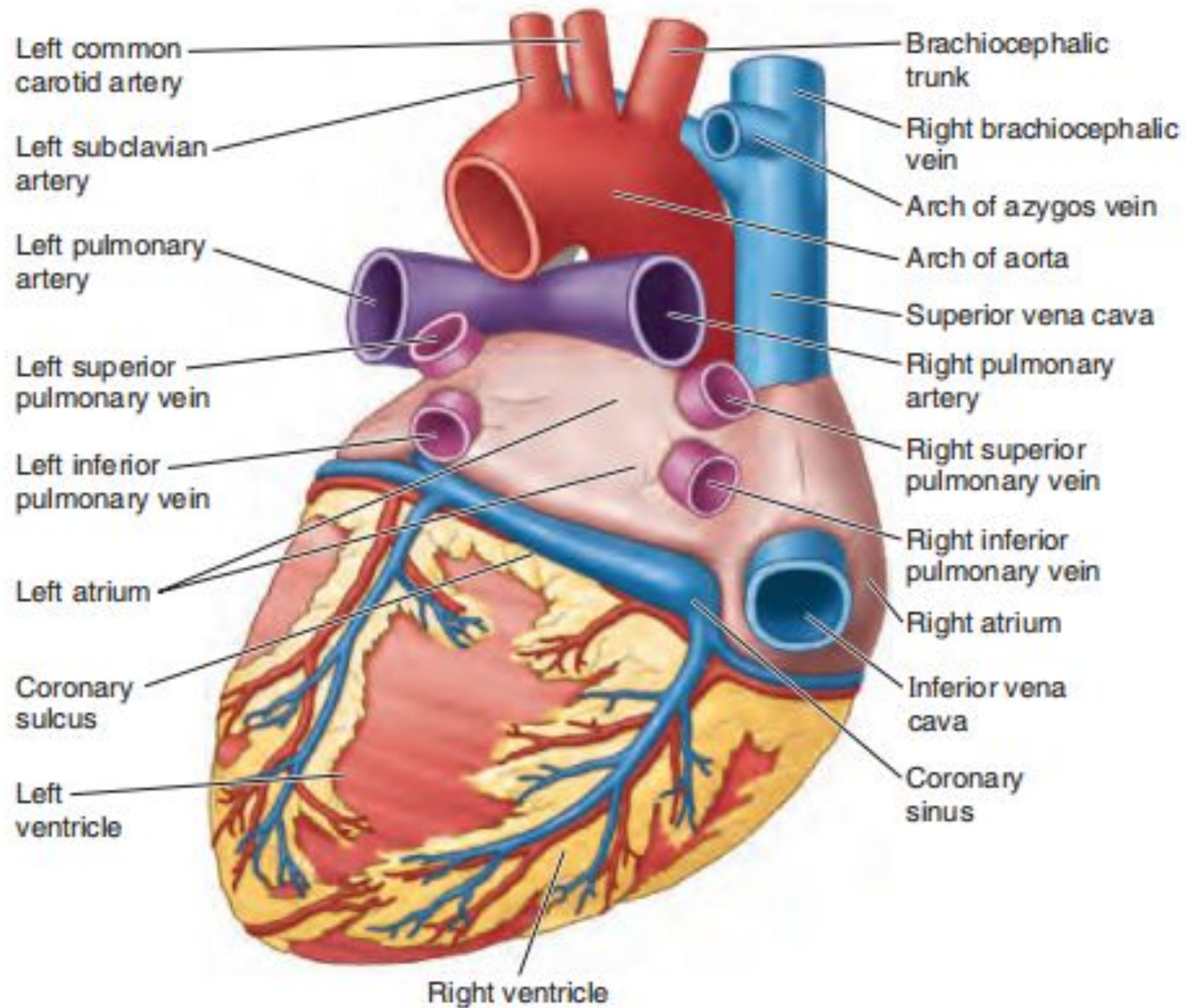
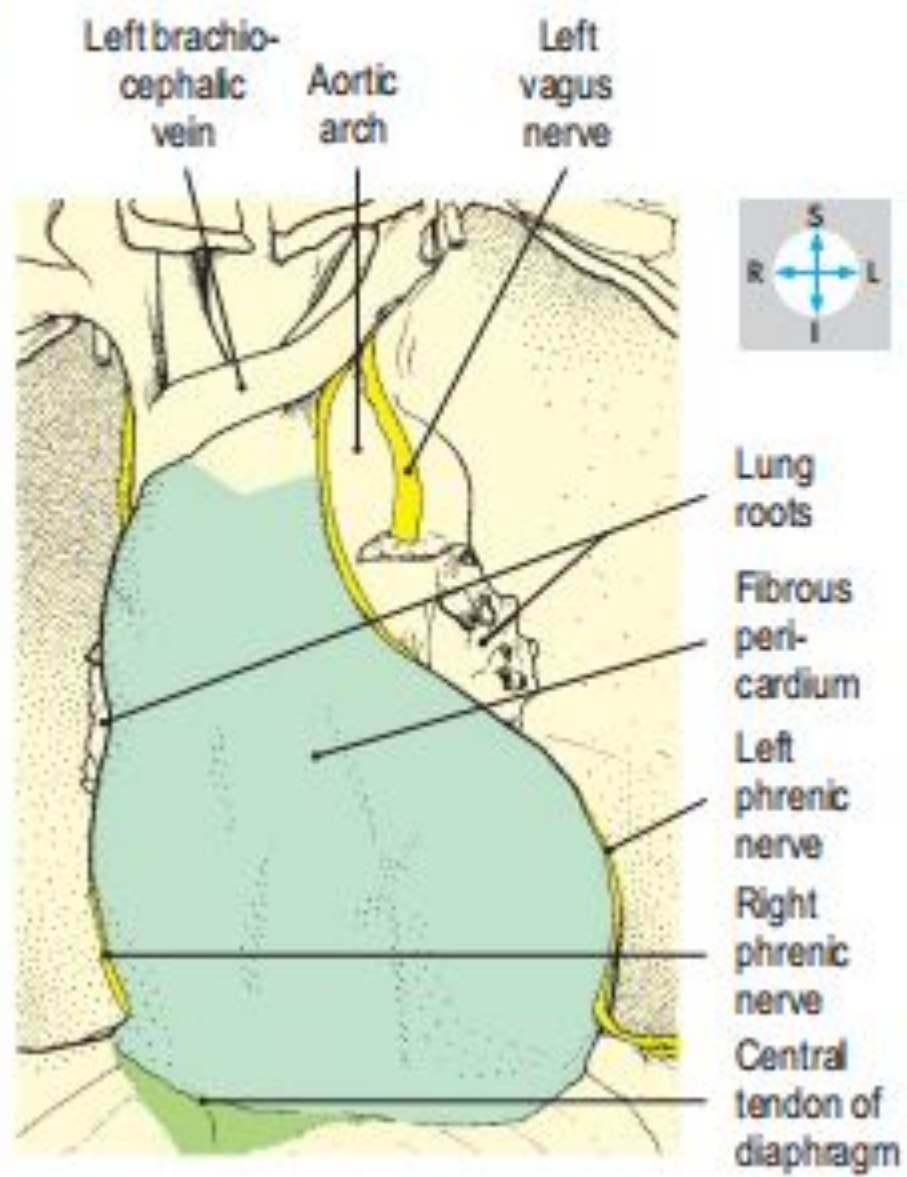
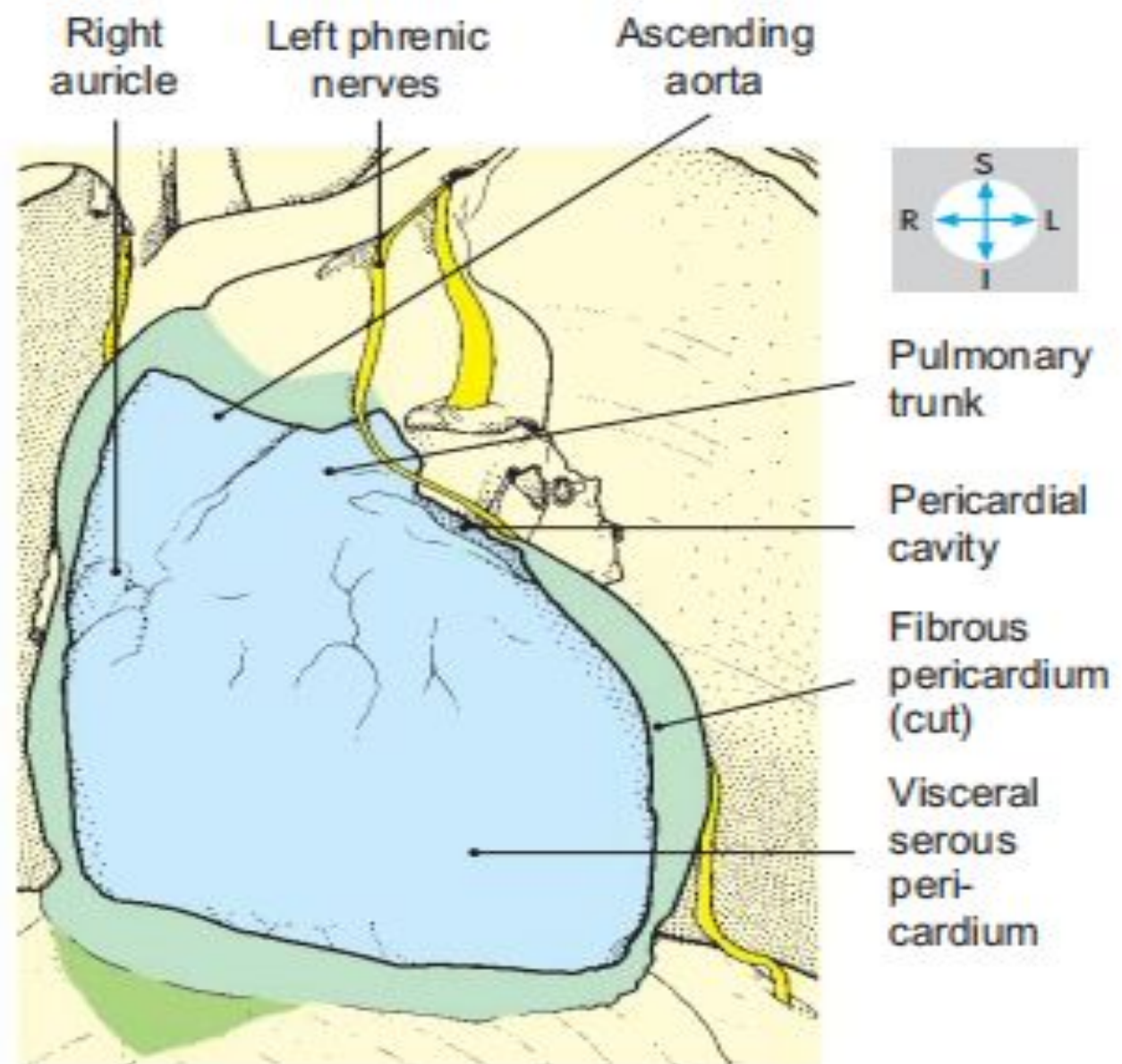
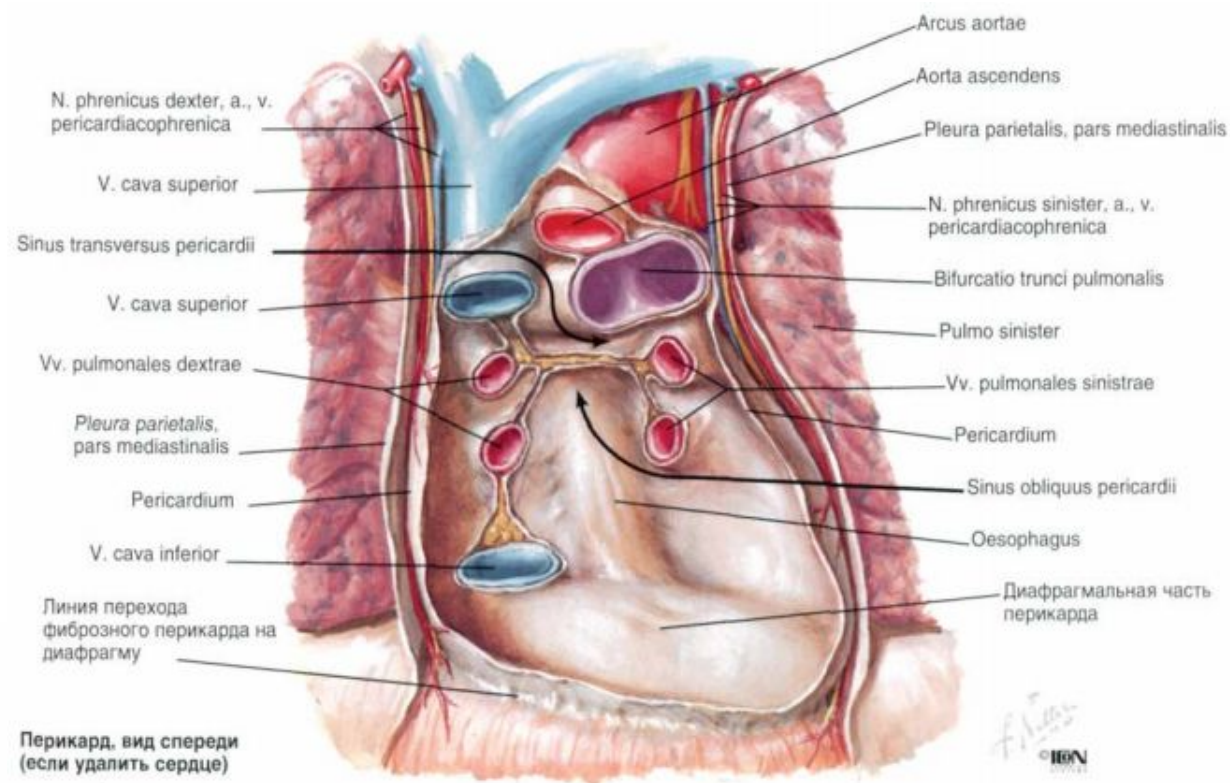
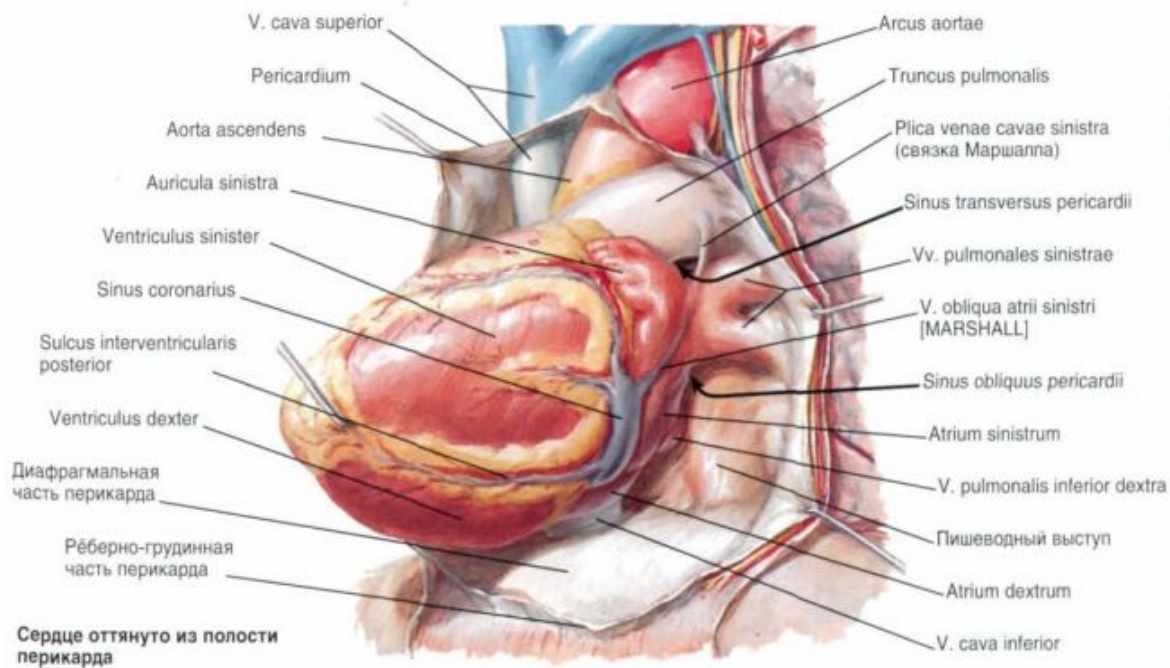


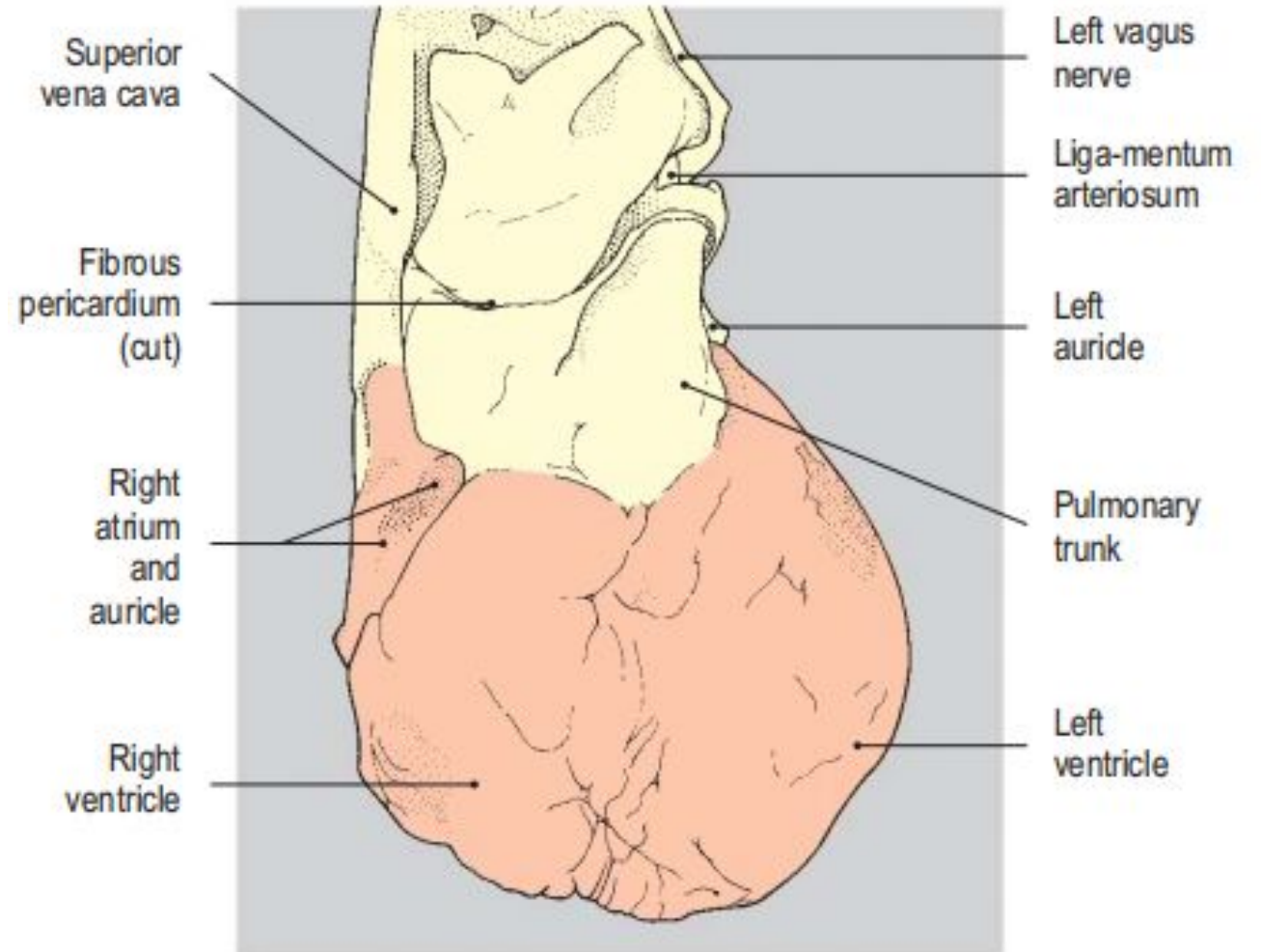
(B)
Anterior views

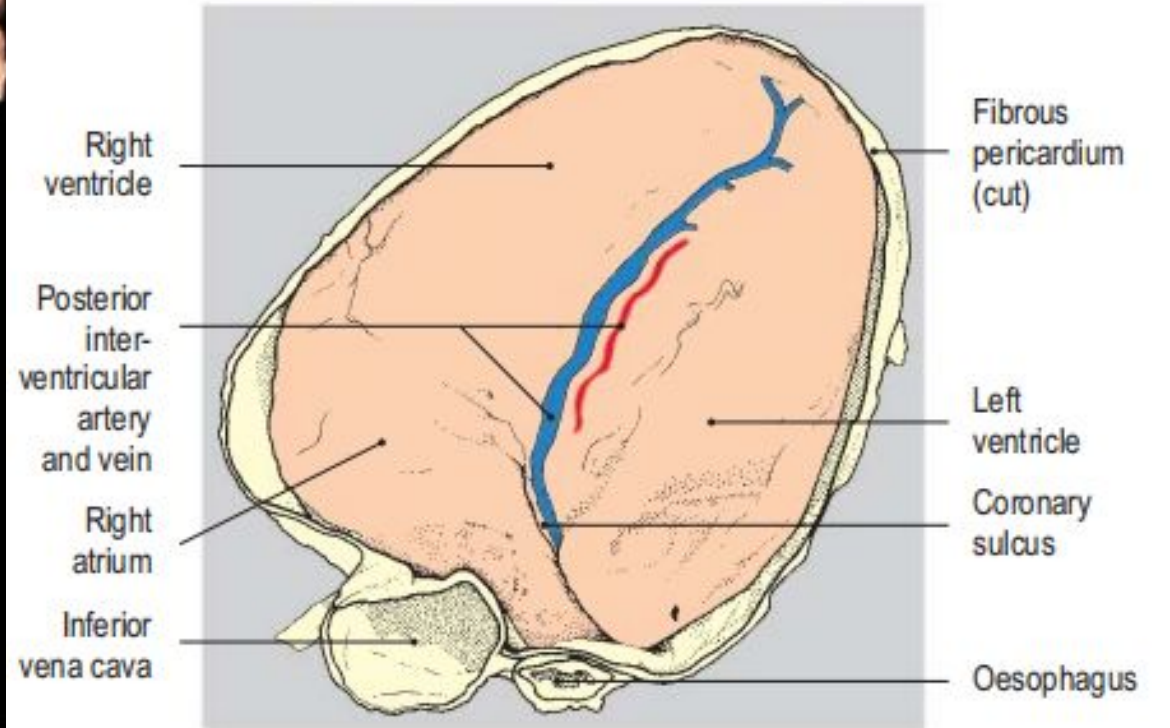
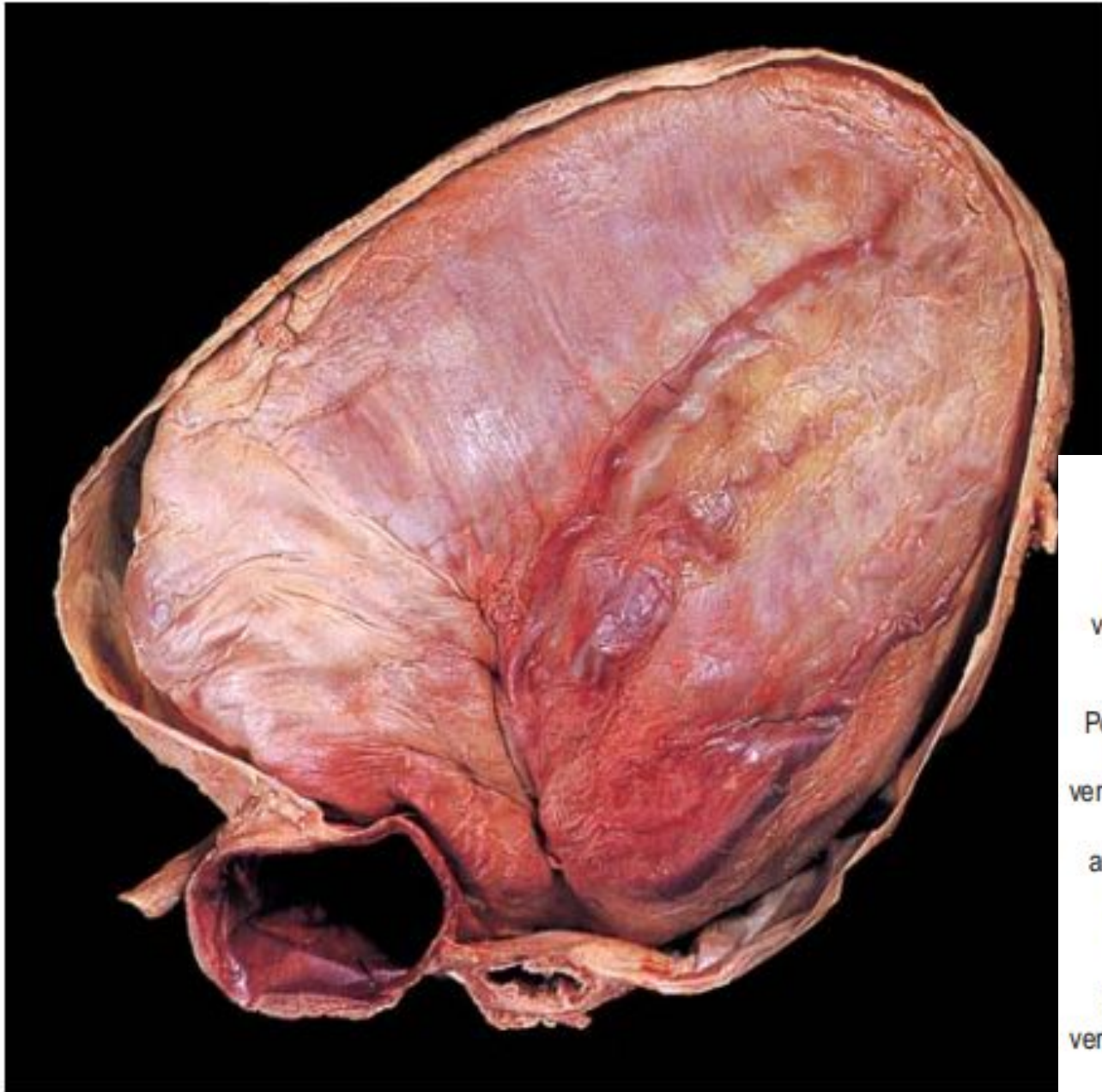


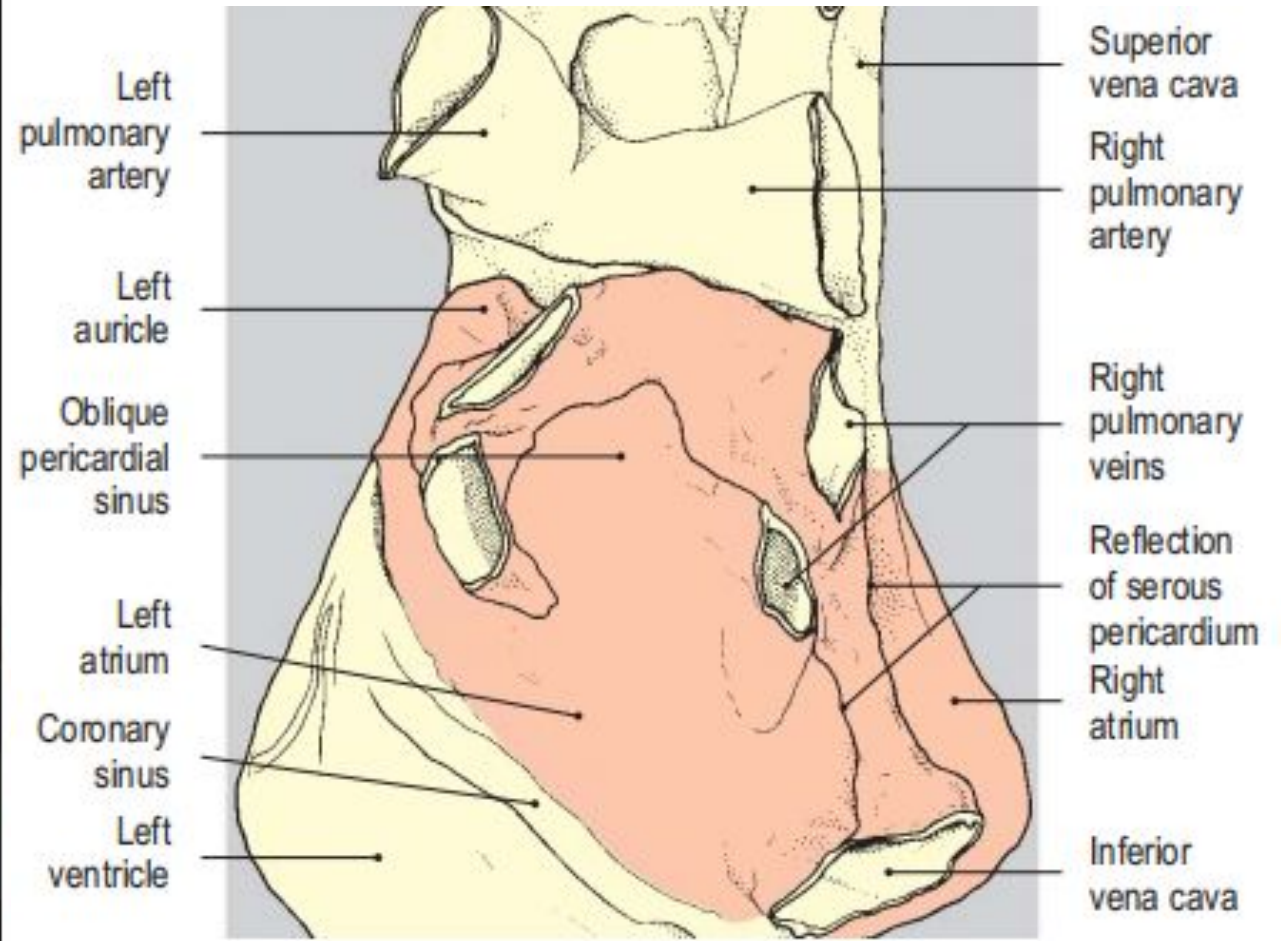
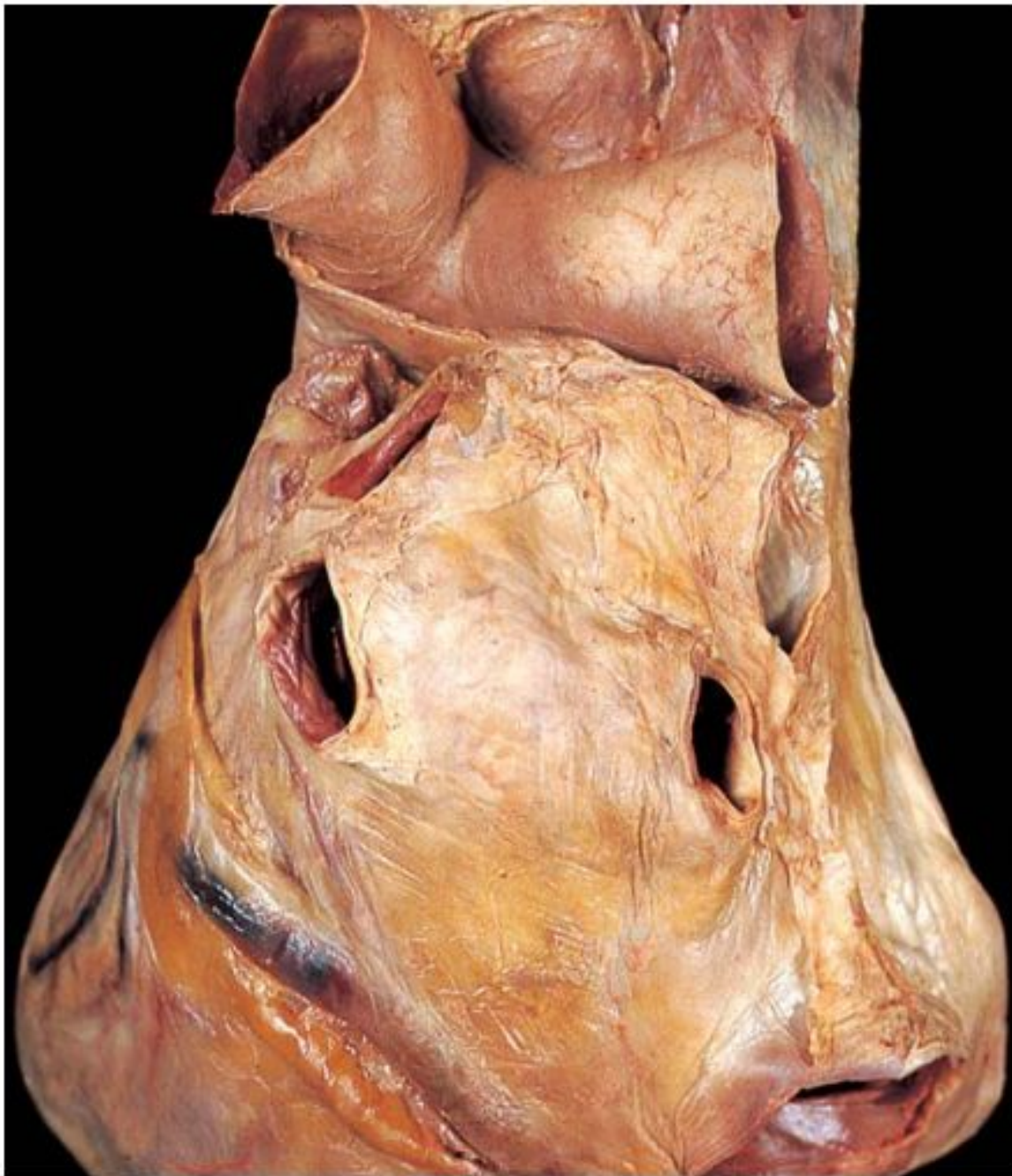


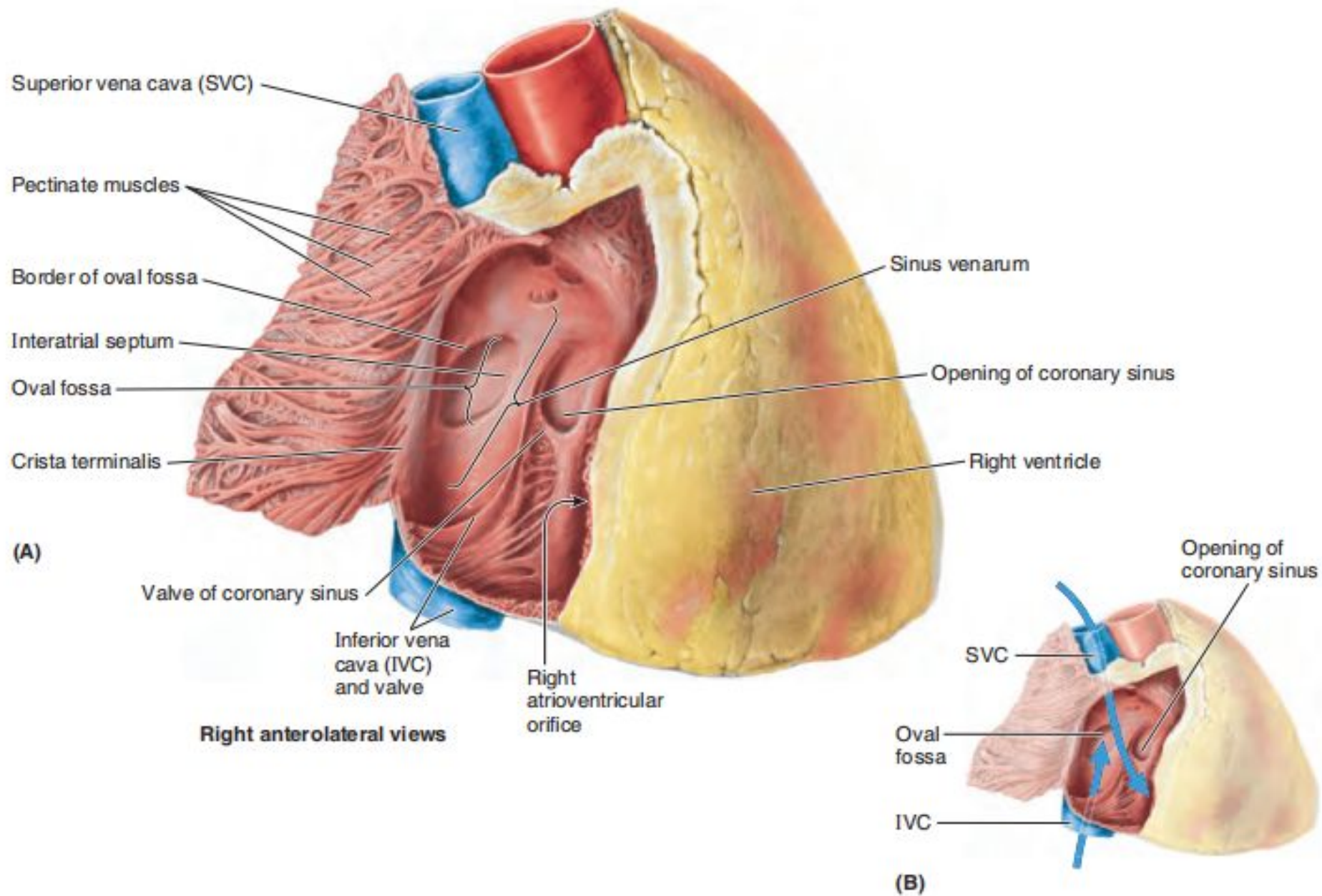












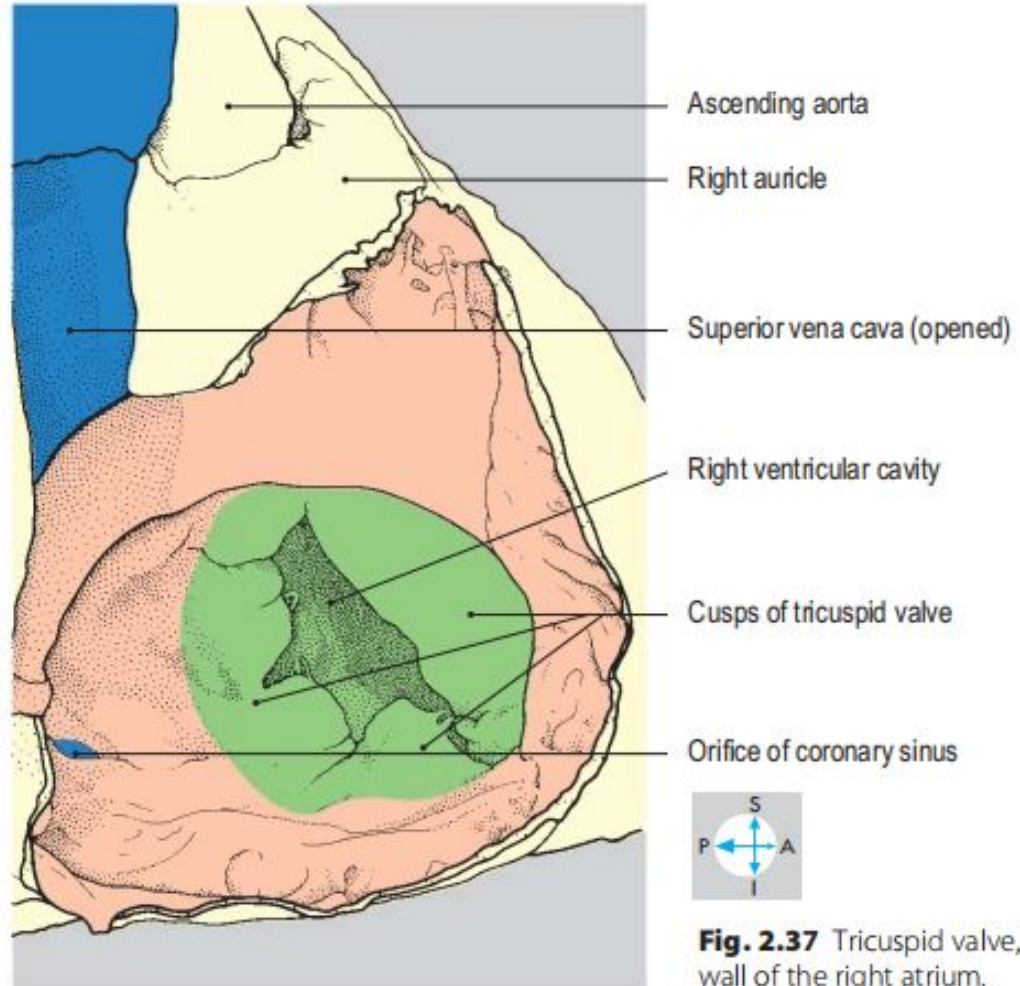
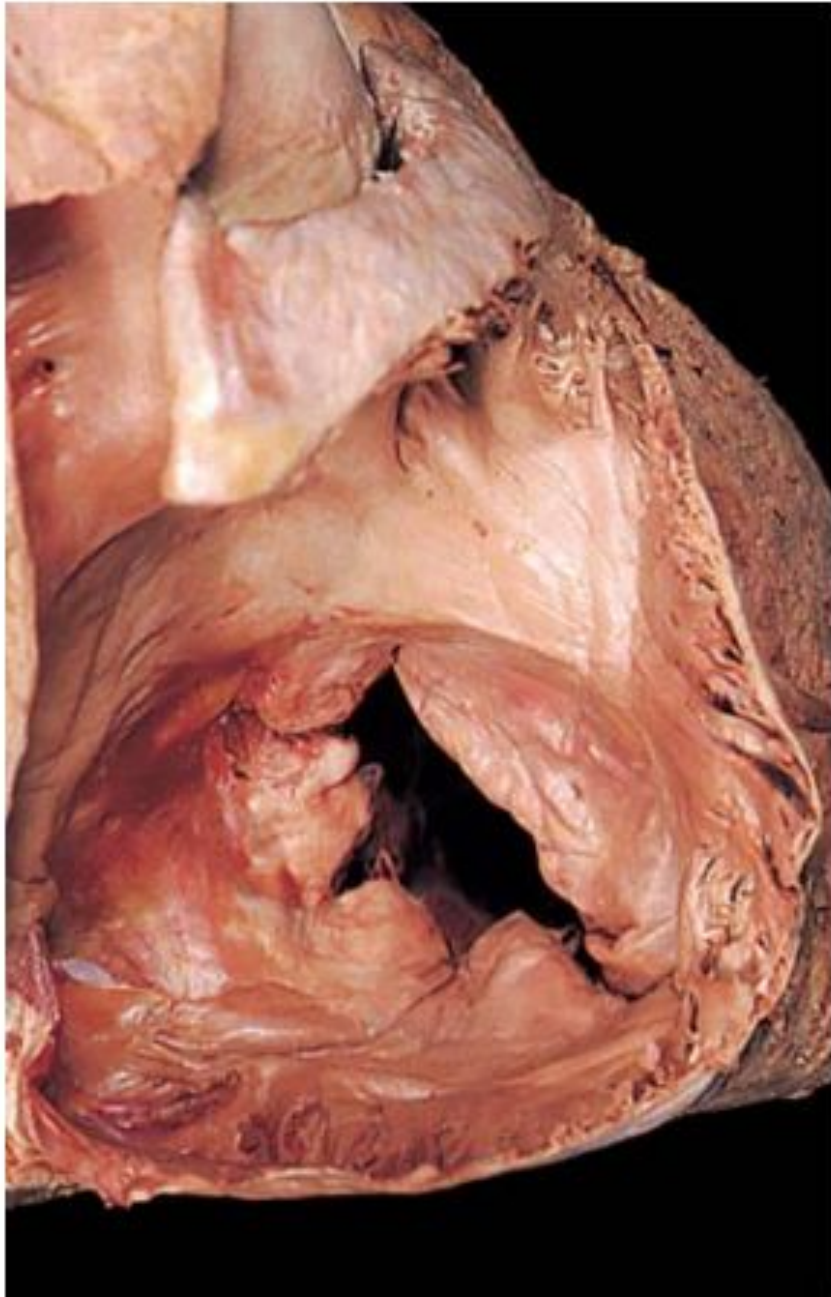


Fig. 2.37 Tricuspid valve, revealed after removal of the lateral wall of the right atrium.

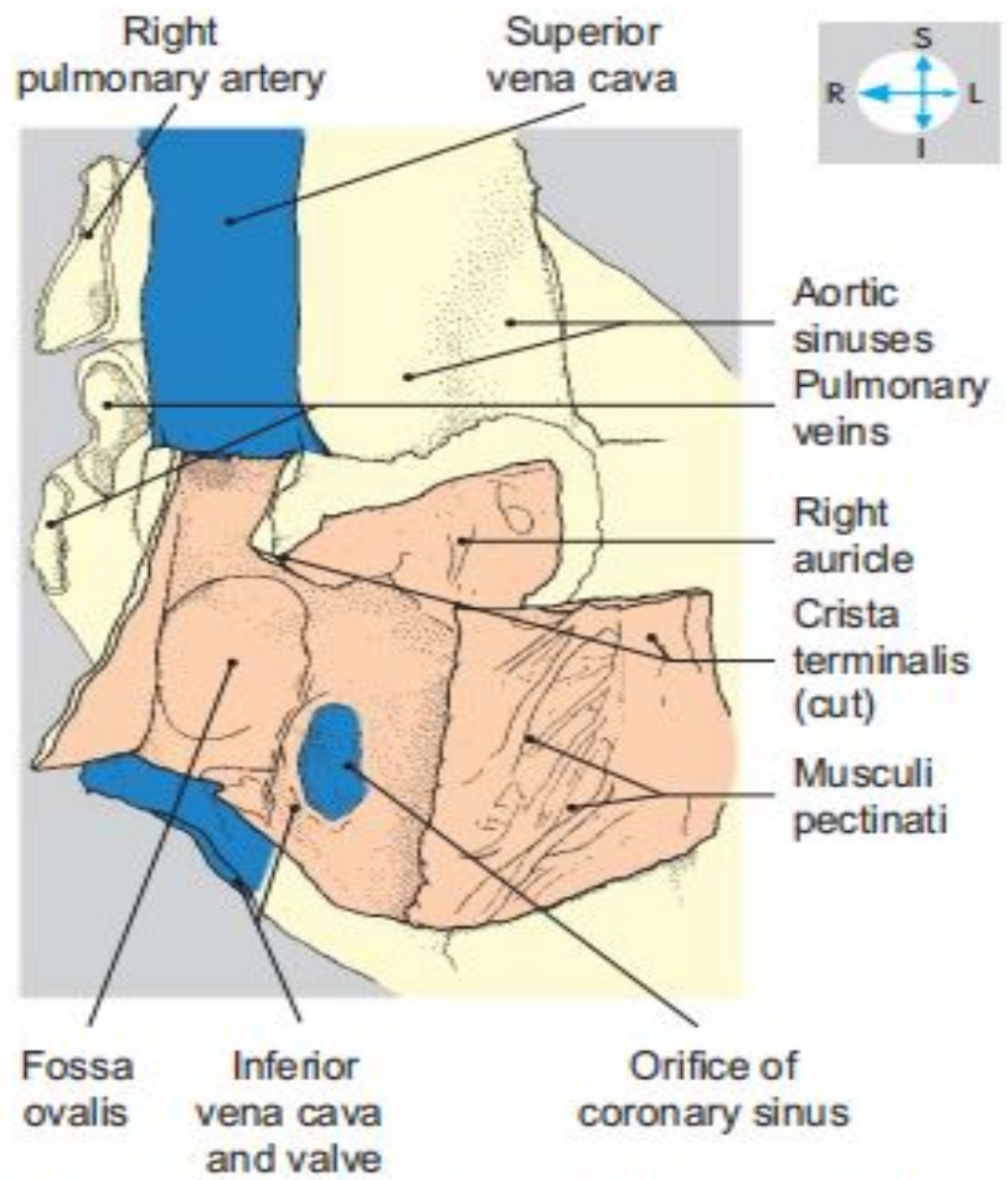
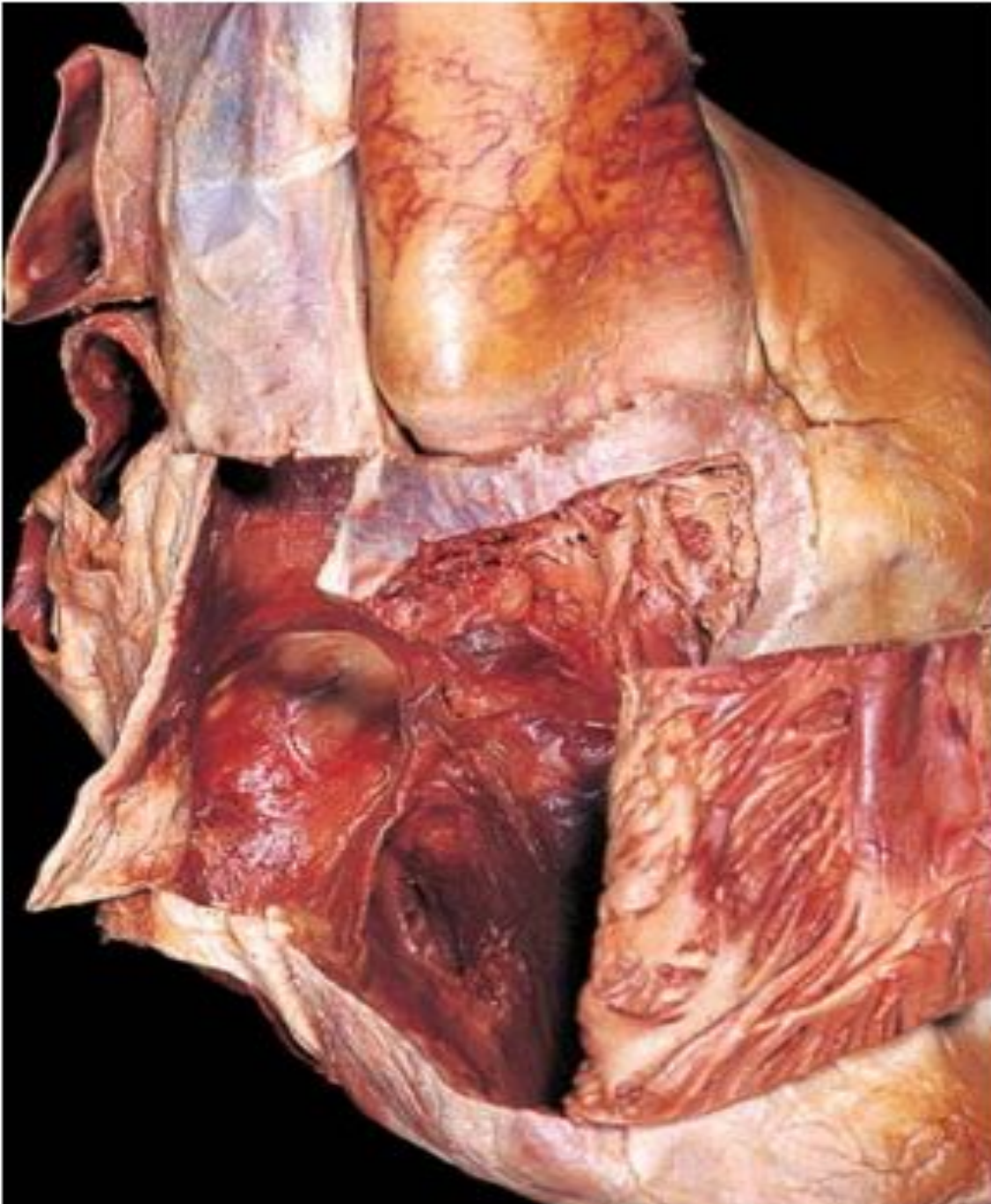
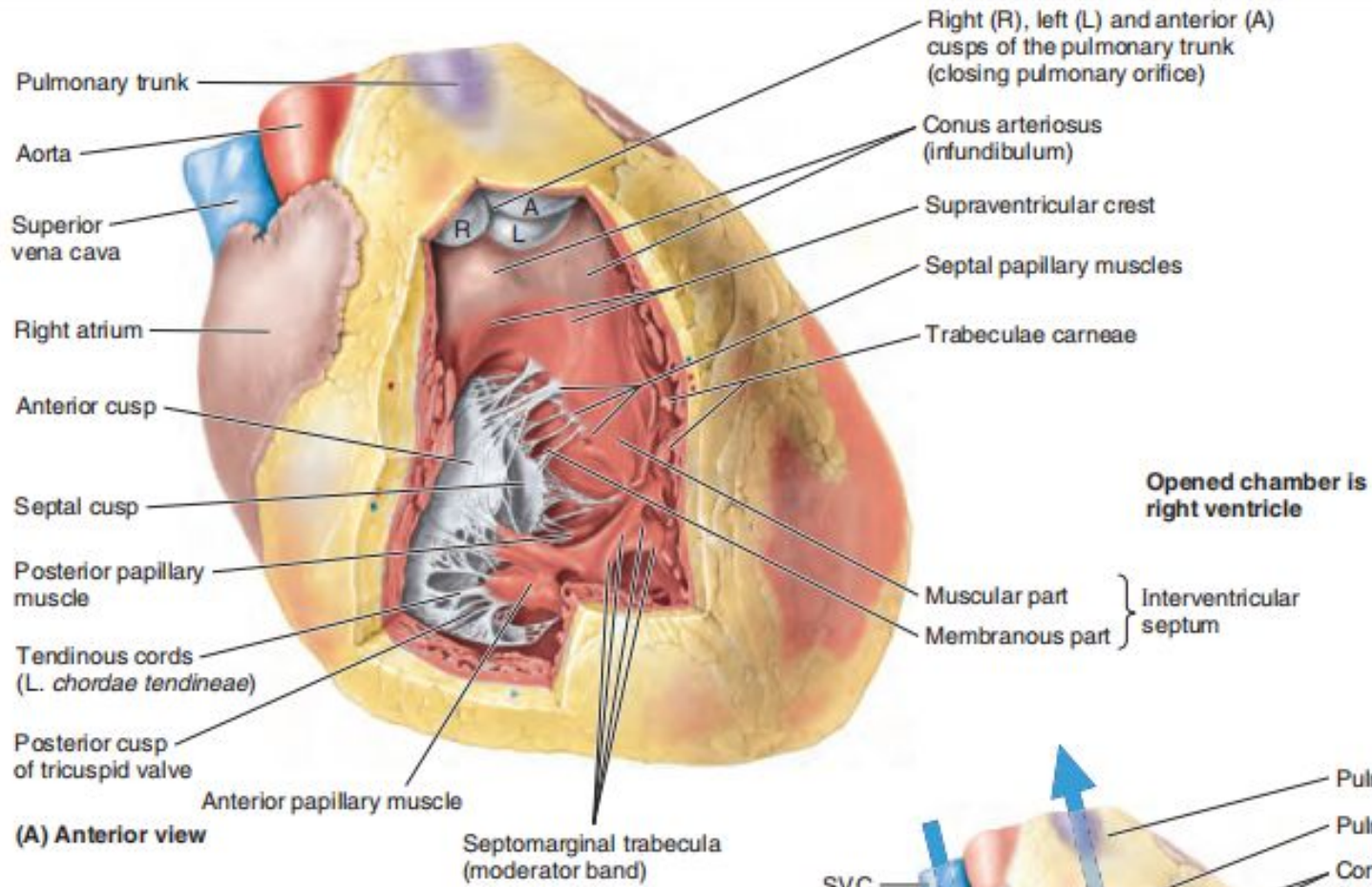
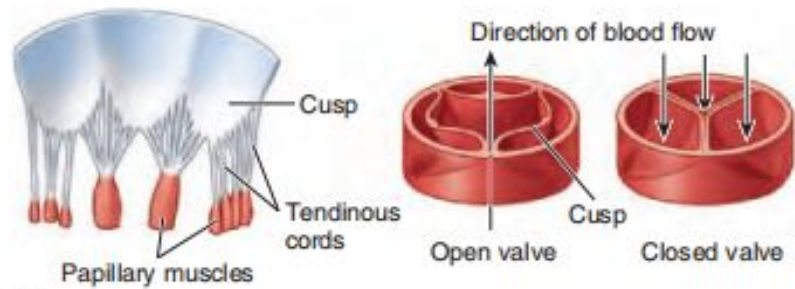


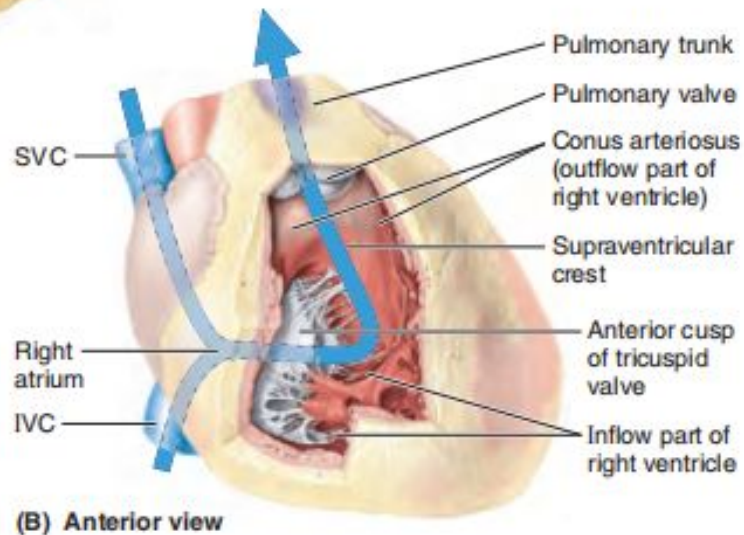
Fig. 2.36 Interior of the right atrium and auricle, exposed by reflection and excision of part of the anterior atrial wall.



(A) Anterior view



(C)



(B) Anterior view

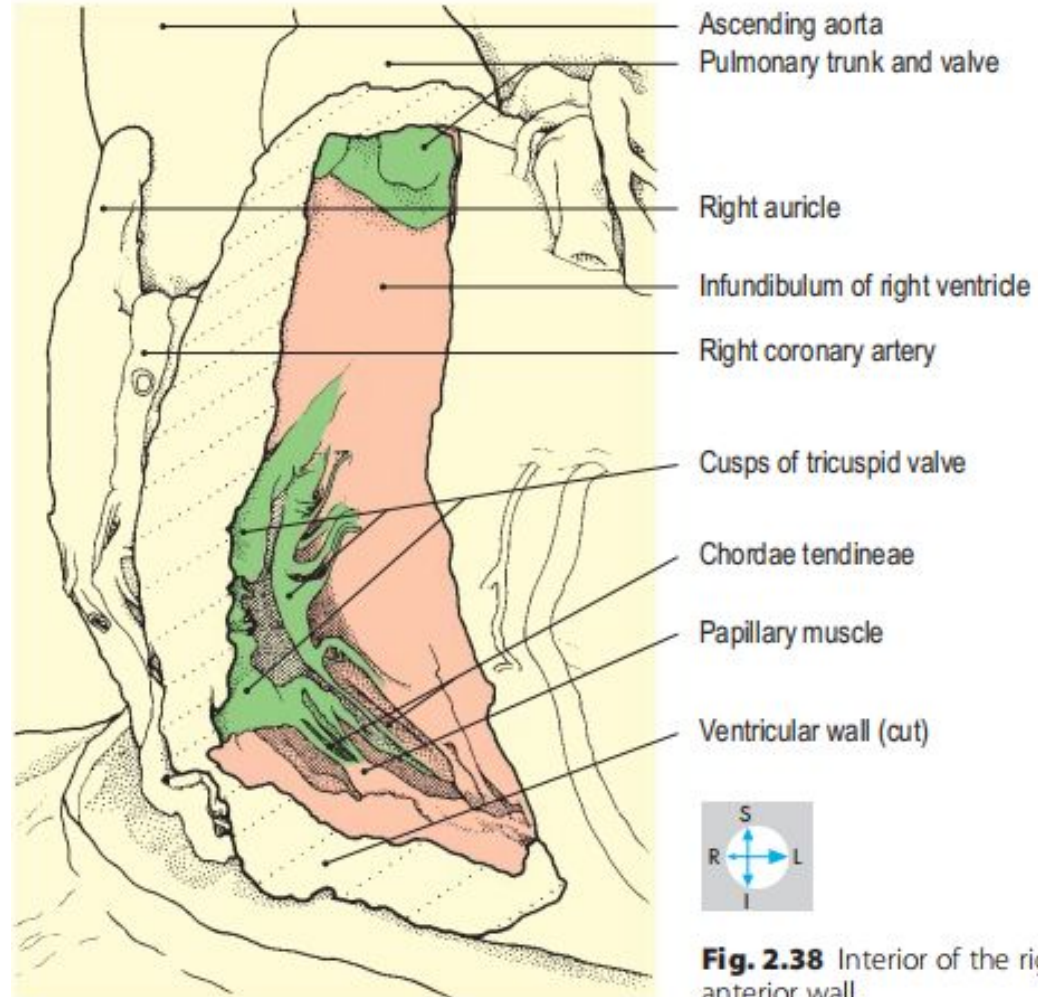
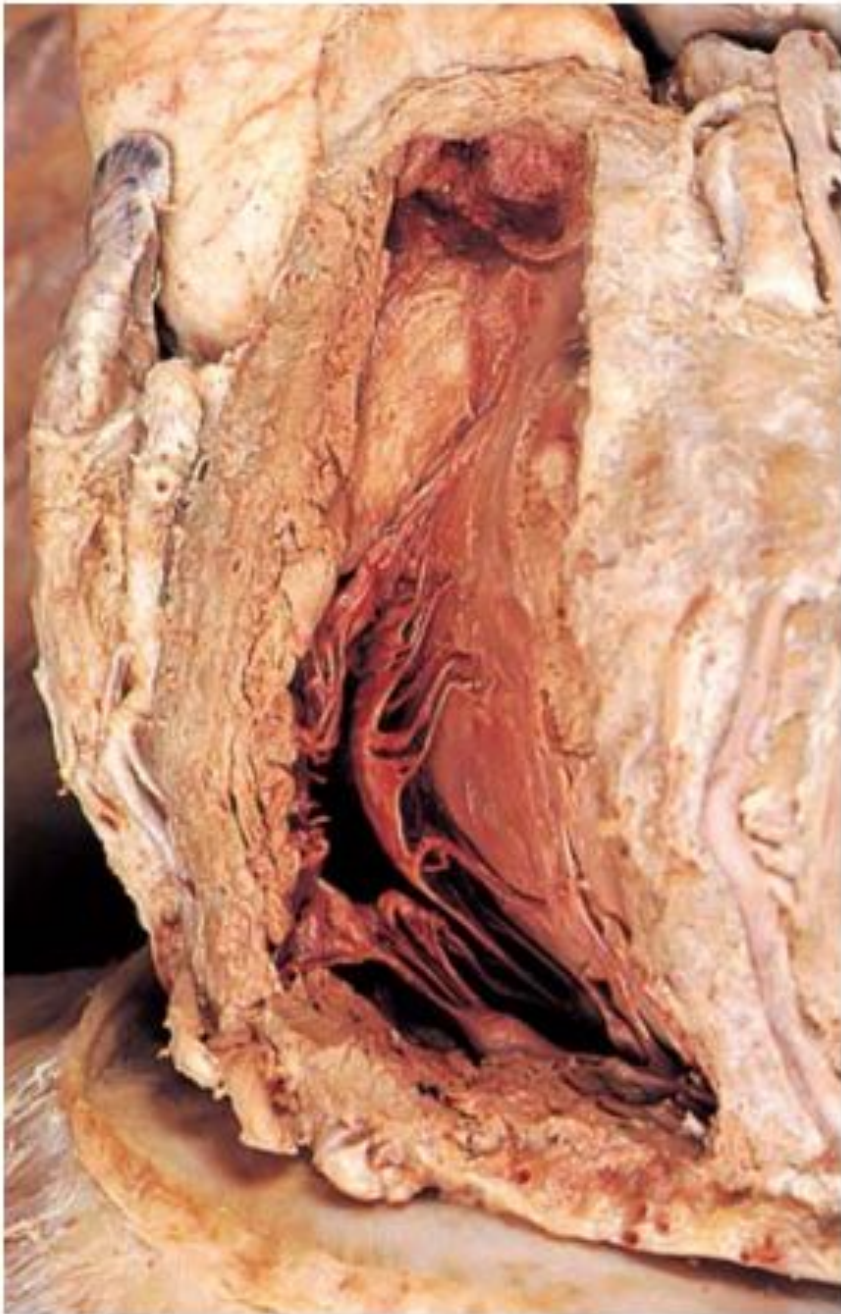


Fig. 2.38 Interior of the right ventricle seen after removal of its anterior wall.

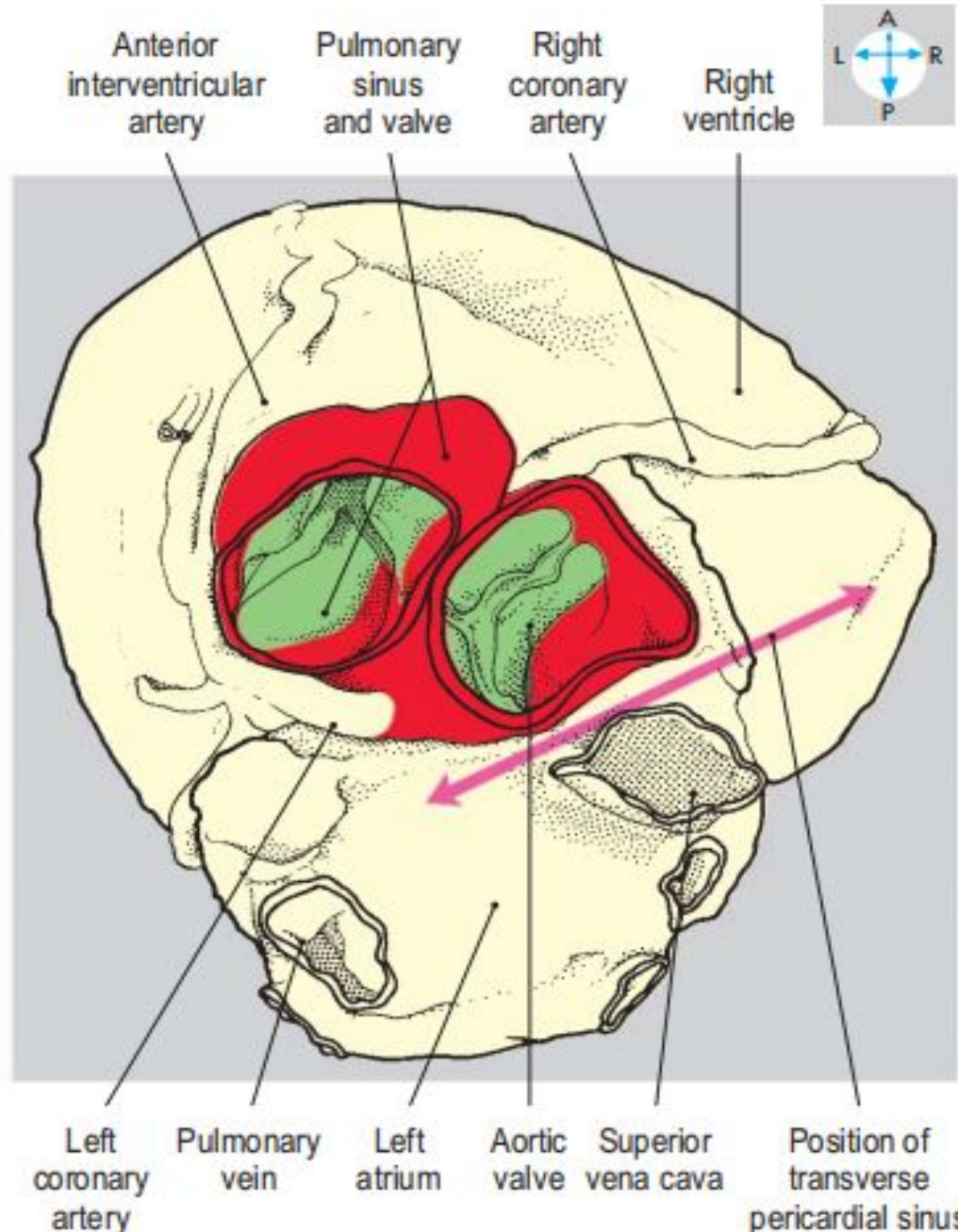
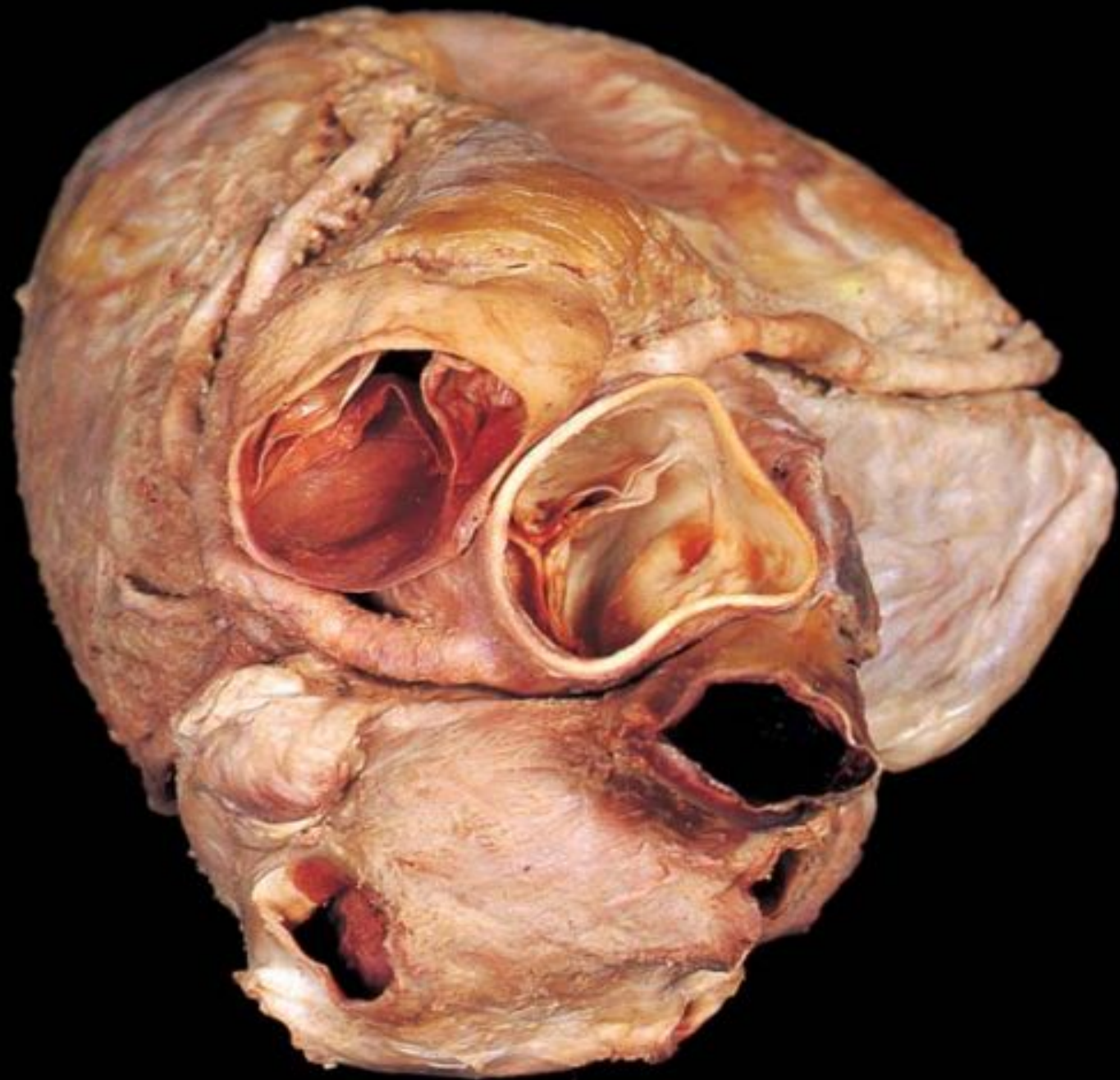
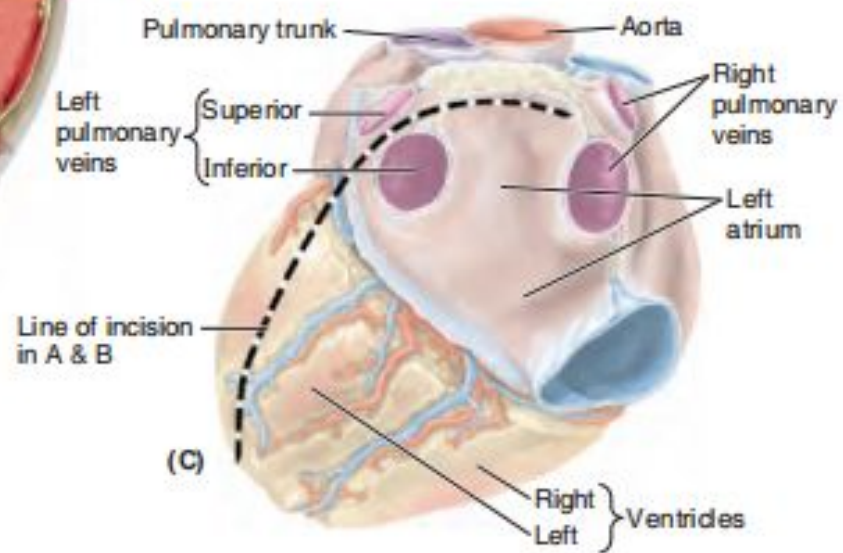
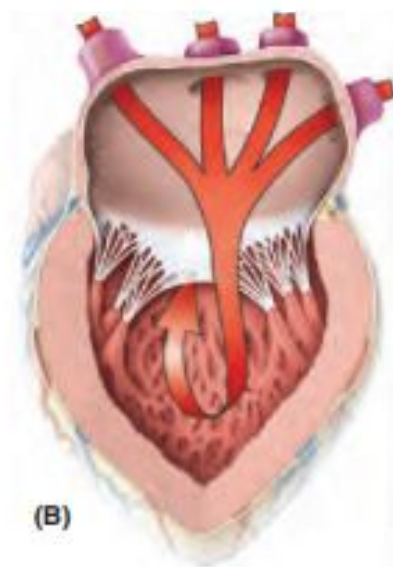
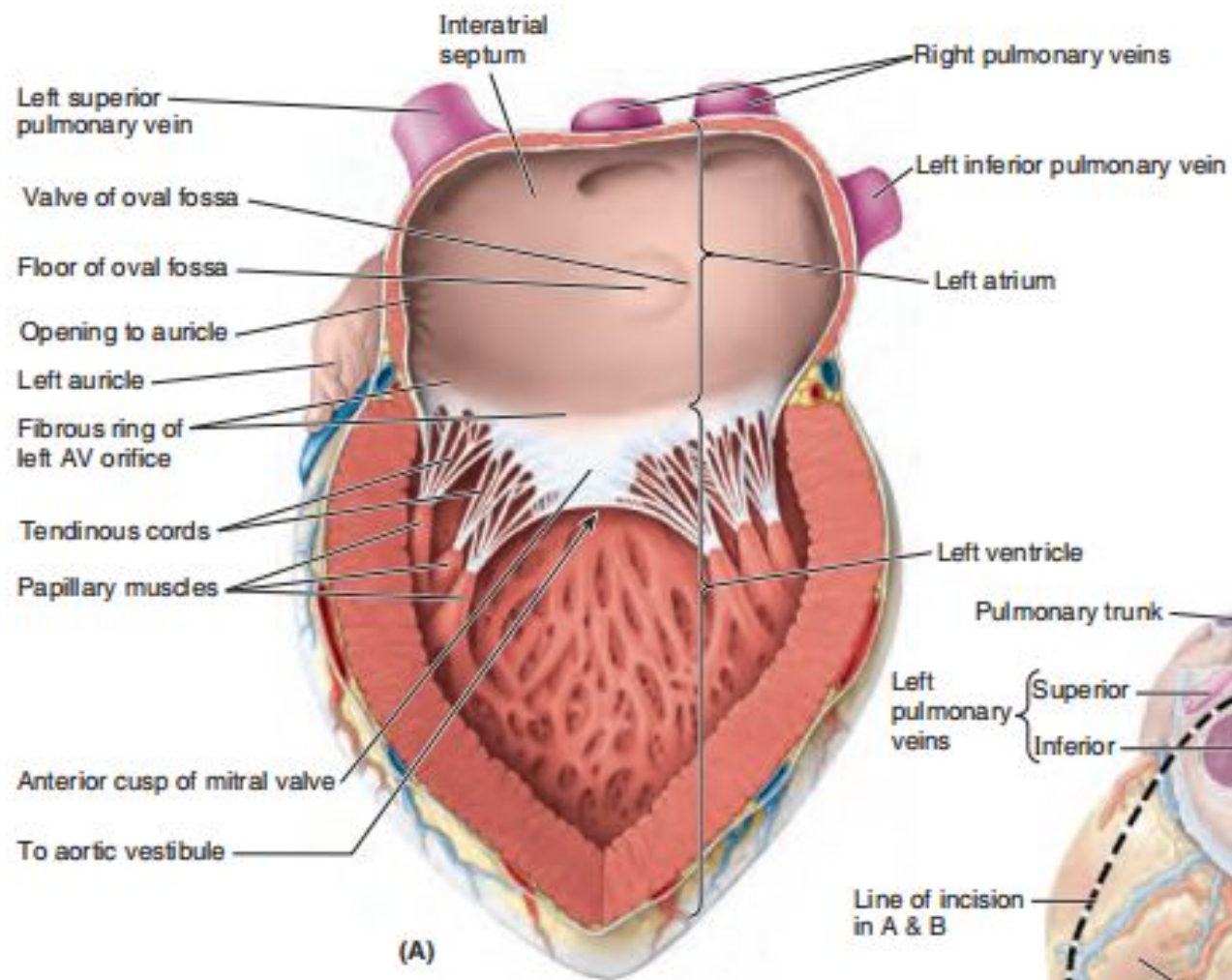


Fig. 2.40 Pulmonary and aortic valves seen from above.



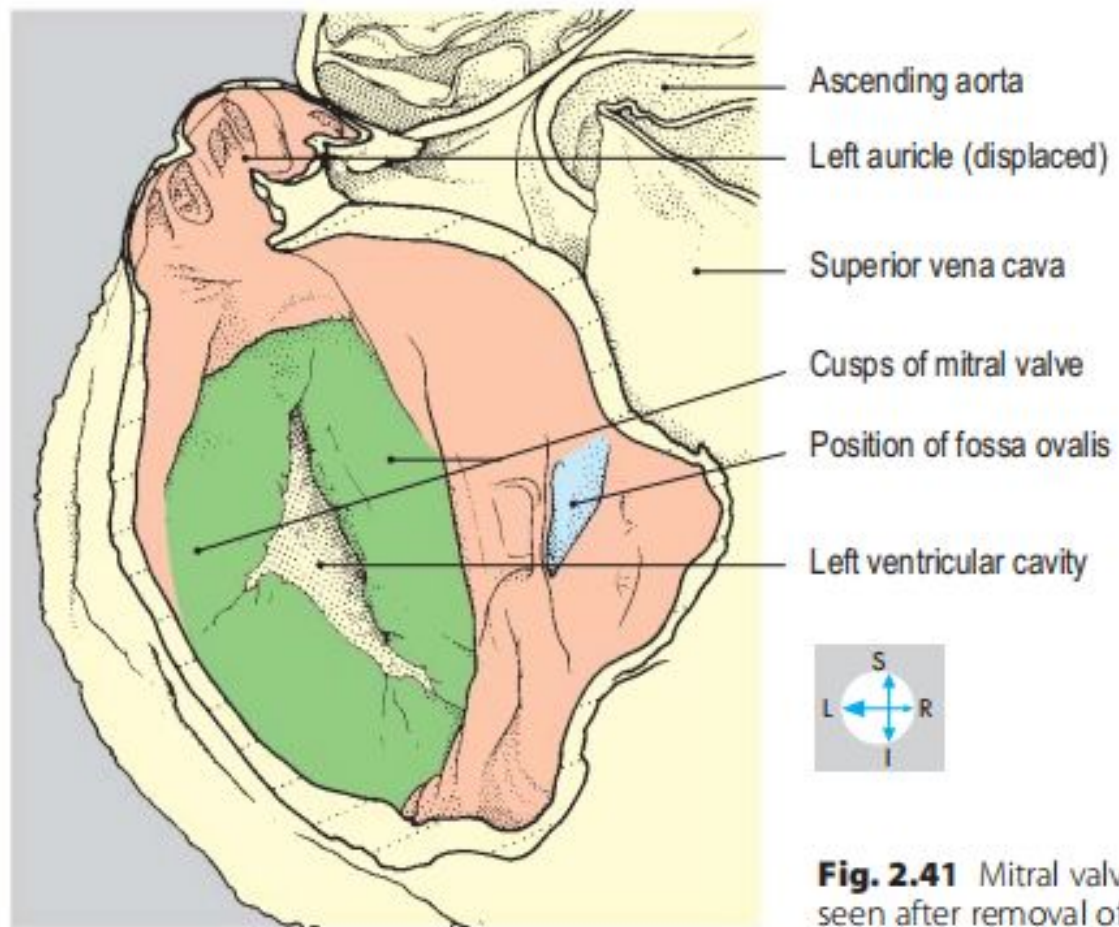
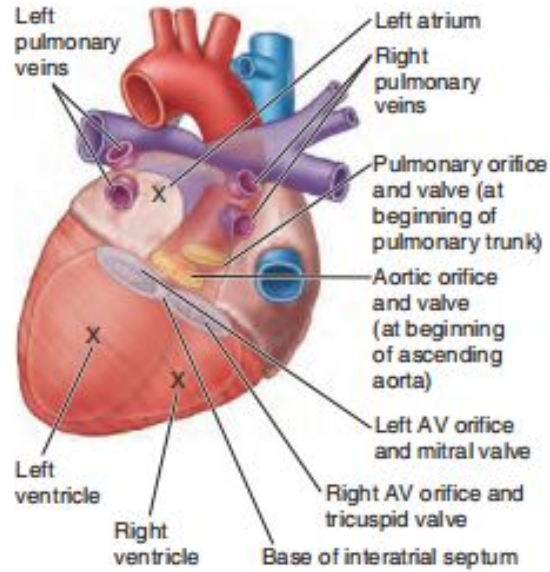
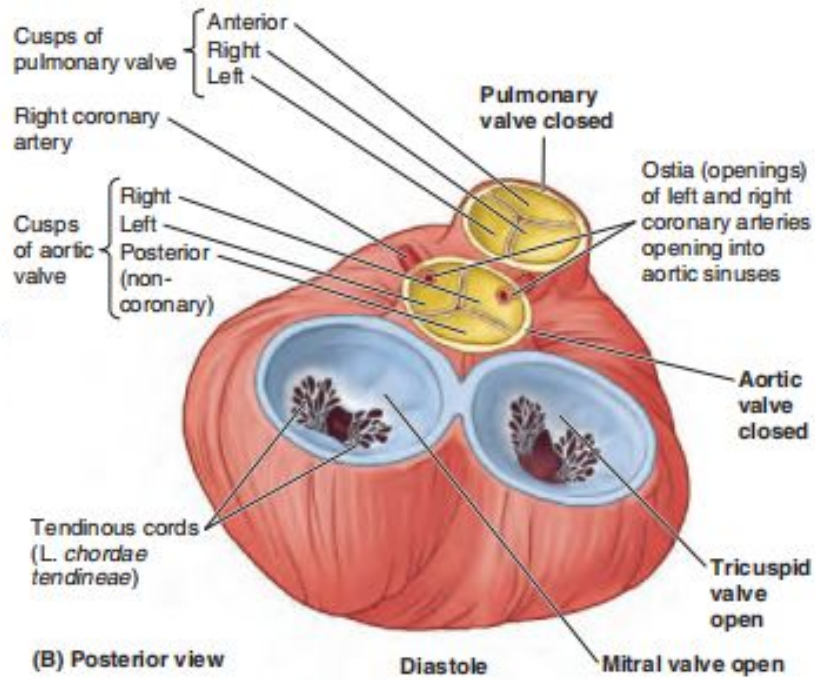


Fig. 2.41 Mitral valve and interior of the left atrium and auricle seen after removal of the posterior wall of the chamber.



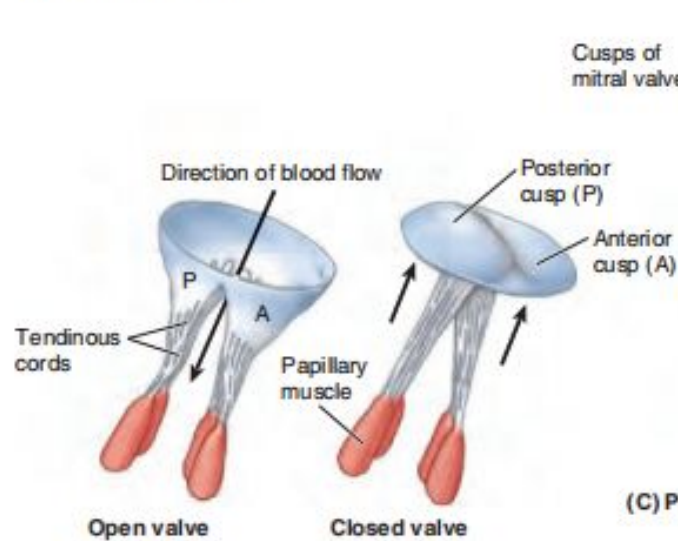
(A) Posteroinferior view



(B) Posterior view

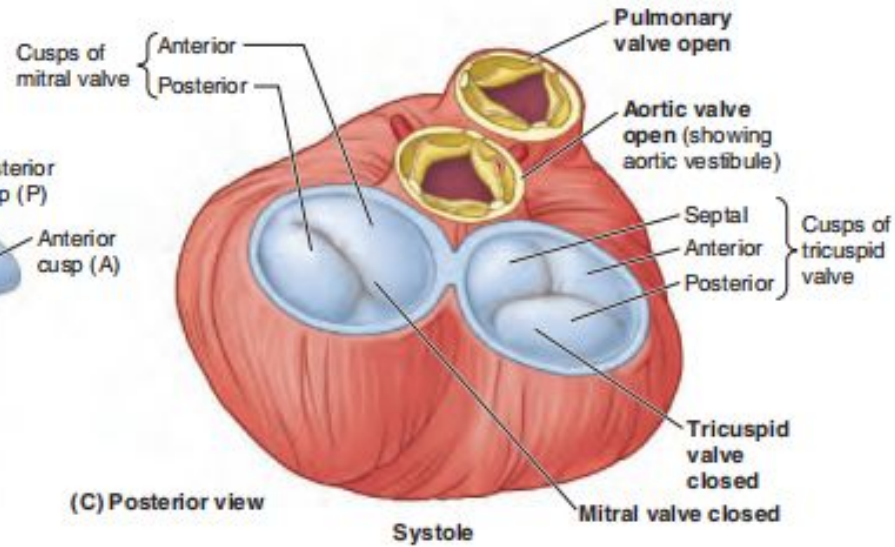
Diastole

Mitral valve open



Open valve

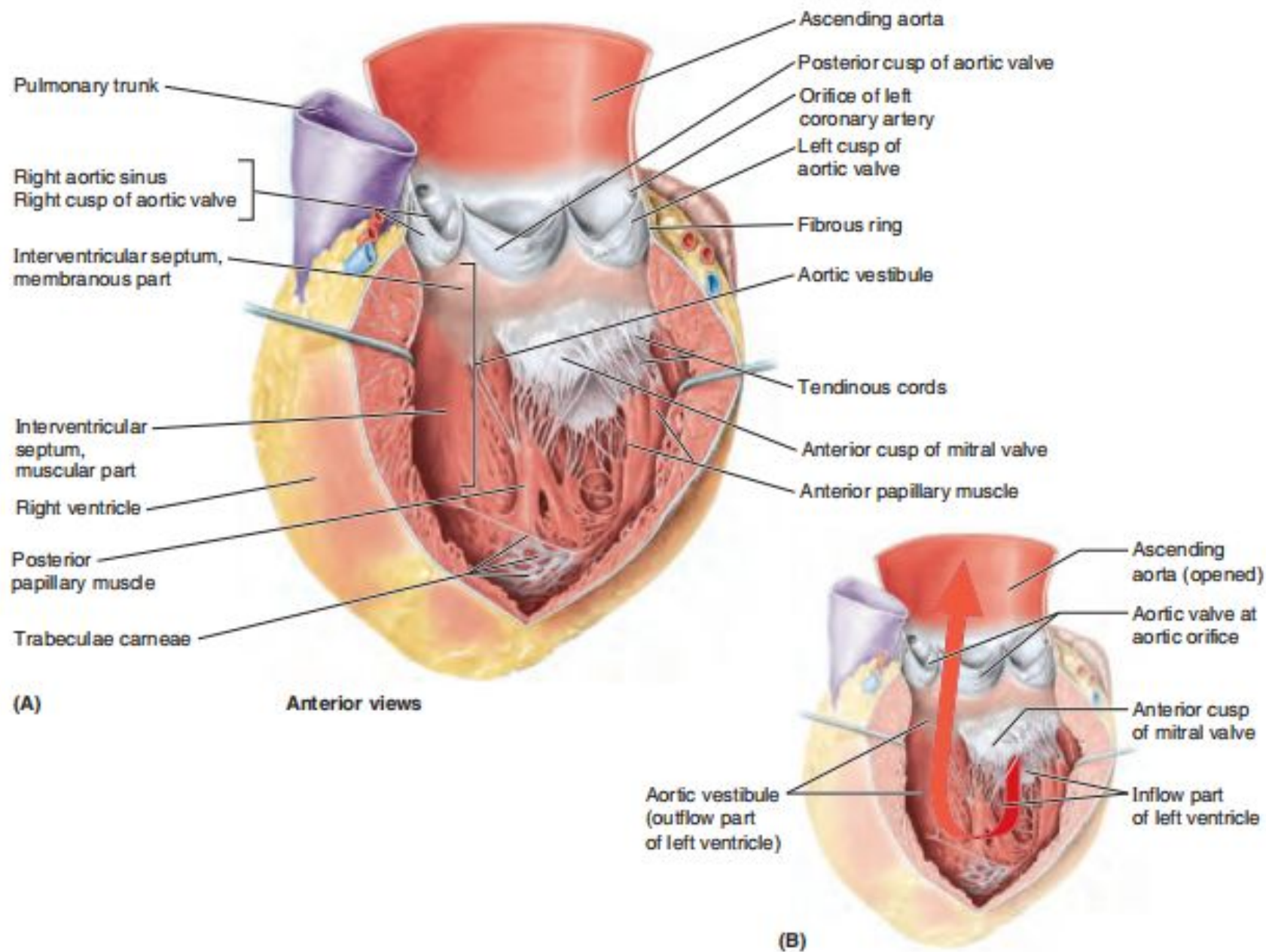
Closed valve



(C) Posterior view

Systole

Mitral valve closed



Левый желудочек

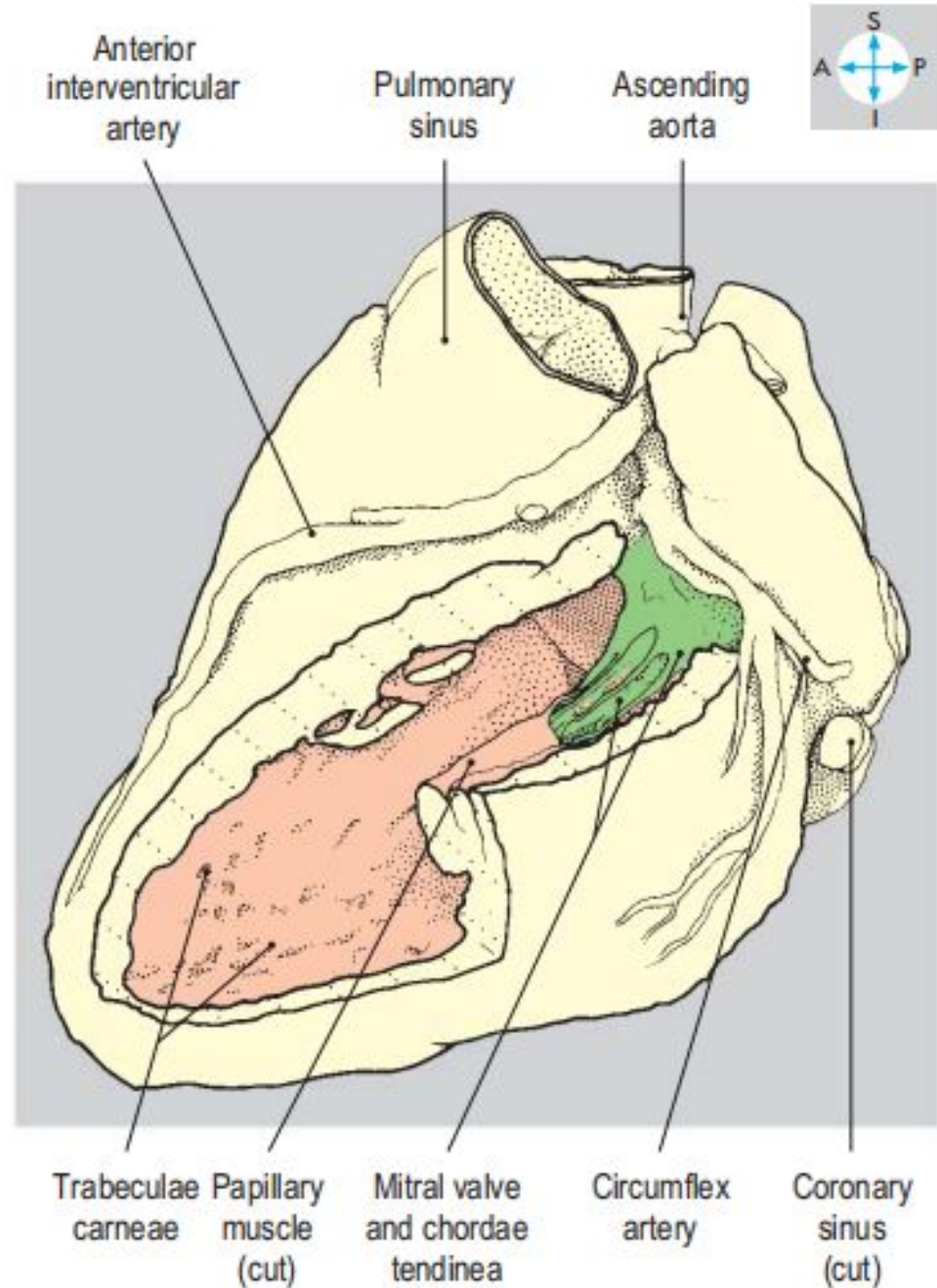


Fig. 2.42 Interior of the left ventricle seen after removal of part of its wall.

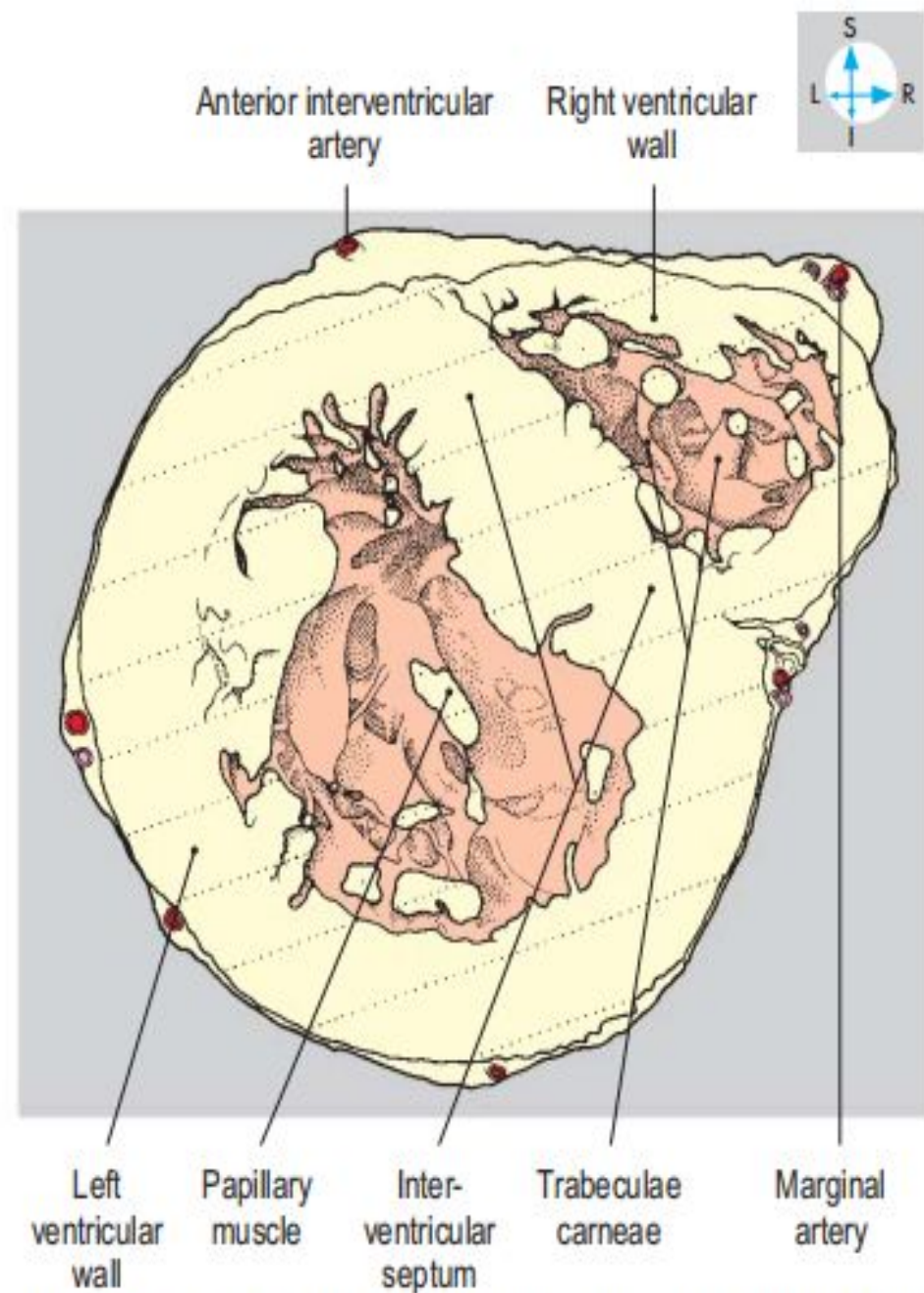
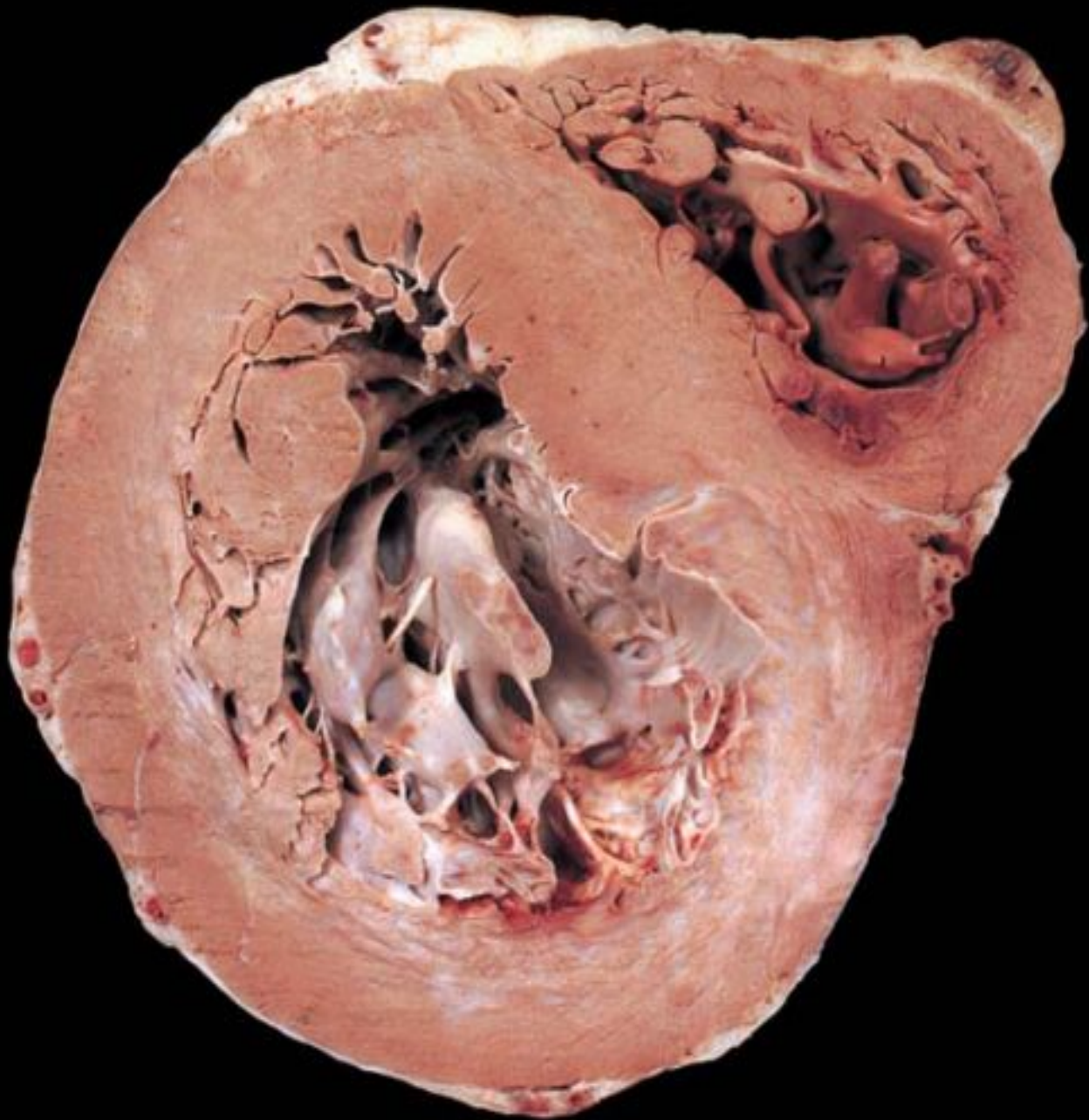


Fig. 2.43 Section through the heart showing the apical portions of the left and right ventricles.

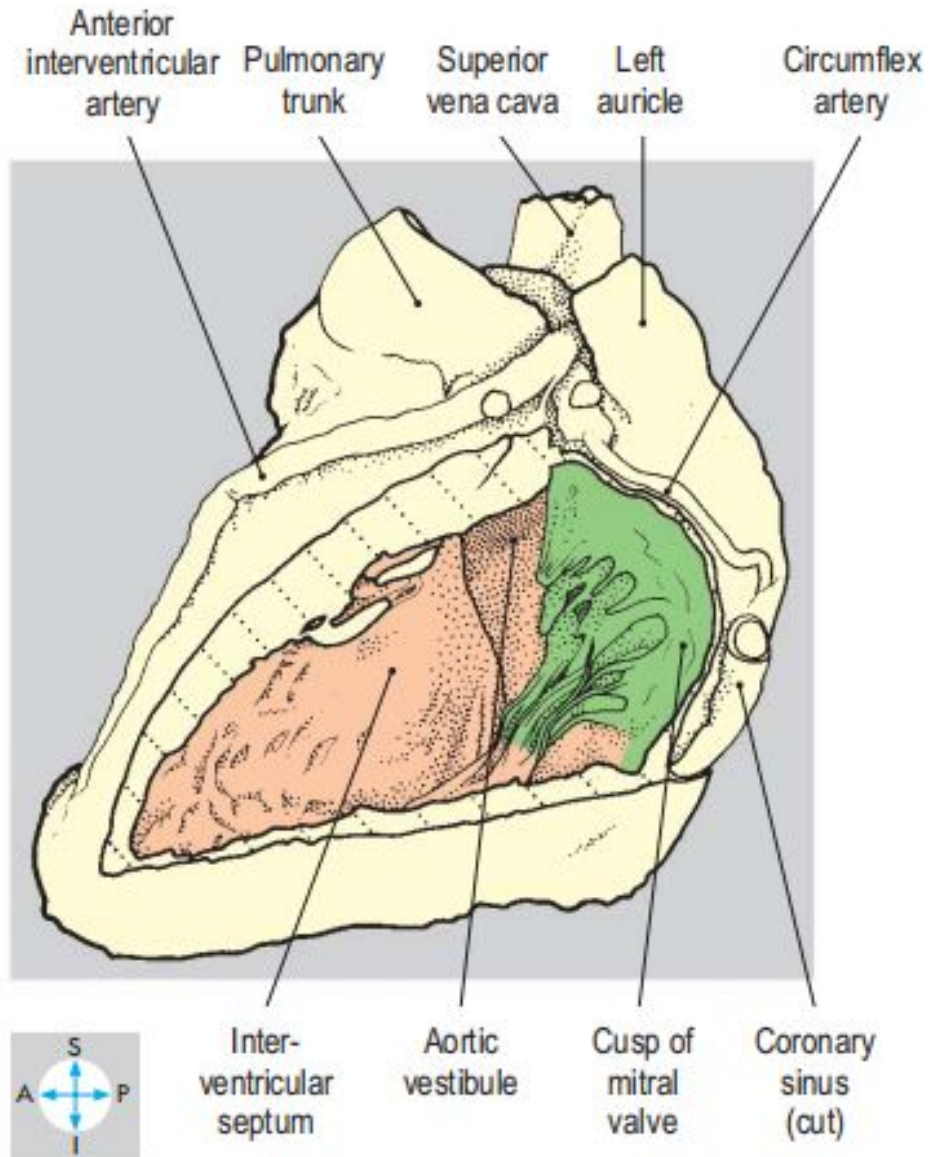
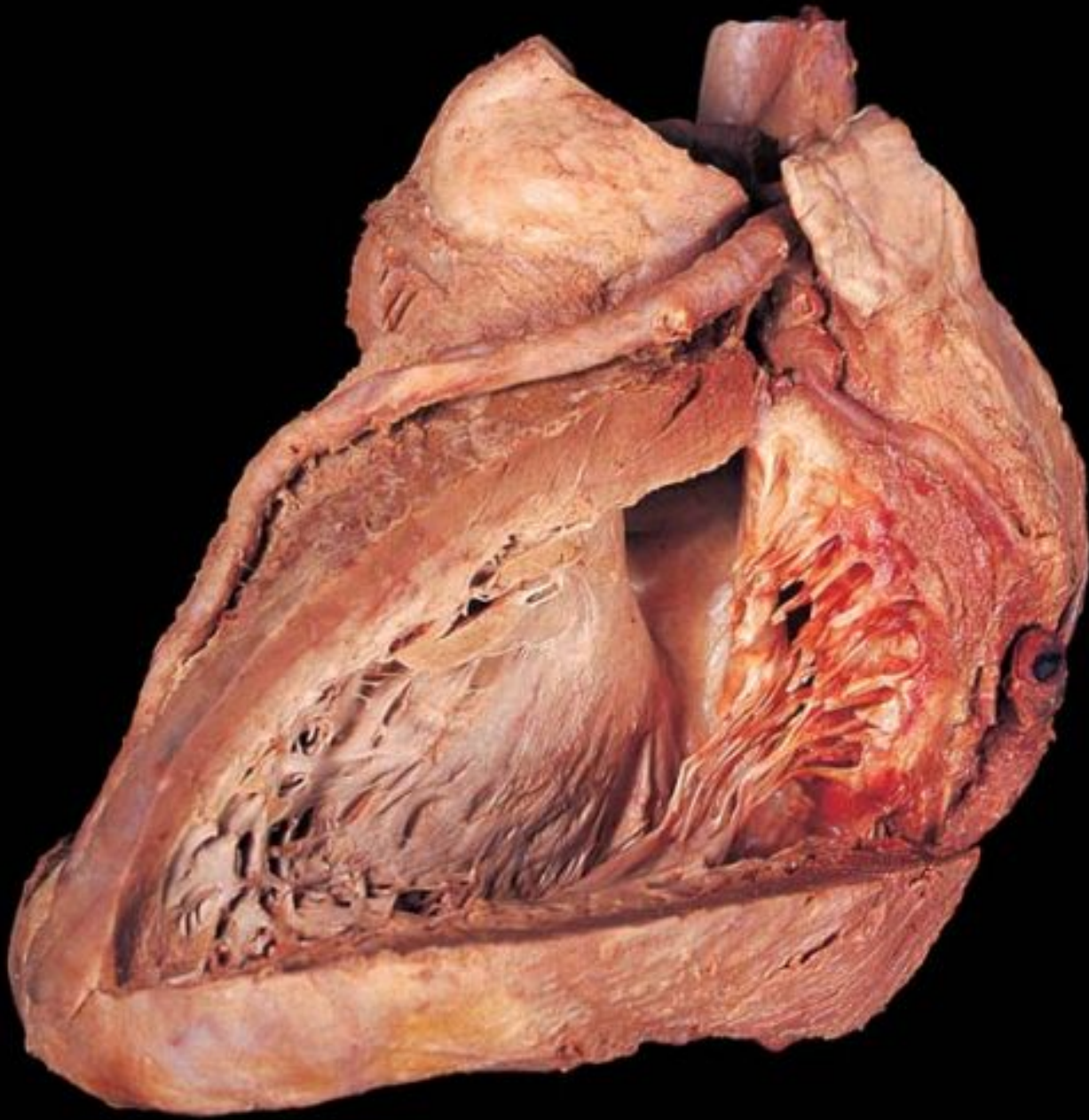


Fig. 2.44 Mitral valve and aortic vestibule, exposed by removal of part of the left ventricular wall.

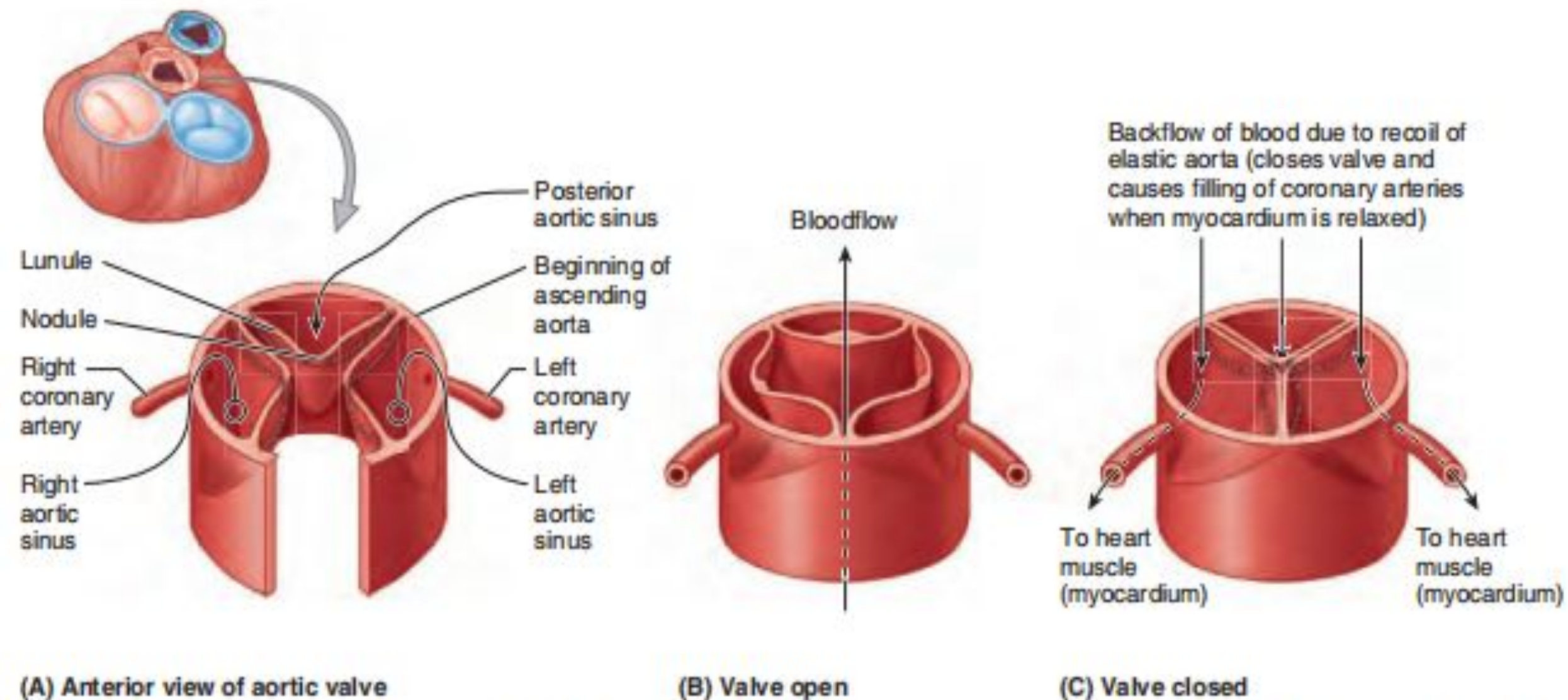


FIGURE 1.58. Aortic valve, aortic sinuses, and coronary arteries. A. Like the pulmonary valve, the aortic valve has three semilunar cusps: right, posterior, and left. B. Blood ejected from the left ventricle forces the cusps apart. C. When the valve closes, the nodules and lunules meet in the center.

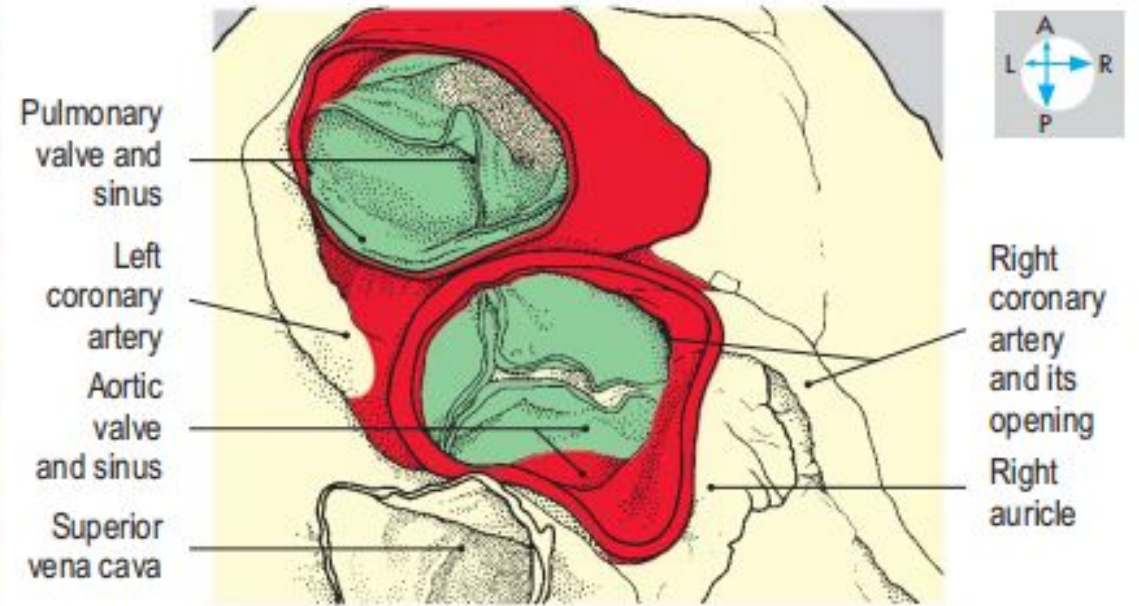
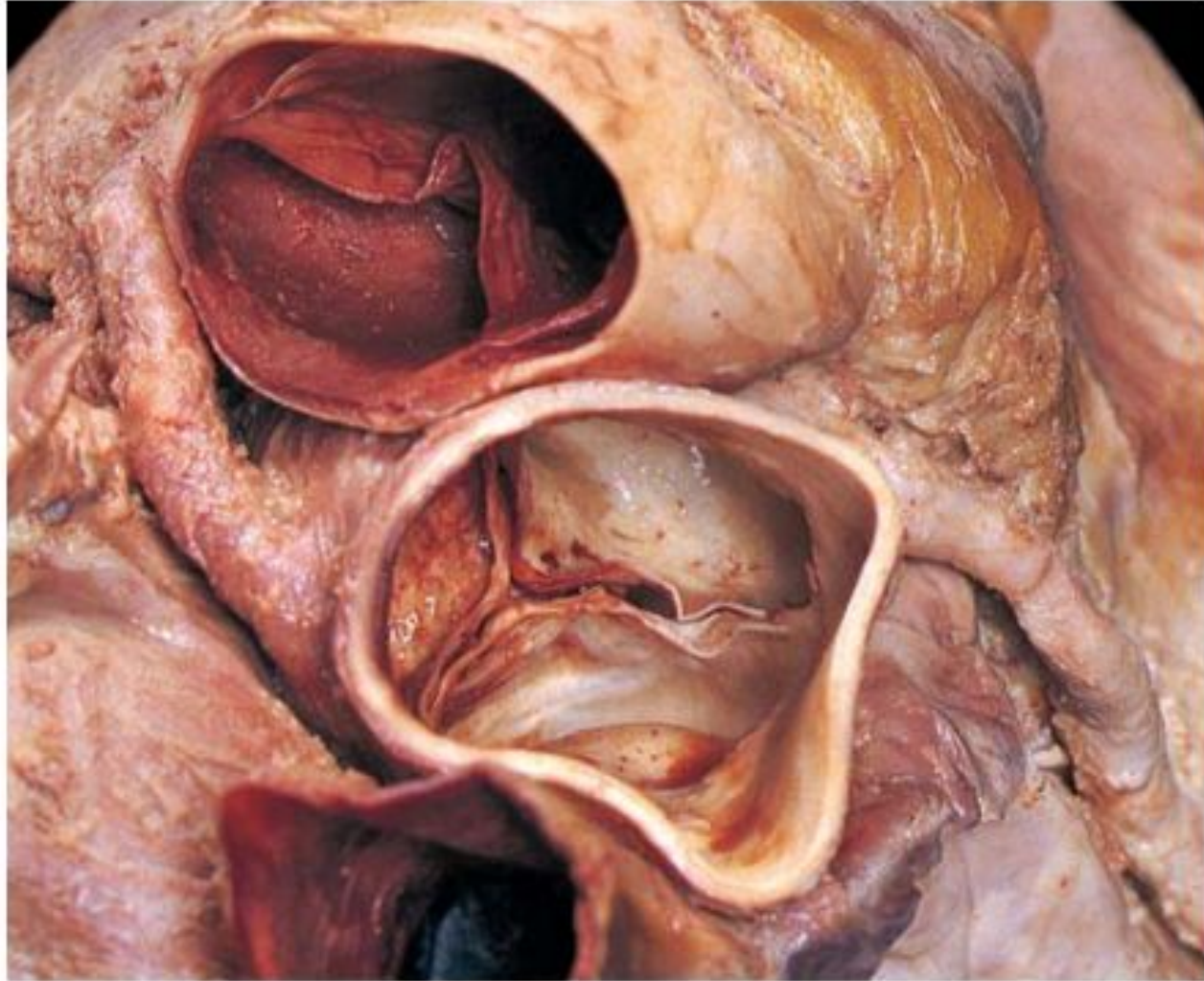


Fig. 2.45 Aortic and pulmonary valves viewed obliquely from above.

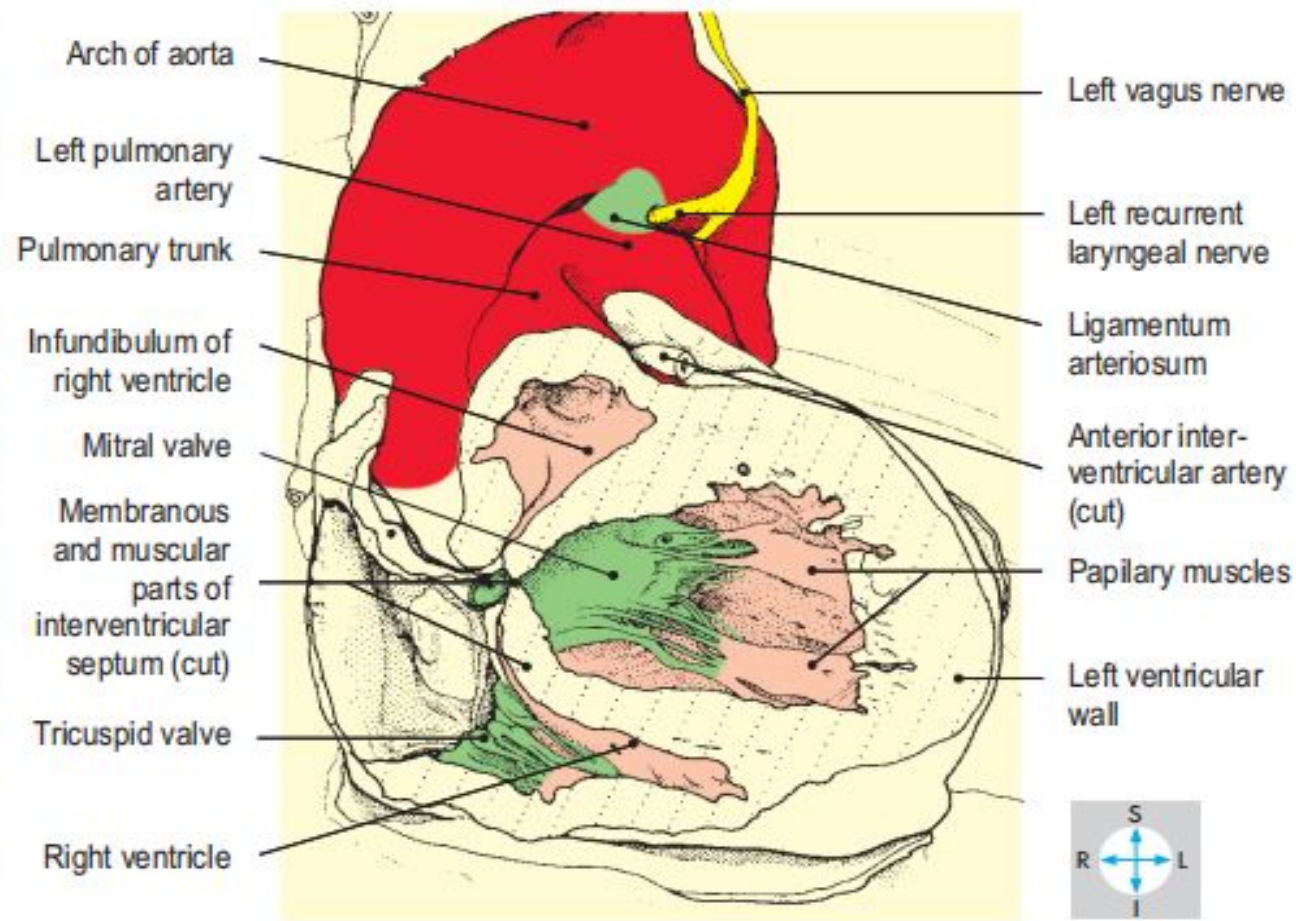


Fig. 2.46 Anterior view of the aorta, pulmonary trunk and ligamentum arteriosum. Most of the muscular part of the interventricular septum has been removed to show the interior of the left ventricle.

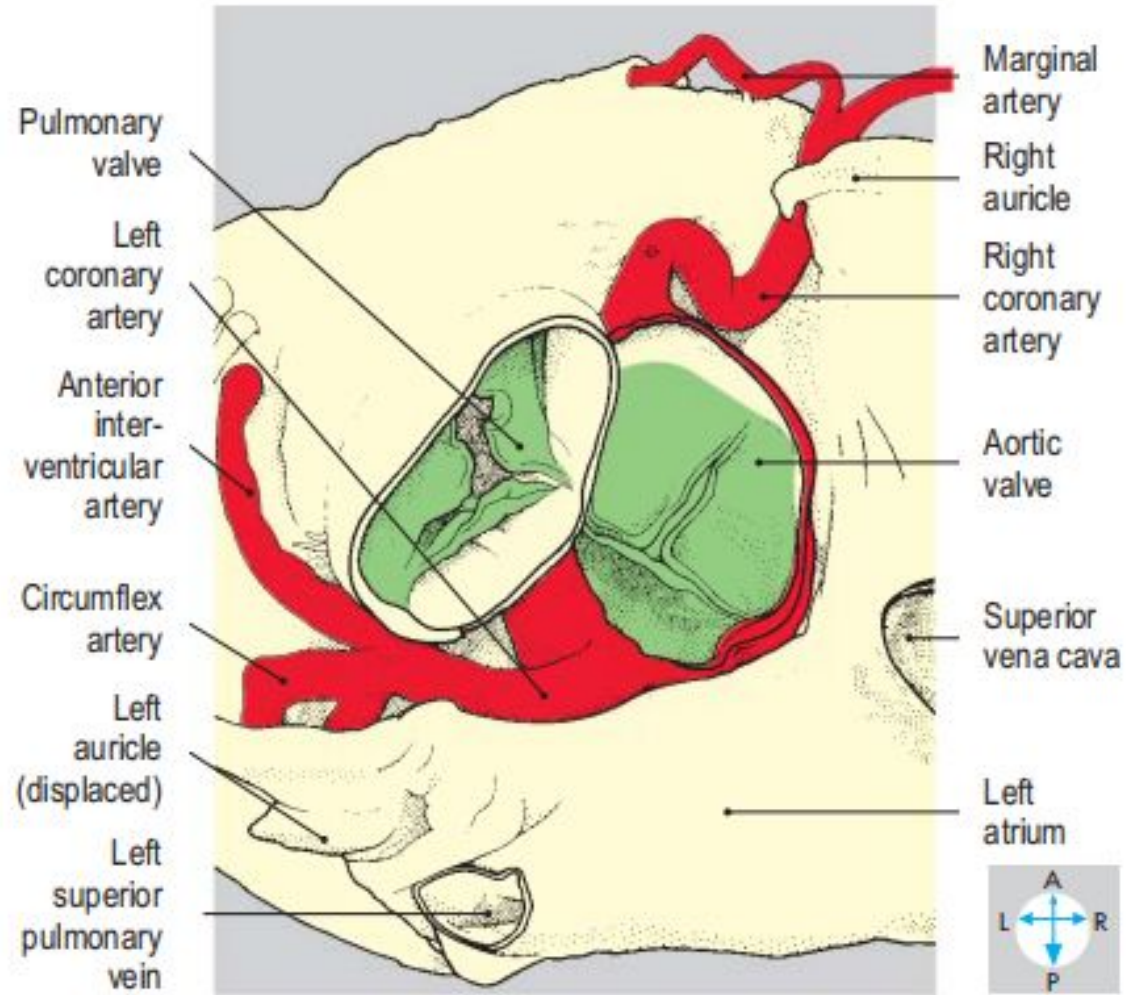
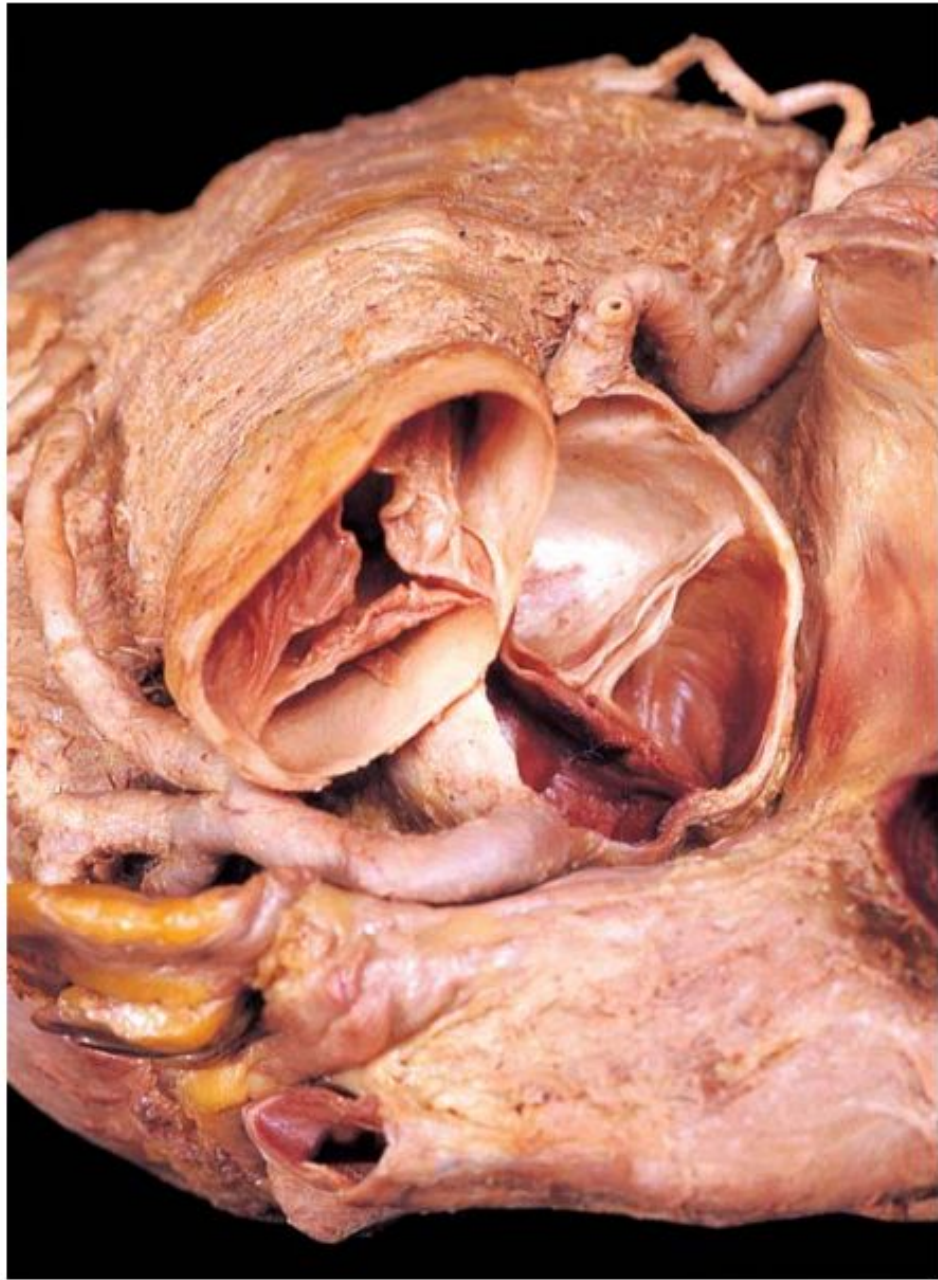


Fig. 2.47 Origins of the right and left coronary arteries from the root of the ascending aorta seen from above.

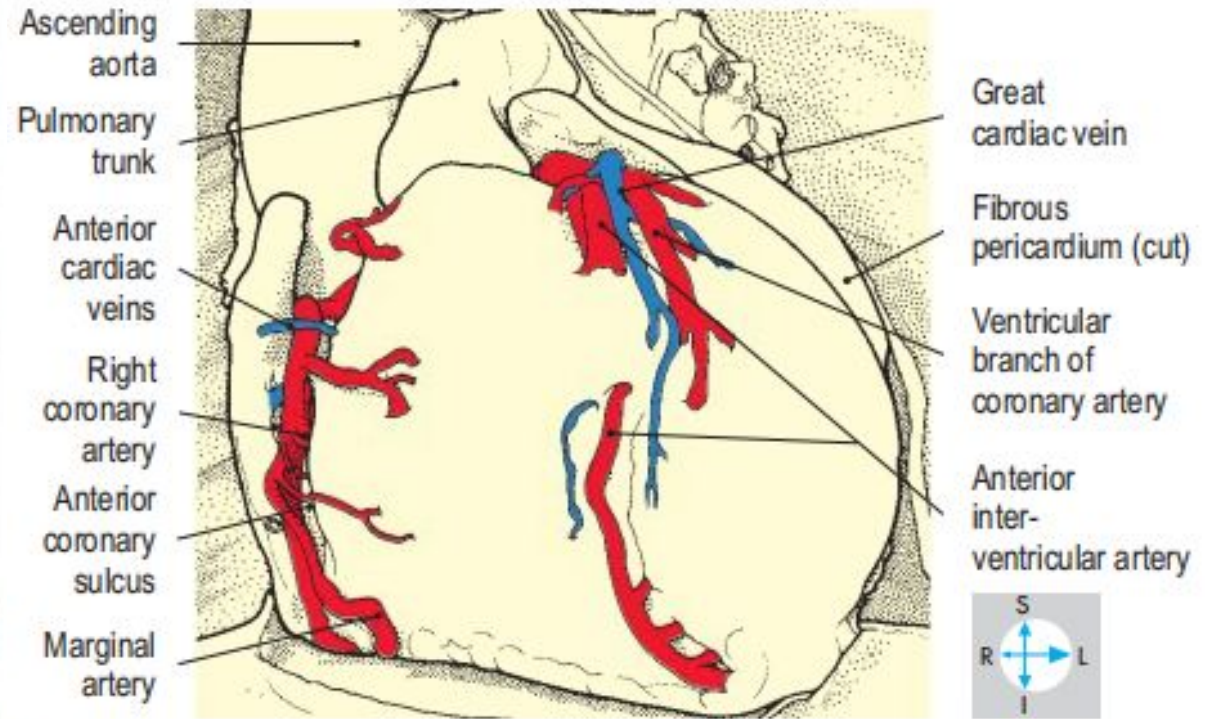


Fig. 2.48 Right and left coronary arteries and their branches on the anterior surface of the heart.

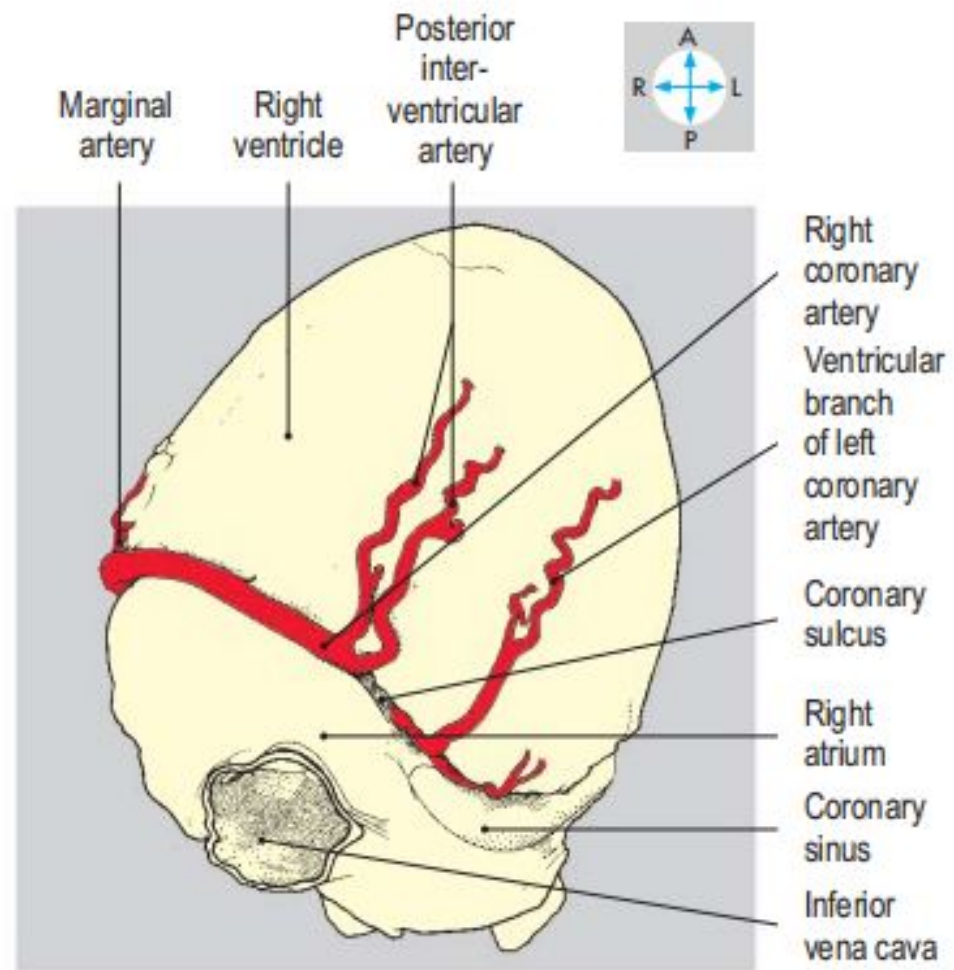


Fig. 2.49 Right and left coronary arteries and their branches on the inferior surface of the heart. The posterior interventricular artery is duplicated in this specimen.

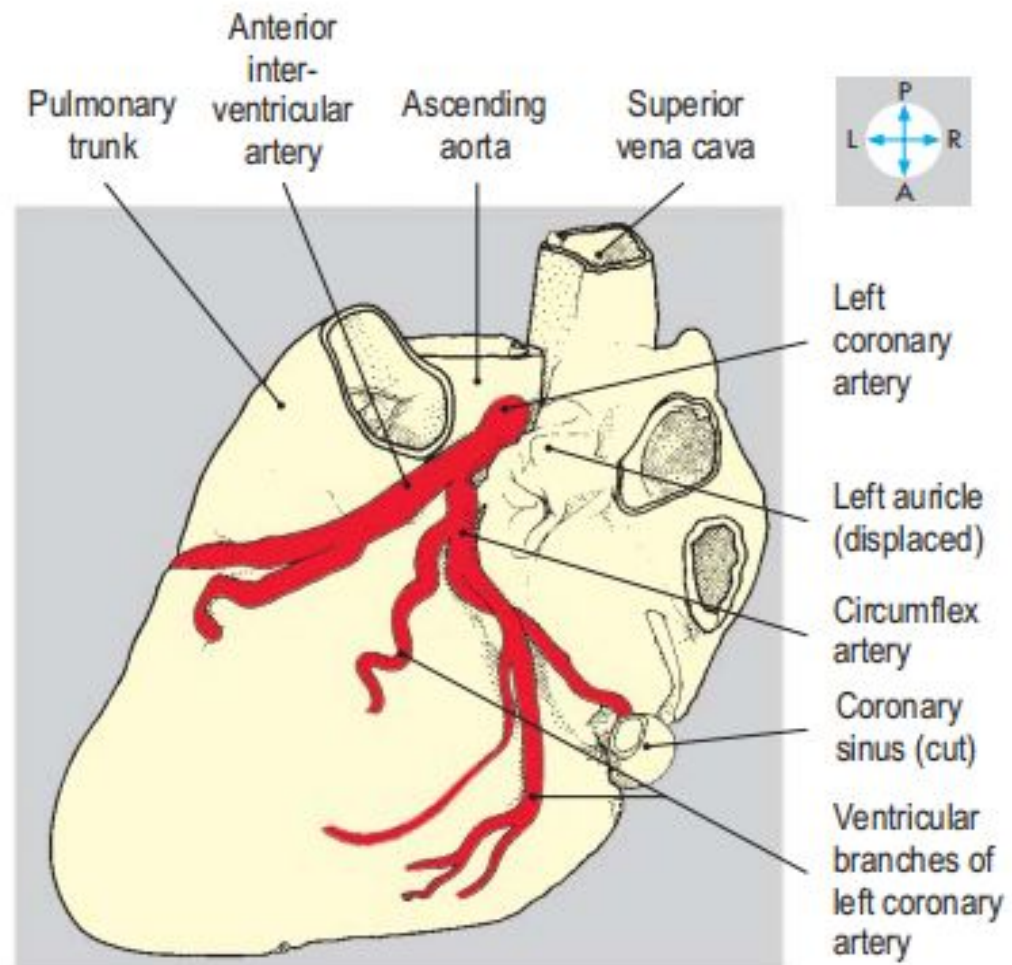
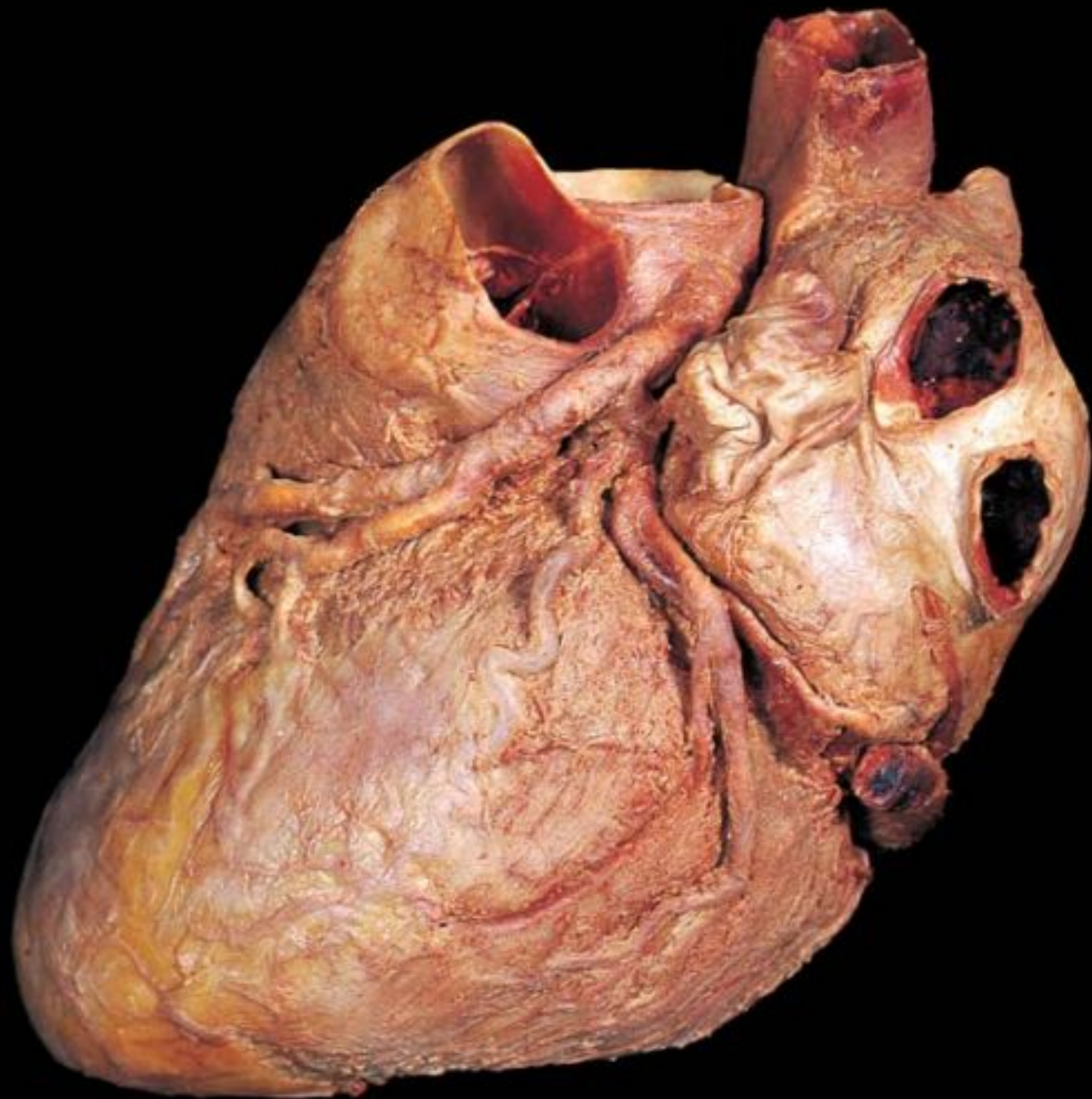


Fig. 2.50 Left coronary artery and its branches, viewed from the left.

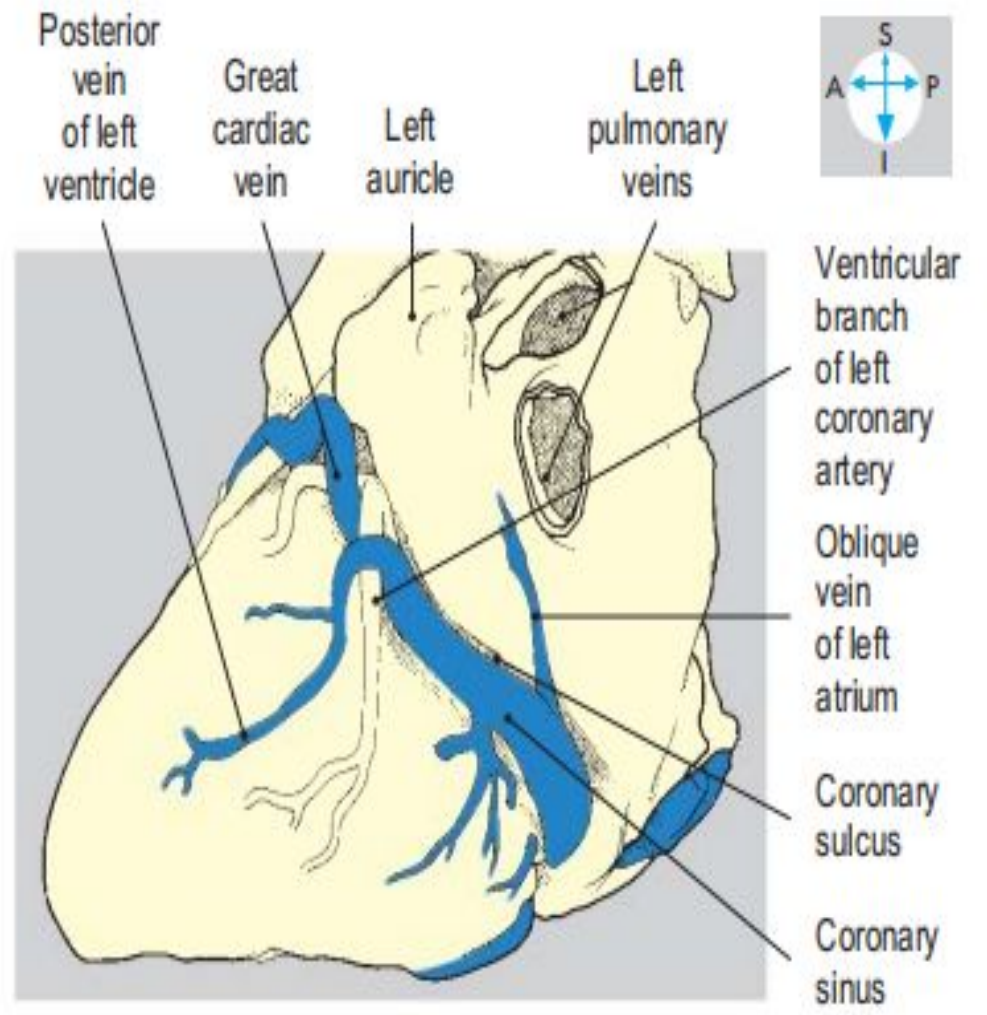
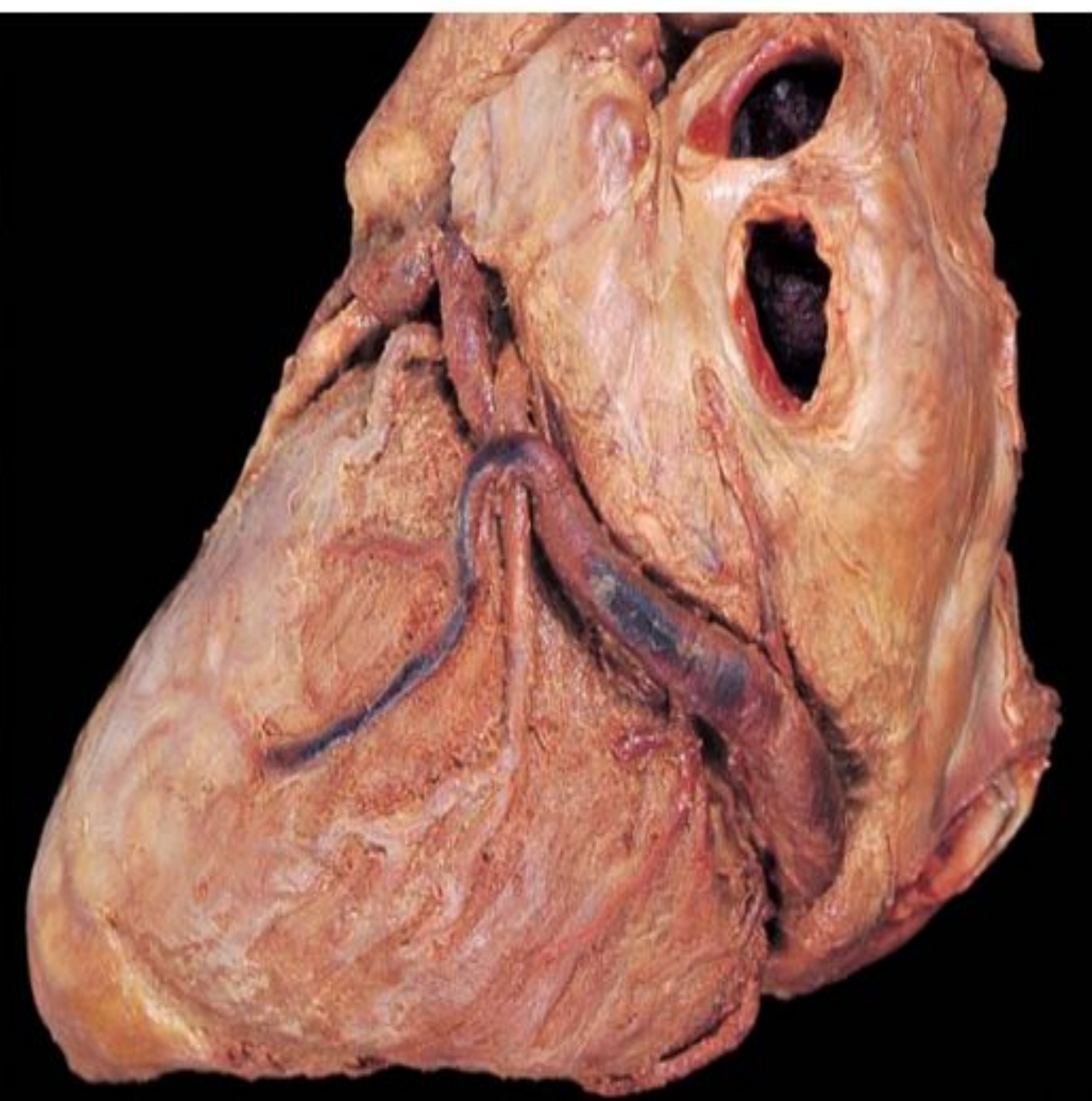


Fig. 2.51 Oblique view of the coronary sinus lying in the coronary sulcus.

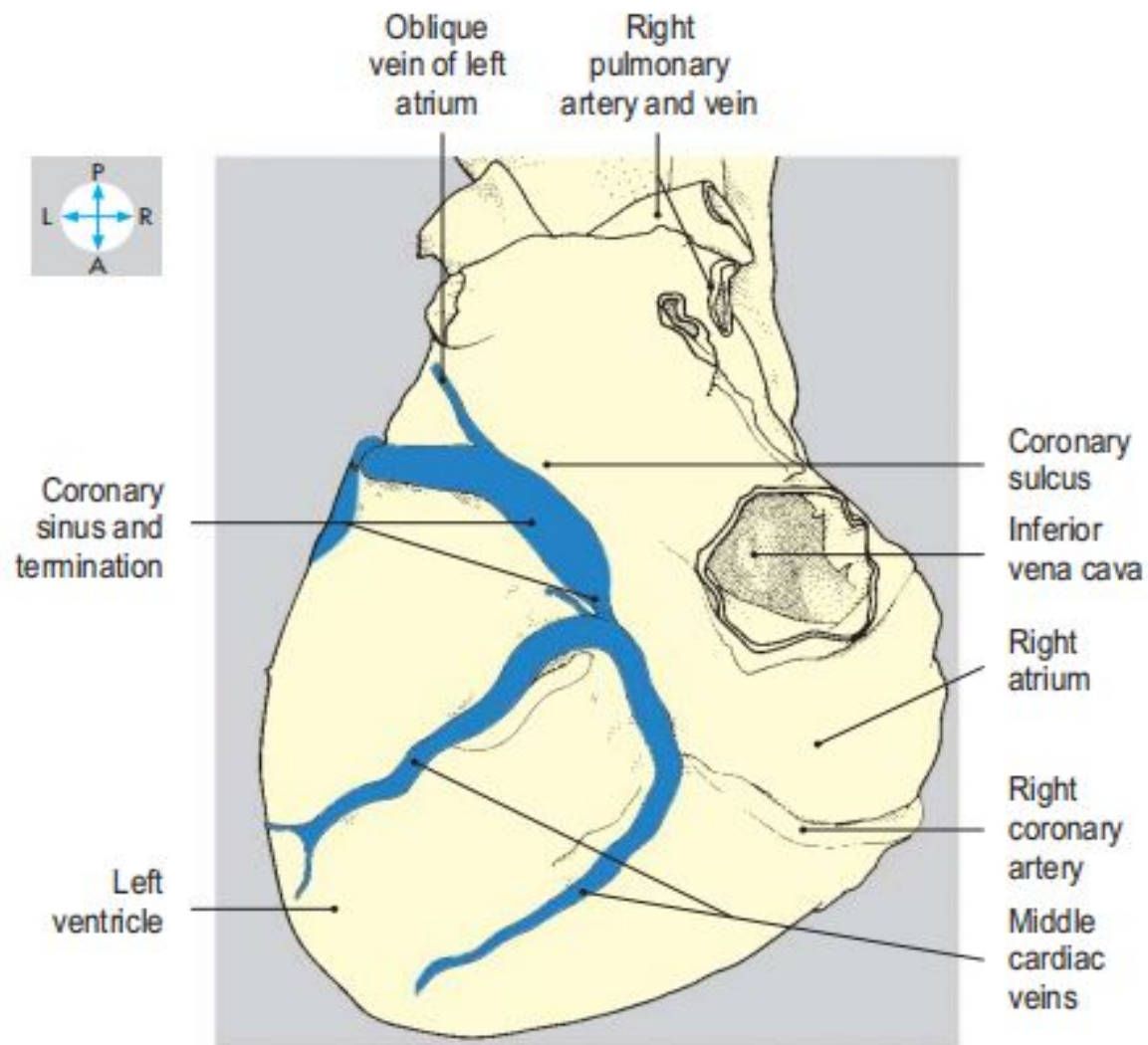
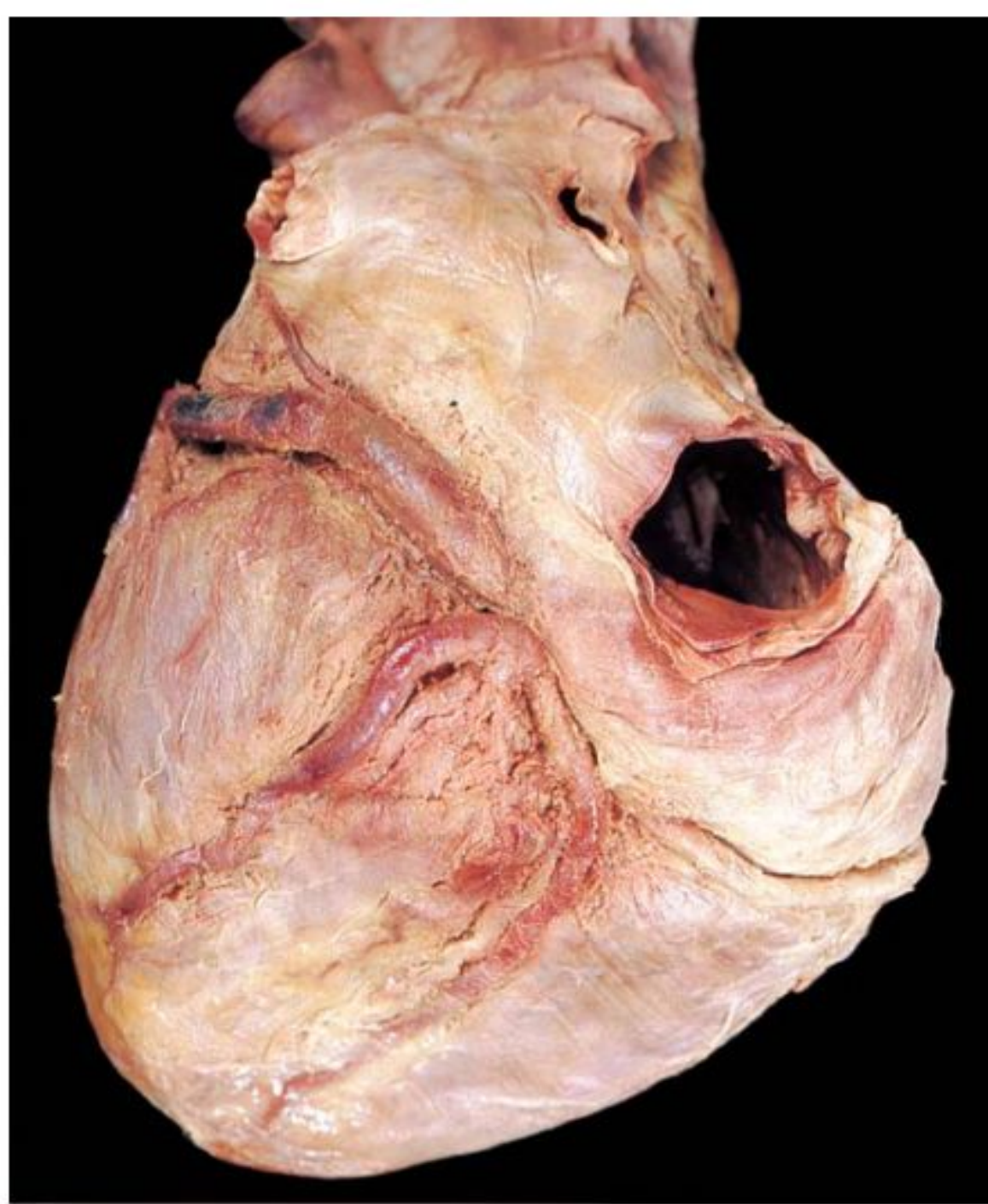
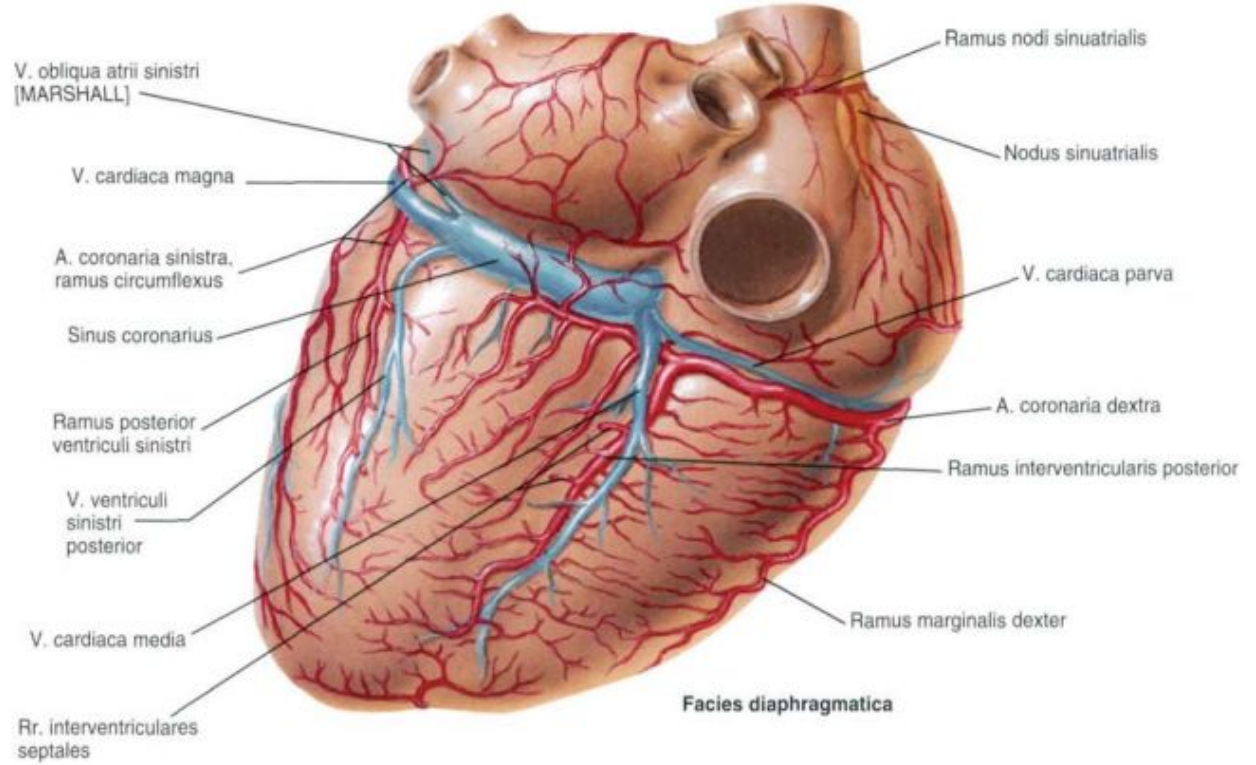
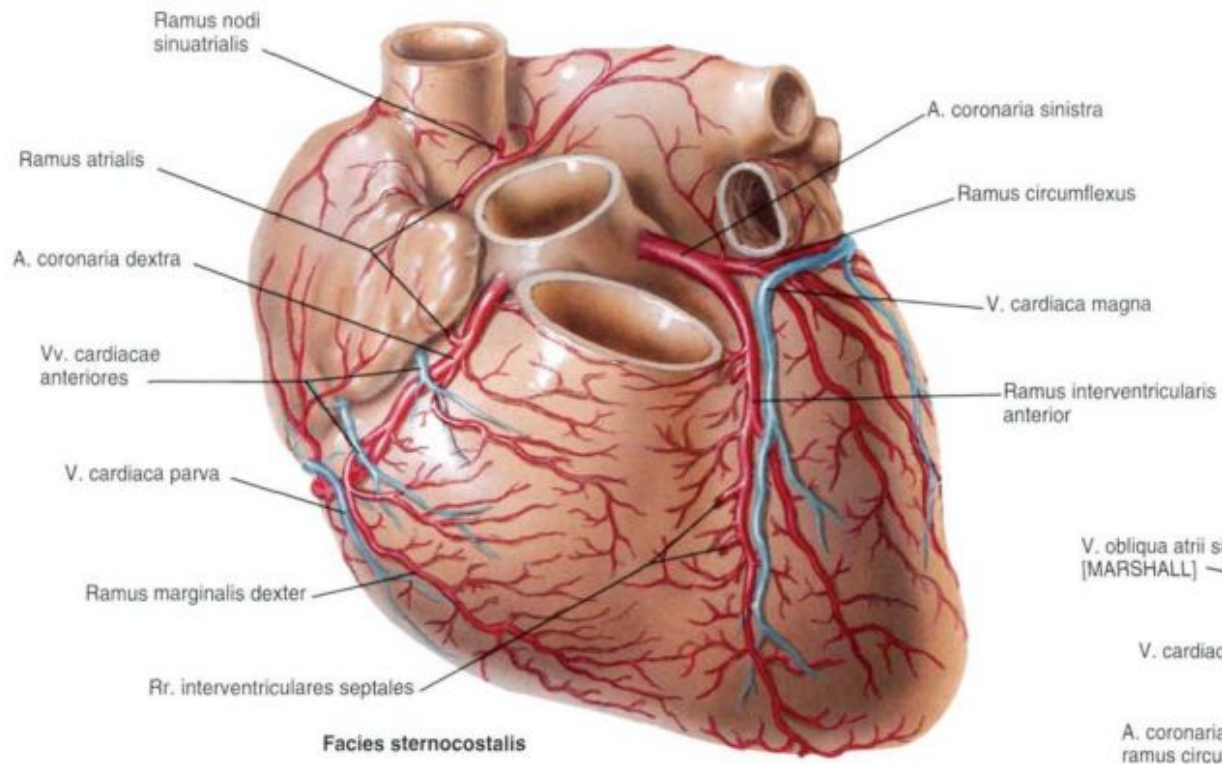
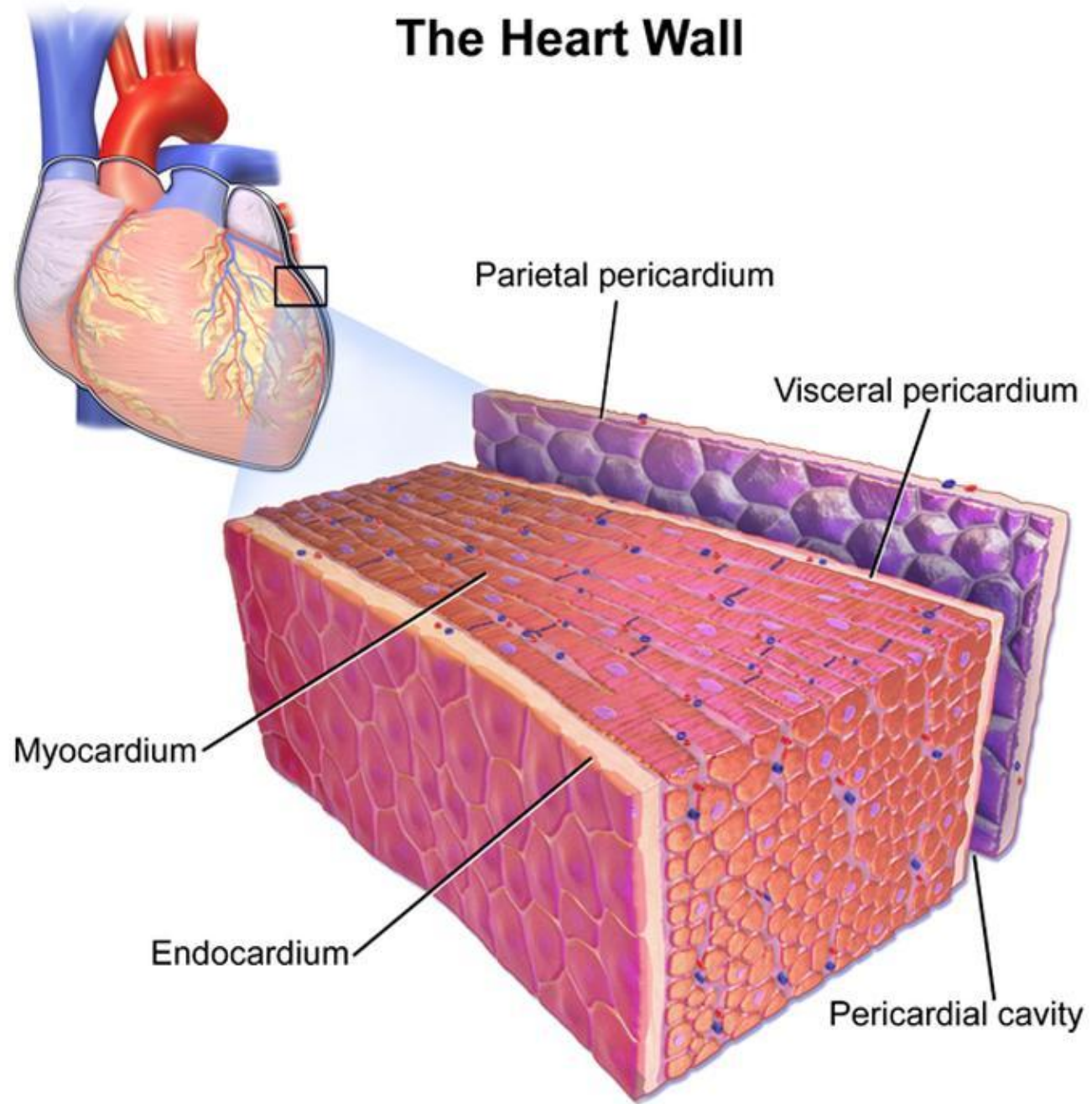


Fig. 2.52 Posteroinferior view of the termination of the coronary sinus in the right atrium.



The Heart Wall



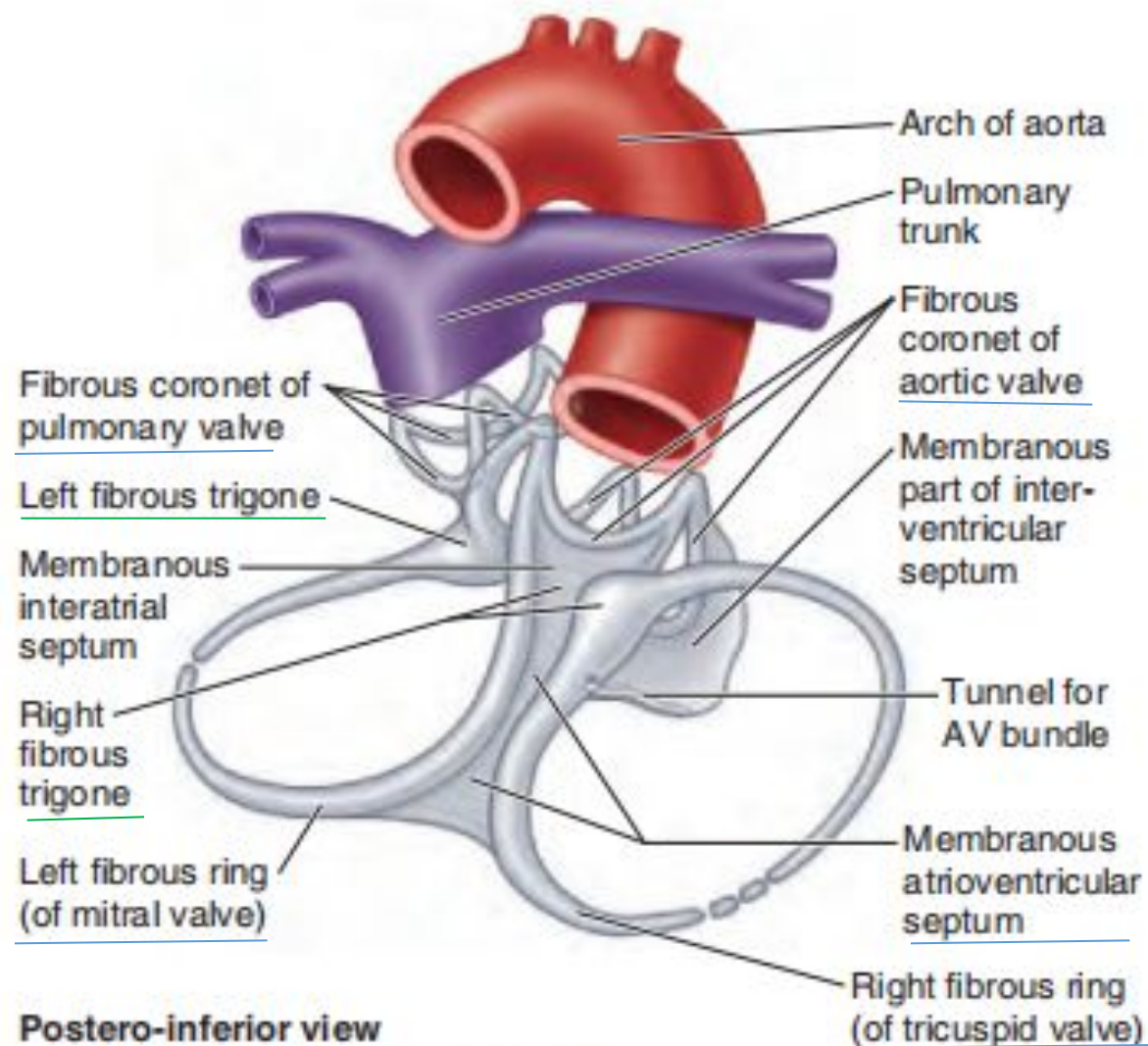
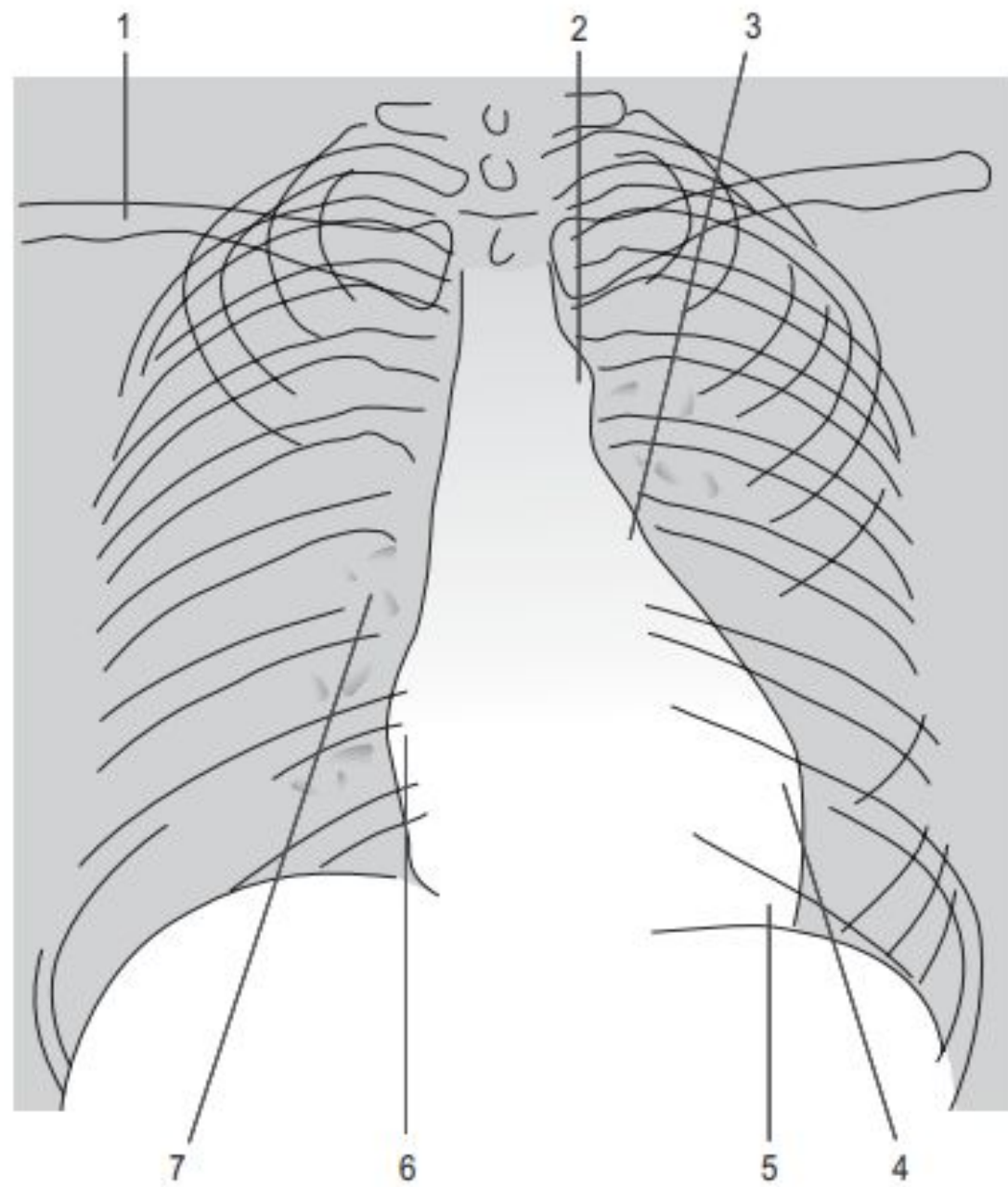
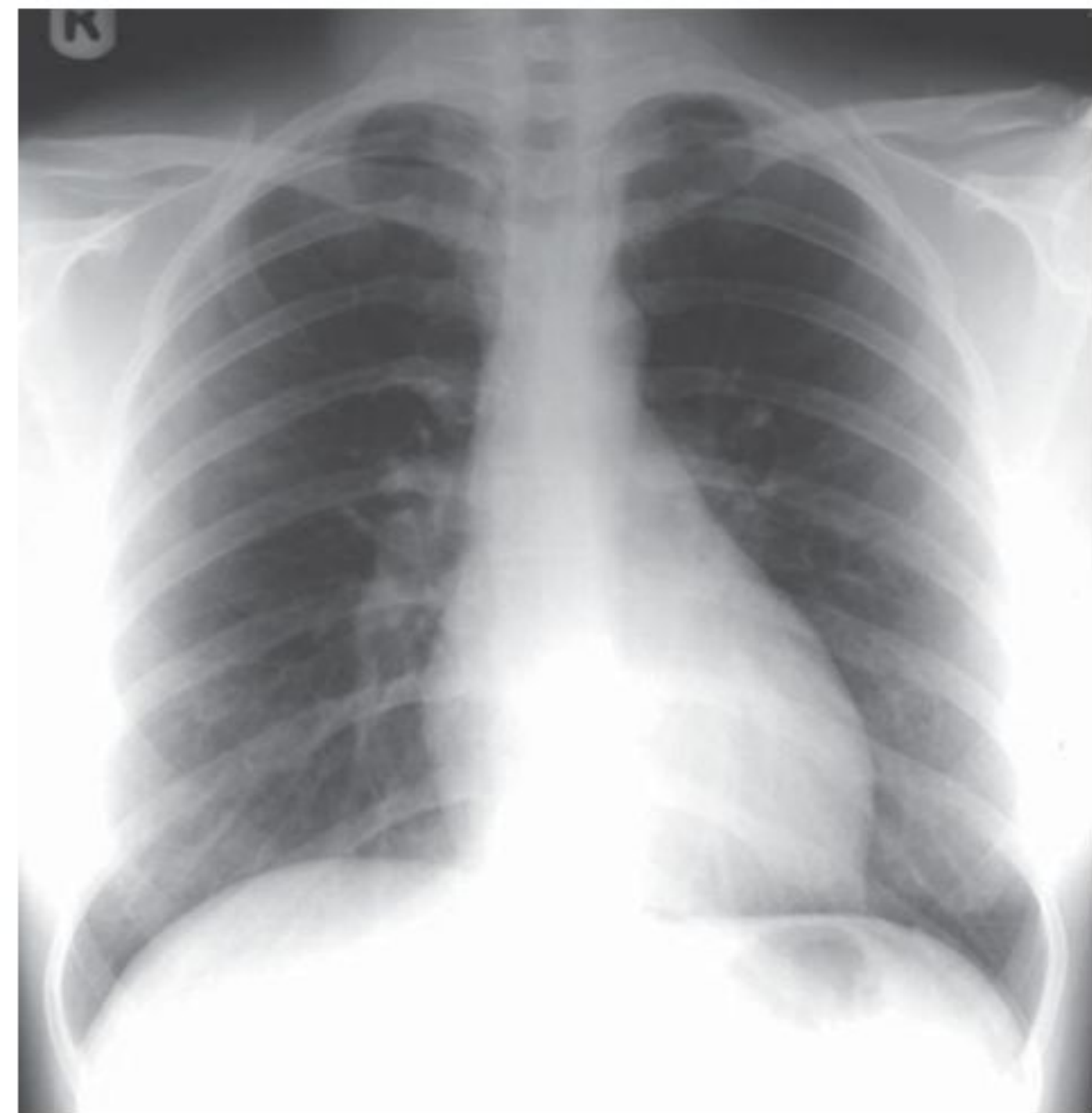
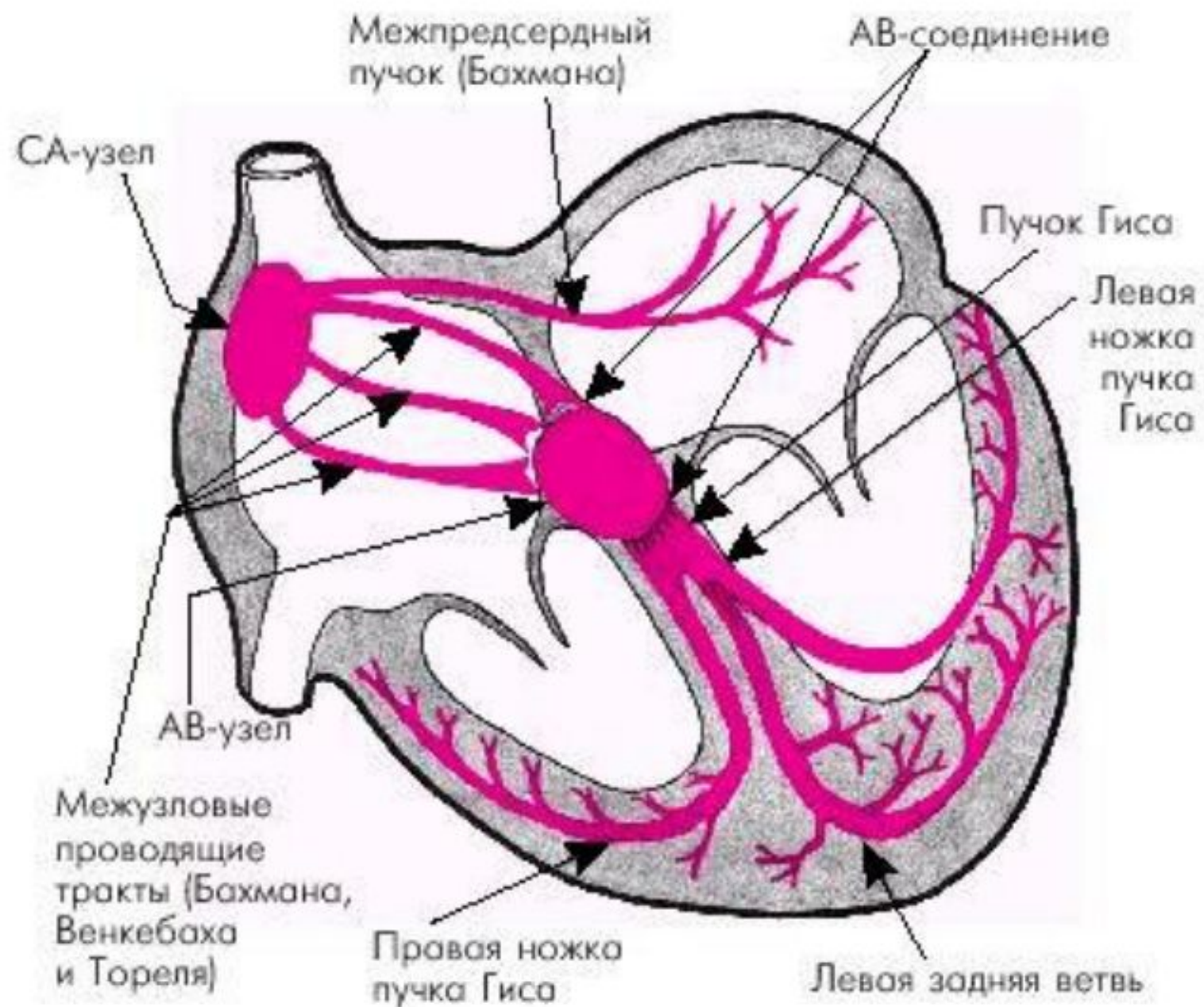
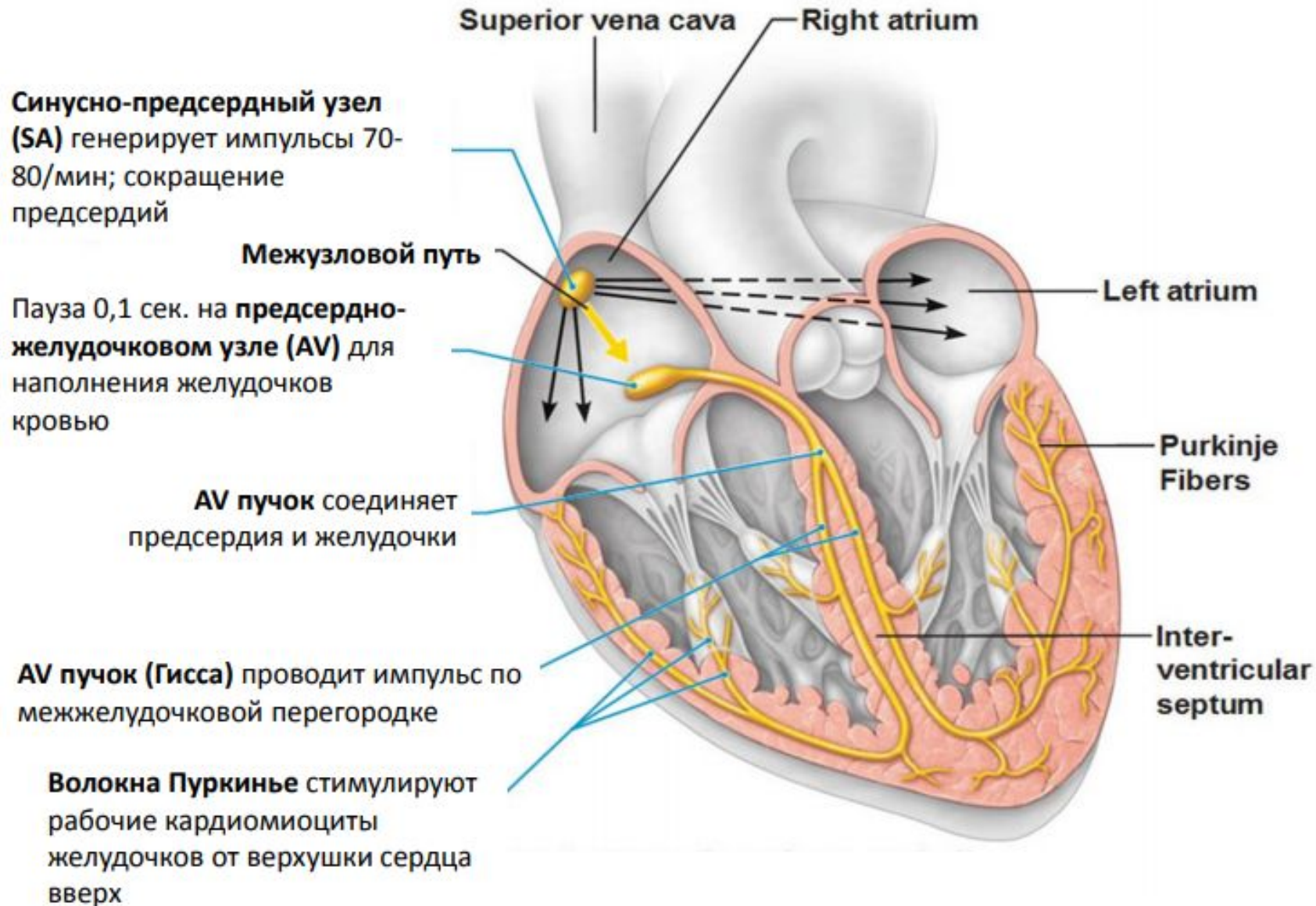


FIGURE 1.51. Fibrous skeleton of heart. The isolated fibrous skeleton is composed of four fibrous rings (or two rings and two "coronets"), each encircling a valve; two trigones; and the membranous portions of the interatrial, interventricular, and atrioventricular septa.







Кровообращение у плода. Гематоплацентральный барьер

