Thematic plan of seminar-type classes in the discipline "Clinical anatomy. Clinical anatomy of the head and neck" for students in the basic educational program of the specialty in specialty 31.05.03 Dentistry, focus (profile) Dentistry, full-time form of study for the 2024-2025 academic year.

N₂	Topics	Hours
	3 semester	20
1.	Introduction ¹ Determining the content of the subject of clinical anatomy. Goals	2
	and objectives. Research methods. Historical outline of the development of the	
	discipline. Relationship between clinical anatomy and surgery. Clinical and	
	anatomical rationale for the stages of surgical interventions: approaches, surgical	
	techniques, completion of operations. Rationale for the use of general and special	
	surgical instruments. Groups of general surgical instruments ² .	
2.	Surgical sutures ¹ . Types of knots and sutures in surgery. Clinical and anatomical	2
	rationale for types of hemostasis in surgery. Mastering knot tying and suturing ²	
3.	Clinical anatomy of the thorasic cage ¹ . Features of the structure of the skeleton.	2
	Standard lines used in medicine. Clinical anatomy of the intercostal space and	
	diaphragm. Clinical and anatomical rationale for resuscitation measures for cardiac	
	arrest, cardiac injuries and pneumothorax: closed cardiac massage, PST of	
	penetrating wounds of the chest, puncture and drainage of the pleural cavity ²	
4.	Clinical anatomy of the thoracic cavity ¹ . Topography of the pleura, lungs.	2
	Mediastinum, classification. Clinical anatomy of the heart and pericardium, trachea	
	and thoracic esophagus (skeletotopy, holotopy, syntopy, blood supply and	
	innervation). Clinical and anatomical rationale for puncture of the pericardium and	
	cardiac suture ² .	
5.	Clinical anatomy of the anterolateral abdominal wall ¹ . Division into regions.	2
	Topography of the sheaths of the rectus abdominis muscles. Anatomy of the white	
	line and umbilical ring. Surgical methods for repairing umbilical hernias and	
	hernias of white line: by Mayo, Lexer, Sapezhko.	
6.	Clinical anatomy of inguinal canal ¹ Rings and walls of the inguinal canal. The	
	process of the testicle descending into the scrotum. Features of congenital inguinal	
	hernia. The concept of sliding hernias, features of their plastic surgery. Clinical and	
	anatomical rationale for hernia repair operations according to Girard-	
_	Spasokukotsky, Kimbprovsky, Bassini ²	
7.	Clinical anatomy of the abdominal cavity ¹ . Physiology of the peritoneum and its	2
	anatomical formations: floors, bags, canals, sinuses, recesses. Their clinical	
	significance. Laparotomy, types. Sequence of abdominal cavity revision. The	
	concept of puncture of the pouch of Douglas in gynecology ² .	•
•	Clinical anatomy of the stomach and duodenum. Skeletotopy, syntopy,	2
	holotopy. Relation to the peritoneum. Blood supply, innervation, lymphatic	
	drainage. Clinical and anatomical rationale for suturing a perforated gastric ulcer,	
0	Billioth resections 1,2, gastrostomy, vagotomy ² .	2
9.	Clinical anatomy of the organs of the supracolic compriment. Clinical anatomy	Z
	of liver, one ducis, pancreas, spieen (nototopy, skeletotopy, syntopy, blood supply,	
	vienouse and lymphatic drenage, innervation. Clinical and anatomical rationale for	
	surgical treatment of cholecystills, pancreatills, pancreatic cancer, liver and spieen	
10	Injuries.	
10.	children anatomy of the organs of the intracone comprement. Clinical anatomy	
	of large and small intestine (nototopy, skeletotopy, syntopy, blood supply, vienouse and lymphotic dranage innervation). Clinical and enotomical rationals for illust	
	and tymphatic dienage, innervation). Clinical and anatomical rationale for fieus,	
	acute appendictes. Finiciples of intestinal suture, intestinal resection, appendictomy colostomy ²	
	appendictionity, constoniny.	37
11	Clinical and anatomical base for the use of skin grafting in maxillatogial	2
11.	surgery ¹ Classification of methods Main methods: Reverden Thiersch Dregsted	<i>L</i>
	Wilson Vanovich-Chainsky Dzhanelidze Limberg Filatov Italian method	
	winson, ranovich-Unainsky, Dznanendze, Limberg, Filatov, Italian method.	

12.	 Formation of a stalked flap according to Filatov. Clinical and anatomical rationale for flap operations for periodontal disease, uranoplasty, frenuloplasty². Clinical anatomy of the cerebral part of the head¹. Areas: fronto-parieto-occipital, temporal (borders, layers, blood supply, innervation, lymph outflow). Rationale for scalped head wounds. Features of the structure of the bones of the cranial vault in newborns. Clinical and anatomical basis for flat bone fractures in children and adults. Open and closed, penetrating and non-penetrating wounds of the scalp. Features of PST of them. Rationale for the use of trepanation, types of trepanation. Identification of anatomical structures on preparations, models, drawings and diagrams². 	2
13.	Clinical anatomy of the cerebral part of the head¹. Clinical anatomy of the meninges, intermeningeal spaces. Ventricles of the brain. Liqueur circulation system. The concept of hydrocephalus and ventriculostomy. Venous sinuses, features of their structure. Circle by Willis. Clinical and anatomical rationale for the use of the Kronlein cranial topographical scheme. Ways of spread of intracranial infection. Identification of anatomical structures on preparations, models, drawings and diagrams ² .	2
14.	Clinical anatomy of the ear ¹ . The structure of the outer, middle and inner ear. Mastoid region. Blood supply, innervation, possible routes of metastasis. Clinical and anatomical basis for otitis, mastoiditis. Rationale for trepanation of the mastoid process, possible complications. Clinical and anatomical rationale for otoscopy. Clinical and anatomical substantiation of the cellular spaces of the head, ways of spreading phlegmon. Rationale for surgical incisions for drainage. Identification of anatomical structures on preparations, models, drawings and diagrams ² .	2
15.	Clinical anatomy of the internal and external base of the skull¹. Anterior, middle and posterior cranial fossa. Their holes, contents. Typical fracture lines. Clinical and anatomical substantiation of clinical symptoms in fractures of the base of the skull. Clinical anatomy of the external base of the skull. Holes and their contents. Identification of anatomical structures on preparations, models, drawings and diagrams ² .	2
16.	Clinical anatomy of the facial part of the head ¹ Division into areas. External landmarks. Features of arterial, venous blood supply and lymph drainage. Connection of the superficial veins with the sinuses of the dura mater. Topography and function of the trigeminal and facial nerves. Innervation zones. Location of branches. Clinical and anatomical rationale for topical diagnosis of damage to the branches of the facial nerve. Features of PCT of facial wounds. Rationale for surgical incisions on the face. Plate seam. Clinical and anatomical substantiation of the general principles of anesthesia in dentistry. Identification of anatomical structures on preparations, models, drawings and diagrams ² .	2
17.	Clinical anatomy of the facial part of the head ¹ . Clinical anatomy of the facial part of the head. Division into areas. External landmarks. Features of arterial, venous blood supply and lymph drainage. Connection of the superficial veins with the sinuses of the dura mater. Topography and function of the trigeminal and facial nerves. Innervation zones. Location of branches. Clinical and anatomical rationale for topical diagnosis of damage to the branches of the facial nerve. Features of PCT of facial wounds. Rationale for surgical incisions on the face. Plate seam. Clinical and anatomical substantiation of the general principles of anesthesia in dentistry. Identification of anatomical structures on preparations, models, drawings and diagrams ² .	2
18.	Clinical anatomy of cellular spaces of the face¹. Clinical anatomy of the buccal, parotid-masticatory and deep areas of the face. Blood supply, innervation Clinical anatomy of the parotid salivary gland. Rationale for salivary stone disease and its surgical treatment. Clinical and anatomical rationale for mumps and the principles of its surgical treatment. Localization of facial cellular spaces. Justification of the ways of spread of pus in case of phlegmon and adenophlegmon, surgical methods of their drainage. Mimic muscles of the face, their functions. Infratemporal and pterygopalatine fossa, boundaries, contents. Chewing muscles, function.	2

	Identification of anatomical structures on preparations, models, drawings and diagrams ² .	
19.	Clinical anatomy of the upper jaw. ¹ Features of fractures of the zygomatic bone and zygomatic arch, clinical and anatomical rationale for surgical treatment methods. Rationale for eliminating salivary fistulas. Clinical anatomy of the upper jaw. Fractures of the upper jaw, methods of diagnostic and treatment. Classification by Le Fort. Orthopedic mouthguards. Clinical and anatomical substantiation of radicular cysts of the jaws, methods of their treatment. Identification of anatomical structures on preparations, models, drawings and diagrams. Technique of the resection of the upper jaw. ² .	2
20.	Clinical anatomy of the lower jaw. ¹ Clinical anatomy of the lower jaw, temperamendibular joint Diagnestic of dislocations of the lower jaw methods of its	
	reduction Clinical and anatomical basis for temporomandibular joint dysfunction syndrome. Fractures of the upper jaw, methods of diagnostic and treatment. Technique of the resection of the lower jaw.	
21.	Clinical anatomy of the nose¹. Clinical anatomy of the nasal cavity (blood supply,	2
	the nasal cavity to identify nosebleeds, foreign bodies, and inflammation. Paranasal	
	sinuses: maxillary (maxillary), main, frontal, ethmoid labyrinth. Walls, structure,	
	outlet channels. Infectious and inflammatory diseases of the paranasal sinuses, ways	
	sinus according to Killian. Identification of anatomical structures on preparations,	
	models, drawings and diagrams ² .	
22.	Clinical anatomy of the orbit . Eyelids and their own area (borders, walls, contents blood supply, orbital nerves, topical diagnosis of their damage, lymphatic	2
	drainage, communications with neighboring areas). The structure of the eyeball.	
	Lacrimal organs. Clinical and anatomical basis for ocular symptoms in orbital	
	injuries. Clinical and anatomical rationale for the occurrence of abscesses, ways of spreading phlegmon, connection with infectious and inflammatory diseases of the	
	oral cavity. Rationale for rational incisions for opening abscesses and phlegmons.	
	Features of fractures of the zygomatic bone and zygomatic arch, clinical and	
	anatomical rationale for surgical treatment methods. Rationale for eliminating	
23.	Clinical anatomy of the oral cavity¹. Vestibule of the oral cavity. Anatomy of the	2
	lips. Blood supply, innervation, lymphatic drainage. The oral cavity itself. Anatomy	
	of the salivary glands. Clinical and anatomical rationale for stalitons. Clinical anatomy of the hard and soft palate floor of the mouth Topographic anatomy of the	
	tongue: sections, papillae, muscles, blood supply, innervation, lymphatic drainage.	
	Operations for short frenulum of the tongue. Characteristics of the tooth crown.	
	Differences in the number, position and shape of teeth. Milk and permanent teeth. Timing of teething dental formula tooth structure (enamel dentin cement pulp	
	supporting apparatus of the teeth), blood supply, innervation, lymphatic drainage.	
	Maxillo-lingual groove. Anatomy of the lingual artery, lingual and hypoglossal	
24	nerves. Cellular spaces. Anatomy of the hypoglossal nerve ² .	2
24.	principles of uranoplasty. Clinical and anatomical rationale for resections of the	2
	upper and lower jaw. Rationale for fractures of the lower jaw and methods of	
	immobilization of fragments. Clinical and anatomical rationale for torusal, mandibular anesthesia anesthesia in the area of the lingual nerve greater palatine	
	nerve. Rationale for anesthesia according to Bershe-Dubov and pterygopalatine	
	anesthesia according to Weisblat. Identification of anatomical structures on	
25	preparations, models, drawings and diagrams ^{2} .	2
23.	scapuloclavicular, scapular-tracheal. Fascia of the neck according to Shevkunenko.	<i>L</i>
	Cellular spaces: scapular-trapezoid, Pirogov's triangle. Their layer-by-layer	
	structure, contents, clinical significance. Region of the sternocleidomastoid muscle.	
	Ligation of the inigual artery in ringov's triangle. Congenital incutation and fateral	

	neck cysts. Cyst of the submandibular salivary gland, treatment. Clinical and anatomical rationale for drainage of the gastrointestinal tract. Clinical and anatomical substantiation of the ways of spread of pus through the tissue in case of phlegmon and adenophlegmon, possible complications. Lymphatic system of the neck. Clinical anatomy of superficial and deep lymph nodes. Pathways of possible metastasis ² .	
26.	Clinical anatomy of the neck ¹ Clinical anatomy of the medial neurovascular	2
	bundle of the neck (carotid artery, internal jugular vein, vagus nerve). Clinical and	
	anatomical rationale for ligation of the common carotid and external carotid arteries,	
	distinctive features of the external and internal carotid afteries, development of	
	vagosympathetic blockade Puncture and catheterization of the subclavian vein	
	Identification of anatomical structures on preparations, models, drawings and	
	diagrams ² .	
27.	Clinical anatomy anatomy of the neck organs ¹ . Clinical anatomy anatomy of the	2
	neck organs:.larynx, trachea (holotopy, skeletopy, syntopy, blood supply,	
	innervation, possible routes of metastasis). Clinical and anatomical rationale for	
	tracheotomy: upper, middle, lower, tracheostomy, possible complications. Crico-	
	conicotomy, identification of anatomical structures on preparations, models, drawings and diagrams. Clinical anatomy, anatomy of the organs of the neck.	
	pharyny of the esophagus holotopy skeletopy syntopy blood supply inpervation	
	possible routes of metastasis). Waldever-Pirogov lymphoid ring. Surgeries on the	
	cervical esophagus for the localization of foreign bodies. Identification of	
	anatomical structures on preparations, models, drawings and diagrams ² .	
28.	Clinical anatomy anatomy of the neck organs ¹ Clinical anatomy of the neck	2
	organs: thyroid and parathyroid glands. Clinical and anatomical rationale for	
	strumectomy, hemistrumectomy, subtotal subfascial resection of the thyroid gland,	
	enucleation. Identification of anatomical structures on preparations, models,	
20	arawings and diagrams ⁻ .	1
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¹- topic ² - essential content

Discussed and approved at the meeting of the department of operative surgery and topographic anatomy, record No. 10 of 03.06.2024

Head of the department:

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A.A. Vorobyov