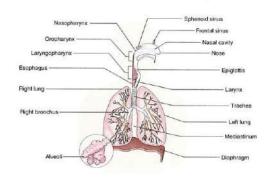
Functions:

1.

2.

3.

STRUCTURES



The respiratory system is categorized into 2 regions: the _____ and ____tracts.

A. Upper Tract

- a. Nose
 - i. Nasal cavity-
 - ii. Septum-
- iii. Mucous membrane- layer of thin tissue that lines the nose and entire respiratory system
 - iv. Mucus-
 - v. Cilia-

- vi. Olfactory receptors-
- b. Tonsils-
- c. Sinuses- An air-filled cavity within a bone that is lined with mucous. They affect:
 - i. Paranas

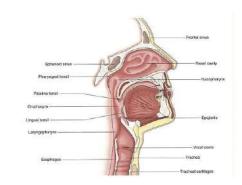


Table 7.1

PARAMASAL SINUSES

Maxillary sinuses (MACK-sih-ler-ee), located in the maxillary sinuses, are the largest of the paramasal sinuses are located in the frontal bone just above the eyebrows.

The ethmoid sinuses (ETE-moid), located in the ethmoid bones, are irregularly shaped air cells that are seponted from the orbital (eye) cavity only by a thin layer of bone.

al sinuses

1.

2.

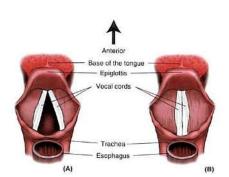
- d. Pharynx= THROAT. Divided into three divisions known as:
 - i. Nasopharynx:

3.

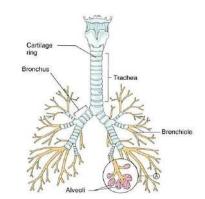
- ii. Oropharynx:
- iii. Laryngopharynx:
- e. Protective Swallowing Mechanisms:
 - i. Epiglottis- A flap that closes off the larynx when swallowing to prevent _____.
 - ii. Soft Palate closes off the

_____ to prevent food from going up into the nose.

f. Larynx= voice box; "LA LA LA!"

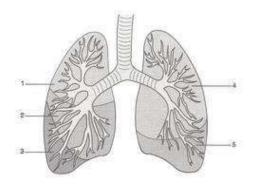


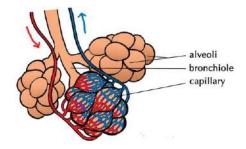
- i. It is held open by a series of _ (the most prominent protrusion is known as the Adam's apple)
- ii. Contains _____, which vibrate against one another to produce speech as air is from the lungs.
- g. Trachea= WINDPIPE; Extends from ______ to
 - i. Where air passes from the URI to the LRI (lungs).
 - ii. Passes directly in front of the ___
 - iii. Held open by rings of cartilage also.



B. Lower Tract

- a. Bronchial Trees the lower, two divisions of the ______.
 - i. Insert into the:
 - ii. Bronchioles-
- b. Alveoli:
- c. Lungs: Consists of 2 divided lobes (R/L). Label sections:





C. Additional Structures

- a. Mediastinum/Interpleural space-
- b. Pleura- A _____ that surrounds each lung with

blood vessels. 3 layers:

- i. Parietal pleura-
- ii. visceral pleura-
- iii. pleural space/pleural cavity-
- c. Diaphragm- A MUSCLE that makes _____ possible!
 - *The **phrenic nerve** controls diaphragm contraction
 - Contract 7

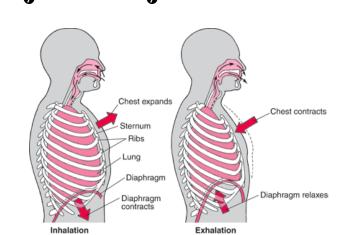
Relax 7

RESPIRATION Respiration:

External respiration-

VS.

Internal respiration-



Other Key Terms to Respiration	n:	
Breathing:Inhalation:		
Exhalation:		
PATHOLOGY		
TAMOLOGI		
General Pathology		
COPD (Cardiopulmonary disease)		Chronic. Bronchitis + emphysema= extreme difficulty breathing
Asthma		
Astima		
Bronchiectasis		
Emphysema		
Smokers' respiratory syndrome (SRS)		
Pathology of the URT		
Allergic rhinitis	AK	A-
Acute Respiratory Syndrome of		
Children and Infants		
croup		
diphtheria		
Epistaxis		
Pertussis ("whooping cough")		
rhinorrhea		
Sinusitis		amed sinuses; sinus infection
Upper Respiratory Infection (UR) AK	A-
Pathology of the Pharynx/Laryr	v	
Pharyngitis	^	
pharyngorrhagia		
pharyngorrhea		
laryngoplegia		
laryngospasm		
Pathology of the Pharynx/Laryr	Х	
aphonia		

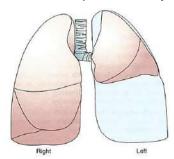
Pathology of the Trachea & Bronchi

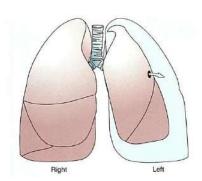
dysphonia laryngitis

tracheitis	
tracheorrhagia	
Bronchitis	
bronchorrhagia	
bronchorrhea	

Diseases of the Pleural Cavity

- Pleurisy-
- Pleuralgia- pain in the pleura or side
- pneumothorax-
- pleural effusion- escape of fluid into the pleural cavity that prevents the





lung from fully expanding.

- empyema/pyothorax-
- hemothorax- blood in the pleural cavity
- hemoptysis-

Diseases of the Lungs

- pulmonary edema-
- Acute Respiratory Distress Syndrome (ARDS)- lung failure resulting from pulmonary edema
- atelectasis (collapsed lung)-
- pneumorrhagia-
- tuberculosis
 - o Multidrug resistant TB (MDR-TB)-
- Pneumonia-

Main causes of pneumonias are bacteria, viruses, fungi, or inhaled substances like chemicals or vomit.

MANY different kinds:

bacterial pneumonia viral pneumonia lobar pneumonia bronchopneumonia double pneumonia aspiration pneumonia mycoplasma pneumonia Pneumocystis carinii pneumonia

Environmental or Occupational Lung Diseases

Disease	AKA	Caused by:
pneumoconiosis	N/A	
anthracosis		
asbestosis		
byssinosis		

silicosis

- Pulmonary fibrosis- formation of scar tissue that replaces the alveolar walls and makes them stiff.
- Idiopathic Pulmonary Fibrosis (IPF)
- Cystic fibrosis-

Breathing Disorders:

Eupnoea	
tachypnea	
bradypnea	
apnea	
Cheyne-stokes	
Dyspnea	
Hyperpnoea	
Hypopnea	
hyperventilation	

Lack of Oxygen Disorders:

- Airway obstruction -
- Anoxia -
- Asphyxia -
- asphyxiation-
- cyanosis- BLUE skin
- hypoxia-
- respiratory failure- occurs when O2 in the blood become dangerously low!

Sudden Infant Death Syndrome (SIDS)

•

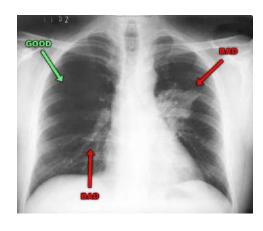
DIAGNOSTIC PROCEDURES

- respiratory rate (RR)-What is normal rate?=
- pulmonary function tests (PFT's)- lung capacity tests that measure the ability of the lungs to move air in and out. Pretty neat!
- spirometry- using a spirometer to record the volume of air inhaled or exhaled in PFT's
- phlegm- thick mucus secreted by respiratory passages. it is called **sputum** when it is ejected.
- bronchoscopy
- layngoscopy
- TB test (tuberculin skin test)
- Chest x-rays- can show pneumonia, lung tumors, pneumothorax, pleural effusion, tuberculosis, and emphysema

a. pleural effusion

b. pneumonia





TREATMENTS

Medications:

- bronchodilator- used in asthma attacks to:
- Bronchoconstrictor- what do you think?

Nose and Throat:

- septoplasty- surgical reconstruction of the septum
- sinusotomy- incision into the sinus, to treat chronic sinusitis.
- Functional endoscopic sinus surgery (FSS):
- pharyngoplasty
- pharyngostomy
- pharyngotomy
- laryngectomy
- laryngoplasty
- endotracheal intubation (intubating)- passage of a tube through the nose or mouth into the trachea to establish an airway.

Trachea and Bronchi:

- tracheoplasty
- tracheorrhaphy
- tracheotomy
- tracheostomy- placing a tube into the trachea below a blockage to create an airway. It may be temporary or permanent. Resulting in an opening called a **stoma.**

Lungs, Pleura and Thorax:

- pneumonectomy
- lobectomy
- pleurectomy
- thoracentesis- puncture of chest wall with needle to obtain fluid from pleural cavity for diagnostic purposes, to drain pleural effusions, or to re-expand a collapsed lung.
- Thoracotomy -
- Thoracostomy -

Respiratory Therapy:

supplemental oxygen- i.e. nasal canula, or nonrebreather



- Postural drainage: ventilator
- respirator- for prolonged artificial respiration

