

Chapter 20: Cardiovascular System: The Heart

I. Functions of the Heart

A. List and describe the four functions of the heart:

1. _____

2. _____

3. _____

4. _____

II. Size, Shape, and Location of the Heart

A. Size and Shape

1. The adult heart is shaped like a _____
2. The adult heart is approximately the size of _____
3. What is the apex? _____
4. What is the base? _____

B. Location

1. The heart is located in the _____ cavity between _____
2. The midline partition containing the heart is called the _____
3. The heart lies _____ in the _____
 - a. The base is directed _____
 - b. The apex is directed _____
4. The apex is directed to the _____ and approximately _____ of the heart lies to the _____
5. The base lies deep to _____ and extends to _____

6. The apex is approximately _____ of the sternum and is _____

III. Anatomy of the Heart

A. Pericardium or Pericardial Sac

1. Structurally is described as a _____
2. What is the fibrous pericardium? _____
3. What is the serous pericardium? _____
4. Functionally the fibrous pericardium prevents _____ & _____ within the _____
5. Where is the parietal pericardium? _____
6. Where is the visceral pericardium? _____
 - a. The visceral pericardium is also called _____
7. The space between the two layers of serous pericardium is called _____
 - a. The space is filled with a _____
 - b. Functionally this fluid _____

B. Heart Wall

1. The epicardium is a _____
 - a. This layer of the heart wall is also called _____
2. The myocardium is the _____ of the heart
 - a. It is composed of _____
 - b. The myocardium is responsible for _____
3. The endocardium is _____ of the heart chambers
 - a. It is composed of _____
 - b. Functionally the smooth surface _____
 - c. The heart valves are formed _____
 1. Therefore a valve has a double layer of _____ with _____ between
4. What are the muscoli pectinati? _____
5. What are the trabeculae carnae? _____

C. External Anatomy and Coronary Circulation

1. Chambers

- a. How many chambers does the heart have? _____
 1. There are _____ and _____
- b. Describe the atria and their location _____

- c. Describe the ventricles and their location _____

- d. What are the auricles? _____

2. Blood Vessels

- a. What veins empty blood into the right atrium?
 1. _____
 2. _____
 3. _____
- b. What veins empty blood into the left atrium? _____
- c. What artery carries blood from the left ventricle to the body? _____
- d. What artery carries blood from the right ventricle to the lungs?

3. External Landmarks

- a. What is a sulcus? _____
- b. Where is the coronary sulcus? _____

- c. Extending inferiorly from the coronary sulcus:
 1. On the anterior surface of the heart is _____
 2. On the posterior surface of the heart is _____
 - a. These indicate the division between _____
- d. These sulci are normally covered by _____

4. Coronary Circulation

- a. The two major arteries supplying the heart are called:
 1. _____
 2. _____

- b. These arteries branch off _____ just _____
- c. Branches of the Left Coronary Artery:
1. Anterior interventricular artery or also called _____
 - a. It is located _____
 - b. It supplies blood to _____
 2. Left marginal artery
 - a. Supplies blood to _____
 3. Circumflex artery
 - a. Extends _____
 - b. It supplies blood to _____
- d. Right Coronary Artery and its Branches:
1. Right coronary artery
 - a. Lies within _____ and extends from _____ around to _____
 2. Right marginal artery
 - a. Supplies blood to _____
 3. Posterior interventricular artery
 - a. It is located _____
 - b. It supplies blood to _____
- e. Most of the myocardium receives blood from _____
- f. What is an anastomoses? _____
- g. What effect does aerobic exercise have on coronary blood vessels?

- h. Most of the left side of the heart is drained by _____
- i. Most of the right side of the heart is drained by _____
- j. These two veins join together forming the _____

D. Heart Chambers and Valves

1. Right and Left Atria
 - a. The right atrium receives blood through three major openings from the:
 1. _____
 2. _____

3. _____
 - b. The left atrium receives blood through four openings from the:
 1. _____
 - c. What is the interatrial septum? _____
 - d. What is the fossa ovalis? _____
 - e. What is the foramen ovale? _____
2. Right and Left Ventricles
- a. The atria are connected to the ventricles through _____
 - b. The right ventricle opens into the _____
 - c. The left ventricle opens into the _____
 - d. What is the interventricular septum? _____
3. Atrioventricular Valves
- a. One is located in each _____
 - b. The valve is composed of _____ or _____
 - c. The atrioventricular valves:
 1. Allow blood _____
 2. Prevent blood _____
 - d. Where is the tricuspid valve? _____
 1. Why is it called tricuspid? _____
 - e. Where is the bicuspid valve? _____
 1. Why is it called bicuspid? _____
 2. The bicuspid is also called the _____ valve
 - f. Describe papillary muscles _____
 1. Where are the papillary muscles located? _____
 - g. Papillary muscles are connected to cusps by _____
 - h. Functionally papillary muscles _____
 - i. Blood flowing from the atria to ventricles _____
 - j. When the ventricle contracts _____
 1. The atrioventricular canal is closed _____

4. Semilunar Valves

a. The semilunar valves are located:

1. In the _____ and is called _____

2. In the _____ and is called _____

b. Each semilunar valve consists of _____

c. Blood flow is blocked when _____

d. Blood flowing from the ventricles _____

e. Blood flowing toward the ventricles _____

IV. Route of Blood Flow Through the Heart

A. Blood from systemic circulation enters the _____

B. The blood is then passed through the tricuspid valve to _____

C. Contraction of the right ventricle:

1. Closes the _____

2. Opens the _____

3. This allows blood to flow into _____ and eventually to the _____ where gas exchange occurs

D. Blood returns to the _____ through the four _____

E. The blood is then passed through the mitral valve to _____

F. Contraction of the left ventricle:

1. Closes the _____

2. Opens the _____

3. This allows blood to enter the _____ and be distributed to _____

V. Histology

A. Heart Skeleton

1. Consists of a _____

2. Fibrous rings are formed around _____

a. Provides _____ for valves

3. Functionally the heart skeleton:

- a. Serves as _____
- b. Provides _____

B. Cardiac Muscle

1. Describe cardiac muscle cells _____
2. Cardiac muscle cells contain _____ & _____ arranged to form _____ that join end to end to form _____
3. What causes striations in cardiac muscle cells? _____
4. The smooth sarcoplasmic reticulum:
 - a. Is not as _____ arranged
 - b. Is not as _____ as in skeletal muscle
 - c. No _____ are present
 - d. Comes into close association _____ with _____
5. T-tubules are _____ than in skeletal muscle
 - a. Found near the _____
6. Slow onset of contraction and prolonged contraction phase are caused by:
 - a. Loose association _____
 - b. Depolarizations of the plasma membrane are not _____

 - c. Calcium must _____
 - d. A substantial number of _____
7. Energy for cardiac muscle cell contraction is provided by _____
8. Cardiac muscle cells are rich in _____ which make _____
9. The extensive capillary network _____
10. Cardiac muscle cells are organized in _____
11. What are intercalated disks? _____
12. What are desmosomes? _____
13. What is the function of gap junctions? _____

14. Electrically the cardiac muscle cells _____

C. Conducting System

1. Consists of _____
2. Where is the sinoatrial (SA) node? _____
3. Where is the atrioventricular (AV) node? _____
4. The atrioventricular bundle arises from the _____
5. At the top of the interventricular septum the bundle divides to form:
 - a. _____
 - b. _____
 1. These extend inferiorly to the _____
6. The bundle branches form terminal branches called _____
 - a. These are large-diameter _____
7. Why do action potentials travel faster in Purkinje fibers? _____

8. Why is the SA node called the pacemaker? _____

9. The heart contracts _____ & _____
10. Once action potentials are produced:
 - a. They spread from _____ to _____
 - b. Preferential pathways conduct action potentials from _____ to the _____ at greater _____
 - c. Within the AV node action potentials _____
 - d. The total delay allows _____
 - e. The action potential is passed from the AV node to the _____ through the _____ & _____ branches and finally reaches the _____ in the ventricular myocardium
11. The first part of the ventricular myocardium to be stimulated is the:

12. The spiral arrangement of muscle layers results in _____ that proceeds from the _____ toward _____

VI. Electrical Properties

A. Action Potentials

1. What is the plateau phase? _____
2. Depolarization Phase
 - a. Results when _____ or _____ open
 - b. This allows _____ causing rapid depolarization
 - c. Depolarization causes _____ to close
 1. This decreases membrane permeability to _____
 - d. Depolarization also causes _____ or _____ to begin to open
3. Early repolarization occurs when:
 - a. Voltage-_____ close
 1. Movement of _____ into the cell stops
 - b. A small number of _____ open
 1. _____ move out of the cell
4. Plateau phase occurs as:
 - a. Voltage-_____ continue to open
 1. The movement of _____ into the cell counteracts the movement _____ out of the cell
5. Plateau phase ends and final repolarization begins as:
 - a. Voltage-_____ close
 1. _____ stops diffusing into the cell
 - b. Many more _____ open
 1. Tendency for _____ to diffuse out of the cell _____
6. This causes the membrane potential to _____

B. Autorhythmicity of Cardiac Muscle

1. The heart is said to be autorhythmic because it:
 - a. _____
 - b. _____
2. What is a prepotential? _____

3. For a prepotential to reach threshold:
 - a. Na^+ moves into the pacemaker cells through _____
 - b. Fewer _____ move out of the pacemaker cells
 - c. The depolarization opens _____
 - d. When the prepotential reaches threshold many _____ open
 - e. The movement of _____ into the cells is primarily responsible for depolarization
4. Repolarization occurs when:
 - a. _____ close
 - b. _____ open
5. After the resting membrane potential is reestablished _____

6. What is an ectopic focus? _____

C. Refractory Period of Cardiac Muscle

1. During the absolute refractory period _____
2. During the relative refractory period _____
3. The refractory period is prolonged because _____

4. This ensures that after contraction _____
 - a. This prevents _____ in cardiac muscle

D. Electrocardiogram (ECG or EKG)

1. Electrodes placed on the skin detect _____
2. The ECG is not a direct measurement of _____
3. The ECG can not provide information about _____ or _____
4. Each deflection in the ECG indicates _____
 - a. Correlates with a _____
5. The P wave is the result of _____
 - a. Signals the onset of _____
6. The QRS complex results from _____
 - a. Signals the onset of _____

7. The T wave represents _____
 - a. Precedes _____
8. Why is there no wave representing atrial repolarization? _____

9. What is the PQ (PR) interval? _____
 - a. What mechanical events occur during this time period? _____

10. At the end of the PR interval _____
11. What is the QT interval? _____
 - a. What mechanical events occur during this time period? _____

VII. Cardiac Cycle

A. General

1. Functionally the atrial primer pumps _____
2. Functionally the ventricular power pumps _____
3. Cardiac cycle refers to _____
4. Define the following terms:
 - a. Systole _____
 - b. Diastole _____
 - c. Atrial systole _____
 - d. Atrial diastole _____
 - e. Ventricular systole _____
 - f. Ventricular diastole _____
5. Conditions just before ventricular systole begins include:
 - a. Atria and ventricles are _____
 - b. Ventricles are _____
 - c. Semilunar valves are _____
 - d. AV valves are _____
6. As ventricular systole begins:
 - a. Ventricular pressure _____

- b. Causing blood to flow _____ & _____
 - c. Ventricular pressure continues to _____
 - 1. Why is this called period of isovolumic contraction? _____
 - d. When ventricular pressure is greater than the pressure in the pulmonary trunk and aorta the _____ are pushed open
 - 1. Why is this called period of ejection? _____
 - 7. As ventricular diastole begins:
 - a. The ventricles relax and ventricular pressure _____ below that in the _____ & _____
 - b. Blood begins to flow back toward the ventricles causing _____
 - c. Ventricular pressure continues to _____
 - 1. Why is this called period of isovolumic relaxation? _____
 - 8. During this entire time the atria are _____ and blood flows into them
 - 9. When ventricular pressure falls below atrial pressure _____ open
 - a. Blood flows from _____
 - 1. Why is this called passive filling? _____
 - 2. How much ventricular filling is passive? _____
 - 10. When the atria contract it causes _____ atrial pressure
 - a. Blood flows into the _____
 - 1. Why is this called active filling? _____
 - 11. What is end-diastolic volume? _____
 - 12. What is end-systolic volume? _____
- B. Heart Sounds**
- 1. The first heart sound:
 - a. Is described as a _____
 - b. It is caused by _____
 - 2. The second heart sound:
 - a. Is described as a _____

- b. It is caused by _____
- 3. A third heart sound is caused by _____
- C. Aortic Pressure Curve
 - 1. During the period of ejection the _____
 - a. Aortic pressure remains _____
 - 2. As ventricular pressure drops below the pressure in the aorta:
 - a. Blood flows _____ because of _____
 - 1. This causes the _____ to close
 - 2. Pressure within the aorta _____ producing a _____
 - a. This is also called an _____
 - 3. Aortic pressure then gradually _____
 - as _____

VIII. Mean Arterial Blood Pressure

- A. Define mean arterial pressure (MAP): _____

- 1. It is proportional to:
 - a. _____ times _____
 - 1. What is cardiac output? _____
 - 2. What is peripheral resistance? _____
- 2. The formula for mean arterial pressure is: _____
- B. Cardiac Output
 - 1. Cardiac output is equal to _____ times _____
 - a. What is heart rate? _____
 - b. What is stroke volume? _____
 - 2. Stroke volume is calculated as _____ minus _____
 - 3. Stroke volume can be increased by:
 - a. Increasing _____ OR
 - b. Decreasing _____

4. During exercise:
 - a. End-diastolic volume _____ because of _____
 - b. End-systolic volume _____ because the _____
5. What is cardiac reserve? _____

6. How is cardiac reserve effected by exercise? _____

IX. Regulation of the Heart

A. Intrinsic Regulation

1. What is venous return? _____
2. As venous return increases _____ increases
3. This results in _____ of the ventricular walls
 - a. This is sometimes called _____
 1. Increased preload causes _____
 2. Decreased preload causes _____
4. Cardiac muscle exhibits a _____ similar to skeletal muscle
 - a. Therefore an increased preload causes _____ stretch
 - b. Causes the muscle fibers to _____
 - c. Producing a _____
 1. This relationship is known as _____
5. What is afterload? _____
 - a. Ventricles are very _____ to changes in afterload

B. Extrinsic Regulation

1. Parasympathetic Control
 - a. Parasympathetic stimulation has an _____ on the heart
 1. Primarily by _____
 - b. During resting conditions the heart receives _____ that inhibits the heart to a _____

- c. During exercise the heart rate _____ in part because of _____
- d. Parasympathetic stimulation can decrease heart rate _____
- e. Acetylcholine binds to _____
 - 1. Makes the membrane more permeable to _____
 - 2. This _____ the membrane
 - 3. Heart rate decreases because _____

2. Sympathetic Control

- a. Sympathetic stimulation of the heart _____ both the:
 - 1. _____ &
 - 2. _____
- b. The heart rate can increase to _____
- c. The increased force of contraction causes _____
- d. If the heart rate is too fast diastole is too short to _____
- e. During resting conditions sympathetic stimulation is important for _____
- f. Norepinephrine binds to _____ receptors
 - 1. Makes the membrane more permeable to _____ by _____

3. Hormonal Control

- a. Result of the adrenal medulla releasing _____ & _____
- b. Both increase the _____ & _____
- c. Adrenal medulla secretes epinephrine and norepinephrine in response to:
 - 1. Physical _____
 - 2. Emotional _____
 - 3. Stressful _____
- d. Epinephrine takes a longer time to act on the heart but _____

X. Heart and Homeostasis

A. Effect of Blood Pressure

1. Baroreceptor reflexes detect _____ and _____
2. The sensory receptors of baroreceptors are _____
 - a. They are found in large arteries like the:
 1. _____
 2. _____
3. They are innervated by cranial nerves:
 - a. IX _____
 - b. X _____
4. Nerves from the baroreceptors go to the _____ that is located in the _____
 - a. Functionally the cardioacceleratory center _____
 - b. Functionally the cardioinhibitory center _____
5. At normal blood pressure the medulla receives action potentials at _____
6. When blood pressure increases:
 - a. The arterial walls are _____
 - b. Afferent action potential _____
 - c. In response the baroreceptor reflex:
 1. _____ sympathetic & _____ parasympathetic stimulation
 - a. Causing the heart rate to _____
7. When blood pressure decreases:
 - a. The arterial walls are _____
 - b. Afferent action potential _____
 - c. In response the baroreceptor reflex:
 1. _____ parasympathetic & _____ sympathetic stimulation
 - a. Causing the heart rate to _____
 - b. Causing the force of contraction to _____

B. Effect of pH, Carbon Dioxide, and Oxygen

1. Chemoreceptors sensitive to changes in pH and carbon dioxide exist _____
2. A drop in pH and a rise in carbon dioxide:
 - a. _____ parasympathetic stimulation of the heart &
 - b. _____ sympathetic stimulation of the heart
 1. Resulting in:
 - a. _____ &
 - b. _____
 - c. The increased blood flow through the lungs:
 1. Eliminates _____
 2. Helps to _____
3. In the aorta and carotid bodies are chemoreceptors sensitive to _____
4. The chemoreceptors are activated by a _____
5. In isolated experiments it is shown that these chemoreceptors cause:
 - a. Decrease in _____
 - b. Increase in _____
 1. This would promote blood _____
6. When all regulatory mechanisms function together, the effect of a large, prolonged decrease in oxygen is to _____
7. Low oxygen levels increase inflation of the lungs:
 - a. Stimulates _____ in the lungs
 - b. Influence the cardiorespiratory center and causes _____

C. Effect of Extracellular Ion Concentration

1. Potassium
 - a. Excess K^+ in cardiac muscle tissue:
 1. _____
 2. _____
 - b. What is heart block? _____
 1. It can be caused by _____
 - c. A decrease in extracellular K^+ results in _____

1. Because the _____
 2. Calcium
 - a. An increase in extracellular Ca^{2+} produces:
 1. Increase _____
 - a. Because of a greater _____
 - b. Elevated blood Ca^{2+} levels have an indirect effect on heart rate because:
 1. Reduce _____
 2. Generally _____
 - c. Significantly low blood Ca^{2+} levels _____
 1. This is because _____ open resulting in

 2. Why do low Ca^{2+} levels usually not effect heart rate? _____

- D. Effect of Body Temperature
 1. Small increases in cardiac muscle temperature _____
 2. Decreases in temperature _____

XI. Effects of Aging on the Heart

A. Hypertrophy of the Left Ventricle

1. Gradual increase in pressure in the aorta as a result of:
 - a. Decrease in _____ resulting in an

2. Cardiac muscle tissue becomes stiffer and less compliant due to:
 - a. Accumulation of _____
 - b. Increase in _____

B. Heart Rate

1. There is a decrease in the maximum heart rate related to:
 - a. Increase in the rate _____
 - b. Decrease in the rate of _____
 - c. Decrease in the maximum rate _____
 - d. Epinephrine and norepinephrine _____

C. Heart Valves

1. Connective tissue of valves _____
2. Ca^{2+} deposits on valves _____

D. Conduction System

1. Altered by:
 - a. _____ & _____ of the left bundle branch
 - b. _____ of SA node cells
2. Lead to a higher rate of _____