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lies between rectum and urinary bladder (or the seminal vesicles and ampullae ductus deferentes) The rectovesical pouch is the lowest part of Rectovesical pouch the peritoneal cavity in anatomical position Contains sigmoid colon and ileum is formed between the anterior surface of the rectum and the posterosurface of 1) Rectouterine pouch between rectum and uterus the uterus and the upper part of vagina (Douglas pouch) is formed between the anteroinferior surface of the uterus and the superior between bladder and uterus — 2) Vesicouterine pouch surface of the urinary bladder Suspendes the small intestines from the posterior abdominal wall The root of mesentery is : A) 15 cm long B) Directed obliquely from LEFT side of L2 vertebra to RIGHT sacroiliac joint Difference between Jejunum & Ileum jejunum Ileum Proximal 2/5 Distal 3/5 in the upper part of the in the lower part of peritoneal cavity below the left in the pelvis side of the transverse mesocolon Jejunal and ileal branches of SUPERIOR MESENTERIC A.&V.

 wall
 thicker wall& redder
 Thinner & less redder

 Arcades in mesentery
 -simple, only one or two arcades -with long infrequent branches -long vase recta
 numerous short terminal vessels arise from a series of three or four or even more Arcade - Short vase recta

-----Contents: -Nerve plexuses Lymphatic nodes & vessels

Connective tissue & fat

Extends from terminal part of ileum to appendix Appendicular artery runs in free margin of mesoappendix(branch from posterior cecal artery, a branch of ileocecal A.) Connects the transverse colon to the anterior border of the pancreas Blood vessels

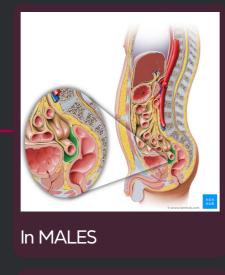
Nerves

Lymphatic's of the transverse colon

It's a fold of Peritoneum attaches the sigmoid colon to the pelvic wall The LEFT URETER descends into the pelvis behind its apex The sigmoid vessels Lymphatic vessels Nerves Consists of double peritoneal layer Falciform ligament of liver (sickle Extends from anterior abdominal wall (umbilicus) to liver shaped) 🖕 Free border of the obliterated umbilical ligament contains Ligamentum teres the area between upper and lower layer of the coronary ligament is the bare area of liver which ----- Coronary ligament contract with the diaphragm formed by left and right extremity of coronary Left and right ligament Forms the lesser omentum Connects the fundus of stomach to hilum of spleen. short gastric & left gastroepiploic vessels _____ Contents ____ extends between the hilum of spleen and left kidney The splenic vessel – Splenorenal ligament 🌟 Lymphatic vessels & nodes Contents the tail of pancreas between diaphragm and spleen —— Phrenicosplenic ligament between spleen and colon – Splenocolic ligament – Gastropancreatic ligament

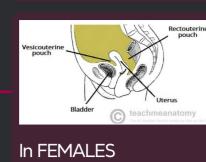
> Sometimes named Treitz ligament at the junction between duodenum & Jejunum attaches to the right crus of the diaphragm

It is a fold of peritoneum which is continued from the left colic flexure to the diaphragm opposite the 10th and 12th ribs

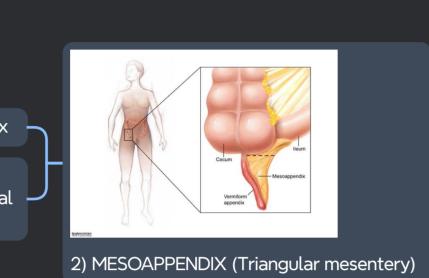


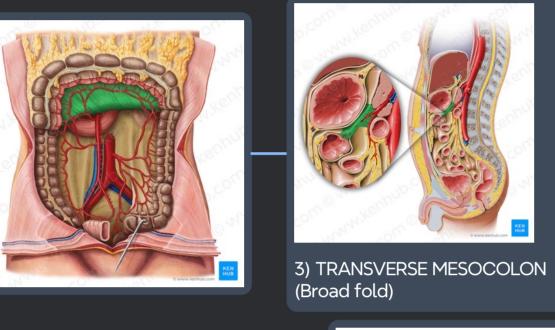
When the peritoneum dips

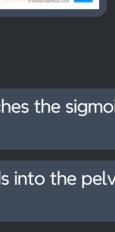
- downwards in the lesser pelvis, it forms a larger fossa named pouch OUCHES

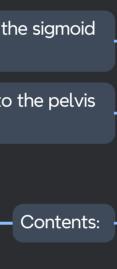


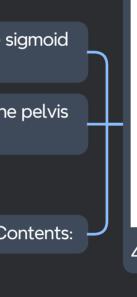


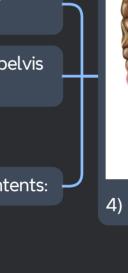




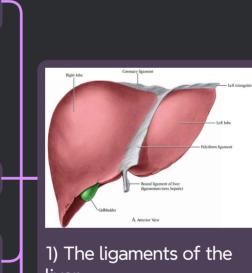


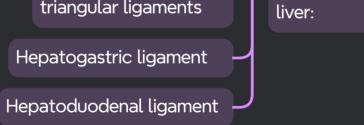


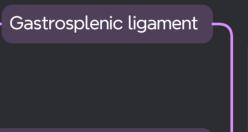


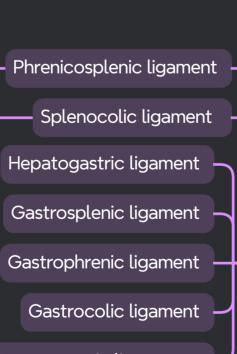


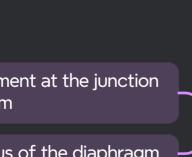


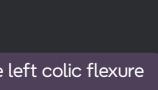


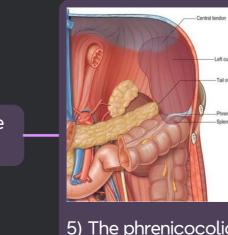


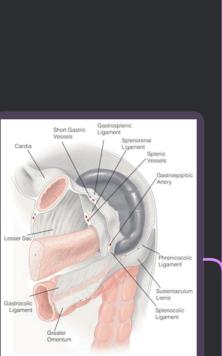


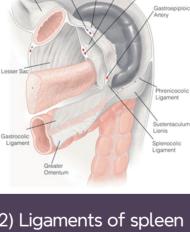


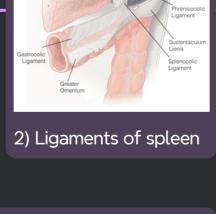


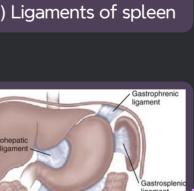




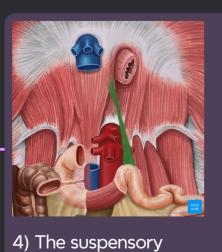








Gastrocolic 3) ligaments of stomach



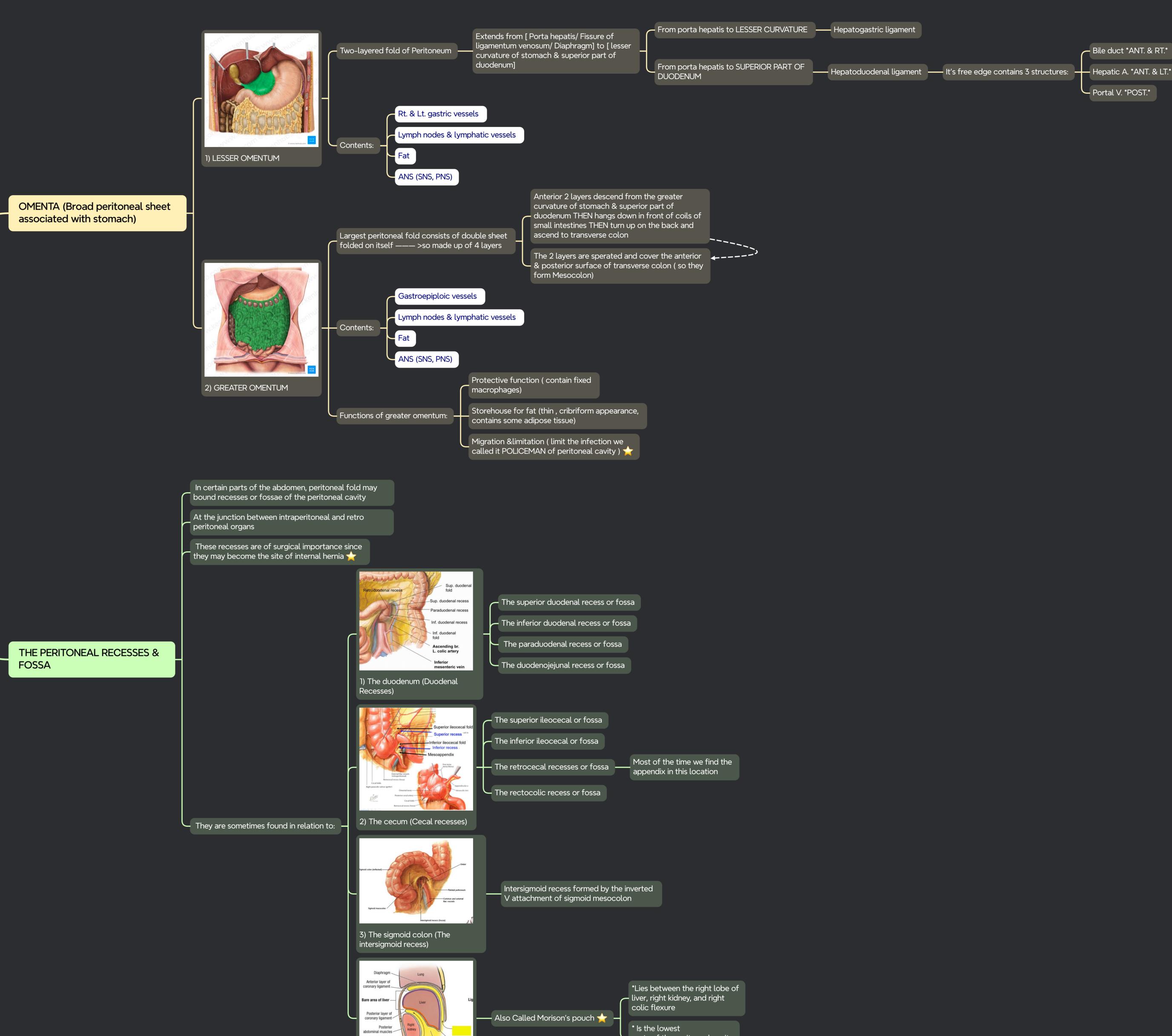
ligament of duodenum



MESENTRIES OF THE PERITONEUM (two layered fold of Peritoneum that attach the intestines to the posterior abdominal wall)

LIGAMENTS OF THE PERITONEUM

Peritoneal Reflection



Inferior border of liver

11

4) Hepatorenal recess

agmatic

Hepatorenal recess space

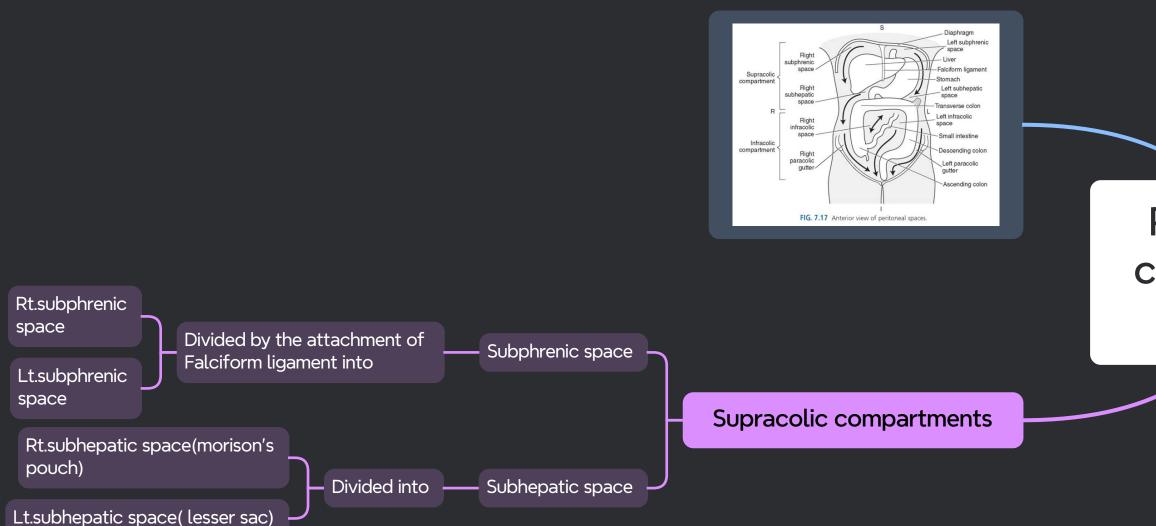
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* Is the lowest \smile parts of the peritoneal cavity

when the subject is supine

Portal V. *POST.*

Bile duct *ANT. & RT.*



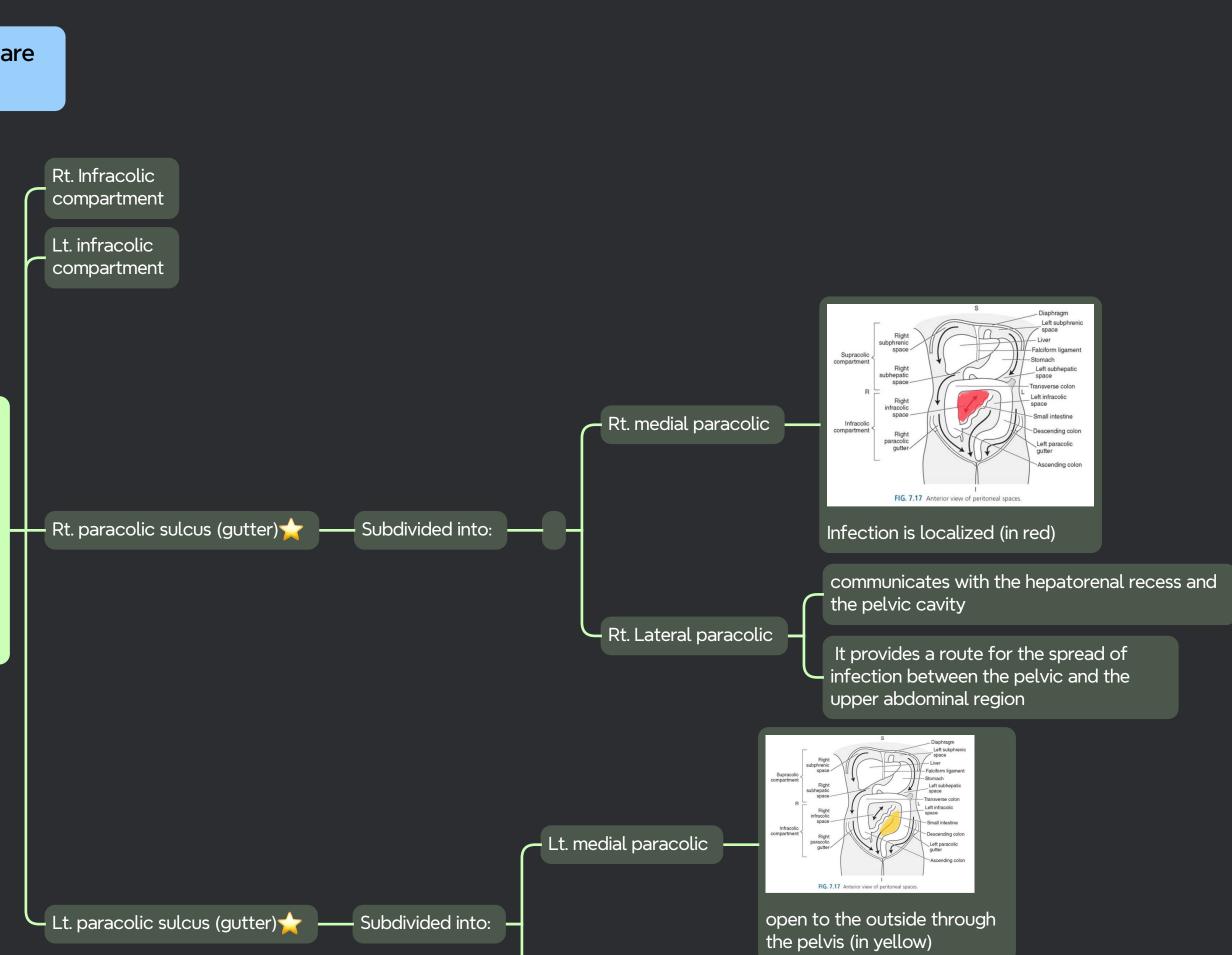
Rt. extraperitoneal space.(bare area of liver & diaphragm)

Peritoneal subdivisions :The transverse colon and transverse mesocolon divides the greater sac into:



Infracolic compartments

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Lt. Lateral paracolic

separated from the area around the

spleen by the PHRENICOCOLIC LIGAMENT

Clinical Notes:

1) GREATER OMENTUM:

The greater omentum may limit the spread of infection in the peritoneal cavity. Because it migrate to the site of any inflammation in the peritoneal cavity and wrap itself around such a site, the greater omentum is commonly referred to as the "policeman" of the peritoneal cavity.

2) FALCIFORM LIGAMENT OF LIVER:

Prevents the spreading of infection from the right to the left . For example, if the appendix has ruptured & the pus reaches the area under the right diaphragm ----- > it won't spread to the left side.

3)SPLENORENAL LIGAMENT:

This ligament contains the tail of the pancreas. So if the patient has truma on the left side (fracture of 9th,10th,11th ribs), the spleen may bleed & rupture ,as it is a vascular organ----> the doctor may need to perform a splenectomy. In this case, the surgeon must pay attention not to injure the pancreas (specifically the tail of the pancreas), because the pancreas will release its secretion & cause Peritonitis.

4) PHRENICOCOLIC LIGAMENT:

If there is an infection in the left lower abdomen site-----> it will prevent it from reaching the subdiaphragmatic space & causing an abscess.

5)PERITONEAL RECESSES:

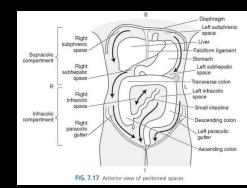
These recesses are of surgical importance since they may become the site of internal hernia. A piece of intestine may enter a recess and may be constricted (strangulated)by the peritoneal fold ----->cutting off the blood supply which increases the risk of gangrene.

6) HEPATORENAL RECESS /MORISON'S POUCH:

In appendicitis and appendix rupture, infection can spread on the right side upwards, forming an abscess & fluid accumulation.

7) RIGHT LATERAL PARACOLIC GUTTER:

It provides a route for the spread of infection between the pelvic and the upper abdominal region to ----> Morison's pouch and Right Subdiaphragmatic space as in appendicitis, forming an abscess.



Keep this picture in your mind , Deal?



Done By: Batool Elayan