Principles of Anatomy and Physiology

Gerard J. Tortora, Bryan H. Derrickson
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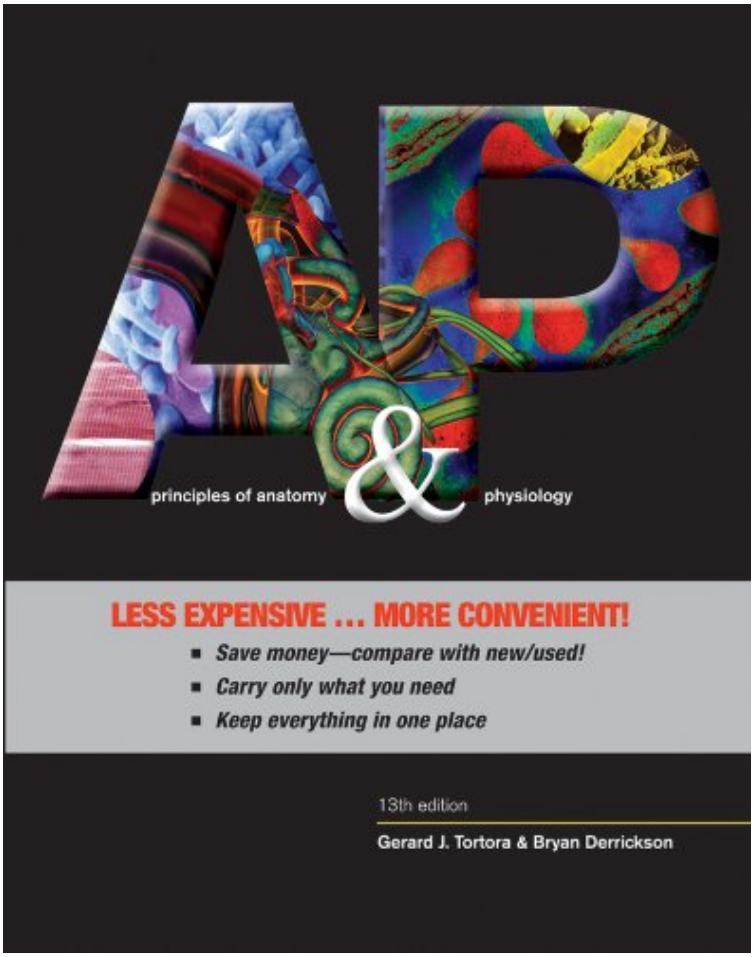

#542852 in Books Wiley 2011-01-05Ingredients: Example IngredientsOriginal language:EnglishPDF # 1 10.80 x 1.60 x 9.00l, 6.96 #File Name: 04709177761344 pages | File size: 57.Mb

Gerard J. Tortora, Bryan H. Derrickson : Principles of Anatomy and Physiology before purchasing it in order to gage whether or not it would be worth my time, and all praised Principles of Anatomy and Physiology:

0 of 0 people found the following review helpful. Condition of BookBy CustomerHey guys, First, loved how the book was a easier read than most, as to what was needed to know and not a bunch of extra medical jargon that can be overwhelming to a student. I'm grateful that I had the option to rent. However the book it self readable but a bit on the shabby shape side as for a used book. I am describing the condition of the book as I received it. The front book cover was slightly coming away from the seam, one of the pages were torn. However the highlighted areas that probably prior owner made was still readable. It will serve it's purpose. Just wanted to give heads up. Maybe it's time to sale it for at least fifty percent off, current price or donate to a college library. Thanks for your time and patience.Future Forensic RN0 of 0 people found the following review helpful. A solid referenceBy Keith KendallI really enjoyed the Anatomy and Physiology class this spring (2013), and imagined that I would read the other half of the book. In real

life Ive only read a couple of additional chapters. So, its time to mark it as read.It was fascinating to get into the details, so even though my company provided a textbook for the semester, I bought a copy to mark it up and continue to study. That was a good choice since I still refer to it.I especially like the part at the end of each chapter, which describes the effects of aging.Table of Contents01 Introduction02 Chemical Level of Organization03 Cellular Level of Organization04 Tissue Level of Organization05 Integumentary System06 The Skeletal System: Bone Tissue07 The Skeletal System: The Axial Skeleton08 The Skeletal System: The Appendicular Skeleton09 Joints10 Muscular Tissue11 The Muscular System12 Nervous Tissue13 Spinal Cord and Spinal Nerves14 Brain and The Cranial Nerves 2013.02.07 Ch 14 read15 Autonomic Nervous System16 Sensory, Motor, and Integrative Systems17 Special Senses18 Endocrine System19 Cardiovascular System: The Blood20 Cardiovascular System: The Heart21 Cardiovascular System: Blood Vessels Hemodynamics22 Lymphatic System and Immunity23 Respiratory System24 Digestive System25 Metabolism and Nutrition26 Urinary System27 Fluid, Electrolyte, Acid-Base Homeostasis28 Reproductive Systems29 Development and Inheritance1 of 1 people found the following review helpful. Wonderful IllustrationBy EarthcubThis is my first AP book, and I've not enjoyed it as much as I would've liked. I would prefer to receive information in a way that starts at a high level, then breaks down that information in a consecutive way, breaking things down more and more until we get to low level information. This book gives very brief overview of each section, then dives directly to the bottom of the ocean where you're stuck in a completely alien environment, with a whole new language to describe every minute thing you observe. This didn't work for me.I had to get EZ-Anatomy and Physiology to support my need for a high level view, and now I only use the Tortora book for the excellent illustrations and the boxed lists of things to remember. I won't read it any longer. It just confused the hell out of me and makes me feel like I'm drowning.

This text is an unbound, binder-ready edition. The thirteenth edition of the phenomenally successful Principles of Anatomy and Physiology continues to set the standard for the discipline. The authors maintained a superb balance between structure and function and continue to emphasize the correlations between normal physiology and pathophysiology, normal anatomy and pathology, and homeostasis and homeostatic imbalances. The acclaimed illustration program continues to be refined and is unsurpassed in the market. The thirteenth edition is fully integrated with a host of innovative electronic media, including WileyPlus (access purchased separately.) No other text and package offers a teaching and learning environment as rich and complete.

.com Five Interesting Functions of the Human Body Most forms of color blindness, an inherited inability to distinguish between certain colors, result from the absence or deficiency of one of the types of cones. The most common type is red-green color blindness, in which red cones or green cones are missing. As a result, the person cannot distinguish between red and green. Prolonged vitamin A deficiency and the resulting below-normal amount of rhodopsin may cause night blindness or nyctalopia, an inability to see well at low light levels. Women often have a keener sense of smell than men do, especially at the time of ovulation. Smoking seriously impairs the sense of smell in the short term and may cause long-term damage to olfactory receptors. With aging the sense of smell deteriorates. Hyposmia, a reduced ability to smell, affects half of those over age 65 and 75% of those over age 80. Hyposmia also can be caused by neurological changes, such as a head injury, Alzheimer disease, or Parkinson disease; certain drugs, such as antihistamines, analgesics, or steroids; and the damaging effects of smoking. Damage to the cerebellum can result in a loss of ability to coordinate muscular movements, a condition called ataxia. Blindfolded people with ataxia cannot touch the tip of their nose with their finger because they cannot coordinate movement with their sense of where a body part is located. Another sign of ataxia is a changed speech pattern due to uncoordinated speech muscles. Cerebellar damage may also result in staggering or abnormal walking movements. People who consume too much alcohol show signs of ataxia because alcohol inhibits activity of the cerebellum. Such individuals have difficulty in passing sobriety tests. Ataxia can also occur as a result of degenerative diseases (multiple sclerosis and Parkinson disease), trauma, brain tumors, and genetic factors, and as a side effect of medication prescribed for bipolar disorder. After death, the cellular membranes become leaky. Calcium ions leak out of the sarcoplasmic reticulum into the sarcoplasm and allow myosin heads to bind to actin. ATP synthesis ceases shortly after breathing stops, however, so the cross-bridges cannot detach from actin. The resulting condition, in which muscles are in a state of rigidity (cannot contract or stretch), is called rigor mortis (rigidity of death). Rigor mortis begins 3-4 hours after death and lasts about 24 hours; then it disappears as proteolytics enzymes from lysosomes digest the cross-bridges. A dislocated mandible can occur in several ways. Anterior displacements are the most common and occur when the condylar processes of the mandible pass anterior to the articular tubercles. Common causes are extreme mouth opening, as in yawning or taking a large bite, dental procedures, or general anesthesia. Posterior displacement can be caused by a direct blow to the chin. Superior displacements can be caused by a direct blow to the chin. Superior displacements are typically caused by a direct blow to a partially opened mouth. Lateral dislocations are usually associated with mandibular fractures.