

UNIVERSIDAD AUTÓNOMA DE NUEVO LEÓN



### **MODULE DESCRIPTION (ANALYTICAL PROGRAM).**

1. Module Information Code:	
Name of the Institution and School	Universidad Autónoma de Nuevo León,
	School of Medicine
Name of the Learning Unit	Embryology
Total classroom hours for theory and/or practice.	140 hours
Total extra classroom hours	70 hours
Course Modality	Schooled
<ul> <li>Type of academic period in which the module is offered</li> </ul>	1st semester
Type of Learning Unit in the Curriculum	Compulsory
Curriculum area:	ACFB Basic
UANL credit points	7
Date of module creation:	February 17, 2014
Date of last amendment:	August 6, 2020
<ul> <li>Person(s) responsible for the module design and amendments:</li> </ul>	Dr. med. Norberto López Serna

# 2. Introduction

The module of Embryology is part of the Morphological Sciences which are taught to the students during the first year at the Bachelor as Medical Surgeon and Obstetrician. It belongs to the ACFB Basic area, and it offers the student an outlook on the development the conception's product has since the moment of fertilization to the very birth, considering morphological aspects as well as the molecular and genetic ones that take part in such process. At the same time, it analyzes variations on the normal development patterns of an individual or individuals (in case of a multiple pregnancy), their causes, as well as the reasons which produce the congenital defects and will frequently have to be detected by the future health professional during his clinical practice. It also studies the placenta's formation and destination, the gestation annexes, as well as the abnormalities which show up more frequently in these.

To achieve all these mentioned aspects, this Learning Unit has been divided in 5 stages: basic concepts, from gametogenesis to fecundation, development of the embryo, placentation, and development of organ systems.

# 3. Purpose(s)

This learning unit provides scientific basis and the development of the competences needed to integrate knowledge regarding to Human Embryology. In this way, the graduate student will be able to explain the etiology and morphological mechanisms that the most common congenital abnormalities have, using scientific vocabulary properly to communicate with the rest of the health center team. All these will be done practicing professional and ethical values. As part of the curriculum map, Human Embryology is a module which is related to: 1) Human Anatomy, because Human Embryology provides the students a comprehensive vision on how the human body is formed before birth, which is essential to understand an adult's anatomy; also, with 2) Cell and Tissue Biology because it provides the knowledge needed to understand the microstructures and cell mechanisms which give support to the morphological development from the conception's product; with 3) Biochemistry, too, because students require from this knowledge to understand the molecular mechanisms which originate life from the conception's product and control the subsequent development; with 4) Molecular Biology, which provides knowledge regarding the genetic mechanisms which give place to morphological events during the conception's product development. Likewise, Human Embryology gives sense to the knowledge acquired at Molecular Biology.

The learning unit is related to the general skills because they promote autonomous learning, the use of formal language, information technologies, and collaborative learning and work. In an important way, the learning unit establishes in the student that one of the ethical values that all graduate general practitioners from UANL must have is having respect for the conception's product life.

Regarding to the specific skills, the learning unit provides basic knowledge so that students, through the use of scientific thinking and a holistic approach, can identify the normal development of the conception's product, as well as the clinical signs of congenital malformations and their causes (health-disease relationship, interaction between man and physical environment).

### 4. Competences of the graduate profile

a. General competences contributing to this learning unit.

### Instrumental skills:

1. Apply autonomous learning strategies in the different levels and fields of knowledge that allow them make appropriate and relevant decisions in the personal, academic and professional fields.

2. Use the logical, formal, mathematical, iconic, verbal and non-verbal languages according to their stage of life, in order to understand, interpret and express ideas, feelings, theories and streams of thinking with an ecumenical focus.

3. Use the information and communication technologies as access tools to information and its transformation in knowledge, as well as for learning and collaborative work with cutting-edge techniques that allow its constructive participation in society.

### Personal and social interaction skills

9. Maintain an attitude of commitment and respect towards the diversity of social and cultural practices that reaffirm the principle of integration in

the local, national and international context with the purpose of promoting environments of peaceful coexistence.

11. Practice the values promoted by the UANL: truth, equality, honesty, liberty, solidarity, respect for life and anyone's, peace, respect for nature, integrity, ethics behavior and justice, within their personal and professional environment in order to make a sustainable society.

### Integrative skills

13. Take the lead according to social and professional needs to promote relevant social change.

14. Resolve personal and social conflicts in accordance with specific techniques in the academic field and their profession for the proper decision making.

# b. Specific competences of the graduate profile that contributes to the learning unit

### Scientific Base of Medicine

1.- To use the scientific foundations of medicine by considering the economical, psychological, social, cultural and environmental factors which contribute to the development and evolution of diseases in order to make decisions and take medical actions.

# **Professional Clinical Practice**

2.- To solve clinical problems through deductive reasoning, interpretation of findings and the definition of their nature in order to make decisions and determine principles of actions of the medical practice to be followed in a responsible way, impacting individual and collective health.

### Critical thinking and research

7.- To apply the scientific method in the resolution of medical problems with an innovative, analytical and self-critical attitude toward the prevention, diagnosis and treatment of diseases.

# **Professional Values and Ethics**

8.- To integrate professional values and ethics in medical practice, without distinction as to gender, race, political or sexual preference,

religious beliefs, activities performed, disabilities or socioeconomic status; promoting social inclusion and contributing to the population's wellbeing, its quality of life and human development.

9.- To respect patient's integrity by keeping his medical information as an essential part of the professional secrecy in order to guard his rights.

# **Organizational work**

10.- To promote an organizational work culture in the health field, acknowledging the multidisciplinary work, the respect for institutional policies and the observance of rules in order to contribute to a comprehensive treatment of patients.

# Communication

11.- To apply the principles of effective communication by establishing a respectful and empathetic relationship with the patient, relatives, the community and other health professionals in order to use the information properly.



# 6. Structuring into stages or phases

# Phase 1. Basic Concepts

# Component(s) of the competence:

Recognizes the different normal and abnormal development processes as well as the structures location and movement, applying basic concepts from Human Embryology in order to use the embryo terminology correctly and time-space location.

Evidence of student learning	Performance Criteria	Learning activities	Contents	Resources
Resolution of a case on congenital abnormalities.	Identifies correctly the embryological terminology. Recognizes and interprets embryonic structures in images or through the use of a microscope. Correctly synthetizes the embryonic development of tissues and organs. Develops the embryological perspective for its application in the clinical area. Applies the knowledge acquired correctly. Presents the complete assignment and it has the suggested structure or format (introduction, body and conclusions).	<ul> <li>Facilitation activities</li> <li>Exposition in class, case discussion, embryonic images analysis during plenary sessions.</li> <li>Learning activities</li> <li>Written report about readings on cell division.</li> <li>Elaboration of concept maps with anatomy terms of position, development mechanisms, and cell division.</li> <li>Content analysis through the use of images and cases of congenital abnormalities.</li> <li>Class exposition on the normal and abnormal development, as well as the location and movement of structures.</li> </ul>	Conceptual Content: Anatomical terminology related to position and movement. Anatomical terms of position: • Cephalic (ad) • Caudal (ad) • Ventral (ad) • Dorsal (ad) • Medial (ad) • Lateral (ad) • Embryo axes DEVELOPMENT MECHANISM • Potency • Restriction • Determination • Cell differentiation • Induction • Apoptosis • Cell migration	<ul> <li>Medschool Classrooms</li> <li>Textbook</li> <li>Images</li> <li>Histological sections</li> <li>Embryonic models</li> <li>Microscope</li> <li>Digital platform</li> <li>Videorecordings</li> <li>Embryology museum</li> <li>Embryology Laboratory</li> <li>Reference books</li> <li>Manual (workbook)</li> <li>Electronic references</li> </ul>

Includes the elaboration of a diagnostic and images. Uses Arial 12 as font in the assignment.	Revision of embryonic sections with a microscope. Self-evaluation through an analysis and interpretation of images from anatomy terminology	CELL DIVISION • Diploid, haploid, euploidy and aneuploidy cells: prophase, metaphase, anaphase and telophase. • Mitosis: prophase, metaphase, anaphase and telophase. • Meiosis: Reduction pf chromosomes, exchange of genetic material. LABORATORY TECHNIQUES MORE USED IN EMBRIOLOGY • Histological section: Hematoxylini and eosin stain, Masson's trichrome stain, Argentic impregnation, toluidine blue stain • Dawson's clearing technique. • Pap test. CONGENITAL ANOMALIES • Definition and morphological classification: malformations, alteration, deformity, syndrome, associationn and	

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	sequence.	
	<ul> <li>Etiological Classification</li> </ul>	
	<ul> <li>Genetic factors</li> </ul>	
	<ul> <li>Alteration of</li> </ul>	
	chromosomes number:	
	aneuploidy y polyploidy;	
	Nondisiunction: Down	
	syndrome. Klinefelter	
	syndrome. Turner	
	syndrome).	
	Environmental factors	
	Biological factors: Viruses	
	(rubella varicella) and	
	hactorial (synhilis)	
	• Chomical factors	
	• Drugs (thalidomide,	
	anticonvulsant,	
	normonal), alconol.	
	Physical factors:	
	radiation.	
	• Gestational diabetes.	
	Procedural content:	
	<ul> <li>Uses the photonic and</li> </ul>	
	stereoscopic miscroscope	
	correctly	
	<ul> <li>Structure information</li> </ul>	
	hierarchically	
	Schematize	
	<ul> <li>Apply concepts to</li> </ul>	
	diagnose a congenital	
	abnormality	
	Attitudinal content :	
	Self-stufy habits	

	Respect to human	
	material	
	<ul> <li>Take care of the</li> </ul>	
	educational facilities	
	<ul> <li>Respect among peers.</li> </ul>	
	<ul> <li>Respect for professors,</li> </ul>	
	acholarship assitants,	
	and administrative	
	personnel.	
	Correct use or language.	
	<ul> <li>wear property the laboratory cost</li> </ul>	
	Development of creative	
	<ul> <li>Development of creative thinking</li> </ul>	
	uninking.	

Component(s) of the competence: Analyze the fecundation process through a correct integration in time of the involved elements in it to establish optimal conditions for pregnancy.

Evidence of student learning	Performance Criteria	Learning activities	Contents	Resources
~	Identifies correctly the		Conceptual Content:	
	embryological	Facilitation activities		Medschool
Resolution of a clinical	terminology.	Exposition in class, case	REPRODUCTIVE SYSTEM	Classrooms
case on fecundation		discussion, analysis of	ORGANS:	<ul> <li>Textbook</li> </ul>
	Recognizes and interprets	reproductive organs images,	• Male	<ul> <li>Images</li> </ul>
	embryonic structures in	gametogenesis, menstrual	<ul> <li>Female</li> </ul>	<ul> <li>Histological sections</li> </ul>
	images or through the use	cycle, and fecundation during		Embryonic models
	of a microscope.	plenary sessions.	GAMETOGENESIS	Microscope
			<ul> <li>Origin of germ cells</li> </ul>	<ul> <li>Digital platform</li> </ul>
	Correctly synthetizes the	Learning activities	<ul> <li>Spermatogenesis and it</li> </ul>	<ul> <li>Videorecordings</li> </ul>
	of tissues and organs	Contant analysis through the	hormonal control	<ul> <li>Embryology museum</li> </ul>
	or tissues and organs.	use of images and clinical	Morphological	<ul> <li>Embryology</li> </ul>
	Develops the	cases	characteristics and	Laboratory
	embryological perspective		morphological anomalies	Reference books
	for its application in the		of normal sperm.	<ul> <li>Manual (workbook)</li> </ul>
	clinical area.	Elaboration of concept maps	Ogenesis and it	Electronic references
		about the fecundation	normonal control.	and
	Applies the knowledge	process.	Characteristics of the overal difference with	
	acquired correctly.	•		
		Written report about readings	Sperin.	
	Presents the complete	on the menstrual cycle.	• Morphological	
	assignment and it has the		characteristics of the	
	suggested structure or	Revision of embryonic	difference between	
	format (introduction, body	sections with a microscope.	sperms and ovums	
	and conclusions).		sperms and ovarias.	
		Self-evaluation through an		
	Includes the elaboration	analysis and interpretation of	MENSTRUAL CYCLE	
	of a diagnostic and	images of gametogenesis	(SEXUAL)	
	images.		• The hypothalamus-	
	Uses Arial 12 as font in		pituitary-gonadal axis.	
	the assignment.		<ul> <li>Ovaryan cycle</li> </ul>	

<ul> <li>Ovary folicle maduration and it hormonal control.</li> <li>Luteal phase</li> <li>Endometrial cycle</li> <li>Proliferative phase</li> <li>Secretory phase</li> <li>Menstruation</li> <li>FECUNDATION</li> <li>Total sperm count in ejaculate.</li> <li>Fecundation phases</li> <li>Germ cells transport</li> <li>Fertilization process</li> <li>Cortical and zona reactions</li> <li>Pronucleus phase</li> <li>Amalyminikis</li> <li>Oocyte activation</li> <li>Procedural content:</li> <li>Uses the photonic and stereoscopic miscroscope correctly</li> <li>Analysis and synthesis of information</li> <li>Eliboration di adionali and stereoscopic miscroscope correctly</li> <li>Analysis and synthesis of information</li> <li>Eliborations of concept mas, summaries, schemes, etc.</li> <li>Apply concepts to diagnose a congenital abnormality</li> <li>Attitudinal content:</li> <li>Self-stufy habits.</li> <li>Discipline</li> <li>Respect to human</li> </ul>	
and it hormonal control. • Luteal phase • Endometrial cycle • Proliferative phase • Secretory phase • Menstruation FECUNDATION • Total sperm count in • ejaculate. • Fecundation phases • Germ cells transport • Fertilization process • Cortical and zona reactions • Pronucleus phase • Amphimixis • Oocyte activation <b>Procedural content:</b> • Uses the photonic and stereoscopic miscroscope correctly • Analysis and synthesis of information • Elaborations of concept mas, summaries, schemes, etc. • Apply concepts to diagnose a congenital abnormality <b>Attitudinal content:</b> • Self-stury habits. • Discipline • Respect to human	Ovary folicle maduration
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Menstruation     FECUNDATION     • Total sperm count in     ejaculate.     • Fecundation phases     • Germ cells transport     • Fertilization process     • Cortical and zona     reactions     • Pronucleus phase     • Amphimixis     • Oocyte activation     Procedural content:     • Uses the photonic and     stereoscopic miscroscope     correctly     • Analysis and synthesis of     information     • Elaborations of concept     mas, summaries,     schemes, etc.     • Apply concepts to     diagnose a congenital     abnormality     Attitudinal content:     • Self-stufy habits.     • Discipline     • Respect to human	Secretory phase
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<ul> <li>Pronucleus phase</li> <li>Amphimixis</li> <li>Oocyte activation</li> <li>Procedural content: <ul> <li>Uses the photonic and stereoscopic miscroscope correctly</li> <li>Analysis and synthesis of information</li> <li>Elaborations of concept mas, summaries, schemes, etc.</li> <li>Apply concepts to diagnose a congenital abnormality</li> </ul> </li> <li>Attitudinal content: <ul> <li>Self-stufy habits.</li> <li>Discipline</li> <li>Respect to human</li> </ul> </li> </ul>	reactions
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Procedural content:         • Uses the photonic and stereoscopic miscroscope correctly         • Analysis and synthesis of information         • Elaborations of concept mas, summaries, schemes, etc.         • Apply concepts to diagnose a congenital abnormality         Attitudinal content:         • Self-stufy habits.         • Discipline         • Respect to human	Oocyte activation
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<ul> <li>information</li> <li>Elaborations of concept mas, summaries, schemes, etc.</li> <li>Apply concepts to diagnose a congenital abnormality</li> <li>Attitudinal content:         <ul> <li>Self-stufy habits.</li> <li>Discipline</li> <li>Respect to human</li> </ul> </li> </ul>	Analysis and synthesis of
<ul> <li>Elaborations of concept mas, summaries, schemes, etc.</li> <li>Apply concepts to diagnose a congenital abnormality</li> <li>Attitudinal content:         <ul> <li>Self-stufy habits.</li> <li>Discipline</li> <li>Respect to human</li> </ul> </li> </ul>	information
<ul> <li>mas, summaries, schemes, etc.</li> <li>Apply concepts to diagnose a congenital abnormality</li> <li>Attitudinal content:         <ul> <li>Self-stufy habits.</li> <li>Discipline</li> <li>Respect to human</li> </ul> </li> </ul>	Elaborations of concept
schemes, etc. • Apply concepts to diagnose a congenital abnormality Attitudinal content: • Self-stufy habits. • Discipline • Respect to human	mas, summaries,
Apply concepts to diagnose a congenital abnormality      Attitudinal content:     Self-stufy habits.     Discipline     Respect to human	schemes, etc.
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Attitudinal content:         • Self-stufy habits.         • Discipline         • Respect to human	
<ul> <li>Self-stufy habits.</li> <li>Discipline</li> <li>Respect to human</li> </ul>	Attitudinal content:
Discipline     Respect to human	Self-stufy habits.
Respect to human	Discipline
	Respect to human

# Phase 3: Development of the embryo

Component(s) of the competence : Analyze the morphogenesis of the embryo and it annexes since it first stages until the last of the embryo period, to diagnose the embryonary age.

Evidence of student learning	Performance Criteria	Learning activities	Contents	Resources
Case resolution on the embryo external morphology and the embryonic attachments (anexos)	Identifies correctly the embryological terminology. Recognizes and interprets embryonic structures in images or through the use of a microscope. Correctly synthetizes the embryonic development of tissues and organs. Develops the embryological perspective for its application in the clinical area. Applies the knowledge acquired correctly. Presents the complete assignment and it has the suggested structure or format (introduction, body and conclusions). Includes the elaboration of a diagnostic and images. Uses Arial 12 as font in the assignment.	<ul> <li>Facilitation activities</li> <li>Exposition in class, case</li> <li>discussion, analysis of</li> <li>images about</li> <li>morphogenesis during</li> <li>plenary sessions.</li> <li>Learning activities</li> <li>Morphogenesis analysis</li> <li>through revision and use of</li> <li>images and clinical cases.</li> <li>Elaboration of concept maps.</li> <li>Written report about readings</li> <li>on folding and derivatives of</li> <li>germ layers.</li> <li>Revision of embryonic</li> <li>sections with a microscope.</li> <li>Self-evaluation through an</li> <li>analysis and interpretation of</li> <li>images from regarding</li> <li>segmentation and first stages</li> <li>of development.</li> </ul>	Conceptual Content SEGMENTATION AND ERALY STAGES OF DEVELOPMENT • Bicellylar stage. • Morula. • Blastocyst. • Bilaminar embryonic disc. • Gastrulation: anomalies. • Embryonic axis. • Mesoderm segmentation. • Neurulation. FOLDING AND DERIVATIVE OF GERM LAYERS • Sagital plane folding • Longitudinal plane folding • Derivatives of the ectodermal germ layer. EXTERNAL MORPHOLOGY • Morphology characteristics of embryo between 4th to 8th development week	<ul> <li>Medschool Classrooms</li> <li>Textbook</li> <li>Images</li> <li>Histological sections</li> <li>Embryonic models</li> <li>Microscope</li> <li>Digital platform</li> <li>Videorecordings</li> <li>Embryology museum</li> <li>Embryology Laboratory</li> <li>Reference books</li> <li>Manual (workbook) Electronic references and</li> </ul>

	<ul> <li>Gestation period and birth day probability.</li> </ul>	
	EMBRIONIC ANNEXES	
	Amnion	
	Yolk sac	
	Allantois	
	Chorion	
	<ul> <li>Umbilical cord</li> </ul>	
	<ul> <li>Anomalies and its clinical implications:</li> </ul>	
	Amnion: Hydramnios	
	(polyhydramnios),	
	Oligohydramnios,	
	amniotic bands,	
	Yolk sac: Vitellin fistula,	
	fibrous cord y lieal	
	Allantois: Uracal fistula	
	Trophoblast: Hydatidiform	
	mole, choriocarcinoma.	
	• Umbilical cord: long cord.	
	agenesis y circular cord.	
	Procedural content:	
	<ul> <li>Uses the photonic and</li> </ul>	
	stereoscopic miscroscope	
	<ul> <li>Analysis and synthesis of</li> </ul>	
	information	
	<ul> <li>Elaborations of concept</li> </ul>	
	maps, summaries,	
	schemes, etc.	
	<ul> <li>Apply concepts to</li> </ul>	
	diagnose a congenital	
	abnormality	

# Phase 4. Placenta

Component(s) of the competence: Analyze the information of the placenta since the embryo implantation, considering it morphology and physiology to understand the abnormal process

Evidence of student learning	Performance Criteria	Learning activities	Contents	Resources
Resolution of a case on congenital abnormalities in the placenta and twin abnormalities	Performance Criteria Identifies correctly the embryological terminology. Recognizes and interprets embryonic structures in images or through the use of a microscope. Correctly synthetizes the embryonic development of tissues and organs. Develops the embryological perspective for its application in the clinical area	Learning activities Facilitation activities Exposition in class, case discussion, analysis of images about the different stages in placenta development during plenary sessions. Learning activities Text analysis and review on book references about placentation. Written report about readings on morphogenesis and placenta physiology.	Contents Conceptual Content IMPLANTATION • Blastocyst implantation • Diferenciation of the trophoblast: cytotrophoblast and syncytiotrophoblast. • Decidual reaction and regional differentiation • Trophoblastic lacunae formation • Normal and abnormal implantation sites: • Intrauterine: placenta previa. • Extrauterine: Tubal,	Resources         • Medschool Classrooms         • Textbook         • Images         • Histological sections         • Embryonic models         • Microscope         • Digital platform         • Videorecordings         • Embryology museum         • Embryology         Laboratory         • Reference books         • Manual (workbook)         • Electronic references
	clinical area. Applies the knowledge acquired correctly. Presents the complete assignment and it has the suggested structure or format (introduction, body and conclusions). Includes the elaboration of a diagnostic and images. Uses Arial 12 as font in the assignment.	Elaboration of concept maps about the placenta morphogenesis. Analysis of the placenta's morphology and physiology through the study of images and clinical cases. Revision of embryonic sections with a microscope. Self-evaluation through an analysis and interpretation of images from the implantation process.	<ul> <li>Extratitente: Tubal, ovarian and abdominal.</li> <li>PLACENTAL MORPHOGENESIS</li> <li>Formation of chorionic plate</li> <li>Formation of intervillous space</li> <li>Formation of chorionic villi:</li> <li>primary, secondary, tertiary</li> <li>Formation of decidua septum and cotyledons.</li> <li>Placental circulation</li> </ul>	Electronic references

	<ul> <li>Placenta normal morphology.</li> <li>Placental anomalies (battledore placenta, succenturiata)</li> </ul>	
	<ul> <li>PHYSIOLOGY OF PLACENTA</li> <li>Exchange of gases: Oxygen, carbon dioxide, carbon monoxide.</li> <li>Exchange of nutrients and electrolytes: amino acids, fatty acids, carbohydrates, vitamins.</li> <li>Transmission of maternal antibodies: Immunoglobulins, maternal IgG.</li> <li>Hormones production: Human chorionic gonadotropin (hCG), estrogens, progesterone, somatomammotropin.</li> </ul>	
	<ul> <li>MULTIPLE PREGNANCY</li> <li>Classification: <ul> <li>Monozygotic and dizygotic twins</li> </ul> </li> <li>Etiology: genetic, maternal age, procedure to increase unknown fertility.</li> <li>Types: twins triplets quadruplets, etc.</li> <li>Anomalies:</li> </ul>	

		Parasitic fetus, evanescent twin syndrome, twin-twin transfusion syndrome, conjoined twins.	
		<ul> <li>Procedural content:</li> <li>Uses the photonic and stereoscopic miscroscope correctly</li> <li>Structure information hierarchically</li> <li>Schematize .</li> <li>Apply concepts to diagnose a congenital abnormality</li> </ul>	
		Attitudinal content : • Self-stufy habits. • Discipline • Respect to human material • Take core of the	
		<ul> <li>Take care of the educational facilities</li> <li>Respect among peers.</li> <li>Respect for professors, acholarship assitants, and administrative personnel.</li> </ul>	
FIRST PARTIAL EXAM		<ul> <li>Correct use of language.</li> <li>Wear properly the laboratory coat.</li> <li>Development of creative thinking.</li> </ul>	

# Phase 5. Organs and systems development.

**Componenet(s) of Competence:** Analyze the normal development of tissue and organs of embryo and fetus

Identifies correctly the Facilitation activities Concent	ual Content:	
Resolution of a case on congenital abnormalities.Function during of the embryological terminology.Function during of the terminology.Function during of terminology.Recognizes and interprets embryonic structures in images or through the use of a microscope.Exposition in class, case discussion, analysis of images of several embryo and fetus systems during plenary sessions.INTEGUI SKELET. MUSCULRecognizes and interprets embryonic structures in images or through the use of a microscope.Integume discussion, analysis of images of several embryo and fetus systems during plenary sessions.Integume SKELET. MUSCULCorrectly synthetizes the embryological perspective for its application in the clinical area.Text analysis and review on book references about organs and systems development.Integume organs and systems development.Develo epiderDevelops the embryological perspective for its application in the clinical area.Elaboration of concept maps. the organs and systems morphogenesis.Skin ar papilla, sheat, on abnormalities and changes during the organs and systems morphogenesis.Anoma Organital abnormalities.Presents the complete assignment and it has the suggested structure or format (introduction, body and conclusions).Content analysis through the use of images and cases of congenital abnormalities.Skeletal skeletSkeletal sections with a microscope.Skeletal sections with a microscope.Skeletal sections append	<ul> <li>Images</li> <li>Images</li> <li>Histological sections</li> <li>Embryonic models</li> <li>Microscope</li> <li>Medschool Classrooms</li> <li>Textbook</li> <li>Digital platform</li> <li>Videorecordings</li> <li>Embryology museum</li> <li>Embryology Laboratory</li> <li>Reference books</li> <li>Manual (workbook)</li> <li>Electronic references</li> </ul>	ım

	Colf avaluation through an	(apprite regione) lateral	
Lless Arial 40 as fant in	Sen-evaluation into prototion of		
Uses Ariai 12 as ion( In	analysis and interpretation of	mesoderm and neural	
the assignment.	Images from the normal	crest participation in	
	organs and system	skeletal system.	
	development process.	<ul> <li>Ossification types:</li> </ul>	
		intramembranous and	
		endochondral.	
		Skull Developments:	
		<ul> <li>Membranous and</li> </ul>	
		cartilaginous	
		neurocranium;	
		membarnous and	
		cartilaginous	
		viscerocranium	
		Anomalies:	
		creaniosynostosis	
		(scaphocephaly.	
		plagiocephaly	
		brachycephaly)	
		• Axial skeleton	
		development Anomalies:	
		Spina bifida occult ovetic	
		(maningacele and	
		Annendieulen	
		Appendicular	
		development skeleton	
		(during fourth and eight	
		week)	
		• Anomalies: amelia,	
		meromelia, focomelia,	
		micromelia, polydactyly,	
		syndactyly,	
		brachydactyly,	
		ectrodactyly, hand and	
		foot cleft.	

Muscular system
Skeletal muscle
histogenesis: myoblast,
myocyto y myotube.
Morphogenesis of
skeletal muscle: limb
muscles muscles derived
form epimere and
hypomere of thorax an
abdomen
abdomen.
layer. calulat muscle,
sinooth muscle of the
digestive, respiratory and
genitourinary system.
Anomalies: Poland
Anomalie, Prune belly
syndrome. Duchenne's
muscular dystrophy.
CARDIOVASCULAR
SYSTEM
Hematopolesis:
Hematopoietic sites (yolk
sac, liver and bone
marrow).
Primitive cardiac tube
formation.
Torsion of the cardiac
tube.
Formation of the venous
sinus.
Atrial sentation process
Ventricular contal
piocess.
• Formation and septation

<ul> <li>of the arterial cone.</li> <li>Development of aortic arches.</li> <li>Fetal circulation and it changes at birth.</li> </ul>	
Anomalies: Heart position: Ectopia cordis, dextrocardia	
Comunication interatrial by: Foramen primum persistency, excessive resorption of the septum primum, hypoplasia of septum secundum, patent foramen ovale, cor triloculare biventriculare	
Interventricular communication: membranous septal defect and muscle wall defect.	
Arterial trunk: Fallot Tetralogía de Fallot, persistent arterial trunk, DiGeroge sequence.	
Aortic arches: aorta coarctaction, right aortic arch.	
Fetal circulation and it changes with birth: persistent arterial duct.	

	<ul> <li>HEAD AND NECK</li> <li>Pharyngeal region</li> <li>Pharyngeal arch and their derivatives: muscles, bone, ligaments, irrigation e innervation.</li> <li>Anomalies: Treacher Collins syndrome, Robin sequence, Goldenhar syndrome</li> <li>Derivatives of grooves (external auditory duct).</li> <li>Anomalies: Gill fistula, lateral cervical cyst.</li> <li>Pharingeal pouch derivatives. Anomalies: DiGeorge syndrome, parathyroid ectopic tissue.</li> <li>Pharyngeal membranes derivatives: tympanic membrane.</li> <li>Tongue development and it innervation.</li> <li>Anomalies: Ankyloglossia, macroglossia, cleft tongue, bifid tongue and microglossia.</li> <li>Thyroid gland development.</li> <li>Anomalies: tiroglossal</li> </ul>	
	cyst, thyroglossal duct fistula, aberrant thyroid	

	tissue, ectopic thyroid.	
	<ul> <li>Development of the face.</li> </ul>	
	Anomalies: lateral and	
	middle cleft lin: cleft	
	nalate oblique facial cleft	
	DESDIDATODY SVSTEM	
	AND I BODT CAVITIES	
	Formactio of respiratory	
	diverticulum.	
	<ul> <li>Development of trachea,</li> </ul>	
	bronchi and lungs,	
	histogenesis of	
	pulmonary development.	
	<ul> <li>Formation of visceral and</li> </ul>	
	parietal pleura.	
	Anomalies: Pulmonary	
	agenesia and hypoplasia.	
	-3	
	Body cavities	
	Intraembryonic celloma	
	Celoma tabication	
	Deural advity formation	
	Pericardial cavity     formation	
	iormation.	
	• Diaphragm formation	
	<ul> <li>Anomalies: Congenital</li> </ul>	
	diaphragmatic hernia,	
	esophageal hernia	
	(hiatal).	
	DIGESTIVE SYSTEM	
	<ul> <li>Primitive intestine and its</li> </ul>	
	divisions.	
	<ul> <li>Anterior intestine:</li> </ul>	

		esophagus, stomach, first portion of duodenum development. • Anomalies:	
		<ul> <li>Atresia and esophageal stenosis; short esophagus and congenital hiatal hernia, pyloric stenosis.</li> <li>Middle Intestine: Formation of distal region of duodenum.</li> <li>Formation of jejunum, ileum, appendix, ascending colon and proximal segment of transversal colon.</li> <li>Anomalies:</li> </ul>	
Second Partial Exam		<ul> <li>Onphalocele, abnormal and inverted rotation of the loop.</li> <li>Posterior intestine posterior: formation of distal segment of transversal colon, descending and sigmoid colon</li> <li>Anomalies: congenital megacolon.</li> </ul>	
		GENITOURINARY SYSTEM Urinary system • Renal morphogenesis: pronephros,	

	mesonephros and meta-	
	nephros.	
	<ul> <li>Urinary tract</li> </ul>	
	morphogenesis.	
	<ul> <li>Anomalies:</li> </ul>	
	<ul> <li>Metanephros: multicystic</li> </ul>	
	dvsplastic kidnev, uni and	
	bilateral renal agenesis,	
	duplications of urinary	
	tract.	
	<ul> <li>Positional changes: pelvic</li> </ul>	
	kidnev, horshoe kidnev.	
	accessory renal arteries.	
	<ul> <li>Development of</li> </ul>	
	urogenital sinus: bladder.	
	prostate gland, prostatic	
	urethra, uraco.	
	<ul> <li>Anomalies of urogenital</li> </ul>	
	sinus: Vesical exstrophy.	
	uracal fistula, uraco cvst.	
	· · · · · · · · · · · · · · · · · · ·	
	Genital system	
	<ul> <li>Development of gonads</li> </ul>	
	Genetic determination of	
	genre.	
	Germ cells migration	
	Gonads development and	
	differentiation	
	Ovary differentiation	
	Differentiation and	
	descent of testis	
	Anomalies:	
	Criptorchidism ectopic	
	testicles, concenital	
	inquinal hernia, testicular	
	hydrocele.	

	Internal Genitals Development of genital ducts: Indiferent stage: mesonephric ducts (Wolff) and para-mesonephric ducts (Müller). • Differentiation of the genital duct in male:	
	<ul> <li>epididymis, vas deferens, seminal vesicles, ejaculatory duct.</li> <li>Differentiation of the genital duct in female: Fallopian tubes, uterus and vagina.</li> <li>Remains of the ducts in female</li> <li>Congenital anomalies of the female genital ducts: uterine agenesis, didelfus</li> </ul>	
	uterus with double or single vagina, arched uterus, uterus bicornuate, unicornuate uterus, cervical atresia, vaginal duplication, vaginal atresia, imperforate himen.	
	<ul> <li>Development of external genitals</li> <li>Indifferent stage.</li> <li>Differentiation of male genitals. Anomalies: Hypospadias, epispadias, micropene, bifid penis.</li> </ul>	

<ul> <li>Differentiation of genitals female and gonadal intersexual stage. Androgen insensibility syndrome.</li> <li>Sexual development disorder: 46XX, 46XY</li> <li>Differentiation of male genitals.</li> </ul>
<ul> <li>NERVOUS SYSTEM Generalities</li> <li>Neurulation.</li> <li>Ventricular system and choroid plexus.</li> <li>Histogenesis of the nervous system.</li> <li>Development of the spinal cord and meninges</li> <li>Differentiation of neural tissue.</li> <li>Formation of meninges.</li> <li>Spinal cord development. Myelination.</li> <li>Position of spinal cord in embryo, fetus, new born and adult.</li> <li>Congenital anomalies of spine: hidden spina bifida, cystic spina bifida (meningocele, myelomeningocele), Chiari malformation.</li> </ul>
Encephalon development Cerebral vesicles, primary

	and secondary.	
	<ul> <li>Morphogenesis of</li> </ul>	
	rombencephalon: cranial	
	nerves (Glosopharingeal	
	IX. pneumogastric X.	
	Spinal XI e Hipoglossal	
	XII)	
	Morphoogenesis of	
	metencenhalon: hulde	
	corebolum and cranial	
	perves: Trigominal V	
	ovtornol oculor motor VI	
	Facial VII, Auditory VIII.	
	• Worphogenesis of	
	midbrain: Roof, tegment	
	and peduncular region,	
	Edinger Westphal nuclei	
	and cranial nerves:	
	common ocular motor III	
	and trochlear IV.	
	<ul> <li>Morphogenesis of</li> </ul>	
	diencephalon: Epiphysis,	
	epithalamus, thalamus	
	and hypothalamus,	
	mamillary bodies,	
	infundibulum.	
	<ul> <li>Development of neuro</li> </ul>	
	and adenohyphysis	
	Morphogenesis of	
	telencenhalon	
	Development of striatum	
	and basal ganglia	
	(caudate and lenticular	
	- Congonital anomalica:	
	hypophysis (laringeal	
	nypopnysis and	

creaniofpharyngeoma), holoprosencephaly, meningocele, menin- goencephalocele, meningohydroencephaloc ele, anencephaly, exencephaly, hydrocephaly, microcephaly.	
Eye development • Components. • Formation of the optic cup, cornea, crystalline; sclera and choroid; conjuntiva and eyelide • Congenital anomalies:	
Anophthalmia, cyclopia, synophthalmia, iris coloboma, aniridia, aphakia and congenital cataract.	
Ear development Internal development: • Formation of otic placode • Derivatives of saccule: cochlear duct, Corti organ. • Derivados del utricule:	
Semicircular ducts and ampollas. Middle ear development: • Timpánic cavity, Eustachian tube,	

	External ear development: • External auditory canal, eardrum	
	<ul> <li>Anomalies: Persistence of meatal plug, meatal, anotia, appendix and pits.</li> </ul>	
	<ul> <li>Procedural content:</li> <li>Uses the photonic and stereoscopic miscroscope correctly</li> <li>Analysis and synthesis of information</li> <li>Elaborations of concept mas, summaries, schemes, etc.</li> <li>Apply concepts to diagnose a congenital abnormality</li> </ul>	
	<ul> <li>Attitudinal content:</li> <li>Self-stufy habits.</li> <li>Discipline</li> <li>Respect to human material</li> <li>Take care of the educational facilities</li> <li>Respect among peers.</li> <li>Respect for professors, acholarship assitants, and administrative personnel.</li> <li>Correct use of language.</li> </ul>	
	Wear properly the	

			laboratory coat	
			Dovelopment of creative	
			• Development of creative	
			trinikirig.	
Third Partial Exam				
Final exam				
7. Summative I	valuation:	1		1
Clinical correlat	ed Case resolution	5%		
Self-evaluation	on workbooks	10%		
Reading reports	s on general and special embryolo	gy3%		
Oral presentation	on on general and special embryol	logy2%		
Midterm exams				
The	oretical	40%		
Pra	ctical	10%		
Final exam		20%		
Course Integrat	ive Product			
Total		100%		

## 8. Course Integrative Product.

Written report and Oral Presentation on a congenital abnormality which involves the correlation clinical-basic. It's integrated in two sections: the first one, an extensive printed document with the case research. The second part, an oral presentation in front of the class using electronic tools and divices.

## 9. References

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## APPENDIX.

## ASSESSMENT AND WORKLOAD

	Module workload	Number of hours	Percentage	
Contract hours	Class-based instruction	80h (57.1%)		
Contact nours	Clinical case resolution	6h (4.2%)		
	Self-evaluation on workbooks	40h (28.5%)		
	Reading reports		66.6% =	
	Oral presentation	2h (1.4%)	140 hours	
	Course Integrative Product (CIP)	2h (1.4%)		
	Exam taking	5h (3.5%)		
Indonondont	Study	60h (85.7%)	33.3%=	
study	Exam preparation	10h (14.2%)	70 hours	
Total hours of the workload: 30 hours X 7 credits UANL/ECTS*		210 h		

\*European Credit Transfer and Accumulation System 1 UANL credit = 30 hours

NOTE: Rubrics, checklists and evaluation formats are elaborated by using the performance criteria described in each stage of the module.

### SUPLEMENTO COVID-19

Siguiendo las recomendaciones de la Secretaría de Salud del país y la Rectoría de la Universidad, ante la coyuntura de salud COVID-19, la organización de la docencia desde marzo del 2020, seguirá un modelo híbrido, donde la docencia se ajustará a los horarios aprobados por la Secretaría de Salud siguiendo un modelo de Presencialidad / No presencialidad en la medida en que las circunstancias sanitarias y la normativa lo permitan. Los estudiantes asistirán a las clases de manera no presencial mediante la transmisión de las mismas de manera síncrona/asíncrona vía "on line".