

PREGNANCY AND DELIVERY

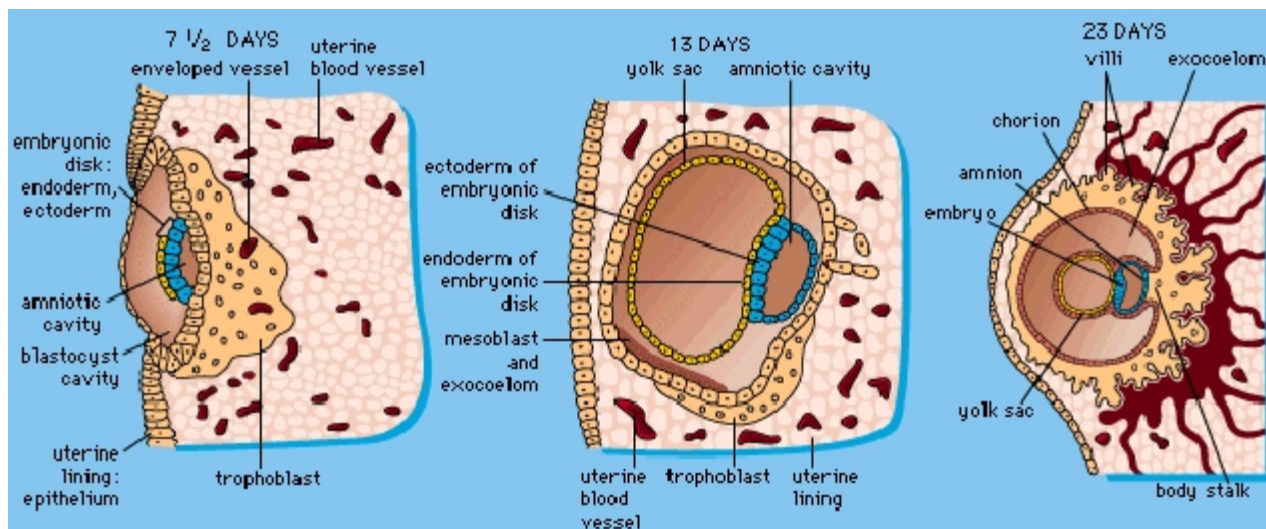
4 June 2003, 4 June 04, 2 June 2006, 2 June 20
Campbell's 6th: 992-1009,
7th: 979-984, 987-1001,
Sadava's 8th: 920-939

Fertilization (p 922)

nucleus enters,
flagellum and
mitochondria do not.
Cleavage (p 924)

Implantation (p 925)

triggers formation of
chorionic
gonadotropin, acts like
luteinizing hormone,
maintains the corpus
luteum so that estrogen
and progesterone continue to be released.



First trimester:

an embryo, major dev. processes:

2nd week: ecto and endoderm form

3rd week:

gastrulation: formation of mesoderm (p 927, 928, 931)

neurulation: formation of neural tube (p 933)

organs formed

Note that **teratogens** are especially potent in first trimester,
smoking, drinking, drugs

Second trimester (p 935) placenta begins to functions (releases
estrogen and progesterone). Now a fetus.

organs continue to develop

hands and feet form by apoptosis

Third trimester primarily one of growth, preparation for birth,
maturation of respiratory system

Nagele's rule: subtract 3 months add 7 days to day of
start of last menses (10% on day, 50% wk)

Stages of Labor, initiated by oxytocin (p 981)

position of fetus, occipital versus breech
perineum, distance between ischial tuberosities

see stages on p 981:

- 1) **Dilation of cervix** effacement and dilation (about 20
hours), 10 cm dilation
- 2) **delivery of baby** descent thru birth canal, crowning,
head, arm, body
- 3) **delivery of placenta**

Apgar scores, score 0-2 for each: color, respiration, heart
rate, reflexes, activity

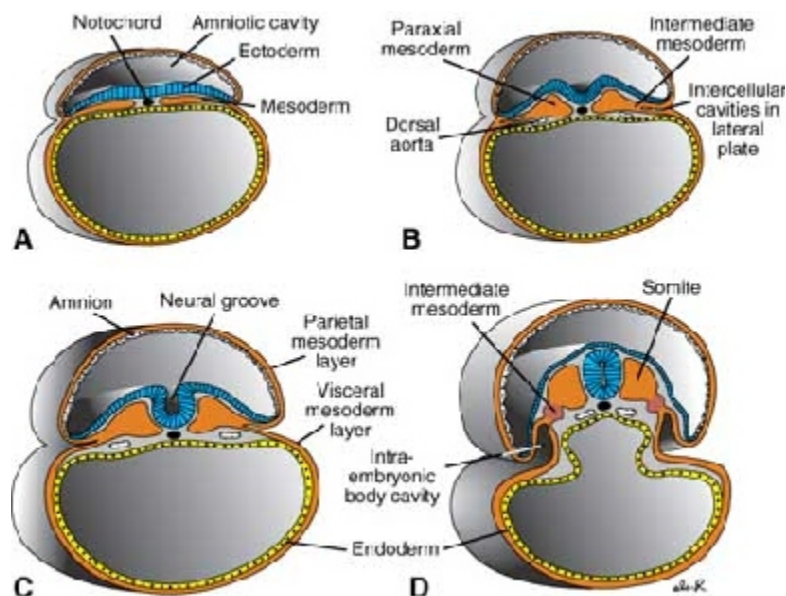
7-10 at 5 minutes is normal, 0-3 is a problem.

colostrum and health passive immunity by absorbing
antibodies from mother

Established emotional bond, sense of security

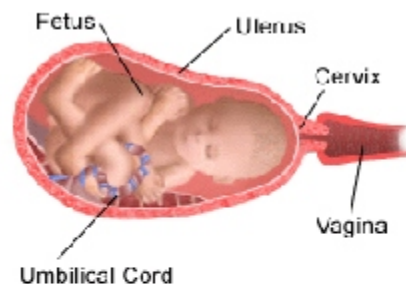
breast feeding

importance of constant stimulation, to brain development.

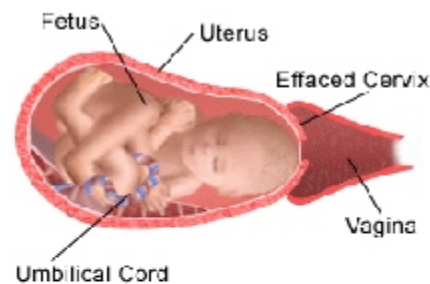


Stage 1

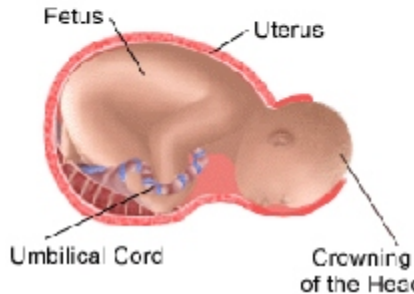
Initial (Latent) Phase



Active Phase



Stage 2



Stage 3

