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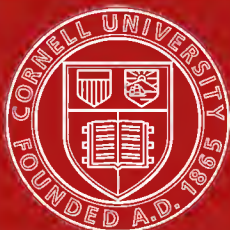
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# ANATOMICAL NAMES

ESPECIALLY THE

## BASLE NOMINA ANATOMICA ("BNA")

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NEW YORK  
WILLIAM WOOD & COMPANY  
MDCCCCXVII  
E.V.

A.369829

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## PREFACE.

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Anatomic terminology began when primitive man first assigned names to parts of the human body. These terms have increased in number until the science of anatomy is in danger of being submerged by its own terminology. Over 50,000 names have been given to some 5,000 structures. The purpose of this book is to help the student, teacher and clinician to become familiar with 5,000 international BNA terms and to discard upwards of 45,000 synonyms.

When the science of anatomy was in a formative stage, when the knowledge of the human body and its structures was still very limited, the number of technical terms was naturally small. At the time of Hippocrates some terms like *γονδυλώδης*, *χονδρώδης* were repeatedly used in the same meaning, and therefore must be considered as technical terms. Aristoteles had a much larger knowledge of anatomy and by him the technical vocabulary was considerably enriched, but the first one who created a comprehensive anatomic language was Galen of Pergamus. It can truly be said, that under him medical science in general and anatomy in particular attained a high state of perfection and completion. His nomenclature, derived from the Greek, is very extensive and a very large percentage of his terms are still in use.

After the decline of Greece, the center of general progress shifted to Rome. But although the Romans gave us the foundation of the still existing civil law, they accomplished very little in medicine. The medical art was entirely in the hands of strangers, especially Greeks and freedmen. There is found very little of medicine in Roman literature and even Celsus who wrote the "Medicina" was probably not a physician. He was the scion of a noble family who wrote books on very many branches of science and it has been said that his "Medicina" was nothing more than a clever compilation of notes of physicians of his time. The first chapter of the fourth book and the first of the eighth book, of his "Medicina" contain short descriptions of the bones and intestines with a number of new anatomic terms. Almost all the terms used by him are Latin, but occasionally he uses Greek names like *γαρωτίδες*, *οὐρητήες* always pointing out that they were introduced by the Greeks.

Many of the terms found in Celsus' "Medicina" are still used in our nomenclature.

During the medieval period the sciences in general were confined to the monasteries, where the monks used the Latin language in speaking as well as in writing; since the quality of their Latin was by no means classic, many barbarisms and inaccurate terms were embodied in the anatomic language. The science of medicine was acquired by the monks in part directly from the Greeks and in part through the Arabians, who commented extensively upon the books of Galen without adding anything noteworthy. Naturally then, our nomenclature was influenced somewhat by the Arabic, and we find some Arabic hybrids such as: *salvatella*, *saphena*, and *nucha*. The most of these terms, however, can be traced back to the Greeks.

André Vesal, the great reformer of anatomy, wrote in Latin and for the most part used a Latin terminology. He also used some Greek terms; often with Latin endings, as *colum*, *hyoides*, *peritonaeum*, *stomachus*. His terminology is on the whole grammatically and philologically correct, although some words might be objected to, like *dorsalis* (Latin, *dorsualis*), *cavitas* (Latin, *cavum*) and *epiglottalis* (Greek with Latin ending). Vesal recognized the unsatisfactory condition of the nomenclature and complained that explanation was made difficult by the great number of existing terms; that many different names were used by various authors and even by the same author to designate a given structure.

After Vesal, new discoveries required the coining of new terms which were derived in the conventional way from the Greek and Latin; but the anatomists of those times were not in possession of a knowledge of the ancient languages intimate enough to avoid errors and mistakes.

The foramina in the bones, the muscles attached to the bones, the vessels and nerves following them were designated only by numbers. These numerical designations were taken from Galen by the physicians of the 15th and 16th centuries, but with each new discovery and each change in interpretation these numbers had to be changed, the result of which was a hopeless confusion.

Jacobus Sylvius (Jacques Dubois) was the first to give names to most of the muscles, vessels, etc. Laurentius, Court Physician of Henry IV of France, justly says: *J. Sylvio haec prima debetur laus, quod musculorum et vasorum omnium sylvam ac confusionem in exquisitam ordinem digesserit et propriis nominibus designarit, quae nunc ab omnibus anatomicis retinentur.* C. Bauhin, Professor in Basle, seems to have been the first to use adjectives with the ending *-ideus*, to denote "referring to a thing," and with the ending *-ides*, to denote "similar to." Casserius

uses *arytainoeides*, *crycoeides*; Bucretius speaks of *ossa sesamoidea* and *sesamoidea*; also of *m. hyothyroides*, *sternothyroideus*, *miloglossus*, *ceratoglossus*. Spigelius mentions terms like *geniohyoideus*, *oesophagiaeus*, *sternothyroideus*, *hyothyroides*, *radieus*. Thomas Bartholinus uses *stylopharyngaeus*, *deltoides*, *mastoideus*, *pectinaeus*, etc. Thus the anatomists used unsystematically adjectives with these different endings.

Latin was preferred by scientists during the early part of the 19th century, although some attempts to use the modern languages were made. We therefore can account for the fact that Latin and Latinized Greek words were retained in scientific nomenclature, and that new terms were coined in the conventional way. Indeed, the Latin and Greek terms were so intimately connected with scientific thinking that they could not be severed from the subjects which they designated. During the end of the medieval period, the barbers were the exponents of common surgery and, therefore, the language of the country was used. Thus, German anatomic names began. Some of the classical anatomic books were translated into German as early as 1733, as were also some of the English and French anatomies. In 1781 a reprint of Vesal's drawings was made by Leveling with explanations in German. Leveling collected the German terms and their Latin synonyms although the latter were only partially taken from Vesal. Many of his terms, such as *arytaenopiglotteus*, *gluteus*, *radiaeus*, *solaeus*, and others, are grammatically and philologically faulty.

In the Romanic countries and in England, the terms were more or less adapted to the language of the country. While the Germans used adjectives with the endings *-ides* and *-ideus*, the English used terms with the endings *-id* and *-idean*, the French with the endings *-ide* and *-iden*, the Italians *-ide* and *-ideo*. Direct translations into the Romanic language and into English, were adopted as purely technical terms.

About the middle of the eighteenth century anatomic teaching was begun in America, and with it came varied translations from foreign works. This gave rise to the use of a number of terms for the same structure. Again the same term was frequently used for different structures. This multiplication of terms was not at all peculiar to America; indeed it prevailed to an alarming degree in Germany, England and France. There thus piled up such a mass of technical terms that the science of anatomy staggered beneath its own terminology.

As a typical illustration of the time and energy consumed in acquiring a working vocabulary one needs but recall that the Cartesian "seat of the soul" was designated as the pineal body, pineal gland, pineal organ; parietal body, parietal gland, parietal organ; third eye, median eye, parietal eye, pineal eye; *corpus pineale*, *glandula pineale*; *epiphysis*, *epiphysis cerebri*; *penis cerebri*, *pinus*, *conarium*. Were the synonyms from

the French and German added to these, the total would be approximately fifty names for this one structure. Contrast this condition with that which exists today in electrical science, in which one finds universal terms such as ampere, ohm, and volt.

Such a status is so harmful to teaching and so stifling to research that many attempts have been made to free the student, teacher and investigator from this incubus. Some progress was made by Henle, Gegenbaur, Krause, Sappey, Testut, Quain, Macalister, Wilder and others. These individual efforts, however, have never obtained general recognition. It thus became more and more apparent that any list of terms must have more than individual prestige, and that some cooperative plan was necessary.

Such a plan was outlined by the German Anatomic Society at its first meeting in Leipzig in 1887, and its officers were requested to work out the details. The officers selected a revision Commission which was enlarged from time to time, until it included the leading anatomists of the world. Those who took an active part in the work were von Bardeleben, Braune, Cunningham, Henke, O. Hertwig, His, von Kölliker, Kollmann, Krause, von Kupffer, Lebocq, Merkel, von Mihalkovics, Rüdinger, Thane, Toldt, Turner, Waldeyer and Zuckerkandl.

Certain limitations and fundamental principles were agreed on at the beginning; others arose as the work progressed. The work was limited to descriptive human anatomy, and further restricted to the names of those structures which can be seen by the unaided eye, or at most by the aid of a simple hand lens. Latin was adopted as the official language. As the work progressed, a number of rules were adopted, yet none became a rule without exceptions. The more important of these were the following: each part to be named shall have only one name; the name must be grammatically correct; the name must be as short and simple as possible; the names shall be simply memory signs and need not be explanations; related terms, as far as possible, shall be similar, for example, femur, arteria femoralis, vena femoralis, nervus femoralis; adjectives, in general, shall be arranged with their antonyms, as dexter, sinister; major, minor; superficialis, profundus.

The commission, under the guidance of its editor, W. Krause, extended its work over a period of six years. From upward of 30,000 Latin terms about 4,500 were selected. Many of these terms could not be agreed on, either through correspondence or personal discussions, but had to be decided on the basis of special dissections. On one point the Commission was unable to reach a conclusion, and this was concerning the retention of proper names. This was finally settled by including them in brackets following the objective names, thus leaving to time the final decision on this point. In some of the modern textbooks they are

included. In the textbook by Krause, editor-in-chief of the Commission, they are not included. When the list was nearly completed it was turned over to a special editing committee, consisting of His, Krause and Waldeyer. After each term had been subjected to a thorough re-examination by this committee, the whole list was presented for final criticism to the Anatomic Society at its annual meeting in Basle in 1895. After careful consideration it was finally adopted. It has since been known as the "Basle Nomina Anatomica" or by its official abbreviation BNA. It was at once adopted by a great majority of European anatomists and has since been accepted by American anatomists. It is safe to say that the greater part of the recent anatomic literature of the world is accessible only to those who have acquainted themselves with the BNA.

During the twenty years since its adoption, each term has been carefully studied, and some pertinent suggestions have been made. Lesbre says that the terms should be applicable in comparative anatomy. Chaine would have the muscles so named that the terms could be used in comparative myology. Braune suggests changing the names of the arteries of the hand and foot so that the names could be used for similar arteries in domestic animals. Some day we may be able to bring about these desired improvements, but this cannot be done until homologies are better known. The fields of comparative osteology and myology are still under investigation, while the unraveling of the homologies of nuclear masses and fiber tracts in the central nervous systems of vertebrates scarcely has begun.

Other suggestions have been made concerning the significance of certain terms. Von Bardeleben says that it is inconsequent to call the gland beneath the mandible "glandula submaxillaris," since it is obviously a glandula submandibularis. Austerlitz takes exception to the term "thalamus opticus," since it is no sleeping room; to "aquaeductus cerebri," since it contains no water. Had these names been changed by the commission, why should they not have dropped "acetabulum," since it is no vinegar cup; "hippocampus," since it is not a sea horse; "zygoma," since it is not an ox yoke? "Plexus lymphaticus" is not a crazy plexus; "nervus pudendus" is not a shameful nerve. In short, any attempt to have substituted objectively correct terms would have been in direct opposition to the aim of the Commission. Its aim was to select the most suitable terms from the many in current usage or from those which had previously been used.

Triepel, after carefully studying the BNA, suggests substituting certain terms for those adopted, namely: articulus for articulatio; bifurcus for bifurcatus; bipennis for bipennatus; dorsualis for dorsalis; glomeriformis for glomiformis; glomerulum for glomerulus; lumbaris for lumbalis; plicatura for plica. Were these changes made as suggested by

Triepel, they introduce nothing more than a different spelling of the same words.

Were scientific opinion to sustain all the objections brought against the BNA, less than three per cent. of the terms would be affected. A system which so nearly fulfills all demands has naturally become an international anatomic language. On the whole, it may be said that the more critical the study of the BNA, the more apparent becomes its merits.

The question as to whether terms should be written in Latin or in the language of the author is a matter of choice. The commission expressly states that while its official language is Latin, it does not wish to impose the slightest restriction on the translation of these terms into any language. Anatomists, however, are using quite uniformly the Latin terms, and are thereby greatly facilitating the development of anatomic science through a common language.

Since the BNA has become the language of the anatomists, may they not hope for the cooperation of the clinicians in clearing the field of the thousands of useless synonyms? At the present day it is scarcely possible to find a students' textbook on any clinical subject which evinces the slightest concern as to the uniformity of its anatomic terms.

There are a number of reasons why the BNA has not been more widely adopted. One is because the terms are arranged according to systems, which makes it difficult to find a given term. Moreover, in such an arrangement it naturally is inferred that all the bones should be found under *Osteologia*; all the muscles under *Myologia*; all the arteries and veins under *Angiologia*; all the nerves under *Neurologia*. Such an inference, however, is entirely erroneous. The temporal bone (*os temporale*) and its subdivisions are given for the most part on pp. 30-31; the semi-circular canals (*canales semicirculares*) on p. 98; the auditory ossicles (*ossicula auditus*) on p. 99. The muscles of the head (*musculi capitis*) on p. 46, must be supplemented by those on pp. 59, 95, 96, 97, 100, before the list is complete. *Angiologia* proper, pp. 67-79, must be extended to include the vessels on pp. 56, 57, 61, 87, 96, 98. This is equally true of other divisions and subdivisions.

Another reason is that there is nowhere a complete alphabetical list of these terms. It, therefore, is necessary to confirm all terms by consulting the original systematically arranged BNA. Again the BNA as adopted by the Anatomic Society was accompanied by an exhaustive report written by W. His. This report not only gives the details of the organization and work of the revision committee, but also the reasons for including or rejecting certain terms. This report has never been accessible, excepting in the original German. The most serious of all the difficulties is to find the BNA equivalents of the tens of thousands of synonymous terms which are scattered through the anatomic literature.



Some years ago the author experienced great difficulty in applying the BNA terms to the various structures of the human body. In order to facilitate this work all these terms were arranged alphabetically and cross-reference numerals affixed to each, citing the page and serial number of the same term in its systematic position. In order to make the report by His more accessible it was translated into English.

With this material in hand and a realization of its value, it was decided to supplement the alphabetical list of BNA terms through the addition of some twenty thousand synonyms, each of which bears numerals citing the equivalent BNA term. Since most of the Latin synonyms have been collected by Henle, Krause, Merkel, de Terra, and others, it was not a difficult task to place these in their alphabetical position. The gathering of the English terms and the finding of their BNA equivalents was a much greater task, and in this respect the index is far from complete.

There also has been included a Biographical List containing some eight hundred brief sketches of the leading anatomists of the world by Roy L. Moodie.

We are especially indebted to Martin W. Schmidt for help in the translations; to A. M. Schwitalla, S. J., for going over the entire list; to Tom Jones and Esther Broday for much aid; to Messrs. Birsner, Boelio, Carothers, Fisch, Norwood, Waldman, Miss Hall and others for valuable assistance. We would likewise express our obligations to the publishers for their painstaking care in the preparation of the work.

The work is presented with the hope that all who use anatomic names will help to conserve the energy which is now wasted in learning the tens of thousands of anatomic synonyms when less than five thousand terms will designate the structures with greater precision.



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**THE BASLE NOMINA ANATOMICA**  
**[BNA]**

**BY**  
**WILHELM HIS**

**TRANSLATED AND REPRINTED FROM**  
**THE ARCHIV FÜR ANATOMIE UND ENTWICKELUNGSGESCHICHTE**  
**SUPPLEMENTAL BAND 1895**

The lists of anatomical names have been reproduced exactly from the original. Some of the obvious errors in the original are the following:

- p. 42, Nos. 34, 35 read Ligg. instead of Lig.
- p. 45, Nos. 56, 57, 58 read Mm. instead of M.
- p. 47, No. 49 read [Spigeli] instead of [Spige]
- p. 51, No. 4 read obturatoris instead of obturatorii
- p. 56, No. 65 read fibrosa instead of fibrosus
- p. 75 Nos. 74, 75, 76 read Vv. instead of V.
- p. 77 No. 51 read V. instead of Vv.
- p. 90 No. 65 read Nn. instead of N.

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### ABBREVIATIONS:

A. Arteria.	n. nervi.
a. arteriae.	Nn. Nervi.
Aa. Arteriae.	Oss. Ossa.
Gl. Glandula, glandulae.	oss. ossis, ossium.
Lig. Ligamentum.	R. Ramus.
lig. ligamenti.	r. rami.
Ligg. Ligamenta.	Rr. Rami.
M. Musculus.	V. Vena.
m. musculi.	v. venae.
Mm. Musculi.	Vv. Venae.
N. Nervus.	

## INTRODUCTION.

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In the year 1887 the Anatomical Society, which since has grown very vigorously, resolved at its first session in Leipzig to undertake a revision of the entire anatomical nomenclature, and authorized its officers to begin the necessary preparations for the execution of the undertaking. I had suggested this matter at that time and the board of directors decided at first to choose a preliminary Commission of two members. After a lengthy discussion the board resolved, on the motion of Mr. Leuckart, that the officials of the entire Society discuss such an undertaking.<sup>1</sup>

The reasons for a revision of the nomenclature were very obvious. Indeed an anarchy had reigned here under which teachers and pupils equally suffered and which necessarily retarded investigation. The stock of terms handed down from previous centuries was by itself more than sufficient, and we long had been accustomed to seeing double or multiple designations for many structures, e. g., *M. trapezius sive cucularis*; *N. vagus sive pneumogastricus*; *M. petrosalpingostaphylinus sive levator palati* and similar double names were repeated from textbook to textbook, from lecture to lecture. Occasionally the *luxus* went considerably farther and designations like *Valvula coli, sive ileocecalis, sive Bauhini, sive Tulpii, sive Falloppiae* gave to the teacher occasion for excursions into historical territory and for the discussion of fossil priority questions.

The merit of conscious rupture with these old harmless traditions belongs to J. Henle, to whom we are indebted also for the subsequent introduction of good orienting designations, such as sagittal, frontal, medial, lateral. Henle accepted only one name for each structure and relegated synonyms to notes beneath the text. Furthermore Henle rejected personal names and replaced them throughout by objective terms, giving as a reason that the current names often implied historical injustice.

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<sup>1</sup> Report on the transactions of the first meeting of the Anatomical Society. *Anatomischer Anzeiger* Vol. II, p. 403.

If we wish to be frank, we must say that Henle's effort to simplify the anatomical nomenclature, did not at first bring us nearer to the coveted goal but carried us from it. At least since the publication of Henle's textbook the mix-up has become more obvious. Henle himself introduced many new names. While some teachers immediately followed him, others remained stationary, still others were eclectic and maintained their right to coin names. Thus the condition gradually has come about that each school has its peculiar language. The student going from one university to another becomes tangled up in his hard acquired treasury of knowledge; even the physician can follow readily only that literature which uses his own acquired anatomical language. This state of affairs is so harmful to instruction and so humiliating to science, that all who foster anatomy are impressed with the necessity of a change of conditions. Moreover the proposition to do away with this nuisance immediately found general approbation in the Society and was gladly put into a resolution. But when the officers began the execution of the detailed work the first difficulties very quickly came to light. Since then the number and importance of the difficulties have notably increased; but at the same time we have reached the conviction that the present obstacles are not insurmountable. It is necessary, however, for the attainment of the object in view to have the good will of all interested and above all the thorough cooperation of the members of the Anatomical Society.

It soon became very clear to the officers, that an undertaking which involved so much detailed work could not be done off-hand; even less so since the administration changes from year to year. In a presidential address in Berlin, in 1889, I brought up for discussion the most important difficulties which stood in the way of a uniform nomenclature. Therein I emphasized the necessity of turning over the revision of the anatomical language to an appointed Commission; and above all of securing an editor who would make the necessary investigations his sole work for several years. In the business meeting of the session referred to, the ideas suggested were formally adopted. A Commission was appointed which should undertake, in the spirit of the above mentioned opening address, the revision of our anatomical terms and the preparation of a uniform nomenclature. v. Kölliker was chosen as chairman of the Commission while O. Hertwig, His, Kollmann, Merkel, Schwalbe, Toldt, Waldeyer and the Secretary of the Society, K. v. Bardeleben<sup>2</sup> were chosen as members of the same.

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<sup>2</sup> Transactions of the Anatomical Society at its 3rd meeting in Berlin 1889. Ergänzungsheft of the Anatomischer Anzeiger. Vol. IV, p. 131.



Two difficulties confronted the Commission: the securing of a competent editor and the obtaining of the necessary funds. As editor the Commission was fortunate enough to obtain our colleague Krause who through his broad literary attainments seems to have been trained for just such a task. Krause, through all these years, has shown indefatigable diligence and still more untiring patience and has complied with all the demands which the work itself and the many individuals interested have placed upon him. I know from my own experience that during this time he has written an enormous number of letters and compiled a still greater mass of detailed correspondence; moreover he has never hesitated to carry on a correspondence, even for weeks, in order to set a single term right or to put it in its proper place. When the task begun will have come to a satisfactory termination, then we shall have to thank, especially, our editor.

The necessary funds we originally estimated at 10,000 marks, a sum which probably will be exceeded but slightly. The amount was too great to be borne by the Society alone. The Commission through a number of its members applied for assistance to the Royal and the Imperial Royal Academies of Sciences of Berlin, Munich, Vienna, Budapest, and the Royal Society of Sciences in Leipzig. These Societies have responded in a very liberal manner and we are indebted to them for a sum total of about 8,090 marks. The Anatomical Society itself thus far has contributed a little over 3,800 marks toward the expense of the undertaking. The strong financial support which we have received from the higher scientific societies has been accepted as a special proof of confidence. It, however, places upon us a special obligation to justify the confidence shown and to bring the task to a satisfactory conclusion.<sup>3</sup>

### *The Scope of the Work.*

If we did not wish to be lost in the infinite, it was necessary right at the beginning to set the limits and not to extend them too far. It is obvious that we could not think of settling the terminology in domains which are still undergoing a more or less active scientific fermentation.

<sup>3</sup> There has been given us by:

Die k. Akademie der Wissenschaften in Berlin.....	M.	3000
“ “ “ in München .....	“	1500
“ k.k. Akademie der Wissenschaften in Wien.....	“	1568.97
“ kgl. Gesellschaft der Wissenschaften in Leipzig.....	“	1500
“ kgl. ungarische Akademie .....	“	520.50
“ anatomische Gesellschaft .....	“	3843.95

For this reason it was decided, after some preliminary experiments, to consider descriptive anatomy alone; and this only in so far as it is the object of investigation with the naked eye; or at most with the aid of a simple hand lens. The few attempts to take up terms of microscopic anatomy — such as the layers of the cerebral cortex or of the retina — were discussed in several meetings and were defeated through the firm opposition of the Commission. Another limitation which we imposed upon ourselves is the use of a single language. We have endeavored to establish terms only in Latin upon the assumption that everyone must be permitted to translate these terms more or less freely into his own language. The word “Brustschlüsselzitzenfortsatzmuskel” is a literal, the word “Kopfniker” a free translation for “sternocleidomastoideus,” and no matter how correct the former may be, many will prefer the latter.<sup>4</sup>

The question as to how far our work should partake of an international character was of a much more delicate nature. The consideration of this question led to rather explicit correspondence and discussion, and I shall try to define our attitude toward the same in the clearest and most disinterested manner possible.

First of all it should be emphasized that the work on terminology was begun by the Anatomical Society and that the same, up to the present day, must be considered an affair of the Society.

The Anatomical Society, although founded in Berlin, and thus far has held its meetings only in cities where the German language is spoken, has not been from the day of its foundation merely German in character. Indeed the list of members includes names from America, Austro-Hungary, Belgium, Denmark, England, Italy, Russia, Sweden, Switzerland, and also one from France. According to v. Bardeleben the present membership shows 145 German and 129 foreign members. In view of its constituency the Society might perhaps have had good reason to undertake immediately the establishment of an international anatomical language. A French proverb says: “Qui trop embrasse, mal étreint,” therefore in 1889 our Society contemplated only uniformity among the German speaking anatomists; and the Commission in the beginning was composed only of such. But as my opening address shows,<sup>5</sup> cooperation with anatomists of other nationalities was considered especially desirable.

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<sup>4</sup> In the second votings on Myology, Krause still expressed a desire to give the German equivalents of the accepted Latin terms. Through the wish of the Commission this was later left undone.

<sup>5</sup> l. c. p. 9.

Indeed Krause in his first volume on Myological Terminology has given, besides the German terms of Gegenbaur, Henle, Hyrtl, Krause, and Langer, the English terms by Quain and the French terms by Sappey.

In 1890, when the Anatomical Society and the Anatomical Section of the International Medical Congress met at the same time in Berlin, it was but a natural consequence that the Commission came in touch with the anatomists of other countries and at this time Sir Wm. Turner, Cunningham, Romité and Leboucq were requested to join the Commission. Later, in Vienna, Thane was also enlisted. Especially the last three of these gentlemen have taken part in the work of the Commission with the greatest zeal and interest not only at that time but also at subsequent meetings in Munich, Vienna, Göttingen, and Strassburg.

Desirable as it is to have a scientific language which is the same in all lands of culture, it seems that at present the needs of the various countries are not the same throughout, and we shall be obliged perhaps for some time to come to do without an absolutely uniform terminology. Under the circumstances our efforts must be toward a diminution as far as possible of the remaining differences. The Anatomical Society of Great Britain appointed a special Commission in 1893 for the purpose of adapting our suggestions to the English needs.<sup>6</sup> Somewhat earlier (1890) a Society of American Anatomists tried its hand on the question of terminology. The opinions of the English Commission are not yet at hand, but the American Commission and its very zealous member, Mr. Wilder, have published a series of small papers and pamphlets.<sup>7</sup>

The object pursued by the American Commission is the same as ours, but the pathways to the goal are essentially different from those which we have chosen. The principle is common that each part shall have only a single name and that this name shall be as simple and characteristic as possible. Wilder and his colleagues go further and want pure "mononyms" only; i. e., substantives without farther additions. They say e. g. *praecornu* and *postcornu*, instead of *cornu anterius* and *cornu posterius*, *postcava* instead of *vena cava posterior*, etc. At the

<sup>6</sup> *Journal of Anatomy and Physiology*. 1894. Vol. XXVII.

<sup>7</sup> Among the writings of Wilder, I cite as the principal ones: *The fundamental principles of anatomical nomenclature*, by Burt G. Wilder, M. D., from the *Medical News*, 19 December 1891. *Fissural diagrams of the human brain*. *Macroscopical vocabulary of the brain* presented to the Assoc. of American anatomists at Boston, Mass., 29 Dec. 1890.—*American Reports upon Anatomical Nomenclature, 1889-1890*, with Notes by Wilder, Cornell University, 5 Feb. 1892.

present time we have Wilder's revision of the brain nomenclature according to the suggested principles, and this first attempt permits us to form an opinion as to the consequences following the prevailing effort to use mononyms only. We fully agree that the word *Thalamus* could be used briefly in the place of *Thalamus opticus*; we even do not object if in daily life *Dura* be used for *Dura mater encephali*; in all cases in which misinterpretation is not possible. But we cannot admit that words like "*Medipedunculus*" for *Pedunculus cerebelli ad pontem*, indicate either linguistic or practical progress. The contraction of several words into one may be, under certain conditions, a simplification. But like the abbreviated telegraphic code it may lack clearness and thus its purpose becomes negative because such coined words require special explanations to be comprehended. *Medipedunculus* without qualification is incomprehensible; it should be at least *Medipedunculus cerebelli*, and preferable to this would be *Pedunculus medius cerebelli*, since the barbarously formed word *Medipedunculus* might be used equally well for *Pedunculus medius*, as for *Pedunculus medialis* or for *Pars media*, or *medialis*, *pedunculi*.

Wilder's list includes many ungrammatical word formations, and one need not be a philological pedant to be shocked by words like *Terma* instead of *Lamina terminalis*; *Postramus* (for *Ramus posterior arboris cerebelli*), etc. Many words, like *Cimbia* (*Tractus peduncularis transversus*); *Coelia* (for *Cavitas encephali*); *Aulix* (for *Sulcus Monroi*), etc., are, by the way, entirely new; or like *Isthmus* (for *Gyrus annectens*) used in a different sense than heretofore. I do not know how wide a circle of American colleagues Wilder has behind him. At any rate his method leads to the coining of an entirely new and for the most part strangely sounding language. On these grounds our Commission cannot follow him without renouncing our historical principles.

From the time when the scope of our undertaking was enlarged through the cooperation of English, Italian and Belgian colleagues, we felt the need of collaboration with our French colleagues. But since the latter did not attend our meetings we could bring about a collaboration only through the rather cumbersome medium of correspondence. We corresponded especially with Testut, the member of our society. I tried during my stay in Paris to interest Mathias Duval in our work, and finally, following a resolution of the Commission in Göttingen in 1893, we officially invited Duval and Testut to cooperate with us on the nomenclature. Only Testut answered, saying that according to his conviction a Commission on Nomenclature could expect dignified and lasting results only if it were really international, and each member appointed

an official delegate by his government. Thus Testut explained that he could take part in the work only when requested to do so by the Minister of Public Instruction. In earlier letters Testut had expressed the same idea and suggested that the German Government might take the initiative in this matter; and further that the selection of suitable anatomists for members of the Commission might be delegated to the Anatomical Society by the various governments.

Two considerations caused the Commission on nomenclature to give no further thought to the suggestions of Testut, inviting as they might appear at first glance. First, our Society, which solicited and accepted contributions from Academies and Scientific Societies for the accomplishment of its plans, is obligated to finish the work begun and cannot put it all at once on others shoulders. Besides as matters stand it appears almost hopeless to expect to reach the goal through the intervention of governments.

There exists a precedent for international adjustment of scientific terms in the establishment in 1881 of units of electric measurements. The President of the French Republic, at the time of the Exposition, invited foreign countries to send delegates to Paris to consider the adoption of common units of electrical measurements. The expression "volt," "ohm," "ampere," and the establishment of their values, common since that time, are a result of that conference in which the principal physicists of the world participated. The printed report on the Electrical Congress shows that twenty-eight countries were represented; among them were Central and South American: Columbia, Costa Rica, Venezuela, etc., and Asiatic, like Japan, totaling about 250 delegates. In our opinion the matters of anatomical terminology are essentially different from the affairs decided upon at that time. On the one hand it appears at the moment quite improbable that the various governments would take a sufficient interest in anatomical nomenclature to make it an object for common consideration; on the other hand the work of revising thousands of names is so extensive that its accomplishment by an International Commission could hardly be expected in a reasonable length of time. But above all it remains to be emphasized that the legal fixing of anatomical names for any period is impossible, because the progress of science itself requires a constant development of anatomical language. Science must be free in its language and has no reason to submit to the authority of the government.

Up to the present time the nomenclature was provided by individual writers — authors of textbooks and monographs. Many newly suggested words never came into use, others were used in a different sense than that originally proposed, others again were more or less widely

adopted. The success of a word has always been justification for its introduction into science. Not rarely fashion came into play and names in themselves absolutely correct were abruptly replaced by others scarcely as significant. If now the Anatomical Society tries to bring order into the existing literature it cannot *a priori* expect more than could the individual writers. It also will have to look finally for the justification of its work in the success of its undertaking. Its lists of names must merit preference through their usefulness, their precision of expression and the logical connection of the whole system. It is necessary that the advantages of the suggested nomenclature be satisfactory to, and accepted by, the greatest possible number of anatomists and physicians. Upon its merits, of course, depends the extent of its adoption. But the Society cannot exercise any restraint in this respect even upon its own members; it can only recommend. The better the new terminology is adapted to the existing needs of teaching and research, the surer are its prospects for general acceptance and lasting success. But even the best possible terminology, which conforms to the needs of the present day, may become lacking again in the course of years, and revision at certain periods will be an unavoidable necessity.

To return to the above mentioned question regarding the cooperation of governments in the establishment of anatomical names, such would not be precluded even after the completion of the work of the Anatomical Society. Indeed the Society might become the point of departure of a movement by one or another of the governments. If, for instance, our French colleagues would suggest to their Ministry, that the names accepted by the Society be made again the object of an international council of government appointees, the Society surely would not object and much less would it consider as fruitless its six years of work. But even the most formal governmental regulations will not be able to prevent the dissolution of an officially established language as soon as the same no longer conforms to the scientific needs of the times.

#### *The Plan and Achievements of the Undertaking.*

The first technical plan for the carrying out of the work on nomenclature was outlined by Krause and approved by the Commission. In order to get a definite foundation all the names in Gegenbaur's textbook were written in alphabetical order in vertical columns<sup>8</sup> and the

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<sup>8</sup> Gegenbaur's textbook was used as the basis for the formation of the lists of names, since for six years it represented the latest thorough revision of Anatomy.

synonyms from a number of other widely used textbooks placed in separate parallel columns. Comprehensive tables were thus prepared and copies were sent to the members of the Commission. The members were requested to underscore the most suitable of the names enumerated in each division, or in case it were thought best, they could propose new names. Moreover the members were requested to add to the printed lists any general or special remarks which might be suggested from the inspection of the tables and then to return them at a definite time to Krause. The first written vote was attempted on Myology and the result was encouraging, in that by the first vote 85% of the names in question received a majority,<sup>9</sup> (and indeed 80%, and in later votings 85% of Gegenbaur's columns). More than 40% were accepted unanimously; besides about 100 new names were suggested. In a second printed pamphlet the accepted, undecided and newly suggested names were sent to the members of the Commission and they were also informed of the remarks made by the individual members of the Commission on the occasion of the first vote. Inasmuch as the second written vote also left an undigested residuum of names, these were to be disposed of in personal sessions of the Commission. Thus Myology became the subject of the conference of the Commission at Munich, while it was the intention to finish the Osteology and Angiology in Vienna. The conferences of the Commission were held immediately following the yearly meetings of the Anatomical Society, thereby affording an opportunity to enlarge the Commission through the enlistment of additional experts. Thus in Munich, Braune, Henke, v. Kupffer, v. Mihalkovics and Rüdinger; and in Vienna, Zuckerkandl, became members of the Commission and participated in the deliberations.

In this manner we had progressed so far with the Myology, that at the close of the Munich conference in June, 1891, a pamphlet could be published which contained a total of about 300 names accepted by the Commission. The method which had led to rather satisfactory results in Myology proved hardly practicable in the much more extensive Osteology and had to be abandoned entirely in the other subdivisions of anatomy.

In the several written votes it was demonstrated, as is well understood psychologically, that the second and third votes on the undecided names did not differ essentially from the first. Likewise it appeared that the remarks handed in, and the new names suggested by the members of the Commission, found only inadequate consideration and therefore were

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<sup>9</sup> See pp. 14 and 15.

rejected almost entirely without further investigation; and yet just these remarks and new names were often the fruit of extensive work done by those who had special knowledge of the subject. This drawback had to be overcome and the Commission resolved accordingly in Vienna (1892) to discuss verbally, one after another, all the remarks recorded and terms suggested by its members. The resolution was quickly adopted but less quickly executed. In Munich hard work had already been exacted from the members of the Commission, since they were obliged, under the strict rulings of v. Kölliker, to listen to the papers and demonstrations of the Anatomical Society from 8:00 A. M. to 6:00 P. M., with only a short intermission, and immediately afterward had to confer on names until 9:00 P. M. In Vienna the sessions on nomenclature extended still further into the night, and resulted in an exhaustion on the part of most who were present which was very unfavorable for such deliberations. In spite of all efforts the Commission found itself still in the position of having finished only parts of its task, and so it finally adopted the expedient of appointing special committees and assigning to them subdivisions of the work. First, in Vienna, Merkel, Thane, and Toldt were requested to arrange the names of the vascular system (veins and lymphatics). Likewise on a later occasion Merkel, Rüdinger, and Toldt were apportioned the anatomy of the regions. The working over of the Syndesmology was assigned to Toldt alone.

The appointment of a special editorial committee as decided upon at Vienna was very important for the further progress of affairs. This committee (His, Krause, Waldeyer) was authorized to see that the nomenclature as a whole be given a uniform character. A systematic working together into a whole of the separately finished portions seemed to be a necessity because the votes taken at different times, often after long intervals and with their changing majorities, were necessarily followed by contradiction and lack of uniformity. It also happened that some indispensable names did not receive a majority and ran the risk of disappearing from the list; as was the case, at the first vote on Myology, with the *Tendo m. bicipitis*, *Adminiculum lineae albae*, *Plica cubiti* and others.

The editorial committee when it started work soon became aware that its work could not be restricted to a smoothing out of irregularities, but that it must go further. If it satisfied the requirements imposed it must everywhere go deeply into the individual questions and if necessary not shrink from a complete changing of the names already assigned. The Committee, during these last three years, has worked assiduously and has tried to clear up all the difficult questions and to bring about uni-



formity, partly by correspondence, and partly by personal interview; often through consultation with specialists. It was naturally much less easily accomplished in the domains of Neurology and Splanchnology than in Myology and Osteology. v. Kölliker was present at several meetings of the committee. His expert advice was also sought on the detailed anatomy of the brain. Colleague Toldt has taken part in the work to an especially great extent. The harmoniously worked out chapter on Syndesmology and that on Bursae are exclusively his work. Toldt also rendered great service in all other portions of the work by his critical remarks directed toward objective and formal exactness.

The following tabulation may serve as an example of the manner in which Krause arranged the votes from the collection of promiscuous votes of the members of the Commission. The figures attached to the names designate the votes received.

Gegenbaur	Henle	Hyrtl
Vestibulum labyrinthi (6)	Vestibulum (7)	Vestibulum
Fenestra ovalis (12)	Fenestra vestibuli (2)	Fenestra ovalis
Recessus sphaericus (12)	Recessus sphaericus	Recessus hemisphaericus
Recessus ellipticus (12)	Recessus ellipticus	Recessus hemiellipticus
	Sinus sulciformis (1)	
Crista vestibuli (14)	Crista vestibuli	Crista vestibuli
Pyramis (4)	Pyramis vestibuli (6)	Pyramis vestibuli
Recessus cochlearis (14)	Recessus cochlearis	
Maculae cribrosae	Maculae cribrosae	Maculae cribrosae
Oberer Siebflecken	Macula cribrosa superior (13)	Obere Macula
Mittlerer Siebflecken	Macula cribrosa media (13)	Mittlere Macula
Unterer Siebflecken	Macula cribrosa inferior (13)	Untere Macula
Knöckerne Bogengänge	Canales semicirculares (2)	Canales semicirculares
Canalis anterior (5)	Vorderer verticaler Bogengang (1)	Oberer Bogengang
Canalis externus (4)	Horizontaler Bogengang (2)	Aeusserer Bogengang
Canalis posterior (4)	Hinterer verticaler Bogengang (1)	Hinterer Bogengang

Krause	Langer	Various Authors
Vestibulum	Vestibulum	Vestibulum osseum
Fenestra ovalis	Fenestra vestibuli	Fenestra ovalis, Schwalbe, Fenestra ovalis, Quain, Fenêtre ovale, Sappey, Testut. Finestra ovale.
Recessus sphaericus	Recessus hemisphaericus (2)	Fovea hemispherica, Quain. Fossette hémisphérique.
Recessus ellipticus	Recessus hemiellipticus (2)	Fovea hemielliptica, Quain, Fossette semiovoïde. Fossette elliptique, Testut.
		Sinus sulciformis, Morgagni. Fossula sulciformis, Schwalbe (1) Recessus labyrinthi, Reissner. Fossette sulciforme Sappey. Gouttière sulciforme, Testut.
Crista vestibuli	Crista vestibuli	Crista pyramidalis. Spina vestibuli.
	Pyramis vestibuli	Eminentia pyramidalis. Pyramide
Recessus cochlearis		Recessus cochlearis, Reichert. Fossette cochléaire, Testut.
Maculae cribrosae	Maculae cribrosae	
Macula cribrosa superior	Macula cribrosa superior	Macula major, Tache criblée antérieure, Sappey. Tache criblée supérieure, Testut. Macchia cribrosa anteriore.
Macula cribrosa media	Macula cribrosa media	Macula minor, Macula major, Tache criblée moyenne, Sappey. Tache criblée antérieure, Testut. Macchia cribrosa mediana.
Macula cribrosa inferior	Macula cribrosa inferior	Macula minima. Tache criblée postérieure, Sappey, Testut.
Macula cribrosa recessus cochlearis		Macula cribrosa quarta. Tache criblée cochléaire, Testut.
Canales semicirculares ossei (10)		
Canalis semicircularis superior (6)	Oberer Bogengang	Superior canal. Canal demi-circulaire supérieur Canale semicircolare superiore.
Canalis semicircularis lateralis (2)	Horizontaler Bogengang	Canalis semicircularis medius. External canal. Canal demi-circulaire externe. Canale semicircolare esterno.
Canalis semicircularis inferior	Hinterer Bogengang	Canalis semicircularis internus. Posterior canal. Canal demi-circulaire postérieur. Canale semicircolare posteriore (1).

Quite different from the originally adopted course of the Commission has been the procedure during the past three years which is as follows: at first the members of the Commission were requested to send in their special suggestions and remarks on the unfinished chapters before the first vote so that the same could be taken into consideration at the time of this vote; after the vote and after the results were compiled by Krause, the committee proceeded partly in sessions and partly through correspondence to the consideration of the single chapters. In this way the merit and meaning of each term was again examined; doubtful questions were decided by reference to the literature or to the preparations and in this way a uniform arrangement was obtained—the so-called final editing—which was again gone over by the Commission partly in oral conferences and partly by correspondence.

These final revisions of the various chapters were sent to the members of the Commission in July, 1894. They in turn made various comments and suggestions. After another careful working over of these suggestions, as well as the entire work, the editorial committee is now in a position to lay before the members of the Society the final editing of the nomenclature. At its meeting, in Basel, the Society will have to decide whether it will accept the newly arranged nomenclature as its own and exert its full influence for its adoption.

*Rules for the Assignment of Names.*

In the course of its six years of work the Commission and editorial committee have arrived at a number of editorial as well as fundamental rules, without having had any special discussions concerning them.<sup>1</sup> The more definitely these rules crystallized the more they could be made the foundation of the succeeding work; although none of them became a rule without exception. The most important of these rules are the following: Each part to be named shall have only one name. The names must be in Latin and be grammatically correct. The names shall be simply memory signs and need not be explanations or speculative interpretations. Related terms, as far as possible, shall be similar (e. g. Femur, A. femoralis, V. femoralis, N. femoralis). Adjectives, in general, shall be arranged with their antonyms (e. g. dexter, sinister; major, minor; superficialis, profundus)

Some widely current names have forced us here and there to deviate from the rules enumerated above. Such a one as *M. crotaphiticobuccinatorius* or *M. petrosalpingostaphylinus* could be omitted without difficulty, but there could not be found a shorter term for the very popular *M. sternocleidomastoideus*. Of the two synonyms *Valvula mitralis* or

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<sup>1</sup> Compare also Krause, *Die anatomische Nomenclatur. Internationale Monatsschrift für Anatomie und Physiologie.* Vol. X, p. 313.

Valvula bicuspidalis neither could be dropped out of consideration because of their medical usage. Pyramis and Pars petrosa ossis temporalis, Vola and Palma manus, Nates and Clunes and other synonymous terms had to be used together. Moreover the A. meningea media must still pass through the Foramen spinosum (instead of through the Foramen meningeeum medium); the Ramus auricularis vagi traverses the Canaliculus mastoideus; while since Henle's time the Nervus facialis has had its Canalis facialis.

A considerable divergence of opinions has long existed concerning the use of personal names. Such personal names are met not only in anatomy but also in other natural sciences and in medicine. The mineralogists speak of Millerite, of Hausmanite, etc. The pathologists speak of Stokes' phenomenon, of Basedow's or Bright's disease. The botanical and zoological names of species are rich in personal names. We find here a Rhytina Stelleri, an Equus Burchelli, a Capra Falconeri and an unlimited number of similarly formed names. The zoologists and botanists use such personal names even if the person referred to has had very remote or no connection with the species in question. Besides the motive of giving honor or courtesy to a deserving specialist, there is to be taken into account the easiness and harmlessness of such readily obtained compounds of sounds.

The personal names used in anatomy are not quite so harmless as the botanical or zoological ones; they in general are supposed to refer to those investigators who discovered, exactly described, or at least made more specific the general knowledge of the part named after them. How such names originate we have daily occasion to notice. An investigator brings new light into a region which up to the time was only insufficiently known; and until his investigations have been verified by others and have become common scientific property, he remains authority for the structures described by him. Thus Luschka naturally became the sponsor for the body found by him which was called the coccygeal gland, and even now when the significance of the body seems doubtful and its name has been changed to Glomus coccygeum one willingly accompanies it with the proof of discovery as "Luschka's coccygeal gland." Moreover there is no lack of examples in our literature of names of the older investigators remaining through erroneous interpretations. The Pancreas Aselli and the Ovula Nabothi remain as in the records of their first describers with their mistaken meanings.

From the above indicated erroneous method of using personal names we must not be surprised if we find them especially profuse in those regions where exploration is making rapid strides. Thus we have had in the organ of hearing for a long time the cells of Corti, the cells of Deiters, the cells of Claudius and others. In the cerebrum we have the

bundle of Vicq d'Azyr, of Mehnert, of Gudden; the nucleus of Luys, of Schwalbe, of Bechterew and others. Quite frequently we find, in just such newly explored regions, that two structures lying in close proximity or of similar function, the one was seen and described first by one investigator and the other by another; in such cases, during the period of unsatisfactory disentanglement of the underlying facts, reference to the authors becomes the safest means of proper understanding. The commissures of Gudden and Mehnert in the base of the dien-cephalon, Hensen's median disc and Krause's membrane in the transversely striated muscle fibre, furnish examples of such helpful discrimination through appropriate personal designations. Another example introduced by Braune is the differentiation of the ligaments of Henle and Hesselbach at the margins of the median inguinal groove. By these names there was first established a clear separation of the two ligaments.

Many of the temporarily appropriate personal names in anatomy have become superfluous and here and there obsolete. Today one scarcely speaks of Schneider's membrane of the nose, or of a Jacob's membrane of the retina. On the other hand the Fossa Sylvii, the Zonula Zinni, the Tuba Eustachii and many other personal names have become a lasting part of our nomenclature and are recognized in all languages.

Henle, as is well known, was the first to declare war against these remnants of an originally much more extended personal nomenclature, and this warfare has been carried on very vigorously by later anatomists. Even the attempt has been made to rename the tendon of Achilles which is beyond the range of priority and which has become a part of popular language, and to provide it with a strictly suitable name. The reasons which have been brought forward against personal names are indeed of a very momentous nature. The names often contain historical injustices, naming not the real discoverer of a given structure but a later observer. Many personal names are often chosen by different nations from various investigators. Lieberkühn's glands of the Germans are called by the Italians glands of Galeati, the Vater's corpuscles of the Germans are for the Italians the bodies of Pacini, etc. Personal names in many modern writings, more particularly in the literature of the specialties, occur in great superabundance and there are here found affixed names of very little scientific importance. Yet the names of the older anatomists are perpetuated only in a desultory way. Some very great names like Vesal and Harvey are wanting in the lists, others like Eustachi and Malpighi are often repeated.

There is much truth in these objections to personal names, yet many of us anatomists are quite averse to an entire abolition of such names. On a former occasion I have expressed my opinions concerning the same. I should regret very much the absence of all personal names in our

scientific language. Considered purely objectively they form almost always very good mnemotechnic material. The names of Poupart's, Gimbernat's, and Colles' ligaments are remembered by every student and when he knows the names he has a desire to know what each of these names signifies. The interest in a *Ligamentum inguinale*, a *Lig. inguinale reflexum*, and a *Lig. lacunare* is considerably less. Our daily experience in the dissecting room teaches how easily these special names are memorized and how they become certain definite orientation points to which knowledge may be added. Still more than this eminently practical view, there comes into consideration, for me personally, a certain feeling of reverence. This may sound somewhat antiquated, but it goes against me to sacrifice to an arbitrarily established principle, names which for centuries have proved to be good and useful. Moreover I consider it an advantage if the names of Falloppia, Eustachi, Malpighi and others are impressed upon the student even in his first semester. These honorable names of our science are thereby permanently fixed in the memory of posterity, and through them there is awakened in the student a certain historical interest which stimulates him to further investigations. Whether these names always stand in their proper places is in my opinion a matter of secondary importance. It is the province of the history of anatomy to trace the course of the individual discoveries and to award to each investigator his deserved laurels.<sup>2</sup>

The question whether or not personal names should be retained could not be the subject of a vote. We have finally reached a compromise instead of using authority on the one side or the other. We have given objective names to all parts and added thereto, within brackets, the widely used personal names. This method comes in direct conflict with the principle of single names, but it has the advantage of leaving to time the final decision of the present differences. As far as the results of our method can be foreseen certain personal names will be completely replaced by objective ones, while others will remain. The adversaries of personal names will thus, at least in part, achieve their ideals.<sup>3</sup>

It has already been pointed out that the Commission wanted to confine itself exclusively to descriptive macroscopic anatomy but even within its bounds there is offered considerable latitude for either a surplus or paucity of names. Our first endeavor throughout was to be somewhat reluctant and not to add at most any more names than might be expected

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<sup>2</sup> Kollmann speaks in like manner (Voting lists p. 143): "I not only reject the authors' names but also recognize them as the only means of remaining somewhat in contact with the past."

<sup>3</sup> The personal names added are placed in the genitive following the rules of the Commission on Zoölogical Nomenclature. *International Monatsschrift für Anat. und Physiol.* 1893. Vol. X, p. 94, Art. 4.

from students during their early semesters. But the desire for completeness meantime has carried us further and further beyond our first goal.

An especially important question was that as to how far we should take into consideration the anatomy of medical specialties. As is known the medical specialists have begun in a very commendable way to work out entirely independently the anatomy of their special regions. The most brilliant examples, in this respect, have been given by the psychiatrists and neurologists (Meynert, Gudden, Flechsig, Forel, Etinger, Obersteiner and others). They were followed by the ophthalmologists (Leber), the otologists (v. Tröltzsch, Politzer, Siebenmann), the laryngologists and others. The anatomical terminology and interpretation given by these specialists sometimes differs very markedly from the traditional language of our textbooks, and it was a question whether we should simply remain with the old, or whether we should make concessions to the era of specialization. After we had once put this question clearly before us there could be no doubt as to our decision. Where the specialists had created a special terminology, they were forced to do so through necessity since the descriptions in our textbooks were no longer sufficient. This necessity cannot be haughtily ignored by us; we have to consider it to its fullest extent, in that we must accept the terms offered when they are adequate, or, if it becomes necessary, replace them by more suitable ones. The student who passes from us to the clinics, has the right to demand that he be furnished the view points and the language which he needs in his further studies and that it be not incumbent upon him to learn a new anatomy in the place of an obsolete one. We have endeavored through conferences to obtain the necessary contact with specialists in various lines and we hope that in this respect we have found a suitable basis for a mutual understanding. Specialists have time and time again assured us that they are ready to accept our nomenclature as soon as it covers their needs.<sup>4</sup>

If we, at first, had adopted a plan to proceed strictly conservatively and to select from the current textbooks the most fitting terms and to avoid new names, we should have been obliged in the course of time to partly abandon this plan. There is in the literature of our textbooks a series of expressions which are obsolete and their retention is senseless. Still oftener it is found that expressions occur in the textbooks which are used by some in one sense, by others in another sense; or are based

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<sup>4</sup> The German Surgical Society has made known its interest in our undertaking in a special way, in that in March 1894 in Berlin it authorized von Bardeleben to make a report on the present results of the Commission on Nomenclature. The list of names submitted by von Bardeleben met with very few objections from this source.



on obscure or indefinite opinions. In our written and verbal communications we have frequently found that we disagreed as to the meaning of a name; or what is scarcely better were doubtful. In such cases it was necessary to turn again to the literature and preparations or possibly to institute special investigations. If we now publish the results of our common work, only in the form of a list of names, we are confronted with the probability that the names of this list will be quite differently interpreted. The confusion which we wished to prevent is not thereby entirely abolished. This is the reason which has prompted me, in agreement with my colleagues of the Commission, to write the supplemental explanations through which the names, newly introduced by us, shall be justified and the meaning of ambiguous words shall be defined. The next thing to be desired, after the nomenclature proposed by us shall have been accepted, is a textbook with authentic explanations for the names and I think we shall not be obliged to wait long for such a book.

#### *Collected Documents.*

The documents of the Commission on nomenclature consist on the one hand of tables and added remarks, edited by Krause and sent to the members of the Commission, and on the other hand of a written exchange of opinions not only between Krause and the members of the Commission but also between members of the Commission. The printed records only can be spoken of here. As to the extent of the written documentary material no one except Krause has even an approximate idea.

The members of the Commission received in all 20 pamphlets on Nomenclature with pagination up to 942, besides an unpagged pamphlet on myology. They are in order as follows:

Part I.	Pages	1-68	Myology	I. Vote
" II.	"	69-108	Osteology (a)	1. "
" III.	"	109-168	Myology	2. "
" IV.	"	169-172	Myology	3. "
" V.	"	173-212	Osteology (b)	1. "
" VI.	"	213-240	Osteology (c)	1. "
" VII.	"	241-296	Heart and Arteries	1. "
" VIII.	"	297-330	Veins and Lymphatics	1. "
" IX.	"	331-378	Osteology	2. "
" X.	"	379-402	Heart and Arteries	2. "
" XI.	"	403-438	Osteology	3. "
" XII.	"	439-458	Veins and Lymphatics	2. "
" XIII.	"	459(to)-474(to)	Heart and Arteries	3. "
" XIV.	"	459-482	Osteology and Angiology	Final editing.

Part XV.	Pages 483-518	Syndesmology	I. Vote
" XVI.	" 519-654	Neurology	I. "
" XVII.	" 655-864	Splanchnology	I. "
" XVIII.	" 865-872	Syndesmology	Final editing.
" XIX.	" 873-888	Neurology	Final editing.
" XX.	" 889-952	Splanchnology	Final editing.

and Supplemental suggestions on all the remaining divisions of Anatomy.

Independent of the pamphlets arranged in serial order for the vote, Krause, two years ago, in the *International Monatsschrift für Anatomie<sup>1</sup> und Physiologie*, gave a list of the names decided upon up to that time.

The number of names contained in the 20 pamphlets, may be approximately estimated at 30,000. Our final list will contain scarcely one-sixth that number.

Now, as we glance back over the long road behind us we are able to see that possibly many a stretch of it might have been shortened. The second and third vote on muscles, bones and vessels could have been dispensed with. Perhaps we could have reached the goal quicker and without so many repetitions, if right at the beginning we had placed before us an arranged list of names instead of following the order of a certain textbook arranged for didactic purposes. This is easily said today since we have full retrospect of the scope and difficulties of the work. However, I am not certain that by following a different plan we should have reached the goal more quickly and safely. The main thing was that somebody should hold constantly in his hands the many threads without entangling them. Our editor, in cooperation with our colleague Waldeyer, has been able to do this in a most excellent manner.

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<sup>1</sup> Vol. X, p. 313, 1893.

# 1 Nomina anatomica<sup>1</sup>

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## 2 Termini,

situm et directionem partium corporis indicantes

### 3 Termini generales

4 Verticalis	13 Anterior	22 Longitudinalis
5 Horizontalis	14 Medius	23 Transversus
6 Medianus	15 Posterior	24 Cranialis
7 Sagittalis	16 Ventralis	25 <i>Rostralis</i>
8 Frontalis	17 Dorsalis	26 Caudalis
9 Transversalis	18 Internus	27 Superior
10 Medialis	19 Externus	28 Inferior
11 Intermedius	20 Dexter	29 Superficialis [sublimis]
12 Lateralis	21 Sinister	30 Profundus

### 31 Termini ad extremitates spectantes

32 Proximalis	35 Ulnaris
33 Distalis	36 Tibialis
34 Radialis	37 Fibularis

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<sup>1</sup>In all our lists the following characters are adopted:

1. Oval brackets ( ) designate variations (Varietates anatomicae).

2. Angular brackets [ ] contain explanatory additions, among which are included double names and personal names.

3. Italics are used for ontogenetic expressions (e. g. *M. decidua*, *A. umbilicalis*, etc.).

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## 1 Termini generales

2 Accessorius	35 Corona	68 Geniculum
3 Acinus	36 Corpus	69 Genu
4 Aditus	37 Corpusculum	70 Glandula
5 Ala	38 Crista	71 Glomerulus
6 Alveolus	39 Crus	72 Glomus
7 Ampulla	40 Decussatio	73 Hilus
8 Angulus	41 Dorsum	74 Humor
9 Ansa	42 Ductulus	75 Junctura
10 Antrum	43 Ductus	76 Impressio
11 Apertura	44 Eminentia	77 Incisura
12 Apex	45 Endothelium	78 Infundibulum
13 Appendix	46 Epithelium	79 Intestinum
14 Arcus	47 Extremitas	80 Isthmus
15 Area	48 Facies	81 Labium
16 Basis	49 Fascia	82 Lacuna
17 Brachium	50 Fasciculus	83 Lamina
18 Canaliculus	51 Fibra	84 Latus
19 Canalis	52 Fibrocartilago	85 Ligamentum
20 Capsula	53 Filum	86 Limbus
21 Caput	54 Fissura	87 Limen
22 Capitulum	55 Flexura	88 Linea
23 Cartilago	56 Folium	89 Liquor
24 Caruncula	57 Folliculus	90 Lobulus
25 Cauda	58 Foramen	91 Lobus
26 Caverna	59 Formatio	92 Macula
27 Cavum	60 Fornix	93 Margo
28 Cellula	61 Fossa	94 Massa
29 Circulus	62 Fossula	95 Meatus
30 Cisterna	63 Fovea	96 Medulla
31 Collum	64 Foveola	97 Membrana
32 Columna	65 Frenulum	98 Membrum
33 Commissura	66 Fundus	99 Mucus
34 Cornu	67 Funiculus	100 Musculus

1 Nervus	25 Regio	49 Trochlea
2 Nodulus	26 Rete	50 Truncus
3 Nucleus	27 Rima	51 Tuber
4 Organon	28 Rudimentum	52 Tuberculum
5 Orificium	29 Septulum	53 Tubulus
6 Os [oris]	30 Septum	54 Tunica
7 Os [ossis]	31 Sinus	55 Tunica propria
8 Ostium	32 Spatium	56 Umbo
9 Papilla	33 Spina	57 Uvula
10 Parenchyma	34 Stratum	58 Vagina
11 Paries	35 Stria	59 Vallecula
12 Perichondrium	36 Stroma	60 Vallum
13 Periosteum	37 Substantia	61 Valvula
14 Plexus	38 Succus	62 Vas
15 Plica	39 Sulcus	63 Velum
16 Polus	40 Taenia	64 Vertex
17 Processus	41 Tegmen	65 Vesica
18 Prominentia	42 Tela	66 Vesicula
19 Punctum	43 Tela conjunctiva	67 Vestibulum
20 Radix	44 Tela elastica	68 Villus
21 Ramulus	45 Torus	69 Viscus [viscera]
22 Ramus	46 Trabecula	70 Vortex
23 Raphe	47 Tractus	71 Zona
24 Recessus	48 Trigonum	

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**1 Partes corporis humani**

- |          |                |
|----------|----------------|
| 2 Caput  | 4 Truncus      |
| 3 Collum | 5 Extremitates |

**6 Caput****7 Cranium**

- |            |             |
|------------|-------------|
| 8 Vertex   | 12 Tempora  |
| 9 Sinciput | 13 Auris    |
| 10 Frons   | 14 Auricula |
| 11 Occiput |             |

**15 Facies**

- |                            |                         |
|----------------------------|-------------------------|
| 16 Oculus                  | 27 Os                   |
| 17 Palpebra superior       | 28 Sulcus nasolabialis  |
| 18 Palpebra inferior       | 29 Philtrum             |
| 19 Rima palpebrarum        | 30 Labium superius      |
| 20 Bulbus oculi            | 31 Labium inferius      |
| 21 Supercilium             | 32 Rima oris            |
| 22 Sulcus infrapalpebralis | 33 Cavum oris           |
| 23 Nasus                   | 34 Lingua               |
| 24 Dorsum nasi             | 35 Fauces               |
| 25 Apex nasi               | 36 Bucca [Mala]         |
| 26 Ala nasi                | 37 Sulcus mentolabialis |
|                            | 38 Mentum               |

**39 Collum**

- |                         |               |
|-------------------------|---------------|
| 40 Cervix               | 43 Pharynx    |
| 41 Larynx               | 44 Trachea    |
| 42 Prominentia laryngea | 45 Oesophagus |

**46 Truncus**

- |                   |                        |
|-------------------|------------------------|
| 47 Thorax         | 52 Dorsum              |
| 48 Cavum thoracis | 53 Columna vertebralis |
| 49 Pectus         | 54 Canalis spinalis    |
| 50 Mamma          |                        |
| 51 Papilla mammae |                        |

**55 Abdomen**

- |                       |           |
|-----------------------|-----------|
| 56 Cavum abdominis    | 59 Latus  |
| 57 Scrobiculus cordis | 60 Lumbus |
| 58 Umbilicus          | 61 Inguen |

## I Pelvis

- |                  |             |
|------------------|-------------|
| 2 Cavum pelvis   | 6 Anus      |
| 3 Mons pubis     | 7 Crena ani |
| 4 Coxa           | 8 Perineum  |
| 5 Nates [Clunes] |             |

## 9 Extremitas superior

- |                                 |                                   |
|---------------------------------|-----------------------------------|
| 10 Axilla                       | 29 Metacarpus                     |
| 11 Plica axillaris anterior     | 30 Dorsum manus                   |
| 12 Plica axillaris posterior    | 31 Vola manus [Palma]             |
| 13 Acromion                     | 32 Thenar                         |
| 14 Brachium                     | 33 Hypothenar                     |
| 15 Facies anterior              | 34 Digiti manus                   |
| 16 Facies posterior             | 35 Pollex [Digitus I]             |
| 17 Facies lateralis             | 36 Index [ „ II]                  |
| 18 Facies medialis              | 37 Digitus medius [Digitus III]   |
| 19 Sulcus bicipitalis lateralis | 38 Digitus annularis [Digitus IV] |
| 20 Sulcus bicipitalis medialis  | 39 Digitus minimus [Digitus V]    |
| 21 Cubitus                      | 40 Facies dorsales                |
| 22 Antibrachium                 | 41 Facies volares                 |
| 23 Facies dorsalis              | 42 Margines radiales              |
| 24 Facies volaris               | 43 Margines ulnares               |
| 25 Margo radialis               |                                   |
| 26 Margo ulnaris                |                                   |
| 27 Manus                        |                                   |
| 28 Carpus                       |                                   |

## 44 Extremitas inferior

- |                        |                                |
|------------------------|--------------------------------|
| 45 Femur               | 61 Tarsus                      |
| 46 Facies anterior     | 62 Metatarsus                  |
| 47 Facies posterior    | 63 Dorsum pedis                |
| 48 Facies lateralis    | 64 Planta                      |
| 49 Facies medialis     | 65 Margo pedis lateralis       |
| 50 Sulcus gluteus      | 66 Margo pedis medialis        |
| 51 Genu                | 67 Calx                        |
| 52 Poples              | 68 Digiti pedis                |
| 53 Patella             | 69 Hallux [Digitus I]          |
| 54 Crus                | 70 Digiti II—IV                |
| 55 Facies anterior     | 71 Digitus minimus [Digitus V] |
| 56 Facies posterior    | 72 Facies dorsales             |
| 57 Sura                | 73 Facies plantares            |
| 58 Malleolus lateralis | 74 Margines laterales          |
| 59 Malleolus medialis  | 75 Margines mediales           |
| 60 Pes                 |                                |

## 1 Osteologia

- |                  |                             |                         |
|------------------|-----------------------------|-------------------------|
| 2 Os longum      | 8 <i>Synchondrosis epi-</i> | 14 Cavum medullare      |
| 3 Os breve       | <i>physeos</i>              | 15 Medulla ossium       |
| 4 Os planum      | 9 Apophysis                 | 16 Medulla ossium flava |
| 5 Os pneumaticum | 10 Facies articularis       | 17 Medulla ossium rubra |
| 6 Epiphysis      | 11 Substantia compacta      | 18 Foramen nutricium    |
| 7 Diaphysis      | 12 Substantia corticalis    | 19 Canalis nutricius    |
|                  | 13 Substantia spongiosa     |                         |

## 20 Columna vertebralis

- |  |   |
|--|---|
| 21 Vertebrae cervicales                          | 42 Tuberculum caroticum [vertebrae cervicalis VI] |
| 22 Vertebrae thoracales                          | 43 Foramen transversarium                         |
| 23 Vertebrae lumbales                            | 44 Tuberculum posterius [vertebrarum cervicalium] |
| 24 Vertebrae sacrales                            | 45 Processus articulares superiores               |
| 25 Vertebrae coccygeae                           | 46 Facies articulares superiores                  |
| 26 Corpus vertebrae                              | 47 Processus articulares inferiores               |
| 27 Fovea costalis superior                       | 48 Facies articulares inferiores                  |
| 28 Fovea costalis inferior                       | 49 Processus costarius                            |
| 29 Canalis vertebralis                           | 50 Processus accessorius [vertebrarum lumbalium]  |
| 30 Foramen vertebrale                            | 51 Processus mamillaris                           |
| 31 Arcus vertebrae                               |   |
| 32 Radix arcus vertebrae                         |   |
| 33 Incisura vertebralis superior                 |   |
| 34 Incisura vertebralis inferior                 |   |
| 35 Foramen intervertebrale                       |   |
| 36 Sulcus n. spinalis                            |   |
| 37 Processus spinosus                            |   |
| 38 Vertebra prominens                            |   |
| 39 Processus transversus                         |   |
| 40 Fovea costalis transversalis                  |   |
| 41 Tuberculum anterius [vertebrarum cervicalium] |   |

## 52 Atlas

- |                                  |
|----------------------------------|
| 53 Massa lateralis               |
| 54 Arcus anterior                |
| 55 Tuberculum anterius           |
| 56 Foveae articulares superiores |
| 57 Facies articulares inferiores |
| 58 Fovea dentis                  |
| 59 Arcus posterior               |
| 60 Sulcus arteriae vertebralis   |
| 61 Tuberculum posterius          |



**1 Epistropheus**

- 2 Dens  
3 Facies articularis anterior  
4 Facies articularis posterior

**5 Os sacrum**

- 6 Facies dorsalis  
7 Facies pelvina  
8 Basis oss. sacri  
9 Processus articularis superior  
10 Promontorium  
11 Pars lateralis  
12 Facies auricularis  
13 Tuberositas sacralis  
14 Foramina intervertebralia  
15 Foramina sacralia anteriora  
16 Lineae transversae  
17 Foramina sacralia posteriora  
18 Crista sacralis media  
19 Cristae sacrales laterales  
20 Cristae sacrales articulares  
21 Cornua sacralia  
22 Canalis sacralis  
23 Hiatus sacralis  
24 Apex oss. sacri

**25 Os coccygis**

- 26 Cornua coccygea

**27 Thorax****28 Costae**

- 29 Costae verae  
30 Costae spuriae  
31 Os costale  
32 Cartilago costalis  
33 Capitulum costae  
34 Facies articularis capituli costae  
35 Crista capituli  
36 Corpus costae  
37 Tuberculum costae  
38 Facies articularis tuberculi costae

- 39 Collum costae  
40 Crista colli costae  
41 Angulus costae  
42 Tuberculum scaleni [Lisfranci]  
43 Sulcus subclaviae  
44 Tuberositas costae II  
45 Sulcus costae

**46 Sternum**

- 47 Manubrium sterni  
48 Angulus sterni  
49 Synchronosis sternalis  
50 Corpus sterni  
51 Planum sternale  
52 Processus xiphoideus  
53 Incisura clavicularis  
54 Incisura jugularis  
55 Incisurae costales  
56 (Ossa suprasternalia)

**57 Thorax**

- 58 Cavum thoracis  
59 Apertura thoracis superior  
60 Apertura thoracis inferior  
61 Arcus costarum  
62 Spatia intercostalia  
63 Angulus infrasternalis  
64 Sulcus pulmonalis

**65 Ossa cranii****66 Os basilare****67 Os occipitale**

- 68 Foramen occipitale magnum  
69 Pars basilaris  
70 Sulcus petrosus inferior  
71 Pars lateralis  
72 Squama occipitalis  
73 Margo mastoideus  
74 Margo lambdoideus  
75 (Os interparietale)

- |                                      |                                 |
|--------------------------------------|---------------------------------|
| 1 Clivus                             | 43 Foramen opticum              |
| 2 Tuberculum pharyngeum              | 44 Processus clinoides anterior |
| 3 Condylus occipitalis               | 45 Fissura orbitalis superior   |
| 4 Canalis condyloideus               | 46 Ala magna                    |
| 5 Canalis hypoglossi                 | 47 Facies cerebralis            |
| 6 Tuberculum jugulare                | 48 Facies temporalis            |
| 7 Incisura jugularis                 | 49 Facies sphenomaxillaris      |
| 8 Processus jugularis                | 50 Facies orbitalis             |
| 9 Fossa condyloidea                  | 51 Margo zygomaticus            |
| 10 Processus intrajugularis          | 52 Margo frontalis              |
| 11 Planum occipitale                 | 53 Angulus parietalis           |
| 12 Planum nuchale                    | 54 Margo squamosus              |
| 13 Protuberantia occipitalis externa | 55 Crista infratemporalis       |
| 14 (Torus occipitalis)               | 56 Foramen rotundum             |
| 15 Crista occipitalis externa        | 57 Foramen ovale                |
| 16 Linea nuchae suprema              | 58 Foramen spinosum             |
| 17 Linea nuchae superior             | 59 Spina angularis              |
| 18 Linea nuchae inferior             | 60 Processus pterygoideus       |
| 19 Eminentia cruciata                | 61 Lamina lateralis processus   |
| 20 Protuberantia occipitalis interna | pterygoidei                     |
| 21 Sulcus sagittalis                 | 62 Lamina medialis processus    |
| 22 Sulcus transversus                | pterygoidei                     |
| 23 (Processus paramastoideus)        | 63 Fissura pterygoidea          |
| <b>24 Os sphenoidale</b>             | 64 Fossa scaphoidea             |
| 25 Corpus                            | 65 Processus vaginalis          |
| 26 Sella turcica                     | 66 Hamulus pterygoideus         |
| 27 Fossa hypophyseos                 | 67 Sulcus hamuli pterygoidei    |
| 28 Dorsum sellae                     | 68 Fossa pterygoidea            |
| 29 Tuberculum sellae                 | 69 Canalis pterygoideus [Vidii] |
| 30 Processus clinoides medius        | 70 Canalis pharyngeus           |
| 31 Processus clinoides posterior     | 71 Canalis basipharyngeus       |
| 32 Sulcus caroticus                  | 72 Sulcus tubae auditivae       |
| 33 Lingula sphenoidalis              | 73 Sulcus pterygopalatinus      |
| 34 Crista sphenoidalis               | 74 (Processus pterygospinosus   |
| 35 Rostrum sphenoidale               | [Civinini])                     |
| 36 Sinus sphenoidalis                | <b>75 Os temporale</b>          |
| 37 Septum sinuum sphenoidalium       | 76 Pars mastoidea               |
| 38 Apertura sinus sphenoidalis       | 77 Margo occipitalis            |
| 39 Conchae sphenoidales              | 78 Processus mastoideus         |
| 40 Clivus                            | 79 Incisura mastoidea           |
| 41 Ala parva                         | 80 Sulcus sigmoideus            |
| 42 Sulcus chiasmatis                 |                                 |

- |  |                                       |
|--|---------------------------------------|
| 1 Sulcus a. occipitalis                    | 41 Canalis caroticus                  |
| 2 Foramen mastoideum                       | 42 Canaliculi caroticotympanici       |
| 3 Pars petrosa [Pyramis]                   | 43 Canalis musculotubarius            |
| 4 Facies anterior pyramidis                | 44 Semicanalis m. tensoris tympani    |
| 5 Facies posterior pyramidis               | 45 Semicanalis tubae auditivae        |
| 6 Facies inferior pyramidis                | 46 Septum canalis musculotubarii      |
| 7 Apex pyramidis                           | 47 Cavum tympani (v. Organon auditus) |
| 8 Angulus superior pyramidis               | 48 Canaliculus chordae tympani        |
| 9 Angulus anterior pyramidis               | 49 Fissura petrotympanica [Glaseri]   |
| 10 Angulus posterior pyramidis             | 50 Fissura petrosquamosa              |
| 11 Sulcus petrosus superior                | 51 Pars tympanica                     |
| 12 Tegmen tympani                          | 52 <i>Annulus tympanicus</i>          |
| 13 Eminentia arcuata                       | 53 Meatus acusticus externus          |
| 14 Canalis facialis [Falloppii]            | 54 (Spina supra meatum)               |
| 15 Hiatus canalis facialis                 | 55 Fissura tympanomastoidea           |
| 16 Geniculum canalis facialis              | 56 Spina tympanica major              |
| 17 Sulcus n. petrosi superficialis majoris | 57 Spina tympanica minor              |
| 18 Sulcus n. petrosi superficialis minoris | 58 Porus acusticus externus           |
| 19 Impressio trigemini                     | 59 Squama temporalis                  |
| 20 Porus acusticus internus                | 60 Margo parietalis                   |
| 21 Meatus acusticus internus               | 61 Incisura parietalis                |
| 22 Fossa subarcuata                        | 62 Margo sphenoidalis                 |
| 23 Aquaeductus vestibuli                   | 63 Facies temporalis                  |
| 24 Apertura externa aquaeductus vestib.    | 64 Processus zygomaticus              |
| 25 Sulcus petrosus inferior                | 65 Fossa mandibularis                 |
| 26 Incisura jugularis                      | 66 Facies articularis                 |
| 27 Processus intrajugularis                | 67 Tuberculum articulare              |
| 28 Fossa jugularis                         | 68 Facies cerebralis                  |
| 29 Canaliculus mastoideus                  | 69 Sulcus a. temporalis mediae        |
| 30 Sulcus canaliculi mastoidei             |                                       |
| 31 Processus styloideus                    |                                       |
| 32 Vagina processus styloidei              |                                       |
| 33 Foramen stylomastoideum                 |                                       |
| 34 Fossula petrosa                         |                                       |
| 35 Canaliculus tympanicus                  |                                       |
| 36 Sulcus tympanicus                       |                                       |
| 37 Apertura inferior canaliculi tympanici  |                                       |
| 38 Apertura superior canaliculi tympanici  |                                       |
| 39 Canaliculus cochleae                    |                                       |
| 40 Apertura externa canaliculi cochleae    |                                       |
- 70 Os parietale**
- |                         |
|-------------------------|
| 71 Facies cerebralis    |
| 72 Facies parietalis    |
| 73 Margo occipitalis    |
| 74 Margo squamosus      |
| 75 Margo frontalis      |
| 76 Margo sagittalis     |
| 77 Angulus frontalis    |
| 78 Angulus occipitalis  |
| 79 Angulus sphenoidalis |
| 80 Angulus mastoideus   |
| 81 Foramen parietale    |

- 1 Tuber parietale
- 2 Linea temporalis inferior
- 3 Linea temporalis superior
- 4 Sulcus sagittalis
- 5 Sulcus transversus

### 6 Os frontale

- 7 Squama frontalis
- 8 Facies frontalis
- 9 Margo supraorbitalis
- 10 Pars orbitalis
- 11 Incisura ethmoidalis
- 12 Pars nasalis
- 13 Spina frontalis
- 14 Margo nasalis
- 15 Margo parietalis
- 16 Processus zygomaticus
- 17 Facies temporalis
- 18 Linea temporalis
- 19 Tuber frontale
- 20 Arcus superciliaris
- 21 Glabella
- 22 Foramen sive Incisura supra-orbitalis
- 23 Incisura sive Foramen frontale
- 24 Facies orbitalis
- 25 (Spina trochlearis)
- 26 Fovea trochlearis
- 27 Foramen ethmoidale anterius
- 28 Foramen ethmoidale posterius
- 29 Fossa glandulae lacrimalis
- 30 Facies cerebralis
- 31 Crista frontalis
- 32 Sulcus sagittalis
- 33 Foramen caecum
- 34 Sinus frontalis
- 35 Septum sinuum frontaliū

### 36 Os ethmoidale

- 37 Lamina cribrosa
- 38 Crista galli
- 39 Processus alaris
- 40 Lamina perpendicularis

- 41 Labyrinthus ethmoidalis
- 42 Cellulae ethmoidales
- 43 Infundibulum ethmoidale
  - 44 Hiatus semilunaris
- 45 Bulla ethmoidalis
- 46 Lamina papyracea
- 47 Foramina ethmoidalia
- 48 (Concha nasalis suprema)
- 49 Concha nasalis superior
- 50 Concha nasalis media
- 51 Processus uncinatus

### 52 Concha nasalis inferior

- 53 Processus lacrimalis
- 54 Processus maxillaris
- 55 Processus ethmoidalis

### 56 Os lacrimale

- 57 Crista lacrimalis posterior
- 58 Sulcus lacrimalis
- 59 Hamulus lacrimalis
- 60 Fossa sacci lacrimalis

### 61 Os nasale

- 62 Foramina nasalia
- 63 Sulcus ethmoidalis

### 64 Vomer

- 65 Ala vomeris

### 66 Ossa faciei

#### 67 Maxilla

- 68 Corpus maxillae
- 69 Facies anterior
- 70 Facies nasalis
- 71 Facies orbitalis
- 72 Facies infratemporalis
- 73 Sinus maxillaris
- 74 Margo infraorbitalis
- 75 Canalis infraorbitalis
- 76 Sulcus infraorbitalis
- 77 Foramen infraorbitale
- 78 Sutura infraorbitalis
- 79 Fossa canina

- |                               |                                 |
|-------------------------------|---------------------------------|
| 1 (Fossa prænasalıs)          | 43 Processus orbitalıs          |
| 2 Incısura nasalis            | 44 Processus sphenoidalis       |
| 3 Tuber maxillare             | 45 Pars horizontalıs            |
| 4 Foramina alveolaria         | 46 Facies nasalis               |
| 5 Canales alveolares          | 47 Facies palatina              |
| 6 Planum orbitale             | 48 Spina nasalis posterior      |
| 7 Margo lacrimalıs            | 49 Crista nasalis               |
| 8 Sulcus lacrimalıs           | 50 Os zygomaticum               |
| 9 Canalis nasolacrimalıs      | 51 Facies malarıs               |
| 10 Crista conchalis           | 52 Facies temporalıs            |
| 11 Processus frontalis        | 53 Facies orbitalıs             |
| 12 Crista lacrimalıs anterior | 54 Processus temporalıs         |
| 13 Incısura lacrimalıs        | 55 Processus frontosphenoidalis |
| 14 Crista ethmoidalis         | 56 (Processus marginalıs)       |
| 15 Processus zygomaticus      | 57 Foramen zygomaticoorbitale   |
| 16 Processus palatinus        | 58 Foramen zygomaticofaciale    |
| 17 Crista nasalis             | 59 Foramen zygomaticotemporale  |
| 18 Spina nasalis anterior     | 60 Mandibula                    |
| 19 <i>Os incisivum</i>        | 61 Corpus mandibulæ             |
| 20 Canalis incisivus          | 62 Basis mandibulæ              |
| 21 Sutura incisiva            | 63 Protuberantia mentalıs       |
| 22 Spinae palatinae           | 64 Tuberculum mentale           |
| 23 Sulci palatini             | 65 Spina mentalıs               |
| 24 Processus alveolarıs       | 66 Foramen mentale              |
| 25 Limbus alveolarıs          | 67 Linea obliqua                |
| 26 Alveoli dentales           | 68 Fossa digastrica             |
| 27 Septa interalveolaria      | 69 Linea mylohyoidea            |
| 28 Juga alveolaria            | 70 Sulcus mylohyoideus          |
| 29 Hiatus maxillaris          | 71 Juga alveolaria              |
| 30 Foramen incisivum          | 72 Ramus mandibulæ              |
|                               | 73 Angulus mandibulæ            |
|                               | 74 (Tuberositas masseterica)    |
|                               | 75 (Tuberositas pterygoidea)    |
|                               | 76 (Crista buccinatoria)        |
|                               | 77 Incısura mandibulæ           |
|                               | 78 Processus condyloideus       |
|                               | 79 Capitulum [proc. condyl.]    |
|                               | mandibulæ                       |
|                               | 80 Collum [proc. condyloidei]   |
|                               | mandibulæ                       |
|                               | 81 Fovea pterygoidea proc. con- |
|                               | dyloidei                        |
|                               | 82 Processus coronoideus        |
- 31 Os palatinum**
- |                             |
|-----------------------------|
| 32 Pars perpendicularıs     |
| 33 Facies nasalis           |
| 34 Facies maxillaris        |
| 35 Incısura sphenopalatina  |
| 36 Sulcus pterygopalatinus  |
| 37 Processus pyramidalıs    |
| 38 Foramen palatinum maj    |
| 39 Foramina palatina minora |
| 40 Canales palatini         |
| 41 Crista conchalis         |
| 42 Crista ethmoidalis       |

- 1 Foramen mandibulare
- 2 Lingula mandibulae
- 3 Canalis mandibulae
- 4 Fovea sublingualis
- 5 (Fovea submaxillaris)
- 6 Pars alveolaris
- 7 Limbus alveolaris
- 8 Alveoli dentales
- 9 Septa interalveolaria
- 10 **Os hyoideum**
- 11 Corpus oss. hyoidei
- 12 Cornu minus
- 13 Cornu majus

### 14 Cranium

- 15 Calvaria
- 16 Pericranium
- 17 Lamina externa
- 18 Diploë
- 19 Canales diploici [Brescheti]
- 20 Lamina interna
- 21 Facies [ossea]
- 22 Cranium cerebrale
- 23 Cranium viscerale
- 24 Vertex
- 25 Frons
- 26 Occiput
- 27 Basis cranii interna
- 28 Basis cranii externa
- 29 Fossa cranii anterior
- 30 Fossa cranii media
- 31 Fossa cranii posterior
- 32 Juga cerebralia
- 33 Impressiones digitatae
- 34 Sulci venosi
- 35 Sulci arteriosi
- 36 (Foveolae granulares [Pacchioni])
- 37 (Ossa suturarum)
- 38 Planum temporale
- 39 Fossa temporalis
- 40 Arcus zygomaticus
- 41 Fossa infratemporalis
- 42 Fossa pterygopalatina
- 43 Canalis pterygopalatinus
- 44 Foramen sphenopalatinum
- 45 Apertura piriformis
- 46 Cavum nasi
- 47 Septum nasi osseum
- 48 Meatus nasi communis
- 49 Meatus nasi superior
- 50 Meatus nasi medius
- 51 Meatus nasi inferior
- 52 Meatus nasopharyngeus
- 53 Choanae
- 54 Recessus sphenoidalialis
- 55 Foramen jugulare
- 56 Fissura sphenopetrosa
- 57 Fissura petrooccipitalis
- 58 Fissura sphenoccipitalis
- 59 Foramen lacerum
- 60 Fibrocartilago basalis
- 61 Palatum durum
- 62 (Torus palatinus)
- 63 Orbita
- 64 Aditus orbitae
- 65 Margo supraorbitalis
- 66 Margo infraorbitalis
- 67 Paries superior
- 68 Paries inferior
- 69 Paries lateralis
- 70 Paries medialis
- 71 Fissura orbitalis superior
- 72 Fissura orbitalis inferior

### 73 Suturae cranii

- 74 Sutura coronalis
- 75 Sutura sagittalis
- 76 Sutura lambdoidea
- 77 Sutura occipitomastoidea
- 78 Sutura sphenofrontalis
- 79 Sutura sphenoorbitalis
- 80 Sutura sphenoidalialis
- 81 Sutura sphenosquamosa
- 82 Sutura sphenoparietalis

- |   |   |
|---|---|
| 1 Sutura squamosa                                   | 40 Fossa subscapularis                      |
| 2 (Sutura frontalis)                                | 41 Facies dorsalis                          |
| 3 Sutura parietomastoidea                           | 42 Spina scapulae                           |
| 4 (Sutura squamosomastoidea)                        | 43 Fossa supraspinata                       |
| 5 Sutura nasofrontalis                              | 44 Fossa infraspinata                       |
| 6 Sutura frontoethmoidalis                          | 45 Acromion                                 |
| 7 Sutura frontomaxillaris                           | 46 Facies articularis acromii               |
| 8 Sutura frontolacrimalis                           | 47 Margo vertebralis                        |
| 9 Sutura zygomaticofrontalis                        | 48 Margo axillaris                          |
| 10 Sutura zygomaticomaxillaris                      | 49 Margo superior                           |
| 11 Sutura ethmoideomaxillaris                       | 50 Angulus inferior                         |
| 12 Sutura sphenozygomatica                          | 51 Angulus lateralis                        |
| 13 (Sutura sphenomaxillaris)                        | 52 Angulus medialis                         |
| 14 Sutura zygomaticotemporalis                      | 53 Cavitas glenoidalis                      |
| 15 Sutura internasalis                              | 54 Collum scapulae                          |
| 16 Sutura nasomaxillaris                            | 55 Tuberositas infraglenoidalis             |
| 17 Sutura lacrimomaxillaris                         | 56 Tuberositas supraglenoidalis             |
| 18 Sutura lacrimoconchalis                          | 57 Incisura scapulae                        |
| 19 Sutura intermaxillaris                           | 58 Processus coracoideus                    |
| 20 Sutura palatomaxillaris                          |   |
| 21 Sutura palatoethmoidalis                         |   |
| 22 Sutura palatina mediana                          |   |
| 23 Sutura palatina transversa                       |   |
| <b>24 Synchrondroses cranii</b>                     |   |
| 25 Synchrondrosis sphenoccipitalis                  |   |
| 26 Synchrondrosis sphenopetrosa                     |   |
| 27 Synchrondrosis petrooccipitalis                  |   |
| 28 <i>Synchrondrosis intraoccipitalis posterior</i> |   |
| 29 <i>Synchrondrosis intraoccipitalis anterior</i>  |   |
| 30 <i>Synchrondrosis intersphenoidalis</i>          |   |
| 31 <i>Fonticulus frontalis [major]</i>              |   |
| 32 <i>Fonticulus occipitalis [minor]</i>            |   |
| 33 <i>Fonticulus mastoideus</i>                     |   |
| 34 <i>Fonticulus sphenoidalis</i>                   |   |
| <b>35 Ossa extremitatis superioris</b>              |   |
| 36 Cingulum extremitatis superioris                 |   |
| <b>37 Scapula</b>                                   |   |
| 38 Facies costalis                                  |   |
| 39 Lineae musculares                                |   |
|   | <b>59 Clavicula</b>                         |
|   | 60 Extremitas sternalis                     |
|   | 61 Facies articularis sternalis             |
|   | 62 Tuberositas costalis                     |
|   | 63 Extremitas acromialis                    |
|   | 64 Facies articularis acromialis            |
|   | 65 Tuberositas coracoidea                   |
|   | 66 Skeleton extremitatis superioris liberae |
|   | <b>67 Humerus</b>                           |
|   | 68 Caput humeri                             |
|   | 69 Collum anatomicum                        |
|   | 70 Collum chirurgicum                       |
|   | 71 Tuberculum majus                         |
|   | 72 Tuberculum minus                         |
|   | 73 Sulcus intertubercularis                 |
|   | 74 Crista tuberculi majoris                 |
|   | 75 Crista tuberculi minoris                 |
|   | 76 Corpus humeri                            |

- |    |                               |    |                                  |
|----|-------------------------------|----|----------------------------------|
| 1  | Facies anterior medialis      | 40 | Crista interossea                |
| 2  | Facies anterior lateralis     | 41 | Facies dorsalis                  |
| 3  | Facies posterior              | 42 | Facies volaris                   |
| 4  | Margo medialis                | 43 | Facies medialis                  |
| 5  | Margo lateralis               | 44 | Margo dorsalis                   |
| 6  | Tuberositas deltoidea         | 45 | Margo volaris                    |
| 7  | Sulcus n. radialis            | 46 | Crista m. supinatoris            |
| 8  | Sulcus n. ulnaris             | 47 | Capitulum ulnae                  |
| 9  | Capitulum humeri              | 48 | Circumferentia articularis       |
| 10 | Trochlea humeri               | 49 | Processus styloideus             |
| 11 | Epicondylus medialis          |    | <b>50 Carpus</b>                 |
| 12 | Epicondylus lateralis         | 51 | Ossa carpi                       |
| 13 | Fossa olecrani                | 52 | (Os centrale)                    |
| 14 | Fossa coronoidea              | 53 | Os naviculare manus              |
| 15 | Fossa radialis                | 54 | Tuberculum oss. navicularis      |
| 16 | (Processus supracondyloideus) | 55 | Os lunatum                       |
|    | <b>17 Radius</b>              | 56 | Os triquetrum                    |
| 18 | Corpus radii                  | 57 | Os pisiforme                     |
| 19 | Capitulum radii               | 58 | Os multangulum majus             |
| 20 | Fovea capituli radii          | 59 | Tuberculum oss. multang. majoris |
| 21 | Collum radii                  | 60 | Os multangulum minus             |
| 22 | Circumferentia articularis    | 61 | Os capitatum                     |
| 23 | Tuberositas radii             | 62 | Os hamatum                       |
| 24 | Crista interossea             | 63 | Hamulus oss. hamati              |
| 25 | Facies dorsalis               | 64 | Eminentia carpi radialis         |
| 26 | Facies volaris                | 65 | Eminentia carpi ulnaris          |
| 27 | Facies lateralis              | 66 | Sulcus carpi                     |
| 28 | Margo dorsalis                |    | <b>67 Metacarpus</b>             |
| 29 | Margo volaris                 | 68 | Ossa metacarpalia I—V            |
| 30 | Processus styloideus          | 69 | Basis                            |
| 31 | Incisura ulnaris              | 70 | Corpus                           |
| 32 | Facies articularis carpea     | 71 | Capitulum                        |
|    | <b>33 Ulna</b>                | 72 | Os metacarpale III               |
| 34 | Corpus ulnae                  | 73 | Processus styloideus             |
| 35 | Olecranon                     | 74 | Phalanges digitorum manus        |
| 36 | Processus coronoideus         | 75 | Phalanx prima                    |
| 37 | Tuberositas ulnae             | 76 | Phalanx secunda                  |
| 38 | Incisura semilunaris          | 77 | Phalanx tertia                   |
| 39 | Incisura radialis             | 78 | Basis phalangis                  |



- 1 Corpus phalangis
- 2 Trochlea phalangis
- 3 Tuberositas unguicularis
- 4 Ossa sesamoidea

### 5 Ossa extremitatis inferioris

- 6 Cingulum extremitatis inferioris

#### 7 Os coxae

- 8 Foramen obturatum
- 9 Acetabulum
- 10 Fossa acetabuli
- 11 Incisura acetabuli
- 12 Facies lunata
- 13 Sulci paraglenoidales

#### 14 Os ilium

- 15 Corpus oss. ilium
- 16 Ala oss. ilium
- 17 Linea arcuata
- 18 Crista iliaca
  - 19 Labium externum
  - 20 Linea intermedia
  - 21 Labium internum
- 22 Spina iliaca anterior superior
- 23 Spina iliaca anterior inferior
- 24 Spina iliaca posterior superior
- 25 Spina iliaca posterior inferior
- 26 Linea glutea anterior
- 27 Linea glutea posterior
- 28 Linea glutea inferior
- 29 Facies auricularis
- 30 Tuberositas iliaca
- 31 Fossa iliaca

#### 32 Os ischii

- 33 Corpus oss. ischii
- 34 Ramus superior oss. ischii
- 35 Ramus inferior oss. ischii
- 36 Tuber ischiadicum
- 37 Spina ischiadica

- 38 Incisura ischiadica major
- 39 Incisura ischiadica minor

#### 40 Os pubis

- 41 Corpus oss. pubis
- 42 Pecten oss. pubis
- 43 Eminentia iliopectinea
- 44 Tuberculum pubicum
- 45 Crista obturatoria
- 46 Sulcus obturatorius
- 47 Tuberculum obturatorium anterius
- 48 (Tuberculum obturatorium posterius)
- 49 Ramus inferior oss. pubis
- 50 Ramus superior oss. pubis
- 51 Facies symphyseos

#### 52 Pelvis

- 53 Symphysis ossium pubis
- 54 Arcus pubis
- 55 Angulus pubis
- 56 Pelvis major
- 57 Pelvis minor
- 58 Linea terminalis
  - 59 Pars sacralis
  - 60 Pars iliaca
  - 61 Pars pubica
- 62 Apertura pelvis [minoris] superior
- 63 Apertura pelvis [minoris] inferior
- 64 Axis pelvis
- 65 Conjugata
- 66 Diameter transversa
- 67 Diameter obliqua
- 68 Inclinatio pelvis
- 69 Skeleton extremitatis inferioris liberae

#### 70 Femur

- 71 Caput femoris
- 72 Fovea capitis femoris
- 73 Collum femoris

- 1 Corpus femoris
- 2 Trochanter major
- 3 Fossa trochanterica
- 4 Trochanter minor
- 5 (Trochanter tertius)
- 6 Linea intertrochanterica
- 7 Crista intertrochanterica
- 8 Linea aspera

9 Labium laterale

10 Labium mediale

- 11 Linea pectinea
- 12 Tuberositas glutea
- 13 Fossa intercondyloidea
- 14 Linea intercondyloidea
- 15 Planum popliteum
- 16 Condylus medialis
- 17 Condylus lateralis
- 18 Facies patellaris
- 19 Epicondylus lateralis
- 20 Epicondylus medialis

### 21 Tibia

- 22 Facies articularis superior
- 23 Corpus tibiae
- 24 Condylus medialis
- 25 Condylus lateralis
- 26 Fossa intercondyloidea anterior
- 27 Fossa intercondyloidea posterior
- 28 Eminentia intercondyloidea
- 29 Tuberculum intercondyloideum  
mediale
- 30 Tuberculum intercondyloideum  
laterale
- 31 Margo infraglenoidalis
- 32 Tuberositas tibiae
- 33 Facies medialis
- 34 Facies posterior
- 35 Facies lateralis
- 36 Margo medialis
- 37 Crista anterior
- 38 Crista interossea

- 39 Linea poplitea
- 40 Malleolus medialis
- 41 Incisura fibularis
- 42 Sulcus malleolaris
- 43 Facies articularis inferior
- 44 Facies articularis malleolaris

### 45 Fibula

- 46 Corpus fibulae
- 47 Crista interossea
- 48 Crista anterior
- 49 Crista lateralis
- 50 Crista medialis
- 51 Facies medialis
- 52 Facies lateralis
- 53 Facies posterior
- 54 Capitulum fibulae
- 55 Facies articularis capituli
- 56 Apex capituli fibulae
- 57 Malleolus lateralis
- 58 Facies articularis malleoli

### 59 Patella

- 60 Basis patellae
- 61 Apex patellae
- 62 Facies articularis

### 63 Tarsus

- 64 Ossa tarsi

### 65 Talus

- 66 Caput tali
- 67 Corpus tali
- 68 Collum tali
- 69 Trochlea tali
- 70 Facies superior
- 71 Facies malleolaris me-  
dialis
- 72 Facies malleolaris lateralis
- 73 Sulcus tali
- 74 Processus lateralis tali
- 75 Facies articularis calcanea pos-  
terior

- |    |  |    |                                     |
|----|--|----|-------------------------------------|
| 1  | Facies articularis calcanea media              | 24 | Os cuneiforme primum                |
| 2  | Sulcus m. flexoris hallucis longi              | 25 | Os cuneiforme secundum              |
| 3  | Facies articularis navicularis                 | 26 | Os cuneiforme tertium               |
| 4  | Facies articularis calcanea anterior           | 27 | Os cuboideum                        |
| 5  | Processus posterior tali                       | 28 | Sulcus m. peronaei                  |
| 6  | (Os trigonum)                                  | 29 | Tuberositas oss. cuboidei           |
|    | <b>7 Calcaneus</b>                             |    |                                     |
| 8  | Corpus calcanei                                |    |                                     |
| 9  | Tuber calcanei                                 |    |                                     |
|    | <b>10 Processus medialis tuberis calcanei</b>  |    |                                     |
|    | <b>11 Processus lateralis tuberis calcanei</b> |    |                                     |
| 12 | Sustentaculum tali                             | 31 | Ossa metatarsalia I—V               |
| 13 | Sulcus m. flexoris hallucis longi              | 32 | Basis                               |
| 14 | Sulcus calcanei                                | 33 | Corpus                              |
| 15 | Sinus tarsi                                    | 34 | Capitulum                           |
| 16 | Facies articularis anterior                    | 35 | Tuberositas oss. metatarsalis I     |
| 17 | Facies articularis media                       | 36 | Tuberositas oss. metatarsalis V     |
| 18 | Facies articularis posterior                   |    |                                     |
| 19 | Sulcus m. peronaei                             |    |                                     |
| 20 | (Processus trochlearis)                        |    |                                     |
| 21 | Facies articularis cuboidea                    |    |                                     |
|    | <b>22 Os naviculare pedis</b>                  |    |                                     |
| 23 | Tuberositas oss. navicularis                   |    |                                     |
|    |  |    | <b>37 Phalanges digitorum pedis</b> |
|    |  | 38 | Phalanx prima                       |
|    |  | 39 | Phalanx secunda                     |
|    |  | 40 | Phalanx tertia                      |
|    |  | 41 | Tuberositas unguicularis            |
|    |  | 42 | Basis phalangis                     |
|    |  | 43 | Corpus phalangis                    |
|    |  | 44 | Trochlea phalangis                  |
|    |  | 45 | Ossa sesamoidea                     |
-

## 1 Syndesmologia

- |    |                         |           |                                  |
|----|-------------------------|-----------|----------------------------------|
| 2  | Junctura ossium         | 31        | Stratum fibrosum                 |
| 3  | Synarthrosis            | 32        | Stratum synoviale                |
| 4  | Sutura                  | 33        | Plica synovialis                 |
| 5  | Sutura serrata          | 34        | Villi synoviales                 |
| 6  | Sutura squamosa         | 35        | Synovia                          |
| 7  | Harmonia                |           |                                  |
| 8  | Gomphosis               | <b>36</b> | <b>Ligamenta columnae verte-</b> |
| 9  | Synchondrosis           |           | <b>bralis et cranii</b>          |
| 10 | Symphysis               | 37        | Fibrocartilaginee interverte-    |
| 11 | Diarthrosis             |           | brales                           |
| 12 | Articulatio             | 38        | Annulus fibrosus                 |
| 13 | „ simplex               | 39        | Nucleus pulposus                 |
| 14 | „ composita             | 40        | Ligg. flava                      |
| 15 | Arthrodia               | 41        | Capsulae articulares             |
| 16 | Articulatio sphaeroidea | 42        | Ligg. intertransversaria         |
| 17 | Enarthrosis             | 43        | Ligg. interspinalia              |
| 18 | Ginglymus               | 44        | Lig. supraspinale                |
| 19 | Articulatio cochlearis  | 45        | Lig. nuchae                      |
| 20 | „ ellipsoidea           | 46        | Lig. longitudinale anterius      |
| 21 | „ trochoidea            | 47        | Lig. longitudinale posterius     |
| 22 | „ sellaris              | 48        | Symphysis sacrococcygea          |
| 23 | Amphiarthrosis          | 49        | Lig. sacrococcygeum posterius    |
| 24 | Syndesmosis             |           | superficiale                     |
| 25 | Cartilago articularis   | 50        | Lig. sacrococcygeum posterius    |
| 26 | Cavum articulare        |           | profundum                        |
| 27 | Discus articularis      | 51        | Lig. sacrococcygeum anterius     |
| 28 | Labrum glenoidale       | 52        | Lig. sacrococcygeum laterale     |
| 29 | Meniscus articularis    | 53        | Lig. pterygospinosum             |
| 30 | Capsula articularis     | 54        | Lig. stylohyoideum               |

**1 Articulatio atlantooccipitalis**

- 2 Capsulae articulares
- 3 Membrana atlantooccipitalis anterior
- 4 Membrana atlantooccipitalis posterior

**5 Articulatio atlantoepitrophica**

- 6 Capsulae articulares
- 7 Lig. alaria
- 8 Lig. apicis dentis
- 9 Lig. transversum atlantis
- 10 Lig. cruciatum atlantis
- 11 Membrana tectoria

**12 Articulationes costovertebrales****13 Articulationes capitulorum**

- 14 Capsulae articulares
- 15 Lig. capituli costae radiatum
- 16 Lig. capituli costae interarticulare

**17 Articulationes costotransversariae**

- 18 Capsulae articulares
- 19 Lig. tuberculi costae
- 20 Lig. colli costae
- 21 Lig. costotransversarium anteriorius
- 22 Lig. costotransversarium posteriorius
- 23 Lig. lumbocostale
- 24 Foramen costotransversarium

**25 Articulationes sternocostales**

- 26 Capsulae articulares
- 27 Lig. sternocostale interarticulare
- 28 Ligg. sternocostalia radiata
- 29 Membrana sterni
- 30 Ligg. costoxiphoidea
- 31 Ligg. intercostalia
  - 32 Lig. intercostalia externa
  - 33 Lig. intercostalia interna
- 34 Articulationes interchondrales

**35 Articulatio mandibularis**

- 36 Capsula articularis
- 37 Discus articularis
- 38 Lig. temporomandibulare
- 39 Lig. sphenomandibulare
- 40 Lig. stylomandibulare

**41 Ligg. cinguli extremitatis superioris**

- 42 Lig. coracoacromiale
- 43 Lig. transversum scapulae superioris
- 44 Lig. transversum scapulae inferioris

**45 Articulatio acromioclavicularis**

- 46 Capsula articularis
- 47 Lig. acromioclaviculare
- 48 (Discus articularis)
- 49 Lig. coracoclaviculare
  - 50 Lig. trapezoideum
  - 51 Lig. conoideum

**52 Articulatio sternoclavicularis**

- 53 Capsula articularis
- 54 Discus articularis
- 55 Lig. sternoclaviculare
- 56 Lig. costoclaviculare
- 57 Lig. interclaviculare

**58 Articulatio humeri**

- 59 Capsula articularis
- 60 Labrum glenoidale
- 61 Lig. coracohumerale

**62 Articulatio cubiti**

- 63 Articulatio humeroulnaris
- 64 Articulatio humeroradialis
- 65 Articulatio radioulnaris proximalis
- 66 Capsula articularis
- 67 Lig. collaterale ulnare
- 68 Lig. collaterale radiale
- 69 Lig. annulare radii

- 1 Recessus sacciformis  
 2 Membrana interossea anti-  
 brachii  
 3 Chorda obliqua
- 4 Articulatio radioulnaris  
 distalis**
- 5 Capsula articularis  
 6 Discus articularis  
 7 Recessus sacciformis
- 8 Articulatio manus**
- 9 Articulatio radiocarpea  
 10 Articulatio intercarpea  
 11 Capsula articularis  
 12 Lig. radiocarpeum dorsale  
 13 Lig. radiocarpeum volare  
 14 Lig. carpi radiatum  
 15 Lig. collaterale carpi ulnare  
 16 Lig. collaterale carpi radiale  
 17 Ligg. intercarpea dorsalia  
 18 Ligg. intercarpea volaria  
 19 Ligg. intercarpea interossea
- 20 Articulatio ossis pisiformis**
- 21 Capsula articularis  
 22 Lig. pisohamatum  
 23 Lig. pisometacarpeum  
 24 Canalis carpi
- 25 Articulationes carpometacarpeae**
- 26 Capsulae articulares  
 27 Ligg. carpometacarpea dorsalia  
 28 Ligg. carpometacarpea volaria
- 29 Articulatio carpometacarpea  
 pollicis**
- 30 Capsula articularis
- 31 Articulationes intermeta-  
 carpeae**
- 32 Capsulae articulares  
 33 Ligg. basium [oss. metacarp.]  
 dorsalia  
 34 Lig. basium [oss. metacarp.]  
 volaria
- 35 Lig. basium [oss. metacarp.]  
 interossea  
 36 Spatia interossea metacarpi
- 37 Articulationes metacarpo-  
 phalangeae**
- 38 Capsulae articulares  
 39 Ligg. collateralia  
 40 Ligg. accessoria volaria  
 41 Ligg. capitulorum [oss. meta-  
 carpalium] transversa
- 42 Articulationes digitorum  
 manus**
- 43 Capsulae articulares  
 44 Ligg. collateralia
- 45 Ligg. cinguli extremitatis  
 inferioris**
- 46 Membrana obturatoria  
 47 Canalis obturatorius  
 48 Lig. iliolumbale  
 49 Lig. sacrotuberosum  
 50 Processus falciformis  
 51 Lig. sacrospinosum  
 52 Foramen ischiadicum majus  
 53 Foramen ischiadicum minus
- 54 Articulatio sacroiliaca**
- 55 Ligg. sacroiliaca anteriora  
 56 Ligg. sacroiliaca interossea  
 57 Lig. sacroiliacum posterius  
 breve  
 58 Lig. sacroiliacum posterius  
 longum
- 59 Symphysis ossium pubis**
- 60 Lig. pubicum superius  
 61 Lig. arcuatum pubis  
 62 Lamina fibrocartilaginea inter-  
 pubica
- 63 Articulatio coxae**
- 64 Capsula articularis  
 65 Labrum glenoidale  
 66 Lig. transversum acetabuli  
 67 Lig. teres femoris  
 68 Zona orbicularis  
 69 Lig. iliofemorale

1 Lig. ischiocapsulare

2 Lig. pubocapsulare

**3 Articulatio genu**

4 Capsula articularis

5 Meniscus lateralis

6 Meniscus medialis

7 Lig. transversum genu

8 Ligg. cruciata genu

9 Lig. cruciatum anterius

10 Lig. cruciatum posterius

11 Plica synovialis patellaris

12 Plicae alares

13 Lig. collaterale fibulare

14 Lig. collaterale tibiale

15 Lig. popliteum obliquum

16 Lig. popliteum arcuatum

17 Retinaculum lig. arcuati

18 Lig. patellae

19 Retinaculum patellae mediale

20 Retinaculum patellae laterale

**21 Articulatio tibiofibularis**

22 Capsula articularis

23 Ligg. capituli fibulae

24 Membrana interossea cruris

**25 Syndesmosis tibiofibularis**

26 Lig. malleoli lateralis anterius

27 Lig. malleoli lateralis posterius

**28 Articulationes pedis****29 Articulatio talo-cruralis**

30 Capsula articularis

31 Lig. deltoideum

32 Lig. tibionaviculare

33 Lig. calcaneotibiale

34 Lig. talotibiale anterius

35 Lig. talotibiale posterius

36 Lig. talofibulare anterius

37 Lig. talofibulare posterius

38 Lig. calcaneofibulare

**39 Articulationes inter-tarseae****40 Articulatio talocalcaneonavicularis****41 Articulatio talocalcanea**

42 Capsula articularis

43 Lig. talocalcaneum laterale

44 Lig. talocalcaneum mediale

45 Lig. talocalcaneum anterius

46 Lig. talocalcaneum posterius

**47 Articulatio tarsi transversa [Choparti]****48 Articulatio talonavicularis**

49 Capsula articularis

**50 Articulatio calcaneocuboidea**

51 Capsula articularis

**52 Articulatio cuneonavicularis****53 Ligg. tarsi interossea**

54 Lig. talocalcaneum interosseum

55 Lig. cuneocuboideum interosseum

56 Ligg. intercuneiformia interossea

**57 Ligg. tarsi dorsalia**

58 Lig. talonaviculare [dorsale]

59 Lig. cuneocuboideum dorsale

60 Lig. cuboideonaviculare dorsale

61 Lig. bifurcatum

62 Pars calcaneonavicularis

63 Pars calcaneocuboidea

64 Lig. calcaneonaviculare dorsale

65 Ligg. navicularicuneiformia dorsalia

**66 Ligg. tarsi plantaria**

67 Lig. plantare longum

68 Ligg. tarsi profunda

69 Lig. calcaneocuboideum plantare

70 Lig. calcaneonaviculare plantare

- |   |   |
|---|---|
| 1 Fibrocartilago navicularis                    | 13 Ligg. basium [oss. metatars.]<br>interossea        |
| 2 Ligg. navicularicuneiformia<br>plantaria      | 14 Ligg. basium [oss. metatars.]<br>dorsalia          |
| 3 Lig. cuboideonaviculare<br>plantare           | 15 Ligg. basium [oss. metatars.]<br>plantaria         |
| 4 Ligg. intercuneiformia plan-<br>taria         | 16 Spatia interossea metatarsi                        |
| 5 Lig. cuneocuboideum plantare                  |   |
| <b>6 Articulationes tarso-<br/>metatarseae</b>  |   |
| 7 Capsulae articulares                          | 17 <b>Articulationes metatarso-<br/>phalangeae</b>    |
| 8 Ligg. tarsometatarsea dorsalia                | 18 Capsulae articulares                               |
| 9 Ligg. tarsometatarsea plantaria               | 19 Ligg. collateralia                                 |
| 10 Ligg. cuneometatarsea interos-<br>sea        | 20 Ligg. accessoria plantaria                         |
|   | 21 Ligg. capitulorum [oss. meta-<br>tars.] transversa |
| <b>11 Articulationes intermeta-<br/>tarseae</b> | <b>22 Articulationes digitorum<br/>pedis</b>          |
| 12 Capsulae articulares                         | 23 Capsulae articulares                               |
|   | 24 Ligg. collateralia                                 |
-



**1 Myologia**

- |                       |                            |
|-----------------------|----------------------------|
| 2 Musculus            | 33 Aponeurosis             |
| 3 Caput               | 34 Perimysium              |
| 4 Venter              | 35 Fascia                  |
| 5 Musculus fusiformis | 36 Fascia superficialis    |
| 6 „ unipennatus       | 37 Inscriptio tendinea     |
| 7 „ bipennatus        | 38 Arcus tendineus         |
| 8 „ sphincter         | 39 Ligamentum vaginale     |
| 9 „ orbicularis       | 40 Vagina fibrosa tendinis |
| 10 „ articularis      | 41 Vagina mucosa tendinis  |
| 11 „ skeleti          | 42 Trochlea muscularis     |
| 12 „ cutaneus         | 43 Bursa mucosa            |
| 13 Tendo              |                            |

**14 Musculi dorsi**

- |                                  |                                       |
|----------------------------------|---------------------------------------|
| 15 M. trapezius                  | 44 M. longissimus capitis             |
| 16 (M. transversus nuchae)       | 45 M. spinalis                        |
| 17 M. latissimus dorsi           | 46 M. spinalis dorsi                  |
| 18 „ rhomboideus major           | 47 „ spinalis cervicis                |
| 19 „ rhomboideus minor           | 48 „ spinalis capitis                 |
| 20 „ levator scapulae            | 49 M. semispinalis                    |
| 21 „ serratus posterior inferior | 50 M. semispinalis dorsi              |
| 22 „ serratus posterior superior | 51 „ semispinalis cervicis            |
| 23 „ splenius cervicis           | 52 „ semispinalis capitis             |
| 24 „ splenius capitis            | 53 M. multifidus                      |
| 25 „ sacrospinalis               | 54 Mm. rotatores                      |
| 26 M. iliocostalis               | 56 M. rotatores longi                 |
| 27 M. iliocostalis lumborum      | 57 „ rotatores breves                 |
| 28 „ iliocostalis dorsi          | 58 M. interspinales                   |
| 29 „ iliocostalis cervicis       | 59 Mm. intertransversarii             |
| 30 M. longissimus                | 60 Mm. intertransversarii laterales   |
| 31 M. longissimus dorsi          | 61 Mm. intertransversarii mediales    |
| 32 „ longissimus cervicis        | 62 Mm. intertransversarii anteriores  |
|                                  | 63 Mm. intertransversarii posteriores |
|                                  | 64 M. rectus capitis posterior major  |

- 1 M. rectus capitis posterior minor  
 2 M. rectus capitis lateralis  
 3 „ obliquus capitis superior  
 4 „ obliquus capitis inferior  
 5 Fascia lumbodorsalis  
 6 Fascia nuchae

### 7 Musculi capitis

- 8 M. epicranius  
 9 M. frontalis  
 10 „ occipitalis  
 11 „ procerus  
 12 M. nasalis  
 13 Pars transversa  
 14 Pars alaris  
 15 M. depressor septi  
 16 M. orbicularis oculi  
 17 Pars palpebralis  
 18 Pars orbitalis  
 19 Pars lacrimalis [Horneri]  
 20 M. auricularis anterior  
 21 „ auricularis superior  
 22 „ auricularis posterior  
 23 M. orbicularis oris  
 24 „ triangularis  
 25 (M. transversus menti)  
 26 M. risorius  
 27 „ zygomaticus  
 28 M. quadratus labii superioris  
 29 Caput zygomaticum  
 30 Caput infraorbitale  
 31 Caput angulare  
 32 M. quadratus labii inferioris  
 33 M. caninus  
 34 „ buccinator  
 35 Mm. incisivi labii superioris  
 36 „ incisivi labii inferioris  
 37 M. mentalis  
 38 „ masseter  
 39 „ temporalis  
 40 „ pterygoideus externus

- 41 M. pterygoideus internus  
 42 Galea aponeurotica  
 43 Fascia buccopharyngea  
 44 Fascia parotideomasseterica  
 45 Fascia temporalis

### 46 Musculi oss. hyoidei

- 47 M. digastricus  
 48 Venter anterior  
 49 Venter posterior  
 50 M. stylohyoideus  
 51 „ mylohyoideus  
 52 „ geniohyoideus

### 53 Musculi colli

- 54 Platysma  
 55 M. sternocleidomastoideus  
 56 „ sternohyoideus  
 57 M. omohyoideus  
 58 Venter superior  
 59 Venter inferior  
 60 M. sternothyreoideus  
 61 „ thyreo-hyoideus  
 62 (M. levator glandulae thyroideae)  
 63 „ longus colli  
 64 „ longus capitis  
 65 „ rectus capitis anterior  
 66 „ scalenus anterior  
 67 „ scalenus medius  
 68 „ scalenus posterior  
 69 (M. scalenus minimus)  
 70 Fascia colli  
 71 Fascia praevertebralis

### 72 Musculi thoracis

- 73 (M. sternalis)  
 74 M. pectoralis major  
 75 Pars clavicularis  
 76 Pars sternocostalis  
 77 Pars abdominalis  
 78 M. pectoralis minor  
 79 M. subclavius

- |    |   |    |                                   |
|----|---|----|-----------------------------------|
| 1  | M. serratus anterior                    | 41 | Lig. inguinale [Poupartii]        |
| 2  | Mm. levatores costarum                  | 42 | Lig. lacunare [Gimbernati]        |
| 3  | Mm. levatores costarum longi            | 43 | Lig. inguinale reflexum [Collesi] |
| 4  | „ levatores costarum breves             | 44 | Annulus inguinalis subcutaneus    |
| 5  | Mm. intercostales externi               | 45 | Crus superius                     |
| 6  | „ intercostales interni                 | 46 | Crus inferius                     |
| 7  | „ subcostales                           | 47 | Fibrae intercrurales              |
| 8  | M. transversus thoracis                 | 48 | Trigonum lumbale [Petiti]         |
| 9  | Diaphragma                              | 49 | Linea semilunaris [Spige]         |
| 10 | Pars lumbalis                           | 50 | Fascia transversalis              |
| 11 | Crus mediale                            | 51 | Canalis inguinalis                |
| 12 | Crus intermedium                        | 52 | Annulus inguinalis abdominalis    |
| 13 | Crus laterale                           | 53 | Lig. interfoveolare [Hesselbachi] |
| 14 | Pars costalis                           | 54 | Plica epigastrica                 |
| 15 | Pars sternalis                          | 55 | Fovea inguinalis lateralis        |
| 16 | Hiatus aorticus                         | 56 | Fovea inguinalis medialis         |
| 17 | Hiatus oesophageus                      | 57 | Fovea supravesicalis              |
| 18 | Centrum tendineum                       |    |                                   |
| 19 | Foramen venae cavae                     |    |                                   |
| 20 | Arcus lumbocostalis medialis [Halleri]  |    |                                   |
| 21 | Arcus lumbocostalis lateralis [Halleri] |    |                                   |
| 22 | Fascia pectoralis                       |    |                                   |
| 23 | Fascia coracoclavicularis               |    |                                   |

## 24 Musculi abdominis

- 25 M. rectus abdominis  
 26 Falx [aponeurotica] inguinalis  
 27 M. pyramidalis  
 28 „ obliquus externus abdominis  
 29 „ obliquus internus abdominis  
 30 „ cremaster  
 31 „ transversus abdominis  
 32 „ quadratus lumborum  
 33 *Annulus umbilicalis*  
 34 Linea alba  
 35 Adminiculum lineae albae  
 36 Inscriptiones tendineae  
 37 Lig. suspensorium penis s. clitoridis  
 38 Lig. fundiforme penis  
 39 Vagina m. recti abdominis  
 40 Linea semicircularis [Douglasi]

## 58 Musculi coccygei

- 59 M. coccygeus  
 60 M. sacrococcygeus anterior  
 61 M. sacrococcygeus posterior

## 62 Musculi extremitatis superioris

- 63 M. deltoideus  
 64 M. supraspinatus  
 65 „ infraspinatus  
 66 „ teres minor  
 67 „ teres major  
 68 „ subscapularis  
 69 M. biceps brachii  
 70 Caput longum  
 71 Vagina mucosa intertubercularis  
 72 Caput breve  
 73 Lacertus fibrosus  
 74 M. coracobrachialis  
 75 „ brachialis  
 76 M. triceps brachii  
 77 Caput longum  
 78 Caput laterale  
 79 Caput mediale

- |    |   |    |   |
|----|---|----|---|
| 1  | M. anconaeus                            | 42 | Fascia supraspinata                           |
| 2  | (M. epitrochleoanconaeus)               | 43 | Fascia infraspinata                           |
| 3  | M. pronator teres                       | 44 | Fascia brachii                                |
|    | 4 Caput humerale                        | 45 | Septum intermusculare [hu-<br>meri] mediale   |
|    | 5 Caput ulnare                          | 46 | Septum intermusculare [hu-<br>meri] laterale  |
| 6  | M. flexor carpi radialis                | 47 | Sulcus bicipitalis medialis                   |
| 7  | „ palmaris longus                       | 48 | Sulcus bicipitalis lateralis                  |
| 8  | M. flexor carpi ulnaris                 | 49 | Fascia antibrachii                            |
|    | 9 Caput humerale                        | 50 | Fascia dorsalis manus                         |
|    | 10 Caput ulnare                         | 51 | Lig. carpi dorsale                            |
| 11 | M. flexor digitorum sublimis            | 52 | Aponeurosis palmaris                          |
|    | 12 Caput humerale                       |    | 53 Fasciculi transversi                       |
|    | 13 Caput radiale                        | 54 | Lig. carpi transversum                        |
| 14 | M. flexor digitorum profundus           | 55 | Lig. carpi volare                             |
| 15 | „ flexor pollicis longus                | 56 | Chiasma tendinum                              |
| 16 | „ pronator quadratus                    | 57 | Vinculum tendinum                             |
| 17 | „ brachioradialis                       | 58 | Vaginae mucosae                               |
| 18 | „ extensor carpi radialis longus        | 59 | Ligg. vaginalia digitorum<br>manus            |
| 19 | „ extensor carpi radialis brevis        | 60 | Ligg. annularia digitorum<br>manus            |
| 20 | M. extensor digitorum com-<br>munis     | 61 | Ligg. cruciata digitorum manus                |
|    | 21 Juncturae tendinum                   |    | <b>62 Musculi extremitatis<br/>inferioris</b> |
| 22 | M. extensor digiti quinti pro-<br>prius | 63 | M. iliopsoas                                  |
| 23 | „ extensor carpi ulnaris                | 64 | „ iliacus                                     |
| 24 | „ supinator                             | 65 | „ psoas major                                 |
| 25 | „ abductor pollicis longus              | 66 | „ psoas minor                                 |
| 26 | „ extensor pollicis brevis              | 67 | „ gluteus maximus                             |
| 27 | „ extensor pollicis longus              | 68 | „ gluteus medius                              |
| 28 | „ extensor indicis proprius             | 69 | „ gluteus minimus                             |
| 29 | „ palmaris brevis                       | 70 | „ tensor fasciae latae                        |
| 30 | „ abductor pollicis brevis              | 71 | „ piriformis                                  |
| 31 | „ flexor pollicis brevis                | 72 | „ obturator internus                          |
| 32 | „ opponens pollicis                     | 73 | „ gemellus superior                           |
| 33 | „ adductor pollicis                     | 74 | „ gemellus inferior                           |
| 34 | „ abductor digiti quinti                | 75 | „ quadratus femoris                           |
| 35 | „ flexor digiti quinti brevis           | 76 | „ sartorius                                   |
| 36 | „ opponens digiti quinti                | 77 | M. quadriceps femoris                         |
| 37 | Mm. lumbricales                         |    | 78 M. rectus femoris                          |
| 38 | „ interossei dorsales                   |    | 79 „ vastus lateralis                         |
| 39 | „ interossei volares                    |    |   |
| 40 | Fascia axillaris                        |    |   |
| 41 | Fascia subscapularis                    |    |   |

- 1 *M. vastus intermedius*  
 2 *M. vastus medialis*  
 3 *M. articularis genu*  
 4 „ *pectineus*  
 5 „ *adductor longus*  
 6 „ *gracilis*  
 7 „ *adductor brevis*  
 8 „ *adductor magnus*  
 9 „ *adductor minimus*  
 10 „ *obturator externus*  
 11 *M. biceps femoris*  
     12 *Caput longum*  
     13 *Caput breve*  
 14 *M. semitendinosus*  
 15 „ *semimembranosus*  
 16 „ *tibialis anterior*  
 17 „ *extensor digitorum longus*  
 18 „ *peroneus tertius*  
 19 „ *extensor hallucis longus*  
 20 „ *peroneus longus*  
 21 „ *peroneus brevis*  
 22 *M. triceps surae*  
     23 *M. gastrocnemius*  
         24 *Caput laterale*  
         25 *Caput mediale*  
     26 *M. soleus*  
 27 *Arcus tendineus m. solei*  
 28 *Tendo calcaneus [Achillis]*  
 29 *M. plantaris*  
 30 „ *popliteus*  
 31 „ *tibialis posterior*  
 32 „ *flexor digitorum longus*  
 33 „ *flexor hallucis longus*  
 34 „ *extensor hallucis brevis*  
 35 „ *extensor digitorum brevis*  
 36 „ *abductor hallucis*  
 37 „ *flexor hallucis brevis*  
 38 *M. adductor hallucis*  
     39 *Caput obliquum*  
     40 *Caput transversum*  
 41 *M. abductor digiti quinti*  
 42 *M. flexor digiti quinti brevis*  
 43 „ *opponens digiti quinti*  
 44 *M. flexor digitorum brevis*  
 45 „ *quadratus plantae*  
 46 *Mm. lumbricales*  
 47 „ *interossei dorsales*  
 48 „ *interossei plantares*  
 49 *Fascia lata*  
 50 *Tractus iliotibialis [Maissiati]*  
 51 *Septum intermusculare [femoris] laterale*  
 52 *Septum intermusculare [femoris] mediale*  
 53 *Canalis adductorius [Hunteri]*  
 54 *Hiatus tendineus [adductorius]*  
 55 *Fascia iliaca*  
 56 *Fascia iliopectinea*  
 57 *Lacuna musculorum*  
 58 *Lacuna vasorum*  
 59 *Trigonum femorale [Fossa Scarpae major]*  
 60 *Fossa iliopectinea*  
 61 *Fascia pectinea*  
 62 *Canalis femoralis*  
     63 *Annulus femoralis*  
     64 *Septum femorale [Cloqueti]*  
     65 *Fossa ovalis*  
         66 *Margo falciformis*  
         67 *Cornu superius*  
         68 *Cornu inferius*  
     69 *Fascia cribrosa*  
 70 *Fascia cruris*  
 71 *Septum intermusculare anterius [fibulare]*  
 72 *Septum intermusculare posterius [fibulare]*  
 73 *Lig. transversum cruris*  
 74 *Lig. laciniatum*  
 75 *Lig. cruciatum cruris*  
 76 *Retinaculum mm. peroneorum sup.*  
 77 *Retinaculum mm. peroneorum inferius*

- |   |                   |
|---|-------------------|
| 1 Fascia dorsalis pedis                           | 4 Vaginae mucosae |
| 2 Aponeurosis plantaris                           | 5 Ligg. annularia |
| 3 Fasciculi transversi apo-<br>neurosis plantaris | 6 Ligg. vaginae   |
|   | 7 Ligg. cruciata  |
- 

## 8 Bursae et Vaginae mucosae

- |                               |                             |
|-------------------------------|-----------------------------|
| 9 Bursa mucosa subcutanea     | 12 Bursa mucosa subtendinea |
| 10 Bursa mucosa submuscularis | 13 Vagina mucosa tendinis   |
| 11 Bursa mucosa subfascialis  |                             |
- 
- |   |  |
|---|--|
| 14 B. musculi trochlearis                           | 37 Vagina tendinum mm. abduc-<br>toris longi et extensoris<br>brevis pollicis        |
| 15 B. m. tensoris veli palatini                     | 38 Vagina tendinum mm. exten-<br>sororum carpi radialium                             |
| 16 B. subcutanea praementalis                       | 39 Vagina tendinis m. extensoris<br>pollicis longi                                   |
| 17 B. subcutanea prominentiae<br>laryngeae          | 40 Vagina tendinum mm. exten-<br>sororum digitorum communis et<br>extensoris indicis |
| 18 B. m. sternohyoidei                              | 41 Vagina tendinis m. extensoris<br>digiti minimi                                    |
| 19 B. m. thyreohyoidei                              | 42 Vagina tendinis m. extensoris<br>carpi ulnaris                                    |
| 20 B. subcutanea sacralis                           | 43 B. m. extensoris carpi radialis<br>brevis   |
| 21 B. coccygea                                      | 44 Bursae subcutaneae metacar-<br>pophalangeae dorsales                              |
| 22 B. subcutanea acromialis                         | 45 Bursae subcutaneae digitorum<br>dorsales  |
| 23 B. subacromialis                                 | 46 B. m. flexoris carpi ulnaris  |
| 24 B. subdeltoidea                                  | 47 B. m. flexoris carpi radialis   |
| 25 B. m. coracobrachialis                           | 48 Vagina tendinum mm. flexo-<br>rum communium                                       |
| 26 B. m. infraspinati                               | 49 Vag. tendinis m. flexoris polli-<br>cis longi                                     |
| 27 B. m. subscapularis                              | 50 Bursae intermetacarpophalan-<br>geae  |
| 28 B. m. teretis majoris                            | 51 Vaginae tendinum digitales  |
| 29 B. m. latissimi dorsi                            | 52 B. trochanterica subcutanea   |
| 30 B. subcutanea olecrani                           | 53 B. trochanterica m. glutaei<br>maximi   |
| 31 B. intratendinea olecrani                        | 54 B. troch. m. glutaei medii anter-<br>rior   |
| 32 B. subtendinea olecrani                          |  |
| 33 B. subcutanea epicondyli [hu-<br>meri] lateralis |  |
| 34 B. subcutanea epicondyli [hu-<br>meri] medialis  |  |
| 35 B. bicipitoradialis                              |  |
| 36 B. cubitalis interossea                          |  |

- |    |                                       |    |  |
|----|---------------------------------------|----|--|
| 1  | B. troch. m. glutaeci medii posterior | 25 | B. m. gastrocnemii medialis                          |
| 2  | B. troch. m. glutaeci minimi          | 26 | B. m. semimembrauosi                                 |
| 3  | B. m. piriformis                      | 27 | B. subcutanea malleoli lateralis                     |
| 4  | B. m. obturatorii interni             | 28 | B. subcutanea malleoli medialis                      |
| 5  | Bursae glutaeofemorales               | 29 | Vag. tendinis m. tibialis anterioris                 |
| 6  | B. ischiadica m. glutaeci maximi      | 30 | Vag. tendinis m. extensoris hallucis longi           |
| 7  | B. m. recti femoris                   | 31 | Vaginae tendinum m. extensoris digitorum pedis longi |
| 8  | B. iliopectinea                       | 32 | Vaginae tendinum m. flexoris digitorum pedis longi   |
| 9  | B. iliaca subtendinea                 | 33 | Vag. tendinis m. tibialis posterioris                |
| 10 | B. m. pectinei                        | 34 | Vag. tendinis m. flexoris hallucis longi             |
| 11 | B. m. bicipitis femoris superior      | 35 | Vag. tendinum mm. peroneorum communis                |
| 12 | B. praepatellaris subcutanea          | 36 | Bursa sinus tarsi                                    |
| 13 | B. praepatellaris subfascialis        | 37 | B. subtendinea m. tibialis anterioris                |
| 14 | B. praepatellaris subtendinea         | 38 | B. subtendinea m. tibialis posterioris               |
| 15 | B. suprapatellaris                    | 39 | B. subcutanea calcanea                               |
| 16 | B. infrapatellaris subcutanea         | 40 | B. tendinis calcanei [Achillis]                      |
| 17 | B. infrapatellaris profunda           | 41 | Vag. tendinis m. peronaci longi plantaris            |
| 18 | B. subcutanea tuberositatis tibiae    | 42 | Bursae intermetatarsophalangeae                      |
| 19 | B. m. sartorii propria                | 43 | Bursae mm. lumbricalium pedis                        |
| 20 | B. anserina                           | 44 | Vaginae tendinum digitales pedis                     |
| 21 | B. m. bicipitis femoris inferior      |    |  |
| 22 | B. m. poplitei                        |    |  |
| 23 | B. bicipitogastrocnemialis            |    |  |
| 24 | B. m. gastrocnemii lateralis          |    |  |
-

## 1 Splanchnologia

- |                                  |                            |
|----------------------------------|----------------------------|
| 2 Tunica albuginea               | 15 Ligamentum serosum      |
| 3 Tunica fibrosa                 | 16 Serum                   |
| 4 Tunica adventitia              | 17 Epithelium              |
| 5 Tunica mucosa                  | 18 Endothelium             |
| 6 Lamina propria mucosae         | 19 Organon parenchymatosum |
| 7 Lamina muscularis mu-<br>cosae | 20 Parenchyma              |
| 8 Tela submucosa                 | 21 Stroma                  |
| 9 Plica mucosa                   | 22 Glandula                |
| 10 Mucus                         | 23 Lobus                   |
| 11 Tunica muscularis             | 24 Lobulus                 |
| 12 Tunica serosa                 | 25 Glandula mucosa         |
| 13 Tela subserosa                | 26 Musculus viscerum       |
| 14 Plica serosa                  |                            |

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## 27 Apparatus digestorius

- |                           |                                 |
|---------------------------|---------------------------------|
|                           | 40 Palatum durum                |
|                           | 41 Palatum molle                |
|                           | 42 Raphe palati                 |
| <b>28 Cavum oris</b>      |                                 |
| 29 Bucca                  |                                 |
| 30 Corpus adiposum buccae |                                 |
| 31 Vestibulum oris        |                                 |
| 32 Cavum oris proprium    |                                 |
| 33 Rima oris              |                                 |
| 34 Labia oris             |                                 |
| 35 Labium superius        |                                 |
| 36 Labium inferius        |                                 |
| 37 Commissura labiorum    |                                 |
| 38 Angulus oris           |                                 |
| 39 Palatum                |                                 |
|                           | <b>43 Tunica mucosa oris</b>    |
|                           | 44 Frenulum labii superioris    |
|                           | 45 Frenulum labii inferioris    |
|                           | 46 Gingiva                      |
|                           | 47 Caruncula sublingualis       |
|                           | 48 Plica sublingualis           |
|                           | 49 Plicae palatinae transversae |
|                           | 50 Papilla incisiva             |



- 1 Glandulae oris**
- 2 Gl. labiales
- 3 Gl. buccales
- 4 Gl. molares
- 5 Gl. palatinae
- 6 Gl. linguales
- 7 Gl. lingualis anterior [Bladini, Nuhni]
- 8 Gl. sublingualis
- 9 Ductus sublingualis major
- 10 Ductus sublinguales minores
- 11 Gl. submaxillaris
- 12 Ductus submaxillaris [Whartoni]
- 13 Gl. parotis
- 14 Processus retromandibularis
- 15 Gl. parotis accessoria
- 16 Ductus parotideus [Stenonis]
- 17 Saliva
- 18 Dentes**
- 19 Corona dentis
- 20 Tubercula [coronae] dentis
- 21 Collum dentis
- 22 Radix [Radices] dentis
- 23 Apex radiceis dentis
- 24 Facies masticatoria
- 25 Facies labialis [buccalis]
- 26 Facies lingualis
- 27 Facies contactus
- 28 Facies medialis } dentium incisivorum et caninorum
- 29 Facies lateralis }
- 30 Facies anterior } dentium praemolarium et molariarum
- 31 Facies posterior }
- 32 Cavum dentis
- 33 Pulpa dentis
- 34 *Papilla dentis*
- 35 Canalis radiceis dentis
- 36 Foramen apicis dentis
- 37 Substantia eburnea
- 38 Substantia adamantina
- 39 Substantia ossea
- 40 Canaliculi dentales
- 41 Spatia interglobularia
- 42 Prismata adamantina
- 43 Cuticula dentis
- 44 Periosteum alveolare
- 45 Arcus dentalis superior
- 46 Arcus dentalis inferior
- 47 Dentes incisivi
- 48 Dentes canini
- 49 Dentes praemolares
- 50 Dentes molares
- 51 Dens serotinus
- 52 Dentes permanentes
- 53 Dentes decidui
- 54 Lingua**
- 55 Dorsum linguae
- 56 Radix linguae
- 57 Corpus linguae
- 58 Facies inferior [linguae]
- 59 Plica fimbriata
- 60 Margo lateralis [linguae]
- 61 Apex linguae
- 62 Tunica mucosa linguae
- 63 Frenulum linguae
- 64 Papillae linguales
- 65 Papillae filiformes
- 66 Papillae conicae
- 67 Papillae fungiformes
- 68 Papillae lenticulares
- 69 Papillae vallatae
- 70 Papillae foliatae
- 71 Sulcus medianus linguae
- 72 Sulcus terminalis
- 73 Foramen caecum linguae [Morgagnii]
- 74 (Ductus lingualis)
- 75 *Ductus thyreoglossus*
- 76 Tonsilla lingualis
- 77 Folliculi linguales
- 78 Septum linguae

**I Musculi linguae**

- 2 M. genioglossus
- 3 M. hyoglossus
- 4 M. chondroglossus
- 5 M. styloglossus
- 6 M. longitudinalis superior
- 7 M. longitudinalis inferior
- 8 M. transversus linguae
- 9 M. verticalis linguae

**ro Fauces**

- 11 Isthmus faucium
- 12 Velum palatinum
- 13 Uvula [palatina]
- 14 Arcus palatini
  - 15 Arcus glossopalatinus
  - 16 Arcus pharyngopalatinus
- 17 Plica salpingopalatina
- 18 Tonsilla palatina
  - 19 Fossulae tonsillares
- 20 Sinus tonsillaris
- 21 Plica triangularis
- 22 Fossa supratonsillaris

**23 Musculi palati et faucium**

- 24 M. levator veli palatini
- 25 M. tensor veli palatini
- 26 M. uvulae
- 27 M. glossopalatinus
- 28 M. pharyngopalatinus

**29 Pharynx**

- 30 Cavum pharyngis
- 31 Fornix pharyngis
- 32 Pars nasalis
- 33 Pars oralis
- 34 Pars laryngea
- 35 Ostium pharyngeum tubae
  - 36 Labium anterius
  - 37 Labium posterius
  - 38 Torus tubarius
- 39 Plica salpingopharyngea
- 40 Recessus pharyngeus [Rosenmuelleri]

- 41 (Bursa pharyngea)
- 42 Recessus piriformis
- 43 M. stylopharyngeus
- 44 Fascia pharyngobasilaris
- 45 Tunica mucosa
  - 46 Gl. pharyngeae
  - 47 Tonsilla pharyngea
  - 48 Fossulae tonsillares
- 49 Tela submucosa
- 50 Tunica muscularis pharyngis
- 51 Raphe pharyngis
- 52 Raphe pterygomandibularis
- 53 M. constrictor pharyngis superior
  - 54 M. pterygopharyngeus
  - 55 M. buccopharyngeus
  - 56 M. mylopharyngeus
  - 57 M. glossopharyngeus
- 58 M. salpingopharyngeus
- 59 M. constrictor pharyngis medius
  - 60 M. chondropharyngeus
  - 61 M. ceratopharyngeus
- 62 M. constrictor pharyngis inferior
  - 63 M. thyreopharyngeus
  - 64 M. cricopharyngeus

**65 Tubus digestorius****66 Oesophagus**

- 67 Pars cervicalis
- 68 Pars thoracalis
- 69 Pars abdominalis
- 70 Tunica adventitia
- 71 Tunica muscularis
- 72 M. bronchooesophageus
- 73 M. pleurooesophageus
- 74 Tela submucosa
- 75 Tunica mucosa
  - 76 Lam. muscularis mucosae
- 77 Gl. oesophageae

**78 Ventriculus**

[Gaster]

- 79 Paries anterior
- 80 Paries posterior

- |    |                                      |    |  |
|----|--------------------------------------|----|--|
| 1  | Curvatura ventriculi major           | 42 | Chymus                                 |
| 2  | Curvatura ventriculi minor           | 43 | Chylus                                 |
| 3  | Cardia                               | 44 | Succus entericus                       |
| 4  | Fundus ventriculi                    | 45 | D u o d e n u m                        |
| 5  | Corpus ventriculi                    | 46 | Pars superior                          |
| 6  | Pylorus                              | 47 | Pars descendens                        |
| 7  | Pars cardiaca                        | 48 | Pars inferior                          |
| 8  | Pars pylorica                        | 49 | Pars horizontalis [inferior]           |
| 9  | (Antrum cardiacum)                   | 50 | Pars ascendens                         |
| 10 | Antrum pyloricum                     | 51 | Flexura duodeni superior               |
| 11 | Tunica serosa                        | 52 | Flexura duodeni inferior               |
| 12 | Tunica muscularis                    | 53 | Flexura duodenojejunalis               |
| 13 | Stratum longitudinale                | 54 | M. suspensorius duodeni                |
| 14 | Ligg. pylori                         | 55 | Plica longitudinalis duodeni           |
| 15 | Stratum circulare                    | 56 | Papilla duodeni [Santorini]            |
| 16 | M. sphincter pylori                  | 57 | Gl. duodenales [Brunneri]              |
| 17 | Fibrae obliquae                      | 58 | Intestinum tenue mesenteriale          |
| 18 | Valvula pylori                       | 59 | Intestinum jejunum                     |
| 19 | Tela submucosa                       | 60 | Intestinum ileum                       |
| 20 | Tunica mucosa                        |    |  |
| 21 | Lam. muscularis mucosae              | 61 | Intestinum crassum                     |
| 22 | Areae gastricae                      | 62 | Intestinum caecum                      |
| 23 | Plicae villosae                      | 63 | Valvula coli                           |
| 24 | Foveolae gastricae                   | 64 | Labium superius                        |
| 25 | Glandulae gastricae [propriae]       | 65 | Labium inferius                        |
| 26 | Glandulae pyloricae                  | 66 | Frenula valvulae coli                  |
| 27 | Noduli lymphatici gastrici           | 67 | Processus vermiformis                  |
| 28 | Succus gastricus                     | 68 | (Valvula processus vermiformis)        |
| 29 | Intestinum tenue                     | 69 | Noduli aggregati processus vermiformis |
| 30 | Tunica serosa                        | 70 | Colon                                  |
| 31 | Tunica muscularis                    | 71 | Colon ascendens                        |
| 32 | Stratum longitudinale                | 72 | Flexura coli dextra                    |
| 33 | Stratum circulare                    | 73 | Colon transversum                      |
| 34 | Tela submucosa                       | 74 | Flexura coli sinistra                  |
| 35 | Tunica mucosa                        | 75 | Colon descendens                       |
| 36 | Lam. muscularis mucosae              | 76 | Colon sigmoideum                       |
| 37 | Plicae circulares [Kerkringi]        | 77 | Plicae semilunares coli                |
| 38 | Villi intestinales                   | 78 | Haustra coli                           |
| 39 | Gl. intestinales [Lieberkuehni]      | 79 | Tunica serosa                          |
| 40 | Noduli lymphatici solitarii          | 80 | Appendices epiploicae                  |
| 41 | Noduli lymphatici aggregati [Peyeri] | 81 | Tunica muscularis                      |
|    |                                      | 82 | Taeniae coli                           |

- 1 Taenia mesocolica
- 2 Taenia omentalis
- 3 Taenia libera
- 4 Tela submucosa
- 5 Tunica mucosa
  - 6 Lam. muscularis mucosae
- 7 Gl. intestinales [Lieberkuehni]
- 8 Noduli lymphatici solitarii

### 9 Intestinum rectum

- 10 Flexura sacralis
- 11 Flexura perinealis
- 12 Ampulla recti
- 13 Tunica muscularis
- 14 M. sphincter ani internus
- 15 M. rectococcygeus
- 16 Tela submucosa
- 17 Tunica mucosa
  - 18 Lam. m. mucosae
  - 19 Gl. intestinales [Lieberkuehni]
- 20 Noduli lymphatici
- 21 Plicae transversales recti
- 22 Pars analis recti
- 23 Columnae rectales [Morgagnii]
- 24 Sinus rectales
- 25 Annulus haemorrhoidalis

### 26 Pancreas

- 27 Caput pancreatis
- 28 Processus uncinatus [Pancreas Winslowi]
- 29 Incisura pancreatis
- 30 Corpus pancreatis
  - 31 Facies anterior
  - 32 Facies posterior
  - 33 Facies inferior
  - 34 Margo superior
  - 35 Margo anterior
  - 36 Margo posterior
- 37 Tuber omentale
- 38 Cauda pancreatis
- 39 Ductus pancreaticus [Wirsungii]

- 40 Ductus pancreaticus accessorius [Santorini]
- 41 (Pancreas accessorium)
- 42 Succus pancreaticus

### 43 Hepar

- 44 Facies superior
- 45 Facies posterior
- 46 Facies inferior
- 47 Margo anterior
- 48 Incisura umbilicalis
- 49 Fossae sagittales dextrae
  - 50 Fossa vesicae felleae
  - 51 Fossa venae cavae
- 52 Fossa sagittalis sinistra
  - 53 Fossa venae umbilicalis
  - 54 Fossa ductus venosi
- 55 Tunica serosa
- 56 Lig. teres hepatis
- 57 Lig. venosum [Arantii]
- 58 Porta hepatis
- 59 Lobus hepatis dexter
- 60 Lobus quadratus
- 61 Lobus caudatus [Spigeli]
  - 62 Processus papillaris
  - 63 Processus caudatus
- 64 Lobus hepatis sinister
- 65 (Appendix fibrosus hepatis)
- 66 Impressio cardiaca
- 67 Tuber omentale
- 68 Impressio oesophagea
- 69 Impressio gastrica
- 70 Impressio duodenalis
- 71 Impressio colica
- 72 Impressio renalis
- 73 Impressio suprarenalis
- 74 Lobuli hepatis
- 75 Capsula fibrosa [Glissoni]
- 76 Rami arteriosi interlobulares
- 77 Venae interlobulares
- 78 Venae centrales

- |                                      |   |
|--------------------------------------|---|
| 1 Ductus biliferi                    |   |
| 2 Ductus interlobulares              |   |
| 3 Ductus hepaticus                   |   |
| 4 Vasa aberrantia hepatis            |   |
| 5 Fel [Bilis]                        |   |
| 6 Vesica fellea                      |   |
| 7 Fundus vesicae felleae             |   |
| 8 Corpus vesicae felleae             |   |
| 9 Collum vesicae felleae             |   |
| 10 Ductus cysticus                   |   |
| 11 Tunica serosa vesicae felleae     |   |
| 12 Tunica muscularis vesicae felleae |   |
| 13 Tunica mucosa vesicae felleae     |   |
| 14 Plicae tun. mucosae v. felleae    |   |
| 15 Valvula spiralis [Heisteri]       |   |
| 16 Ductus choledochus                |   |
| 17 Gl. mucosae biliosae              |   |
|                                      | <b>18 Lien</b>                            |
|                                      | 19 Facies diaphragmatica                  |
|                                      | 20 Facies renalis                         |
|                                      | 21 Facies gastrica                        |
|                                      | 22 Extremitas superior                    |
|                                      | 23 Extremitas inferior                    |
|                                      | 24 Margo posterior                        |
|                                      | 25 Margo anterior                         |
|                                      | 26 Hilus lienis                           |
|                                      | 27 Tunica serosa                          |
|                                      | 28 Tunica albuginea                       |
|                                      | 29 Trabeculae lienis                      |
|                                      | 30 Pulpa lienis                           |
|                                      | 31 Rami lienales [arteriae lienales]      |
|                                      | 32 Penicilli                              |
|                                      | 33 Noduli lymphatici lienales [Malpighii] |
|                                      | 34 (Lien accessorius)                     |

### 35 Apparatus respiratorius

- |   |                                |                          |
|---|--------------------------------|--------------------------|
|   | <b>36 Cavum nasi</b>           |                          |
| 37 Nares                                |                                | 56 Atrium meatus medii   |
| 38 Choanae                              |                                | 57 Meatus nasi inferior  |
| 39 Septum nasi                          |                                | 58 Meatus nasi communis  |
| 40 Septum cartilagineum                 |                                | 59 Meatus nasopharyngeus |
| 41 Septum membranaceum                  | 60 Regio respiratoria          |                          |
| 42 Vestibulum nasi                      | 61 Regio olfactoria            |                          |
| 43 Limen nasi                           | 62 Gl. olfactoriae             |                          |
| 44 Sulcus olfactorius                   | 63 Sinus paranasales           |                          |
| 45 (Concha nasalis suprema [Santorini]) | 64 Sinus maxillaris [Highmori] |                          |
| 46 Concha nasalis superior              | 65 Sinus sphenoidalis          |                          |
| 47 Concha nasalis media                 | 66 Sinus frontalis             |                          |
| 48 Concha nasalis inferior              | 67 Cellulae ethmoidales        |                          |
| 49 Membrana mucosa nasi                 | 68 Bulla ethmoidalis           |                          |
| 50 Plexus cavernosi concharum           | 69 Infundibulum ethmoidale     |                          |
| 51 Agger nasi                           | 70 Hiatus semilunaris          |                          |
| 52 Recessus sphenoethmoidalis           | 71 Gl. nasales                 |                          |
| 53 Meatus nasi                          |                                | <b>72 Nasus externus</b> |
| 54 Meatus nasi superior                 | 73 Basis nasi                  |                          |
| 55 Meatus nasi medius                   | 74 Radix nasi                  |                          |

- 1 Dorsum nasi  
 2 Margo nasi  
 3 Apex nasi  
 4 Ala nasi  
 5 Septum mobile nasi  
 6 Cartilaginee nasi  
 7 Cartilago septi nasi  
   8 Processus sphenoidalis septi cartilaginei  
 9 Cartilago nasi lateralis  
 10 Cartilago alaris major  
   11 Crus mediale  
   12 Crus laterale  
 13 Cartilaginee alares minores  
 14 Cartilaginee sesamoideae nasi  
 15 Organon vomeronasale [Jacobsoni]  
 16 Cartilago vomeronasalis [Jacobsoni]  
 17 (Ductus incisivus)  
   **18 Larynx**  
 19 Prominentia laryngea  
 20 Cartilaginee laryngis  
 21 Cartilago thyreoidea  
   22 Lamina [dextra et sinistra]  
   23 Incisura thyreoidea superior  
   24 Incisura thyreoidea inferior  
   25 Tuberculum thyreoideum superius  
   26 Tuberculum thyreoideum inferius  
   27 (Linea obliqua)  
   28 Cornu superius  
   29 Cornu inferius  
   30 (Foramen thyreoideum)  
 31 Lig. hyothyreoideum laterale  
 32 Cartilago triticea  
 33 Lig. hyothyreoideum medium  
 34 Membrana hyothyreoidea  
 35 Cartilago cricoidea  
   36 Arcus [cartilaginee cricoideae]  
   37 Lamina [cartilaginee cricoideae]  
   38 Facies articularis arytaenoidea  
   39 Facies articularis thyreoidea  
   40 Articulatio cricothyreoidea  
   41 Capsula articularis cricothyreoidea  
   42 Ligg. ceratocricoidea lateralia  
   43 Lig. ceratocricoideum anterius  
   44 Ligg. ceratocricoidea posteriora  
   45 Lig. cricothyreoideum [medium]  
   46 Lig. cricotracheale  
   47 Cartilago arytaenoidea  
     48 Facies articularis  
     49 Basis [cartilaginee arytaenoideae]  
     50 Crista arcuata  
     51 Colliculus  
     52 Fovea oblonga  
     53 Fovea triangularis  
     54 Apex [cartilaginee arytaenoideae]  
     55 Processus vocalis  
     56 Processus muscularis  
   57 Cartilago corniculata [Santorini]  
   58 Synchronosis arycorniculata  
   59 Articulatio cricoarytaenoidea  
   60 Lig. cricopharyngeum  
   61 Lig. corniculopharyngeum  
   62 Lig. ventriculare  
   63 Lig. vocale  
     64 (Cartilago sesamoidea)  
   65 Capsula articularis cricoarytaenoidea  
   66 Lig. cricoarytaenoideum posterius  
   67 Epiglottis  
     68 Petiolus epiglottidis  
     69 Tuberculum epiglotticum  
     70 Cartilago epiglottica  
   71 Lig. thyreoepiglotticum  
   72 Lig. hyoepiglotticum  
   73 Cartilago cuneiformis [Wrisbergi]  
   74 Tuberculum cuneiforme [Wrisbergi]  
   75 Tuberculum corniculatum [Santorini]  
     **76 Musculi laryngis**  
     77 M. aryepiglotticus  
     78 M. cricothyreoideus  
     79 Pars recta

- 1 Pars obliqua
- 2 M. cricoarytaenoideus posterior
- 3 (M. ceratocricoideus)
- 4 M. cricoarytaenoideus lateralis
- 5 M. ventricularis
- 6 M. vocalis
- 7 M. thyreoepiglotticus
- 8 M. thyreoarytaenoideus [externus]
- 9 M. arytaenoideus obliquus
- 10 M. arytaenoideus transversus
- 11 **Cavum laryngis**
- 12 Vallecula epiglottica
- 13 Aditus laryngis
- 14 Vestibulum laryngis
- 15 Rima vestibuli
- 16 Labium vocale
- 17 Glottis
- 18 Rima glottidis
- 19 Pars intermembranacea
- 20 Pars intercartilaginea
- 21 Ventriculus laryngis [Morgagnii]
- 22 Appendix ventriculi laryngis
- 23 Tunica mucosa laryngis
- 24 Membrana elastica laryngis
- 25 Conus elasticus
- 26 Plica glossoepiglottica mediana
- 27 Plica glossoepiglottica lateralis
- 28 Plica aryepiglottica
- 29 Plica nervi laryngei
- 30 Plica ventricularis
- 31 Plica vocalis
- 32 Macula flava
- 33 Aditus glottidis inferior
- 34 Aditus glottidis superior
- 35 Incisura interarytaenoidea
- 36 Gl. laryngeae
- 37 Gl. laryngeae anteriores
- 38 Gl. laryngeae mediae
- 39 Gl. laryngeae posteriores
- 40 Noduli lymphatici laryngei
- 41 **Trachea et Bronchi**
- 42 Cartilagineae tracheales
- 43 Ligg. annularia [trachealia]
- 44 Paries membranacea
- 45 Gl. tracheales
- 46 Bifurcatio tracheae
- 47 Bronchus [dexter et sinister]
- 48 Rami bronchiales
- 49 Ramus bronchialis eparterialis
- 50 Rami bronchiales hyparteriales
- 51 Tunica muscularis
- 52 Tela submucosa
- 53 Tunica mucosa
- 54 Gl. tracheales
- 55 Gl. bronchiales
- 56 **Pulmo**
- 57 Basis pulmonis
- 58 Apex pulmonis
- 59 Sulcus subclavius
- 60 Facies costalis
- 61 Facies mediastinalis
- 62 Facies diaphragmatica
- 63 Margo anterior
- 64 Margo inferior
- 65 Hilus pulmonis
- 66 Radix pulmonis
- 67 Incisura cardiaca
- 68 Lobus superior
- 69 Lobus medius
- 70 Lobus inferior
- 71 Incisura interlobaris
- 72 Lobuli pulmonum
- 73 Rami bronchiales
- 74 Bronchioli
- 75 Bronchioli respiratorii
- 76 Ductuli alveolares
- 77 Alveoli pulmonum
- 78 Lymphoglandulae bronchiales
- 79 Noduli lymphatici bronchiales
- 80 Lymphoglandulae pulmonales

**1 Cavum thoracis**

- 2 Fascia endothoracica  
 3 Cavum pleurae  
 4 Pleura  
   5 Cupula pleurae  
   6 Pleura pulmonalis  
   7 Pleura parietalis  
   8 Pleura mediastinalis  
     9 Laminae mediastinales  
     10 Pleura pericardiaca  
   11 Pleura costalis  
   12 Pleura diaphragmatica  
 13 Sinus pleurae  
   14 Sinus phrenicocostalis  
   15 Sinus costomediastinalis  
 16 Lig. pulmonale  
 17 Plicae adiposae  
 18 Villi pleurales  
 19 Septum mediastinale

- 20 Cavum mediastinale anterius  
 21 Cavum mediastinale posterius

**22 Gl. thyreoidea**

- 23 Isthmus gl. thyreoideae  
 24 (Lobus pyramidalis)  
 25 Lobus [dexter et sinister]  
 26 Lobuli gl. thyreoideae  
 27 Stroma gl. thyreoideae  
 28 (Gl. thyreoideae accessoriae)  
 29 (Gl. thyreoidea accessoria suprahyoidea)

**30 Glomus caroticum****31 Thymus**

- 32 Lobus [dexter et sinister]  
 33 Tractus centralis  
 34 Lobuli thymi

**35 Apparatus urogenitalis****36 Organa uropoëtica****37 Ren**

- 38 Margo lateralis  
 39 Margo medialis  
   40 Hilus renalis  
   41 Sinus renalis  
 42 Facies anterior  
 43 Facies posterior  
 44 Extremitas superior  
 45 Extremitas inferior  
 46 (Impressio muscularis)  
 47 (Impressio hepatica)  
 48 (Impressio gastrica)  
 49 Capsula adiposa  
 50 Tunica fibrosa  
 51 Tunica muscularis  
 52 Tubuli renales  
   53 Tubuli renales contorti

- 54 Tubuli renales recti  
 55 Substantia corticalis  
 56 Substantia medullaris  
 57 Lobi renales  
 58 Pyramides renales [Malpighii]  
 59 Basis pyramidis  
 60 Papillae renales  
 61 Area cribrosa  
 62 Foramina papillaria  
 63 Columnae renales [Bertini]  
 64 Lobuli corticales  
   65 Pars radiata [Processus Ferreini]  
   66 Pars convoluta  
 67 Corpuscula renis [Malpighii]  
 68 Glomeruli  
   69 Capsula glomeruli  
 70 Pelvis renalis  
 71 Calyces renales



- 1 Calyces renales majores  
 2 Calyces renales minores  
 3 Gl. pelvis renalis
- 4 Arteriae renis**
- 5 Aa. interlobares renis  
 6 Arteriae arciformes  
 7 Arteriae interlobulares  
   8 Vas afferens  
   9 Vas efferens  
 10 Rami capsulares  
 11 Arteriolae rectae  
 12 Aa. nutriciae pelvis renalis
- 13 Venae renis**
- 14 Vv. interlobares  
 15 Venae arciformes  
 16 Venae interlobulares  
 17 Venulae rectae  
 18 Venae stellatae
- 19 Ureter**
- 20 Pars abdominalis  
 21 Pars pelvina  
 22 Tunica adventitia  
 23 Tunica muscularis  
   24 Stratum externum  
   25 Stratum medium  
   26 Stratum internum  
 27 Tunica mucosa  
 28 Gl. mucosae ureteris
- 29 Vesica urinaria**
- 30 Vertex vesicae  
 31 Corpus vesicae  
 32 Fundus vesicae  
 33 Lig. umbilicale medium  
 34 *Urachus*  
 35 Tunica serosa  
 36 Tunica muscularis  
   37 Stratum externum
- 38 Stratum medium  
 39 Stratum internum  
 40 M. pubovesicalis  
 41 M. rectovesicalis  
 42 Tela submucosa  
 43 Tunica mucosa  
 44 Gl. vesicales  
 45 Noduli lymphatici vesicales  
 46 Trigonum vesicae [Lieutaudi]  
   47 Uvula vesicae  
   48 Plica ureterica  
   49 Orificium ureteris  
 50 Orificium urethrae internum  
 51 Annulus urethralis
- 52 Glandula supra-  
renalis**
- 53 Substantia corticalis  
 54 Substantia medullaris  
 55 Hilus gl. suprarenalis  
 56 Facies anterior  
 57 Facies posterior  
 58 Basis gl. suprarenalis  
 59 Apex suprarenalis [gl. dex-  
trae]  
 60 Margo superior  
 61 Margo medialis  
 62 Vena centralis  
 63 (Gl. suprarenales accessoriae)
- 64 Organa genitalia**
- 65 Organa genitalia  
virilia**
- 66 Testis**
- 67 Extremitas superior  
 68 Extremitas inferior  
 69 Facies lateralis  
 70 Facies medialis  
 71 Margo anterior  
 72 Margo posterior  
 73 Tunica albuginea  
 74 Mediastinum testis [Corpus  
Highmori]  
 75 Septula testis

- 1 Lobuli testis  
 2 Parenchyma testis  
 3 Tubuli seminiferi contorti  
 4 Tubuli seminiferi recti  
     5 Tunica propria  
 6 Rete testis [Halleri]  
 7 Ductuli efferentes testis  
 8 Sperma [Semen]  
 9 Epididymis  
 10 Caput epididymidis  
 11 Corpus epididymidis  
 12 Cauda epididymidis  
 13 Lobuli epididymidis  
 14 Ductus epididymidis  
 15 Ductuli aberrantes  
 16 (Ductulus aberrans superior)  
 17 Appendices testis  
     18 Appendix testis [Morgagnii]  
     19 (Appendix epididymis)  
 20 Paraidymis  
 21 Ductus deferens  
 22 Ampulla ductus deferentis  
     23 Diverticula ampullae  
     24 Tunica adventitia  
     25 Tunica muscularis  
         26 Stratum externum  
         27 Stratum medium  
         28 Stratum internum  
     29 Tunica mucosa  
 30 Ductus ejaculatorius  
     31 **Vesicula seminalis**  
 32 Corpus vesiculae seminalis  
 33 Tunica adventitia  
 34 Tunica muscularis  
 35 Tunica mucosa  
 36 Ductus excretorius  
 37 **Funiculus spermaticus et tunicae testis et funiculi spermatici**  
 38 (Rudimentum processus vaginalis)  
 39 Tunica vaginalis propria testis  
     40 Lamina parietalis  
     41 Lamina visceralis  
 42 Lig. epididymidis superius  
 43 Lig. epididymidis inferius  
 44 Sinus epididymidis  
 45 Tunica vaginalis communis [testis et funiculi spermatici]  
 46 M. cremaster  
 47 Fascia cremasterica [Cooperi]  
 48 *Descensus testis*  
 49 *Gubernaculum testis* [Hunteri]  
     50 **Prostata**  
 51 Basis prostatae  
 52 Apex prostatae  
 53 Facies anterior  
 54 Facies posterior  
 55 Lobus [dexter et sinister]  
 56 Isthmus prostatae  
     57 (Lobus medius)  
 58 Corpus glandulare  
 59 Ductus prostatici  
 60 Succus prostaticus  
 61 M. prostaticus  
     62 **Glandula bulbourethralis** [Cowperi]  
 63 Corpus gl. bulbourethralis  
 64 Ductus excretorius  
     65 **Partes genitales externae**  
     66 **Penis**  
 67 Radix penis  
 68 Corpus penis  
 69 Crus penis  
 70 Dorsum penis  
 71 Facies urethralis  
 72 Glans penis  
     73 Corona glandis  
     74 Septum glandis  
     75 Collum glandis

- 1 Praeputium
- 2 Frenulum praeputii
- 3 Raphe penis
- 4 Corpus cavernosum penis
- 5 Corpus cavernosum urethrae
- 6 Bulbus urethrae
  - 7 Hemisphaeria bulbi urethrae
  - 8 Septum bulbi urethrae
- 9 Tunica albuginea corporum cavernosorum
- 10 Septum penis
- 11 Trabeculae corporum cavernosorum
- 12 Cavernae corporum cavernosorum
- 13 Arteriae helicinae
- 14 Venae cavernosae
- 15 Lig. suspensorium penis
- 16 Fascia penis
- 17 Gl. praeputiales
- 18 Smegma praeputii

### 19 Urethra virilis

- 20 Pars prostatica
- 21 Crista urethralis
- 22 Colliculus seminalis
- 23 Utriculus prostaticus
- 24 Pars membranacea
- 25 Pars cavernosa
- 26 Fossa navicularis urethrae
  - [Morgagnii]
- 27 (Valvula fossae navicularis)
- 28 Orificium urethrae externum
- 29 Lacunae urethrales
  - [Morgagnii]
- 30 Gl. urethrales [Littrei]

### 31 Scrotum

- 32 Raphe scroti
- 33 Septum scroti
- 34 Tunica dartos

### 35 Organa genitalia muliebria

#### 36 Ovarium

- 37 Hilus ovarii
- 38 Facies medialis
- 39 Facies lateralis
- 40 Margo liber
- 41 Margo mesovaricus
- 42 Extremitas tubaria
- 43 Extremitas uterina
- 44 Stroma ovarii
- 45 Folliculi oophori primarii
- 46 Folliculi oophori vesiculosi
  - [Graafi]
- 47 Theca folliculi
  - 48 Tunica externa
  - 49 Tunica interna
- 50 Liquor folliculi
- 51 Stratum granuloseum
- 52 Cumulus oophorus
  - 53 Ovulum
- 54 Corpus luteum
- 55 Corpus albicans
- 56 Lig. ovarii proprium

#### 57 Tuba uterina [Fallopilii]

- 58 Ostium abdominale tubae uterinae
- 59 Infundibulum tubae uterinae
- 60 Fimbriae tubae
  - 61 Fimbria ovarica
- 62 Ampulla tubae uterinae
- 63 Isthmus tubae uterinae
- 64 Pars uterina
- 65 Ostium uterinum tubae
- 66 Tunica serosa
- 67 Tunica adventitia
- 68 Tunica muscularis
  - 69 Stratum longitudinale
  - 70 Stratum circulare
- 71 Tela submucosa
- 72 Tunica mucosa
- 73 Plicae tubariae
  - 74 Plicae ampullares
  - 75 Plicae isthmicae

#### 76 Uterus

- 77 Corpus uteri

- 1 Fundus uteri  
 2 Margo lateralis  
 3 Facies vesicalis  
 4 Facies intestinalis  
 5 Cavum uteri  
 6 Orificium internum uteri  
 7 Cervix [uteri]  
 8 Portio supravaginalis [cervicis]  
 9 Portio vaginalis [cervicis]  
 10 Orificium externum uteri  
     11 Labium anterius  
     12 Labium posterius  
 13 Canalis cervicis uteri  
 14 Plicae palmatae  
 15 Gl. cervicales [uteri]  
 16 Parametrium  
 17 Tunica serosa [Perimetrium]  
 18 Tunica muscularis  
 19 Tunica muscularis cervicis  
 20 Tunica mucosa  
     21 Gl. uterinae  
 22 M. rectouterinus  
 23 Lig. teres uteri  
 24 (Processus vaginalis peritonaei)

### 25 Vagina

- 26 Fornix vaginae  
 27 Paries anterior  
 28 Paries posterior  
 29 Hymen [femininus]  
 30 Carunculae hymenales  
 31 Tunica muscularis  
 32 Tunica mucosa  
 33 Noduli lymphatici vaginales  
 34 Rugae vaginales  
 35 Columnnae rugarum  
     36 Columnna rugarum posterior  
     37 Columnna rugarum anterior  
     38 Carina urethralis [vaginae]

### 39 Epoophoron

- 40 Ductus epoophori longitudinalis [Gartneri]

- 41 Ductuli transversi  
 42 Appendices vesiculosi [Morgagnii]

### 43 Paroophoron

### 44 Partes genitales externae

- 45 Pudendum muliebre  
 46 Labium majus pudendi  
 47 Commissura labiorum anterior  
 48 Commissura labiorum posterior  
 49 Frenulum labiorum pudendi  
 50 Rima pudendi  
 51 Fossa navicularis [vestibuli vaginae]  
 52 Labium minus pudendi  
 53 Vestibulum vaginae  
 54 Bulbus vestibuli  
 55 Gl. sebaceae  
 56 Gl. vestibulares minores  
 57 Orificium vaginae

### 58 Gl. vestibularis major [Bartholini]

### 59 Clitoris

- 60 Crus clitoridis  
 61 Corpus clitoridis  
 62 Glans clitoridis  
 63 Frenulum clitoridis  
 64 Praeputium clitoridis  
     65 Smegma clitoridis  
 66 Corpus cavernosum clitoridis  
 67 Septum corporum cavernosorum  
 68 Fascia clitoridis  
 69 Lig. suspensorium clitoridis

### 70 Urethra muliebris

- 71 Orificium urethrae externum  
 72 Corpus spongiosum urethrae  
 73 Tunica muscularis  
     74 Stratum circulare  
     75 Stratum longitudinale  
 76 Tunica submucosa  
 77 Tunica mucosa

- 1 Gl. urethrales  
 2 Crista urethralis  
 3 (Ductus paraurethrales)  
 4 Termini ontogenetici  
 5 *Membranae deciduae*  
   6 *Decidua vera*  
   7 *Decidua capsularis*  
   8 *Decidua basalis*  
 9 *Placenta*  
   10 *Placenta uterina*  
   11 *Placenta foetalis*  
 12 *Funiculus umbilicalis*  
 13 *Corpus Wolffii*  
 14 *Ductus Wolffii*  
 15 *Ductus Muelleri*  
 16 *Sinus urogenitalis*
- 17 Perineum**
- 18 Raphe perinei  
 19 Musculi perinei  
 20 Diaphragma pelvis  
 21 M. levator ani  
   22 Arcus tendineus m. levatoris ani  
 23 M. coccygeus [S. 47]  
 24 M. sphincter ani externus  
   25 Lig. anococcygeum  
 26 Fascia pelvis  
   27 Fascia endopelvina  
   28 Fascia diaphragmatis pelvis superior  
   29 Arcus tendineus fasciae pelvis  
   30 Lig. puboprostaticum [pubovesicale] medium  
   31 Lig. puboprostaticum [pubovesicale] laterale  
 32 Fascia diaphragmatis pelvis inferior  
 33 Diaphragma urogenitale  
 34 M. transversus perinei profundus  
 35 M. sphincter urethrae membranaceae  
 36 Fascia diaphragmatis urogenitalis superior  
 37 Fascia diaphragmatis urogenitalis inferior
- 38 Lig. transversum pelvis  
 39 Fascia prostatae  
 40 Fascia obturatoria  
 41 Fossa ischiorectalis  
 42 M. transversus perinei superficialis  
 43 M. ischiocavernosus  
 44 M. bulbocavernosus  
 45 Fascia superficialis perinei
- 46 Peritoneum**
- 47 Tunica serosa  
 48 Tela subserosa  
 49 Peritoneum parietale  
 50 Peritoneum viscerale  
 51 Cavum peritonaei  
 52 *Mesenterium commune*  
 53 Mesenterium  
   54 Radix mesenterii  
   55 Lamina mesenterii propria  
 56 Mesocolon  
   57 Mesocolon transversum  
   58 Mesocolon ascendens  
   59 Mesocolon descendens  
   60 Mesocolon sigmoideum  
 61 Mesorectum  
 62 Mesenteriolum processus vermiformis  
 63 *Mesogastrium*  
 64 Omentum minus  
   65 Lig. hepatogastricum  
   66 Lig. hepatoduodenale  
   67 (Lig. hepatocolicum)  
 68 Lig. gastrolienale  
 69 Lig. gastrocolicum  
 70 Omentum majus  
 71 Bursa omentalis  
   72 Vestibulum bursae omentalis  
   73 Recessus superior omentalis  
   74 Recessus inferior omentalis  
   75 Recessus lienalis  
   76 Plica gastropancreatica  
   77 Foramen epiploicum [Winslowi]

- |                                   |   |
|-----------------------------------|---|
| 1 Lig. phrenicocolicum            | 21 (Recessus phrenicohepatici)                |
| 2 Lig. phrenicolienale            | 22 Plica umbilicalis media                    |
| 3 Lig. falciforme hepatis         | 23 Plica umbilicalis lateralis                |
| 4 Lig. coronarium hepatis         | 24 Plica epigastrica                          |
| 5 Lig. triangulare dextrum        | 25 Plica pubovesicalis                        |
| 6 Lig. triangulare sinistrum      | 26 Plica vesicalis transversa                 |
| 7 Lig. hepatorenale               | 27 <i>Mesorchium</i>                          |
| 8 (Lig. duodenorenale)            | 28 <i>Processus vaginalis peritonaei</i>      |
| 9 Recessus duodenojejunalis       | 29 Lig. latum uteri                           |
| 10 Plica duodenojejunalis         | 30 Mesometrium                                |
| 11 (Plica duodenomesocolica)      | 31 Mesosalpinx                                |
| 12 Recessus intersigmoideus       | 32 Mesovarium                                 |
| 13 Recessus ileocaecalis superior | 33 Bursa ovarica                              |
| 14 Recessus ileocaecalis inferior | 34 Lig. suspensorium ovarii                   |
| 15 Plica ileocaecalis             | 35 Plica rectouterina [Douglasi]              |
| 16 Fossa caecalis                 | 36 Excavatio rectouterina [Cavum<br>Douglasi] |
| 17 Recessus retrocaecalis         | 37 Excavatio vesicouterina                    |
| 18 Plica caecalis                 | 38 Excavatio rectovesicalis                   |
| 19 Recessus paracolici            | 39 Spatium retroperitoneale                   |
| 20 (Fossa iliacosubfascialis)     |   |

## 1 Angiologia

- |                     |                                |
|---------------------|--------------------------------|
| 2 Vas collaterale   | 17 Emissarium                  |
| 3 Vas anastomoticum | 18 Corpus cavernosum           |
| 4 Ramus communicans | 19 Vas capillare               |
| 5 Plexus vasculosus | 20 Vas lymphaticum             |
| 6 Rete vasculosum   | 21 Plexus lymphaticus          |
| 7 Rete mirabile     | 22 Lymphoglandula              |
| 8 Arteria           | 23 Nodulus lymphaticus         |
| 9 Arteriola         | 24 Cisterna                    |
| 10 Vena             | 25 Tunica externa [adventicia] |
| 11 Vena cutanea     | 26 Tunica media                |
| 12 Vena comitans    | 27 Tunica intima               |
| 13 Venula           | 28 Vasa vasorum                |
| 14 Plexus venosus   | 29 Vagina vasorum              |
| 15 Rete venosum     | 30 Sanguis                     |
| 16 Sinus [venosus]  | 31 Lympha                      |

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## 32 Cor

- |                                    |                           |
|------------------------------------|---------------------------|
| 33 Basis cordis                    | 49 Septum ventriculorum   |
| 34 Facies sternocostalis           | 50 Septum musculare ven-  |
| 35 Facies diaphragmatica           | tricularum                |
| 36 Apex cordis                     | 51 Septum membranaceum    |
| 37 Incisura [apicis] cordis        | ventriculorum             |
| 38 Sulcus longitudinalis anterior  | 52 Atrium cordis          |
| 39 Sulcus longitudinalis posterior | 53 Auricula cordis        |
| 40 Sulcus coronarius               | 54 Septum atriorum        |
| 41 Pericardium                     | 55 Pars membranacea septi |
| 42 Liquor pericardii               | atriorum                  |
| 43 Ligg. sternopericardiaca        | 56 Ostium venosum         |
| 44 Sinus transversus pericardii    | 57 Ostium arteriosum      |
| 45 Epicardium                      | 58 Trabeculae carnae      |
| 46 Myocardium                      | 59 Vortex cordis          |
| 47 Endocardium                     | 60 Mm. papillares         |
| 48 Ventriculus cordis              | 61 Chordae tendineae      |
|                                    | 62 Trigona fibrosa        |
|                                    | 63 Annuli fibrosi         |

- 1 **Atrium dextrum**  
 2 Mm. pectinati  
 3 Sulcus terminalis atrii dextri  
 4 Crista terminalis  
 5 Sinus venarum [cavarum]  
 6 Limbus fossae ovalis [Vieus-  
 senii]  
 7 Auricula dextra  
 8 Tuberculum intervenosum  
 [Loweri]  
 9 Valvula venae cavae inferioris  
 [Eustachii]  
 10 Fossa ovalis  
 11 Valvula sinus coronarii [The-  
 besii]  
 12 Foramina venarum minimarum  
 [Thebesii]  
 13 **Ventriculus dexter**  
 14 Valvula tricuspidalis  
 15 Cuspis anterior  
 16 Cuspis posterior  
 17 Cuspis medialis  
 18 Crista supraventricularis  
 19 Conus arteriosus
- 20 Valvulae semilunares a. pul-  
 monalis  
 21 Valvula semilunaris an-  
 terior  
 22 Valvula semilunaris dex-  
 tra  
 23 Valvula semilunaris sin-  
 istra  
 24 Noduli valvularum semiluna-  
 rium  
 25 Lunulae valvularum semilu-  
 narium
- 26 **Atrium sinistrum**  
 27 Auricula sinistra  
 28 Valvula foraminis ovalis
- 29 **Ventriculus sinister**  
 30 Valvula bicuspidalis [mitralis]  
 31 Cuspis anterior  
 32 Cuspis posterior  
 33 Valvulae semilunares aortae  
 34 Valvula semilunaris pos-  
 terior  
 35 Valvula semilunaris dex-  
 tra  
 36 Valvula semilunaris sin-  
 istra  
 37 Noduli valvularum semiluna-  
 rium [Arantii]  
 38 Lunulae valvularum semilu-  
 narium

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### 39 Arteriae

- 40 **A. pulmonalis**  
 41 Ramus dexter  
 42 Ramus sinister  
 43 *Ductus arteriosus* [Botalli]  
 44 Ligamentum arteriosum
- 45 **Aorta**  
 46 Aorta ascendens  
 47 Bulbus aortae  
 48 Sinus aortae [Valsalvae]  
 49 Arcus aortae  
 50 Isthmus aortae  
 51 Aorta descendens  
 52 A. coronaria [cordis] dextra  
 53 Ramus descendens poste-  
 rior
- 54 A. coronaria [cordis] sinistra  
 55 Ramus circumflexus  
 56 Ramus descendens ante-  
 rior
- 57 **A. anonyma**  
 58 (A. thyreoidea ima)
- 59 **A. carotis communis**  
 60 **A. carotis externa**  
 61 **A. thyreoidea superior**  
 62 Ramus hyoideus  
 63 Ramus sternocleidomastoideus  
 64 A. laryngea superior  
 65 Ramus cricothyreoideus



- 1 Ramus anterior  
 2 Ramus posterior  
 3 Rami glandulares
- 4 **A. pharyngea ascendens**  
 5 A. meningea posterior  
 6 Rami pharyngei  
 7 A. tympanica inferior
- 8 **A. lingualis**  
 9 Ramus hyoideus  
 10 A. sublingualis  
 11 Rami dorsales linguae  
 12 A. profunda linguae
- 13 **A. maxillaris externa**  
 14 A. palatina ascendens  
 15 Ramus tonsillaris  
 16 A. submentalis  
 17 Rami glandulares  
 18 A. labialis inferior  
 19 A. labialis superior  
 20 A. angularis
- 21 **A. sternocleidomastoidea**  
 22 **A. occipitalis**  
 23 Ramus mastoideus  
 24 Ramus auricularis  
 25 Rami musculares  
     26 Ramus descendens  
 27 (Ramus meningeus)  
 28 Rami occipitales
- 29 **A. auricularis posterior**  
 30 A. stylomastoidea  
     31 A. tympanica posterior  
     32 Rami mastoidei  
     33 Ramus stapedius  
 34 Ramus auricularis  
 35 Ramus occipitalis
- 36 **A. temporalis superficialis**  
 37 Rami parotidei
- 38 A. transversa faciei  
 39 Rami auriculares anteriores  
 40 A. zygomaticoorbitalis  
 41 A. temporalis media  
 42 Ramus frontalis  
 43 Ramus parietalis
- 44 **A. maxillaris interna**  
 45 A. auricularis profunda  
 46 A. tympanica anterior  
 47 A. alveolaris inferior  
 48 R. mylohyoideus  
 49 A. mentalis  
 50 A. meningea media  
 51 (Ramus meningeus accessorius)  
     52 Ramus petrosus superficialis  
     53 A. tympanica superior  
 54 A. masseterica  
 55 A. temporalis profunda posterior  
 56 A. temporalis profunda anterior  
 57 Rami pterygoidei  
 58 A. buccinatoria  
 59 A. alveolaris superior posterior  
 60 A. infraorbitalis  
     61 Aa. alveol. superiores anteriores  
 62 A. palatina descendens  
 63 A. canalis pterygoidei [Vidii]  
 64 A. palatina major  
 65 Aa. palatinae minores  
 66 A. sphenopalatina  
 67 Aa. nasales posteriores laterales et septi
- 68 **A. carotis interna**  
 69 Ramus caroticotympanicus
- 70 **A. ophthalmica**  
 71 A. centralis retinae  
 72 A. lacrimalis  
 73 Aa. palpebrales laterales  
 74 Rami musculares  
 75 Aa. ciliares posteriores breves  
 76 Aa. ciliares posteriores longae

- 1 Aa. ciliares anteriores
- 2 Aa. conjunctivales anteriores
- 3 Aa. conjunctivales posteriores
- 4 Aa. episclerales
- 5 A. supraorbitalis
- 6 A. ethmoidalis posterior
- 7 A. ethmoidalis anterior
- 8 A. meningea anterior
- 9 Aa. palpebrales mediales
- 10 Arcus tarseus superior
- 11 Arcus tarseus inferior
- 12 A. frontalis
- 13 A. dorsalis nasi

**14 Aa. cerebri**

- 15 A. communicans posterior
- 16 A. chorioidea
- 17 A. cerebri anterior
- 18 A. communicans anterior
- 19 A. cerebri media

**20 A. subclavia**

**21 A. vertebralis**

- 22 Rami spinales
- 23 A. spinalis posterior
- 24 A. spinalis anterior
- 25 Ramus meningeus
- 26 A. cerebelli inferior posterior

**27 A. basilaris**

- 28 A. cerebelli inferior anterior
- 29 A. auditiva interna
- 30 Rami ad pontem
- 31 A. cerebelli superior
- 32 A. cerebri posterior
- 33 Circulus arteriosus [Willisi]

**34 A. mammaria interna**

- 35 Aa. mediastinales anteriores
- 36 Aa. thymicae

- 37 Rami bronchiales
- 38 A. pericardiacophrenica
- 39 Rami sternales
- 40 Rami perforantes
  - 41 Rami mammarii
  - 42 Rami musculares
  - 43 Rami cutanei
- 44 (Ramus costalis lateralis)
- 45 Rami intercostales
- 46 A. musculophrenica
- 47 A. epigastrica superior
  
- 48 Truncus thyreoidealis**

**49 A. thyreoidea inferior**

- 50 A. laryngea inferior
- 51 Rami pharyngei
- 52 Rami oesophagei
- 53 Rami tracheales
- 54 Rami glandulares

**55 A. cervicalis ascendens**

- 56 Rami spinales
- 57 Rami musculares
  - 58 Ramus profundus

**59 A. cervicalis superficialis**

**60 A. transversa scapulae**

- 61 Ramus acromialis

**62 Truncus costocervicalis**

- 63 A. intercostalis suprema
  - 64 Rami dorsales
  - 65 Rami spinales
- 66 A. cervicalis profunda

**67 A. transversa colli**

- 68 Ramus ascendens
- 69 Ramus descendens

**70 A. axillaris**

- 71 Rami subscapulares

**1 A. thoracalis suprema****2 A. thoracoacromialis**

- 3 Ramus acromialis  
 4 Rete acromiale  
 5 Ramus deltoideus  
 6 Rami pectorales

**7 A. thoracalis lateralis**

- 8 Rami mammarii externi

**9 A. subscapularis**

- 10 A. thoracodorsalis  
 11 A. circumflexa scapulae  
 12 A. circumflexa humeri anterior  
 13 A. circumflexa humeri posterior

**14 A. brachialis****15 A. profunda brachii**

- 16 Aa. nutriciae humeri  
 17 R. deltoideus  
 18 A. collateralis media  
 19 A. collateralis radialis  
 20 A. collateralis ulnaris superior  
 21 A. collateralis ulnaris inferior

**22 A. radialis**

- 23 A. recurrens radialis  
 24 Rami musculares  
 25 Ramus carpeus volaris  
 26 Ramus volaris superficialis  
 27 Ramus carpeus dorsalis  
 28 Rete carpi dorsale  
 29 Aa. metacarpeae dorsales  
 30 Aa. digitales dorsales  
 31 A. princeps pollicis  
 32 A. volaris indicis radialis  
 33 Arcus volaris profundus  
 34 Aa. metacarpeae volares  
 35 Rami perforantes

**36 A. ulnaris**

- 37 Aa. recurrentes ulnares  
 38 Rete articulare cubiti  
 39 A. interossea communis  
 40 A. interossea dorsalis  
 41 A. interossea recurrens  
 42 A. interossea volaris  
 43 A. mediana  
 44 Rami musculares  
 45 Ramus carpeus dorsalis  
 46 Ramus carpeus volaris  
 47 Ramus volaris profundus  
 48 Arcus volaris superficialis  
 49 Aa. digitales volares communes  
 50 Aa. digitales volares propriae

**51 Aorta thoracalis****52 Rami viscerales**

- 53 Aa. bronchiales  
 54 Aa. oesophageae  
 55 Rami pericardiaci

**56 Rami parietales**

- 57 Rami mediastinales  
 58 Aa. phrenicae superiores

**59 Aa. intercostales**

- 60 Rami posteriores  
 61 Ramus spinalis  
 62 Rami musculares  
 63 Ramus cutaneus medialis  
 64 Ramus cutaneus lateralis  
 65 Rami anteriores  
 66 Rami musculares  
 67 Rami cutanei laterales  
 [pectorales et abdominales]  
 68 Ramus posterior

- 1 Ramus anterior  
 2 Rami mammarii laterales  
 3 Rami cutanei anteriores [pectorales et abdominales]  
 4 Rami mammarii mediales
- 5 Aorta abdominalis**
- 6 Rami parietales  
 7 A. phrenica inferior
- 8 Rami suprarenales superiores
- 9 Aa. lumbales
- 10 Ramus dorsalis  
 11 Ramus spinalis
12. A. sacralis media
- 13 A. lumbalis ima  
 14 Glomus coccygeum  
 15 Rami viscerales
16. A. coeliaca
- 17 A. gastrica sinistra  
 18 Rami oesophagei  
 19. A. hepatica  
 20. A. gastrica dextra  
 21 A. hepatica propria  
 22 Ramus dexter  
 23 A. cystica  
 24 Ramus sinister
- 25 A. gastroduodenalis  
 26 A. pancreaticoduoden. superior  
 27 Rami pancreatici  
 28 Rami duodenales  
 29 A. gastroepiploica dextra  
 30 Rami epiploici
- 31 A. lienalis  
 32 Rami pancreatici  
 33 A. gastroepiploica sinistra  
 34 Aa. gastricae breves  
 35 Rami lienales
- 36 A. mesenterica superior
- 37 Aa. intestinales  
 38 A. pancreaticoduodenalis inferior  
 39 Aa. jejunales  
 40 Aa. ileae  
 41 A. ileocolica  
 42 A. appendicularis  
 43 A. colica dextra  
 44 A. colica media
- 45 A. mesenterica inferior
- 46 A. colica sinistra  
 47 Aa. sigmoideae  
 48 A. haemorrhoidalis superior
- 49 A. suprarenalis media
- 50 A. renalis
- 51 A. suprarenalis inferior
- 52 A. spermatica interna
- 53 A. testicularis
- 54 A. ovarica
- 55 A. iliaca communis
- 56 A. hypogastrica
- 57 Rami parietales
- 58 A. iliolumbalis
- 59 Ramus lumbalis  
 60 Ramus spinalis  
 61 Ramus iliacus
- 62 A. sacralis lateralis
- 63 Rami spinales
- 64 A. obturatoria
- 65 Ramus pubicus  
 66 Ramus anterior  
 67 Ramus posterior  
 68 A. acetabuli

- 1 **A. glutaea superior**  
 2 Ramus superior  
 3 Ramus inferior  
 4 **A. glutaea inferior**  
 5 A. comitans n. ischiadici  
 6 Rami viscerales  
 7 **A. umbilicalis**  
 8 Aa. vesicales superiores  
 9 [Ligamentum umbilicale laterale]  
 10 **A. vesicalis inferior**  
 11 **A. deferentialis**  
 12 **A. uterina**  
 13 A. vaginalis  
 14 Ramus ovarii  
 15 Ramus tubarius  
 16 **A. haemorrhoidalis media**  
 17 **A. pudenda interna**  
 18 A. haemorrhoidalis inferior  
 19 A. perinei  
 20 Aa. scrotales posteriores  
 21 Aa. labiales posteriores  
 22 A. penis  
 23 A. urethralis  
 24 A. bulbi urethrae  
 25 A. bulbi vestibuli [vaginae]  
 26 A. profunda penis  
 27 A. dorsalis penis  
 28 A. clitoridis  
 29 A. profunda clitoridis  
 30 A. dorsalis clitoridis  
 31 **A. iliaca externa**  
 32 **A. epigastrica inferior**  
 33 Ramus pubicus  
 34 Ramus obturatorius  
 35 A. spermatica externa  
 36 A. lig. teretis uteri  
 37 **A. circumflexa ilium profunda**  
 38 **A. femoralis**  
 39 A. epigastrica superficialis  
 40 A. circumflexa ilium superficialis  
 41 Aa. pudendae externae  
 42 Aa. scrotales anteriores  
 43 Aa. labiales anteriores  
 44 Rami inguinales  
 45 A. profunda femoris  
 46 A. circumflexa femoris medialis  
 47 Ramus superficialis  
 48 Ramus profundus  
 49 Ramus acetabuli  
 50 A. circumflexa femoris lateralis  
 51 Ramus ascendens  
 52 Ramus descendens  
 53 A. perforans prima  
 54 A. nutricia femoris superior  
 55 A. perforans secunda  
 56 A. perforans tertia  
 57 A. nutricia femoris inferior  
 58 Rami musculares  
 59 A. genu suprema  
 60 Rami musculares  
 61 Ramus saphenus  
 62 Rami articulares  
 63 **A. poplitea**  
 64 A. genu superior lateralis  
 65 A. genu superior medialis  
 66 A. genu media  
 67 Aa. surales  
 68 A. genu inferior lateralis  
 69 A. genu inferior medialis  
 70 Rete articulare genu  
 71 Rete patellae

<b>1 A. tibialis anterior</b>	18 A. peronaea
<b>2 (A. recurrens tibialis posterior)</b>	19 A. nutritia fibulae
<b>3 A. recurrens tibialis anterior</b>	20 Ramus perforans
<b>4 A. malleolaris anterior lateralis</b>	21 Ramus communicans
<b>5 A. malleolaris anterior medialis</b>	22 A. malleolaris posterior lateralis
<b>6 Rete malleolare mediale</b>	23 Rami calcanei laterales
<b>7 Rete malleolare laterale</b>	24 A. nutricia tibiae
<b>8 A. dorsalis pedis</b>	25 A. malleolaris posterior medialis
<b>9 A. tarsea lateralis</b>	26 Rami calcanei mediales
<b>10 Aa. tarseae mediales</b>	27 Rete calcaneum
<b>11 A. arcuata</b>	28 A. plantaris medialis
<b>12 Rete dorsale pedis</b>	29 Ramus profundus
<b>13 Aa. metatarsae dorsales</b>	30 Ramus superficialis
<b>14 Aa. digitales dorsales</b>	31 A. plantaris lateralis
<b>15 Ramus plantaris profundus</b>	32 Arcus plantaris
	33 Aa. metatarsae plantares
<b>16 A. tibialis posterior</b>	34 Rami perforantes
<b>17 Ramus fibularis</b>	35 Aa. digitales plantares

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### 36 Venae

#### 37 Venae pulmonales

- 38 Vv. pulmonales dextrae  
 39 Vv. pulmonales sinistrae

#### 40 Vv. cordis

- 41 Sinus coronarius  
 42 V. cordis magna  
 43 V. posterior ventriculi sinistri  
 44 V. obliqua atrii sinistri [Marshalli]  
 45 Lig. v. cavae sinistrae  
 46 V. cordis media  
 47 V. cordis parva  
 48 Vv. cordis anteriores  
 49 Vv. cordis minimae

#### 50 Vena cava superior

#### 51 Vv. anonymae dextra et sinistra

- 52 Vv. thyreoideae inferiores  
 53 V. thyreoidea ima

- 54 Plexus thyreoideus impar  
 55 V. laryngea inferior  
 56 Vv. thymicae  
 57 Vv. pericardiaca  
 58 Vv. phrenicae superiores  
 59 Vv. mediastinales anteriores  
 60 Vv. bronchiales anteriores  
 61 Vv. tracheales  
 62 Vv. oesophageae  
 63 V. vertebralis  
 64 V. cervicalis profunda  
 65 V. mammaria interna  
 66 Vv. subcutaneae abdominis  
 67 V. epigastrica superior  
 68 V. intercostalis suprema

#### 69 V. jugularis interna

- 70 Bulbus venae jugularis superior  
 71 V. canaliculi cochleae

- 1 Bulbus v. jugularis inferior  
 2 Plexus pharyngeus  
 3 Vv. pharyngeae  
 4 Vv. meningeae  
 5 Vv. canalis pterygoidei [Vidii]  
 6 V. lingualis  
 7 Vv. dorsales linguae  
 8 V. sublingualis  
 9 V. comitans n. hypoglossi  
 10 (Vv. thyreoideae superiores)  
 11 V. sternocleidomastoidea  
 12 V. laryngea superior  
     **13 Sinus durae matris**  
 14 Sinus transversus  
 15 Confluens sinuum  
 16 Vv. auditivae internae  
 17 Sinus occipitalis  
 18 Plexus basilaris  
 19 Sinus sagittalis superior  
 20 Sinus sagittalis inferior  
 21 Sinus rectus  
 22 Sinus petrosus inferior  
 23 Sinus petrosus superior  
 24 Sinus cavernosus  
 25 Sinus intercavernosus anterior  
 26 Sinus intercavernosus posterior  
 27 Sinus circularis  
 28 Sinus sphenoparietalis  
 29 Venae diploicae  
     30 V. diploica frontalis  
     31 V. diploica temporalis anterior  
     32 V. diploica temporalis posterior  
     33 V. diploica occipitalis  
 34 Emissarium parietale  
 35 Emissarium mastoideum  
 36 Emissarium condyloideum  
 37 Emissarium occipitale  
 38 Rete canalis hypoglossi  
 39 Rete foraminis ovalis  
 40 Plexus venosus caroticus inter-  
     nus
- 41 Venae cerebri**  
 42 Vv. cerebri superiores  
 43 V. cerebri media  
 44 Vv. cerebri inferiores  
 45 Vv. cerebelli superiores  
 46 Vv. cerebelli inferiores  
 47 Vv. cerebri internae  
 48 V. cerebri magna [Galeni]  
 49 V. septi pellucidi  
 50 V. terminalis  
 51 V. basalis [Rosenthalii]  
 52 V. chorioidea  
 53 V. ophthalmomeningea  
     **54 V. ophthalmica superior**  
 55 V. nasofrontalis  
 56 V. ethmoidalis anterior  
 57 V. ethmoidalis posterior  
 58 V. lacrimalis  
 59 Vv. musculares  
 60 Vv. vorticosae  
 61 Vv. ciliares posteriores  
 62 Vv. ciliares anteriores  
 63 V. centralis retinae  
 64 Vv. episclerales  
 65 Vv. palpebrales  
 66 Vv. conjunctivales anteriores  
 67 Vv. conjunctivales posteriores  
 68 V. ophthalmica inferior  
     **69 V. facialis communis**  
     **70 V. facialis anterior**  
 71 V. angularis  
 72 Vv. frontales  
 73 V. supraorbitalis  
 74 V. palpebrales superiores  
 75 V. nasales externae  
 76 V. palpebrales inferiores  
 77 V. labialis superior

- 1 V. labialis inferior
- 2 Vv. massetericae
- 3 Vv. parotideae anteriores
- 4 V. palatina
- 5 V. submentalis

### 6 V. facialis posterior

- 7 Vv. temporales superficiales
- 8 Vv. auriculares anteriores
- 9 Vv. parotideae posteriores
- 10 Vv. articulares mandibulae
- 11 Vv. tympanicae
- 12 V. stylomastoidea
- 13 V. transversa faciei
- 14 V. temporalis media
- 15 Plexus pterygoideus
- 16 Vv. meningae mediae
- 17 Vv. temporales profundae
- 18 V. thyreoidea superior

### 19 V. jugularis externa

- 20 V. occipitalis
- 21 V. auricularis posterior
- 22 V. jugularis anterior
- 23 Arcus venosus juguli
- 24 (V. mediana colli)
- 25 V. transversa scapulae

### 26 V. subclavia

- 27 V. thoracoacromialis
- 28 Vv. transversae colli

### 29 V. axillaris

- 30 V. thoracalis lateralis
- 31 Vv. costoaxillares
- 32 Vv. thoracoepigastricae
- 33 Plexus venosus mamillae
- 34 Vv. brachiales
- 35 Vv. radiales
- 36 Vv. ulnares
- 37 V. cephalica
- 38 V cephalica accessoria

- 39 V. basilica
- 40 V. mediana cubiti
- 41 (V. mediana antibrachii)
- 42 (V. mediana basilica)
- 43 (V. mediana cephalica)
- 44 Rete venosum dorsale manus
- 45 Vv. intercapitulares
- 46 Arcus volaris venosus superficialis
- 47 Arcus volaris venosus profundus
- 48 Vv. digitales volares communes
- 49 Vv. metacarpeae dorsales
- 50 Vv. metacarpeae volares
- 51 Vv. digitales volares propriae
- 52 Arcus venosi digitales

### 53 V. azygos

- 54 V. hemiazygos
- 55 V. hemiazygos accessoria
- 56 Vv. intercostales
- 57 Ramus dorsalis
- 58 Ramus spinalis
- 59 Vv. oesophageae
- 60 Vv. bronchiales posteriores
- 61 V. lumbalis ascendens
- 62 Vv. basivertebrales
- 63 Plexus venosi vertebrales externi
- 64 Plexus venosi vertebrales anteriores
- 65 Plexus venosi vertebrales posteriores
- 66 Plexus venosi vertebrales interni
- 67 Retia venosa vertebrarum
- 68 Sinus vertebrales longitudinales
- 69 Vv. intervertebrales
- 70 Vv. spinales externae anteriores



- 1 Vv. spinales externae posteriores  
 2 Vv. spinales internae
- 3 V. cava inferior**
- 4 Radices parietales  
 5 V. phrenica inferior  
 6 Vv. lumbales
- 7 Radices viscerales  
 8 Vv. hepaticae  
 9 Vv. renales  
 10 Vv. suprarenales  
 11 V. spermatica  
 12 V. testicularis  
 13 V. ovarica  
 14 Plexus pampiniformis
- 15 Vena portae**
- 16 V. coronaria ventriculi  
 17 V. mesenterica superior  
 18 Vv. intestinales  
 19 V. gastroepiploica dextra  
 20 Vv. pancreaticae  
 21 V. ileocolica  
 22 Vv. colicae dextrae  
 23 V. colica media  
 24 Vv. pancreaticoduodenales  
 25 Vv. duodenales  
 26 V. mesenterica inferior  
 27 V. colica sinistra  
 28 Vv. sigmoideae  
 29 V. haemorrhoidalis superior
- 30 V. lienalis  
 31 Vv. gastricae breves  
 32 V. gastroepiploica sinistra  
 33 V. cystica  
 34 Vena umbilicalis  
 35 Ductus venosus [Arantii]  
 36 Vv. parumbilicales [Sappeyi]
- 37 Vena iliaca communis**
- 38 V. sacralis media
- 39 V. hypogastrica**
- 40 Vv. glutaeae superiores  
 41 Vv. glutaeae inferiores  
 42 Vv. obturatoriae  
 43 Vv. sacrales laterales  
 44 V. iliolumbalis  
 45 Plexus sacralis anterior  
 46 Plexus haemorrhoidalis  
 47 Plexus vesicalis  
 48 Plexus pudendalis  
 49 V. dorsalis penis  
 50 Vv. profundae penis  
 51 Vv. dorsalis clitoridis  
 52 Vv. profundae clitoridis  
 53 Vv. uterinae  
 54 Plexus uterovaginalis  
 55 V. haemorrhoidalis media  
 56 Vv. haemorrhoidales inferiores  
 57 Vv. scrotales posteriores
- 58 V. iliaca externa**
- 59 V. epigastrica inferior  
 60 V. circumflexa ilium profunda  
 61 V. femoralis  
 62 Vv. dorsales penis subcutaneae  
 63 Vv. scrotales anteriores  
 64 Vv. pudendae externae  
 65 V. epigastrica superficialis  
 66 V. saphena magna  
 67 V. saphena accessoria  
 68 V. circumflexa ilium superficialis  
 69 Vv. circumflexae femoris mediales  
 70 Vv. circumflexae femoris laterales  
 71 Vv. comitantes  
 72 Vv. profundae femoris  
 73 Vv. perforantes

- |                                |                                  |
|--------------------------------|----------------------------------|
| 1 V. saphena parva             | 9 Vv. digitales communes pedis   |
| 2 V. femoropoplitea            | 10 Vv. metatarsae dorsales pedis |
| 3 Vv. peroneae                 | 11 Vv. intercapitulares          |
| 4 Vv. popliteae                | 12 Rete venosum plantare         |
| 5 Vv. tibiales posteriores     | 13 Arcus venosus plantaris       |
| 6 Vv. tibiales anteriores      | 14 Vv. metatarsae plantares      |
| 7 Rete venosum dorsale pedis   | 15 Vv. digitales pedis dorsales  |
| 8 Arcus venosus dorsalis pedis | 16 Vv. digitales plantares       |

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## 17 Systema lymphaticum

### 18 Vasa lymphatica

- 19 Vasa lymphatica superficialia  
 20 Vasa lymphatica profunda  
 21 Truncus jugularis  
 22 Truncus subclavius  
 23 Truncus bronchomediastinalis dexter  
 24 Ductus lymphaticus dexter

### 25 Ductus thoracicus

- 26 Trunci lumbales  
 27 Truncus intestinalis  
 28 Cisterna chyli

### 29 Lymphoglandulae

- 30 Vasa afferentia  
 31 Vasa efferentia  
 32 Substantia corticalis  
 33 Substantia medullaris  
 34 Hilus  
 35 Lymphoglandulae occipitales  
 36 „ auriculares posteriores  
 37 „ auriculares anteriores  
 38 „ submaxillares  
 39 „ faciales profundae  
 40 „ parotideae  
 41 „ cervicales superficiales

- 42 Lymphoglandulae cervicales profundae superiores  
 43 Lymphoglandulae cervicales profundae inferiores  
 44 Lymphoglandulae linguales  
 45 „ axillares  
 46 „ subscapulares  
 47 „ pectorales  
 48 „ epigastricae  
 49 „ cubitales superficiales  
 50 „ cubitales profundae  
 51 „ tracheales  
 52 „ bronchiales  
 53 „ intercostales  
 54 „ mediastinales posteriores  
 55 „ mediastinales anteriores  
 56 „ sternales  
 57 „ iliaca  
 58 „ lumbales  
 59 „ coeliacae  
 60 „ gastricae superiores  
 61 „ gastricae inferiores  
 62 „ hepaticae  
 63 „ pancreaticolienales  
 64 „ mesentericae  
 65 „ mesocolicae  
 66 „ hypogastricae

1	Lymphoglandulae sacrales	9	Plexus axillaris
2	„ inguinales	10	„ mammarius
3	„ subinguinales superficiales	11	„ lumbalis
4	„ subinguinales profundae	12	„ aorticus
5	„ popliteae	13	„ sacralis medius
6	(Lymphoglandula tibialis anterior)	14	„ hypogastricus
	<b>7 Plexus lymphatici</b>	15	„ coeliacus
8	Plexus jugularis	16	„ iliacus externus
		17	„ inguinalis

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## 1 Neurologia

- |                                 |                              |
|---------------------------------|------------------------------|
| 2 Nervus                        | 11 Nuclei originis           |
| 3 Ganglion                      | 12 Nuclei terminales         |
| 4 Substantia alba               | 13 Ramus communicans         |
| 5 Substantia grisea             | 14 Ramus anastomoticus       |
| 6 Substantia gelatinosa         | 15 Ramus muscularis          |
| 7 Taenia telarum                | 16 Nervus cutaneus           |
| 8 Ependyma ventriculorum        | 17 Nervus articularis        |
| 9 Sulcus limitans ventriculorum | 18 Plexus nervorum spinalium |
| 10 Nuclei nervorum cerebralis   |                              |

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## 19 Systema nervorum centrale

### 20 Medulla spinalis

- 21 Pars cervicalis
- 22 Intumescentia cervicalis
- 23 Pars thoracalis
- 24 Pars lumbalis
- 25 Intumescentia lumbalis
- 26 Conus medullaris
- 27 Filum terminale
- 28 Ventriculus terminalis
- 29 Fissura mediana anterior
- 30 Sulcus medianus posterior
- 31 Sulcus lateralis anterior
- 32 Sulcus lateralis posterior
- 33 Sulcus intermedius posterior
- 34 (Sulcus intermedius anterior)
- 35 Funiculi medullae spinalis
- 36 Funiculus anterior
- 37 Funiculus lateralis
- 38 Funiculus posterior

### 39 Sectiones medullae spinalis

- 40 Canalis centralis
- 41 Substantia grisea centrans
- 42 Commissura anterior alba
- 43 Commissura anterior grisea
- 44 Commissura posterior
- 45 Columnae griseae
- 46 Columna anterior
- 47 Columna lateralis
- 48 Columna posterior
  - 49 Cervix columnae posterioris
  - 50 Apex columnae posterioris
  - 51 Substantia gelatinosa [Rolandi]
  - 52 Nucleus dorsalis [Stillingi, Clarkii]
- 53 Formatio reticularis
- 54 Funiculus anterior
  - 55 Fasciculus cerebrospinalis anterior [pyramidalis anterior]

- |   |  |
|---|--|
| 1 Fasciculus anterior proprius [Flechsigi]                      | 5 Fasciculus anterolateralis superficialis [Gowersi] |
| 2 Funiculus lateralis   | 6 Fasciculus lateralis proprius [Flechsigi]          |
| 3 Fasciculus cerebrosppinalis lateralis [pyramidalis lateralis] | 7 Funiculus posterior                                |
| 4 Fasciculus cerebellospinalis                                  | 8 Fasciculus gracilis [Golli]                        |
|   | 9 Fasciculus cuneatus [Burdachi]                     |

## 10 Encephalon

### 11 Rhombencephalon

#### 12 Myelencephalon

- |  |  |
|--|--|
| 13 Medulla oblongata                     | 40 Nucleus funiculi cuneati              |
| 14 Fissura mediana posterior             | 41 Nuclei laterales                      |
| 15 Fissura mediana anterior              | 42 Nucleus olivaris inferior             |
| 16 Foramen caecum                        | 43 Hilus nuclei olivaris                 |
| 17 Pyramis [medullae oblongatae]         | 44 Nucleus olivaris accessorius medialis |
| 18 Decussatio pyramidum                  | 45 Nucleus olivaris accessorius dorsalis |
| 19 Sulcus lateralis anterior             | 46 Nuclei arcuati                        |
| 20 Sulcus lateralis posterior            | 47 Fibrae arcuatae internae              |
| 21 Oliva                                 | 48 Substantia reticularis grisea         |
| 22 Corpus restiforme                     | 49 Substantia reticularis alba           |
| 23 Funiculus lateralis                   | 50 Fasciculus longitudinalis medialis    |
| 24 Funiculus cuneatus                    | 51 Stratum anterolivare lemnisci         |
| 25 Tuberculum cinereum                   | 52 Decussatio lemniscorum                |
| 26 Funiculus gracilis                    | 53 Corpus restiforme                     |
| 27 Clava                                 | 54 Fasciculi corporis restiformis        |
| 28 Fibrae arcuatae externae              | 55 Fibrae cerebelloolivares              |
|  | 56 Fasciculi pyramidales                 |
|  | 57 Fibrae arcuatae externae              |
|  | 58 Ventriculus quartus                   |
| 29 Sectiones medullae oblongatae         | 59 Fossa rhomboidea                      |
| 30 Raphe                                 | 60 Pars inferior fossae rhomboideae      |
| 31 Stratum nucleare                      | 61 [Calamus scriptorius]                 |
| 32 Nucleus n. hypoglossi                 | 62 Pars intermedia fossae rhomboideae    |
| 33 Nucleus ambiguus                      | 63 Recessus lateralis fossae rhomboideae |
| 34 Nucleus alae cinereae                 | 64 Pars superior fossae rhomboideae      |
| 35 Tractus solitarius                    | 65 Sulcus limitans [fossae rhomboideae]  |
| 36 Nucleus tractus solitarii             | 66 Fovea inferior                        |
| 37 Tractus spinalis n. trigemini         |  |
| 38 Nucleus tractus spinalis n. trigemini |  |
| 39 Nucleus funiculi gracilis.            |  |

- 1 Fovea superior  
 2 Trigonum n. hypoglossi  
 3 Striae medullares  
 4 Eminentia medialis  
 5 Colliculus facialis  
 6 Ala cinerea  
 7 Area acustica  
 8 Locus caeruleus  
 9 Tegmen ventriculi quarti  
 10 Velum medullare posterius  
 11 Taenia ventriculi quarti  
 12 Obex  
 13 Lamina chorioidea epithelialis  
 14 (Apertura medialis ventriculi quarti  
 15 [Foramen Magendii])  
 16 (Apertura lateralis ventriculi quarti)  
 17 Fastigium
- 18 Metencephalon  
 19 Pons [Varoli]  
 20 Sulcus basilaris  
 21 Fasciculus obliquus [pontis]  
 22 (Fila lateralia pontis)  
 23 Brachium pontis
- 24 Sectiones pontis  
 25 Pars dorsalis pontis  
 26 Raphe  
 27 Nucleus n. abducentis  
 28 Nuclei motorii n. trigemini  
 29 Radix descendens [mesencephalica] n. trigemini  
 30 Tractus spinalis n. trigemini  
 31 Nucleus tractus spinalis n. trigemini  
 32 Nucleus n. facialis  
 33 Radix n. facialis  
 34 Pars prima  
 35 Genu [internum]  
 36 Pars secunda  
 37 Nuclei n. acustici  
 38 Nuclei n. cochlearis
- 39 Nuclei n. vestibularis  
 40 Nucleus olivaris superior  
 41 Nucleus lemnisci lateralis  
 42 Fasciculus longitudinalis medialis  
 43 Formatio reticularis  
 44 Corpus trapezoideum  
 45 Lemniscus  
 46 Lemniscus medialis [sensitivus]  
 47 Lemniscus lateralis [acusticus]  
 48 Pars basilaris pontis  
 49 Fibrae pontis profundae  
 50 Fasciculi longitudinales [pyramidales]  
 51 Nuclei pontis  
 52 Fibrae pontis superficiales
- 53 Cerebellum  
 54 Gyri cerebelli  
 55 Sulci cerebelli  
 56 Vallecula cerebelli  
 57 Incisura cerebelli anterior  
 58 Incisura cerebelli posterior  
 59 Sulcus horizontalis cerebelli  
 60 Fissura transversa cerebelli  
 61 Vermis  
 62 Lingula cerebelli  
 63 Vincula lingulae cerebelli  
 64 Lobulus centralis  
 65 Monticulus  
 66 Culmen  
 67 Declive  
 68 Folium vermis  
 69 Tuber vermis  
 70 Pyramis [vermis]  
 71 Uvula [vermis]  
 72 Nodulus  
 73 Hemisphaerium cerebelli  
 74 Facies superior  
 75 Ala lobuli centralis  
 76 Lobulus quadrangularis  
 77 Pars anterior  
 78 Pars posterior

- |                                |  |
|--------------------------------|--|
| 1 Lobulus semilunaris superior | 20 Hilus nuclei dentati                |
| 2 Facies inferior              | 21 Nucleus fastigii                    |
| 3 Lobulus semilunaris inferior | 22 Nucleus globosus                    |
| 4 Lobulus biventer             | 23 Nucleus emboliformis                |
| 5 Tonsilla cerebelli           | 24 Capsula nuclei dentati              |
| 6 Flocculus                    | 25 Isthmus rhombencephali              |
| 7 (Flocculi secundarii)        | 26 Brachium conjunctivum [cerebelli]   |
| 8 Pedunculus flocculi          | 27 Lemniscus                           |
| 9 Nidus avis                   | 28 Lemniscus lateralis                 |
| 10 Sectiones cerebelli         | 29 Lemniscus medialis                  |
| 11 Corpus medullare            | 30 Trigonum lemnisci                   |
| 12 Laminae medullares          | 31 Velum medullare anterius            |
| 13 Arbor vitae                 | 32 Frenulum veli medullaris anterioris |
| 14 Substantia corticalis       | 33 Sectiones isthmi                    |
| 15 [Lamina basalis]            | [vide Pedunculus cerebri]              |
| 16 [Stratum cinereum]          | 34 Ganglion interpedunculare           |
| 17 [Stratum gangliosum]        | 35 Nucleus n. trochlearis              |
| 18 Stratum granulosum          |  |
| 19 Nucleus dentatus            |  |

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### 36 Cerebrum

- |                                   |  |
|-----------------------------------|--|
| 37 Facies convexa cerebri         | 50 Sectiones pedunculi cerebri             |
| 38 Facies medialis cerebri        | 51 Tegmentum                               |
| 39 Basis cerebri                  | 52 Stratum griseum centrale                |
| 40 Mesencephalon                  | 53 Formatio reticularis                    |
| 41 [Facies inferior]              | 54 Fasciculus longitudinalis medialis      |
| 42 Fossa interpeduncularis        | 55 Radix descendens n. trigemini           |
| [Tarini]                          | 56 Nucleus radice descendente n. trigemini |
| 43 Recessus anterior              | 57 Nucleus n. oculomotorii                 |
| 44 Recessus posterior             | 58 Nuclei tegmenti                         |
| 45 Substantia perforata posterior | 59 Nucleus ruber                           |
| 46 Pedunculus cerebri             | 60 Decussationes tegmentorum               |
| 47 Aquaeductus cerebri [Sylvii]   | 61 Decussatio brachii conjunctivi          |
| 48 Sulcus lateralis               | 62 Lemniscus lateralis                     |
| 49 Sulcus n. oculomotorii         | 63 Lemniscus medialis                      |
|                                   | 64 Substantia nigra                        |
|                                   | 65 Basis pedunculi                         |

- |   |   |
|---|---|
| 1 Corpora quadrigemina                          | 38 Sectiones hypothalami                          |
| 2 Lamina quadrigemina                           | 39 Nucleus hypothalamicus [Corpus Luysi]          |
| 3 Colliculus superior                           | 40 Pars grisea hypothalami                        |
| 4 Colliculus inferior                           | 41 Commissura superior [Meynerti]                 |
| 5 Brachium quadrigeminum superius               | 42 Commissura inferior [Guddeni]                  |
| 6 Brachium quadrigeminum inferius               | 43 Nuclei corporis mamillaris                     |
| 7 Sectiones corporum quadrigemina-<br>geminorum | 44 Fasciculus thalamomamillaris<br>[Vicq d'Azyri] |
| 8 Stratum zonale                                | 45 Fasciculi pedunculomamillares                  |
| 9 Stratum griseum colliculi superioris          | 46 Pars tegmentalis                               |
| 10 Nucleus colliculi inferioris                 | 47 Pars basilaris                                 |
| 11 Stratum album profundum                      | 48 Ansa peduncularis                              |
|   | 49 Ansa lenticularis                              |
|   | 50 Pedunculus thalami inferior                    |

## 12 Prosencephalon

### 13 Diencephalon

- 14 Ventriculus tertius  
15 Aditus ad aquaeductum cerebri  
16 Commissura posterior [cerebri]  
17 Foramen interventriculare [Monroi]  
18 Sulcus hypothalamicus [Monroi]  
19 Massa intermedia  
20 Recessus opticus  
21 Recessus infundibuli  
22 Commissura anterior [cerebri]  
23 Recessus triangularis

### 24 Hypothalamus

- 25 Pars mamillaris hypothalami  
26 Corpus mamillare  
27 Pars optica hypothalami  
28 Tuber cinereum  
29 Infundibulum  
30 Hypophysis  
31 Lobus anterior  
32 Lobus posterior  
33 Tractus opticus  
34 Radix medialis  
35 Radix lateralis  
36 Chiasma opticum  
37 Lamina terminalis

### 51 Thalamencephalon

#### 52 Thalamus

- 53 Pulvinar  
54 Tuberculum anterius thalami  
55 Taenia thalami  
56 Stria medullaris  
57 Lamina chorioidea epithelialis

#### 58 Metathalamus

- 59 Corpus geniculatum mediale  
60 Corpus geniculatum laterale

### 61 Epithalamus

- 62 Corpus pineale  
63 Recessus pinealis  
64 Recessus suprapinealis  
65 Habenula  
66 Commissura habenularum  
67 Trigonum habenulae

### 68 Sectiones thalamencephali

- 69 Stratum zonale  
70 Nucleus anterior thalami  
71 Nucleus medialis thalami  
72 Nucleus lateralis thalami  
73 Laminae medullares thalami



- 1 Nucleus corporis geniculati  
    medialis
- 2 Nucleus corporis geniculati  
    lateralis
- 3 Nucleus habenulae
- 4 Fasciculus retroflexus [Mey-  
    nerti]
- 5 Telencephalon
- 6 Hemisphaerium
- 7 Pallium
- 8 Fissura longitudinalis cerebri
- 9 Fissura transversa cerebri
- 10 Gyri cerebri
- 11 Gyri profundi
- 12 Gyri transitivi
- 13 Sulci cerebri
- 14 Impressio petrosa
- 15 Fossa cerebri lateralis [Sylvii]
- 16 Fissura cerebri lateralis [Syl-  
    vii]
- 17 Ramus posterior
- 18 Ramus anterior ascendens
- 19 Ramus anterior horizon-  
        talis
- 20 Lobi cerebri
- 21 Insula
- 22 Gyri insulae
- 23 Gyrus longus insulae
- 24 Gyri breves insulae
- 25 Sulcus circularis [Reili]
- 26 Operculum
- 27 Pars frontalis
- 28 Pars parietalis
- 29 Pars temporalis
- 30 Sulcus centralis [Rolandi]
- 31 Gyrus centralis anterior
- 32 Gyrus centralis posterior
- 33 Lobus frontalis
- 34 Polus frontalis
- 35 Sulcus praecentralis
- 36 Gyrus frontalis superior
- 37 Sulcus frontalis superior
- 38 Gyrus frontalis medius
- 39 Pars superior
- 40 Pars inferior
- 41 Sulcus frontalis inferior
- 42 Gyrus frontalis inferior
- 43 Pars opercularis
- 44 Pars triangularis
- 45 Pars orbitalis
- 46 Gyrus rectus
- 47 Sulcus olfactorius
- 48 Gyri orbitales
- 49 Sulci orbitales
- 50 Lobus temporalis
- 51 Polus temporalis
- 52 Sulci temporales transversi
- 53 Gyri temporales transversi
- 54 Gyrus temporalis superior
- 55 Sulcus temporalis superior
- 56 Gyrus temporalis medius
- 57 Sulcus temporalis medius
- 58 Gyrus temporalis inferior
- 59 Sulcus temporalis inferior
- 60 Fissura collateralis
- 61 Gyrus fusiformis
- 62 Gyrus lingualis
- 63 Lobus occipitalis
- 64 Polus occipitalis
- 65 Sulcus occipitalis transversus
- 66 Gyri occipitales superiores
- 67 Sulci occipitales superiores
- 68 Gyri occipitales laterales
- 69 Sulci occipitales laterales
- 70 Lobus parietalis
- 71 Lobulus parietalis superior
- 72 Sulcus interparietalis
- 73 Lobulus parietalis inferior
- 74 Gyrus supramarginalis
- 75 Gyrus angularis
- 76 Facies medialis hemisphaerii
- 77 Sulcus corporis callosi
- 78 Sulcus cinguli
- 79 Pars subfrontalis

- 1 Pars marginalis  
 2 Sulcus subparietalis  
 3 Fissura hippocampi  
 4 Gyrus fornicatus  
     5 Gyrus cinguli  
     6 Isthmus gyri fornicati  
     7 Gyrus hippocampi  
     8 Uncus [gyri hippocampi]  
 9 Substantia reticularis alba  
     [Arnoldi]  
 10 Lobulus paracentralis  
 11 Praecuneus  
 12 Fissura parietooccipitalis  
 13 Fissura calcarina  
 14 Cuneus  
  
     15 Corpus callosum  
 16 Splenium corporis callosi  
 17 Truncus corporis callosi  
 18 Genu corporis callosi  
 19 Rostrum corporis callosi  
     20 Lamina rostralis  
 21 Striae transversae  
 22 Stria longitudinalis medialis  
 23 Stria longitudinalis lateralis  
 24 Fasciola cinerea  
  
     25 Fornix  
 26 Crus fornicis  
 27 Corpus fornicis  
 28 Taenia fornicis  
 29 Columna fornicis  
     30 Pars libera columnae fornicis  
     31 Pars tecta columnae fornicis  
  
     32 Septum pellucidum  
 33 Lamina septi pellucidi  
 34 Cavum septi pellucidi  
  
     35 Ventriculus lateralis  
 36 Pars centralis  
 37 Cornu anterius  
 38 Cornu posterius  
  
 39 Cornu inferius  
 40 Corpus striatum  
 41 Nucleus caudatus  
     42 Caput nuclei caudati  
     43 Cauda nuclei caudati  
 44 Stria terminalis  
 45 Lamina affixa  
 46 Taenia chorioidea  
 47 Lamina chorioidea epithelialis  
 48 Calcar avis  
 49 (Bulbus cornu posterioris)  
 50 Eminentia collateralis  
     51 Trigonum collaterale  
 52 Hippocampus  
 53 Fimbria hippocampi  
 54 Taenia fimbriae  
 55 Digitationes hippocampi  
 56 Fascia dentata hippocampi  
 57 Commissura hippocampi  
  
 58 Rhinencephalon  
 59 Sulcus parolfactorius anterior  
 60 Pars anterior [rhinencephali]  
 61 Lobus olfactorius  
     62 Bulbus olfactorius  
     63 Tractus olfactorius  
     64 Trigonum olfactorium  
     65 Stria medialis  
     66 Stria intermedia  
 67 Area parolfactoria [Brocae]  
 68 Sulcus parolfactorius posterior  
 69 Pars posterior [rhinencephali]  
 70 Gyrus subcallosus [Pedunculus corporis callosi]  
     71 Substantia perforata anterior  
 72 Stria olfactoria lateralis  
 73 Limen insulae  
  
     74 Sectiones telencephali  
 75 Substantia corticalis  
 76 Centrum semiovale  
 77 Decursus fibrarum cerebralium

- |   |   |
|---|---|
| 1 Fibrae arcuatae cerebri                   | 34 Falx cerebri                               |
| 2 Cingulum                                  | 35 Tentorium cerebelli                        |
| 3 Fasciculus longitudinalis superior        | 36 Falx cerebelli                             |
| 4 Fasciculus longitudinalis inferior        | 37 Diaphragma sellae                          |
| 5 Fasciculus uncinatus                      | 38 Foramen diaphragmatis [sellae]             |
| 6 Radiatio corporis callosi                 | 39 Incisura tentorii                          |
| 7 Pars frontalis                            | 40 Dura mater spinalis                        |
| 8 Pars parietalis                           | 41 Filum durae matris spinalis                |
| 9 Pars temporalis                           | 42 Cavum epidurale                            |
| 10 Pars occipitalis                         | 43 Cavum subdurale                            |
| 11 Tapetum                                  | 44 Arachnoidea spinalis                       |
| 12 Nucleus lentiformis                      | 45 Arachnoidea encephali                      |
| 13 Putamen                                  | 46 Cavum subarachnoideale                     |
| 14 Globus pallidus                          | 47 Cisternae subarachnoidales                 |
| 15 Claustrum                                | 48 Cisterna cerebellomedullaris               |
| 16 Capsula externa                          | 49 Cisterna fossae lateralis cerebri [Sylvii] |
| 17 Capsula interna                          | 50 Cisterna chiasmatis                        |
| 18 Genu capsulae internae                   | 51 Cisterna interpeduncularis                 |
| 19 Pars frontalis capsulae internae         | 52 Cisterna venae magnae cerebri              |
| 20 Pars occipitalis capsulae internae       | 53 Granulationes arachnoideales [Pacchioni]   |
| 21 Nucleus amygdalae                        | 54 Pia mater spinalis                         |
| 22 Corona radiata                           | 55 Lig. denticulatum                          |
| 23 Pars frontalis                           | 56 Septum cervicale intermedium               |
| 24 Pars parietalis                          | 57 Pia mater encephali                        |
| 25 Pars temporalis                          | 58 Tela chorioidea ventriculi quarti          |
| 26 Pars occipitalis                         | 59 Plexus chorioideus ventriculi quarti       |
| 27 Radiatio corporis striati                | 60 Tela chorioidea ventriculi tertii          |
| 28 Radiatio occipitothalamica [Gratioletii] | 61 Plexus chorioideus ventriculi tertii       |
| 29 Commissura anterior [cerebri]            | 62 Plexus chorioideus ventriculi lateralis    |
| 30 Pars anterior                            | 63 Glomus chorioideum                         |
| 31 Pars posterior                           | 64 Acervulus                                  |

### 32 Meninges

- 33 Dura mater encephali

# 1 Systema nervorum periphericum

## 2 Nervi cerebrales

### 3 Nn. olfactorii

### 4 N. opticus

### 5 N. oculomotorius

6 Ramus superior

7 Ramus inferior

8 Radix brevis ganglii ciliaris

### 9 N. trochlearis

10 Decussatio nervorum trochlearium

### 11 N. trigeminu

12 Portio major

13 Ganglion semilunare [Gasseri]

14 Portio minor

### 15 N. ophthalmicus

16 N. tentorii

17 N. lacrimalis

18 Ramus anastomoticus cum n. zygomatico

19 N. frontalis

20 N. supraorbitalis

21 Ramus frontalis

22 N. supratrochlearis

23 N. nasociliaris

24 Radix longa ganglii ciliaris

25 Nn. ciliares longi

26 N. ethmoidalis posterior

27 N. ethmoidalis anterior

28 Rami nasales anteriores

29 Rami nasales interni

30 Rami nasales laterales

31 Rami nasales mediales

32 Ramus nasalis externus

33 N. infratrochlearis

34 Ramus palpebralis superior

35 R. palpebralis inferior

36 G. ciliare

37 Nn. ciliares breves

### 38 N. maxillaris

39 N. meningeus [medius]

40 N. zygomaticus

41 Ramus zygomaticotemporalis

42 Ramus zygomaticofacialis

43 Nn. sphenopalatini

44 Nn. alveolares superiores

45 Rami alveolares superiores posteriores

46 N. infraorbitalis

47 R. alveolaris superior medius

48 Rami alveolares superiores anteriores

49 Plexus dentalis superior

50 Rami dentales superiores

51 Rami gingivales superiores

52 Rami palpebrales inferiores

53 Rami nasales externi

54 Rami nasales interni

55 Rami labiales superiores

56 Ganglion sphenopalatinum

57 Rami orbitales

58 N. canalis pterygoidei [Vidii]

59 N. petrosus superficialis major

60 N. petrosus profundus

61 Rami nasales posteriores superiores laterales

62 Rami nasales posteriores superiores mediales

63 N. nasopalatinus [Scarpae]

- 1 Rami nasales posteriores inferiores [laterales]  
 2 Nn. palatini  
   3 N. palatinus anterior  
   4 N. palatinus medius  
   5 N. palatinus posterior  
     **6 N. mandibularis**  
 7 N. spinosus  
 8 N. masticatorius  
   9 N. massetericus  
 10 Nn. temporales profundi  
   11 N. temporalis profundus posterior  
   12 N. temporalis profundus anterior  
   13 N. buccinatorius  
   14 N. pterygoideus externus  
   15 N. pterygoideus internus  
 16 N. auriculotemporalis  
   17 N. meatus auditorii externi  
     18 R. membranae tympani  
   19 Rami parotidei  
   20 Rami anastomotici cum n. faciali  
   21 Nn. auriculares anteriores  
   22 Rami temporales superficiales  
 23 N. lingualis  
   24 Rami isthmi faucium  
   25 Rami anastomotici cum n. hypoglosso  
   26 N. sublingualis  
   27 Rami linguales  
 28 N. alveolaris inferior  
   29 Plexus dentalis inferior  
     30 Rami dentales inferiores  
     31 Rami gingivales inferiores  
   32 N. mylohyoideus  
   33 N. mentalis  
     34 Rami mentales  
     35 Rami labiales inferiores  
   36 Ganglion oticum  
   37 N. petrosus superficialis minor  
     38 N. tensoris veli palatini  
     39 N. tensoris tympani  
     40 Ramus anastomoticus cum n. spinoso  
     41 R. anastomoticus cum n. auriculotemporalis  
     42 Ramus anastomoticus cum chorda tympani  
   43 Ganglion submaxillare  
   44 Rami communicantes cum n. linguali  
   45 Rami submaxillares  
     **46 N. abducens**  
     **47 N. facialis**  
   48 Geniculum n. facialis  
   49 Ganglion geniculi  
   50 N. stapedius  
   51 Ramus anastomoticus cum plexu tympanico  
   52 N. auricularis posterior  
     53 Ramus occipitalis  
   54 Ramus digastricus  
     55 Ramus stylohyoideus  
   56 Ramus anastomoticus cum n. glossopharyngeo  
   57 Plexus parotideus  
   58 Rami temporales  
   59 Rami zygomatici  
   60 Rami buccales  
   61 Ramus marginalis mandibulae  
   62 Ramus colli  
   63 N. intermedius  
     64 Chorda tympani  
     **65 N. acusticus**  
   66 Radix vestibularis  
   67 Radix cochlearis  
   68 Fila anastomotica  
   69 N. vestibuli  
     70 Ganglion vestibulare

- 1 N. utricularis  
 2 N. ampullaris superior  
 3 N. ampullaris lateralis  
 4 N. ampullaris inferior  
 5 N. cochleae  
 6 Ganglion spirale  
 7 N. saccularis
- 8 N. glossopharyngeus**  
 9 Ganglion superius  
 10 Ganglion petrosum  
 11 N. tympanicus  
 12 Intumescencia tympanica  
 13 Plexus tympanicus [Jacobsoni]  
 14 N. caroticotympanicus superior  
 15 N. caroticotympanicus inferior  
 16 Ramus tubae  
 17 R. anastomoticus cum ramo auriculari n. vagi  
 18 Rami pharyngei  
 19 Ramus stylopharyngeus  
 20 Rami tonsillares  
 21 Rami linguales
- 22 N. vagus**  
 23 Ganglion juglare  
 24 Ganglion nodosum  
 25 Ramus meningeus  
 26 Ramus auricularis  
 27 R. anastomoticus cum n. glossopharyngeo  
 28 Rami pharyngei  
 29 Plexus pharyngeus  
 30 N. laryngeus superior  
 31 Ramus externus  
 32 Ramus internus  
 33 Ramus anastomoticus cum n. laryngeo inferiore  
 34 Rami cardiaci superiores  
 35 (N. depressor)  
 36 N. recurrens
- 37 Rami cardiaci inferiores  
 38 Rami tracheales  
 39 Rami oesophagei  
 40 N. laryngeus inferior  
 41 Ramus anterior  
 42 Ramus posterior  
 43 Rami bronchiales anteriores  
 44 Rami bronchiales posteriores  
 45 Plexus pulmonalis anterior  
 46 Plexus pulmonalis posterior  
 47 Rami oesophagei  
 48 Plexus oesophageus anterior  
 49 Plexus oesophageus posterior  
 50 Rami gastrici  
 51 Plexus gastricus anterior  
 52 Plexus gastricus posterior  
 53 Rami hepatici  
 54 Rami coeliaci  
 55 Rami lienales  
 56 Rami renales
- 57 N. accessorius**  
 58 Ramus internus  
 59 Ramus externus
- 60 N. hypoglossus**  
 61 Ramus descendens  
 62 Ansa hypoglossi  
 63 Ramus thyreo-hyoideus  
 64 Rami linguales
- 65 N. spinales**  
 66 Fila radicularia  
 67 Radix anterior  
 68 Radix posterior  
 69 Ganglion spinale  
 70 Ramus anterior  
 71 Ramus posterior  
 72 Ramus communicans  
 73 Ramus meningeus  
 74 Cauda equina  
 75 Ansa

**1 Nn. cervicales**

- 2 Rami posteriores  
 3 Ramus medialis  
 4 Ramus lateralis  
 5 N. suboccipitalis  
 6 N. occipitalis major  
 7 (N. occipitalis tertius)  
 8 Rami anteriores  
 9 Plexus cervicalis  
 10 N. occipitalis minor  
 11 N. auricularis magnus  
 12 Ramus posterior  
 13 Ramus anterior  
 14 N. cutaneus colli  
 15 Rami superiores  
 16 Rami inferiores  
 17 Nn. supraclaviculares  
 18 Nn. supraclaviculares anteriores  
 19 Nn. supraclaviculares medii  
 20 Nn. supraclaviculares posteriores  
 21 N. phrenicus  
 22 Ramus pericardiacus  
 23 Rami phrenicoabdominales

**24 Plexus brachialis**

- 25 Pars supraclavicularis  
 26 Nn. thoracales posteriores  
 27 N. dorsalis scapulae  
 28 N. thoracalis longus  
 29 Nn. thoracales anteriores  
 30 N. subclavius  
 31 N. suprascapularis  
 32 Nn. subscapulares  
 33 N. thoracodorsalis  
 34 N. axillaris  
 35 Rami musculares  
 36 N. cutaneus brachii lateralis  
 37 Pars infraclavicularis  
 38 Fasciculus lateralis  
 39 Fasciculus medialis  
 40 Fasciculus posterior

- 41 N. musculocutaneus  
 42 Rami musculares  
 43 N. cutaneus antibrachii lateralis  
 44 N. cutaneus brachii medialis  
 45 N. cutaneus antibrachii medialis  
 46 Ramus volaris  
 47 Ramus ulnaris

**48 N. medianus**

- 49 Rami musculares  
 50 N. interosseus [antibrachii] volaris  
 51 Ramus palmaris n. mediani  
 52 Ramus anastomoticus cum n. ulnari  
 53 Nn. digitales volares communes  
 54 Nn. digitales volares proprii

**55 N. ulnaris**

- 56 Ramus cutaneus palmaris  
 57 Ramus dorsalis manus  
 58 Nn. digitales dorsales  
 59 Ramus volaris manus  
 60 Ramus superficialis  
 61 Nn. digitales volares communes  
 62 Nn. digitales volares proprii  
 63 Ramus profundus  
 64 Rami musculares

**65 N. radialis**

- 66 N. cutaneus brachii posterior  
 67 Rami musculares  
 68 N. cutaneus antibrachii dorsalis  
 69 Ramus profundus  
 70 N. interosseus [antibrachii] dorsalis  
 71 Ramus superficialis  
 72 Ramus anastomoticus ulnaris  
 73 Nn. digitales dorsales

**74 Nn. thoracales**

- 75 Rami posteriores  
 76 Ramus cutaneus lateralis  
 77 Ramus cutaneus medialis

- 1 Rami anteriores [Nn. inter-costales]
- 2 Rami musculares
- 3 Ramus cutaneus lateralis [pectoralis et abdominalis]
- 4 Ramus posterior
- 5 Ramus anterior
- 6 Rami mammarii laterales
- 7 Nn. intercostobrachiales
- 8 Ramus cutaneus anterior [pectoralis et abdominalis]
- 9 Rami mammarii mediales
- 10 Nn. lumbales, sacrales, coccygeus
- 11 Nn. lumbales
- 12 Rami posteriores
- 13 Ramus medialis
- 14 Ramus lateralis
- 15 Nn. clunium superiores
- 16 Rami anteriores
- 17 Nn. sacrales et coccygeus:
- 18 Rami posteriores
- 19 Ramus medialis
- 20 Ramus lateralis
- 21 Nn. clunium medii
- 22 Plexus lumbosacralis**
- 23 Plexus lumbalis**
- 24 Rami musculares
- 25 N. iliohypogastricus
- 26 Rami musculares
- 27 Ramus cutaneus lateralis
- 28 Ramus cutaneus anterior
- 29 N. ilioinguinalis
- 30 Rami musculares
- 31 Nn. scrotales anteriores
- 32 Nn. labiales anteriores
- 33 N. genitofemoralis
- 34 N. lumboinguinalis
- 35 N. spermaticus externus
- 36 N. cutaneus femoris lateralis
- 37 N. obturatorius
- 38 Ramus anterior
- 39 Ramus cutaneus
- 40 Ramus posterior
- 41 N. femoralis
- 42 Rami cutanei anteriores
- 43 Rami musculares
- 44 N. saphenus
- 45 Ramus infrapatellaris
- 46 Rami cutanei cruris mediales
- 47 Plexus sacralis**
- 48 Truncus lumbosacralis
- 49 N. gluteus superior
- 50 N. gluteus inferior
- 51 N. cutaneus femoris posterior
- 52 Nn. clunium inferiores
- 53 Rami perineales
- 54 N. ischiadicus
- 55 Rami musculares
- 56 N. peroneus communis
- 57 Rami musculares
- 58 N. cutaneus surae lateralis
- 59 Ramus anastomoticus peroneus
- 60 N. peroneus superficialis
- 61 Rami musculares
- 62 N. cutaneus dorsalis medialis
- 63 N. cutaneus dorsalis intermedius
- 64 Nn. digitales dorsales pedis
- 65 N. peroneus profundus
- 66 Rami musculares
- 67 Nn. digitales dorsales hallucis lateralis et digiti secundi medialis
- 68 N. tibialis
- 69 Rami musculares



- 1 N. interosseus cruris  
 2 N. cutaneus surae medialis  
 3 N. suralis  
     4 Rami calcanei laterales  
 5 N. cutaneus dorsalis lateralis  
 6 Rami calcanei mediales  
 7 N. plantaris medialis  
     8 Nn. digitales plantares communes  
     9 Nn. digitales plantares proprii  
 10 N. plantaris lateralis  
     11 Ramus superficialis  
     12 Nn. digitales plantares communes  
     13 Nn. digitales plantares proprii  
     14 Ramus profundus  
**15 Plexus pudendus**  
 16 Nn. haemorrhoidales medii  
 17 Nn. vesicales inferiores  
 18 Nn. vaginales  
 19 N. pudendus  
     20 Nn. haemorrhoidales inferiores  
     21 N. perinei  
     22 Nn. scrotales posteriores  
     23 Nn. labiales posteriores  
     24 N. dorsalis penis  
     25 N. dorsalis clitoridis  
**26 N. coccygeus**  
 27 Plexus coccygeus  
 28 Nn. anococcygei

## 29 Systema nervorum sympathicum

- 30 Truncus sympathicus  
 31 Ganglia trunci sympathici  
 32 Plexus sympathici  
 33 Ganglia plexuum sympathicorum  
**34 Pars cephalica et cervicalis s. sympathici**  
 35 Ganglion cervicale superius  
 36 N. jugularis  
 37 N. caroticus internus  
 38 Plexus caroticus internus  
 39 Plexus cavernosus  
 40 Plexus arteriae cerebri anterioris  
 41 Plexus arteriae cerebri mediae  
 42 Plexus arteriae chorioideae  
 43 Plexus ophthalmicus  
 44 Radices sympathicae ganglii ciliaris  
 45 Nn. carotici externi  
 46 Plexus caroticus externus  
 47 Plexus thyreoideus superior  
 48 Plexus lingualis  
 49 Plexus maxillaris externus  
 50 Radix sympathica ganglii submaxillaris  
 51 Plexus occipitalis  
 52 Plexus auricularis posterior  
 53 Plexus temporalis superficialis  
 54 Plexus maxillaris internus  
 55 Plexus meningeus  
 56 Plexus caroticus communis  
 57 Rami laryngopharyngei  
 58 Plexus pharyngeus ascendens  
 59 N. cardiacus superior  
 60 Ganglion cervicale medium  
     1 N. cardiacus medius  
 62 Ganglion cervicale inferius  
 63 Ansa subclavia [Vieussenii]  
 64 N. cardiacus inferior  
 65 Plexus subclavius  
 66 Plexus mammarius internus  
 67 Plexus thyreoideus inferior  
 68 Plexus vertebralis

- 1 Pars thoracalis s. sympathici**
- 2 Ganglia thoracalia  
 3 N. splanchnicus major  
 4 Ganglion splanchnicum  
 5 N. splanchnicus minor  
     6 Ramus renalis  
 7 (N. splanchnicus imus)  
 8 Plexus aorticus thoracalis  
 9 Plexus cardiacus  
 10 Plexus coronarius cordis anterior  
 11 Ganglion cardiacum [Wrisbergi]  
 12 Plexus coronarius posterior  
 13 Rami pulmonales  
 14 Plexus pulmonalis
- 15 Pars abdominalis et pelvina s. sympathici**
- 16 Ganglia lumbalia  
 17 Ganglia sacralia  
 18 Plexus aorticus abdominalis  
 19 Plexus coeliacus  
 20 Ganglia coeliaca  
 21 Ganglion mesentericum superius  
 22 Plexus phrenicus  
     23 Ganglia phrenica  
 24 Plexus hepaticus  
 25 Plexus lienalis  
 26 Plexus gastricus superior
- 27 Plexus gastricus inferior  
 28 Plexus suprarenalis  
 29 Plexus renalis  
 30 Plexus spermaticus  
 31 Plexus arteriae ovaricae  
 32 Plexus mesentericus superior  
 33 Plexus myentericus  
 34 Plexus submucosus  
 35 Plexus mesentericus inferior  
 36 Nn. haemorrhoidales superiores  
 37 Plexus haemorrhoidalis superior  
 38 Plexus iliacus  
 39 Plexus hypogastricus  
 40 Plexus haemorrhoidalis medius  
 41 Plexus prostaticus  
 42 Plexus deferentialis  
 43 Plexus uterovaginalis  
 44 Plexus vesicalis  
 45 Nn. vesicales superiores  
 46 Nn. vesicales inferiores  
 47 Plexus cavernosus penis  
     48 N. cavernosus penis major  
     49 Nn. cavernosi penis minores  
 50 Plexus cavernosus clitoridis  
     51 N. cavernosus clitoridis major  
     52 Nn. cavernosi clitoridis minores  
 53 Plexus femoralis  
 54 Plexus popliteus
-

# 1 Organa sensuum et Integumentum commune

## 2 Organon visus

### 3 Oculus

#### 4 N. opticus

- 5 Vaginae n. optici  
6 Spatia intervaginalia

#### 7 Bulbus oculi

- 8 Polus anterior  
9 Polus posterior  
10 Aequator  
11 Meridiani  
12 Axis oculi externa  
13 Axis oculi interna  
14 Axis optica  
15 [Linea visus]  
16 *Vesicula ophthalmica*  
17 *Caliculus ophthalmicus*

#### 18 Tunica fibrosa oculi

##### 19 Sclera

- 20 Sulcus sclerae  
21 Rima cornealis  
22 Sinus venosus sclerae [Canalis Schlemmi, Lauthi]  
23 Lamina fusca  
24 Lamina cribrosa sclerae  
25 (Raphe sclerae)  
26 (Funiculus sclerae)

##### 27 Cornea

- 28 Annulus conjunctivae  
29 Vertex corneae

- 30 Limbus corneae  
31 Facies anterior  
32 Facies posterior  
33 Epithelium corneae  
34 Lamina elastica anterior [Bowmani]  
35 Substantia propria  
36 Lamina elastica posterior [Demoursi, Descemeti]  
37 Endothelium camerae anterioris

#### 38 Tunica vasculosa oculi

##### 39 Chorioidea

- 40 Lamina suprachorioidea  
41 Spatium perichorioideale  
42 Lamina vasculosa  
43 Lamina choriocapillaris  
44 Lamina basalis  
45 (Raphe chorioideae)

##### 46 Corpus ciliare

- 47 Corona ciliaris  
48 Processus ciliares  
49 Plicae ciliares  
50 Oribiculus ciliaris  
51 M. ciliaris  
52 Fibrae meridionales [Bruecke]  
53 Fibrae circulares [Muelleri]  
54 Plexus gangliosus ciliaris

##### 55 Iris

- 56 Margo pupillaris  
57 Margo ciliaris  
58 Facies anterior

- 1 Facies posterior  
 2 Annulus iridis major  
 3 Annulus iridis minor  
 4 Plicae iridis  
 5 Pupilla  
 6 M. sphincter pupillae  
 7 Stroma iridis  
 8 M. dilatator pupillae  
 9 Lig. pectinatum iridis  
 10 Spatia anguli iridis [Fontanae]  
 11 Circulus arteriosus major  
 12 Circulus arteriosus minor  
 13 *Membrana pupillaris*
- 14 Stratum pigmenti**
- 15 Stratum pigmenti retinae  
 16 Stratum pigmenti corporis ciliaris  
 17 Stratum pigmenti iridis
- 18 Retina**
- 19 Pars optica retinae  
 20 Ora serrata  
 21 Pars ciliaris retinae  
 22 Papilla n. optici  
 23 Excavatio papillae n. optici  
 24 Macula lutea  
 25 Fovea centralis  
 26 Vasa sanguinea retinae  
 27 Circulus vasculosus n. optici [Halleri]  
 28 Arteriola [Venula] temporalis retinae superior  
 29 Arteriola [Venula] temporalis retinae inferior  
 30 Arteriola [Venula] nasalis retinae superior  
 31 Arteriola [Venula] nasalis retinae inferior  
 32 Arteriola [Venula] macularis superior  
 33 Arteriola [Venula] macularis inferior  
 34 Arteriola [Venula] retinae medialis
- 35 Camera oculi anterior**
- 36 Angulus iridis
- 37 Camera oculi posterior**
- 38 Corpus vitreum**
- 39 *A. hyaloidea*  
 40 Canalis hyaloideus  
 41 Fossa hyaloidea  
 42 Membrana hyaloidea  
 43 Stroma vitreum  
 44 Humor vitreus.
- 45 Lens crystallina**
- 46 Substantia lentis  
 47 Substantia corticalis  
 48 Nucleus lentis  
 49 Fibrae lentis  
 50 Epithelium lentis  
 51 Capsula lentis  
 52 Polus anterior lentis  
 53 Polus posterior lentis  
 54 Facies anterior lentis  
 55 Facies posterior lentis  
 56 Axis lentis  
 57 Aequator lentis  
 58 Radii lentis
- 59 Zonula ciliaris [Zinni]**
- 60 Fibrae zonulares  
 61 Spatia zonularia
- 62 Organa oculi accessoria**
- 63 Musculi oculi, Fasciae orbitales**
- 64 M. orbitalis  
 65 M. rectus superior  
 66 M. rectus inferior  
 67 M. rectus medialis  
 68 M. rectus lateralis  
 69 Lacertus musculi recti lateralis  
 70 Annulus tendineus communis [Zinni]  
 71 M. obliquus superior

**I Trochlea**

- 2 M. obliquus inferior
- 3 M. levator palpebrae superioris
- 4 Periorbita
- 5 Septum orbitale
- 6 Fasciae musculares
- 7 Fascia bulbi [Tenoni]
- 8 Spatium interfasciale [Tenoni]
- 9 Corpus adiposum orbitae

**10 Supercilium****11 Palpebrae**

- 12 Palpebra superior
- 13 Palpebra inferior
- 14 Facies anterior palpebrarum
- 15 Facies posterior palpebrarum
- 16 Rima palpebrarum
- 17 Commissura palpebrarum lateralis
- 18 Commissura palpebrarum medialis
- 19 Angulus oculi lateralis
- 20 Angulus oculi medialis
- 21 Limbi palpebrales anteriores
- 22 Limbi palpebrales posteriores
- 23 Tarsus superior
- 24 Tarsus inferior
- 25 Lig. palpebrale mediale
- 26 Raphe palpebralis lateralis
- 27 Glandulae tarsales [Meibomi]
- 28 Sebum palpebrale
- 29 M. tarsalis superior
- 30 M. tarsalis inferior

**31 Conjunctiva**

- 32 Plica semilunaris conjunctivae
- 33 Caruncula lacrimalis
- 34 Tunica conjunctiva bulbi
- 35 Tunica conjunctiva palpebrarum
- 36 Fornix conjunctivae superior
- 37 Fornix conjunctivae inferior
- 38 Gl. mucosae [Krausei]
- 39 Noduli lymphatici conjunctivales
- 40 (Pinguecula)

**41 Apparatus lacrimalis**

- 42 Glandula lacrimalis superior
- 43 Glandula lacrimalis inferior
- 44 (Gl. lacrimales accessoriae)
  - 45 Ductuli excretorii [gl. lacrimalis]
- 46 Rivus lacrimalis
- 47 Lacus lacrimalis
- 48 Puncta lacrimalia
- 49 Ductus lacrimales
- 50 Papillae lacrimales
- 51 Ampulla ductus lacrimalis
- 52 Saccus lacrimalis
- 53 Fornix sacci lacrimalis
- 54 Ductus nasolacrimalis
- 55 Plica lacrimalis [Hasneri]
- 56 Lacrimae

**57 Organon auditus****58 Auris interna****59 Labyrinthus membranaceus**

- 60 Ductus endolymphaticus
- 61 Saccus endolymphaticus
- 62 Ductus utriculosaccularis
- 63 Utriculus
- 64 Ductus semicirculares
  - 65 Ductus semicircularis superior
  - 66 Ductus semicircularis posterior
  - 67 Ductus semicircularis lateralis
- 68 Ampullae membranaceae
  - 69 Sulcus ampullaris
  - 70 Crista ampullaris
- 71 Ampulla membranacea superior
- 72 Ampulla membranacea posterior
- 73 Ampulla membranacea lateralis
- 74 Sacculus
- 75 Ductus reuniens [Henseni]
- 76 Maculae acusticae
  - 77 Macula acustica utriculi
  - 78 Macula acustica sacculi

- 1 Otoconia  
 2 Endolympha  
 3 Perilympha  
 4 Spatium perilymphaticum  
 5 Ductus perilymphatici  
 6 Ductus cochlearis  
 7 Caecum cupulare  
 8 Caecum vestibulare  
 9 Lamina basilaris  
 10 Membrana vestibularis [Reissneri]  
 11 Lig. spirale cochleae  
 12 Prominentia spiralis  
 13 Stria vascularis  
 14 Sulcus spiralis  
 15 Labium tympanicum  
     16 Foramina nervosa  
 17 Labium vestibulare  
 18 Ganglion spirale cochleae  
 19 Organon spirale [Cortii]  
 20 Vasa auris internae  
 21 A. auditiva interna  
     22 Rami vestibulares  
     23 Ramus cochleae  
     24 Glomeruli arteriosi cochleae  
 25 Vv. auditivae internae  
     26 V. spiralis modioli  
         27 Vas prominens  
     28 Vv. vestibulares  
     29 V. aquaeductus vestibuli  
     30 V. canaliculi cochleae
- 31 Labyrinthus osseus**
- 32 Vestibulum**
- 33 Recessus sphaericus  
 34 Recessus ellipticus  
 35 Crista vestibuli  
 36 Pyramis vestibuli  
 37 Recessus cochlearis  
 38 Maculae cribrosae  
     39 Macula cribrosa superior  
     40 Macula cribrosa media  
     41 Macula cribrosa inferior  
 42 Canales semicirculares ossei
- 43 Canalis semicircularis superior  
 44 Canalis semicircularis posterior  
 45 Canalis semicircularis lateralis  
 46 Ampullae osseae  
     47 Ampulla ossea superior  
     48 Ampulla ossea posterior  
     49 Ampulla ossea lateralis  
 50 Crura ampullaria  
 51 Crus commune  
 52 Crus simplex
- 53 Cochlea**
- 54 Cupula  
 55 Basis cochleae  
 56 Canalis spiralis cochleae  
 57 Modiolus  
 58 Basis modioli  
 59 Lamina modioli  
 60 Lamina spiralis ossea  
 61 Hamulus laminae spiralis  
 62 Scala vestibuli  
 63 Scala tympani  
 64 Helicotrema  
 65 Lamina spiralis secundaria  
 66 Canalis spiralis modioli  
 67 Canales longitudinales modioli
- 68 Meatus acusticus internus**
- 69 Porus acusticus internus  
 70 Fundus meatus acustici interni  
     71 Crista transversa  
     72 Area n. facialis  
     73 Area cochleae  
         74 Tractus spiralis foraminosus  
     75 Area vestibularis superior  
     76 Area vestibularis inferior  
     77 Foramen singulare
- 78 Cavum tympani**
- 79 Paries tegmentalis

- |  |  |
|--|--|
| 1 Recessus epitympanicus                         | 39 Stratum radiatum                          |
| 2 Pars cupularis                                 | 40 Stratum circulare                         |
| 3 <b>Paries jugularis</b>                        | 41 Stratum mucosum                           |
| 4 Prominentia styloidea                          |  |
| 5 <b>Paries labyrinthica</b>                     | <b>42 Ossicula auditus</b>                   |
| 6 Fenestra vestibuli                             | 43 Stapes                                    |
| 7 Fossula fenestrae vestibuli                    | 44 Capitulum stapedis                        |
| 8 Promontorium                                   | 45 Crus anterior                             |
| 9 Sulcus promontorii                             | 46 Crus posterior                            |
| 10 Subiculum promontorii                         | 47 Basis stapedis                            |
| 11 Sinus tympani                                 | 48 Incus                                     |
| 12 Fenestra cochleae                             | 49 Corpus incudis                            |
| 13 Fossula fenestrae cochleae                    | 50 Crus longum                               |
| 14 Crista fenestrae cochleae                     | 51 Processus lenticularis                    |
| 15 Processus cochleariformis                     | 52 Crus brevis                               |
| 16 <b>Paries mastoidea</b>                       | 53 Malleus                                   |
| 17 Antrum tympanicum                             | 54 Manubrium mallei                          |
| 18 Prominentia canalis semi-circularis lateralis | 55 Capitulum mallei                          |
| 19 Prominentia canalis facialis                  | 56 Collum mallei                             |
| 20 Eminentia pyramidalis                         | 57 Processus lateralis                       |
| 21 Fossa incudis                                 | 58 Processus anterior [Folii]                |
| 22 Sinus posterior                               |  |
| 23 Apertura tympanica canaliculi chordae         | <b>59 Articulationes ossiculorum auditus</b> |
| 24 Cellulae mastoideae                           | 60 Articulatio incudomalleolaris             |
| 25 Cellulae tympanicae                           | 61 Articulatio incudostapedia                |
| 26 <b>Paries carotica</b>                        | 62 Syndesmosis tympanostapedia               |
| 27 <b>Paries membranacea</b>                     |  |
|  | <b>63 Ligg. ossiculorum auditus</b>          |
| <b>28 Membrana tympani</b>                       | 64 Lig. mallei anterior                      |
| 29 Pars flaccida                                 | 65 Lig. mallei superius                      |
| 30 Pars tensa                                    | 66 Lig. mallei laterale                      |
| 31 Limbus membranae tympani                      | 67 Lig. incudis superius                     |
| 32 Plica malleolaris anterior                    | 68 Lig. incudis posterius                    |
| 33 Plica malleolaris posterior                   | 69 Membrana obturatoria [stapedis]           |
| 34 Prominentia malleolaris                       | 70 Lig. annulare baseos stapedis             |
| 35 Stria malleolaris                             | 71 [M. fixator baseos stapedis]              |
| 36 Umbo membranae tympani                        |  |
| 37 Stratum cutaneum                              | <b>72 Musculi ossiculorum auditus</b>        |
| 38 Annulus fibrocartilagineus                    | 73 M. tensor tympani                         |
|  | 74 M. stapedius                              |

**1 Tunica mucosa tympanica**

- 2 (Gl. tympanicae)
- 3 Plica malleolaris posterior
- 4 Plica malleolaris anterior
- 5 Recessus membranae tympani anterior
- 6 Recessus membranae tympani superior
- 7 Recessus membranae tympani posterior
- 8 Plica incudis
- 9 Plica stapedis
- 10 Membrana tympani secundaria

**11 Tuba auditiva**

[Eustachii]

- 12 Ostium tympanicum tubae auditivae
- 13 Pars ossea tubae auditivae
  - 14 Isthmus tubae auditivae
  - 15 Cellulae pneumaticae tubariae
- 16 Pars cartilaginea tubae auditivae
  - 17 Cartilago tubae auditivae
  - 18 Lamina [cartilaginis] medialis
  - 19 Lamina [cartilaginis] lateralis
- 20 Lamina membranacea
- 21 Tunica mucosa
  - 22 Gl. mucosae
  - 23 Noduli lymphatici tubarii
- 24 Ostium pharyngeum tubae auditivae

**25 Meatus acusticus externus**

- 26 Porus acusticus externus
- 27 Incisura tympanica [Rivini]
- 28 Meatus acusticus externus cartilagineus
- 29 Cartilago meatus acustici
  - 30 Incisurae cartilaginis meatus acustici externi [Santorini]
  - 31 Lamina tragi

**32 Auricula**

- 33 Lobulus auriculae
- 34 Cartilago auriculae
- 35 Helix
- 36 Crus helices
- 37 Spina helices
- 38 Cauda helices
- 39 Anthelix
- 40 Fossa triangularis [auriculae]
- 41 Crura anthelices
- 42 Scapha
- 43 Concha auriculae
- 44 Cymba conchae
- 45 Cavum conchae
- 46 Antitragus
- 47 Tragus
- 48 Incisura anterior [auris]
- 49 Incisura intertragica
- 50 (Tuberculum auriculae [Darwini])
- 51 (Apex auriculae [Darwini])
- 52 Sulcus auriculae posterior
- 53 (Tuberculum supratragicum)
- 54 Isthmus cartilaginis auris
- 55 Incisura terminalis auris
- 56 Fissura antitragohelicina
- 57 Sulcus anthelices transversus
- 58 Sulcus cruris helices
- 59 Fossa anthelices
- 60 Eminentia conchae
- 61 Eminentia scaphae
- 62 Eminentia fossae triangularis
- 63 Ligg. auricularia [Valsalvae]
  - 64 Lig. auriculare anterius
  - 65 Lig. auriculare superius
  - 66 Lig. auriculare posterius
- 67 M. helices major
- 68 M. helices minor
- 69 M. tragicus
- 70 (M. pyramidalis auriculae [Jungi])
- 71 M. antitragicus
- 72 M. transversus auriculae
- 73 M. obliquus auriculae
- 74 (M. incisurae helices [Santorini])



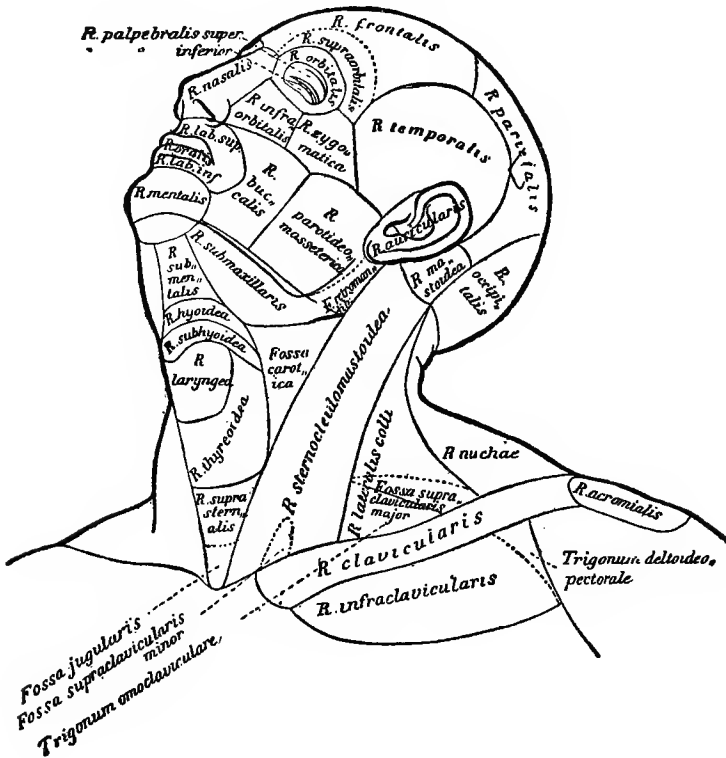
- 1 Organon olfactus** 32 Barba  
**2 Organon gustus** 33 Tragi  
 3 Calyculi gustatorii 34 Vibrissae  
**4 Integumentum commune** 35 Hirci  
 36 Pubes  
 37 Folliculus pili  
 38 Fundus folliculi pili  
 39 Collum folliculi pili  
**5 Cutis**  
 6 Sulci cutis 40 Papilla pili  
 7 Cristae cutis 41 Scapus pili  
 8 Retinacula cutis 42 Radix pili  
 9 Toruli tactiles 43 Bulbus pili  
 10 Foveola coccygea 44 Mm. arrectores pilorum  
 11 Lig. caudale 45 Flumina pilorum  
 46 Vortices pilorum  
 47 (Vortex coccygeus)  
**12 Epidermis**  
 13 Stratum corneum  
 14 Stratum germinativum [Malpighii]  
**15 Corium**  
 16 Tunica propria  
 17 Corpus papillare  
 18 Papillae  
**19 Tela subcutanea**  
 20 Panniculus adiposus  
**21 Corpuscula nervorum terminalia**  
 22 Corpuscula bulboidea [Krausii]  
 23 Corpuscula lamellosa [Vateri, Pacini]  
 24 Corpuscula tactus [Meissneri]  
 25 Corpuscula nervorum genitalia  
 26 Corpuscula nervorum articularia  
**27 Pili**  
 28 Lanugo  
 29 Capilli  
 30 Supercilia  
 31 Cilia  
**48 Ungues**  
 49 Matrix unguis  
 50 Cristae matricis unguis  
 51 Sulcus matricis unguis  
 52 Vallum unguis  
 53 Corpus unguis  
 54 Radix unguis  
 55 Lunula  
 56 Margo occultus  
 57 Margo liber  
 58 Margo lateralis  
 59 Stratum corneum unguis  
 60 Stratum germinativum unguis  
**61 Glandulae cutis**  
**62 Gl. glomiformes**  
 63 Gl. sudoriferae  
 64 Corpus gl. sudoriferae  
 65 Ductus sudoriferus  
 66 Porus sudoriferus  
 67 Sudor  
 68 Gl. ciliares [Molli]  
 69 Gl. circumanales

- |                             |  |
|-----------------------------|--|
| 1 Gl. ceruminosae           | 10 Ductus lactiferi                            |
| 2 Cerumen                   | 11 Sinus lactiferi                             |
| 3 <b>Glandulae sebaceae</b> | 12 Lac femininum                               |
| 4 Sebum cutaneum            | 13 Colostrum                                   |
| 5 <b>Mamma</b>              | 14 Areola mammae                               |
| 6 Papilla mammae            | 15 Gl. sebaceae                                |
| 7 Corpus mammae             | 16 Gl. areolares [Montgomerii]                 |
| 8 Lobi mammae               | 17 <b>Mamma virilis</b>                        |
| 9 Lobuli mammae             | 18 (Mammae accessoriae [muliebres et viriles]) |
-

# 1 Regiones corporis humani

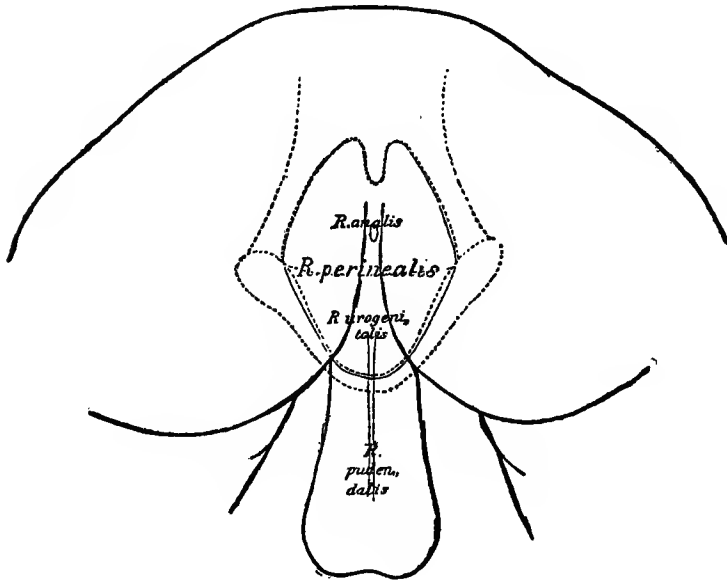
auctoribus Merkel, Rüdinger, Toldt

- |                           |                    |
|---------------------------|--------------------|
| 2 Linea mediana anterior  | 6 Linea mamillaris |
| 3 Linea mediana posterior | 7 Linea axillaris  |
| 4 Linea sternalis         | 8 Linea scapularis |
| 5 Linea parasternalis     |                    |



- 1 Regiones capitis
- 2 Regio frontalis
- 3 Regio supraorbitalis
- 4 Regio parietalis
- 5 Regio occipitalis
- 6 Regio temporalis
- 7 Regio auricularis
- 8 Regio mastoidea
- 9 Regiones faciei
- 10 Regio nasalis

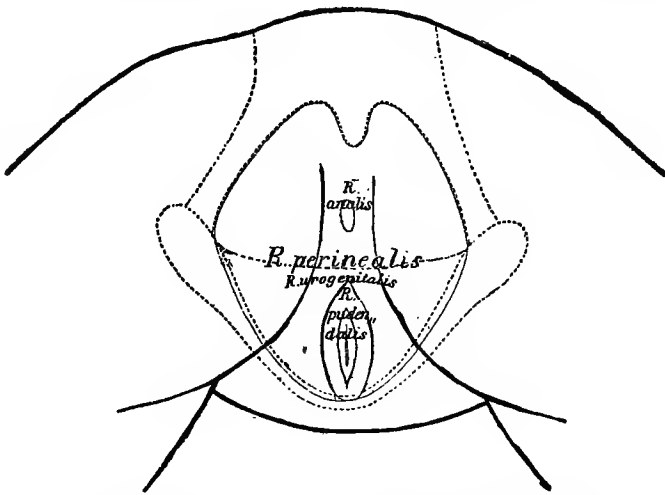
- 21 Regio parotideomasseterica
- 22 Fossa retromandibularis
- 23 Regiones colli
- 24 Regio colli anterior
- 25 Regio submentalis
- 26 Regio hyoidea
- 27 Regio subhyoidea
- 28 Regio laryngea
- 29 Regio thyreoidea
- 30 Regio suprasternalis



- 11 Regio oralis
- 12 Regio labialis superior
- 13 Regio labialis inferior
- 14 Regio mentalis
- 15 Regio orbitalis
- 16 Regio palpebralis superior
- 17 Regio palpebralis inferior
- 18 Regio infraorbitalis
- 19 Regio buccalis
- 20 Regio zygomatica

- 31 Fossa jugularis
- 32 Regio submaxillaris
- 33 Fossa carotica
- 34 Regio sternocleidomastoidea
- 35 Fossa supraclavicularis minor
- 36 Regio colli lateralis
- 37 Fossa supraclavicularis major
- 38 Trigonum omoclaviculare
- 39 Regio colli posterior
- 40 Regio nuchae

- |                                    |                          |
|------------------------------------|--------------------------|
| 1 Fovea nuchae                     | 24 Regio mediana dorsi   |
| 2 Regiones pectoris                | 25 Regio interscapularis |
| 3 Regio pectoris anterior          | 26 Regio scapularis      |
| 4 Regio sternalis                  | 27 Regio suprascapularis |
| 5 Regio clavicularis               | 28 Regio infrascapularis |
| 6 Regio infraclavicularis          | 29 Regio lumbalis        |
| 7 Trigonum deltoideo-<br>pectorale | 30 Regio coxae           |
| 8 Regio mammalis                   | 31 Regio sacralis        |
| 9 Regio inframammalis              | 32 Regio glutaea         |
| 10 Regio pectoris lateralis        | 33 Regio perinealis      |
| 11 Regio axillaris                 | 34 Regio analis          |
|                                    | 35 Regio urogenitalis    |



- |                                |  |
|--------------------------------|--|
| 12 Fossa axillaris             | 36 Regio pudendalis                    |
| 13 Regio costalis lateralis    | 37 Regiones extremitatis<br>superioris |
| 14 Regiones abdominis          | 38 Regio acromialis                    |
| 15 Regio epigastrica           | 39 Regio deltoidea                     |
| 16 Regio hypochondriaca        | 40 Regio brachii lateralis             |
| 17 Regio mesogastrica          | 41 Regio brachii medialis              |
| 18 Regio umbilicalis           | 42 Regio brachii anterior              |
| 19 Regio abdominalis lateralis | 43 Regio brachii posterior             |
| 20 Regio hypogastrica          | 44 Regio cubiti anterior               |
| 21 Regio pubica                | 45 Fossa cubitalis                     |
| 22 Regio inguinalis            |  |
| 23 Regiones dorsi              |  |

- |    |                                  |    |                                    |
|----|----------------------------------|----|------------------------------------|
| 1  | Regio cubiti posterior           | 21 | Regio femoris medialis             |
| 2  | Regio olecrani                   | 22 | Regio genu anterior                |
| 3  | Regio cubiti lateralis           | 23 | Regio patellaris                   |
| 4  | Regio cubiti medialis            | 24 | Regio genu posterior               |
| 5  | Regio antibrachii volaris        | 25 | Fossa poplitea                     |
| 6  | Regio antibrachii dorsalis       | 26 | Regio cruris anterior              |
| 7  | Regio antibrachii radialis       | 27 | Regio cruris posterior             |
| 8  | Regio antibrachii ulnaris        | 28 | Regio suralis                      |
| 9  | Regio dorsalis manus             | 29 | Regio cruris lateralis             |
| 10 | Regio volaris manus              | 30 | Regio cruris medialis              |
| 11 | Regiones digitales [manus]       | 31 | Regio malleolaris lateralis        |
| 12 | Regiones dorsales digitorum      | 32 | Regio malleolaris medialis         |
| 13 | Regiones unguiculares            | 33 | Regio retromalleolaris lateralis   |
| 14 | Regiones volares digitorum       | 34 | Regio retromalleolaris medialis    |
| 15 | Regiones extremitatis inferioris | 35 | Regio calcanea                     |
| 16 | Regio femoris anterior           | 36 | Regio dorsalis pedis               |
| 17 | Fossa subinguinalis              | 37 | Regio plantaris pedis              |
| 18 | Regio femoris lateralis          | 38 | Regiones digitales pedis           |
| 19 | Regio trochanterica              | 39 | Regiones dorsales digitorum pedis  |
| 20 | Regio femoris posterior          | 40 | Regiones unguiculares              |
|    |                                  | 41 | Regiones plantares digitorum pedis |
-

## EXPLANATIONS FOR THE NOMENCLATURE.

The meaning of the names in the submitted lists can be inferred in a large majority of cases from the newer current textbooks of anatomy, especially that of Gegenbaur which from the beginning was made the basis of the proposed list. There are, however, in anatomy numerous names to which different textbooks give different meanings. Moreover, the Commission here and there went beyond the currently used textbook terms. Another object of the following explanations is to establish the meaning of the older ambiguous terms and to give reasons for the introduction of new terms by the Commission. It seems to me to be a further requirement to report on some preliminary work and suggestions made by the Commission. Undoubtedly there are some of the latter which, although not decided upon at present, will turn up again on later occasions and will possibly prove worthy of being developed. The explanations do not claim to offer exhaustive literary reports. They have rather the practical end in view of giving clearly definable terms and of referring to the older and newer literature only in so far as it appears to be necessary to this end. The explanations taken from the records of the voting copies are designated (Absth.), those edited by Krause (Kr.).

ACCENTUATION. In Munich the Commission had decided to give the vowels certain diacritical marks, etc., in order to make sure of correct pronunciation. In the voting copies on myology, therefore, there are to be found: *Mm. rhomboidēus, genio-hyoidēus, solēus*. In the final editing such marks were removed for various reasons. One does not know where to begin or where to stop, e. g., *cervīcis, cocc̄ygeus, perf̄ōrans, proc̄erus, thor̄ācis*. In some words the accentuation is hard to express as in *radīcis*. In German we pronounce it *Radieschen*, but in Italian it is *radice*. In the words taken from the Greek one must use accents which are unknown in the Latin language, e. g., *τρίγωνου, trigōnum*. Finally the tabulations are not only intended for students but also for foreigners. To the latter these signs of accentuation, in such individual words, would be almost unintelligible. As is known each nation pronounces Latin in its peculiar way and the German accentuation does not entirely conform to that of the old Roman. Classical philologists find it impossible to converse in Latin with foreign colleagues when they do not know the native tongue. There are also some words concerning the accentuation of which linguists themselves are not in accord. In these cases resolutions cannot possibly bring about a decision. For all these reasons it seemed advisable to omit entirely accentuation marks. (Kr.)

Among the suggestions of a general nature that of v. Kölliker regarding the abolition of the expressions "behind" and "in front," "above" and "below," is the farthest reaching. We shall later speak of this suggestion. For the time being its consummation is to be considered a task for the future, since the Commission has always in its several votings rejected the principle expressed in the suggestion. It is, however, of interest to follow the method through which v. Kölliker avoided, by a fitting change of name, many of the difficulties resulting from his principle. Thus he suggests:

*M. serratus dorsalis major* [instead of *posticus caudalis*], *M. serratus dorsalis minor* [instead of *posticus cranialis*], *M. rectus nuchae major* [instead of *M. capitis dorsalis major*], *M. obliquus capitis* and *M. obliquus atlantis* [instead of *M. obliquus capitis cranialis* and *caudalis*], *M. rectus colli major* [instead of *M. rectus capitis ventralis major*], *M. serratus magnus* [instead of *M. serratus ventralis major*].

Another suggestion relating to the orientation of parts of the body is by Krause. According to this suggestion we should relinquish as unnatural the normal position of the forearm with laterally turned radius, and choose the various designations for parts of the arms in such a way that they are adapted to any position of the arm in space. This can be obtained by substituting the adjectives *radialis* and *ulnaris* for "lateralis and medialis." But as soon as we try to proceed consistently with this, we meet with the difficulty that we already have a *N. radialis* and *N. ulnaris*. If we should designate the *N. cutaneus antibrachii lateralis* of the *Musculocutaneus* as *N. cut. antibrachii radialis*, it would lead unavoidably to confusion with the cutaneous branches of the *N. radialis*. While we fully appreciate the desirability of Krause's principle, we deem its application too precarious.

#### DESIGNATIONS OF POSITION AND DIRECTION OF PARTS.

Of the orienting designations **Transversalis** means transverse to the axis of the body; **Transversus**, transverse to the axis of the organ in question. The word **Intermedius** is used where a position between *medialis* and *lateralis* is to be indicated in order to avoid a juxtaposition of the similarly sounding words *medius* and *medialis*. The adjective **Medius** has been retained to designate a position between anterior and posterior or between *externus* and *internus*.

As mentioned above, v. Kölliker made the suggestion to replace the words anterior and posterior by **Ventralis** and **Dorsalis** wherever it is desirable to refer to comparative anatomy and especially to the anatomy of domestic animals, i. e. where the expression anterior and posterior apply only to the upright position of man. In this sense we speak of



ventral and dorsal roots of the spinal nerves, of a ventral and dorsal margin of the liver, etc. In the same way we could further speak of an anterior and posterior end of the brain, as well as of a *N. tibialis anticus* and a *N. tibialis posticus*, because these designations retain their meaning also in the quadrupeds.

We do not misjudge the merits of such a strict usage of language, nevertheless the Commission could not decide on its adoption. It still makes necessary all kinds of awkward terms and improprieties, especially so since at the same time we must replace the expressions superior and inferior by **Cranialis** and **Caudalis**. *Facies cranialis hepatis*, *Facies caudalis hepatis* and similar designations still sound rather strange to us. Indeed to be consistent we should not be allowed to speak of a *Colon ascendens* and *descendens* but of a *Colon craniale* and *caudale*. At present, we must leave it for time to decide whether or not it will definitely break from the conventional custom of referring to the upright position of man.

F. E. Schulze, partly with reference to American efforts, tried to develop a system of orienting designations, which should be applicable to the entire animal kingdom. Colleague Schulze has been kind enough to explain his system at a meeting of the anatomists in Göttingen in 1893. The same was made at once the subject for special discussion at a session of the Zoological Society<sup>1</sup> which met at the same time.

The most important suggestions underlying Schulze's system are based on the designation of peripheral position by the ending **an**, the direction by the ending **ad**, and in retaining the ending **al** for the general designation of a region, e. g. **Dorsan** at the back, **Dorsad** toward the back [dorsalward] and **Dorsal** in the region of the back.

Concerning these suggestions, we also may await developments as to how far they will attain general approval and adoption; we may do this since it nowhere interferes with our nomenclature. Personally I have a practical objection to putting the distinctions into a mere final letter. Very many people have, in speech as well as in writing, the bad habit of dropping the last syllable, and the similarly sounding **ad**, **al**, **an**, might be easily confused.

The introduction of the word **Rostrum** for the cephalic pole of the axis of the body I deem an essential enrichment of our language. The adjective **Rostral** [proral Ehlers, or acral Froriep] seems to me indispensable as an ontogenetic expression. The rostrum of the early embryonic body lies in the region of the area reuniens,<sup>2</sup> the rostrum of the fully

<sup>1</sup> Verhandlungen der deutschen Gesellschaft auf der 3. Jahresversammlung in Göttingen. Leipzig 1894. p. 10.

<sup>2</sup> This Archive 1894, p. 314.

developed body lies in the margin of the snout fold (nose, beak, etc.).<sup>3</sup> As far as designations of direction in the trunk are concerned the hitherto used appositives **Cranial** and **Caudal** are sufficient.

**Glandulae. Lymphoglandulae. Noduli lymphatici.**

Our nomenclature contains besides *Glandulae*, the *Lymphoglandulae*, and it should be emphasized that the latter designation was not adopted without vigorous opposition. Toldt especially advocated with great fervor the expression **Nodi lymphatici**. But in its last ballot the Commission dropped this term by a large majority, and as I think correctly.

The recognition of the most general characteristics of "glands" offered many difficulties to the older anatomists. In the foreground were always standing definite form and compact structure, as indicated by the Latin word "*glandula*" and also as it appears, by the Greek <sup>4</sup> "*ἀδῆν*." Later, especially on the strength of Ruysch's injections, the richness in vessels was designated as the main characteristic of all glands. In no lesser degree the chemical action of the glands and the formation of special secretions different from blood, were pointed out as essential properties.<sup>5</sup> The main difficulty in the establishment of precise characteristics for glands was for a long time based on the existence of glands without excretory ducts. J. Fr. Meckel called the latter "**incomplete glands**" and was of the opinion that in them the lymph vessels take the place of excretory ducts.<sup>6</sup> Then E. H. Weber, in a thoroughly clear and well thought out argument, advocated the division of the glands into two main groups; the **Vessel glands** and **Excretory glands**, or the glands with and the glands without excretory ducts, which division has since been generally accepted. Weber subdivided the vessel glands into **Lymphglands** and **Blood or Blood vessel glands**; among the latter he counted the thyroid, thymus and spleen. This fundamental division is found also in J. Müller's authoritative work on glands. J. Müller's hypothesis was that the vessel glands consist throughout of vessels, so it becomes intelligible that he counted among them an organ like the placenta.<sup>7</sup> He calls them **Vessel nodes** or **Vessel ganglia**, and here-

<sup>3</sup> This *Archive* 1892, p. 400, ff.

<sup>4</sup> According to the opinion of a friend who is an authority in philology *Ἀδῆν* is to be derived from the stem *ἀδ* which contains the idea of fullness or satiety.

<sup>5</sup> Compare here the definitions of glands by J. Fr. Meckel, *Handbuch der Menschlichen Anatomie*. Halle 1815, I, 627 and by E. H. Weber in Hildebrand-Weber's *Handbuch der Anatomie*. Braunschweig 1830, I, 432.

<sup>6</sup> Meckel, l. c. 647. In favor of his conception Meckel mentions, besides the richness in lymph vessels of the organs in question, the fact that the adrenal gland, the thyroid gland and the thymus, lie near the thoracic duct.

<sup>7</sup> Joh. Müller de *Glandularum secernentium structura*. Leipzig 1830.

with he adopted a designation in adenology which was used at first in surgery, and then in neurology for two different structures. The word "ganglion" occurs in the works of Hippocrates and Galen. According to a statement by Hyrtl,<sup>8</sup> this word seems to have been used to designate those swellings of tendon sheaths, which we commonly call ganglia. The origin of the word is unknown. The comparison of the swellings of the sympathetic trunk with these so-called ganglia is found in Galen.

The application of the word ganglion to vessel glands was therefore a wider application of the original meaning, whereby our understanding of the organs in question gained but little. But if now, perhaps in consequence of wrong histological assumptions, the German expression "**Nervenknoten**" is applied to nervous ganglia, if in connection with it one has spoken of "**Gefässknoten**" and Latinized these "**Gefässknoten**" into "**Nodi vasculares**" (resp. *Nodi lymphatici*) then this is a change of expression which appears questionable either from the facts or the derivation.

The doctrine of glands with and without excretory ducts was deeply affected by the introduction of the cell doctrine into histology. It is to be noted that the first important advance beyond the hitherto generally accepted characteristics of glands was a new and indeed very decisive and essential one, viz: that all organs designated as glands possess a cellular parenchyma. With the progressing investigations of histologists the importance of gland cells for secreting glands came more and more

Page 27 "*itaque ex solis vasis conflatae sunt, tanquam vasorum glomeres s. ganglia vascularia in quibus liquores advecti per vascula innumera minima dividuntur, ut deinde in communem circulum revehantur.*" "*Sunt autem glandulae hujus generis, seu ganglia vascularia duplicia:*

I. *Ganglia vascularia sanguinea . . . . .* II. *Ganglia vascularia lymphatica . . . . .*" The expression "Ganglions lymphatiques" is made by French anatomists previous to the time of Joh. Müller e. g. by Cloquet, *Traité de Anatomie*. 1822. II. 500, whereas Bichat, *Anatomie descriptive* 1802. Bd. III, 431, speaks still of "*Glandes des absorbants.*" In the first edition of Cruveilhier's *Anatomie descriptive* 1834. Bd. III, 352, I find the following remarks: "The lymphatic vessels contain small gangliform bodies, *glandes conglobées* of the ancients, called today, lymphatic ganglia from the analogy which Soemmering has established between these enlargements and the nerve ganglia. In Th. Soemmering's *Gefässlehre*. Frankfurt, 1792, p. 438, the structures were called "suction vessel glands (*Glandulae conglobatae*)." The expression *Ganglia lymphatica* does not yet occur, but there is found this remark: "They (suction vessel glands) belong to the suction vessels, as the nerve ganglia to the nerves." Such vague analogies were permissible in the pre-histological time of the past century; today they are no longer justifiable.

<sup>8</sup> Hyrtl, *Onomatologia anatomica*, Wien 1880, p. 32.

into the foreground and soon we came to the point of speaking even of unicellular glands. For the glands without secreting ducts we were enabled to substitute entirely precise histological terms for the hitherto vague ideas of "vessel nodes." In all these organs the rich accumulation of cells proved a never failing characteristic. But beyond this we soon arrived at conclusions which were important for the characterization and classification of glands. Through ontogenetic research we are taught that all secreting glands originate from epithelial layers; thus it is that the conception of epithelial cell and gland cell as well as epithelial layer and glandular layer are no longer sharply distinguishable. Among the glands of epithelial nature and origin are counted also the thyreoid and the hypophysis cerebri, i. e. organs which hitherto were counted among the "vessel glands." The thyreoid and hypophysis are glands which originally possessed excretory ducts but lost them at an early period.

Just as the glands of epithelial origin form a natural group, so it has been possible since the fifties through the researches of Brücke, Kölliker, Billroth, myself, H. Frey, F. Schmidt and others, to contrast to them another distinctly characteristic, and not less natural, group of glandular organs for which the designation as vascular glands is to be retained in the full sense of the word. To this group belong the spleen, the lymph-glands, thymus, tonsils, the lymphoid follicles at the root of the tongue, and all those small organs inserted into the mucous membranes of the intestinal tract and other apparatus, which we specified by the since discarded designation "follicular": Peyer's follicles, solitary follicles, etc.—our present *Noduli lymphatici*. The common grouping of these structures followed from the similarity of their histological structure and their relation to the vascular system, in that they all give rise to cells which are given off directly either into the veins or into the lymph vessels. The characteristic tissue of genuine vascular glands I have previously called adenoid,<sup>9</sup> and later on Kölliker added to this the term "cytogenic tissue." Aside from the above mentioned glandular organs, adenoid tissue occurs also in diffuse distribution, especially in the mucous membrane of

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<sup>9</sup> His. Untersuchungen über die zum Lymphsystem gehörigen Drüsen in Siebold und Kölliker's Zeitschrift. Bd. X, p. 334 ff. und Untersuchungen über den Bau der Peyer'schen Drüsen. Bd. XI, p. 423. The expression "Nodus" lymphaticus I had approved of because the word follicle always caused difficulties. One may speak of follicles perhaps in the intestinal tract but not at all in the tonsils. Nevertheless it is to be emphasized that the designation "Nodus" owes its present popularity mainly to the fixation fluids which at present are strongly hardening. The tissue of the fresh *Noduli* is generally looser than that of its surroundings. This is true to a great extent of those masses which I earlier called "Vacuoles" of lymph-glands and the intestinal follicles which Flemming has renamed "Secondary nodules."

the gut. It appears everywhere as a delicate reticulum adjoining the adventitia of the capillary blood vessel, in the meshes of which leucocytes are found. We class the adenoid tissue among the connective tissues. What rôle epithelial anlagen play in its occurrence, for the time being may be considered an open question. We know that in the thymus an epithelial anlage initiates the formation of the definite organ. Recently something similar has been said of the spleen and the intestinal nodules. Think what we may of the histogenic process, this much is true that we can no longer speak of an epithelial stroma in organs formed of adenoid tissue.<sup>1</sup> On the strength of the views above outlined, together with my division of the tissues into archiblastic and parablastic, I proposed thirteen years ago the following classification of glands.<sup>2</sup>

*A. Glands with archiblastic parenchyma.*

**I. Secreting glands:**

Glands with excretory ducts.

Ovaries.

**II. Non-secreting glands or false vascular glands:**

Thyroid, Hypophysis, Suprarenal.

*B. Glands with parablastic parenchyma.*

**True vascular glands:**

Spleen, Lymph-glands, Thymus. Lingual tonsils  
and Tonsils.

Intestinal follicles, etc.

In considering the nomenclature of the glands, and especially while discussing the position of the lymph-glands, the question of the grouping of the organs belonging to this class was brought very near to us in the Committee and last year we tried to agree on a scheme of division which was to be submitted to the Commission.

I had recommended a division into *Glandulae evehentes* and *Glandulae vasculares*, but colleague Waldeyer could not support this classification on account of some still doubtful points in development. He, on his part, suggested a division of the glands into *Glandulae apertae* and *Glandulae clausae*, which suggestion had one point in its favor, in that it referred to purely anatomical conditions without touching ontogenesis, histology or physiology. After some discussion, I consented to the suggestion in the form in which we submitted it to the members of the Commission at the time of the autumn ballot.

<sup>1</sup> Cf. v. Brunn in *Merkel-Bonnet, Ergebnisse, etc., für das Jahr 1893.*

<sup>2</sup> *This Archive* 1882, p. 108.

<b>Glandulae apertae</b> (incl. Ovarium)	Tonsilla tubaria Tonsillae intestinales [Peyeri]
<b>Glandulae clausae</b>	Noduli lymphatici
Lymphoglandulae	Thymus
Tonsillae	Lien
Tonsilla palatina	
Tonsilla pharyngea	Glandula thyreoidea
Tonsilla lingualis	Glandula suprarenalis
	Hypophysis

The suggestion met only with divided approval. As matters were standing the Commission did not want to enter into the question of the classification of glands. If I had once more to express my personal conviction of the most appropriate grouping of the glands I should do it in this form:

<b>Glandulae epitheliales</b>	<b>Glandulae vasculares [Organa</b>
Gl. evehentes [apertae]	<b>adenoidea]</b>
Gl. clausae	Lymphoglandulae
Thyreoidea	Noduli lymphatici
Hypophysis	Tonsillae
Gl. suprarenales	Thymus
	Lien

Since a decision on the question of the most appropriate division of glands was declined by the Commission, I should have refrained from touching upon it again were it not that the importance of bringing the true vascular glands into one common group is still in the foreground. If in recent textbooks, spleen and thymus are still traditionally put together with thyreoid and suprarenal as vascular glands, or if in one chapter of the book the lymph nodes, in another the spleen, in a third, the thymus, then again the tonsils and Peyer's glands are treated, without mentioning that all these parts are closely related to each other anatomically, histologically and physiologically, then in my opinion we are remaining at a stage of scientific development which now lies almost four decades behind us.

How then shall we designate these organs which stand in direct relation to the vascular system and the formation of blood, if we are no longer allowed to call them glands? Is Nodus really an appropriate expression for them and can the spleen and thymus be called Nodi vasculares? The old characterization as vascular glands, it seems to me even today, best designates the anatomical and physiological position of these organs; and the difference between epithelial and vascular glands is such that it easily can be made clear to any student.

**Partes. Termini generales.**

The chapter **Partes corporis** gives a classification of the principal regions of the body which are externally distinguishable. Many of the terms here enumerated occur again in the special chapters.

**Thenar** and **Hypothenar** were retained in the **Partes**, although as Krause points out (*Absth.* p. 63) **Hypothenar** means the palm of the hand which can be used for drinking. **Thenar** means the muscular tissue of the flat of the hand or the foot. The loose usage among anatomists, of the two words for thumb palm and little finger palm is said to have originated with Riolan (1649). Kölliker (*Absth.* p. 150) has suggested **Thenar pollicis** and **Thenar digiti minimi**; Toldt, **Thenar** and **Antithenar**.

The list of **Termini generales** comprises those expressions which repeatedly occur in anatomical designations. Words, such as **Petiolus** which occurs only once, have been omitted.

**Discus** is disc, **Meniscus** is crescent.

**Osteology.**

In this often revised division, we may confine ourselves to a few explanations.

**Infundibulum ethmoidale.** For the explanation of this term I give the description of Sappey (*Traité d'Anatomie*, 3 edit. I. p. 152). "An opening at the anterior end of the middle nasal meatus connects it with the anterior ethmoidal cells. The most important of the latter represents the communicating opening. This cell, which elongates from below upwards and is wider above than below, has been compared to a funnel and is, therefore, called **infundibulum**. The **infundibulum** opens with its upper end into the corresponding **Sinus frontalis**. Its lower end, on the one hand, leads into the middle nasal meatus, on the other hand into the **Sinus maxillaris**." See textbook by Langer-Toldt (5 edit. p. 74).

**Glabella.** As Krause<sup>3</sup> has pointed out this word is used sometimes for the space above the **Arcus superciliares**, at other times for the space between the latter and the frontal protuberance, again for the space lying above the root of the nose and between the two **Arcus superciliares** (the "Stirnnasenwulst" of the Frankfort Anthropological Agreement). The Commission understands the word in the last sense.

**Fossa scaphoidea laminae medialis proc. pterygoidei** is, according to Thane,<sup>4</sup> the cavity which gives origin to the **M. tensor veli palatini**.

**Vertebrae.** The commission has added to their list the **Processus transversus** and the **Processus costarius**. Gegenbauer calls that part of

<sup>3</sup> This *Archive* 1881, p. 420.

<sup>4</sup> *Quain's Anatomy* 10 ed., II, p. 45.

the *Processus transversus* remaining, after the deduction of the *Processus costarius*, *Processus lateralis*. Therefore, Gegenbauer's *Processus transversus* equals

$\left\{ \begin{array}{l} \text{Proc. lateralis} \\ \text{Proc. costarius} \end{array} \right\}$  whereas the arrangement of Langer

is: *Processus lateralis* equals  $\left\{ \begin{array}{l} \text{Proc. transversus} \\ \text{Proc. costarius} \end{array} \right\}$  (Absth. p. 106).

*Sulci paraglenoidales* are, according to Löhr,<sup>5</sup> the grooves which serve for the attachment of tendinous masses and are found especially on the anterior and posterior part of the *Facies auricularis oss. ilium*. The anterior groove was generally designated as *Sulcus præauricularis*. (Kr.)

*Linea intermedia* [*cristae ossis ilium*] is the muscle line of the *Ala ossis ilium* formerly designated as *Labium medium*.

*Ala ossis ilium* is the broad expanded portion of the *ilium*.

### Syndesmology.

As mentioned before *Syndesmology* in its present form is the creation of colleague Toldt, who founded his suggestions throughout on new preparations. Only a limited number of special explanations are necessary for this chapter.

*Lig. accessorium volare* [resp. *plantare*] is the strong fibre masses which cause the thickening of the articular capsule on the volar surface of each *Articulatio metacarpophalangea* and with the *Lig. vaginale* stands in direct relation with the corresponding flexor tendon. (*Lig. transversum*, Hyrtl. "tendon pulley" Lange.)

*Lig. carpi volare* is the *Lig. carpi volare commune* of the textbooks.

*Lig. carpi transversum* is the *Lig. carpi volare transversum sive proprium*.

The *Lig. talocalcaneum anterius* (Toldt) is a strengthening band of the anterior part of the *Capsula articularis talocalcanea* and is to be found in the *Sinus tarsi* immediately at the anterior side of the *Artic. talocalcanea* and some distance behind the *Lig. talocalcaneum interosseum*. (Toldt.)

### Myology.

*Pars lacrimalis m. orbicularis oc.* [*M. Horneri*]. If the musculature of the eyelid be dissected from the side of the orbit there is found behind the lachrymal sac a quadrangular muscle plate which is known as Horner's muscle. The height of the plate is 5-6mm., the medial margin is attached to the *Crista lacrimalis* of the lachrymal bone. Lateralward this muscle plate passes over the medial corner of the eye and divides into two crura going over into the lids. In order to follow

<sup>5</sup> Anatomischer Anzeiger 1894, No. 17, p. 521.



the further extension of the two crura of the muscle the tarsus must be loosened from the posterior side of the lid. Then there is recognized without difficulty the transition of the fibres of the muscle of Horner into the bundles of fibres of the *M. orbicularis* lying next to the slit of the eyelid. Some small bundles belonging to the posterior surface run crosswise, from the lower margin of Horner's muscle to the upper lid and vice versa. According to this finding, Horner's muscle must be considered as a part of the *M. orbicularis*. While the main portion of the fibres is connected with *Lig. palpebrale mediale* which lies in front of the lachrymal sac, the *Pars lacrimalis* runs behind and beyond the lachrymal sac.<sup>6</sup>

*M. quadratus labii superioris* was accepted as a single muscle with three heads: *Caput angulare*, *C. infraorbitale*, and *C. zygomaticum*. This was not done without opposition. Krause had spoken already in his first balloting pamphlet (p. 60) against the collective treatment of the three muscles: *Mm. levator labii superioris propius*, *levator labii superioris alaeque nasi* and *zygomaticus minor*, and had emphasized that by it one would get four names instead of three. Schwalbe (*Absth.* p. 145) opposed still more energetically than Krause the taking together under a common name of separate muscles like *Triceps surae* and *Quadratus labii superioris*. He, however, did not carry his protest. Obviously the long used names caused some hesitancy. Simplification in this respect would have been possible; thus Schwalbe wanted to replace the former *Levatores* by a *Labialis superior* and a *Nasolabialis*.

*Raphe pterygomandibularis* after Waldeyer was adopted instead of *Lig. pterygomandibulare* (Henle) because it is not a true ligament. (Kr.)

In opposition to the majority of the Commission v. Kölliker objected to the formation of the names of the Hyoid muscles: *M. omohyoideus*, *sternohyoideus*, etc. Since *hyoideus* means similar to hyoid bone, he suggested *hyalis* — *M. omohyalis*, *sternohyalis*, etc.

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<sup>6</sup> A description based on cross section of the course of Horner's muscle and a very instructive drawing of a horizontal cross section of the region of the lachrymal sac are found in the *Topographic Anatomy* by J. Gerlach, Munich and Leipzig, 1891, p. 172 ff.

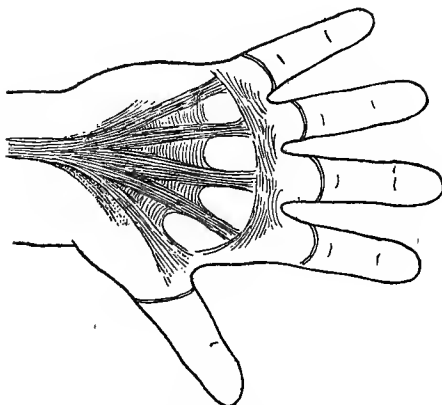


Fig. 1.

Fasciculi transversi [aponeurosis palmaris]. Braune's Lig. natatorium after a drawing from Braune's unpublished work.

In Munich the **M. sternocleidomastoideus** was again solemnly reinstated into its rights in spite of all antagonistic suggestions. Theile<sup>7</sup> calls this muscle *Nutatores capitis*, since he separated it into two portions which he differentiated as *Nutator internus* and *externus*. The following suggestions were handed in by members of the Commission: **M. quadriceps colli** or **M. sternocleido-occipitomastoideus** by v. Bardeleben; **M. biceps colli** by v. Kölliker; **M. obliquus colli** by Toldt.

**Fasciculi transversi** [aponeurosis palmaris] are not to be considered the common transverse fibres of the aponeurosis since the name is chosen for that ligament which Braune (in my opinion with a more appropriate expression) called **Lig. natatorium**. This ligament which so far as I know was appreciated first by Braune as to its existence and importance, consists of strong transverse fibrous bands lying immediately under the skin and joining the bases of the fingers. A short mention of it is found in a work by M. Grapow<sup>8</sup> done under Braune's direction. I add a pen sketch of the ligament which is made after a drawing from Braune's unpublished work. A suggestive picture of the strands of Braune's **Lig. natatorium** is found in Sappey.<sup>9</sup> Between the longitudinal strands running to the bases of the fingers, Sappey shows a system of transverse fibrous bands, "bandelettes," which uninterruptedly fill the space almost up to the beginning of the fingers. These transverse bands according to him start from the

<sup>7</sup> In Th. Soemmering's revised Anatomy Vol. III, 1, p. 180.

<sup>8</sup> Ueber die Anatomie und physiologische Bedeutung der Palmaraponeurose. This Archive 1887, p. 155.

<sup>9</sup> Traité d'Anatomie 1876, II, p. 363.

heads of the metacarpal bones. By Braune and Grapow their physiological significance rests on the fact that there are between the strands of the Lig. natatorium and the palmar fascia proper, sufficient interspaces for the penetration of veins, whereby the arrangement acquires the importance of a suction-apparatus.

**Scalenus minimus** is the small muscle pushing in between the plexus brachialis and the Art. subclavia, and which extends from the transverse process of the 6th, or of the 6th and 7th, cervical vertebrae to the first rib, and has a further attachment to the apex of the pleura. The muscle has already been described by Albin. Its importance as a tensor of the apex of the pleura has been emphasized especially by Zuckerkandl.<sup>1</sup> In 60 cadavers Zuckerkandl found the muscle present 22 times on both sides, missing 17 times on both sides, present 12 times on the right side only, and present 9 times on the left side only. Whenever the muscle is wanting there is found in its place a ligament which runs from the lower cervical vertebrae to the first rib and to the apex of the pleura—the Lig. costopleuro-vertebrale of Zuckerkandl.

**Ligamentum fundiforme penis.** Luschka<sup>2</sup> has described under the name Lig. suspensorium penis superficiale, sive elasticum, a broad band consisting almost entirely of elastic fibres, which originates near the Linea alba about 3 fingers' width above the symphysis and embraces the penis with two branches which meet again under the same. This elastic band is often found strongly developed and a part of its fibres may also radiate to the scrotum. On Braune's and my suggestions the apparatus in a former ballot (Absth. p. 149) was designated as **Funda penis**, an expression which the editorial staff lately changed to **Lig. fundiforme**.

The chapter on **Inguinal foveae** was settled by the Commission in its discussions in Munich to the effect that they accepted only two **Inguinal foveae**, a **lateral** and **medial**, and designated the fovea medianward from the Ligamentum umbilicae laterale as **Fovea supravesicalis**. Schwalbe had compiled for the ballot in question, a tabulated resumé of terms from eleven German, four French and two English textbooks. Eleven of the seventeen mentioned authors distinguished three inguinal fossae or foveae; a lateral, a median, and a medial. Führer, Richet and Sappey designated the most medianward of the three foveae by the special name **Fovea pubovesicalis**.

Intimately connected with the medial inguinal fovea are the two structures which Braune had distinguished as Henle's and Hesselbach's ligaments and which are registered in our lists as **Falx [aponeurotica]** in-

<sup>1</sup> His and Braune, Zeitschrift für Anatomie und Entwicklungsgeschichte 1877, Vol. II, p. 56 ff.

<sup>2</sup> Topographische Anatomie des Beckens, p. 320.

guinalis and as *Lig. interfoveolare* [Hesselbachi]. These structures need here a special discussion.

After removal of the peritoneum from the posterior surface, one finds, by proper tension of the abdominal wall, between the point of junction of the *M. rectus* and the internal inguinal ring, two bands of strongly developed fibres. The one, broadening downwards and upwards, forms the medial border of the internal inguinal ring, the other appears as a sickle shaped broadening of the tendon of the rectus. Braune, who first separated these fibrous bands, designates the one bordering on the rectus as Henle's ligament, the one bordering on the inguinal ring as Hesselbach's. Both Henle's and Hesselbach's ligaments<sup>3</sup> are broadly joined to Poupart's ligament. Between Henle's and Hesselbach's ligaments there lies an interspace filled with loose tissue into which the finger can be easily pressed. This interspace is the *medial inguinal fossa*. If this loose tissue closing the fossa be removed one can penetrate from here to the external inguinal ring, and the inserted finger is then closely constricted by two systems of sharply protruding bands lying one behind the other; posteriorly constricted by Henle's and Hesselbach's ligaments, anteriorly by the margin of the external inguinal ring. Hesselbach's and Henle's ligaments lie in the posterior wall of the inguinal canal. The wider the latter ligament becomes, the more the region of the medial inguinal fossa is narrowed, and the less is the disposition toward the formation of direct inguinal herniae. All these conditions are easily demonstrated to the students in the dissecting room by preparation from the posterior side.

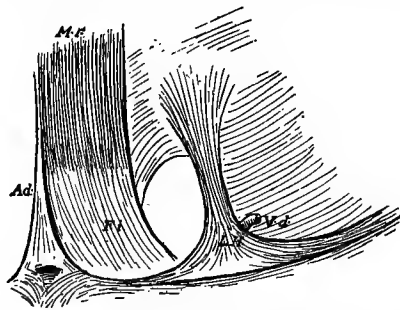


Fig. 2.

Surroundings of medial inguinal fossae, from preparation from posterior side.

Ad.=Adminiculum lineae albae. F.i.=Falx inguinalis [Henle's ligament of Braune]. LH=Lig. interfoveolare [Hesselbach's ligament of Braune]. Mr.=*M. rectus abdominis*. V.d.=*Vas deferens*.

The structure designated by Braune as "Hesselbach's ligament" is most splendidly shown in different plates (III, IV, X, XI, and XV) of Hesselbach's work<sup>4</sup> which has become fundamental in herniology.

<sup>3</sup> Braune, *Das Venensystem des menschlichen Körpers* 1884, Text, p. 66.

<sup>4</sup> *Untersuchungen über Leisten- und Schenkelbrüche*, Würzburg 1814.

It here appears as a fibrous plate, widely radiating upward and downward, inserted between the medial inguinal fossa and the internal inguinal ring. Less precise is Hesselbach's description in the text. A membrane designated by him as "internal inguinal ligament" consists of stronger fibres running over the femoral canal, and of weaker ones running straight upward. The membrane is joined to the abdominal muscles and assists them in their function. Lateralward from the margin of the rectus the membrane is thin and loose and here it is frequently drawn out into a shallow fossa toward the external inguinal ring.

Henle describes in his myology (1 edit. p. 71) as Lig. inguinale internum mediale a fibrous plate the fibres of which rising from the Linea ilipectinea, adjoin medianward the margin of the M. rectus. The plate appears like a broadening of the lateral tendon of the rectus and extends laterally to the internal inguinal ring. Henle gives a pictorial representation of this fibrous plate, l. c. Fig. 32, in which a medial inguinal fossa is not distinguishable. Therefore, Henle's Lig. ing. int. mediale comprises not only the plate adjoining the M. rectus and designated by Braune as Henle's ligament, but also Hesselbach's ligament, which was not separated from it.

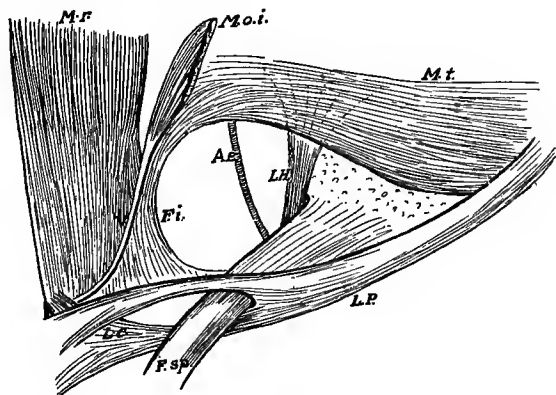


Fig. 3.

Surroundings of medial inguinal fossa prepared from anterior side.

The aponeurosis of the M. obliquus externus is removed to the narrow inferior part where it passes over into Poupart's ligament. Only a small part remains of the M. obliquus internus (M. o. i.). The anterior leaf of the sheath of the M. rectus (M. r.) is removed with the exception of a narrow strip (V.). The M. pyramidalis is also removed. One observes the passing over of the tendon of the M. transversus abdominis into the Falx inguinalis and the connection of the latter directly to the sheath of the rectus and indirectly to the tendon of the rectus. L. H.=Hesselbach's ligament. L. C.=Colles' ligament. F. sp.=Funiculus spermaticus. A. e.=Arteria epigastrica inferior.

In the place of the personal names introduced by Braune we suggested in the last nomenclature pamphlets (p. 928) **Aponeurosis falciformis** [m. recti abdominis] and **Lig. interfoveolare** [Hesselbachi]. The

former name we have since changed into **Falx** [aponeurotica] **inguinalis** for reasons soon to be discussed. The ligamentum interfoveolare always contains arched ascending muscle fibres which as a rule can be traced directly into the *M. transversus*; they were designated by Braune, following Luschka, as *M. puborectalis*. I wished to take the same into our list as **M. interfoveolaris**, but remained with the minority.

The above illustration based on preparation made from behind gives, by the way, only an incomplete picture of the relationship of Henle's and Hesselbach's ligaments. Both fibrous bands hold, as Braune has shown, a very definite relation to the *M. transversus abdominis*.

In the preparation from the anterior side Henle's ligament is shown as an arched continuation of the tendon of the *M. transversus* and at first is continuous with the sheath of the rectus and only indirectly with its tendon. Henle has pointed out the connection of the sheath with the lateral tendon of the rectus. The upper fibres of Hesselbach's ligament may extend, behind the lower bundles of the transversus, to the posterior sheath of the rectus and reach the margin of the line of Douglas. Hesselbach's ligament, as Braune expresses it, appears as the pelvic insertion of the *M. transversus*. These conditions are illustrated in Plate 10 of Braune's large Atlas of Veins. The medial inguinal fossa is, therefore, to be interpreted as an opening in the inserting tendon of the *M. transversus* which lies between a lateral leaf — Hesselbach's ligament, and a medial leaf — Henle's ligament. As a supplement to Braune's Plate, which is only in the hands of a few, I give a sketch of the relations, after a preparation from the anterior side made by Spalteholz. In order to recognize from behind the relations of Henle's ligament — at present our *Falx inguinalis* — to the *M. transversus*, Hesselbach's ligament should be loosened from its lower attachment and separated from the *M. transversus* as far as it lies close to it.

### **Bursae et Vaginae mucosae.**

This chapter, as above mentioned, was compiled by colleague Toldt. The fundamental rules were the following:<sup>5</sup>

The *Bursae mucosae* and *Vaginae tendinum* are considered separately. Among the latter are counted the closed mucous sacs which surround, entirely or for the most part, one or several tendons in their course. The sacs, situated at the ends of tendons, or inserted between tendons and bones, are separated as *Bursae subtendineae* from the *Vaginae tendinum*. Thus, e. g. the *Vagina m. tibialis anterioris* lies in the course of the tendon of this muscle where the latter runs underneath the *Lig. transversum* and

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<sup>5</sup> These principles and the following explanations were taken from the manuscript of colleague Toldt.

cruciatum. Again, the Bursa [subtendinea] m. tibialis anterioris is found between the termination of the tendon and the underlying bone. Bursae subtendineae are found also where tendons wind around bones. Beside the Bursae mucosae subtendineae, there are distinguished:

Bursae muc. subcutaneae,  
 “ “ submusculares,  
 “ “ subfasciales.

They, however, are not separated in the list but are arranged and classified according to regions. The Vaginae tendinum are all enumerated on account of their practical importance. Of the Bursae mucosae only those are listed which:

- a. According to previous experiences occur in more than 30-40 per cent. of the cases, or which
- b. According to experience are of practical importance, or which
- c. Are of special morphological or physiological interest.

All names were formed after the same principles both as to significance and derivation. It is therefore easy, if occasion demands, to construct names for those mucous bursae which are not contained in the list.

Bursa subcutanea prominentiae laryngeae is given by Verneuil as B. serosa antethyreoidea subcutanea. It is situated (almost exclusively in males) in front of the superior part of the thyroid cartilage and is apparently caused by the Prominentia laryngea.

Bursa m. sternohyoidei is a name given by Plenck. It lies in the median plane or at either side of it — i. e. unpaired or paired — and just behind the attachment of this muscle on the inferior border of the hyoid bone. Verneuil calls it B. serosa subhyoidea profunda. W. Gruber and others have given it the names: B. infrahyoidea, sive thyreoidea, sive thyreohyoidea anterior. By Rosenmüller it is given (in a reference to Plenck) as B. vesicularis m. sternohyoidei.

Bursa m. thyreohyoidei occurs more frequently than the former; it lies laterally under the great horn of the hyoid bone and is covered by the upper extremity of the M. thyreohyoideus. The authors call it B. thyreohyoidea profunda sive lateralis.

Bursa muc. subacromialis and subdeltoidea often unite forming a single large space.

B. m. extensoris carpi radialis brevis lies on the Basis ossis metacarpi III.

B. m. flexoris carpi ulnaris lies on the Os pisiforme.

B. m. flexoris carpi radialis lies in the Sulcus ossis navicularis.

Bursae glutaeofemorales. Under this designation is included also the Bursa glutaeofascialis of the authors.

B. iliaca subtendinea lies at the insertion of the M. iliopsoas on the Trochanter minor.

**B. m. pectinei** is likewise on the Trochanter minor at the point of insertion of the muscle of the same name.

**B. praepatellaris subfascialis** is the *B. patellaris subfascialis* of Linhart (*B. praepatellaris media sive subaponeurotica* of W. Gruber). It lies between the Fascia lata and the tendinous expansion of the *M. extensor quadriceps*.

**B. praepatellaris subtendinea** is the *B. patellaris profunda* of Luschka (*B. praepatellaris profunda sive subtendinea* of W. Gruber). It lies between the tendon of the *M. extensor quadriceps* and the surface of the patella.

**B. infrapatellaris profunda** lies between the *Lig. patellae* and the tibia.

**B. anserina** lies under the tendinous expansion formed by the common attachment to the tibia of the *Mm. gracilis, sartorius* and *semitendinosus*. This expansion is called by some anatomists *Pes anserinus*.<sup>6</sup>

### Splanchnology.

As *Tonsilla lingualis* the Commission classified according to the suggestion of colleague Waldeyer all follicular glands, *Folliculi linguales*, belonging to the root of the tongue.

**Sulcus terminalis**, (**Ductus lingualis**), *Ductus thyreoglossus*, **Sinus tonsillaris**, **Plica triangularis**, **Fossa suprtonsillaris**. Concerning these structures I may refer to my *Anatomy of Human Embryos* (Vol. III, Leipzig, 1885) from which the accompanying pictures (Figs. 4, 5, and 6) are taken. The body and the root of the tongue arise from two originally separated anlagen: The body from an unpaired thickening in the floor of the oral cavity (the *Tuberculum impar*); the root of the tongue, from the coalescence of proliferations from the second and third pharyngeal arches on either side. At the boundary line between the anlagen there remains, as a rule throughout life, an angular broken furrow, the **Sulcus terminalis linguae**. The posterior end of the furrow terminates in the *Foramen caecum* while the anterior end terminates in front of the *Arcus palatoglossus* on either side. The arched line of the *Papillae vallatae* lies 5-8mm. in front of the *Sulcus terminalis* in the region of the body proper of the tongue. From the *Foramen caecum* a duct, the *Ductus lingualis*, often extends to a depth of  $\frac{1}{2}$  to 1 cm. or even more in the direction of the hyoid bone. This duct is a remnant of the embryonic *Ductus thyreoglossus*, which at the end of the first month extended from the oro-pharyngeal cavity to the median anlage of the thyroid gland (Figs. 4 and 5).

<sup>6</sup> Langer-Toldt *Anatomie*, 5 edit., p. 235.



The *Arcus glossopalatinus*, originating from two pharyngeal arches, ends medialward in a sharply defined triangular fold of mucous membrane, the *Plica triangularis*. The latter begins narrow above and broadens at its junction with the tongue. Posteriorly and laterally lies a recess, the *Sinus tonsillaris*, which is deep in the foetus and from the base of which the pharyngeal tonsil originates (Fig. 6). According to the size and extension of the adenoid proliferation the following different possibilities may arise:

1. The tonsil stands out from the rest of the sinus as a sharply defined elevation and above it lies the *Fossa supratonsillaris* which extends upward for some distance.

2. The tonsil almost entirely fills the sinus yet the *Fossa supratonsillaris* may still be open. The *Plica triangularis* flatly overlies the lower part of the tonsil and coalesces with it, but without losing its sharp outline.

3. Lymph nodules may be formed on the free surface of the *Plica triangularis* and in extreme cases their delimitation from the tonsil is lost.

**Recessus pharyngeus [Rosenmuelleri].** Merkel, in his *Topographic Anatomy* (Vol. I. p. 416), differentiates after Tourtual the *Recessus infundibuliformis [Rosenmuelleri]* from the lateral groove of the pharynx leading to it; the latter he designates with Tourtual as *Sinus faucium lateralis*. The Commission has not adopted this term. Characteristic for Rosenmueller's recessus is its position behind the cartilaginous *Tuba Eustachii*, while the Tourtual-Merkel's *Sinus lateralis* is situated farther down behind the *Plica salpingopharyngea*.

In regard to the *Bursa pharyngea* I refer also to the detailed discussion by Merkel (l. c. p. 413). In my opinion the *Bursa pharyngea* must be brought into relation with the archings of the posterior pharyngeal wall caused by the *Mm. recti capitis anteriores*. If observed from the posterior side, the pharynx shows three ridge like prominences in the region of their attachments. The two lateral ridges are the pouches of Rosenmueller seen from without. The ridge lying in the medial plane attached to the *Tuberculum pharyngeum oss. occipitalis* pushes between the two muscle attachments and it corresponds, before a profuse development of the tonsil occurs, to a median longitudinal furrow on the inner surface of the posterior wall of the pharynx. The pharyngeal tonsil, similar to the lingual tonsil, shows at the time of its first appearance a system of downward converging folds with intervening furrows. The middle one of these furrows leads to the *Bursa pharyngea*; therefore, Merkel readily interpreted the *Bursa* as a median slit of the tonsil.

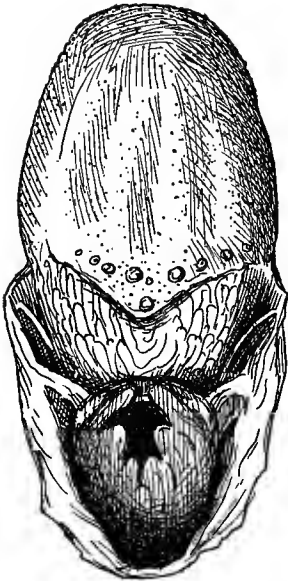


Fig. 4.

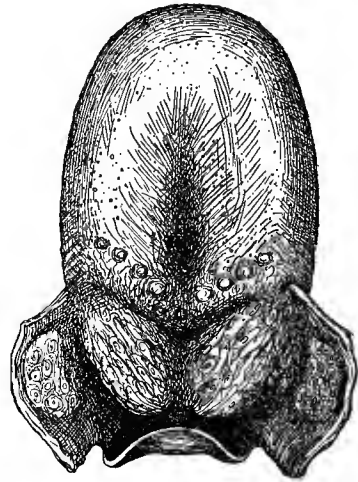


Fig. 5.

Tongue of a 6-month foetus and of an adult. Sulcus terminalis and Foramen caecum.

*Areae gastricae* are elevations of the mucous membrane of the stomach which correspond to glandular groups (*Absth.*) existing especially in the *Etat mamelonné* but also under other conditions.

*Pars analis recti.* This region, of such practical importance, is treated in French anatomies in a more detailed way than in German text-books. Sappey<sup>7</sup> describes Morgagni's *Valvulae semilunares*, the number of which he establishes as 3-8, as a rule 5 or 6. They lie at the lower margin of the *Sphincter ani internus*. Through a union of their terminations the *Columnae ani* are formed. The sinuses surrounded by *Valvulae ani* may easily become the seat of infection and the resulting abscesses and fistulae (*Ribes*).

Sappey says of the veins of the rectum that they are strongly developed in the lower quarter of the tube, especially in the region of the semilunar folds of the mucous membrane. Here they form the *Plexus haemorrhoidalis*; frequently the point of origin of the swellings called haemorrhoids. By maceration of the mucous membrane of the excised and stretched rectum one always finds a great number of vertical venous branches which rise from the lower margin of the *M. sphincter internus*. These viens often have ampulla-like dilations varying in size from that of a

<sup>7</sup> *Traité d'Anatomie descriptive* 3, edit. 1879, Vol. IV, p. 283.

millet seed to that of a lentil. Such dilations occur even in children and later on become the starting points of haemorrhoidal swellings.

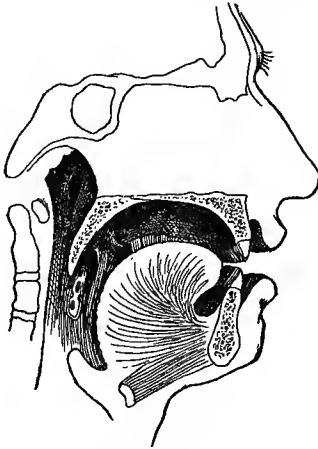


Fig. 6.

Plica triangularis and Fossa supratonsillaris in the adult.

Our collection contains an older (dry) injected preparation of the rectum made by E. H. Weber in which the venous roots in the Pars analis are especially well shown. Here are seen the numerous perpendicular branches, described by Sappey, which rise from the dense plexuses of the sinus and then empty into circular vessels 3-4 cm. above the anus. This preparation shows also the ampulla-like dilations of the small veins of the haemorrhoidal plexus.

Testut's<sup>8</sup> description of the vessels of the Pars analis recti is more detailed than Sappey's and at the same time accompanied by excellent illustrations. The length of the Pars analis in man is 3 cm., in woman 2 cm. The lower part of it is surrounded by the Sphincter ani externus as by an elastic ring. The M. sphincter internus does not reach down as far as the Sphincter externus. The lower margin of the former corresponds to the region of transition of the mucous membrane of the rectum into the outer skin. By injection of the veins there is found somewhat above the anus, at the level of the Valvulae semilunares, a system of ampulla-like dilated vessels which join to form a continuous wreath. They lie in the Tela submucosa, and the size of the ampullae vary from that of a millet seed to that of a pea. The ampullae are the beginnings of haemorrhoidal swellings and never are absent in adults but (in opposition to Sappey) may be in the newborn. Figure 1374 of Testut shows the dense Plexus haemorrhoidalis reaching up to the level of the

<sup>8</sup> *Traité d'Anatomie humaine* 1893, Vol. III, p. 553 and 578 ff.

ridge of the sphincter. From here outward there follow solitary draining veins (*Anastomoses sous-sphincteriennes* in contradistinction to *anastomoses sus-sphincteriennes* and *trans-sphincteriennes*). To be compared with Testut's illustrations of the veins of the rectum are also those which Luschka gives (p. 215) in his *Topogr. Anatomie des Beckens*.

Henle<sup>9</sup> has described the histological relations of the *Pars analis recti*. The mucous membrane of the columnae and their intervening spaces are distinguished from that of the parts of the rectum lying above: through the presence of numerous, partly coalesced vascular papillae, by the absence of glands and by the presence of thick stratified squamous epithelium. Longitudinal bundles of smooth muscle fibres cause the elevations of the mucous membrane. W. Krause<sup>1</sup> described similarly to Henle the mucous membrane of the *Pars analis recti*. To the smooth muscle bundles contained in the columns he gives in a note the name *Sustentator tunicae mucosae* or *Dilatator ani internus*. The *Sphincter ani internus* ends at the beginning of the columns as shown in an illustration by Henle (l. c. Fig. 133). Lieberkühn's glands do not extend as far as the *Sphincter internus*. I omit the similar statements in other recent anatomical works. In regard to the transition of the epithelium, Krause notes that between the intestinal epithelium and the stratified epithelium of the anus there is a line of demarcation of transitional epithelium about 2 mm. wide; whereas, the transition of the epithelium of the anus to that of the epidermis is a gradual one. Debierre<sup>2</sup> distinguishes two serrated border lines: a "*Linea anorectalis*" and a "*Linea anocutanea*," the latter of which seems to be identical with the *Linea sinuosa analis* of Rauber,<sup>3</sup> beyond which there appear hairs, sebaceous glands and *Gl. circumanales*.

According to the above description the *Pars analis recti* comprises the region of the *Columnae rectales*, of the *Sinus rectales*, and the *Annulus haemorrhoidalis*.<sup>4</sup> The latter term is newly introduced by the editorial committee, and we denote by it the annular thickening<sup>5</sup> which surrounds the opening proper of the anus and which is caused by the *Sphincter externus*. The *Sinus rectales* lie at the upper margin of the *Annulus haemorrhoidalis* and between them are the columnae. The annulus is the bearer of the lower part of the venous *Plexus haemorrhoidalis*.

<sup>9</sup> *Eingeweidelehre*, p. 180.

<sup>1</sup> *Anatomie II*, p. 463.

<sup>2</sup> *Traité élémentaire d'Anat. de l'homme 1890, II*, 425.

<sup>3</sup> *Anatomie des Menschen 1892, Vol. I*, p. 609.

<sup>4</sup> Testut cites as special works on the anus those of Duret, Hermann, Symington and Quain.

<sup>5</sup> See Langer-Toldt's *Anatomie*, 5 edit., p. 306.

**Nasus.** As far as the names enumerated here exceed the hitherto existing requirements for instruction, they are taken to a great extent from G. Schwalbe,<sup>5</sup> who on his part followed H. Meyer in many points. **Limen nasi** is the ridge between the Vestibulum which is surrounded by movable cartilage and the nasal cavity proper. Above the Limen lies the **Atrium meatus medii** (the Carina of Merkel) into which projects the obliquely descending **Agger nasi**, the rudiment of an anterior turbinate. **Sulcus olfactorius** is the narrow slit which leads from the Atrium, between the Agger nasi and the roof of the nasal cavity, upward towards the Lamina cribrosa and the anterior part of the Regio olfactoria. **Recessus sphenothmoidalis** is the groove parallel to the upper nasal cavity, lying in the region of the superior concha, and sometimes arched over by a Choncha suprema. **Meatus nasopharyngeus** is that part of the nasal cavity opening into the Pharynx under the body of the sphenoid bone. We have designated as **Meatus nasi communis** the space lying beside the Septum which extends through the entire height of the nasal cavity. **Processus sphenoidalis septi cartilaginei** (Kölliker) is a tongue shaped process, 4-6 mm. wide, of the septal cartilage, which follows the lower margin of the Lamina perpendicularis of the ethmoid bone and is more or less completely enclosed by the marginal plates of the Vomer.

**Larynx.** In a paper devoted to the anatomy of the vocal chords B. Fränkel<sup>6</sup> discusses the historic transformation of the names relating to glottis and vocal chords. Galen introduced the name **Glottis** and used it for a structure in the body which he compared to the tongue of a musical instrument. Vesal and Fabricius ab Aquapendente designated by the same name interchangeably the vocal cleft and the lips surrounding it. The established usage of the word **Glottis** for vocal cleft and **Ligamenta glottis** for vocal chords is to be traced back to Morgagni (1718); the use of the term **Chorda vocalis** to Ferriar (1744). The term vocal chord, **Lig. vocale**, seems to have originated as late as the present century; it is first found in Liscovius (1814). The definition which Luschka gives for the word "Glottis" in his monograph on the larynx (Tübingen, 1871, p. 48) also seems to be noteworthy: "Since the two vocal chords together constitute the tongue apparatus (Glottis) necessary for the production of sound, the slit between them of course cannot be called Glottis but has necessarily to be distinguished from it as Rima Glottidis."

After Lauth (1835) had demonstrated the elastic membrane of the larynx and as constituents of it the elastic Ligg. thyreoarytaenoidea,

<sup>5</sup> Anatomie der Sinnesorgane, Leipzig 1887.

<sup>6</sup> Archiv für Laryngologie I, p. 1.

there arose a certain conflict in the use of the term. Some authors understood under *Chordae vocales* or *Ligg. vocalia* only the elastic *Ligg. thyreoarytaenoidea* but others, and among them especially laryngologists, designated by the term "vocal chord" the entire lip surrounding the glottis. Fränkel, who calls attention to this contradiction, remarks that it would perhaps have been better to have had a special name for the entire structure; yet later on he disregards the presentations of the anatomists and objects strongly to the application of the term vocal chord for the whole vocal structure.

A uniform and simplified nomenclature in this province is indispensable. The old designations of *Glottis vera* and *Glottis spuria*, as well as the clumsy designations of *Ligg. thyreoarytaenoidea superiora* and *inferiora* and others may on this occasion be thrown overboard without hesitation. The names accepted by the Commission are:

- Labium vocale** for the entire prismatic structure,
- Plica vocalis** for the fold of mucous membrane,
- Lig. vocale** for the elastic band,
- M. vocalis** for the muscle lying in the vocal lip,
- Glottis** for the vocal apparatus and
- Rima glottidis** for vocal slit.

The last two terms are, therefore, distinguished in a similar sense as *Os*, the mouth; and *Rima oris*, the oral slit.

The physicians apply the more convenient word "Taschenband" (pouchband) to the false vocal chords of the older anatomists. By its adoption we have:

- Plica ventricularis** — "Taschenfalte" [false vocal chords],
- Lig. ventriculare** — "Taschenband" [sup. thyreoarytenoid lig.],
- M. ventricularis** — "Taschenfaltensmuskel" [lower fibres of aryepiglottidean muscle].

Since the slit, surrounded by the two false vocal cords,—the *Glottis spuria* of older anatomists—forms the exit of the vestibulum, it is called the **Rima vestibuli**. The former *Mm. thyreoarytaenoidei* of the authors are now as follows:

- the *M. thyreoarytaenoideus internus*.....*M. vocalis*,
- the *M. thyreoarytaenoideus externus* (Henle).....
- M. thyreoarytaenoideus*,
- the *M. thyreoaryepiglotticus* (Henle) or
- the *M. thyreoarytaenoideus superior medialis* } *M. ventricularis*.
- (Krause)}

**Macula flava** designates the place of an elastic nodule situated within and at the anterior end of the *Lig. vocale*, which shining through the mucous membrane gives to the latter a yellowish tint. The nodule consists of a tubercle of elastic tissue which Luschka and Fränkel interpreted

as fibrous cartilage. With this *Macula flava* is not to be confused the *Macula lutea* which remains unnamed in our list, a name which B. Fränkel<sup>7</sup> gives to the reticular cartilage also shining through the mucous membrane at the posterior end of the *Lig. vocale* and which covers the anterior end of the *Proc. vocalis cart. arytaenoideae* (Kr.).

**Cartilago cuneiformis** [Wrisbergi]. The designation, Wrisberg's cartilage, has lately been objected to by Fränkel<sup>8</sup> because the cartilage was already known to Morgagni and Camper. After the cartilage has been for such a long time called after Wrisberg, a change of name appears to be inadvisable. Fränkel himself suggests leaving the name **Cart. cuneiformis**. As for the rest, I refer to the views expressed in the introduction in regard to personal names.

The **Lig. cricothyreoideum** [medium] is not essentially an independent ligament, but the anterior margin of that structure which many anatomists have designated as **Conus elasticus**. Therefore in preparations from the anterior side its deeper lateral margins are lost inferiorly without demonstrable outlines. The entire conus is brought into view, if after cutting away a part of the plate of the thyroid cartilage, one removes from the side the *Mm. cricoarytaenoideus lateralis*, *thyreoarytaenoideus* and *vocalis*. Then it appears as a yellowish oblique membrane which is connected behind with the *Cart. arytaenoidea*, in front with the *Cart. thyreoidea*, and inferiorly throughout with the *Cart. cricoidea*. The upper margin of the conus forms the *Lig. vocale*.

Since the entire *Tela submucosa* of the larynx is rich in elastic tissue, it is designated by Lauth, Tourtual, Luschka and others in its entirety as **Membrana elastica laryngis**. The **Conus elasticus** is the lower part of this *Membrana elastica* while the upper part included between the *Plica aryepiglottica* and the *Lig. ventriculare*, is called the **Membrana quadrangularis**. Of these names, the *Membrana quadrangularis* and **Conus elasticus** were not accepted by the Commission.<sup>9</sup>

<sup>7</sup> *Archiv für Laryngologie* 1894, Bd. I, p. 14.

<sup>8</sup> *Archiv für Laryngologie* Bd. II, Heft 2.

<sup>9</sup> **Conus elasticus** was included in the last printing of the BNA.—Ed.

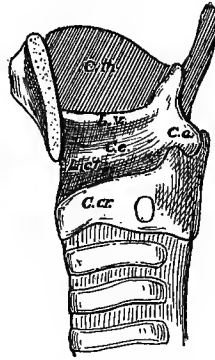


Fig. 7.

Larynx with prepared Conus elasticus. The upper margin of the Conus forms the Lig. vocale, the anterior margin forms the Lig. cricothyreoideum medium.

- C. th. Cart. thyreoidea,
- C. cr. Cart. cricoidea,
- C. a. Cartilago arytaenoidea,
- C. e. Conus elasticus,
- L. v. Lig. vocale,
- L. c. t. Lig. cricothyr. medium.

**Annulus urethralis vesicae.** If the bladder and urethra be opened lengthwise from in front the boundary of both structures is shown by a protruding annular thickening which we call the Annulus urethralis vesicae. The more powerful the musculature of the bladder and the more it is contracted, the more prominent becomes this ring shaped thickening. It surrounds the first part of the urethra; nevertheless we shall speak with the same right of an Annulus urethralis vesicae, as we speak of a Portio vaginalis uteri. It is formed by the strong muscle bundles, surrounding in winding loops the urethral opening, which we were hitherto accustomed to designate as *M. sphincter vesicae internus*. The Commission dropped this designation and the future must tell whether this name really can be discarded.

The transition from bladder to urethra is simplest in the female. Where the Trigonum Lieutaudi tapers toward the opening of the urethra, a number of small fan-like converging mucous folds pass over into the urethra. These are continued in a longitudinal ridge on the posterior wall of the latter,—the *Crista urethralis*. In the urethra these little folds are connected with each other by numerous delicate cross bridges and form in conjunction with the latter a very fine meshwork. The muscular ring lying at the transition from bladder to urethra gradually diminishes and blends with this network. On its inner surface, starting from the fundus of the bladder, there originates a longitudinal fibrous layer which reaches deeply into the urethra.



In the male the relations at the beginning of the urethra are complicated by the presence of the prostate. Nevertheless it is not difficult to compare the conditions in the beginning of the male urethra to that of the female. The Annulus urethralis vesicae and the underlying muscular ring as a rule are much more prominent in the male. Here also a system of longitudinal folds descends through the Orificium internum from the bladder into the urethra. The posterior group of these folds extends from the Trigonum Lieutaudi to the Colliculus seminalis where the small folds are attached (as Frenula colliculi of some anatomists). The middle fold usually is the strongest, and it, as the beginning of the Crista urethralis, effects the median connection of the Uvula vesicae with the Colliculus. At the entrance of the male urethra the little individual longitudinal folds are also connected by cross bridges. Very striking, in bladders with strong muscles, is the deep recess under the Annulus urethralis of that part of the urethra which is surrounded by the prostate. Near the Colliculus and somewhat above the same there is a well developed sinus not only on the anterior, but also on the posterior urethral wall.

Of the muscle layers in question the innermost longitudinal layer descends deeply into the prostatic part of the urethra like the tube of an inserted funnel. The prominent ridge of the annular muscle overlies the glandular body of the prostate, but is for the most part sharply separated from it. With its approach to the urethra the annular muscular ridge loses its definite outline and bundles branching from it penetrate the substance of the prostate and divide between its glandular lobules. In front, where the body of the gland is interrupted, leaf-like stratified muscle bundles directly join the mass of the annular muscle and surround the anterior side of the urethra.<sup>1</sup>

Prostata. By Corpus glandulare prostatae is meant the main glandular mass of the organ, which, as we know from Jarjvay, Luschka<sup>2</sup> and others, surrounds the beginning of the urethra like a clasp open

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<sup>1</sup>The work done by Jurié under Langer on the Stratum internum of the Tunica muscularis (Medic. Jahrbücher der k.k. Gesellschaft der Aertze in Wien. 1873, p. 427) shows that the longitudinal bundles composing this layer are most densely arranged at the apex of the bladder. The anterior longitudinal bundle of the bladder can be traced into the anterior wall of the urethra. On the posterior wall of the bladder the longitudinal bundles are said to be more scattered.

<sup>2</sup>Topographische Anatomie des Beckens, p. 296.

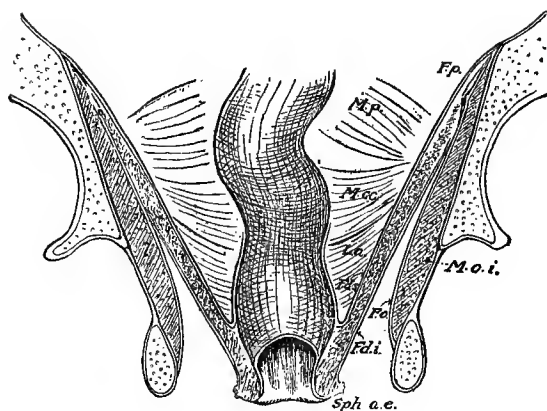


Fig. 8.

## Diaphragma pelvis.

L.a. Musc. levator ani.	F.d.i. Fascia diaphragm. inferior
M.c.c. Musc. coccygeus.	F.p. Fascia pelvis.
M.p. Musc. piriformis.	F.o. Fascia obturatoria.
M.o.i. Musc. obturator internus.	Sph. a.e. Sphincter ani externus.
F.d.s. Fascia diaphragm. superior.	

in front. The closing of this clasp to a ring is effected by muscular tissue which in its upper part consists of smooth fibres and in its lower part of striated fibres. Henle has designated this as well as the other muscular tissue surrounding the prostatic part of the urethra as Sphincter vesicae internus and externus. The Commission has not accepted these terms, but has retained only the *M. prostaticus*.

By *Isthmus prostatae* we understand the narrow strip of substance which is present between the entrance of the urethra and the Ductus ejaculatorii and which connects the two lateral lobes of the organ, which lobes are more prominent at their bases. The *Lobus medius* is a variation consisting of an independent prominence extending from the Isthmus.

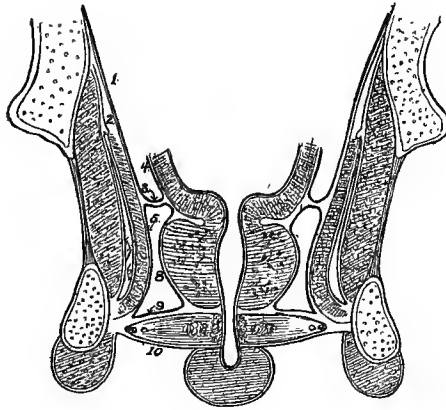


Fig. 9.

Anterior half of the pelvis. Frontal section through the Bladder, Prostate, Trigonum urogenitale and Bulbus corp. cav. urethrae.

- |                                    |   |
|------------------------------------|---|
| 1. Fascia pelvis.                  | 6. Fascia inferior diaphragmatis.         |
| 2. Arcus tendineus m. levatoris.   | 7. Fascia obturatoria.                    |
| 3. Arcus tendineus fasciae pelvis. | 8. Fascia prostatica.                     |
| 4. Fascia endopelvina.             | 9. Fascia superior trigoni urogenitalis.  |
| 5. Fascia superior diaphragmatis.  | 10. Fascia inferior trigoni urogenitalis. |

The levator ani muscles are here represented as attaching to the rami of the ischium. They should curve in the opposite direction following the margin of the prostate.—Ed.

The **Colliculus seminalis**, the *Caput gallinaginis* of the older anatomists, comprises, according to the usual description, the roundish prominence on which open the *Vesicula prostatica* and the *Ductus ejaculatorii* together with a longitudinal crest reaching into the urethra — or to retain the picture of the head of the snipe — the head and the bill. According to the description on page 133, the *Crista urethralis* extends from the *Uvula vesicae* to the lower prostatic parts of the urethra and the *Colliculus seminalis* blends with the *Crista* as a local enlargement.<sup>3</sup>

*Membranae deciduae.* We were requested by an eminent gynecologist to replace the expressions *Decidua reflexa* and *serotina*, so easily misinterpreted by beginners, by more suitable names. After some consideration the terms —

*Decidua capsularis* instead of *D. reflexa* and

*Decidua basalis* instead of *D. serotina*

were considered to be suitable for the purpose. In the balloting they were accepted by a great majority of the Commission. There was no reason to drop the name *Decidua vera*.

<sup>3</sup> According to Toldt the *Colliculus seminalis* and the *Crista urethralis* are parts of the *Caput gallinaginis*. His *Crista* therefore comprises only the lower part of ours.

**Cavum pelvis.** Our nomenclature differs from the customary one in several points. It is based on a strict separation of *Diaphragma pelvis* and *Trigonum urogenitale*, and as we believe, is easily applied.

The inferior termination of the pelvic cavity is effected by a muscular funnel, formed by the *M. levator ani* and *M. coccygeus*, which has been very appropriately designated by H. Meyer as **Diaphragma pelvis**. This muscular funnel is covered by two sheaths of fascia, the upper of which we call **Pars diaphragmatica fasciæ pelvis**, and the lower one our **Fascia inferior diaphragmatis pelvis**.

The relations of the *Fascia pelvis* are known. It consists of a lateral portion covering the *M. levator ani* and also partly the *M. obturator internus*, and of another portion reaching to the pelvic viscera. Luschka has designated these two portions as *Pars parietalis* and *Pars visceralis*. At the point where the one part separates from the other, there lies the *Arcus tendineus* of the fascia. This anteriorly is continued into the *Lig. puboprostaticum laterale* and posteriorly joins the *Spina ischii*. The words "parietalis" and "visceralis" are applied only to serous membranes; besides we prefer to speak of a *Pars diaphragmatica* and a *Pars endopelvina* of the pelvic fascia. The latter term was originated by Langer and is generally used by the present Viennese school.

The principal muscle of the pelvic diaphragm, the *M. levator ani*, originates from the posterior surface of the pubis and from a tendinous arch interwoven in the *Fascia obturatoria*; both limbs of the arch reach to the upper pelvic margin (the posterior up to the *Linea terminalis*). This arch is the **Arcus tendineus musculi levatoris ani**. The curvature of the arch reaches in extreme cases almost up to the level of the *Canalis obturatorius*, in other cases it extends deeply down to the lateral wall of the pelvis.\*

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\* The presence of the *Arcus tendineus musculi levatoris*, its independence from the pelvic fascia and the ascent of its posterior limb up to the *Linea arcuata* of the ilium, I have discussed in "Braune and His *Leitfaden für die Praeparanten der anatomischen Anstalt in Leipzig 1883*" (p. 32). When we demonstrate in our anatomical laboratory the Levator, in any asymmetrically divided pelvis, these conditions in each preparation are clearly brought into view. Recently Kollmann considers the Levator ani as originating directly from the *Linea arcuata*. A thin continuation of the *Fascia obturatoria* reaches from the *Arcus tend. musculi* to the *Linea arcuata* which continuation can be interpreted morphologically but not physiologically as the tendon of the Levator. The arch of the tendon may be shortened by the ascent of the muscle but it never can be absent since under all circumstances there is necessary an entrance space for the N. and Vasa obturatoria. Moreover Luschka states (*Topograph. anatomie des Beckens, Tübingen 1864, p. 145*) that the Levator ani originates along an exquisitely semilunar line of the pelvic fascia and that a direct continuation with the *Arcus tendineus* of the fascia "certainly does not regularly exist," since this strip as a rule can be detached from the muscle without injuring it.

Through the opening of the arch one sees after removal of the covering fascia a part of the *M. obturator internus*. The *Arcus tendineus musculi* has nothing to do with the *Fascia pelvis*. It is crossed by the *Arcus tendineus fasciae* and each is easily detached from the other. Some muscle bundles of the *M. levator ani* may originate from the *Arcus tendineus fascia*, especially from its anterior part, but this is more the exception than the rule.

The *M. coccygeus*, arising from the *Spina ischii* and the *Lig. sacrospinosum*, is often widely covered for some distance by the posterior margin of the *M. levator*,— a relation explainable from the higher origin of the latter muscle.

While the funnel of the pelvic diaphragm is posteriorly entirely closed by its insertion at the sacrum and coccyx, and by the median fibre crossings between the anus and the apex of the sacrum, there is in its anterior part, lying behind the pubic symphysis, a broad space or slit in which the *Prostata* lies in the male and the urethra and vagina in the female. The muscle shows in its anterior part some further noteworthy characteristics, namely: the line of origin of the thin muscle plate forms, on either side behind the pubic bone, an arch surrounding the origin of the *Obturator*. The thin free borders of the two *Levators* are not converging, but diverging from each other and are directed downwards. Hence the medial part of the muscle passes in a curved plane around and adjoining the *Prostata* in the male. The arching muscular plate lies directly above the *Trigonum urogenitale* which will be spoken of presently.

The discussion of the *M. levator ani* has gained in most recent times a heightened interest through the comparative anatomical works of Kollmann and of Toldt's assistant, Lartschneider.<sup>5</sup> From their work it is established that the *M. levator ani* of man corresponds to the *Mm. flexores caudae pubococcygeus* and *ileococcygeus* of mammals, and that one can trace its gradual reduction in the transition from the caudate monkeys to the anthropoids. The insertion of the most dorsal part of the muscle into the coccyx shows moreover the *Levator ani* still in man

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<sup>5</sup> *Verhandlungen der Anatomischen Gesellschaft in Strassburg, 1894, p. 198, and Sitzungsbericht der k.k. Akademie der Wissenschaften in Wien 1894, Nr. XXIV, p. 234.*

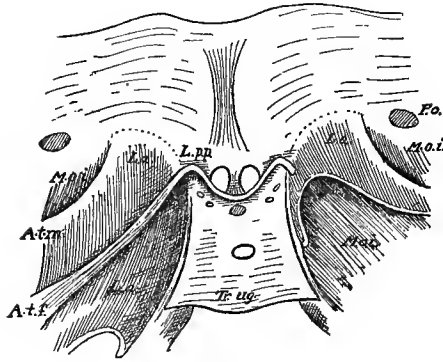


Fig. 10.

Anterior wall of the pelvis prepared from the posterior side. L. p. p. Ligamenta puboprostatica. The two Ligg. lateralia curve upward, the medium, curves downward. On the left the prolongation of the Lig. puboprostatica laterale of the Arcus tendineus fasciae (A.t.f.) is laid bare. On the right it is cut off. On the right the curved line of origin of the levator ani is shown and for some distance follows the margin of the Trigonum urogenitale (Tr.ug.). On the left is shown the Arcus tend. m. levatoris (A.t.m.). M.o.i. Musc. obturator internus, which on either side is only partially visible.

as a flexor caudae. Exceptionally there exists an independent small muscle which extends from the iliac portion of the Linea terminalis to the lateral margin of the sacrum and which overlies medially the M. coccygeus. I give a sketch of such an accessory M. iliosacralis, which I discovered not long ago in the dissecting room.

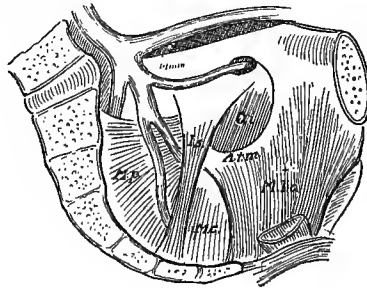


Fig. 11.

Lateral pelvic wall with the interior view of the Diaphragma pelvis.

M. l. a. M. levator ani.

A. t. m. Arcus tendin. m. levatoris.

M. c. Musc. coccygeus.

O. i. M. obturator int.

M. p. Musc. piriformis.

I. s. Is a muscular band descending independently from the ilium to the sacrum, which partially overlaps the M. coccygeus.

The **Trigonum urogenitale**<sup>5a</sup> (Diaphragma urogenitale of Henle) stretches as a dense plate, in the form of an incomplete triangle, trans-

<sup>5a</sup> Diaphragma urogenitale was later substituted for Trigonum urogenitale. —Ed.

versely across the pubic arch and leaves at its upper margin only, just below the *Lig. arcuatum*, a space for the passage of the *Vena dorsalis penis* (sive *clitoridis*). The *Trigonum* is fully demonstrated from below in the male if one has smoothly removed the *Corpora cavernosa penis* and the *Bulbus urethrae*. Its framework consists of two strong fascial plates,—the *Fasciae trigoni urogenitalis superior et inferior*. These are fused together at their upper and lower margins and enclose a flat space. The *Ligamentum transversum pelvis* is formed by the junction of their upper margins. The lower junction lies at the freely protruding margin of the *Trigonum* and immediately above the *M. transversus perinei superficialis*. The space between the two plates of fasciae is traversed by the membranous urethra with its *M. sphincter urethrae membranaceae*. In this space lie the *M. transversus profundus*, Cowper's glands and numerous venous plexuses. Along the lateral margins run the *N. dorsalis penis* and the *Art. penis*.

Above the *Trigonum urogenitale* there lies in the male the *Prostata*, the connective tissue capsule of which, *Fascia prostatica*, unites below with the *Fascia trig. urogen. superior*, and above with the *Pars endopelvina fasciae pelvis*.

The statements of the textbooks concerning the *Fascia perinei propria* are so different from each other, and so hard to understand by the student, that we preferred to entirely omit the name. It is usually understood that the deep perineal fascia consists of a posterior single plate and an anterior divided one. The posterior single plate is our *Fascia inferior diaphragmatis pelvis*; the anterior divided one consists of two *Fasciae trigoni urogenitalis*. But the suggested presentation is in no way a thorough one: Toldt,<sup>6</sup> for instance, counts the upper fascia of the *Trigonum*, and therefore naturally also the *Fascia prostatica*, as part of the *F. pelvis*; whereas Gegenbauer considers the region of the deep perineal fascia as extending beyond the *Prostata* up to the *Ligamenta puboprostatica*. The principle "Divide et impera" holds good also for good descriptions, and from my experience the students very soon come to a clear conception of the relative conditions through a separate study of the *Trigonum urogenitale*.

The conception and nomenclature approved of by the Commission differs only in immaterial points from those which colleagues Toldt and Zuckerkandl had suggested to the Commission.

"*Diaphragma rectale*

*M. levator ani* and *M. coccygeus*.

*Diaphragma urogenitale* *M. transversus perinei profundus*.

1. *Fascia perinei superficialis*.
2. *Fascia penis*.

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<sup>6</sup> *Lehrbuch*, p. 405.

3. Fascia superior diaphragmatis rectalis.
4. Fascia inferior diaphragmatis rectalis.
5. Fascia superior diaphragmatis urogenitalis [Ligamentum ischio-prostaticum].
6. Fascia inferior diaphragmatis urogenitalis [Lig. triangulare urethrae].
7. Fascia obturatoria.  
Pars supradiaphragmatica and  
Pars infradiaphragmatica.

The Pars supradiaphragmatica forms with the F. superior diaphragmatis, the F. pelvis parietalis; the Pars infradiaphragmatis with the F. inferior diaphragmatis the connective tissue covering of the Cavum ischiorectale.

8. Fascia endopelvina (Langer). To it belongs the Ligg. puboprostatica and the Fascia pelvis visceralis.
9. Lig. transversum pelvis [Winslowi].
10. Arcus tendineus obturatorius.

The Fascia (or the Septum) rectovesicalis belongs to the Prostata and not to the perineal fasciae."

We avoided, differing from Henle, the term *Diaphragma urogenitale*<sup>7</sup> because the term does not fit this scarcely movable plate. The *Diaphragma pelvis* like the diaphragma of the trunk should be an apparatus which helps to accomplish the contraction of the contained inner space in abdominal pressure. The *M. transversus perin. prof.* cannot according to its entire mode of action do anything in this respect.

**Peritoneum.** As regards the peritoneum some few names require a special discussion.

*Membrana*<sup>8</sup> *mesenterii propria* is the connective tissue layer left after removal of both peritoneal layers, which is the carrier of the blood and lymph vessels, the lymph-glands, the veins and adipose tissue.<sup>9</sup>

*Mesenterium commune* is the mesentery of the embryonic umbilical loop of the intestine which latter surrounds a part of the duodenum and the Colon ascendens and transversum.<sup>1</sup>

The *Bursa omentalis* is divided into the *Vestibulum*, the *Recessus superior* and the *Recessus inferior*. From the foramen of Winslow on, a narrow passage extends medianward below the *Processus caudatus* of Spiegel's lobe and over the *Pars superior duodeni* and beyond the head

<sup>7</sup> This term was later accepted by the Commission.—Ed.

<sup>8</sup> This was changed to *Lamina* in the final list.—Ed.

<sup>9</sup> Toldt (5 Aufl. von Langer-Toldt) *Anatomie*, Wien 1893, p. 321.

<sup>1</sup> Toldt, *Bau and Wachstumsverh. des Gekröses, etc.*, Wien 1879, and His, *Anatomie menschlicher Embryonen III*, p. 32 ff.



of the Pancreas. This passage is the **Vestibulum bursae omentalis**, which is bounded anteriorly by the **Lig. hepatoduodenale**. The vessels of the liver, the **V. portae**, **A. hepatica** and **D. coledochus**, pass below the floor of the **Vestibulum** posterior to the head of the Pancreas and from the posterior abdominal wall upward between the **Laminae** of the **Lig. hepatoduodenale**. The **Recessus superior** extends from the **Vestibulum** behind the **Porta hepatis** and ascends along the posterior wall of **Spiegel's lobe**, in front of the diaphragm and partly anterior to the aorta and the lower end of the **Oesophagus**.<sup>2</sup> From the place where the **Tuberculum omentale pancreatis** overhangs the lesser curvature of the stomach the two upper branches of the **A. coeliaca**, viz. the **A. coronaria ventriculi sinistra** and the **A. hepatica**, diverge and the former especially pushes in front of itself the posterior wall of the **Omentum**. There is thus formed a sickle-shaped protruding fold,—the **Plica gastropancreatica**. Through the roundish aperture narrowed by this fold the **Vestibulum** of the omentum is joined to the **Recessus inferior**, which descends in front of the body of the pancreas and behind the stomach. The portion of this space extending farthest toward the left is the **Recessus lienalis**. The **Processus papillaris** extends into the aperture of the **Recessus inferior** from above and narrows its entrance. **Huschke** <sup>3</sup> designated the **Vestibulum** of the omentum including the **Recessus superior** as **Bursa omenti minoris**, the inferior space as **Bursa omenti majoris**. This anatomist calls the connecting opening **Foramen omenti majoris** and the limiting fold **Septum bursarum sive Lig. gastropancreaticum**. I myself had suggested for it the name **Diaphragma omentale**.

The **Omentum minus** in its different parts is not equally developed. A superior sickle shaped strip distinguished by its aponeurotic like structure, extends from the **cardia** and the ventral part of the **oesophagus** to the **Fossa sagittalis sinistra posterior**. This is designated by **Langer-Toldt**, **Pars condensata**.<sup>4</sup> By these authors the thin flaccid middle piece of the lesser omentum, which is attached at the lesser curvature of the stomach, is called **Pars flaccida**. To the right this **Pars flaccida** blends without sharply defined outlines into the **Lig. hepatoduodenale**.

**Ligamentum falciforme hepatis** was accepted by the Commission instead of **Lig. suspensorium hepatis** in order to definitely remove the erroneous interpretation contained in the latter term. The name is not

<sup>2</sup> His Ueber Praeparate zum Situs viscerum. This Archive 1878, p. 73 ff, and Taf, II-III.

<sup>3</sup> **Huschke**, in the revision of **Sömmering's Lehre von den Eingeweiden**, Leipzig 1844, p. 202 ff.

<sup>4</sup> **Langer-Toldt**, l. c., p. 333.

new, but has been used by French authors. (*Ligamentum falciforme* or *grande faux du foie*; see Cruveilhier, Sappey, Testut.)<sup>5</sup>

*Plica vesicalis transversa* [Waldeyer] is the constant peritoneal fold which runs obliquely over the empty bladder (Absth.)

**Parametrium.** The expression was accepted in the interest of the physicians who speak of a parametritis. By Parametrium is designated the loose tissue which surrounds the prominent vessel plexuses lying beside the uterus and the upper part of the vagina. It occupies the triangular space lateral from the vault of the vagina, the *Collum uteri*, and the *Corpus uteri*. Its upper end extends between the converging layers of the *Lig. latum uteri*.

**Bursa ovarii and Fossa ovarica [Claudii].** Claudius,<sup>6</sup> in a short paper, "Ueber die Lage des Uterus," based on eighty-eight post-mortem investigations, contended very energetically that the uterus, including its wide uterine ligaments and the ovaries, lies close to the posterior upper pelvic wall like the lungs to the costal wall. The ovary is said to lie horizontally or with a slightly inclined axis in the shallow groove of the *Fossa ovarii*, which latter is said to be sunk in the adipose connective tissue at the upper margin of the *M. piriformis* and in front of the point of exit of the *Vasa glutea sup.* The anterior surface of the *Ovarium* is said to be entirely separated from the intestines by the *Ala vesperilionis*. According to Claudius the Tube follows the upper margin of the ovary and then turns backward and downward so that the *Infundibulum* lies in the lateral half of the *Fossa ovarii* and behind the ovary. According to Claudius anteverted and anteflexed uteri are strictly pathological conditions. The latter statement has since proven to be untenable as is shown through the investigations of gynecologists and anatomists, concerning which one may especially compare the comprehensive work by K. Bardeleben.<sup>7</sup> Among the later investigators,—gynecologists and anatomists,<sup>8</sup> there no longer exists any real differences in reference to the ovaries. The ovaries lie on the lateral wall of the pelvis, immediately below the *Linea arcuata*; one surface is directed medianward, the other lateralward, the attached margin forward and the free backward. The longitudinal axis of the ovary is almost parallel to the axis of the body. In asymmetric positions of the uterus the ovary takes an oblique position. The entering vessels of the ovary and the

<sup>5</sup> Sappey makes a distinction between his *grande faux* and the *Lig. suspensorium*; the former blends with the latter at the margin of the liver. The *petites faux* of Sappey are the three *Ligg. umbilicalia*.

<sup>6</sup> *Zeitschrift für ration. Medicin*, 1865. Bd. XXIII, p. 248 ff.

<sup>7</sup> *Berichte der 2. Versammlung der anat. Gesellschaft* 1888, p. 45 ff.

<sup>8</sup> *His. Ueber die Lage der weiblichen Eierstöcke*. This *Archive* 1881, p. 398. *Waldeyer, Anat. Anzeiger* 1886, p. 44.

surrounding fold form for it, as well as for the tubes, a kind of suspending ligament,— the **Lig. suspensorium ovari** of the Commission.

Since the statements of Claudius concerning the position of the ovary proved to be untenable we are no longer justified in speaking of a *Fossa ovarica* [Claudii]. The great majority of the text-books avoid this term. Waldeyer,<sup>9</sup> who still uses it, is in accord with the new standpoint, defined above, as regards his conception of the position of the ovary. The *Fossa ovarica* referred to by him, therefore, cannot coincide as to location and direction with the *Fossa* of Claudius.

The **Bursa ovarii** is not to be confused with the *Fossa ovarica*, which latter is described as a deepening in the fat of the pelvic wall. By the former name, we understand an intraperitoneally situated pouch. Thus, e. g. Rauber<sup>1</sup> gives the following description: "The further attachment of the ovary is caused by the peritoneum which receives the ovary in a shallow pouch,— the **Bursa ovarica**, which is situated in the posterior lamella of the frontally placed **Lig. latum uteri** lying in the posterior part of the lateral pelvic wall." I for my part do not accept the frontal position of the **Lig. uteri latum** here upheld, since it is wider than the pelvic cavity and is attached to the latter with its lateral portions in a more or less sagittal position, while its middle part follows the movements of the uterus, and will, e. g. in anteversion of the latter, approach a horizontal position. In spite of this different conception of the position of the **Lig. latum**, I consider the definition given by Rauber of the **Bursa ovarii** as a peritoneal fold to be very appropriate. This **Bursa** is to be understood as a slit like space which surrounds the ovary lateralward, upward, forward, backward and also partly medianward. The lateral slit is caused by the attachment of the **Mesovarium** at the anterior margin of the ovary. The slit like spaces in front of, above, and behind the ovary are caused by the loop like manner in which the tube surrounds the organ. But since the latter, as I at that time expressed it, may overlie the ovary at its medial surface, like a pair of curtains, the region of the **Bursa** is correspondingly enlarged (Fig. 12).

<sup>9</sup> Waldeyer, l. c. p. 44.

<sup>1</sup> Rauber, *Lehrbuch der Anatomie*. Leipzig 1892, II, p. 673.

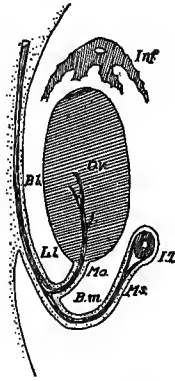


Fig. 12.

Schematic sketch for the explanation of the Bursa ovarii.

Ov. Ovarium.

I. T. Isthmus Tubae.

Inf. Infundibulum.

Ll. Lig. latum uteri.

Ms. Mesosalpinx.

Mo. Mesovarium.

Bl. Bursa ovarii, pars lateralis.

B. m. Bursa ovarii, pars medialis.

Both parts are separated from each other by the Mesovarium.

### Angiology.

**Cor.** If we wish to connect the morphologic description of the heart with its development we must start with the initial loop like condition of the muscular tube. The two limbs of the loop cross each other and the one afferent limb is placed behind the other efferent. The former descends toward the left, the latter ascends toward the left. The posterior limb of the heart contains the anlage of the atria and the left ventricle, the anterior that of the right ventricle and that of the bulb of the aorta. The bulb later on becomes divided into the aorta and the pulmonary artery. A ring shaped Sulcus interventricularis early surrounds the embryonic heart tube and on the inner surface there corresponds to it a protruding fold of the wall,—the muscular Septum interventriculare. This primary ring like sulcus is preserved in the fully developed heart. It starts as the Sulcus interventricularis anterior, extends under the A. coronaria sinistra and behind the root of the aorta into the posterior interventricular groove and ends near the apex of the heart closing the ring. The muscular Septum interventriculare of the heart also forms a closed ring, which passes by the Canalis auricularis at the right, and by the bulb of the aorta at the left. That part of the Septum musculare ending at the entrance of the aorta can be traced throughout life as a distinctly protruding thickening,—the **Limbus**

**marginalis.** The upper arch of the Septum surrounding the auricular canal on its right side is preserved in the fully developed heart as a strong muscular thickening,—the **Crista supraventricularis**, which separates the Ostium venosum dextrum from the Conus arteriosus. On the left side there lies no muscular intermediate mass between the two Ostia.

The division of the two circulatory courses is effected, as we know from the recent ontogenetic investigations, as follows: The Foramen interventriculare left open in the primary septum is invaded anteriorly by the Septum aorticum, posteriorly by the Septum intermedium. The latter descends from the atrium and the auricular canal; both structures fusing with each other and the Septum musculare of the ventricles. One half of the anlage of the atrium, belonging originally to the left heart, is allotted to the right heart as an afferent canal. On the other hand a part of the right ventricle lying beyond the Septum musculare is added to the left ventricle to form the entrance of the aorta. The lowest part of the Septum aorticum is the **Pars membranacea septi ventriculorum.**

For the reception of the blood flowing to the heart the **Sinus venarum** (*Sinus reuniens*) serves as an original independent receptacle. Later on it becomes so intimately fused with the right atrium that it appears as a part of the latter. But in the fully developed heart the line of division between the two is well defined externally as well as internally. Externally it shows as a slanting arch like groove which begins below the inferior vena cava and ends in front of the superior. This groove is the **Sulcus terminalis.** Internally there corresponds with it a slanting muscular ridge,—the **Crista terminalis** where the pectinate muscles end. The pectinate muscles do not extend into the venous sinus. To the atrium, in a restricted sense, belongs also a projection of the posterior wall, which is inserted between the inferior vena cava and the coronary sulcus. This I have termed the posterior auricular lobe,—**Appendix auricularis posterior.** It lies below the Valvula Eustachii and to the right of the Valvula Thebesii.<sup>2</sup>

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<sup>2</sup>In regard to these different ontogenetically explainable details of the fully developed human heart, I may refer to my Beiträge zur Anatomie des menschlichen Herzens. Leipzig 1886, with three tables. The above figures 13 and 14 are copied from that work.



Fig. 13.

Posterior half of human heart, hardened in chromic acid. The figure shows the demarcation of the Sinus venarum by the Crista terminalis (C.) and the junction of the Septum intermedium descending from the atrium with the Septum musculare interventriculare.

Of the parts of the developed heart designated by special names in this ontogenetic review, the Sinus venarum, the Sulcus and the Crista terminalis and the Crista supraventricularis are included in the list.

Vena obliqua atrii sinistri designated by the English as Marshall's vein<sup>3</sup> is a degenerated remnant of the embryonic V. cava sup. sinistra, which sometimes persists as a thin ligament, — the Lig. V. cavae sinistrae.

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<sup>3</sup> Quain's Anatomy, 10 Edit., by Schaefer and Thane., Vol. II, Part II, p. 510.

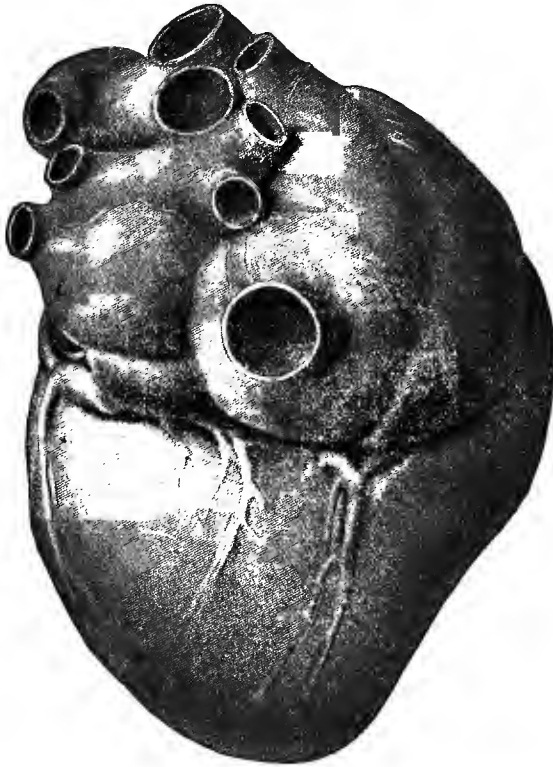


Fig. 14.

Posterior view of an injected human heart. The figure shows to the right Sulcus terminalis (S) which terminates the venous sac, and below the V. cava inferior, the Appendix auricularis (A); on the left atrium is seen the Lig. v. cavae sinistreae (L).

**Trigona fibrosa** are the *Noduli valvulae mitralis* of Henle.

**Vena jugularis externa**, **Vena jugularis anterior**, **Vena mediana colli** and **Arcus venosus juguli**. On account of the variable relations of the superficial jugular veins it is hard to picture an absolutely typical condition.<sup>4</sup> The **V. jugularis externa** is the trunk, originating from the **V. auricularis** and **V. occipitalis**, which is connected by a short intermediate branch with the system of facial veins. It descends closely under the **platysma**, crosses the **M. sternocleidomastoideus** at an acute angle, extends deeply behind its **Cap. clavulare**, and usually opens into the **V. subclavia**. A paired vein lying in front of the **M. sternocleidomastoideus**, which is often designated as the **V. subcutanea colli**, we call

<sup>4</sup> Here we may refer to the illustrations by Thane in Quain's Anatomy, 10 Edit., Vol. II, Part II, p. 514.

the **V. jugularis anterior**. Above it joins with the system of the **V. facialis anterior** and receives the **Vena mentalis**; below it generally opens in the **V. jugularis externa** and runs above or below the **M. sternocleidomastoideus**. The term **V. mediana colli** was used by the older and later anatomists as synonymous with the **V. jugularis anterior**.<sup>5</sup> According to the conception of the Commission the term **V. mediana colli** is to be reserved for the somewhat seldom variation of an unpaired trunk.

**Arcus venosus juguli** is the transverse union of the **Vv. jugulares anteriores**, which is found sometimes in the jugular fossa and sometimes a little higher up.

**Vena auricularis posterior**. This vein empties into the **V. jugularis externa** and thus departs from the homonymous artery; nevertheless it retains its name (Kr.).

**Venae cutaneae brachii et antibrachii**. We have tried to adapt the names of the cutaneous veins to the cutaneous nerves and to make superfluous the old, and in truth very inappropriate terms, **V. cephalica** and **V. basilica**. The latter names, the etymology of which is entirely mythical, are confused time and again and are always a source of difficulty to the student. But we are well aware that time alone can decide on the advisability of this change of names.

**Vv. parumbilicales**. The parumbilical veins, designated partly as Sappey's and partly as Burow's veins, remained up to the most recent times subjects of discussion, and they need a detailed explanation. At first I may give the description which Braune gives in his work on Sappey's veins (l. c. p. 63 ff.). If the **Linea alba** be incised upwards from the umbilicus there is found a fibrous canal (Richet's umbilical canal), in which, in addition to the umbilical vein, there runs a whole bundle of small venous vessels. These are designated by Braune **Vv. parumbilicales** [Sappey]. They comprise four or five small trunks which connect with cutaneous veins and Burow's veins, which latter are soon to be mentioned. Among these Sappey's veins, one usually excels by its size; this one leads into the portal system of the liver and communicates with the left **V. epigastrica superior** through the **Vena parumbilicalis xiphoidea**. Its valves are turned toward the liver. Braune leaves its relation to the liver still questionable, but thinks that an opening into the umbilical vein generally does not occur, nor has it an opening into the **Sinus venae portae**. Only once was it found to empty into the umbilical vein. Braune points to his further investigations concerning the portal system. These investigations he was unable to publish, but in our institution there exist unpublished drawings intended for the work. These

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<sup>5</sup> It is thus designated by Rauber, *Anatomie* 1893, Vol. II, p. 181.



show in the most beautiful manner the entrance of several parumbilical veins directly into the Lobus quadratus and into the Lobus sinister.<sup>6</sup>

The parumbilical veins described by Braune form only a part of the branches found by Sappey and designated as Veines portes accessoires. Sappey (whom I cite after the paper of 1883, *Journal de l'Anatomie et de la Physiol.* XIX, p. 517), distinguishes two groups of small venous branches which connect the system of portal veins with the system of body veins. One group includes vessels which run from the veins of the diaphragm, through between the lamellae of the Lig. suspensorium, to the convex surface of the liver and pass into the latter. The second group consists of veins which run alongside the Lig. teres. At their origin they are in connection with the Vv. epigastricae inferiores and the cutaneous veins of the abdomen. The latter group forms the veins called by Braune after Sappey parumbilical veins.

Sappey himself and Wertheimer are of the opinion that the V. umbilicalis becomes entirely obliterated. Lately Baumgarten,<sup>7</sup> as it seems with forceful reasons, opposes this hypothesis. The question as to the closing or the remaining open of the umbilical vein is immaterial for our nomenclature; the parumbilical veins in any case remain as independent structures.

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<sup>6</sup> There is found among the papers left by Braune a dissertation "Ueber die sogenannten accessorischen Pfortadern-system" by his assistant, Dr. G. Schütz (Berlin), completed in 1880, but not printed. In this paper it is shown that in a dissertation in 1748 by Thilo, working under Gunz in Leipzig, there are mentioned veins which are contained in the Ligg. coronarium and suspensorium which are connected with the portal system. Later, 1842, E. H. Weber described accessory portal veins in the Lig. hepatoduodenale.

<sup>7</sup> Ueber die Navelvenen des Menschen. Braunschweig 1891.

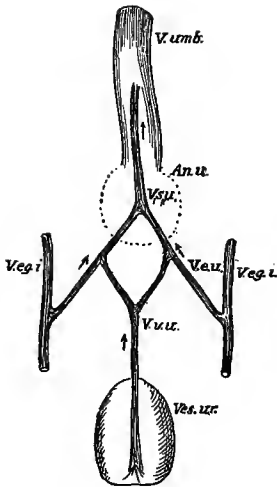


Fig. 15.

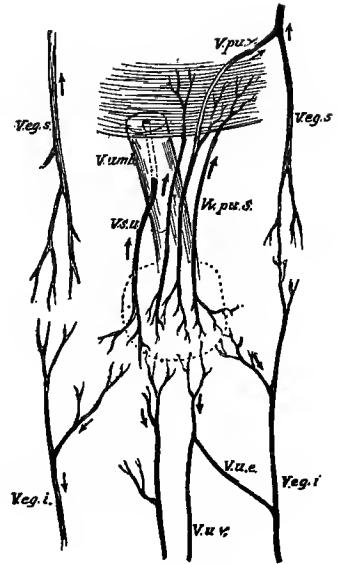


Fig. 16.

Fig. 15.

Representation of the system of veins of the abdominal wall as described by Burow in the human foetus. (J. Müller's *Archiv* 1838). I have introduced special names for the divisions of the system to make easier the explanation and without claim to permanent adoption. What Braune calls Burow's veins are the Vv. umbilicovesicales. Burow's vein of Baumgarten is the V. supraumbilicalis. Vu. Vena umbilicalis. An.u. Annulus umbilicalis dotted. V.s.u. Vena supraumbilicalis. V.e.g.i. V. epigastrica inferior. V.e.u. Vena epigastricoumbilicalis. V.v.u. V. vesicae umbilicalis. Ves.u. Ves. urinaria.

Fig. 16.

Scheme of the veins of the abdominal wall and of Sappey's veins in the adult; constructed after Braune's and partly after Baumgarten's data.

- V.u. Vena umbilicalis obliterated with the exception of a small remaining canal.
- V.s.u. Vena supraumbilicalis.
- Vv.pu.S. Sappey's parumbilical veins.
- V.e.g.i. Vena epigastrica inferior.
- V. pu. x. Vena parumbilicalis xiphoida (Braune) anastomosing with the V. epigastrica superior. V.e.g.s.
- V.u.v. Venae umbilicovesicales.
- V.u.e. Vena umbilicoepigastrica.

Much more complicated and uncertain than the question of Sappey's veins becomes the question of the so-called Burow's veins. Burow's short note reads:<sup>8</sup>

"The Vena epigastrica of the human foetus gives off before it quite reaches the level of the umbilicus a branch running inward, which joining

<sup>8</sup> This *Archive* 1838, p. 44.

a corresponding branch from the other side, forms a trunk which is closely adjacent to the V. umbilicalis as far as it runs in the abdominal cavity, and empties into the V. umbilicalis shortly before its entrance into the liver." Burow's drawing shows the two vessels coming from the Vv. epigastricae as separated below the umbilicus, and from this point on are anastomosed to form a common small trunk accompanying the V. umbilicalis. But alongside the bladder and the urachus, rising from the uterine and pelvic plexuses there comes an unpaired vein to the umbilicus which after a forked division anastomoses with the two little trunks coming from the sides. Therefore Burow's system consists of (see Fig. 15):

1. two little trunks connected with the Vv. epigastricae, which may be designated as **Vv. epigastricoumbilicales**.

2. a little trunk following the bladder and the urachus, or a **V. vesicoumbilicalis**.

3. A junction ring near the umbilicus, — the **Circulus anastomoticus**.

4. an unpaired collecting vessel lying above the umbilicus and emptying into the V. umbilicalis,— the **V. supraumbilicalis** [impar].

Hence it follows that the term Burow's veins is ambiguous and by this name various authors understood different things.

Baumgarten understands by Burow's veins an unpaired trunk ascending above the umbilicus and opening into the V. umbilicalis. Baumgarten demonstrated this trunk as constantly occurring in children soon after birth; he surmises that the same always persists in the adult and that it may pathologically widen in cirrhosis of the liver.

Braune differs in his description of these conditions in that he speaks of Burow's veins in the plural. What Braune designates by this name are veins below the umbilicus following the urachus and anastomosing with the Vv. epigastricae. Braune was always able to demonstrate one or more such little trunks in the adult; in one case a stronger left one and a weaker right one. These trunklets can be injected only downward and the same holds good for the trunklets to the Vv. epigastricae. Braune was never able to find in the adult a closed venous ring on the inner side of the umbilicus, but he succeeded repeatedly in filling from subcutaneous plexuses in the neighborhood of the umbilicus, the veins leading downward to the bladder and the Vv. epigastricae, and upwards the parumbilical veins.

As matters thus stand it is better to drop the name of Burow's veins and to speak of **Vv. umbilicovesicales** and **Vv. umbilicoepigastricae**, whereby the significance of these names shall also immediately designate the direction of the blood current. For the vein of Burow's system going upward, I should like to suggest the name **V. supraumbilicalis**.

This V. supraumbilicalis accordingly runs up to its junction with the

parumbilical veins of Sappey. Of the latter, according to Sappey and Braune, one excels by a more considerable size. While Sappey denies any relation of his veins to the original *V. umbilicalis*, Baumgarten contends that the strongest of Sappey's veins (the *V. parumbilicalis major* as one might term it in contradistinction to the *minores*) is always to be designated as Burow's vein, i.e., as a remnant of the *V. umbilicalis*. This latter contention does not seem to me to be proven by Baumgarten. Even then, if one will accept the, not at all obvious, hypothesis of Baumgarten that "Burow's Vein" may occasionally have a high junction reaching up to the liver, it nevertheless remains incomprehensible how a channel posteriorly directed to the *V. umbilicalis* could open anywhere else but into the *Sinus venae portae*. If I summarize the points important for the nomenclature and established by observation in the adult then there exists:

ABOVE THE UMBILICUS:

1. *Vv. parumbilicales* [Sappeyi] which ascend from the umbilical region to the liver and penetrate into its substance. Accompanying these *Vv. parumbilicales* there are:

2. *V. supraumbilicalis* (Baumgarten's, Burow's, vein) which opens into the upper end of the *V. umbilicalis*. (Baumgarten designates as intercalated veins "Schaltvenen" some trunklets of the abdominal veins opening independently of the *V. supraumbilicalis*). Further there are present:

BELOW THE UMBILICUS:

3. The *Vv. umbilicovesicales* (Braune's, Burow's veins) one or more which open into the vesical or pelvic plexuses. With these trunklets anastomose at acute angles the

4. *Vv. umbilicoepigastricae* which open on both sides into the *Vv. epigastricae inferiores profundae*.

The vessels lying above the umbilicus carry the blood upward to the liver or to the *V. epigastrica superior sinistra* (Braune). The veins lying below the umbilicus carry the blood downward into the pelvic plexus or into the *Vv. epigastricae*. The parumbilical veins as well as the veins of groups 3 and 4 originate in cutaneous venous plexuses in the umbilical region.

For obvious reasons out of all the vessels brought under discussion, only the *Vv. parumbilicales* [Sappeyi] were taken into our lists in the sense of Braune. We could not decide to take up the *Venae portae accessoriae superiores* of Sappey. In my opinion it is necessary first of all to have clearer proof done by finer injections of their relations to the lobules of the liver.

### Neurology.

The establishment of a uniform nomenclature for neurology and especially for the chapter on the central nervous system has been attended with special difficulties. Here for decades the anatomists have not been the only masters of the house. Physiologists and pathologists, instigated by their own needs and to a great extent supported by their own methods, have created special brain anatomies. The special literature, comprehensible only to a few experts, and the encephalology of specialists were sometimes only slightly in contact with each other. This drawback has been lessened more and more during recent years and a great service has been done by authors who have taken pains through clear expositions to bring nearer to a general understanding the results of the original investigators,—Meynert, Gudden, Flechsig, Forel and others. In other respects we have arrived at a definite turning point in encephalology. On the one hand, ontogenetic investigations have materially simplified the morphology of the brain through the discovery of well defined longitudinal zones. On the other hand, we at last possess, thanks to the combination of ontogenetic and histologic methods, clear conceptions of the elementary structure of the nervous system as a whole. We know now that each nerve fiber originates from a single nerve cell and that it finally ends in a number of separate end branches without anastomosing with other fibres. We know further that all primary motor cells originate in the ventral half of the embryonic neural tube and from there grow toward the periphery; while the centripetally running fibres originate outside the central organ in the spinal ganglion, in the ganglia of the head and partly (eyes and nose) in the sense organs themselves. We arrive thereby at the conception of the nuclei of origin and termination of the single nerve tracts. We are forced accordingly to examine the correctness of the designation in all those cases in which the hitherto used anatomical terms imply the direction of a fibre system, e. g., in case of the so-called "descending and ascending roots," and to adapt such necessary terms to the real facts. In doubtful cases, or in the often recurring cases of a crossed course of the fibres, names must be chosen which will designate the fibre tracts independently of the direction of their elements.

In getting up our list of names we could scarcely hope to accept everything which the special literature contains in regard to particular ganglia and fibre systems. But we have tried to establish a foundation which may serve as a common one for the future. Here we were able to enjoy above all the expert advice of our highest living authority, v. Kölliker, as well as that of some prominent special investigators, Edinger, Flechsig and Held. The material is so arranged that in each part of the brain there is given first a presentation of the surface relief and then the more

important structures of the cross sections. The latter principle is objectionable in so far that it would be preferable also to obtain a material conception and description of the internal nuclei and tracts. For the time being we are only partially able to do this and for the present, the pictures of cross sections serve as an available expedient.

Two years ago I discussed our plan of division of the brain,<sup>9</sup> and I have here only to repeat in essence what I then said. Based on ontogenesis, we have retained the three main parts of v. Baer, which we call **Rhombencephalon**, **Mesencephalon**, and **Prosencephalon**. The large brain or **Cerebrum** of anatomy comprises the two last named parts. In the Rhombencephalon we distinguished beside the **Myelencephalon** and the **Metencephalon**, an independent part, the **Isthmus**, which is the narrow part of the brain surrounding the upper end of the rhomboid fossa and to which belong among other structures the Brachia conjunctiva and the Velum medullare anterius. The Prosencephalon is divided into the **Diencephalon** and **Telencephalon**. The terms primary and secondary forebrain, also primary and secondary hindbrain, were avoided. In the primitive cerebral tube of the human embryo of the fourth week the six parts of the brain enumerated above are represented as six successive transverse rings (Fig. 17). Each of these rings we may suppose to be divided into a dorsal and a ventral half-ring. As in the spinal cord so also in the brain the development of the nervous substance is confined to the two lateral halves of the wall of the tube, while the middle portion of the floor and the roof (the floor plate and the roof plate) for the most part remain thin and epithelial. The Lamina chorioidea epithelialis of the third and fourth ventricles, the Lamina terminalis and the Tuber cinereum are such median parts of the wall of the primitive tube which have remained thin. Pons, Chiasma, Corpus callosum, Lamina quadrigemina, and Vermis cerebelli apparently form exceptions to the above rule. How these apparent exceptions are brought about, must remain undiscussed here.

Two lateral longitudinal grooves early mark off the margin of the ventral and dorsal halves of the cerebral tube (the basal plates and alar plates of my former papers). These are the **Sulci limitantes**. All motor nuclei lie ventral or medianward of the Sulci limitantes, but the so-called sensory ganglia lie dorsal or lateralward from these. In the fully developed brain the marginal grooves are preserved almost the entire length; in places the basal plates are raised by archings upward or fusions of the adjacent regions of the wall. In the Calamus scriptorius the two marginal grooves diverge alongside the medial margin of the Alae cinereae. Superiorly they accompany the **Eminentiae teretes** as far as

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<sup>9</sup> This Archive 1893, p. 172 ff.

the transition in the Aqueduct. Both Foveae inferior and superior belong to the system of marginal grooves. Between the foveae is included the arched mass of the Area acustica by which the marginal groove is partly covered. In the region of the Isthmus the floor of the marginal grooves is very much raised by fusion of the walls. Here the constituent parts of the originally ventral half of the tube are pushed into the cavity of the dorsal half and the latter pushed aside. A similar condition exists also in the midbrain, in the lumen of which the two marginal grooves are present throughout its entire length. At the anterior end of the aqueduct the marginal grooves are continued on either side into the **Sulcus Monroi**, which in a strictly characteristic manner divides the lateral wall of the third ventricle into an inferior and a superior part,—the **Thalamencephalon** and **Hypothalamus**. The Sulci Monroi terminate on either side in the **Recessus opticus**.

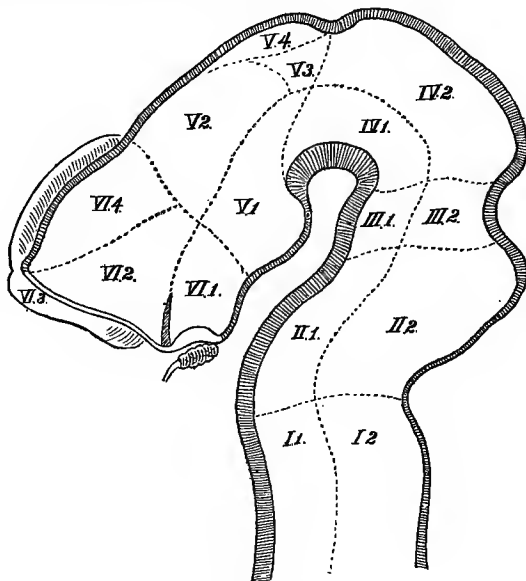


Fig. 17.

Median section through the brain of a human embryo at the end of the first month, with areas indicated.

**I. Myelencephalon:**

I. 1. Pars ventralis.

I. 2. Pars dorsalis.

**II. Metencephalon:**

II. 1. Pons.

II. 2. Cerebellum.

**III. Isthmus:**

III. 1. Pedunculi cerebri.

III. 2. Brachia conjunctiva, Ver. med. ant.

## IV. Mesencephalon:

IV. 1. Pedunculi cerebri.

IV. 2. Corpora quadrigemina.

## V. Diencephalon:

V. 1. Pars mamillaris hypothalami.

V. 2. Thalamus.

V. 3. Metathalamus and V. 4. Epithalamus.

## VI. Telencephalon:

VI. 1. Pars optica hypothalami.

VI. 2. C. striatum.

VI. 3. Rhinencephalon and VI. 4. Pallium.

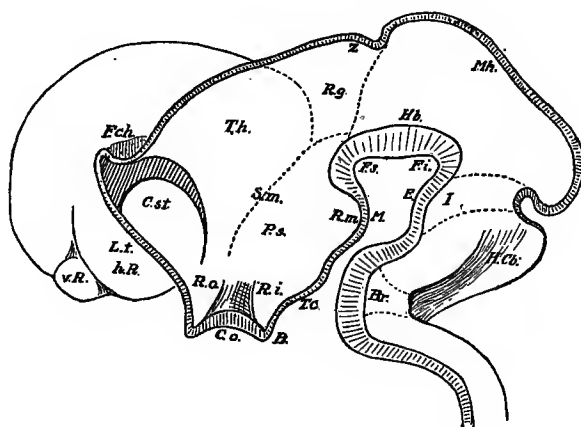


Fig. 18.

This as well as several of the following figures were taken from the paper "über die allgemeine Morphologie des Gehirns" (this Archive, 1892).

Br. Arch of Pons.

C.o. Chiasma opticum.

C. st. Corpus striatum.

E. Eminentia interpeduncularis of Isthmus.

F. ch. Fissura chorioidea.

F.i. Fossa interpeduncularis.

R.p. Recessus posterior.

R.a. Recessus anterior.

Hb. Tegmental thickening.

H.Cb. Cerebellar hemispheres.

I. Isthmus.

L.t. Lamina terminalis.

M. Corpus mamillare.

Mh. Roof of midbrain.

P.s. Hypothalamus (Pars subthalamica).

R. Olfactory lobe.

v.R. Anterior olfactory lobe.

h.R. Posterior olfactory lobe.

R.g. Recessus geniculi (Region of the geniculate prominences).

R.m. Recessus mamillaris.

R.i. Recessus infundibuli.

R.o. Recessus opticus.

S.m. Sulcus Monroi.

T.c. Tuber cinereum.

Th. Thalamus.

Z. Epiphysis anlage.

As is known the different parts of the cerebral tube participate in its further development in very unequal degrees. While some parts like the quadrigeminal eminences and the Hypothalamus remain far behind, others like the hemispheres of the cerebrum and cerebellum greatly surpass their surroundings by their powerful growth. The parts originating



from the ventral basal plates generally remain behind those derived from the alar plates. The former are the motor regions of the Medulla oblongata, the Pons, the cerebral peduncles and the Hypothalamus. To the latter belong the olivary bodies and the Corpora restiformia, the cerebellum, the Brachia conjunctiva, the quadrigeminal bodies, the Thalamencephalon and the cerebral hemispheres. Besides the displacements of the primitive parts of the brain in relation to each other, caused by unequal growth of the substance, still other conditions help to more or less obliterate the original scheme of the whole. To these latter belong the development of robust masses of transverse fibres in the Pons and the Corpus callosum, as well as a number of processes which are to be traced back to cell migrations inside the cerebral wall. Among such processes is counted the formation of the olivary bodies, for the anlage of these parts originally belongs to the dorsal half of the medulla and only later passes into the ventral half.

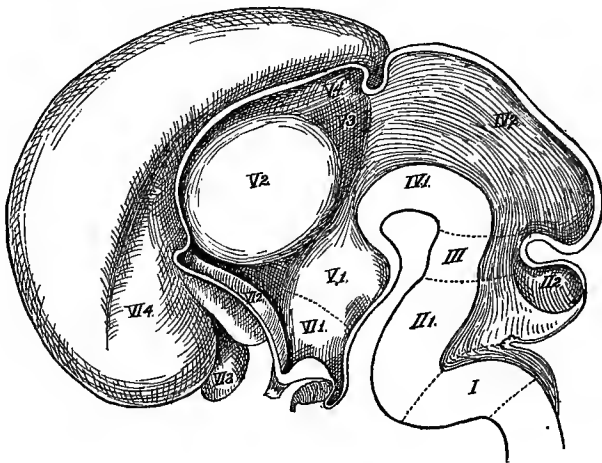


Fig. 19.

Median section through the brain of a human foetus of the third month. For explanation of numbers see Fig. 17.

The disparity between the development of the ventral and dorsal parts of the medullary tube reaches its maximum in the two parts of the fore-brain. The region of the Hypothalamus lying below the Sulcus limitans [Monroi] remains in general in an early embryonic stage, wherefore its median section appears scarcely different in the fully developed brain from the embryonic. The parts of the Hypothalamus are: the C. mamillare, the Tuber cinereum with the Infundibulum, the Chiasma, the Recessus opticus and the Lamina terminalis. Of these parts the C. mamillare and part of the Tuber cinereum belong to the next to the last,

the others to the last transverse ring of the primitive cerebral tube. We differentiate that part of the Hypothalamus belonging to the Diencephalon as **Pars mamillaris**, that part belonging to the Telencephalon as **Pars optica**. On account of the small extent of the total region one must not in descriptions, put much weight on the genetic divisibility of both parts, and we may the same as heretofore consider the **Pars optica hypothalami** as part of the wall of the third ventricle.

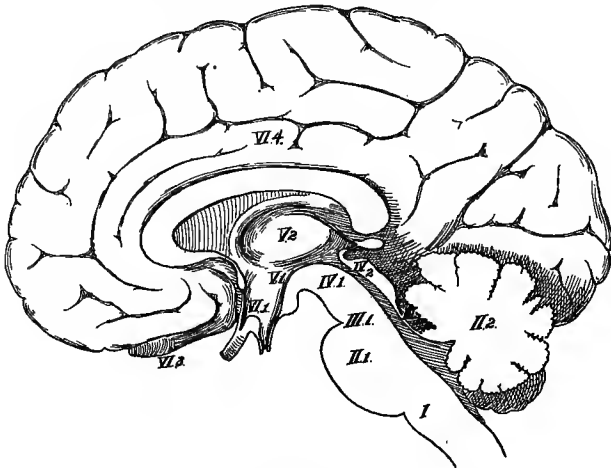


Fig. 20.

Median section through the adult human brain. For explanation of numbers see Fig. 17.

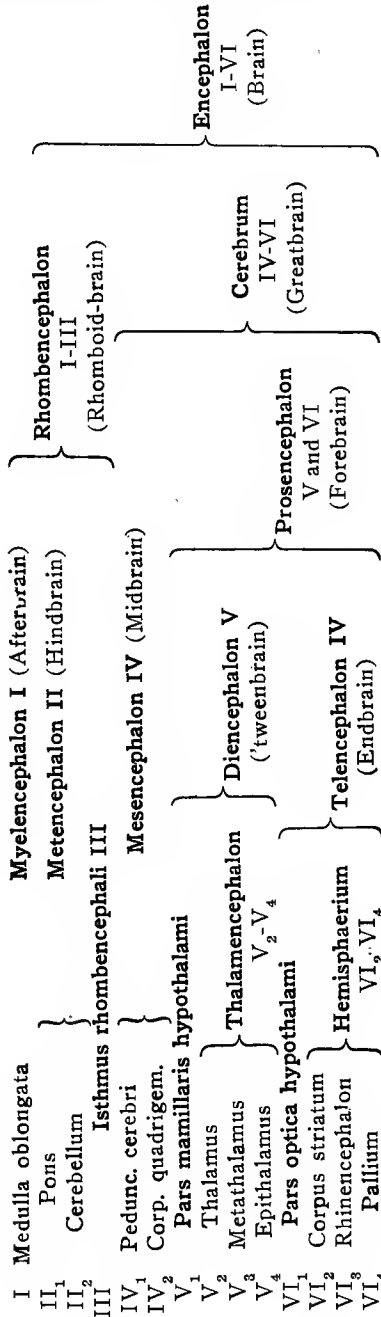
The **Thalamencephalon**, lying above the **Sulcus Monroi** is divided into the **Thalamus** proper, the **Epithalamus** and the **Metathalamus**. The latter comprises the geniculate bodies and their surroundings. The **Epithalamus** comprises the habenular structures and the **Corpus pineale**. The old name **Corpus pineale** was retained for the reason that by it a quite definite form of Epiphysis is designated. The word **Epiphysis** is a general term used for different outgrowths occurring in the roof of the Prosencephalon. In the roof-region of the Diencephalon, in vertebrate animals, epiphyses grow out from at least three different places: in front, in the middle and behind.<sup>1</sup> The **Corpus pineale** originates at the posterior end of the ventricle, and it appears comparatively late.

The parts of the hemispheres early differentiating from each other are: the **Pallium**, the **Corpus striatum** and the **Rhinencephalon**. All the other parts, Fornix, horn of Ammon, Corpus callosum, etc., arise later and their history needs here no discussion.

I have reprinted here the synoptical tables of the primary parts of the

<sup>1</sup> This Archive 1892, p. 366.

brain published on an earlier occasion, and remark that the numerals correspond with those used in Figs. 17, 19, 20.



**Medulla spinalis.** The term **Funiculus** is used for the large division of the cord; **Fasciculus** for its single tracts.

The conventional **Anterior pyramidal tract** and **Lateral pyramidal tract** are called **Fasciculus cerebrospinalis anterior** and **lateralis**. We were obliged to do this because the students, as experience shows, always have difficulty in distinguishing from each other the conceptions of the pyramids, pyramidal cords, pyramidal tracts and also eventually, pyramidal cell fibres. The pyramids, according to the older conception of Burdach,<sup>2</sup> are externally marked off parts in the *Medulla oblongata*. The so-called pyramidal cords, in the older sense, are fibrous cords which appear upon superficial inspection as a prolongation of the fibrous masses belonging to the pyramids. In this sense we speak of the pyramidal cords of the Pons. These, as is known, increase in bulk from below upward, and thus like so many other cords of the central system, mark a pathway which is entered by fibres of a different character.

Since Flechsig's fundamental researches on the organization of the central system, the terms pyramidal cord and pyramidal tract have been used in a still more special sense for those fibre-bundles which descend from the central convolutions of the cerebrum into the spinal cord. The pyramidal tracts of Flechsig, although contained in the pyramidal cord of the Pons, form only one part and not a very large part of it. Therefore the conceptions are different. But a relation between Flechsig's pyramidal tracts and the pyramidal cells of the cerebrum can be established since the former originate from processes of the pyramidal cells. But here also there is no possibility of a concise designation since a predominant part of the pyramidal cells of the cerebral cortex has nothing in common with the pyramidal tracts of Flechsig. If we designate the latter as *Fasciculi cerebrospinales* we are in harmony with the already existing lateral cerebellar tracts, or *Fasciculi cerebellospinales*. The ground bundle or "Strangreste" of Flechsig we have translated as *Fasciculi proprii*.

**Ventriculus quartus.** The fourth ventricle is divided into three parts: a **Pars inferior** [*Calamus scriptorius*], a **Pars intermedia**, and a **Pars superior**. The most inferior part belongs to the *Medulla oblongata* and is surrounded by the *Corpora restiformia*. At the point where these are surrounded by the *N. cochleae* and the *Recessus lateralis*, the *Pars intermedia* begins, and further on is elongated into the region between the *Brachia pontis*. This is the broadest part of the rhomboid fossa, but it passes over into the narrow portion at the upper end of the *Fovea superior*. This narrow portion, the *Pars superior*, belongs to

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<sup>2</sup> Burdach, *Bau und Leben des Gehirns*. II, p. 32. Burdach distinguishes between *Pyramids* and *Pyramidal cords*.

the Isthmus and is bounded below by the Brachia conjunctiva [cerebelli], and is arched over by the Vellum medullare anterius.

The most obvious division of the floor of the rhomboid fossa is the longitudinal. The two Sulci limitantes laterally hem in the **Eminentiae teretes**, or the region of the motor nuclei. The sulci stretch uninterruptedly from the lower end of the Calamus to the entrance of the Aquaeduct. Lateralward from the sulci there lies in the Calamus the obliquely placed triangular Ala cinerea. Then there follows a flattened prominence which has a medial convex border and which terminates in a point inferiorly as well as superiorly. This prominence is the **Area acustica**. The so-called Tuberculum acusticum, one of the terminal nuclei of the N. cochlearis, lies at the lateral corner of this area. The median region of the area is occupied by the **Nucleus vestibularis medialis**.<sup>3</sup> The Striae medullares, when present run across the Area acustica. Above the Area acustica follows the Fovea superior, which like the Fovea inferior represents a part of the Sulcus limitans. From there on the Eminentia teretes occupy the entire width of the floor of the rhomboid fossa.

**Taenia ventriculi quarti, taenia thalami, taenia chorioidea** and **Taenia fornicis et fimbriae**. By the word Taenia we uniformly designate, after Reichert,<sup>4</sup> all those sharp edges, along which the compact substance of the brain continues into the epithelial lining of the corresponding Telae chorioideae. This condition can be understood only ontogenetically. The larger part of the primitive wall of the embryonic neural tube thickens in the course of development and becomes nervous tissue. In the roof of the third and fourth ventricles, as well as in a strip of the medial wall of the hemisphere, the formation of nervous tissue does not occur and the continuity of the tubes is brought about by means of a thin epithelial lamina in which the adjoining nervous parts of the brain continue, but rapidly decrease. The epithelial parts of the wall here and there undergo complicated foldings toward the cerebral cavities and their outer surfaces are covered throughout by highly vascular connective tissue laminae, the Telae chorioideae. Through the separation of the meninges and the telae, the epithelial laminae follow the latter, separating from the brain mass. Alongside the margins

<sup>3</sup> The surface which here is designated as Area acustica, Schwalbe (Nervenlehre, p. 420) has described as Tuberculum acusticum, and I myself had adopted this mode of description in my work on the Rhombencephalon (p. 93). But this may lead to confusion since the Tuberculum acusticum of the neurologists occupies only the lateral corner of the Area.

<sup>4</sup> Reichert, Bau des menschlichen Gehirns. Leipzig 1861, II, p. 59 ff, p. 69 ff. Reichert also speaks here of a Taenia fornicis, a term which we again have accepted.

of separation the taeniae are preserved as fine linear hems, which formerly were enumerated under a variety of names. Morphologically considered the taeniae are margins of the artificial openings in the brain tube; therefore they must everywhere form closed recurrent lines. They also indicate everywhere the lines of demarcation between intra- and extraventricular parts of the surface of the brain. The taeniae as sharp transitional seams are throughout our nomenclature differentiated from the medullary striae which are connected with them. We therefore distinguish the *Taenia thalami* from the *Stria medullaris*; the *Taenia chorioidea* near the *Lamina affixa* from the *Stria terminalis*; the *Taenia fornicis et fimbriae* from the *Fornix* and the *Fimbria*.

The *Taenia ventriculi quarti* begins at the *Obex*, passes in front of the end of the *Funiculus gracilis* and the *Funiculus cuneatus*, and goes obliquely over upon the *Corpus restiforme*, which laterally surrounds it. As the margin of the *Recessus lateralis* it descends deeply toward the base, but further on joints the cerebellum following the stalk of the *Flocculus* and the *Velum medullare posterius*. Its medial end piece forms a point which tongue like ascends over the *Nodus*.

The *Taenia* of the third ventricle forms with that of the lateral ventricle a continuous strip in which we can distinguish three main parts:

- the *Taenia thalami*,
- the *Taenia chorioidea* and
- the *Taenia fornicis et fimbriae*.

The *Taenia thalami* begins in front of the *C. pineale* and follows on either side the free margin of the *Stria medullaris*; it continues into the narrow epithelial plate which lines the *Plexus chorioideus medius* on its

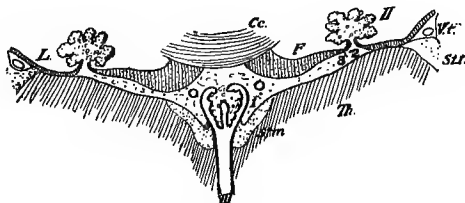


Fig. 21.

Cross section through the *Tela chorioidea ventriculi tertii* and its surroundings.

- |                                 |                                 |
|---------------------------------|---------------------------------|
| II. Lateral ventricle.          | St.t. <i>Stria terminalis</i> . |
| III. Third ventricle.           | V.t. <i>Vena terminalis</i> .   |
| Cc. <i>Corpus callosum</i> .    | L. <i>Lamina affixa</i> .       |
| F. <i>Fornix</i> .              | 1. <i>Taenia thalami</i> .      |
| Th. <i>Thalamus</i> .           | 2. <i>Taenia chorioidea</i> .   |
| St.m. <i>Stria medullaris</i> . | 3. <i>Taenia fornicis</i> .     |

The figure shows the transition of the *Taeniae* into the epithelial plate of the *Plexus chorioidei*.

under surface. At the Foramen Monroi, the Taenia thalami turns backward into the Taenia chorioidea.<sup>5</sup>

The layer of substance which covers the V. terminalis continues as a thin lamella over the adjoining part of the optic thalamus as *Lamina affixa*.<sup>6</sup> Then with a free projecting margin it passes over as the *Taenia chorioidea* into the epithelium of the Plexus chorioideus lateralis. The width of the *Lamina affixa* at first increases from in front backwards and then decreases; it attains at its maximum 5-6mm. In the inferior horn the *Taenia chorioidea* lies close to the *Stria terminalis*.<sup>7</sup>

The *Taenia chorioidea* descends alongside the *Cauda corporis striati* into the inferior horn as far as its anterior end. Here it turns into the margin of the *Fimbria hippocampi* and is continued into the *Taenia fornix*. The two taeniae of the fornix finally join in the median line above the foramen of Monro.

The *Lamina affixa* is, as lately emphasized by Hochstetter,<sup>8</sup> like the epithelium of the lateral vascular plexus and like the fornix and the *Septum pellucidum*, a remnant of the medial wall of the hemisphere. Its original relation to the Thalamus can be seen from the accompanying cross section of the brain of a two months old embryo. (Fig. 23.)

All blood vessels entering the brain penetrate its surface extraventricularly. This is true also of the vessels entering the optic thalamus and especially of the strong *Vena terminalis*. This vein enters the extreme anterior corner of the free surface of the Thalamus; the curved angle between the *Taenia chorioidea* and the *Taenia fornix*.

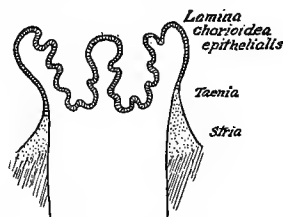


Fig. 22.

Scheme for demonstration of the relations of the Striae, Taeniae and the *Lamina chorioidea epithelialis*.

<sup>5</sup> A very beautiful illustration of this condition is to be found in the work by Gall and Spurzheim. Pl. VI.

<sup>6</sup> *Lamina cornea* after Schwalbe. *Nervenlehre*, p. 507.

<sup>7</sup> Detailed descriptions are found in Mihalkovics, *Entwicklungsgeschichte des Gehirnes*. Leipzig 1877, p. 115.

<sup>8</sup> Compare Hochstetter's paper in the *Anatomischer Anzeiger*, Vol. X, Nr. 9, p. 295, and my note pertaining to it, *Ibid*, Nr. 11, p. 358. Reichert says concerning the same (l. c.) II, p. 40: "In reality the lateral ventricle opens outwardly at no place in the adult . . . . Therefore it always remains an artifact if one pushes the optic thalamus through this artificial slit into the lateral ventricle."

Like the *Ventriculus septi pellucidi*, the small canal in which the *V. terminalis* runs alongside the *Stria terminalis*, may be described as a constricted part of the external surface.

A cross section through the *Thalamus* and through the *Corpus striatum* (Fig. 21) must strike on either side of the median plane three taeniae, most medianward the *Taenia thalami* and further lateralward the closely approximated *Taenia chorioidea et fornicis*.

From the above description it follows that the *Taenia chorioidea* only apparently belongs to the *Thalamus*; in reality it is part of the *Telenkephalon*.

*Fasciculus longitudinalis medialis* is the so-called posterior longitudinal bundle of the neurologist. This bundle proves to be ontogenetically and anatomically the continuation of the anterior spinal tracts and the designation as "posterior fasciculus" is, therefore, very confusing for the correct conception of it.

**Ascending and descending roots, *Tractus spinalis n. trigemini*, *Nucleus spinalis n. trigemini*.** The older mode of designation was that of "ascending trigeminal root," and it was based on the hypothesis of a central origin of the sensory nerves. When later the origin of the sensory nerves in the ganglia became known, it was easy enough to change the "ascending roots" into descending. With such an inversion of the designations, especially in the case of the *N. trigeminus*, one comes into conflict with the motor root descending from the midbrain. As a natural expedient there results the designation "spinal" for the roots running to the spinal cord. Such spinal roots belong not only to the *N. trigeminus* but also to the *Nn. vestibularis, intermedius, glosso-pharyngeus* and *vagus*. The spinal roots of the last named nerves form the *Tractus solitarius*. These spinal roots are throughout accompanied by tracts of gray matter—the *Nuclei tractus spinalis nn. trigemini*, the *Nuclei n. vestibularis lateralis* and *spinalis*, and the *Nuclei tractus solitarii*.



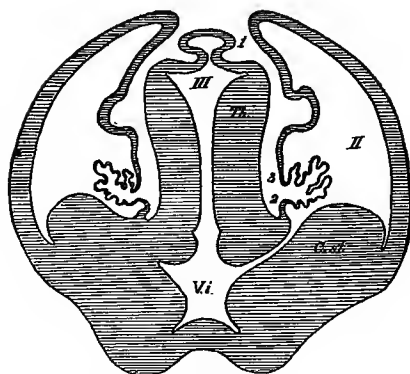


Fig. 23.

Cross section through the brain of human embryo (Mr.) at the end of the second month.

II, III and Th. as above.

1. Taenia thalami.

2. Taenia chorioidea.

3. Taenia fornicis.

C. st. Corpus striatum.

Vi. Ventriculus impar.

On one side of the section the Thalamus and C. striatum are separated; on the other side they are united.

**Nuclei of nerves.** Aside from some minor details, the study of the nuclei of the nerves of the brain has led to a definite conclusion. This is true not only of the long known and easily found motor nuclei of the Nn. hypoglossus, accessorius, facialis, abducens, oculomotorius and trochlearis, but also of the terminal nuclei of the sensory nerves and the N. acusticus.\* In regard to the nuclei of the Acusticus the existing differences do not refer to the real conditions but to nomenclature. Nevertheless, the Commission preferred to confine itself to the two main groups: Nuclei n. vestibularis and Nuclei n. cochlearis. I give the following systematized list of all Nuclei of nerves XII-III.

### COLUMNAE NUCLEORUM NERVORUM

#### Columna motoria medialis

Nucleus n. hypoglossi  
Nucleus n. abducentis  
Nucleus n. trochlearis  
Nucleus n. oculomotorii

#### Nuclei motorii n. trigemini

Nucleus princeps  
Nuclei minores [radicis descendentes]

#### Columna recipiens

#### Columna motoria lateralis

Nucleus ambiguus [N. IX, X, XI]  
Nucleus n. facialis

#### Nuclei funiculi gracilis et cuneati [Nuclei sensitivi spinales]

Nucleus alae cinereae [N. IX, X]  
Nuclei acustici

\* Compare especially the illustrations in A. Kölliker's *Gewebelehre*, 6 Edit. Leipzig 1893.

Nuclei n. cochlearis	[Deiters]
N. n. cochlearis ventralis	Nucleus n. vestibularis medialis
Nucleus n. cochlearis dorsalis	[Schwalbe]
[nucl. tuberculi acustici]	Nucleus n. vestibularis spinalis
Nuclei n. vestibularis	[Radix descendens]
Nucleus n. vestibularis superior	Nuclei tractus solitarii [N. IX, X
[Flehsig, Bechterew]	et N. intermedii]
Nucleus n. vestibularis lateralis	Nuclei tractus spinalis n. trigemini

**Gyrus fornicatus**, subdivided into **G. cinguli** and **G. hippocampi**, corresponds to the "grand lobe limbique" of Broca. This lobe Broca divided into a "circonvolution du corps calleux" and a "circonvolution de l'hippocampe." By means of the Rhinencephalon, which borders, with the Area parolfactoria (Brocae), upon the **G. cinguli**, and the Substantia perforata lateralis, which borders upon the **G. hippocampi**, the two ends of the **G. fornicatus** are jointed to form a closed ring. The **Gyrus cinguli** is surrounded by the **Sulcus cinguli**, which sends a deep branch, the **Ramus marginalis**, past the **Praecuneus** to the margin of the hemisphere while its direct continuation runs along the **Praecuneus** as an inconstant **Ramus subparietalis**. The formerly so-called **Sulcus callosomarginalis** consisted of the first part of the **Sulcus cinguli** and its **Ramus marginalis**. Schwalbe in his neurology (p. 536) has called Broca's lobe limbique the **Lobus falciformis** and besides attributed to it the formation of the marginal arch, the **Corpus callosum**, the **Fornix**, including the **Fimbria** and **Fascia dentata**, and the **Septum pellucidum**.

**Fissura hippocampi**, **Pes hippocampi**, **Fissura calcarina**, **Calcar avis**, **Fissura collateralis**, **Trigonum collaterale** and **Eminentia collateralis**. To the names representing the lateral fissure (primary fissure) there correspond throughout the similarly named thickenings of the ventricular wall. But the principle cannot be carried through generally. The **Fissura parietooccipitalis** corresponds to the inward arching of the occipital radiation of the **Corpus callosum** in the **Bulbus cornu posterioris** and the **Fossa sylvii** corresponds to the **Corpus striatum**. The upper part of the embryonic **Fissura chorioidea**, pushed away from the surface by the **Corpus callosum** represents the narrow groove between the **Taenia fornicis** and the **Taenia chorioidea**. (Fig. 21.) The lower part of the primitive **Fissura chorioidea** joins the lower limb of the **Fissura transversa cerebri**. The latter fissure leads into the interspace between the hemispheres, including **C. callosum** and **Fornix** on one side, and the parts of the **Diencephalon** and **Mesencephalon** on the other side. Before the removal of the meninges, and the tearing away of the epithelial layers attached to them, the **Fissura transversa** leads only into an extraventricular region.

**Gyrus subcallosus**. **Pedunculus corporis callosi** and **Pedunculus**

septi pellucidi, are three terms for one and the same structure which need a more detailed explanation. The names designate that rounded protuberance, which delimited by a deep groove, is visible immediately anterior to the Commissura anterior and the upper end of which follows closely the Rostrum of the Corpus callosum, while the lower end reaches to the medial corner of the Substantia perforata lateralis.

Of the three names, Pedunculus corporis callosi is the oldest. According to Cruveilhier and Henle it is to be traced back to Vicq d' Azyr. The relations of the Pedunculus in question to the Corpus callosum are expressed by the fact that from the former on either side a fibre bundle continues in the Stria longitudinalis medialis of the Corpus callosum.<sup>1</sup> Gall probably first pointed out the relations to the Septum pellucidum, but this investigator has at the same time, in his joint work with Spurzheim, traced the posterior end of this fibre tract up to the Uncus of the Gyrus hippocampi and illustrated it by an excellent picture.<sup>2</sup> Gall describes a fibrous nerve bundle running forward from the apex of the temporal lobe, which turns medianward after its origin, ascends over the Chiasma, and runs along in front of the Commissura anterior. Farther on this fibre tract divides and broadens to a thin nervous membrane, which forms with that of the opposite side the Septum pellucidum. Gall does not use the name Pedunculus septi pellucidi but the name occurs later in the work of Burdach,<sup>3</sup> who refers to Gall's description, but in his own description follows the reverse direction. According to Burdach a myelated lamina continues from the Septum toward the basal surface of the brain and joins the fibres from the cerebral trunk. The tract thus formed ends posteriorly in part in the Uncus and in part in the roof of the inferior horn.

It is noteworthy that for a considerable time the anatomists neglected the relations of the Pedunculus septi pellucidi, sive corporis callosi, to the temporal lobe as described by Gall and Burdach, until they were again brought to prominence by Broca, Zuckerkandl and myself. For a full survey of these relations the removal of the Chiasma and Tractus opticus is necessary.

The German authors succeeding Burdach have, for the most part, accepted his designation of the Pedunculus septi pellucidi. It is used in this sense by Arnold, Valentine, C. Krause, and, furthermore, by Reichert in his great work on the Brain. Vicq d'Azyr's Pedunculus corporis cal-

<sup>1</sup> Henle, Nervenlehre. Braunschweig 1871, p. 93 and p. 132.

<sup>2</sup> Gall and Spurzheim, Anatomie und Physiologie des Gehirnes. Paris 1810, I 2, p. 624 and Pl. XIII (63). Gall's picture, which I did not know before, agrees in all essential points with the one I have published in my treatise on the Formentwicklung des menschlichen Gehirnes (Fig. 27).

<sup>3</sup> Burdach, Bau und Leben des Gehirnes, II, p. 135.

losi was retained by the French anatomists (Cruveilhier, Sappey, Testut and others), and Henle also preferred this term. Up to that time we have to deal with two terms for the same structure which was uniformly described by all authors as lying in front of the Commissura anterior, in its sharply defined part, but whose terminal part is traced farther by some than by others. Schwalbe's neurology has considerably complicated the situation, in that independently from each other are described a Pedunculus corporis callosi and a Pedunculus septi pellucidi.<sup>4</sup> Schwalbe's Pedunculus corporis callosi is the structure also described by others under this name, but his Pedunculus septi pellucidi is something new. Schwalbe designates by this name the continuation of the plate of white medulla of the Septum into the medulla of the adjacent convolutions of the frontal lobe as it appears in frontal section. Schwalbe says in a description of a frontal section running between the Rostrum corporis callosi and the columns of the Fornix, that the white lamellae of the Septum proceed continuously into the white substance between the base of the lenticular nucleus and the gray cortex of the lower surface of the frontal lobe and then adds: "One has designated this continuation of the medullary lamellae as Pedunculi septi pellucidi." this "One" made me at first rather doubtful whether or not there had crept in a confusion in Schwalbe's work in that the structure described by this investigator as Pedunculus septi pellucidi might be the structure thus designated by former authors. The peduncle of the older authors is a prominent plastic thickening of the surface. The peduncle of Schwalbe is a cross-sectional figure. The peduncle of the authors turns backward to the Substantia perforata lateralis and to the temporal lobe. The peduncle of Schwalbe turns laterally into the medullary substance of the frontal lobe.

We can simultaneously bring to view in a properly cut section (Fig. 24) the old and Schwalbe's Pedunculus septi pellucidi. Between the latter and the white covering of the Pedunculus autorum, there lies a thin layer of gray matter.

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<sup>4</sup> G. Schwalbe, Nervenlehre, p. 493, p. 502 and Fig. 315.

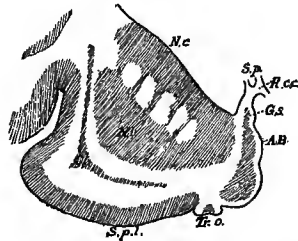


Fig. 24.

Frontal section through the anterior horn of the lateral ventricle.

N.c. Nucl. caudatus.	G.s. Gyrus subcallosus.
N.l. Nucl. lentiformis.	A.B. Area Brocae.
Cl. Claustrum.	Tr.o. Trigonum olfactorium.
S.p. Septum pellucidum.	S.p.l. Subst. perforata lateralis.
R.c.c. Rostrum corporis callosi.	

The explanation of Schwalbe's statement seems to lie in a passage of Reichert's work. In Fig. 37, pl. VII, Vol. II, of his atlas,<sup>4a</sup> Reichert depicts a frontal section through the brain in the region of the *Ventriculus septi pellucidi* and remarks concerning it that the lower part of the medial wall of the lateral ventricle consists of a thin medullary lamina, which is divided by the **Lamina genu** in an upper and a lower part. The upper is the **Septum pellucidum**; "the lower can be brought into the region of the peduncle of the **Septum pellucidum**, although by this term is designated the somewhat thicker part of the perpendicular medial wall of the **Pallium** lying immediately behind it." Reichert, however, still describes the **Pedunculus septi pellucidi** in the conventional way (e. g. Pl. X., Fig. 19, I. 1.); and as we see, he especially emphasizes in the above cited passage that the white strip showing in the section as a continuation of the septum is fundamentally different from the **Pedunculus** proper.

Reichert has also introduced another not less delicate term in his **Commissura pedunculorum septi**<sup>5</sup> to which he, moreover, added a **Commissura columnarum fornicis**. Reichert says concerning the peduncular commissure that it continues downward into the **Lamina terminalis**, upward and forward into the **geniculate lamina** of the **Rostrum** of the **Corpus callosum**.<sup>6</sup> This same structure Henle described as **Commissura baseos alba**, saying: "In the floor of the groove which runs between the two **Pedunculi corporis callosi**, from the anterior commissure to the beginning of the **Corpus callosum**, the white substance of the lower marginal thickenings of the right and left half of the brain is joined by a commissure, which I shall designate as a white basal commissure."

Reichert's per se contestable designation of a **Commissura pedun-**

<sup>4a</sup> Reichert. *Bau des menschlichen Gehirnes*. Berlin 1861.

<sup>5</sup> Reichert, l. c. II, p. 70-76.

<sup>6</sup> Reichert, l. c. II, Uebersichtstabelle, p. 3.

culorum septi as well as Henle's Commissura baseos alba, appear very superfluous, for they designate by no means independently differentiated structures. What has been designated by these names is the end plate of the Rostrum of the Corpus callosum (The *Lamina rostralis* of our list). The groove like curved plate unites the medullary masses of the adjacent cortical region; also the Area Brocae and the Gyrus subcallosus, in the same way as other parts of the Corpus callosum, unite corresponding areas.

The interpretation of the *Pedunculus septi pellucidi* and *Pedunculus corporis callosi* has been fundamentally changed by the more recent investigations on the olfactory centre, and in the course of these investigations we have come to designate the structure in question as an independent gyrus,—the *Gyrus subcallosus*.

**Rhinencephalon.** The comparative anatomical investigations of Broca,<sup>7</sup> of Zuckerkandl<sup>8</sup> and of W. Turner<sup>9</sup> as well as my<sup>1</sup> ontogenetic investigations, have proved that the olfactory brain or Rhinencephalon is to be distinguished as a part independent from the rest of the hemisphere—the *Pallium*.<sup>2</sup> The bulk of the olfactory part of the brain increases or decreases according to the development of the sense in ques-

<sup>7</sup> Broca, *Recherches sur les centres olfactifs*. *Revue d'Anthropol* 1879, p. 385 ff.

<sup>8</sup> Zuckerkandl, *Ueber das Riechcentrum*, Stuttgart 1887, p. 15, says: "Finally I wish to mention the *Gyrus subcallosus*, by which designation I understand that part of the medial wall of the hemisphere which is inserted between the frontal end of the *Gyrus fornicatus* and the Rostrum of the Corpus callosum and which up to the present time was wrongly called *Pedunculus corporis callosi*. The *Gyrus subcallosus* is not confined to the just described small area, but it proceeds outward, in the shape of a ribbon-like strip which is adjacent to the posterior margin of the *Lamina perforata*, to the point of the temporal lobe where it meets the outer olfactory root. The place of junction is sometimes marked by a small tubercle." Zuckerkandl further says, p. 60: "The name *Pedunculus corporis callosi* for the structure on the medial wall of the hemisphere is not well chosen, for it forms just as little a peduncle for the Corpus callosum as does any other part of the medial wall of the hemisphere. Moreover the term does not pertain to the Gyrus-like character of the part of the hemisphere in question. Therefore it would be better to call the winding portion according to its position the *Gyrus subcallosus*."

<sup>9</sup> Sir W. Turner, *The Convolution of the Brain*. *Verhandlungen des intern. medic. Congresses in Berlin, 1890*, Vol. II, p. 8 ff.

<sup>1</sup> W. His, *Formentwicklung des menschlichen Gehirnes*. Leipzig 1889, p. 714 ff. *Zur allgemeinen Morphologie des Gehirns*. *This Archive* 1892, p. 346 ff.

<sup>2</sup> The terms *Rhinencephalon* and *Pallium* are taken in the sense of W. Turner. The old conception of the brain mantle is somewhat narrower, since it excluded the *Insula*.

tion. Broca in this regard distinguished anosmatic and osmatic brains, the latter of which Turner subdivided into microsmatic and macrosmatic. • Man belongs to the microsmatic animals and his Rhinencephalon, therefore, shows a comparatively weak development. To it belongs, not only the Bulbus, Tractus and Trigonum olfactorium, the Substantia perforata lateralis, but also the so-called Pedunculus corporis callosi — the present Gyrus subcallosus — and a small area lying in front of it, the Area Brocae or parolfactoria. The designation of a Gyrus subcallosus was originated by Zuckerkandl,<sup>3</sup> and it was introduced because the part in question represents a part of the cortex and does not stand in the rather indefinite relation of the peduncle either to the Corpus callosum or the Septum pellucidum. Cross sections of the Gyrus subcallosus show in their interior gray matter, and at the surface only a thin cortical layer of white matter.

Comparative anatomical explanations of the Rhinencephalon and its relations to the Gyrus fornicatus (the lobe limbique of P. Broca) are found in the investigations of Broca, Zuckerkandl and Turner, to which I here refer. But the development of the human Rhinencephalon may merit a short discussion for the explanation of the anatomical conditions. As early as the beginning of the second month, the anlage of the Rhinencephalon is differentiated from the anterior end of the hemisphere as a protuberance appearing beside the Lamina terminalis and surrounded by a furrow (Turner's Fissura rhinica) (Figs. 25 and 26). The anterior

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<sup>3</sup> Zuckerkandl, l. c. p. 15 and p. 60.

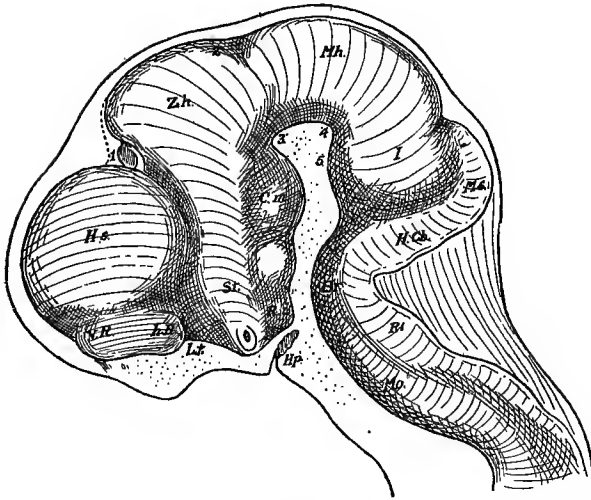


Fig. 25.

Lateral view of the brain of a four and one-half weeks old human embryo. Constructional sketch. Labeling as in Fig. 18 and in addition.

Hp. Anlage of hypophysis.

Hs. Cerebral hemisphere.

Ms. Anlage of Vermis of cerebellum.

Mo. Medulla oblongata.

Ri. Lip of Rhombencephalon.

St. Peduncle of Corpus striatum.

Zh. Diencephalon.

half of the Rhinencephalon, which at first turns dorsalward, and the posterior half are separated from each other by an incisure which is especially strongly marked on the medial surface (Figs. 18 and 19). The anterior olfactory lobe is in contact with the later formed frontal lobe and the posterior with that of the temporal lobe. Above the posterior olfactory lobe develops that depression in the wall of the hemisphere which we later on designate as Fossa Sylvii (Fig. 27). With the progressing development of the hemispheres the anterior olfactory lobe is more and more displaced towards the base by the frontal lobe and finally lies deeper than the posterior olfactory lobe. The anterior, as well as the posterior olfactory lobe, consists of a part turned toward the base and a part looking medianward. From the basal part of the anterior olfactory lobe are developed: the **Bulbus**, the **Tractus** and the **Trigonum olfactorium** which we include in a narrower anatomical sense under **Lobus olfactorius**.



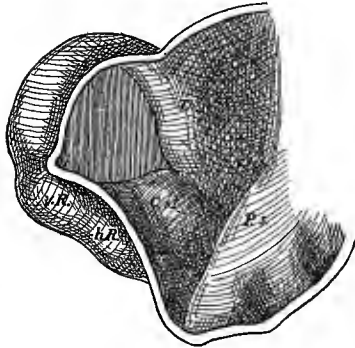


Fig. 26.

Median section of the forebrain of a four and one-half weeks old human embryo. Labeling as in Fig. 18.

The basilar part of the posterior olfactory lobe is preserved as the *Substantia perforata lateralis*, which always remains definitely characterized by its position at the entrance of the *Fossa Sylvii* and by its connection with the *Gyrus hippocampi* of the temporal lobe. Secondly it is arched over by the pole of the temporal lobe. Medianward the *Substantia perforata lateralis* continues into the *Gyrus subcallosus*, which latter is in the fully developed human brain only an insignificant structure, but which appears much more prominent in the foetal brain (Figs. 26 and 19). In front the *Gyrus subcallosus* is separated from the medial part of the anterior olfactory lobe of the *Area Brocae* by a deep incision, the *Sulcus parolfactorius posterior* (the embryonic *Fissura prima*). We designate as *Sulcus parolfactorius anterior* the groove which passes in front of the *Trigonum olfactorium* and the *Area Brocae*, and which separates Broca's area from the beginning of the *Gyrus cinguli*.

**Limen insulae.** In the human foetus of three and four months the anterior olfactory lobe is connected with the temporal lobe by a sharp arched ridge and with the latter borders upon the area of the future *Substantia perforata lateralis*.<sup>4</sup> Alongside this ridge is developed the so-called lateral root of the *Olfactorius*, our *Striae olfactoriae laterales*. The ridge forms also in the mature brain a sharp demarcation between the region of the *Insula* and *Substantia perforata lateralis* and joins in an arch like manner the frontal and temporal lobes. Broca calls it *le bord falciforme du lobe limbique*; Schwalbe<sup>5</sup> calls it the *Inselchwelle*,—*Limen insulae*. The *Limen insulae* is to be considered part of the *Rhinencephalon* just like the *Striae olfactoriae laterales*.

<sup>4</sup> Kölliker, *Zur Entwicklung des Auges und Geruchsorganes*. Würzburg 1883; p. 19 ff, Pl. IV, Figs. 22 to 24.

<sup>5</sup> Schwalbe *Nervenlehre*, p. 533.

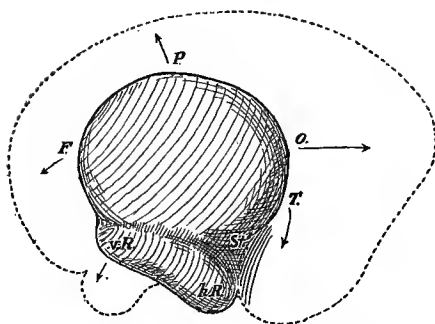


Diagram for the representation of the relations of the anterior and posterior olfactory lobes (v.R. and h.R.) to each other and to the lobes of the cerebral hemispheres in different stages of development.

F. Location of Lobus frontalis.

O. Location of Lobus occipitalis.

P. Location of Lobus parietalis.

T. Location of Lobus temporalis.

### Organa sensuum.

**Spatia zonularia.** In regard to the mode of insertion of the fibres of the *Zonula Zinnii* into the lenticular capsule and the spaces lying between the fibres (formerly described as *Canales Petiti*) compare the paper recently published by Schön.<sup>6</sup>

**Recessus memb. tymp. superior** is the median tympanic recess of W. Krause<sup>7</sup> or upper tympanic recess of Prussak. This is the space over the *Processus brevis* of the *Malleus* between the *Membrane flaccida* and the neck of the *Malleus*, and under the *Lig. mallei externum*. Anteriorly the space is cut off from the anterior tympanic recess while posteriorly it is connected with the posterior recess.<sup>8</sup>

**Tuberculum and Apex auriculæ** [Darwini]. Through the investigations of G. Schwalbe the uncertainty was removed which until recently existed in regard to these structures. Schwalbe has especially demonstrated that Darwin's prominence of the ear corresponds to the apex of the ear in mammals and that longitudinal measurements, morphologically comparable, must be made not with reference to the highest point of the external ear, but with reference to Darwin's corner (the *Apex verus* of Schwalbe). The point appearing occasionally at the highest point of the ear is designated by Schwalbe in reference to its rôle in antique art as *Satyr's point*.<sup>9</sup>

<sup>6</sup> Schön, *Zonula and Ora serrata*. *Anatomischer Anzeiger*, Vol. X, p. 360 ff.

<sup>7</sup> *Anatomie II*, p. 331.

<sup>8</sup> Compare the illustration in Schwalbe's *Anatomie der Sinnesorgane*. Erlangen 1887, p. 513.

<sup>9</sup> Compare Schwalbe's *Beiträge zur Anthropologie des Ohres*. Separate reprint from the *Festschrift* for R. Virchow 1891, Vol. I, in which there are found statistics concerning the frequency of occurrence of Darwin's apex.

**Pili.** The significance of the words *Lanugo*, *Capilli*, etc., may be taken for granted. **Vibrissae** are the hairs of the nose, **Tragi** the hairs of the external auditory canal, **Hirci** the axillary hairs.

#### CONCLUSION.

The Commission on nomenclature appointed by the Anatomical Society now considers the task entrusted to it concluded and after its approval by the Society, the *Nomina anatomica* is to be recommended for general use.

Truly the work is not perfect, but the Commission may assert that it has worked assiduously and faithfully to complete it. Moreover, it is firmly convinced that by its general acceptance, our anatomical language compared with the present one, will gain considerably in simplicity and clearness. According to an estimate of Krause, our list contains about 4,500 names. One of the more complete textbooks has 10,000 of them, one-half of which are synonyms. If we may hope that our lists of names will be adopted unchanged for the use of schools, then this will be for the memory of the student equal to a saving of over 5,000 names. This by itself is not an immaterial result. If, with the adoption of the established names, it is brought about that the terms used have only one meaning, and if at the same time certain general principles regarding the formation and use of anatomical names have gained ground, then the results will be still more important.

It may be especially emphasized that our undertaking had to have in view the creation of a common language for schools. The progressing investigations need on their part often special terms for their lucidity, which in no way claim to enter into the use of schools. Many terms used in the explanation of new discoveries bear from the beginning the characteristics of provisional means of explanation. To restrict this language of the investigator in any way is entirely beyond our plan. Moreover, it is left to every teacher to use his own terms in his lectures, or on the other hand to omit such names of the lists which appear to him to be superfluous. But this much can and must be obtained, that the terms which we daily use and which we hand over to our students be simple and not ambiguous. This cannot be done without certain sacrifices on the part of the individual; any compromise expects such. He who has spoken all his life of a *M. cucullaris* has to become used to the *M. trapezius*. More serious difficulties, which cannot be overcome by good will alone, arise only where existing names prove to be incompatible with the scientific convictions of the individual. We hope that after all the care which was taken in the choice of the names, the number of such names which cannot be generally accepted will be only a limited one. Without being

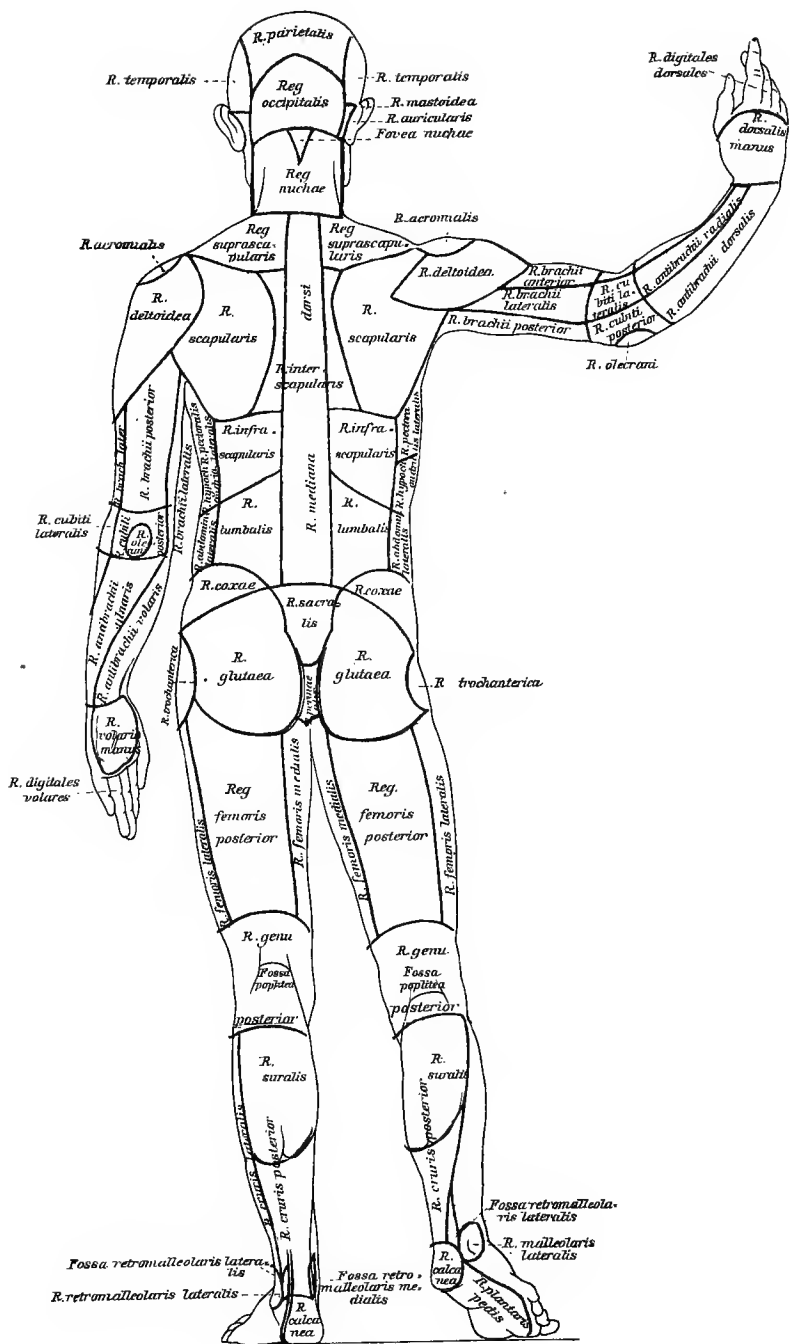
over sanguine we believe that we should be able to reduce the number of names, which will not receive general acceptance, to a small number, let us say a hundred or at most a few hundred. This would be, in comparison to the present conditions at any rate, a very fortunate result, and such a residuum may in time be totally assimilated.

It is especially necessary to recognize fundamental rules for the further growth of the anatomical language. But a harmonious growth will no longer offer any special difficulties if once proper foundations are laid.

And herewith the *Nomina anatomica* may be most urgently recommended to the good will of each one interested. There exists in scientific life a common spirit, the manifestation of which not only brings honor and satisfaction to the individual, but also progress and prosperity to all. The acceptance of a common language for schools must be interpreted and achieved as such an act of scientific public spirit.











## BIOGRAPHICAL SKETCHES

BY ROY L. MOODIE.

The plan of this work is: 1. Name in full. 2. Nationality, profession, place and date of birth and death; academic positions held, associates, important discoveries and interests. 3. Full titles of chief anatomical writings, with place and date of publication, and number of editions. 4. Anatomical structures usually associated with the name of the author. 5. Biographical sketches and memoirs.

The following abbreviations refer to the works occasionally cited throughout the following pages. Töply has given a good bibliography of the history of anatomy.

- Bio. Med.**—Dictionaire des Sciences Médicales — BIOGRAPHIE MÉDICALE, Paris, C. L. F. Panckoucke, Éditeur, MDCCCXX, 7 vols., in-8°.
- Carus.**—Geschichte der Zoologie, bis auf Joh. Mueller und Charl. Darwin, by J. Victor Carus, München, 1872, in-8°.
- Choulant.**—Geschichte und Bibliographie der anatomischen Abbildung, Leipzig, 1852, by Dr. Ludwig Choulant, in-4°.
- Ency. Brit.**—Encyclopedia Britannica. R. S. Peale Reprint, 9th edition, 1892, 25 vols. in-4°. Article — Anatomy, by Sir William Turner.
- Gar.**—An Introduction to the History of Medicine, by Fielding H. Garrison, Philadelphia, 1914, in-8°.
- Gurlt-Hirsch.**—Biographisches Lexikon hervorragender Aertze aller Zeiten und Völker, von E. Gurlt, herausgegeben von August Hirsch, 1884-88, 6 vols. in-8°.
- Hae.**—Lehrbuch der Geschichte der Medicin und der epidemischen Krankheiten, by Heinrich Haeser, Jena, 1881, 3 vols. in-8°.
- Her.**—Die Entwicklungslehre im 16. bis 18. Jahrhundert, in: Handbuch der vergleichenden und experimentellen Entwicklungslehre der Wirbeltiere. Bd. 1, th. 1, h. 1, pp. 1-85, with extensive bibliographies and portrait of von Baer, by Oscar Hertwig, Jena, 1906, in-8°.
- Locy.**—Biology and its Makers, by William A. Locy, New York, 1908, in-8°.
- Med. Lib.**—Medical Library and Historical Journal, Brooklyn and New York, vols. 1-5, 1903-1907, in-8°.
- N. & P.**—Handbuch der Geschichte der Medizin, Begründet von Th. Puschmann, herausgegeben von Neuberger und Pagel, Jena, 1902, 3 vols. in-8°.
- Pagel.**—Biographisches Lexikon hervorragender Aertze des XIX. Jahrhunderts, von Julius L. Pagel, Berlin und Wien, 1901, in-8°.
- Pagel and Sudhoff.**—J. L. Pagel's Einführung in die Geschichte der Medizin in 25 akademischen Vorlesungen. Zweite Auflage. Durchgesehen, teilweise umgearbeitet und auf den heutigen Stand gebracht von Karl Sudhoff in Leipzig. Berlin, 1915, in-8°.
- Portal.**—Histoire de l'anatomie et de la chirurgie, Paris, 1770-1773, 6 tomes, in-8°, by Antoine Baron Portal.
- Töply.**—Geschichte der Anatomie, von Robert Ritter von Töply. In "Handbuch der Geschichte der Medizin." Begründet von Th. Puschmann. herausgegeben von Max Neuberger und Julius Pagel, Bd. II, pp. 155-326, Jena, 1903, in-8°.
- Wieger.**—Geschichte der Medizin und ihrer Lehranstalten in Strassburg vom Jahre 1497 bis zum Jahre 1872, von Friedrich Wieger, Strassburg, 1885, in-4°.
- Winckel.**—Ein Ueberblick ueber die Geschichte der Gynäkologie von den ältesten Zeiten bis zum Ende des XIX. Jahrhunderts. In "Handbuch der Geburtshilfe," von F. von Winckel, Bd. I, h. 1, pp. 1-83, with portraits.

**Abano, Pietro di** (Petrus Aponensis, Pierre d'Abano, Apono, Peter von Abano, Petrus d'Abano). An Italian physician and philosopher, 1250-1315. In his treatise "Conciliator differentiarum philosophorum," of 1496, first published in 1472, there is the first printed illustration of the abdominal muscles. This figure was evidently made with the help of a dissection. This medico-philosophical work had, up to 1615, gone through fifteen editions in folio.

Abano studied medicine and mathematics in Paris, where he was granted the degree of doctor in philosophy and medicine. During his student days the sciences were but little cultivated in Italy, though after his return his learning was recognized. He served with distinction for many years as professor of medicine in the University of Padua; a chair especially created for him. He is the author of several other works besides his famous "Conciliator."

His chief interests were in attempting to reconcile the different ideas of medicine and philosophy, and in this endeavor his studies ranged such a wide field that he became known as a heretic. He was tried before the inquisition but was acquitted. At a second trial, after his death, his body was condemned to be burned. His friends, however, fearing this had secretly removed his body, so it was burned in effigy.

Little is known of his private life. He seems to have been an ardent student and is known to have travelled to Constantinople for the purpose of learning the Greek language.

*Conciliator differentiarum philosophorum et præcipuè medicorum. Mantoue, 1472, in folio. Reprinted in 1476 and 1483 at Venice; at Padua in 1490; at Pavia in 1490; at Venice in 1496, 1548, 1555, 1565, 1590, 1595, in folio and at Giessen in 1615 in-4°.*

*De venenis, eorumque remediis liber, Mantoue, 1472, in folio. Reprinted 8 times before 1679.*

**Abdollarif** (Abdollarif, Abdollarif, Abd-ul-Latif, Abdel Lathyf). A celebrated Arabian physician and traveller, and one of the most voluminous writers of his time, was born at Bagdad in 1162, and died at the same place in 1231. He early became well versed in grammar, philology, jurisprudence, and poetry and later turned to philosophy and medicine. He went to Damascus to enjoy the society of the learned, and later traveled extensively in Egypt and wrote accounts of the famine caused by the inundation of the Nile in 1200, and described the monuments and people of that country. He was one of the circle of learned men Saladin gathered around him in Jerusalem.

Abdollarif taught medicine and philosophy at Cairo and at Damascus for a number of years. His love of travel led him in his old age to visit different parts of Armenia and Asia Minor. While in Egypt he was studying some human bones in a cemetery when he ascertained that the

lower jaw is formed of one piece; that the sacrum, though sometimes composed of several, is most generally of one; and that Galen, in whose writings he, in common with other Arabian physicians of his time, was well versed, is mistaken when he asserts that these bones are not single. He is thus the only one of the Arabians, including Avicenna, Abulcasis, and Averroës, who did more than copy the writings of Galen and Hippocrates.

**Abeille**, Scipion. A military surgeon, born in Riez, . . . -1697. He served in the field hospital in Flanders in the latter half of the seventeenth century. He attempted a series of volumes of a facetious turn on the anatomy of the various parts of the body, written in verse. He did not live to complete the series, but the following parts are known:

*Nouvelle histoire des os, selon les anciens et les modernes, enrichié de vers, Paris, 1685, in-12°.* This is an attempt to describe poetically the various skeletal elements of the body, based on the work of Dulaurens.

*Anatomie de la tête et de ses parties, Paris, 1689, in-12°.*  
The *Biographie Médicale* has the following example of his poetry:

Ces dents que l'âge gâte, au moment qu'il les touche,  
Sont par leur juste arrangement  
Le plus agréable ornement  
D'une belle petite bouche.  
Tout le monde s'en fait honneur,  
Et je dis, sans leur faire outrage,  
Que rien n' efface tant les attraits du visage  
Que leur carie et leur noirceur.

**Abel**, Clerk. An English medical naturalist who accompanied the British embassy to China in 1816 and after his return published a report which is of interest to biologists:

*Personal observations made during the progress of the British embassy through China, and on its voyage to and from that country in the years 1816-17, London, in-4°.*

**Abernethy**, John. A London surgeon and teacher of anatomy, 1764-1831. He was a professor of surgery and anatomy to the Royal College of Surgeons (1814). In George Macilwain's biographical memoir of Abernethy (New York, 1853, in-8°) there is given an interesting account of the methods of anatomical teaching in the early days of the 19th century. Abernethy did some investigative work on the absorbents (lymphatics) and published an account of his studies in the Philosophical Transactions of the Royal Society.

*Fascia of=*subperitoneal in front of the *A. ext. il.*

**Achilles** was a Greek warrior, whose parents were so desirous for his safety that he was dipped in the river Styx, all but his heel by

which he was held, and came out impervious to wounds. He was killed at Troy by the arrow of Paris, which struck him in his only vulnerable spot.

*Tendo Achillis*==*Tendo calcaneus*.

**Achillini** (Achillinus), Alessandro. An Italian philosopher and anatomist, 1463-1512. He was born at Bologna on the 29th of October (1463). He studied first in his own country, then went to Paris where he spent three years. It is not known where he received his degree. In 1485, he was appointed, at the age of 22, to the professorship of philosophy, and it is said, of medicine, at Bologna. He retained this post until 1506, when he was nominated to a professorship at Padua, with an annual honorarium of 250 ducats.

Achillini was celebrated as a lecturer and became known as the second Aristotle. He and Mundinus were the first at Bologna to avail themselves of the permission given by Frederick II to dissect dead bodies. He was greatly esteemed by his contemporaries and was called *the great Achillinus*, especially when referring to his ability in disputation.

He was a pupil and later a commentator of Mundinus (Mondino), and though a great admirer of the Arabian philosophy he pursued anatomy with such fervor that his name will be always known as the first who described the tympanic bones, the *incus* and *stapes*. In 1503 he showed that the tarsus consists of seven bones; he rediscovered the fornix and the infundibulum; and he was fortunate enough to observe the course of the cerebral cavities (Ventriculi cerebri) into the inferior cornua. He mentions the orifices of Wharton's ducts (Ductus submaxillares (Whartoni)). He knew the ileo-caecal valve and his descriptions of the duodenum, ileum, and colon show that he was better acquainted with the site and disposition of these viscera than any of his predecessors or contemporaries.

The philosophical writings of Achillini have been collected into a single volume, with the following title:

*A. Achillini opera omnia in unum collecta, cum annotationibus, Venice, 1508, in folio.*

His anatomical writings have been issued with the following titles:

*Corporis humani anatomia, Venice, 1516, in-4°.* *In Mundini Anatomiam annotationes, Bologna, 1524, in-4°.* *Anatomicae annotationes magni Al. Achillini Bononiensis: editae per fratrem Joh. Philotheum, et impressae Bononiae, per Hieronymum de Benedictis, anno 1520, die 23 septembri, in small-4°.*

**Ackermann**, Jacob Fidelis. German anatomist and botanist, 1765-1815. Studied in Würzburg, then in Mainz; later student of P.

Frank, Scarpa, Volta and Nessi in Pavia, 1796-98. Professor of anatomy as successor to Soemmering in Mainz. Professor of anatomy and surgery in Jena as successor to Loder, 1804. Professor of anatomy in Heidelberg, 1805. Professor of botany, 1812. An opponent of Gall's teaching concerning the brain, skull and organs. Improved the anatomical institute in Heidelberg.

*Ueber die körperliche Verschiedenheit des Mannes von Weibe ausser der Geschlechtsteilen.*

**Acrel** (Acrell, Accrell), Olof. A Swedish surgeon, 1717-1807. He was born near Stockholm, and was early destined to the ministry by his father. Acrel, however, did not take kindly to theological studies and began the study of medicine in 1732 at Upsala under Linné, Rosen, Roberg and Prutz. He translated as a student the works of Boerhaave. During the war with Russia he served as a military surgeon and was subsequently raised to the nobility by the king. He had traveled widely and was well versed in anatomy and surgery. He has published a number of works on surgery in Swedish, which are of interest for the anatomical knowledge displayed. He is known in anatomical terminology for the ganglion on the extensor tendon of the wrist.

**Adolph**, Jean Traugott. A German physician and anatomist, 1728-1771. He was born at Hirschberg on the fourth of December (1728). He received his doctorate in 1758 and in 1760 was made professor in ordinary of surgery and anatomy at the University of Helmstaedt. In 1768 he accepted the chair of surgery, anatomy and physiology at the University of Altdorf. He has written a number of dissertations on anatomy and surgery, none of them of importance. They are listed in the *Biographie Médicale*.

**Aeby**, Christoph Theodor. German anatomist and anthropologist, 1835-1885. Professor of anatomy in Bern, 1863, and in Prag, 1884. Professor of anatomy in Basel, succeeded by Rabl.

*Eine neue Methode zur Bestimmung der Schädelform von Menschen und Säugethieren. Braunschweig, 1863. Der Bau des menschlichen Körpers mit besonderer Rücksicht auf seine morphologische und physiologische Bedeutung, Leipzig, 1871.*

*Lobus trapezoides. M. recti labii prop.*

**Aelien** was a Greek author whose work, "*Historiae animalium, sive de animalium solertiâ ac proprietatibus libri XVII*," was translated from the Greek by Conrad Gesner and published by him in 1556 at Zurich in folio. This work is a compilation, the author deriving much

of his information from Aristotle and Pliny, and giving accounts of numerous travelers in Africa and Egypt.

**Aetius** of Amida, in Mesopotamia, was a Greek physician who lived during the early part of the 6th century (502-575 A. D.). He studied at Alexandria and was physician to the court at Constantinople. He was a compiler of the works of previous authors, his compilations being made with great care, and accompanied by his own observations. Eight of his books were issued from the Aldine press in Venice in 1534. Although Aetius made no advances in anatomy his works are of interest in that they contain the anatomical writings of previous authors. His writings are discussed in detail by the *Biographie Médicale*.

**Agassiz, Alexander.** An American zoologist and embryologist, son of Louis Agassiz, 1835-1910. Assistant in the Museum of Comparative Zoology at Harvard, 1860-65. He later assumed charge of copper mining in the Lake Superior region. He returned in 1874 to the curatorship of the Museum of Comparative Zoology; director 1902-1910. During the latter years he undertook a great many exploring and collecting expeditions which resulted in many contributions to geology, zoology and botany. Founded a biological station at Newport. He is the author of a number of important memoirs.

*Embryology of the starfishes, Boston, 1865. On the development of the flounders, 1878. Young stages of osseous fishes, 1878. Embryology of the Aenophora, 1874.*

*Biography: Letters and Recollections of Alexander Agassiz, Edited by G. R. Agassiz. Boston, 1913, in-8°.*

**Agassiz, Louis-Jean-Rudolph.** A Swiss-American zoologist and paleontologist; founder of the Museum of Comparative Zoology at Harvard University. Born at Motiers, Switzerland (1807). Lived in United States from 1846-1873. He studied comparative anatomy in Zürich, Heidelberg, and München. In 1831, professor of natural history at Neufchatel. In 1846 he came to North America where he was successively professor in Boston, Charleston and Cambridge. At the latter place he was professor of zoology and geology at Harvard University, 1847-1873. Author of numerous contributions to zoology, paleontology and geology. He was an active man in the scientific work of his time. Conducted many exploring expeditions, the results of which are stored in the Harvard Museum of Comparative Zoology. Founded at the island of Penikese the first biological station in North America. He was greatly interested in the fishes and published extensively on fossil fishes especially.

*Recherches sur les poissons fossiles, 5 vols, 1843-1844. Bibliographia Zoologica et Geologica, 1854. Contributions to the*

*Natural History of the United States: Embryology of the Testudinata, vol. 1, pt. 2, 1857. Essay on Classification, 1859.*

*Biography: Life and Correspondence, edited by his wife, Elizabeth C. Agassiz, 2 vols, 1885; Life, Letters and Works, by Jules Marcou, 2 vols, 1896.*

**Agnew, D. Hayes.** An American physician, 1818–1892. Studied in the University of Pennsylvania, where he later became professor of clinical surgery and medicine. He was interested in the development of the Philadelphia School of Anatomy, and brought out in 1868 a new arrangement of the London Dissector, which contained a concise account of the muscles, blood vessels, nerves, viscera and ligaments.

**Aicholtz (Aichholtz), Johann.** An Austrian physician, 1520–1588. He succeeded Latz in the Collegium Albertinum of Anatomy in Vienna and from 1558–80 he held demonstrations in anatomy.

**Akenside, Mark.** A British poet, born at Newcastle-on-Tyne on November 9, 1721. He attained much fame as a physician and a poet, and died on June 23, 1770. He studied theology at the University of Edinburgh for one session, then went to Leyden to study medicine, and it was there that he wrote his famous thesis on the foetus (*Dissertatio de ortu et incremento foetus humani, Leyden, 1744, in-4°*). In 1753 the University of Cambridge bestowed on him the degree of doctor of medicine. He became a fellow of the College of Physicians in 1754. He is the author of one anatomical work entitled: *Observations on the origin and use of the lymphatic vessels, London, 1757, in-8°*, which Monro the younger criticised and in which he pointed out what he thought were inaccuracies. In 1756 Akenside read the Croonian lectures. He was physician in chief to St. Thomas' Hospital and a member of the royal society. He is more widely known as the author of "*The Pleasures of the Imagination*," published in 1744.

*Biography: Life, Writings and Genius of Akenside by Bucke, 1832. Biographie Médicale; Encyclopedia Britannica.*

**Albert.** See **Albertus Magnus.**

**Alberti, Michel.** A physician and lawyer of Halle, 1682–1757. He studied theology at Altdorf, and became versed in medicine, natural history, philosophy and jurisprudence. Between 1703 and 1755, Alberti published upwards of 300 contributions, some of which make brief references to the anatomical knowledge of his day. The *Biographie Médicale* lists these publications and gives short discussions of the more important ones.

**Alberti, Solomon.** A German physician and anatomist, 1540–1600. He is said by Haller to have been a student of Fabricius ab Aquapendente, though this is denied by the *Biographie Médicale*. Haller also attributes to him the distinction of first describing and figuring the valve of the colon. He is generally accredited with a good description of the papillæ of the kidneys and of the human ear in his: *Historia plerarumque humani corporis partium membratim scripta, Wittemberg, 1583, in-8°*. There are some new plates, especially on the ear and kidneys, but most of the illustrations are borrowed from Vesalius.

**Albertini, Ippolito Francisco.** An Italian anatomist and physician, 1662–1746. He was born at Crevalcore in the territory of Bologna. He studied medicine under Malpighi, and later became professor of medicine in Bologna. He later renounced medicine to enter the service of the church. He has left a work on the heart which is of some anatomical interest. It is entitled: *Animadversiones super quibusdam difficultis respirationis vitiis, a laesa cordis et præcordiorum structura pendentibus. Bologna, 1748*. This work has been translated into French and German.

**Albertus Magnus** (known also as Albert the Great, Albert von Bollstädt, Albertus Teuthonicus, Frater Albertus de Colonia, Albertus Ratisbonensis, and Albertus Grotus), was a celebrated German philosopher, 1193–1280. He received instruction in the writings of Aristotle at Padua, and became a member of the Dominican order in 1223. He taught and preached at Cologne, Regensburg, Freiburg, Strassburg, and Hildesheim. His voluminous writings on logic, physic, metaphysics, ethics, politics, natural history and theology were published at Lyon in 21 folio volumes by the Dominican Peter Jammy, with the title: "*Alberti Magni opera omnia*." He systematized the whole of Aristotle's works as they were presented to him in Latin translations with the notes of the Arabian commentators. The anatomical term *Vena papillaris* is accredited to this writer.

*Biography: Albertus Magnus, sein Leben und seine Wissenschaft, 1857, by Joachim Sighart.*

**Albin, Eleazar.** An English artist who published, from 1731 to 1794, handsomely illustrated volumes on birds, insects, and fish.

**Albini, Giuseppe.** An Italian anatomist and physiologist, 1830—. He was born at Milan. He studied at Pavia in 1845, and in 1846–7 at the anatomical institute of Panizza. He was assistant to Bruecke at Vienna, after which he spent some time in visiting various universities. In 1857 he was professor of physiology at Krakau, then



at Parma and later he was called to the University of Naples. From his laboratory here many of his students issued numerous important publications. Albinus, himself, wrote his contributions in Italian and in German. He is the discoverer of minute nodules on the margin of the mitral and tricuspid valves of the heart (*Noduli Albini*), sometimes present in the newborn.

**Albinus, Bernhard.** A German physician, 1653-1721. Great grandson of the celebrated historian of Saxony, Pierre Albinus. He, himself, was the father of one of the greatest anatomists known, and became recognized as one of the most famous physicians of his century. He was born on the 7th of June, 1653, at Dessau, in the principality of Anhalt. The true name of the family, *Weiss*, had for three generations been latinized, following a common custom of the times. Albinus studied medicine in Leyden with Charles Drelincourt, Theodore Croonen, and Luc Schacht, and there he received his doctorate in May, 1676. The year following he returned from Dessau to Leyden to perfect himself in medicine and mathematics. At the end of three years he returned to Dessau, visiting Holland, France and Lorraine in the mean time. In 1680 he was appointed to the chair of medicine at Frankfort-an-der-Oder where for many years his lectures attracted considerable attention. Although he was offered brilliant inducements at Goettingen and Leyden the Elector Frederick would not consent to his leaving Frankfort. Finally, in 1702, he was permitted to go to Leyden where he continued his duties as professor in the University of Leyden for nearly twenty years. Here he was the founder of a professorial dynasty which continued for over three-quarters of a century. Boerhaave, who pronounced his eulogy, said that Albinus was one of the most able and best informed teachers of medicine who had ever lived. His anatomical studies are relatively unimportant in themselves, but they attain great interest in view of their influence on his son, Bernhard Siegfried. The following publications of the elder Albinus may be mentioned: "*Dissertatio de venenis, Frankfort-am-Oder, 1682, in-4°; Dissertatio de minimis corporis humani meatibus, Frankfort-am-Oder, 1685, in-4°; Dissertatio de corpusculis in sanguine contentis, Frankfort-am-Oder, 1688, in-4°.*"

**Albinus, Bernhard Siegfried.** A German anatomist, 1697-1770. One of the greatest anatomists who has honored medicine with his learning. He was not less illustrious in Germany, where he was born, than in Holland, the country of his adoption. He was born on February 24th (1697) at Frankfort-an-der-Oder. Here he studied the humanities and philosophy in the school of his famous father. His first teachers in medicine were Bidloo, Rau, Decker, Boerhaave, and Ruysch. He early

became attracted to the study of anatomy and studied especially with Ruysch who taught him the technique of his wonderful injections, which had been carried to great perfection. On the advice of his father he went, in 1718, to Paris to study with Winslow and Sénac. He had hoped to pass some years in Paris, but at the end of six months the curators of the University of Leyden, on the retirement of Rau, called him back to Holland as professor extraordinary of surgery and anatomy. Shortly after reaching Holland the university gave him his doctorate, without either examination or thesis, thus illustrating the great confidence they placed in his promised ability. In this they were not disappointed. The inaugural address ("*Oratio inauguralis de anatome comparata*") which Albinus delivered, clearly showed that his was a master mind. In 1721 he succeeded his father, on the recommendation of Boerhaave, with the title of professor in ordinary. In 1745 he was given the chair of therapeutics. He devoted fifty years to his work at the University of Leyden, closing his life's work at the age of seventy-three.

Albinus gave a new direction to the study of anatomy. This was the necessary outcome of the impulse given by Boerhaave to the study of medicine. His anatomical descriptions are clear, and he employed the best artistic talent for the illustration of his works. The art of anatomical illustration had remained stationary since the work of Vesalius and Eustachius, but Albinus brought it to greater perfection, especially in his "*Historia musculorum hominis, Leyden, 1734, in-4°*," on which his fame as an anatomist rests. In the preface Albinus states that he made in the human body all of the recorded observations himself. Haller considered this work one of the greatest of its kind. The work was twice reprinted and translated into French by Tarin, in 1753.

The influence of Albinus in bringing forward the importance of human anatomy in medicine was very great. He published an anatomical guide for students in 1746, with the title: *De ossibus corporis humani ad auditores suos libellus*. He is the author also of: *Tabulæ ossium humanorum*, Leyden, 1753, in giant folio; *Tabulæ vasis chyli ferri cum vena azygos, arteriis intercostalibus, aliisque vicinis partibus*, Leyden, 1751, in regal folio. The plates of this magnificent work cost 24,000 florins. Albinus edited also the works of Vesalius, of Harvey, and of Fabricius ab Aquapendente, as well as the anatomical plates of Eustachius.

*Fossa innominata (Scapha). M. interosseus prior indicis. M. serratus. M. spinalis cervicis. Processus acutus heliis.*

**Albinus, Christian Bernhard.** A German physician, born in Holland, 1696-1752. Third son of Bernhard Albinus. He became a professor of medicine in the University of Utrecht in 1747. His only im-

portant publication of anatomical interest is: *De anatome errores detegente in medicina, oratio, Utrecht, 1723, in-4°*, in which he shows the importance of dissecting the human body especially in discovering the causes and effects of disease.

**Albinus**, Friedrich Bernhard. A German anatomist and surgeon, 1715-1778. Second son of Bernhard Albinus. He succeeded his brother, Bernhard Siegfried, in the chair of anatomy and surgery at the University of Leyden in 1770. His writings are not important from an anatomical standpoint.

**Albrecht**, Johann Wilhelm. A German anatomist, 1703-1736. He studied medicine in Jena with Wedel, Teichmeyer and Hamberger; and at Paris and Strassburg. He was called from Erford to Goettingen in 1734, as professor of anatomy, surgery and botany. He was the predecessor to Albrecht von Haller. His writings are rather meager for his day, but he has left two which possess some anatomical interest: *Observationes anatomicæ circâ duo cadavera masculina, Erford 1730; Tractatus de tempestate, cui adjecta observatio circâ vasa lymphatica ventriculi instituta, Erford 1731, in-8°*.

**Albrecht**, Paul. A comparative anatomist of Hamburg, 1851-1894. He is known for his discoveries in comparative osteology. He is the author of some 75 studies in comparative anatomy of which the following may be mentioned: *Sur la valeur morphologique de l'articulation mandibulaire, Bruxelles, 1885; Sur les quatre os maxillaires, Bruxelles, 1885*.

**Albucasis** (Abulcasis, Albukaism, Abulquasim, Abulcasem, Abou' Kasem Khalaf ben Abras al Zaharavi, Bucasis, Bulcasis Galaf, Alsaharavius, Alsaravius, Alscharavius, Alsharanus). A famous Arabian surgeon of Spain, born in El-Zahra, near Cordova, in 912; the exact date of his death being uncertain though usually placed at 1031. The first part of his work "*Altasrif (at-tasrif)*," which was translated into Latin in 1519 with the title: *Liber theoreticæ nec non practicæ Alsaharavii*, contains some anatomical portions, chiefly following Galen.

**Alcana Mosali**. An Armenian physician who lived about the middle of the thirteenth century, and was practicing medicine in Bagdad when that city was taken by the Tartars in 1258. He devoted himself especially to ophthalmology, and has left a treatise: "*De passionibus oculorum liber*," which is a compilation of the anatomical and medical nature of the eye from Arabian, Chaldean, Jewish and Indian sources.

**Alcmeon** (Alkmaion, Alcman). A Greek writer of Crotona, ca. 550–500 B. C. He was one of the disciples of Pythagoras, and made philosophy the major part of his life's interests, although he was much interested in medicine. He is reputed to have been the first to write on physiological subjects and is accredited with the discovery of the optic nerve and the observation of the Eustachian tube in the goat.

**Alcock, Thomas.** An English physician, 1784–1833. Surgeon to St. James' workhouse in London, 1813–1828.

*Canal of*—a space in the outer fascial wall of the ischiorectal fossa.

**Aldrovandi, Ulysse.** An Italian naturalist, 1522–1605. He was one of the most laborious compilers and writers in natural history of the early ages. He was born at Bologna on the 11th of September (1522), of a very distinguished family. Under the influence of Rondelet his attention was attracted to Natural History and to this field of study he directed his attention, with the result that he became known as the modern Pliny. His writings, which are enormous, show a complete lack of any critical faculty on the part of the author. Many fantastic tales are included with the actual facts of nature as he represents them. At Bologna he was granted the degree of doctor of medicine in 1553, and the year following was appointed to the chair of logic, then of philosophy, then botany. His studies were well supported by the senate of Bologna, and they assisted in the publication of his works in several folio volumes. All of his works on birds, insects, mammals and monsters, which were written in Latin with long and cumbersome titles, were several times reprinted during the 17th century. The museum founded by Aldrovandi in Bologna still exists.

**Ali Abbas** (Ali Ibn al-Abbas al-Majus), (Haly Abbas). A distinguished Persian physician of the Arabic period. He lived during the tenth century, ending his career in 994. His chief work is al-Maliki, Liber Regis or the Kingly Book. It is chiefly interesting from the arrangement of the anatomical discussions in the section on ophthalmology.

**Ali Ben Isa** (Jesu Haly) was one of the most important of the Arabian ophthalmologists, who lived in Bagdad in the first half of the eleventh century. His work on ophthalmology was in general use for several centuries and is still in use among the Arabs. This work in-

cludes a section on the anatomy and physiology of the eye, largely following Galen.

*Biography: Erinnerungsbuch für Augenärzte, aus arabischen Handschriften übersetzt und erläutert, Hirschberg und Lippert.*

**Allen, Harrison A.** An American physician and anatomist, 1841–1897. He studied with Joseph Leidy in the University of Pennsylvania. He served in the Confederate Army during the Civil War and afterwards was professor of comparative anatomy and medical zoology in the medical department of the University of Pennsylvania, 1867. From 1875–1885 he was professor of physiology in the University of Pennsylvania, after serving in the Philadelphia Dental College as professor of anatomy and surgery. In 1894 he was the first director of the Wistar Institute of Anatomy and Biology in Philadelphia. He has written the following contributions: *Outlines of comparative anatomy and medical zoology, 1869; Studies in the facial region, 1874; On the mechanism of joints, 1876.*

*Biography: Science, Feby. 25, 1898; Proc. 10th Ann. Meeting Assn. Amer. Anatomists, 1897, pp. 12–26, with portrait and bibliography.*

**Alsaharavius.** See Albucasis.

**Alten, Hans von.** A German zoologist, 1887–1915. He was a student of Weismann, and while studying under his direction became greatly interested in the anatomy and phylogeny of the brain of the Hymenoptera, and studied especially the comparative anatomy of the brains of the various forms, such as the workers, soldiers, drones, etc., which form a hymenopteran community. He was an assistant to Robert Wiedersheim in the anatomical institute at Freiberg in Bern. His promising studies were cut short by an early death.

*Anatomischer Anzeiger, Bd. 48, no. 4, pp. 109–112, 1915*

**Altmann, Richard.** A German histologist, 1852–1900. Born in Eylau, West Prussia; studied in Greifswald, Königsberg, and Marburg, 1872; 1879 as assistant and 1890 as prosector in Leipzig. In 1887–1900 a. o. professor at the University of Leipzig, at the anatomical institute.

*Granula Altmanni.*

*Biography: Anatomischer Anzeiger, Bd. 18, pp. 589–590, 1900.*

**Ameghino, Florentino.** A South American paleontologist, 1854–1911. The most distinguished student of the fossil mammalia of South America, he early became interested in the rich faunas of the Argentine formations and in 1875 published his first contribution to the paleontology

of this region, which has since yielded many otherwise unknown groups of mammals. Ameghino's first paper dealt with the occurrence of human remains and implements mingled with quaternary mammals of Argentine. That his early interest continued for many years is shown by a paper, published in 1911, reviewing the entire subject of fossil man in South America up to the year of his death. Ameghino accomplished an amazing amount of work in the face of the direst difficulties, supporting his researches by the proceeds of a small stationer's shop in La Plata, working in the rear of his shop, removed from library facilities, and for many years estranged from the naturalists of his own country. His work first received recognition in France. He was director of the Museo Nacional of Buenos Aires, 1902-1911; was a member of many learned societies at home and abroad and at his death was honored by a public funeral. The city erected a striking monument to him. He was a prolific writer, having published 179 contributions to vertebrate paleontology and geology, ranging from small papers of a few pages to large folios of many hundreds of pages, all richly illustrated.

*La Antigüedad del Hombre en el Plata, 2 vols., in-8°, 600 pp., 25 plates, and 700 figs., Paris and Buenos Aires, 1880-1881. Contribución al conocimiento de los mamíferos fósiles de la República Argentina, 2 vols., folio, 1060 pp. and over 2000 figures on 98 plates, 1889.*

*Biography: Doctor Florentino Ameghino, 1854-1911, by Juan B. Ambrosetti in "Anales del Museo Nacional de Historia Natural de Buenos Aires," Tomo xxii, (ser 3a, t. xv) p. vii-lxxii, 1912, with portrait; see also Pop. Sci. Monthly, March, 1912.*

**Ammon** (Amen, Amun). One of the chief of the Egyptian deities, supposed to be the same as Zeus or Jupiter. According to one form of the old Greek myth the gods of Greece, after being overpowered by the giants, escaped into Egypt, where Jupiter assumed the form of a ram, and was worshipped by the Egyptians as a deity.

*Ammon's horn*=*Hippocampus major*.

**Amusco**, Jean Valverde (Joan Valverde de Hamusco). A Spanish anatomist of the 16th century. He was born in the province of Palencia, Spain, and became one of the most celebrated anatomists of his country and time. He accompanied the cardinal Joan of Toledo to Rome as his physician, and while there he took lessons in anatomy under Realdo Colombo, who instructed him in the dissection of several human cadavers. In Spain the anatomy of Galen was still in the ascendancy. Amusco introduced the work of Vesalius and taught his great discoveries. He published in Spanish an abstract of the work of this author, combined with the opinions of Colombo (*Historia de la composicion del*

*cuervo humano, Rome, 1556, in folio*). This compilation has some original observations on the cutaneous veins, the uterus, and superficial muscles. On the advice of Colombo and Mercuriali, the author translated this work into Latin. It was also translated into Italian either by the author or by Antoine Tabo. The work was illustrated with 42 copper plates of figures drawn by Gaspard Bezerra. Amusco's great service to anatomy was in the introduction of the work of the great masters of anatomy into Spain, and to make known there the great discoveries of the 16th century.

**Amussat, Jean-Zulema.** A prominent surgeon in Paris, 1796-1856.  
*Valvula pylorica.*

**Anaxagoras** of Clazomenae, in Asia Minor (500-428 B. C.). He was initiated into the secrets of philosophy by Anaximenes and later had as disciples and admirers, Pericles, the poet Euripides, Socrates, and Themistocles. His influence is said to have been the turning point in the history of philosophy, and his doctrine of the origin of things from minute parts paved the way for the Atomic Theory, and was important in the development of medicine. Plutarch says he made dissections and he is reputed by others to have been the first to observe the ventricles of the brain. Anaxagoras regarded the passage of bile into the lungs, pleural cavities and blood vessels as the cause of the majority of fevers. Aristotle later combated this idea. The majority of the writings of Anaxagoras are lost, but certain fragments attributed to him have been collected by Schaubach (Leipzig, 1827).

**Anderlini, Lucius François.** A citizen of Bologna and surgeon in the city of Saint-Angelo in the duchy of Urbino, published a poem on anatomy entitled: *L'Anatomico in Parnasso, o sia compendio delle parti del corpo umano, exposto in versi. Pesaro, 1739, in-4°.*

**Andernach, Johann Winther von.** German physician, 1478-1574. Professor of medicine in Louvain, Strassburg, and Paris.  
*Ossicles of=Wormian bones.*

**Andersch, Karl Daniel.** A German anatomist, 1732-1777. A student of Haller's. He distinguished the 9th, 10th and 11th cerebral nerves as distinct structures.  
*Ganglion petrosum et temporale.*

**Andreae, Tobias.** A German physician, 1633-1685. He was born at Bremen. He was professor of medicine in Frankfort-an-der-Oder,

1674–1680. Predecessor to Albinus, the elder, and accredited with assisting him in the erection of the first anatomical theater. He was a great champion of the philosophy of Descartes.

**Angelo.** See **Michelangelo Buonarroti.**

**Anglicus, Bartholomaeus.** A physician who in 1485 published in his "*De proprietatibus rerum*," written about 1260, one of the first woodcuts illustrating anatomical subjects.

**Antommarchi (Antomarchi), Francesco.** An Italian physician, 1780–1838. Prosector to Paola Mascagni (1752–1815) the professor of anatomy at Florence. Antommarchi edited (1819) two of the artistic volumes of Mascagni's anatomies. He later was physician to Napoleon I at St. Helena, and reported on his autopsy. The works edited by Antommarchi are: *Prodromo della grande anatomia, seconda opera postuma di Paolo Mascagni, posta in ordine, e pubblicata a spese di una Societa innominata, da Francisco Antommarchi, Florence, 1819, petit in-folio.* This work was accompanied by a folio of 20 plates: *Tavole figurate di alcune parti organiche del corpo umano degli animali e dei vegetabili, esposte nel prodromo della grande anatomia di Paolo Mascagni, Florence, 1819, in-folio.* The plates were drawn and possibly engraved by Antoine Serantoni. They illustrate gross and microscopic features of the human body, and of animals and plants.

**Antonius della Torre, Marcus.** See **Marcantonio della Torre.**

**Aquapendente.** See **Fabricius, Hieronymus.**

**Aranzio (Arantius, Aranzi), Giulio Cesare (Jules-Cesar).** An Italian anatomist, 1530–1589. Physician to Pope Gregory XIII and one of the most celebrated anatomists of the 16th century. He was born at Bologna and studied under Vesalius at Padua, and later became one of his most distinguished followers. He took his doctorate in Bologna and a short time afterwards was elected professor of medicine and surgery at the University of Bologna at the age of 27. He retained this position for 32 years. In spite of his elevation in rank he continued to extend and confirm the work of Vesalius in human anatomy. We are indebted to Aranzio for the first correct account of the anatomy of the uterus during gestation and of the foetus and placenta (*De humano foetu opusculum, Bologna, 1564, in-8°*). This work was reprinted five times within the next century and was translated into French by François Plazzoni. He was the first to show, while yet a student (1548), that the



muscles of the eye do not, as was formerly imagined, arise from the dura mater, but from the margin of the optic cavity. He showed, in the work cited above, that the cotyledons on the placentae of animals are also to be found in the human placenta. He described distinctly the inferior horns of the ventricles of the brain and proposed the term *hippocampus*. He studied the anatomy of the heart and discovered the *ductus venosus*. His name is associated with the nodes on the semilunar valves of the heart (*Noduli valvulae semilunaris (Arantii)*). Aranzio came near the discovery of the circulation of the blood and made numerous observations on the valves of the heart and on the anastomoses of blood vessels which are interesting. He is the author of: *Observationes anatomicæ*, 1679, and of a work on surgery which shows considerable ability.

*Ductus venosus (Ligamentum venosum). Corpora (Noduli) valvularum semilunarium. Pes hippocampi. Ventriculus Arantii.*

**Aratos (Aratus).** A Greek physician, 315-240 B. C. He was the son of Athenodoros, a Greek sculptor. Aratos lived in Ephesus, Athens, and Macedonia. He is said to have been the first to write an embryology which formed part V of an extensive work in medicine, embracing pharmacology, natural history, etc. This was written in poetical form and is said to have been popular with the Romans. The embryology was entitled: *ἀνδρωπογονία*.

**Areteus (Aretaios),** the Cappadocian, who lived in the reign of Hadrian, although better known as a medical writer made some anatomical observations, chiefly on the lungs and pleura. He knew that the nerves take their origin in the head and that they are the organs of sensation. He maintained the glandular nature of the kidney, of which he gave an excellent description, and described the anastomosis of the capillary extremities of the vena cava with those of the portal vein.

*Biographie Médicale. Johns Hopkins University Hospital Bulletin, vol. 20, pp. 371-376, 1909.*

**Aristotle (Aristoteles),** the Asclepiad. (384-322 B. C.). Born at Stagira. He was a student of Plato and gave to medicine the beginnings of zoölogy, comparative anatomy, and embryology. He made many wonderful discoveries in many fields of biology: recognized the heart as the center of the vascular system, but did not distinguish between arteries and veins; recognized the ventricles of the brain and described the meninges; compared the structure of the lungs to that of a sponge; described the ureters; and it is said that he had some knowledge of the lymphatics. His observations in zoölogy, comparative anatomy and comparative embryology are of the very first importance. In embryology

he watched the development of the chick in the egg; knew that drone bees develop without previous fertilization and recognized the movements of the fetal heart. Those of his writings which deal with anatomy are: 1) *De Historia Animalium*; 2) *De Partibus Animalium*; 3) *De Generatione Animalium*. The writings of Aristotle have gone through uncounted editions and have been translated into nearly all languages.

*Diaphragma. Bregma. Trachea. Umbilicus.*

**Arlebout**, Isbrand Gisbert. A Dutch physician of the 18th century who is the author of: *Friderici Ruyschii operum anatomicorum index, Amsterdam, 1721-1725, in-4°*. This is said to be an indispensable guide to the works of Ruysch. He is also the author of: *Catalogus praeparatorium Ruyschii, Amsterdam, 1733, in-4°*.

**Arlt**, Carl Ferdinand, Ritter von. A Viennese ophthalmologist, 1812-1887. He was born at Obergraupen, near Tiplitz, Bohemia. He was professor of ophthalmology in the University of Prague, 1849-1856; the same in Vienna, 1883-1887. He was the founder of the *Archiv für Ophthalmologie*, and is known in anatomical literature for the *sinus of Arlt*, a depression on the internal surface of the lachrymal sac.

**Arnaud de Ronsil**, Georges. A French surgeon, a member of the academy of surgery and professor in the École de Saint-Come in Paris. He died in 1774. He was a member of the College of Surgeons in London, where he spent some time. He is the author of: *Treatise on hermaphrodites, London, 1750*, and *A Discourse on the Importance of Anatomy, London, 1767*.

**Arnold**, Friedrich. German anatomist and physiologist, 1803-1890. Student of Tiedemann. Professor and director of the anatomical institute at Zurich, 1835. Professor of anatomy and physiology in Freiburg, 1840; in Tübingen, 1845; Heidelberg, 1852-1876.

*Handbuch der Anatomie, Freiburg, 1845-51. Tabulae anatomicae, Turici. 1838-1843. Anatomische und physiologische Untersuchungen ueber das Auge des Menschen, Heidelberg, 1832. Icones nervorum capitis, Heidelberg, 1860. Kopfteil des vegetativen Nervensystems, Heidelberg.*

*Apex columellæ. Arteria phrenico-costalis;— tympanica anterior. Fasciculus Arnoldi. Fibrae arcuatae = orbitales chiasmatis. Foramen zygomatico-orbitale. Ganglion oticum;— intercrurale;— splanchnicum. Gubernaculum tali Lamina arctic. vera;— vitrea choroiden;— suprachoroiden. Ligamentum artic. pubis;— bifurcatum;— bigeminum;— carpi radiale;— carpi commune;— jugale oss. sesam. pedis;— laciniatum metatarsi;— sacrococcygeum;— transversarium posterius;— trigeminum;*

— *volare artic. carpi. Membrana externa et media vaginae. Musculus cephalopharyngeus; — levator humeri interior; — urethralis. Nervus Arnoldi; — cerebrialis; — tentorii. Nucleus nervus facialis. Processus nasalis. Pyramis Arnoldi. Ramus cervicalis; — communicans Arnoldi; — labiomentalis; — musculo-auricularis. Substantia ferruginea; — reticularis — Sulcus centralis modioli. Trabecula laminae spiralis. Tunica propria folliculi. Zona fasciculata; — reticularis. Zonula Arnoldi.*

**Arnold, Julius.** A German pathologic anatomist, 1835–1915. Professor of pathologic anatomy at University of Heidelberg, 1866–1915.

*Beiträge zur Entwicklungsgeschichte des Auges., 1874. Ueber Plasmastrukturen und ihre funktionelle Bedeutung, 1914.*

*Biography: Nekrolog von P. Ernst, in "Folio haematol." Leipzig, 1915, xix, Arch., 220–225.*

**Artédi, Pierre.** A Swedish naturalist, 1705–1735. He studied first at the college of Hernosand with the idea of entering ecclesiastic life, but soon abandoned this for natural history, and in 1728 went to Upsala to study with Linné, with whom he became very friendly and with whom he worked and studied until he was drowned in a canal near Amsterdam. He chose at first the study of minerals and mammals, but soon devoted his time to the study of fishes. He wrote a *Philosophia ichthyologica* which he dedicated to Linné and left a quantity of manuscript on ichthyology which was put into shape and published in Latin by Linné. His work was printed in 1738 and a more complete edition was brought out in 1789–92 by Jean Jules Walbaum. His work is important as being a pioneer investigation in ichthyology.

**Asch, Georges Thomas d'.** A Russian army surgeon, 1729–1807. He studied medicine at Goettingen under Haller and later became surgeon-in-chief to the Russian army and had the title of councilor to the emperor. His *Dissertatio inauguralis de primo pare nervorum medullae spinalis, Goettingen, 1750, in-4°*, is highly spoken of by Haller.

**Asellio** or **Aselli** (*Asellius*), **Gaspard** (*Gaspare*). An Italian anatomist, 1581–1626. He was born at Cremona, and passed the greater part of his life at Milan, where he was held in high esteem and where he died on the 24th of April, 1626, at the age of forty-five years. He taught anatomy and surgery at Pavia for some years with great success. He is said to have been a more modest man than the majority of the anatomists of the 16th century and made no great boasts of his discoveries, which were very important. In Pavia, on the 23rd of July, 1622, while demonstrating for some friends the recurrent nerves in a recently

fed dog, on opening the abdomen Asellio perceived a great number of white filaments ramifying throughout the mesentery. At the moment he took them for nerves but on cutting some of them he saw issue forth a milk-like fluid. He was overjoyed at the accidental discovery of the lacteal vessels of the mesentery. He soon recognized that these vessels are for the transmission of the chyle. He observed the origin of these vessels in the internal membrane of the intestine which contained the partly digested food. But he confused the entire subject by regarding the mesenteric lymph nodes as a pancreas, believing that the lacteal vessels arose in the pancreas and were transmitted to the liver. Asellio published in 1627 his important and epoch-making work describing this discovery, with the title: *De lactibus seu lacteis venis, quarto vasorum mesaraicorum genere, novo invento, Dissertatio; qua sententiae anatomicae multae, vel perperam receptae convelluntur, vel parum perceptae illustrantur, Milan, in-4°*. This work was three times reprinted, and in 1645 it was published in folio with the works of Spighel. It is also contained in the *Theatrum anatomicum* of Manget. The name of Asellio is connected with that of Thomas Bartholin and Olaus Rudbeck in distinguishing the nature of the chyliferous vessels of the mesentery and there has been considerable discussion as to what part each of these men played in this work.

*Pancreas of* = lymph glands in the mesentery.

**Assezat, Jules.** A French journalist and anthropologist, 1832-1876.

*Triangle of* = lines connecting nasion and alveolar and nasal points.

**Atreya.** An East Indian physician, who founded a famous system of medicine, and who wrote a good description of the bones of the human body, which has been handed down in his writings as they are interpreted by Charaka. Atreya is said to have taught in the Taxila university during the 6th century B. C., where the famous physician Jivaka, a contemporary of Buddha, is said to have been one of his students.

*Hoernle, A. F. Rudolf, 1907, Studies in the Medicine of ancient India, Oxford, in-8°.*

**Auerbach, Leopold.** A German anatomist in Breslau, 1828-1897. Ausserordentlich, professor of neuropathology at Breslau, 1872. He discovered the plexus myentericus in 1864-5.

*Ueber einen Plexus gangliosus myogastricus, Carlsbad, 1863. Untersuchungen ueber die Lymph- und Blutgefäße des Darms.*

*Untersuchungen ueber die Spermato-genese von Paludina, 1896. Plexus myentericus. Ganglia.*

*Biography: Anatomischer Anzeiger, Bd. 14, pp. 257-267, 1898, with bibliography.*

**Auzeby, Pierre.** A French physician and surgeon, 1736-1791. He studied surgery at Toulouse and at Bordeaux, then went to Paris, where he became dentist to the king. In 1762 he received the degree of dental surgeon at Lyon, where he spent the remainder of his life. His treatise is one of the few relating to dentistry: *Traité d'odontalgie, où l'on présente un nouveau système sur l'origine et la formation des dents, et une description de différentes maladies qui affectent la bouche, Lyon, 1771, in-12°.*

**Averroës (Averrhoës, Abul Walid Mohammed Ibn-Ahmed Ibn-Mohammed Ibn-Rosbd, Aboul Vélyd Mohammed Ibn Rochd)** An Arabian physician 1126-1198. He was born at Cordova, Spain, where he became one of the most learned of the Arabians. He was proficient in jurisprudence, grammar, astronomy, medicine and philosophy. His book "*Ketab-al-Kulhjat*" or "*Colliget*" (Book of Universals) was an attempt to found a system of medicine upon Aristotle's philosophy.

*Averroës et l'Averroïsme, Paris, 1861, by E. Renan.*

**Avicenna (Abū Ali el-Hosein Ibn-Abdallah Ibn-Sina), (980-1037),** was born at Afshena in Bokhara, Turkistan. He was a famous philosopher, physician and author; upwards of 100 treatises are ascribed to him. Some of them are tracts of a few pages, others are works extending through several volumes. His "*Canon medicinæ*" (*Al qânûn fi 't-tibb*) was used as a textbook in many of the European universities up to 1650. This work was translated into Latin and went through 30 editions. An Arabic version of it appeared in Rome in 1593; a Hebrew edition in 1491 at Naples.

*Biography: Johns Hopkins Hosp. Bull., vol. 19, 1908, pp. 157-160, with portrait and bibliography.*

**Avila, Louis Lovera de.** Physician to Charles V of Spain, who wrote in 1542 a romantic work entitled: *Libro de Anatomia*, in which he describes the human body as a microcosm.

**Azara, Joseph Nicholas d'.** A Spaniard who was celebrated for his long diplomatic career and for his contributions to literature and art, was born in 1731 at Barbunales. He pursued his studies in the university of Salamanca. He is the author of: "*Apuntamientos para historia*

*natural de los cuadrupedos del Paraguay y Rio de la Plata, Madrid, 1802, 2 vols, in-4°.*

**Azout**, Adrien (In Latin *Auzotius*). A celebrated mathematician and physician of the 17th century, born at Rouen and died at Paris in 1691. He was one of the first members of the academy of science in Paris. He is the author of a letter which is of interest in connection with the lymphatic system: "*Epistola ad Pecquetum de vasis lacteis et receptaculo chyli, Paris, 1657, in-4°.*"

**Azyr.** See **Vicq d'Azyr**.

**Azzoguidi**, Germain (1740-1814). A brilliant physician of Bologna. Elected professor in the ancient university at Bologna at the age of 24. He was loved and respected by his intimates and colleagues.

*Observationes ad uteri constructionem pertinentes, Bologna, 1773.*

**Bachmann**, Augustus. See **Rivinus**, Augustus.

**Bachtischua**, Dschabril ben, was an Arabian anatomist who, in the 9th century, began the translation of the anatomy of Galen but never finished the task.

**Baer** (Behr), Karl Ernst von (1792-1876). The father of the new embryology, was a native of Esthland, in the Baltic Sea provinces of Russia, and was successively professor at Dorpat, Königsberg, and St. Petersburg. Prosector to Burdach in Königsberg, 1817; Professor of Zoology in Königsberg; in 1834-67 as academician for Zoology in St. Petersburg; later, 1841-52, Professor of comparative anatomy in the Academy of Zoology; Anatomy and Physiology in the same place. In conjunction with Rudolf Wagner he was instrumental in calling together, in 1861, the first Congress of Anthropologists.

Von Baer and Christian Pander were students of Döllinger in Würzburg, and it was through the influence of von Baer that Pander took up the study of development. Von Baer's influence on modern embryology has been widely commented on. The following may be briefly mentioned: Von Baer greatly enriched the field of embryology by setting a higher standard of work; established the germ-layer theory; made comparative embryology possible; discovered the mammalian ovum, and observed that the notochord occurs in all vertebrate animals. Minot says of Von Baer that he worked out "almost as fully as was possible at this time, the

genesis of all the principal organs from the germ-layers, instinctively getting at the truth as only a great genius could have done."

*De ovi mammalium atque hominis genesi. Lipsiæ, 1827. Ueber Entwicklungsgeschichte der Tiere. Beobachtung und Reflexion. 1828, I Teil; 1837, II Teil; 1888, III Teil, herausgegeben von, Stieda-Königsberg. Die Metamorphose des Eies der Batrachier vor der Erscheinung des Embryo und Folgerungen aus ihr für die Theorie der Erzeugung, Arch. Anat. u. Phys., 1834. Reden. I. Teil. Joh. Swammerdam's Leben und Verdienste um die Wissenschaft. Petersburg, 1864. Beitrag zur Entwicklungsgeschichte der Schildkröten. Arch. Anat. u. Phys., 1834. Vorlesungen über Anthropologie, I. Bd., Königsberg, 1824, mit II Taf.*

*Cavity of—the segmentation cavity of the blastula. Vesicle of—the ovum.*

*Biography: Nachrichten üb. Leben u. Schriften des . . . . Dr. Karl Ernst von Baer, mitgeth. von ihm selbst. Veröffentlicht . . . von der Ritterschaft Esthlands. 2 Ausg. Braunschweig. 1886, 8°, 519 S. m. Portr. L. Stieda-K. E. v. Baer, eine biog. Skizze, Braunschw. 1878. Lacy (W. A.)—Von Baer and the Rise of Embryology, Pop. Sci. Mon., 1905.*

**Bagard, Charles.** A French physician born at Nancy, 1696–1772. He was an active man in the intellectual life of his time and is interesting to anatomists on account of his dissertation:

*De utero duplici in fœmina viso cum vestigiis fœconditatis in utroque utero, Nancy, 1753, in-4°.*

**Baillarger, Jules-François-Gabriel.** A French alienist in Paris, 1806–1891. Founder of the "Annales Médico-psychologiques du système nerveux", 1843-

*Recherches sur la structure de la couche corticale des circonvolutions du cerveau, 1890.*

*Band of Baillarger. Striae Baillargerii.*

**Baillie, Matthew.** An English physician and anatomist, 1761–1823. Known chiefly on account of his pathological anatomy: *The morbid human anatomy of some of the most important parts of the human body, London, 1793.* This work went through several editions and was translated into Italian, German and French. Baillie was a student of John Hunter; brother to Joanna Baillie the poetess, and nephew to William and John Hunter, Fellow of the Royal College of Physicians.

*Biography: Richardson—Disciples of Æsculapius, vol. 2, pp. 554–572, 1901.*

**Balbani, Édouard-Gerard.** A French embryologist, 1825–. . . . He studied law, natural history and medicine at Paris, where he received

his M. D. in 1854. Chief technician for the histological laboratory of Claude Bernard at the Museum, 1867. Professor of comparative embryology at the Collège de France, 1874. One of the first French cytologists. Founder with Ranvier and Hennequy of the "Archives d'Anatomie microscopique."

*Body of*—*vitelline body, the yolk nucleus of the egg.*

**Balfour**, Francis Maitland. A brilliant English embryologist, 1851–1882. Studied with Michael Foster at Cambridge; with Anton Dohrn at the Naples Zoological Station; was a student and friend of Huxley. Fellow and lecturer on animal morphology at Cambridge; Professor of animal morphology, 1882.

*A Monograph on the development of the elasmobranch fishes, London, 1878. Comparative Embryology, London, 1880–81. Translated into German, 1881, by Dr. C. Vetter. Balfour and Parker—On the structure and development of Lepidosteus. Phil. Trans. Roy. Soc. London, 1882. Comparison of the early stages in the development of vertebrates, Quart. Journ. Microsc. Sci., vol. 15, 1875. Elements of Embryology, by Foster and Balfour, 1874.*

**Banister**, Jean. An English physician who, in 1578, published:

*The history of man, sucked from the sap of the most approved anatomists, London, 1578, in-8°.*

**Barclay**, John. An eminent Scottish anatomist, 1760–1826. Assistant to John Bell in Edinburgh. Lecturer on anatomy in Edinburgh,

*New anatomical nomenclature, Edinburgh, 1803. Description of the arteries of the human body, Edinburgh, 1812. Series of engravings representing the bones of the human skeleton, with the skeleton of some of the lower animals, Edinburgh, 1819.*

*Biography: Introductory lectures to a course of anatomy delivered by the late John Barclay. With a memoir of the life of the author. Edinburgh, 1828.*

**Bardeleben**, Adolf von. A German anatomist and surgeon, 1819–1897. Studied anatomy and physiology with Johannes Müller, Schlemm, Tiedemann and Bischoff in Berlin and Heidelberg. In 1843 anatomical prosector in Giessen; privatdocent with Bischoff to 1848 at which time he was made ausserordl. professor. Did much to advance surgery in Germany.

*Ueber die Lage des Blinddarms beim Menschen, 1849.*

*Biography: Anatomischer Anzeiger, Bd. II, pp. 303–305. Pagel. Gurlt-Hirsch.*



**Bardinet**, Barthélemy-Alphonse. French physician, 1809–1874.  
*Ligament of Bardinet.*

**Barkow**, Hans Karl Leopold. German anatomist and zoologist, 1798–1873. Student of Rudolphi and Rosenthal, and the latter's professor. Professor of anatomy in Breslau, 1826–1873.

*Disquisitiones circa origin. et decurs. arteriar. mamal., Lips., 1829, 4 tab., 4°. Disqui. nönnullae angiöl., Vratisl., 1830, 4°. Die venen der ob. etrem. d. Menschen, Breslau, 1868, folio mit taf. Die angiöl. sammlung in anat. mus. d. königl. univ. zu Breslau, Bres., 1869, 4°, mit taf. Die verkrümmungen der Gefässe, Breslau, 1869, fol. mit 19. taf. Die Ursachen der Schlagaderverkrümmungen u. d. Urs. d. Schlagadererweiterungen, Breslau, 1872, fol. mit. taf. Syndesmologie, Breslau, 1841. Erläuterungen zur Skelett-und Gerhirnlehre, Breslau, 1865.*

*Arteriä septales scroti (scrotales post.). Gyruş supracallos. inferior. Ligamentum accessorium cart;—astragalo-calcaneum inteross;—calcaneo-cuboideum;—calcaneo-fibulare;—calcaneo-naviculare;—capitis costæ;—colli-costæ;—cuboideo-sphen;—elasticum;—fibula tali;—laterale ext. artic. pedis;—longitudinale Barkowi;—malleoli externi;—medium et posticum dentis;—sacrocoocygeum;—scaphoideo-cuneiforme;—scaphoideo-sphenoideum;—sphenoideo-metatarseum;—suspensorium marsupii. Marsupium patellare. Musculus longitudinalis ant. et post;—triangularis infundibuli. Os unciforme. Planum elasticum;—fibrosum dorsale. Plexus fascicularis. Rami semicircl. temporales. Sinus opertus minor. Stratum prof. et superf. lig. sacrocoocygei. Tractus ethmoidalis.*

**Barrowby**, William. An English physician of the 18th century who, in 1736, published,

*Syllabus anatomicus, prælectionibus annuatim habendis adaptatus. London, 1736, in-8°.*

**Barry**, Martin. An English embryologist in Suffolk, 1802–1855. In 1843 he observed the union of the spermatozoan with the ovum in the rabbit.

**Bartels**, Ernst Daniel August. A German physiologist and anatomist, 1778–1838. Professor of anatomy and physiology in Helmstaedt 1803. Professor of physiology at Breslau.

*Anthropologische Bemerkungen ueber das Gehirn und den Schädel des Menschen, mit bestaendiger Beziehung auf die Galilischen Entdeckungen, Berlin, 1805, in-8°.*

**Barth**, Joseph. An Austrian anatomist, was born in the Island of Malta (1745–1818). Professor of anatomy in the University of Vienna, 1773, and in 1776, oculist to Emperor Joseph II.

*Anfangsgruende der Muskellehre. Vienna, 1786, in fol. mit 61 taf.*

**Bartholin** (Bartholinus), Caspar, Senior. A famous theologian (1585–1629) who founded, at the University of Copenhagen, a professorial dynasty, which, with the members of the related family Worm, taught in the University into the 18th century, up to the time of the destruction of the University in 1728. These men were: Caspar Bartholin, Senior, (1585–1629); Thomas Bartholin, (1616–1680); Erasmus Bartholin, (1625–1698); Caspar Bartholin, Junior, (1655–1738); Ole Worm, Senior, (1588–1654); Wilhelm Worm, (1633–1704); Ole Worm, Junior, (1667–1708). The wife of Caspar Bartholin, Senior, and the wife of Ole Worm, Senior, were the daughters of Thomas Fincke, (1561–1656). “The Danes to this day are exceedingly proud, and with good reason, of the family of Bartholin, who not only taught at Copenhagen throughout the entire 17th century, but, through their students, brought to their university a fame which extended over all Europe.” (W. S. Miller, Johns Hops. Hosp. Bull., vol. 25, No. 276, p. 45).

Caspar Bartholin, Senior, was the father of Thomas, and Erasmus, both of whom were professors in universities. The long terms of service of the Bartholin family recalls a similar record for the Munros at the University of Edinburg and the Albinus family at the University of Leyden.

Caspar Bartholin, Senior, was professor of medicine at Copenhagen in 1613; and of theology in 1624. The following works are attributed to him:

*Anatomica institutiones corporis humani, utriusque sexus historiam et declarationem exhibentes, cum pluribus novis observationibus, opinionibus, necnon illustriorum, quæ in anthropologia occurrunt, controversiarum decisionibus. Wittemberg, 1611, in-12°. Controversiæ anatomicae et affinae nobiliores et rariores. Goslar, 1631, in-8°.*

**Bartholin**, Caspar, Junior. Danish anatomist, 1655–1738. Son of Thomas Bartholin. Successor to his father. Professor of medicine, anatomy and of physics at the University of Copenhagen, 1675–1701. Later General Procureur for the University and physician to the king.

*Exercitationes miscellanæ varii argumenti, imprimis anatomici. Leyden, 1675, in-8°. Diaphragmatis structura nova. Accessit modus novus præparandi viscera per injectiones liquidorum, cum instrumenti novi descriptione. Paris, 1676, in-8°. De ovariis mulierum, et generationis historia, epistola anatomica. Rome, 1677. De olfactus organo, Copenhagen, 1679, in-4°.*

*Anus cerebri. Capsula atribiliaria. Ductus sublingualis. Glandula vestibularis major.*

**Bartholin**, Thomas. Danish anatomist, 1616–1680. A teacher of Steno (Stensen). Professor of mathematics at the University of Copen-

hagen, 1647; previously professor of philology 1646; of anatomy 1648. Bartholin studied and traveled widely and became one of the most celebrated teachers of his day. He shares with Rudbeck and Aselli the recognition of the lymphatic system. He was one of the first to accept and defend Harvey's ideas concerning the circulation of the blood. He is the author of more than sixty treatises largely dealing with anatomy, and many of them treating of new discoveries.

*Anatomia, ex Gaspardi Bartholini parentis Institutionibus, omniumque recentiorum et propriis observationibus locupletata. Leyden, 1641, in-8°. De lacteis thoracis in homine brutisque nuperrimè observatis, disputatio: Respnd. Michaelæ Lyser, Copenhagen, 1652. Vasa lymphatica in homine nuper inventa, Copenhagen, 1654, in-4°. Historiarum anatomicarum et medicarum rariorum centuriæ I et II, Copenhagen, 1654, in-8°. De integumentis corporis humani, Copenhagen, 1655, in-4°. De usu thoracis et ejus partium, Copenhagen, 1657, in-4°. Opuscula nova anatomica de lacteis thoracis et lymphaticis vasis, in unum volumen comprehensa, aucta et recognita. Copenhagen, 1670, in-8°.*

**Bartholin, Thomas (Junior), 1659-1690.** Studied medicine at Copenhagen, Leyden, Oxford, London, Paris and Leipzig. Became professor of history at Copenhagen. He left sundry publications, among them one which is concerned with observations of worms in vinegar.

**Bartholomäus, von Glanville.** See **Anglicus, Barthalomæus.**

**Baudeloque, Jean-Louis, Senior.** Parisian gynecologist, 1746-1810.

*Conjugata externa.*

**Baudelot, Émile.** A French comparative neurologist, . . .-1875. Member of the Academy of Science.

*Recherches sur le système nerveux des poissons, Paris, 1883, in folio, edited by Emilé Blanchard, with list of Baudelot's publications and a short biographical sketch.*

**Bauhin, Caspar.** A Swiss anatomist and botanist, 1560-1623. In 1580 he publicly dissected the human cadaver; was made doctor of medicine the same year. He became so proficient in languages and science that at Basel, his native city, he was successively appointed Professor of Greek, 1582; of anatomy and botany (a chair created especially for him) in 1589; in 1596 physician to Frederic, Duke of Wittertemberg; in 1614 professor of practical medicine and shortly afterwards city physician. His favorite fields of study were anatomy and botany. His writings

deal with medicine, botany and anatomy. Of his anatomical writings mention is made of :

*De humani corporis partibus externis, hoc est universalis methodi anatomicae quam ad Vesalium accomodavit, liber primus, multis novis, iisdemque raris observationibus propriis refertus.* Basel, 1588, in-8°. *Theatrum anatomicum infinitis locis auctum, ad morbos accomadatum, et ab erroribus ab auctore repurgatum, observationibus et figuris aliquot novis illustratum,* Basel, 1592. *De ossium natura,* Basel, 1604, in-4°. *Valvula coli.*

**Bauhin,** Hieronym Heinrich. Professor of anatomy at Basel, 1660-65.

**Bauhin,** Johann Caspar. 1606-1685. A Swiss physician and anatomist, son of Caspar Bauhin (1560-1623). He succeeded to his father's chair in the university. He wrote nothing of importance save a few general dissertations on medicine. Professor of anatomy at Basel, 1629-1660.

**Baur,** George Herman Carl Ludwig. An American paleontologist, 1859-1898. Born at Weisswasser, Bohemia, into a family noted for its learning. Studied in University of Munich (1878) under Bayer, von Siebold, and Nägeli; at Leipzig under Leuckart, Credner, Carus; again at Munich he studied paleontology with Karl von Zittel, and histology and embryology with Karl von Kupffer, whose assistant he became; 1884-90, assistant to Professor O. C. Marsh, Yale University; 1890-92, docent of comparative osteology and paleontology at Clark University; 1892-98, paleontology at University of Chicago. Author of 144 contributions to comparative anatomy and paleontology.

*Biography: George Baur's life and writings.* Amer. Natl., vol. 33, no. 385, 1899, pp. 15-30, with portrait and list of publications by Wm. Morton Wheeler. See also, SCIENCE, 1898, N. S., 8, pp. 68-70.

**Beale,** Lionel Smith. English physician and dentist, 1828-1896. Professor of physiology and pathological anatomy in London. Professor of the principles and practice of medicine at King's College.

*Die Struktur der einfachen Gewebe (Trans. Leipzig, 1862).* *Anatomy of the dental tissues,* 1865. *On some points in the anatomy of the liver,* 1855, London. *A treatise on the physiological anatomy of the lungs,* London, 1862.

*Cells of=bipolar cells of the heart.*

**Beau**, Joseph-Honoré-Simon. Paris physician, 1806-1865.

*Lines of—transverse corrugations on the fingernails after typhoid fever. Gomphencephalon. Omphalencephalon. Rhombencephalon. Thrombencephalon.*

**Béclard**, Pierre-Augustin. French anatomist, 1785-1825. Professor of anatomy and physiology in Paris, 1812-18; of anatomy, 1823-25.

*Eléments d'Anatomie générale, 4th ed., Paris, 1895.*

**Beecher**, Charles Emerson. An American paleontologist, 1856-1904. Though his interests were chiefly among the fossil invertebrates Beecher's philosophical studies on the trilobites and brachiopods have had a marked influence. His important studies along these lines have been collected into: *Studies in Evolution, New York, 1901, in-8°*. He received the degree of Ph. D. in 1889 from Yale University where he later served as a teacher and investigator.

*American Journal of Science, June, 1904.*

**Belchier**, John. An English surgeon, born at Kingston in 1706; died at London, 1785. His paper on the growth of bone, which is concerned with the feeding of madder to pigs, is one of the early contributions to this subject. This memoir was published in the Philosophical Transactions of the Royal Society of London, Vol. 39, p. 287, 1736.

**Bell**, Sir Charles. The leading British anatomist of his period, 1774-1842, but is now better known as a physiologist and a neurologist. Brother to John Bell, the Scottish surgeon. Charles Bell had an uncommon artistic gift and his numerous anatomical works are illustrated by his own pen. He went to London in 1804 and began teaching anatomy in his own house, and later at Great Windmill Street. He lectured also to artists. Accepted the professorship of surgery at the University of Edinburgh in 1836.

*A System of Dissections explaining the Anatomy of the Human Body, the manner of displaying the parts and their varieties in Disease. Vol. I, Edinburgh, 1799; vol. II, 1803. Essays on the Anatomy of Expression in Painting, London, 1806, in-8°. A System of operative Surgery, founded on the basis of Anatomy, 2 vols., London, 1814, 8°. Engravings of the Arteries. 14 plates, London, 1811, 8°. A treatise on the Diseases of the Urethra, Vesica urinaria, Prostate, and Rectum. London, 1822, 8°. The Hand; Its Mechanism and Vital Endowments as Evincing Design. London, 1833, 8°. The Anatomy of the Brain, explained in a series of engravings. London, 1802, 4°. A Dissertation on Gun-shot Wounds. London, 1814, 8°. The Nervous System of the Human Body, as explained in a series of papers read before the*

*Royal Society of London. With an appendix of cases and consultations on nervous diseases. Edinburgh, 1836.*

*Nerve of*—a branch of the brachial plexus supplying the serratus magnus muscle. *Nervus thoracalis longus.*

*Biography: Sir Charles Bell, the man and his works. Johns Hopkins Hospital Bulletin, vol. 21, no. 231, 1910, pp. 171-181, by Eugene R. Corson. See also: Bull., Johns Hopk. Hosp., vol. 25, pp. 185-189, with figures.*

**Bell, John.** Scottish anatomist and surgeon, 1763-1820. Brother of Charles Bell, and like him possessed of an uncommon artistic gift, which he employed in the illustration of his writings. He was one of the founders of the modern surgery of the vascular system. He opened a private school of anatomy in Edinburgh, in 1790.

*Anatomy of the human body, 3 vols., 1793-1803, edited by Charles. Principles of surgery, 1801-1807.*

*Muscle of*—a band of muscular fibres on the wall of the bladder.

*Biography: John Bell, Surgeon. Bull., Johns Hopkins Hospital, vol. 23, pp. 241-250, 1912.*

**Bellinger, Francis.** An English physician, who wrote a "*Tractatus de foetu nutrito*," London, 1717, in-8°.

**Bellini, Lorenzo (Laurentio).** An Italian anatomist, 1643-1704. Born at Florence. A student of Oliva, Redi and Borrelli. Professor of philosophy and theoretical medicine in Pisa, 1663. Professor of anatomy in Pisa, 1663-1693. Physician to the Grand Duke Cosmo of Tuscany; chief physician to the Pope, Clement XI. He became widely known as an anatomist, as a physician, as a poet and scholar. As an anatomist he is chiefly known for his work on the kidneys. He recognized the papillæ of the tongue as taste organs, and described their connection with nerves.

*Exercitatio anatomica de structura et usu renum, Florence, 1662, in-4°.*

*Gustus organum novissime deprehensum, Bologna, 1665, in-12. Laurentii Bellini opera omnia. Venice, 1708, in-4°.*

*Tubuli renales recti. Ducts of*—the straight tubules of the kidney. *Ligament of*—a fasciculus of the capsular ligament of the hip.

*Biography: Notizie edite ed inedite delle vite e delle opere di Marcello Malpighi e di Lorenzo Bellini. Gaetano Atti, Bologna, 1847.*

**Beneden, Eduard van.** A Belgian embryologist, 1856-1910. Son of Pierre Joseph van B., born at Louvain. Studied in Leyden and be-

came a professor there. Later professor in Lüttich. Editor of the "Archives de Biologie," 1880-94, with van Bambeke.

*Recherches sur la composition et la signification de l'oeuf basées sur l'étude de son mode de formation et des premiers phénomènes embryonnaires, Bruxelles, 1870. La maturation de l'oeuf, la fécondation et ses premières phases du développement embryonnaire des mammifères d'après des recherches faites chez le lapin, Bruxelles, 1875. Contribution à l'histoire de la vésicule germinative et du premier noyau embryonnaire, 1876.*

*Biography: Nekrolog in "Archives de Biologie," 1910.*

**Beneden, Pierre-Joseph van.** A Belgian zoologist, 1809-1894. In 1831 curator of the museum of natural history in Louvain; 1845 professor of zoology in Gent; 1846 professor of zoology and paleontology at Louvain. Known chiefly for his studies in parasitology, and author, with Gervais, of contributions to the paleontology of the whales.

*Osteographie des cétacés vivants et fossiles (with Gervais), Paris, 1868-77.*

**Benedetti, Alessandro.** A celebrated Italian physician and anatomist born in Legnano, near Verona, in Lombardy; 1460?-1525. Professor of anatomy at Padua, then Venice. Founder of the first anatomical theater in Padua (1490). He made no original discoveries in anatomy, but left an interesting work:

*Anatomia sive historia corporis humani libri quinque. Venice, 1493, in-8°. This work went through several editions.*

**Béraud, Bruno-Jean-Jacques.** A French surgeon, 1823-1865.

*Ligamentum pericardii. Valve of = Krause's valve.*

**Berengario da Carpi, Jacopo (Jacques).** Known also as Barenarius. Barenger. Carpi. Carpus. Carpensis. Born at Carpi (ca. 1470-1530). An extensive commentator of Mondino's works. Professor of surgery at Pavia and Bologna. Fallopio calls him the first restorer of anatomy. He is said to have dissected more than 100 bodies; to have given an accurate description of the larynx and to have been the first to introduce anatomical figures in his works. His chief contribution is:

*Commentaria, cum amplissimis additionibus, super anatomia Mundini, cum textu ejus in pristinum nitorem redacto, Bologna, 1521, in-4°. Translated into English and published in London in 1664, in-12°. Pagel and Sudhoff, p. 206.*

**Bergen, Karl August von.** A celebrated German anatomist and botanist born at Frankfurt-an-der-Oder; 1704-1760. Studied at the University of Leyden with Boerhaave and Albinus. Professor extraordinary

of botany at the same place 1738-44 (as successor to his father, Johann Georg Bergen) when he succeeded Goelicke as professor of pathology and therapeutics, a chair which he filled with distinction to the time of his death in 1760. He deserves to be ranked among the best anatomists of his day. He is distinguished principally for his researches on intercostal nerves, the ventricles of the brain, the pia mater and the arachnoid. He was a man of deep penetration and had a talent for accurate observation.

*Dissertatio inauguralis de nervi intercostali. Francfort-sur-L'Oder, 1731, in-4°.*

*Programma, seu Exercitatio splanchnologico-anatomica, qua ventriculorum cerebri lateralium novam sistit tabulam. Francfort-sur-L'Oder, 1733, in-4°. Programma sive Exercitatio meningologico, qua de structura piæmætris inter alia novam nec habenus visam, tradit observationem. Francfort-sur-L'Oder, 1736, in-4°.*

**Bergen, Johann Georg von (Jean Georges de).** Father of the preceding. A member of a distinguished family, he occupied in Frankfurt-an-der-Oder the chair of anatomy and botany, in which he was succeeded by his son. He died in 1738. He is the author of numerous medical dissertations among which may be mentioned:

*Dissertatio de conceptione foetus humani, Wittenberg, 1688, in-4°.*

*Dissertatio de circulatione sanguinis, alias a cordis prelo, hodie simul a vi vasorum contractili deducta, Frankfurt-am-Oder, 1705, in-4°.*

**Berger, Johann Gottfried.** A German physician born at Halle, 1659-1756. Professor at the University in Wittenberg and in Leipzig. Said to have been the first to show the muscle fibres of the iris. He is the author of numerous dissertations, among which are to be noted:

*Dissertatio de corde, Wittemberg, 1688, in-4°.*

*Dissertatio de ovo et pullo, Wittemberg, 1689, in-4°.*

**Bergmann, Ernst von.** A German surgeon, 1836-1908. Professor of surgery at Dorpat, 1871; in 1878 at Würzburg and in 1882 at Berlin.

*Chordæ volubiles. Commissura post, cerebri. Conductor sonorus. Conus aquæductus cerebri. Fasciculus radiorum. Fibræ Bergmanni. Filamenta lateralia et perpendicularia. Organon pneumaticum. Pecten Bergmanni. Pedunculus flabelliformis. Penicillus Bergmanni. Psalterium Bergmanni. Recessus cymbiformis. Scala rhythmica. Surculus dichotomi. Tela filipendula. Trigonum durum et molle. Verticillum Bergmanni.*

*Biography: Ernst von Bergmann, von Arend Buchholts. Leipzig, 1911, in-8°.*

**Bernard, Claude.** A noted French physiologist, 1813-1878.

*Leçons sur les phénomènes de la vie, 1878.*

*Canal of; duct of = ductus pancreaticus accessorius.*



**Bernheimer, Stefan.** An Austrian oculist, 1861-.....

*Fibres of* = a bundle of white fibres connecting Luy's body with the optic tract.

**Berres, Joseph.** An Austrian anatomist, 1796-1844. A student of microscopical anatomy in Vienna. He was one of the first to use "Daguerreotypes" in the illustration of his subject.

**Berretini, Pietro.** An Italian artist, 1596-1669. To him are ascribed 27 large anatomical plates. *Choulant* gives (p. 85) an example of his work.

*Tabulæ anatomicæ a cel pictore Petro Berretino Cortonensi delineatæ et egregiæ, Rome, 1741.*

**Bertin, Exupère-Joseph.** Born in Trambley near Rennes, 1712-1781. At the age of 25 he became associate anatomist of the Academy of Sciences in Paris, where he was noted for his observations on the nerves of the heart and on the anatomoses of the mammary and epigastric arteries, as well as for his memoir on the structure and function of the kidneys.

*Ergo causa motus alterni cordis multiplex, Paris, 1740, in-4°.*  
*Lettres sur le nouveau système de la voix et sur les lymphatiques, Paris, 1748, in-12°.* *Traité de osteologie, Paris, 1754, in-12°.*  
Translated into German by J. P. G. Pflug, Copenhagen, 1777-1778, 4 vol., in-8°.

*Septum Bertini. Columnæ renales (Bertini). Ligamentum ilio-femorale. Ossicula Bertini-conchæ sphenoidales.*

**Bertrandi, Jean Ambroise Marie.** An Italian physician born in Turin, 1723-1765; is the author of:

*Dissertatione anatomicæ de hepata et oculo, Turin, 1748.* See *Biography* by Louis. Paris, 1767.

**Betz, Phillip Friedrich.** German physician, 1819-1899.

*Ligamentum epiglottico-palatinum. Sinus foveæ navicularis.*  
*Cells of* = large pyramidal cells in the Rolandic area.

**Bezold, Friedrich von.** Munich otologist, 1842-1908.

*Fossa mastoidea. Ganglion of* = ganglion cells in the interauricular septum. *Recessus meatus auditorii externi.*

**Bianchi, Jean Baptiste.** Was born at Turin; 1681-1761. He attained the reputation of being the first anatomist and the most celebrated physician of his time. In 1715 the King of Sardinia built him a very commodious amphitheater for his lectures. He was professor of

anatomy in Turin. Judging from his writings his interests were largely in the direction of pathological structures.

*Historia hepatica, seu de hepatis structura, usibus et morbis, opus anatomicum, physiologicum et pathologicum, Turin, 1710, in-4°.*

*Ductus lacrymales novi, eorum anatomie, usus, morbi, curationes, Turin, 1715, in-4°. Demonstratio anatomica sinuum basis cerebri.*

Bichat, Marie-François-Xavier. During the short period of seven years which Bichat devoted to his scientific studies he came to be recognized as one of the foremost biologists of all time. Born in Thoirette, department of the Ain, France, November 11th, 1771, he ended his career at the early age of 30 (1801) having exhibited unusual talents for prolonged and intense application to the pursuit of his favorite science. It is said that during one winter Bichat examined 600 bodies in connection with his studies in pathology. He was a student of Desault, the surgeon, in Paris in 1793, whose assistant he became, and whose works he edited on the death of that surgeon in 1795. In 1797 he was appointed professor of anatomy in Paris which position he held to the end of his life. Bichat began the publication of his results in 1800, but during the course of the next year he slipped on the dissecting room stairs and died from gastric derangement. He is best known as the founder of the new science of *Histology*, although he did not employ the microscope. He divided the tissues into 21 (non-microscopic) varieties. At the age of 28 he became physician to the Hôtel Dieu, which position gave him many new opportunities for the advancement of his work. He was one of the first to introduce operative surgery.

*Traité des membranes en général, et de diverses membranes en particulier, Paris, 1800, in-8°. This work was almost immediately translated into German, and went through several editions in the original.*

*Anatomie générale, appliquée à la physiologie et à la médecine, Paris, 1801, 2 vol. in-8°. This work also was translated into German and went through several editions in the original.*

*Anatomie descriptive, Paris, 1801-1802, in-8°.*

*Canalis Bichati (Cisterna V. Magnæ). Foramen Bichati. Ligamentum Bichati-sacrospinosum (sacroiliacum). Protuberantia Bichati. Corpus adiposum buccæ. Fissure of = space below the corpus callosum.*

*Biography: Bichat. Johns Hopkins Hospital Bulletin, vol. 14, no. 149, pp. 197-201, 1903, with portraits and titles of works. By William Sydney Thayer.*

*Notice historique sur la vie et les travaux de Marie Fr.-Xav.-Bichat, in "Traité des Membranes, etc., par Bichat. Nouvelle édition augmentée d'une notice, etc., par M. Husson, Paris, 1802, 8vo, Ann. xi.*

Bichat, his *Life, Researches and Character*, by Albert C. Eyclesnymer. *Interstate Medical Journal*, vol. xv, No. 7, pp. 1-20, 1908, with portrait and bibliography.

**Bidder**, Heinrich Friedrich. German anatomist in Dorpat, 1810-1894. Professor of anatomy at Dorpat, 1836-42; of physiology at Dorpat, 1843-69.

*De Cranii conformatione*, Dorpat, 1847. *Neue Beobachtungen über die Bewegungen des weichen Gaumes*, Dorpat, 1838. *Ueber die Malpighischen Körper der Niere*, Dorpat, 1846. (*Bidder und Kupffer*) *Untersuchungen ueber die Textur des Rückenmarks*, Leipzig, 1847.

*Ganglion Bidderi* = one of two ganglia on the cardiac nerves in the septum between the atria just above the atrioventricular septum.

**Bidloo**, Godefroi (Govert). Celebrated anatomist and surgeon of Holland, living in Amsterdam, where he was born in 1649. He ended his career at Leyden in April, 1713. A student of Ruysch; lecturer in anatomy and surgery in Leyden, 1694 to the end of his life.

*Anatomia corporis humani, centum et quinque tabulis per artificiosissimum G. de Lairese ad vivum delineatis, demonstrata, veterum recentiorumque inventis explicata, plurimisque hactenus non detractis illustrata*, Amsterdam, 1685, in fol. Reprinted in Leyden in 1739; in Utrecht in 1750. *Opuscula omnia anatomico-chirurgica, edita et inedita*, Leyden, 1715.

**Biesiadecki**, Alfred von. Polish physician and pathologic anatomist, 1839-1888.

*Fossa of* = *fossa iliacosubfascialis*.

**Bigelow**, Henry Jacob. Boston surgeon, 1816(8?)-1890.

*Ligamentum ypsiloforme. Septum femoris.*

**Binet**, Claude. Surgeon in Lyon who published in 1664:

*Quatrains anatomiques des os et des muscles du corps humain, ensemble un Discours sur la circulation du sang*, Lyon, in-8°.

**Bischoff**, Theodor Ludwig Wilhelm von. German anatomist and embryologist, 1807-82. Professor of anatomy and physiology at Heidelberg, 1836-43; anatomy at Giessen, 1843-44; anatomy and physiology at Giessen, 1844-54; anatomy in Munich, 1854-78. He was one of the first to demonstrate cell division in animal tissues.

*Entwicklungsgeschichte der Säugethiere und des Menschen*, Leipzig, 1842. *Ueber die Bildung des Säugetiereis und seine Stellung in der Zellenlehre. Sitzungsber. d. K. Bayr. Akad. für Wissenschaft.*, bd. 1, p. 242, 1863. *Untersuchungen ueber des Kanincheneies*, Braunschw. 1843; *des Hundescies*, Braunschw. 1846; *des Meerschweinchens*, Giessen, 1852; *des Reheies*, Giessen, 1854.

*Historisch-kritische Bemerkungen zu den neuesten Mittheilungen über d. erste Entwicklung der Säugethiereier, Munchen, 1877.*  
*Tunica folliculi.* Crown of = *corona radiata.*

**Bizzozero, Giulio.** An Italian physician, 1846-1901.

*Red cells of* = *nucleated red blood corpuscles.*

**Blaes.** See **Blasius.**

**Blainville, Henri-Marie-Ducrotay de.** French zoologist and anthropologist, 1777-1850. An illustrious naturalist known chiefly for his *Osteography*, an enormous work on comparative osteology. He was born at Arques, near Dieppe, September 12, 1777. A student of Cuvier, he took the degree M. D. in 1808 and in 1812 he was appointed to the chair of anatomy and zoology in the Faculty of Sciences at Paris. In 1830 he succeeded Lamarck in the chair of natural history, and succeeded Cuvier in comparative anatomy in 1832, which chair he held for 18 years. He was a voluminous writer and his *Osteographie* is an immense monument to his name.

*Prodrome d'une nouvelle distribution methodique du règne animal, 1816. Ostéographie ou Description Iconographique comparée du Squelette et du Système dentaire des Mammiferes récentes et fossiles pour servir de Base à la Zoologie et à la Géologie. This is an enormous work of 8 folio volumes, 4 of which are devoted to 323 lithographic plates of the skeletons of mammals, printed in elephant folio, 1839. Histoire des Sciences naturelles au Moyen Age, 1845.*

*Ears of* = *asymmetry in size or shape.*

*Biography:* In Vol. I, *Texte of the 'Osteographie,' there is an "Étude sur la Vie et les Travaux de M. de Blainville."* 1839.

**Blandin, Philippe-Frédéric.** Parisian anatomist and surgeon, 1798-1849.

*Traité d'Anatomie topographique, Bruxelles, 1837.*

*Glandula lingualis anterior. Ganglion submaxillare.*

**Blankaard (Blancard, Blancardus), Étienne (Stephen).** A Dutch physician of the 17th century (1650-1702) who demonstrated by injection in 1675, the continuity of arterial and venous capillaries. (See **Domenico de Marchetti.**)

*Tractatus novus de circulatione sanguinis per fibras, nec non de valvulis in iis repertis, Amsterdam, 1678, in-12°.*

*Anatomia practica rationalis, sive variorum cadaverum morbis denatorum anatomico inspectio, Leyden, 1688, in-12°.*

**Blasius** (Blaes), Gerard (Gerhard). An eminent Dutch anatomist of the 17th century; ?...-1682 (?). A student of Thomas Bartholin and a teacher of Stensen. In 1660 he was made professor of medicine and director of the hospital at Amsterdam. He was associated with Swammerdam in recognizing the valves of the lacteal vessels; he advanced the knowledge of the meninges. He made some interesting observations on the pathologic ossification of arteries. He was greatly interested in comparative anatomy and made observation on snakes, turtles, dog and pigeon.

*Dissertatio anatomica de structura et usu renum, Amsterdam, 1665. Observata anatomica in homine, simia, equo, vitulo, testudine, echino, glire, serpente, ardea, variisque animalibus aliis; accedunt extraordinaria in homine reperta, praxim medicam aequæ ac anatomen illustrantia, Leyden et Amsterdam, 1674, in-8°. Zootomia, seu anatomes variorum animalium pars prima, Amsterdam, 1676, in-12°, with 88 plates.*

*Ductus parotideus.*

**Blumenbach**, (Jean Frédéric) Johann Friedrich. A German anthropologist, zoologist and physiologist, 1752-1840. Known as the founder of modern anthropology. In 1776 conservator of the cabinet of natural history, then professor of medicine in Göttingen, in 1778, and in 1812 secretary of the Royal Society of Sciences.

*Dissertatio inauguralis de generis humani varietate nativa, Göttingen, 1775. Geschichte und Beschreibung der Knochen des menschlichen Koerpers, Göttingen, 1786. Observations on some Egyptian mummies opened in London, addressed to Sir Joseph Banks, London, 1794. Handbuch der vergleichenden Anatomie, Göttingen, 1805.*

*Clivus Blumenbachii.*

**Bochdalek**, Viktor (Vincenz). Prague anatomist, 1801-1883. Professor of anatomy in Prague, 1845-71.

*Neue Untersuchungen der Nerven des Ober und Unterkiefers, 1855.*

*Foramen. Ganglion. M. orbitæ (gracillimus).*

**Bock**, Karl Ernst. German physician, anatomist and pathologist, 1809-1874. Son of the anatomist, Karl August Bock (1782-1833). Professor of pathological anatomy in Leipzig.

*Handatlas des Menschen, 7th ed., Leipzig, 1889. Handbuch der anatomie des Menschen, Leipzig, 1838. Anatomisches Taschenbuch, 1864.*

**Boë**, Francois de la (Sylvius). 1614-1672. Sometimes confused with Jacques du Bois (Dubois). Born at Hanau, near Frankfurt-am-Main.

He traveled extensively, as was the custom at that time, and visited the chief universities in Holland and Germany. He settled in Amsterdam in 1632; became professor of practical medicine in Leyden in 1658 to succeed Albert Kyper. While in Amsterdam he had studied attentively the writings of Descartes and van Helmont on which, later, he established a system of medicine, in which he was among the first to include pathological anatomy, on the basis of his numerous dissections of cadavers. This work attained great fame. He described more carefully than had previously been done the various parts of the brain, and especially the sinuses of the dura mater. He followed what we today regard as the true principles of science, in proposing his ideas with reservation.

*Disputationum medicarum decas, primarias corporis humani functiones naturales ex anatomicis, practicis, et chymicis experimentis deductas complectens: quarum I. agit de alimentorum fermentatione in ventriculo. (Leyde, 1659, in-4°); II. de chyli et fœcibus alvinibus secretionem, atque in lacteas venas propulsionem in intestinis perfectam; III. de chyli mutatione in sanguinem, circulari sanguinis motu, et cordis, arteriarumque pulsu; IV. de spirituum animalium in cerebro cerebelloque confectione, per nervos distributionem atque usu vario; V. de lienis et glandularum usu; VI. de bilis et hepatis usu (Leyden, 1660, in-4°); VII. de respiratione usuque pulmonum; VIII. de vasis lymphaticis et lymphæ; IX. de febribus prima; de febribus altera. Amsterdam, 1663, Leyden, 1670, in-16°.*

**Boeckel, Jean.** 1535–1605. Physician to the city of Hamburg; was born in Anvers. Professor of medicine in that city.

*Anatome, sive descriptio partium corporis humani, Helmstedt, 1585.*

**Boecler, Philippe Henri.** A physician and anatomist of Strassburg, 1718–1759. Professor of anatomy and surgery in the University of Strassburg, which chair he filled with distinction. He published a dissertation entitled:

*Dissertatio de glandularum thyroideæ, thymi et suprarenalium natura et functionibus, Strasbourg, 1753, in-4°.*

**Boedecker, Karl Friedrich Wilhelm.** Dentist in New York and Berlin, 1846–1910. Professor of embryology in the University of Buffalo.

*The anatomy and pathology of the teeth, 1894.*

*Deskriptive und topographische Anatomie des Menschen, 1904 (with Heitzmann).*

**Boehmer, Phillippe Adolphe.** A noted medical educator of Halle, 1717–1789. His father was director of the University and chancellor of

the principality of Magdeburg. He entered the study of medicine and became successively, first physician to the Duke of Saxe-Weimar; professor of anatomy in the University of Halle, in 1741; in 1769 dean of the faculty of medicine, and first professor; in 1787 councillor to the King of Prussia and dean of the university. He held this last position until his death, November 1st, 1789. He was a voluminous writer on medical subjects.

*Observationes binæ anatomicæ de quatuor et quinque ramis ex arcu arteriæ magnæ adscendentibus, Leipzig, 1741, in-4°. Institutiones osteologiæ, in usum prælectionum academicarum, cum iconibus anatomicis. Halle, 1751, in-8°. Epistola anatomica problematica de ductibus mammarum lactiferia, experimento novo confirmata. Leipzig, 1742, in-4°.*

**Boerhaave, Hermann** (1668–1738). A noted teacher of medical subjects, who is said to have introduced the modern method of clinical bedside teaching. One of the most gifted of the Dutch medical investigators, he was noted for his studies in anatomy, pathology, zoology and medicine. He was born at Voorhout, near Leyden. He diligently studied microscopic anatomy and became so interested in the subject, that late in life he gathered Swammerdam's complete writings together and published them, in 1737, under the title "Biblia Naturæ." Boerhaave was gifted with a high order of ability in elocution, and was a man of immense erudition. It is said that he lectured on medicine for five hours a day while he was a professor of medicine and botany in the University of Leyden (1709). In 1714 he was made rector of the University. In 1715 he succeeded Bidloo in the chair of the practice of medicine, and in 1718 the subject of chemistry was placed under his direction. After his death, in 1738, the city of Leyden erected a magnificent tomb to his memory, with the inscription: *Salutifero Boerhaavii genio sacrum*. Boerhaave has left a large number of writings on medicine, botany, and philosophy. The following may be mentioned as being of anatomical interest:

*Institutiones medicæ in usus exercitationis annuæ domesticos, Leyden, 1708. Epistola ad Ruyschium clarissimum pro sententia Malpighiana de fabrica glandularum in corpore humano, Amsterdam, 1722. Historia insectorum, sive Biblia naturæ de J. Swammerdam, traduit en Latin par Gaubius, avec une préface de Boerhaave. Leyden, 1737. Opera anatomica et chirurgica Andreae Vesalii, cura H. Boerhaave, et B. S. Albini, Leyden, 1725, 2 vols, in folio.*

Glands of = sweat glands.

*Biography: The great Dutch pathologist and physician, Hermann Boerhaave, 1668–1737; a retrospect. Edinb. Med. Journ., 1915, n. s., xiv, pp. 375–385; Richardson—Disciples of Æsculapius, vol 1, pp. 95–107, 1901.*

**Boettcher**, Arthur. German anatomist, 1831-1889.

*Entwicklung und Bau des Gehörlabyrinthes, Dresden, 1869.*

*Canal of* = minute canal between utricle and sacculæ. *Cells of* = layer of cells on basilar membrane of cochlea. *Crystals of* = sperm crystals. *Ganglion of* = on vestibular branch of cochlear nerve. *Space of* = Cotunnii's space. *Sulcus liga. spiralis.*

**Boetticher**, André Jules. A Dutch physician born at Wolfenbüttel, 1672-1719. He became professor of anatomy, surgery and botany at Giessen, in 1698; then professor of pathology at Helmstädt and later professor of medicine.

*Dissertatio de vocis organo, Leyden, 1697, in-4°.* *Dissertatio de ossibus, Giessen, 1698, in-4°.* *Dissertatio de respiratione foetus in utero, Helmstädt, 1702, in-4°.*

**Bogros**, Jean-Annet. French anatomist, 1786-1823.

*Memoire sur la structure des nerfs, Paris, 1827, in-8°.*  
*Spatium retroinguinale (retroperitoneale).*

**Bojanus**, Ludwig Heinrich. A German comparative anatomist, 1776-1827. Professor in the University of Wilna, 1804.

*Introductio in anatomen comparatam, Wilna, 1815, in-8°.*  
*Paregon ad anatomen testudinis, cranii vertebratorum animalium comparationem faciens, Wilna, 1821, in-4°.* *Anatome testudinis europææ, Wilna, 1819-1821, 2 fasc. in folio, 40 plates.*

**Boll**, Franz Christian (1849-1879). Professor of physiology in Rome in 1876. Made important observations on the visual purple.

*Untersuchungen über die Zahnpulpa (Arch. Mikros. Anat., 1868).*

*Untersuchungen über die Endigungen der Pulpanerven, Ibidem, 1868.*

**Bonn**, Andreas. Surgeon and anatomist of Amsterdam; 1738-1818. Professor of anatomy and surgery in the famous Athenæum in Amsterdam, 1771-1798. His work entitled: "*De continuationibus membranarum, Leyden, 1763*" is regarded as the forerunner of Bichat's "*Traité des Membranes.*" Bonn gave an excellent discussion of the distribution of the cellular membranes.

**Bonnet**, Amadee. French surgeon, 1802-1852.

*Capsula bulbi Tenoni.*

**Bonnet**, Charles. One of the greatest comparative zoologists and philosophical naturalists of the 18th century (1720-1793). He proposed in his "*Corps organisés*" theories of development which have been of



great value to all biologists (Whitman, C. O. — Bonnet's Theory of Evolution, in "Wood's Hole Biol. Lectures, 1894, pp. 225-241"). His recorded meditations and observations upon generation and regeneration began when he was a youth of 16 and continued for over 35 years. Bonnet held no public offices during his life, but spent his best years in quiet retirement, devoting himself to his studies. He was born to a wealthy family in Geneva, and was prepared for a legal career, but it is said that he never allowed the law to interfere seriously with his studies. He traveled not at all, never being known to have left his own district. His complete works were published before his death under the title: "*Oeuvres d'histoire naturelle et de philosophie*," Neufchatel, 1779-1785. His most interesting biological publications are:

*Contemplation de la Nature*, 1764, Amsterdam. *Considerations sur les Corps organisés*, Geneva, 1762; 2nd ed. 1768. Trans. into German, 1775, in-8°. *Essai analytique sur les Facultés de l'Âme*. Copenhagen, 1760. *Memoire sur les Germes*, 1773. *Memoires sur la Reproduction des membres de la salamander aquatique*, 1778.

**Bordeu**, Théophile. Founder of the vitalistic school. Physiological anatomist, physician and surgeon, 1722-1776. Born at Iseste. He became a highly successful practitioner and was called to attend the *élite*; but in spite of a large practice he always found time to continue his researches in anatomy and physiology.

*Memoire sur les articulations des os de la face. Recherches anatomiques sur les différentes positions des glands et sur les action*. Paris, 1752.

*Biography: An extensive account in the Biographie Médicale. Pagel and Sudhoff, p. 323.*

**Born**, Gustav. A German anatomist, 1851-1900. The inventor of plastic methods in embryology, known as the Born wax plate method. Studied in Breslau, Bonn, Strassburg, and Berlin, where he was associated as student with Heidenhain, Pflüger and Waldeyer. Assistant to Hasse in Breslau at the anatomical institute; 1876 prosector; 1886 a. o. professor, in charge of embryology at the anatomical institute. His scientific interests lay along several lines; comparative anatomy, embryology, regeneration and plastic methods. He is the author of more than 40 contributions to anatomy.

*Die Plattenmodellmethode*, 1883, 1888, 1900. *Ueber die Furchung des Eies bei Doppelbildungen*, 1887. *Ueber die Structur des Keimbläschens*, 1894.

*Biography: Gustav Born, in Anatomischer Anzeiger, Bd. 18, pp. 139-143, with bibliography.*

**Botallo** (Botalli, Botal, Botali), Leonardo. Councilor and physician to King Charles IX, of France, to the queen, and to Duke William

of Brabant, in the sixteenth century. The exact dates between which he lived do not seem to be known, but 1530 is usually assigned for his birth, which took place in Asti, in Piedmont. He studied medicine in Italy under Lanfranc, Trincavella and Fallopio. To the latter's influence we may trace Botallo's interest in anatomy. He is usually accredited with the discovery of the ductus arteriosus and the foramen ovale, accounts of which are to be found in his work:

*Opera omnia medica et chirurgica, Leyden, 1660, in-8°.* This was edited by Joh. van Hoorne.

*Ductus arteriosus (Ligamentum arteriosum). Foramen ovale.*

**Bourgery, Marc-Jean.** A French systematic anatomist and surgeon, 1797-1849. His "*Traité*" was illustrated by numerous large and beautifully colored plates of the organs in health and disease.

*Traité complet de l'Anatomie de l'Homme, Paris, 1832-1844, 8 vols. folio.*

*Ligamentum post. superficiale genu. Ligamentum pubis anterioris cruciatum.*

**Boveri, Theodor.** A German cytologist, 1862-1915. Professor of zoology at Würzburg. Boveri was a pioneer worker in cytology and experimental zoology. He was a native of Bavaria, and first studied philosophy and later zoology at Munich. He wrote his doctor's thesis under the direction of Richard Hertwig, on the structure of the nerve fibres in vertebrates. At the age of thirty he was called to Wuerzburg to succeed Semper in the chair of zoology and comparative anatomy. Here he remained for the rest of his life, with the exception of frequent trips to the zoological stations of southern Europe, especially Naples. He also made a short visit to the United States. When Weismann resigned his professorship at Freiburg, Boveri was called to succeed him but declined. Later the directorship of the new research laboratory of the Kaiser-Wilhelm-Gesellschaft in Berlin was offered to him. He first accepted, worked out the whole organization and brought together a staff, then declined. In 1909 he was rector magnificus at the University of Wuerzburg, and among other numerous honors conferred upon him was a membership in the American National Academy of Sciences. Boveri's contributions to cytology were very important and his studies in this field were epoch making. His cytological work was always intermingled with studies in experimental embryology, his favorite objects being sea-urchin eggs and *Ascaris* embryos. Boveri published relatively few papers, about forty, but of these there are very few which could be called unimportant, and a surprisingly large number of them constitute landmarks in the progress of cytology. His most noted publications are his "*Zell-*

*studien*," which he published in several parts. His "*Die Organismen als historische Wesen*" also deserves mention.

*Science, N. S. vol. xliii, no. 1104, pp. 263-270, 1916.*

**Bowman, Sir William.** English anatomist and surgeon of Cheshire, 1816-1892. Studied in Birmingham and London. Prosector, then professor of anatomy and physiology at King's College, London.

*Physiological anatomy and physiology of man, 1845-1856. Lectures on the parts of the eye, London, 1849. On the minute structure and movements of voluntary muscle, Phil. Trans. Roy. Soc. London, 1840, pp. 457-501, 4 plates. On the structure and use of the Malpighian bodies of the kidney, with observations on the circulation through that gland. Phil. Trans. 1842.*

**Boyer, Alexis.** Parisian surgeon, 1757-1833. He studied surgery with Louis and Desault; became surgeon to the Hôtel Dieu; professor of operative surgery at the École de Santé; professor of clinical surgery; imperial family surgeon to Napoleon; Baron of the Empire. After the fall of Napoleon he was surgeon to Louis XVIII, Charles X, and Louis Philippe; in 1835 he succeeded Deschamps as surgeon-in-chief to the Hôpital de la Charité, where he taught anatomy, physiology and surgery.

*Traité complet d'anatomie, ou Description de toutes les parties du corps humain, Paris, 1796-1799, 4 vols. in-8°.*

*Bursa of = anterior to the thyrohyoid membrane.*

**Brandt, Johann Friedrich.** A zoölogist in St. Petersburg, 1802-1879. Author, with C. Ratzeburg, of "*Medizinischen Zoologie, Berlin, 1829-1833.*"

**Braun, Carl, Ritter von Fernwald.** An Austrian gynecologist, 1822-1891. Professor of gynecology in Vienna, 1856.

*Canalis cervicalis. Canalis neurentericus.*

**Braune, Christian Wilhelm.** German anatomist and surgeon, 1831-1892. Student of E. H. Weber, C. Ludwig and Virchow. Professor of surgery in Leipzig, 1866-1892.

*Topographisch-Anatomisches Atlas nach Durchschnitten an gefror. Cadavern, 1872; 1875; 1888. Die Lage des Uterus und Fetus, 1872. Chirurgisches-anatomische Tafeln, Leipzig, 1875. Venensystem des menschlichen Körpers, 1884.*

*Musculus puborectalis.*

*Biography: Anatomischer Anzeiger, Bd. 7, p. 440, 1892; Archiv f. Anat. u. Physiol. Anat. Abth., Jahrg. 1892, p. 231.*

**Breschet, Gilbert.** French anatomist, 1784-1845. Born in Clermont. He succeeded Cruveilhier as professor of anatomy in Paris, and

later became director of the anatomical laboratories, in the University of Paris. He was especially interested in pathological anatomy, and is considered by Chiari (*N. & P. Bd. II, p. 517*), as a pathologist.

*Essai sur les veines de rachis; recherches sur la formation du cal; considérations et observations anatomiques et pathologiques, Paris, 1819.*

*Arcus ext. ant. transversalis (venosus jugali). Canales diploici. Hiatus cochleae (Helicotrema). Sinus medianus. Venae mesolobicae.*

**Broca, Paul.** A celebrated anatomist, anthropologist, and surgeon in Paris, 1824–1880. Discoverer of the speech centers and founder of the “Société d’Anthropologie,” 1860.

*Atlas d’anatomie descriptive du corps humain, 1841–1866. Sur le plan horizontal de la tête, Paris, 1873.*

*Area parolfactoria. Bregma. Dacryon. Gyruus diagonalis. Inion. Lambda. Musculus amygdaloglossus, — lumbostyloideus. Metopion. Obelion. Ophryon. Opisthion.*

*Angle-area-cap-center-convolution-fissure-pouch-space - visual plane.*

**Brodie, J. Gordon.** Edinburgh anatomist, 1786–1818.

*Ligament of = transverse humeral ligament.*

**Broesike, Gustav.** German anatomist in Berlin, 1853–.....  
Prosector and professor of anatomy in Berlin.

*Lehrbuch der normalen anatomie, Berlin, 9th ed., 1910. Der menschlichen Körper, Berlin, 4th ed., 1910. Ueber die feinere Structur des normalen Knochengewebes.*

*Fascia clavipectoralis. Musculus arytaenoideus obliquus. Planum infratemporale. Plica venosa. Processus falci. axillaris. Recessus ileocæcalis ant.; — parajejunales; — venosus. Trigonum colli medianum; — omoclaviculaire; — omotrapezoideum. Tuberculum anonyum majus et minus calcanei.*

**Bronn, Heinrich Georg.** One of the first and one of the greatest zoopaleontologists of Germany, was born in Heidelberg, (1800–1862). He studied in Heidelberg. In 1828 he became a. o. professor in Heidelberg; 1833 ord. professor and in 1832 he succeeded Leuckart as professor of zoology and director of the zoological collections. A co-founder with Leonhard of the “Neues Jahrbuch für Geologie, Mineralogie und Paleontologie,” 1830–1862.

*Klassen und Ordnungen des Tierreiches, 1853–1862. Untersuchungen ueber die Entwicklungsgeschichte der organischen Welt während der Bildungszeit unserer Erdoberfläche, Stuttgart, 1858.*

**Brooks, William Keith.** An American zoölogist, 1848–1908. He was born at Cleveland, Ohio, March 25th, (1848) into a family whose members had been residents of New England since 1634. He early showed an interest in natural history. During his course at Hobart College he became much interested in the writings of George Berkeley, whose influence is distinctly seen in many of Brooks' essays, especially those in the "Foundations of Zoology." In 1873 Brooks was a student of Louis Agassiz at the laboratory in the Island of Penikese, in Buzzards Bay, and from that time to the end of his life he remained a student of marine life. In 1875 he received his Ph.D. from Harvard University. The following year he was an assistant with Alphæus Hyatt in the museum of the Boston Society of Natural History, and the same year obtained a fellowship at Johns Hopkins University. In 1883 he became associate professor of morphology in that institution, and in 1889 professor. In 1894, on the retirement of Professor H. Newell Martin, Brooks became head of the department of biology, which position he retained until his death.

Brooks was the teacher of many men who later became eminent in zoology. In 1878 he established the Chesapeake Zoological Laboratory, founded, not on buildings and land but on men and ideas, the work being carried on at Chesapeake Bay, at Beaufort, N. C., where subsequently the U. S. Bureau of Fisheries established a laboratory, in the Bahama Islands and in Jamaica. Brooks was one of the early editors of the *Journal of Experimental Zoology*, and established, also, a serial from his own laboratory. His researches were mainly along the lines of the development of the invertebrates and some of his important studies are: *Monograph on the Genus Salpa, Early Stages in the Development of Fresh Water Pulmonates, The Development of Lingula and the systematic Position of the Brachiopoda, The Life History of the Hydromedusae, The Embryology and Metamorphosis of the Macroura, Monograph of the Genus Doliolum, The Oyster, Handbook of Invertebrate Zoology, The Laws of Heredity, and The Foundations of Zoology*. On this last work, which is a series of essays on various topics, rests in large part Brooks' general recognition as a philosophical zoologist.

Brooks was a member of many learned societies at home and abroad, and received the honorary degree of LL. D. from three universities.

*Anatomical Record, vol. 3, pp. 1–13, 1909, with portrait. In Volume 9, 1910, of the Journal of Experimental Zoology, there is a Sketch of his Life, with portraits and bibliography. This volume of 28 studies by his former students and associates is dedicated to the memory of Professor Brooks.*

**Brown, John.** An English surgeon in London during the 17th century. He was physician to King Charles II. He is the author of:

*A complete Treatise of the Muscles as they appear in the Human Body, London, 1681, in folio.*

**Brown, Robert.** An English botanist, 1773–1858. He saw, in 1831, the cell nucleus in one of the orchids.

**Bruch, G.** German anatomist, 1819–94.

*Untersuchungen zur Kenntniss des kornigen Pigments, Zürich, 1844.*

*Folliculus, Lamina, Membrana.*

**Bruch, Karl Wilhelm Ludwig.** Histologist and anatomist in Basel and Giessen, 1819–1884. Professor of anatomy in Basel 1851–55, later in Giessen.

*Glands of = lymphoid glands in the palpebral conjunctiva.*  
*Membrane of = lamina basalis of Henle's membrane.*

**Bruecke, Ernst Wilhelm, Ritter von.** German anatomist and physiologist in Berlin; 1819–1892. Professor of physiology and microscopic anatomy in Vienna, 1849; physiology at Königsburg.

*Anatomische Beschreibung des Augapfels, Berlin, 1847.*

*Grundzüge der Physiologie und Systematik der Sprachlaute, 1856.*

*Musculus Brueckeii (Fibræ meridionalis musculi ciliaris).*  
*Tunic of = the retina exclusive of the rods and cones.*

*Biography: Anatomischer Anzeiger, Bd. 7, p. 60, 1892.*

**Brunn, Albert von.** German anatomist, 1849–1895. Student of Waldeyer. Professor of anatomy at Goettingen, 1872.

*Das Verhältniss der Gelenkkapseln zu den Epiphysen der Extremitätenknochen, Leipzig, 1881.*

*Membrana olfactoria. Nests of = groups of epithelial cells in male urethra.*

**Brunner, Johann Konrad.** Swiss anatomist, 1653–1727. Professor of anatomy in the University of Heidelberg. In Paris he was a student of Duverney. He then visited the universities in Germany and in Holland at the time of Swammerdam and Ruysch.

*Dissertatio de panaceis, Heidelberg, 1686, in-4°.*

*Physiologica de glandulis duodeni cogitata, Heidelberg, 1687, in-4°.*

*Dissertatio de glandula pituitaria, Heidelberg, 1687, in-4°.*

*Glandulæ duodenales.*

**Buck, Gurdon.** New York surgeon, 1807–1877.

*Fascia of = a fascial sheath of the penis.*

**Buckland, William.** An English geologist and paleontologist, dean of Westminster, 1784–1856. He was born at Axminster in Devonshire, and was educated at the ancient Grammar School of Tiverton. In 1801 he was elected by examination as scholar of Corpus Christi College, Oxford, where, in 1808, he became a fellow. From early boyhood he had exhibited a taste for natural science, and his attention was early attracted to geology through the lectures of Doctor Kidd, whom he succeeded in 1813 as reader of mineralogy in Oxford. In 1818 he was elected to a readership in geology in Oxford. In 1824 he became president of the Geological Society of London and was shortly afterward presented to the living of Stoke Charity, near Whitechurch, Hants, which enabled him to devote the succeeding twenty years to study and the collecting of minerals and fossil remains, on which he published several memoirs. In 1845 he was appointed to the deanery of Westminster. His collections are at Oxford, now known as the "Buckland Museum." He is the author of a number of memoirs on vertebrate paleontology, especially of the Pleistocene.

*Reliquiæ Diluvianæ; or, Observation on the Organic Remains contained in Caves, Fissures, and Diluvial Gravel, and on other geological phenomena, attesting the action of an Universal Deluge, 2nd edition, 1824, in-4°, London. The Bridgewater Treatises on the Power, Wisdom and Goodness of God as manifested in the Creation. Treatise VI. Geology and Mineralogy considered with reference to natural Theology. 2 vols., Philadelphia, 1837, in-8°.*

**Bucretius.** A German monk who in 1627 edited the works of Siphelius and Casserius.

**Budgett, John Samuel.** An English zoologist, 1872–1903. Studied at Trinity College and at Cambridge. Known for his studies on the life history and development of *Lepidosiren* and *Polypterus*, which he investigated by a series of field expeditions to South America, and Africa.

*The Work of John Samuel Budgett, Balfour student at the University of Cambridge, edited by Graham Kerr, Cambridge, 1907. Biographical sketch, pp. 1–55, by A. E. Shipley.*

**Buettner, Christophe Theophile.** An anatomist of the 18th century, born near Königsburg, 1708–1776. Studied medicine at Halle. In 1734 he was elected professor ex. ord. of medicine in Königsburg; and in 1737 anatomy, where he had the use of an anatomical theater.

*Dissertatio de peritonæo, Königsburg, 1738, in-4°.*  
*Gesammte anatomische Wahrnehmungen, Königsberg, 1769, in-4°.*

**Buffon, Georges-Louis-Leclerc de, Comte de.** French naturalist, 1707–1788. Buffon is not regarded as a serious investigator, although his writings in natural history are of importance. There is an extensive account of Buffon and a list of his publications in the *Biographie Médicale*.

**Burdach, Charles Frédéric.** Anatomist in Königsberg, 1776-1847. In 1811 professor of anatomy, physiology and medicine in Dorpat; 1814 anatomy and physiology in Königsberg.

*Berichte von der anatomischen Anstalt zu Königsberg. Leipzig, 1817-1824, in-8°, 3 pl.*

*Vom Baue und Leben des Gehirns. Leipzig, 1819-1825, 3 vols. in-4°, 10 pl. Bau des Gehirns et Rückenmarks, 1819-1825.*

*Die Physiologie als Erfahrungswissenschaft. Leipzig, 1826-1832, 3 vols. in-4°, 10 pl.*

*Fibres of = Fasciculus cuneatus. Funiculus olivæ. Nucleus of = Operculum. Pedunculus septi pellucidi. Stratum nigrum.*

**Burdach, Ernst.** German anatomist, 1801-1876. Son of the preceding. Professor of anatomy in Königsberg, 1844.

*Beitrag zur mikroskopischen Anatomie der Nerven, 1837.*

*Anthropologie für das gebildete Publikum, 1841-47.*

**Burns, Allan.** Scotch anatomist, 1781-1813.

*Falciform process or ligament of. Spæce.*

**Burow, Karl August von.** German surgeon in Königsberg; 1809-1874. General physician to the army of Prince Charles Frederick.

*De vasibus sanguiferis ranarum.*

*Vena Burowi.*

**Cabrol, Barthèlemy.** A French surgeon of the 16th century who wrote an:

*Alphabet anatomique, Tournon, 1594.*

**Caldani, Leopoldo-Marc' Antonio.** Italian anatomist, 1725-1813. Professor of anatomy in Padua as successor to Morgagni, 1771-1805.

*Icones anat. . . . ex optimis neotericor. operib. Venet., 1801-1813, fol. Max. 4 bde, mit 264 tafeln; Explicatio, Venet. 1802-1814, fol. 5 bde.*

*Institutiones Anat. Tom. I, II, Venet., 1787.*

*Ligament of = arising from the internal border of the coracoid process.*

**Camper, Peter (Pieter, Petrus).** Dutch physician, anatomist, paleontologist, anthropologist and artist, 1722-1789. He was born in Leyden and became a versatile genius, having a taste for drawing, painting, sculpture, as well as for scientific studies. Studied under Boerhaave. Professor of philosophy, medicine and surgery in Franeker, 1749; of medicine in Amsterdam, 1755-61; of theoretical medicine, anatomy, surgery, and botany in Gronigen, 1763-73. He was very wealthy and traveled extensively and gathered a large collection of skeletons. Among



his discoveries may be mentioned the semicircular canal in the ear of fishes, the nature of bird bones and important observations upon mosasaurs. His facial angle was the first attempt at skull measurement from the anthropological standpoint. He brought about a closer relation of anatomy to the fine arts.

The collected works of Camper were gathered under the following title: *Oeuvres qui ont pour objet l'histoire naturelle, la physiologie et l'anatomie comparée*, Paris, 1803, 3 vols., in-8°, atlas in folio.

*Angle. Chiasm. Fascia. Ligament. Line.*

**Cannani** (Cannanus) (Canano), Giovan Baptista (Jean Baptiste). An Italian anatomist born in Ferrare, 1515-1579. He became an adept at the art of dissecting and made several important discoveries. He is said to be the first to have discovered valves in the veins (1547). The first indication of this was the valve in the azygos vein. He taught anatomy in the University of Ferrare; was first physician to Duke Alphonso II, and to Pope Julius III.

*Musculorum humani corporis picturam dissectio, per Jos.-Bapt. Cannanum, Ferrariensium medicum, in Barthol. Nigrisoli, Ferrar, patricii gratiam, nunc primum in lucem edita, in-4°.*

**Carcassone**, Bernard-Gauderic. A French surgeon, 1728.

*Ligament of = the deep perineal fascia.*

**Carpi**, Jacobus Berengar. See Berengario da Carpi.

**Cartesius**. See Descartes, René.

**Carus**, Carl Gustav. German comparative anatomist and zoologist, 1789-1869. Professor of comparative anatomy at Dresden, 1814.

*Grundzüge der vergleichenden Anatomie und Physiologie, Dresden, 1828. The work contained also as an introduction an important:*

*Geschichte der Zoologie.*

*Atlas der Kranioskopie, Leipzig, 1864.*

*Vergleichende Psychologie, Vienna, 1866.*

**Carus**, Julius Viktor. A German zoologist and bibliographer, 1823-1903. Studied medicine in Leipzig; 1849 keeper of the collections in comparative anatomy at Oxford. He returned to Leipzig in 1851 and in 1853 was appointed professor of comparative anatomy and director of the zoological collection. Editor of the "Zoologischer Anzeiger," 1878-1903.

*Bibliotheca Zoologica, 1861, in 2 vols.*

*Geschichte der Zoologie, München, 1872, in-8°.*

**Casserio** (Cassorius), Giulio. An Italian anatomist, 1545–1616. He entered the service of Fabricio ab Aquapendente as a domestic servant, and later (1604) succeeded his master as professor of anatomy at Padua. He studied especially the organs of voice and hearing. He discovered the stapedius muscle and described the *ductus parotidæus* as a ligament.

*De vocis aditusque organis historia anatomica, Ferrare, 1600, in fol. 37 pls. Tabulæ anatomice LXXVIII cum supplemento XX tabularum Dan. Bucretii, qui et omnium explicationes addidit Venice, 1627, in fol. Tabulæ de formato foetu, Amsterdam, 1645, in fol.*

He also left a large work on anatomy unfinished.

*Fontanelle. Ganglion. Perforated muscle. Perforating nerve.*

**Celsus**, Aurelius Cornelius. He lived in the first half of the 1st century B. C. (30 B. C.–25 A. D.) Known as the *Cicero medicorum* on account of the purity of his Latin. He was the author of no separate anatomical treatise, but his work "*De Medicina Libri VIII*," contains a great many anatomical descriptions, from which we may infer that he was acquainted with the main facts of visceral anatomy. This work under the title "*De Re Medicina*" was one of the first medical books to be printed (1478). There are 105 editions of the works of Celsus still in existence.

*Septum transversum (Diaphragma). Linea alba (Galaxia). Scatula (Scapula).*

**Cesalpino** (Cesalpinus, Caesalpinus, Cesalpin), André. An Italian naturalist and philosopher of the Renaissance, 1519–1603. He was professor of botany at the University of Pisa. Physician to Pope Clement VIII. He is said to have made important observations upon the circulation of the blood.

**Charrière**, Joseph de la. A French physician and surgeon in Paris in the early half of the 18th century. He wrote an:

*Anatomie nouvelle de l'homme et de ses dépendances, Paris, 1703.*

**Chassaignac**, Charles-Marie-Édouard. A Parisian surgeon, 1805–1879.

*Tubercle of = tuberculum caroticum.*

**Chaussier**, François. French surgeon, 1746–1828. Professor in the faculty of Medicine at Paris. Professor of anatomy Academy of Arts,

at Dijon, and of anatomy and physiology at the polytechnic school in Paris.

*Memoire sur les vaisseaux omphalo-mesenteriques*, in "Mem. de l'Acad. de Dijon, 1782. *Memoires sur la structures et les usages des épiploons*, in "Mem. de l'Acad. de Dijon, 1784. *Tables synoptiques*: 1° de la zoonomie, ou plan général des cours d'anatomie et de zoologie; 2° du squelette; 3° des muscles; 4° des arteries; 5° des veines; 6° des lymphatiques; 7° des nerfs; 8° du nerf triplanchnique; 9° des humeurs ou fluides animaux; 10° des solides organiques; 11° de la force vitale; 12° de la semeiotique de la santé et de la maladie; 13° des fonctions; 14° de la digestion; 15° des mesures relatives a l'accouchement; 16° de l'accouchement; 17° des méthodes nosologiques; 18° de la neuralgie; 19° des hernies, 1789-1811.

*Line of* = the median antero-posterior line of the corpus callosum.

**Cheselden**, William. An English physician, who, in the 18th century, published:

*The Anatomy of the Human Body*, London, 1713, in-8°. This work went through six editions. *Osteographia or anatomy of the bones*, London, 1733, folio.

**Chopart**, François. A surgeon in Paris, 1743-1795.

*Joint of* = *articulus tarsi transversus* (*Choparti*).

**Ciaccio**, Giuseppe Vincenzo. An Italian anatomist, 1824-1901. Professor of comparative anatomy and histology in Bologna.

*On the nerves of the cornea*, London, 1863.  
*Glandula Ciaccio*.

**Civinini**, Filippo. Italian anatomist of the 19th century, — 1844. Professor of anatomy and surgery; and of pathology in Pistoja.

*Ligamentum pterygopetrosum*; — *pterygospinosum*. *Processus pterygospinosus*.

**Claparède**, Jean-Louis-René-Antoine-Édouard. A French protozoologist, 1832-1870. Studied medicine and natural history with Johannes Mueller and C. G. Ehrenberg. He accompanied Joh. Müller on an extensive expedition along the coasts of Sweden in 1855. Professor of comparative anatomy in 1862 at Genf.

*Études sur les infusoires et les rhizopodes*, Genf. 2 vols., 1858-1861.

**Clarke**, Jacob Augustus Lockhart. An anatomist in England, and physician in Pimlico and London, 1817-80. He became well known for his researches on the structure of the brain and spinal cord. He

published the results of his studies in Philosophical Transactions of the Royal Society of London for 1851 and 1863.

*Columna Clarkii*; — *gracilis*: *Corpus restiforme*. *Funiculus cuneatus*. *Nucleus dorsalis columnæ canæ posterioris* (Stillingi, Clarkii).

**Claudius, Friedrich Matthias.** German anatomist, 1822–69. Professor of anatomy in Kiel and in Marburg.

*Cells of* = *columnar cells on the floor of the ductus cochlearis*.  
*Fossa of* = *a slight depression on either side of the ovary*. *Canalis ganglionaris*.

**Claus, Carl Friedrich Wilhelm.** A German zoologist, 1835–1899. Studied medicine and natural history in Giessen and Marburg. In 1858 he was privatdocent for zoology in Marburg. In 1873 he was called to the professorship of zoology at Vienna, where he remained for 23 years. Known for his studies on medusae.

*Untersuchungen über die Organization und Entwicklung der Medusen, Prag, 1883.*

*Biography: Verh. d. K. K. zool. Gesellsch., Vienna, 1899.*  
*Hofrat Carl Claus. Autobiographie bis 1873. Vollendet von Professor Alth. Marburg, 199, with 3 portraits.*

**Clerc, Daniel le.** A Swiss physician, 1652–1728. Born at Geneva. A practicing physician at Geneva.

*Bibliotheca anatomica, 1688, in 2 vol. folio.*

**Cloquet, Hippolyte.** A French anatomist, 1787–1840. Brother to the following. Professor of anatomy in Paris.

*Traité d'anatomie descriptive, Paris, 1816–1835, in six editions.*

**Cloquet, Jules-Germain.** A French surgeon, 1790–1883. Professor of anatomy and surgery in Paris.

*Memoires sur la membrane papillaire, Paris, 1818.*  
*Canalis hyaloideus. Ganglion. Glandula Cloqueti. Ligamentum teres. Capituli costæ. Musculus tenuis. (sacrocoecygeus anterior). Septum Cloqueti (femorale). Spina pubis.*

**Cobbold, Thomas Spencer.** An English zoölogist in London, 1828–1886. Known for important writings on internal parasites of man, published, 1872–3.

**Cohnheim, Julius Friedrich.** German pathologist, 1839–1884. Professor of pathological anatomy in Kiel, Breslau and Leipzig. Well

known for the Cohnheim's areas which are polygonal mosaic-like figures seen in the cross section of a muscle.

**Coiter** (Coyter, Koyter), Volcherus. Dutch anatomist, 1534-1600. Born in Groningen. He early became interested in the study of anatomy and pursued medical subjects in the best universities of France and Italy. He came under the influence of the work of Fallopio, Eustachio and Aranzio. He made especially careful observations on the osteology of the foetus.

*De ossibus et cartilaginibus corporis humani tabulæ, Bologna, 1566.*

**Colles**, Abraham. Irish surgeon, 1773-1843. Professor of anatomy and surgery at Dublin.

*Fascia Collesi. Ligamentum inguinale reflexum. Ligamentum triangulare urethræ. Fascia diaphragmatis urogenitalis superior.*

**Colombo** (Columbus), Matteo-Realdo (Mathieu-Reald) of Cremona, Pisa and Rome; 1494-1559 (1577) Prosector to Vesalius. Professor of anatomy and surgery at Padua. His observations are said to have been copied from the works of Servetus.

*De re anatomica libri XV, Venice, 1559, in folio.*

**Comparetti**, Andrea. Born in Frioul, 1764-1801. He was a student of Morgagni in Padua. He discovered the ganglion on the vagus nerve; and worked on the comparative anatomy of the ear.

*Observationes anatomicæ de aure interna comparata, Padua, 1789, in-4°.*

**Cooper**, Sir Astley Paston. An English surgeon, 1768-1841. Physician to King George IV, at London; and to Queen Victoria.

*The Anatomy and Diseases of the Breast, with numerous plates, Philadelphia, 1845. The Structure and Diseases of the Testis and Thymus Gland, 1832.*

*Fascia cremasterica. Ligamentum pubicum.*

**Cope**, Edward Drinker. A noted American anatomist and paleontologist, 1840-1897. Professor of paleontology in the University of Pennsylvania. An indefatigable writer and explorer; he collected or had collected great numbers of fossil vertebrates which he described in various periodicals and through the United States Geological Survey of which he was Vertebrate Paleontologist. Locy says of Cope that: "He was a comparative anatomist equal to Cuvier in the extent of his knowledge, and of large philosophical views." His publications, relating to the

anatomy, taxonomy and paleontology of vertebrates, are very extensive, numbering nearly 700 titles, varying in importance from notes of a few lines to the large quarto of the Geological Survey of over 1000 pages and 100 lithographic plates. His ideas of taxonomy and philosophy may be gleaned from his volume of essays and his other general works.

*The Vertebrata of the Cretaceous Formations of the West, Rept. of the United States Geological Survey, vol. II, Washington, 1875, in-4°. The Origin of the Fittest. Essays on Evolution. New York, 1887, in-8°, a series of 21 essays. The Mechanical Causes of the Development of the hard Parts of the Mammalia. Journ. Morphology, vol. III, pp. 137-277, 1889. Syllabus of Lectures on Geology and Paleontology, Philadelphia, 1891.*

*Biography: Edward Drinker Cope, Naturalist, a Chapter in the History of Science, American Naturalist, 1897. Also Science, May 7th, 1897. For list of titles, see: Hay, O. P., 1902. Bibliography and Catalogue of fossil Vertebrates. Bull. 179, U. S. Geol. Surv., pp. 39-70.*

**Copho II** (ca 1085-1100). An Italian anatomist of the Salernitan school, who was the author of the well-known medieval handbook entitled: *Anatome Porci*, in which the viscera of the hog are compared to those of man. This work was edited in 1537 by Joh. Eichmann under the title:

*"Anatome porci ex traditione Cophonis."*

**Cornil, André-Victor.** A French anatomist in Paris, 1837-1908.

**Corti, Marchese Alfonso.** An Italian histologist, was born in Gambarana in Sardinia on the 15th of June, 1822; and died in Rome on the 19th of February, 1888. Corti is to be regarded as one of the most brilliant exponents of the physiological and anatomical knowledge of the nineteenth century. His name is associated with the organ of Corti in the ear which he described in 1851 in the "*Zeitschrift für wissenschaftliche Zoologie*," with the title: "*Recherches sur l'organe de l'ouïe des mammifères.*" He studied under the direction of Hyrtl at Vienna, and later became his prosector, 1848-1849. It is thought that about 1850 he came under the influence of Johannes Mueller in Berlin. Later he went to Utrecht where he worked with Schröder van der Kolk, Harting and Verloren. He later was associated with Koelliker and Gegenbaur in histological investigations. In 1852 Corti returned to Turin, but he held no teaching position of which we know anything.

*Organon spirale (Cortii).*

*Biography: Marchese Alfonso Corti, Ein biographischer Versuch von Josef Schaffer, Wien, mit dem Bilde Cortis. Anatomischer Anzeiger, Bd. 46, no. 13/14, pp. 368-382, 1914; Bei-*

*traege zu einer Biographie des Marchese Alfonso Corti.* by Gottfried Brückner — *Archiv f. d. Gesch. d. Naturw. u. d. Technik*, Bd. 5, pp. 69–71, 1913.

**Coste, Jean-Jacques-Marie-Cyprien-Victor.** A French embryologist, 1807–1873. Studied in Paris where he devoted himself especially to embryology. Professor of embryology in the Collège de France. In 1851 he succeeded De Blainville in the Academy of Science.

*Recherches sur la génération des mammifères, suivies de recherches sur la formation des embryons.* Paris, 1835. This essay was given a gold medal by the Academy of Science. *Embryologie comparée. Cours sur la développement de l'homme et des animaux.* Paris, 1837. *Histoire générale du développement des corps organisés* Paris, 1847–1853, 2 Thle. with atlas in folio.

**Cotunnus (Cotugno, Cotugno), Domenico.** An Italian anatomist, 1736–1822. Professor of anatomy in Naples. Known for his work on the internal ear.

*De aquæductibus auris humani,* Naples, 1761.

*Aquila labyrinthi externi. Nervus Cotunnus. Saccus endolymphaticus.*

**Cowper, William.** London surgeon and anatomist, 1666–1709. To him has been attributed the discovery of the glands which bear his name, but which were probably originally discovered by Jean Méry. He is known for the magnificence of the works which he published. It is stated by Turner that he was not always careful to give credit for work which he borrowed. It seems certain that some of the plates published by him were the work of Bidloo.

*Myotonia reformata, or a new administration of all the muscles of the human body,* London, 1694, in-8°. *The anatomy of the human body with figures drawn after the life by some of the best masters in Europe.* Oxford, 1697, in fol. It is said that the plates in this work are beautiful, but that they are not all the work of Cowper, and that the majority of them belong to Bidloo. *Glandularum quarundam nuper detectarum ductuumque earum excretoriorum descriptio cum figuris.* London, 1702, in-4°.

He is the author also of various smaller treatises.

*Glandula bulbourethralis.*

**Crampton, Sir Phillip.** Irish surgeon, 1777–1858.

*Line of* = line from the apex of the cartilage of the last rib.  
*Muscle of* = radiating fibres of the ciliary muscle.

**Crooks, Elias.** Published in 1815 the first anatomical treatise printed in England in the English language.

**Cruikshank, William.** Anatomist and physician of Edinburgh and London, 1745–1800.

*Anatomy of the absorbing vessels of the human body, London, 1786, in-4°.*

**Cruveilhier, Jean (1791–1874).** Anatomist, pathologist and physician in Paris, Professor in Paris.

*Cours d'études anatomiques, 1830. Traité d'anatomie descriptive, Paris, 1863–1871. Anatomie du système nerveux, 1845.*

*Amphiarthrosis. Arteria calcanea ext. — radiopalmaris. — recurrens interna. — scapularis propria. Glandula foraminis obturatorii; — lacrimalis palpebralis. Ligamentum adiposum genu; — interosseum costo-vertebrale, cruris et genu; — occipito-epistropheum; — patellae anterior; — posterior medianum; — pubis inferior; — vertebrale post. (sacroiliacum). Linea alba anococcygea. Musculus abductor hallucis; — abductor obliquus; — auricularis anterior et anticus profundus; — cleidohyoideus; — extensor triceps femoris; — pterygopharyngeus ext.; — scalenus post.; — thyrocricoarytæn.; — transversoanalis; — vastus ext. brachii. Pars orbitopalpebralis. Plexus jugularis post. (vertebralis ext.). Plica adiposa genu (synovialis pat.) Portio funicularis. Ramus a. brachialis; — nervi facialis; — palpebralis et trochlearis; — superior profunda brachii. Rhafe mediana. Sinus v. jugularis int.; — venosus. Truncus venosus alveolaris. Tunica vaginalis propria testis. Venæ medianæ inf. (cerebri inferiores); — jugulares post.; — temporomaxillaris; — thyroelaryngeæ; — ventriculares; — vertebrocostales. Zona atrioventricularis.*

**Cunningham, Daniel John.** A Scottish anatomist, 1850–1909. Born at Crieff. Demonstrator of anatomy, University of Edinburgh, 1874–82; professor of anatomy, Royal College of Surgeons, Dublin, 1882–83; Trinity College, Dublin, 1883–1903; University of Edinburgh, 1903–1909, as successor to Sir William Turner. Editor of the Journal of Anatomy and Physiology.

*Manual of practical Anatomy, 6th edition, 1914. Textbook of Anatomy, 1902, -05, -09, -14.*

*Operculum fronto-orbitale.*

*Biography: Brit. Med. Journ., 1909, vol. 2, pp. 53–57, with portrait. Anatomischer Anzeiger, Bd. 35, p. 109, 1910.*

**Cuvier, Georges-Leopold-Chretien-Frédéric-Dagobert, Baron de la.** A noted French zoologist, paleontologist and comparative anatomist, 1769–1832. He was born at Montbéliard, in the department of Doubs. Through the interests of Geoffroy Saint-Hillaire he was appointed assistant to Mertrud, at that time the aged professor of comparative anatomy in the Museum d'Histoire Naturelle. He was associated with Lacépède and Daubenton in the founding of the National



Institute (1795). In 1799 he succeeded Daubenton in the chair of Natural History in the College of France. In 1802 he became professor at the Jardin des Plantes. In 1808 he was placed by Napoleon upon the council of the Imperial University. During the later years of his life, "By the unanimous consent of the learned world, he was regarded as the most eminent of living naturalists." He filled many important public positions in connection with the educational affairs of France. In 1831 he was raised by Louis Philippe to the rank of a peer of France, and was subsequently appointed president of the council of state.

*Lecons d'anatomie comparée. Paris, 1799-1805, 5 vol., in-8°. pl. Recherches anatomiques sur les Reptiles regardés encore comme oiseaux. Paris, 1807, in-4°, pl. Mémoires pour servir à l'histoire et à l'anatomie des mollusques. Paris, 1817, in-4°, 30 pl. Recherches sur les ossemens fossiles. Paris, 1812, in-4°, 4 vol., pl.; 1821-1823, 5 vol. in-4°, 316 pl.*

Canal of = *sinus venosus in the embryo. Ducts of = cardinal veins. Sinus of = canal. Veins of = ducts.*

Biography: *Éloge historique de G. Cuvier, by M. Flourens, 1858. Memoirs of Cuvier, by Sarah Lee, London, 1833.*

**Czermak, Johann Nepomuk.** Austrian physician and physiologist, 1828-1873. Professor of zoology and comparative anatomy in Graz; physiology in Krakau, Jena and Leipzig. Minute anatomy of the teeth. *Spaces of = gaps in the dentine.*

**d'Abano, Petrus.** See **Abano, Pietro di.**

**Dalenpatius:** a pseudonym under which Plantade of Montpellier published, in 1699, the discovery he had made under the microscope, of a small man, perfectly formed, in the head of a human spermatozoan.

**Darwin, Charles Robert.** England's greatest naturalist, was born at Shrewsbury, February 12, 1809. He spent five years on a voyage of exploration on board H. M. S. Beagle and it was during this long trip that he laid the foundation for his later enormous success. Some years after he returned to England he settled at Downs where he passed the remainder of his life; private means enabling him to devote his whole time to his favorite studies. Darwin will be remembered as the great leader in evolutionary thought. His influence upon modern intellectual work is extremely great, and his influence was felt in other lines of thought than in biology. He died April 19, 1882, and was buried with unusual honors in Westminster Abbey.

*Journal of Researches into the Geology and Natural History of the various Countries visited by H. M. S. Beagle, 1839. The Origin of Species by means of Natural Selection, 1850. This work*

has gone through a large number of editions and is today regarded as one of the great English biological classics. It has been translated into many modern languages. *Descent of Man*, 1871.

*Biography: Life and letters of Charles Robert Darwin, by his son, 3 vols., 1887. More Letters of Charles Darwin, 2 vols., 1903.*

**Darwin, Erasmus.** A man of science and a poet, 1731–1802. He was born at Elton in Nottinghamshire on the 12th of December. His most important work: *Zoonomia*, or the Laws of organic Life, London, 1794, in-4°, contains a system on pathology and a treatise on generation.

*Biography: Richardson: Disciples of Æsculapius, vol. 2, pp. 674–693, 1901.*

**Daubenton, Louis-Jean-Marie.** A noted French naturalist, 1716–1800. He was associated with Buffon in the preparation of the “*Histoire naturelle générale et particulière*,” which first appeared in 1749–1767, in 36 volumes. Daubenton’s share of the work was the anatomical descriptions of various animals. He dissected representatives of 182 species of quadrupeds. He became lecturer on natural history in the College of Medicine in 1775, and besides being actively engaged in his own researches he was keeper of the cabinet of natural history in Paris. The results of his researches into comparative anatomy of fossil and recent animals he published in the “*Mémoires de L’Academie des Sciences*” between 1754–81.

*Angle of = and Line of = anthropological points on the skull.*

**Davaine, Casimir-Joseph.** A French zoölogist, 1811–1882. Known for an important work on intestinal parasites published in 1860.

**Davis, Joseph Bernard.** An English anthropologist, 1801–1881, in London.

**Deiters, Otto Friedrich Karl.** German anatomist, 1834–1863. Docent in Bonn.

*Untersuchungen über Gehirn und Rückenmark, Braunschweig, 1865.*

*Cells of = cells in the organ of Corti. Nucleus of = the lateral vestibular nucleus. Phalanges of = cells. Process of = neuraxon. Terminal frames of = plate-like structures in the organ of Corti uniting Deiters’ cells with Hensen’s cells.*

**de Ketham, Johannis.** See **Ketham, Johannis de.**

**Democritus**, a Greek philosopher, one of the founders of the Atomic philosophy, was born at Abdera, 494 (460) B. C. He was a

contemporary of Socrates. His love of study was so great that he once said that the discovery of a true cause was greater than the possession of the kingdom of Persia. Cuvier speaks of him as the first comparative anatomist. Töply says he wrote an anatomy of the chameleon.

**Demours, Pierre.** A French oculist in Paris (1702-1795), who is noted for his work on the anatomy and pathology of the eye. He demonstrated that the cornea is not a prolongation of the sclerotic, and observed that the posterior layer of the cornea is separable.

*Nouvelles reflexions sur la lame cartilagineuse de la cornée, Paris, 1770, in-8°.*

*Membrane of = lamina basalis posterior. (Descemeti.) Endothelium camerae anterior.*

**Denonvillier, Charles-Pierre.** A surgeon in Paris, 1808-1872.

*Aponeurosis of = retrovesical fascia.*

**Desault, Pierre-Joseph.** An eminent French surgeon, 1744-1795. He was the teacher and associate of Bichat. He is said to have been the creator of surgical anatomy in France. Bichat, after the death of Desault, published the complete works of the latter:

*Les Oeuvres chirurgicales de Desault, in 3 vols., in-8°.*

There is an extensive account of the life of Desault in the *Biographie Médicale*.

**Descartes, René.** An eminent philosopher, who was born in La Haye, in Touraine, on the 31st of March, 1596, and died in Stockholm on the 11th of February, 1650. Descartes touched on nearly every phase of philosophical and scientific thought of his day and it is not surprising to find him interested in anatomy and physiology. His physiological and anatomical treatises entitled: "*L'Homme*," "*La Formation du Foetus*," "*Tractatus de Homine*," were first published in 1664 by Clerselier. Perhaps his most important production for the use of scientific workers is his "*Discours de la méthode pour bien conduire sa raison et chercher la vérité dans les sciences*," which appeared in 1637. In his "*Tractatus de Homine*," there are several very good figures of the brain used to elucidate his fanciful ideas of the nature of nerve impulses. Huxley has discussed the general bearing of Descartes' ideas in his essay on the "Discourse" in: *Methods and Results*, p. 166, 1890.

**Descemet, Jean.** Physician in Paris, 1732-1810. Professor in Paris. He discovered, or at least described the membrane of Descemet,

although this was probably first discovered by Benedict Duddell, a London oculist. The membrane was also early noted by Demours.

*Lamina elastica.*

**Detharding, Georges.** Born at Stralsund, Prussia, 1671-1747. Professor of medicine at Rostock, 1697-1732; at Copenhagen he became first, professor, then dean of the faculty of medicine.

*Oratio de idea veri anatomici, Rostock, 1677, in-4°.* *Dissertatio de fontanella infantum, Altdorf, 1655, in-4°.* *Programma ad anatomiam in corpore masculino instituendam invitans, Rostock, 1701, in-4°.*

**Detharding, Georges Christophe.** Son of the preceding, born in Rostock, 1699-1784. When his father was called to Copenhagen he succeeded him at Rostock as professor of medicine.

*Dissertatio de glandula inguinali, Rostock, 1746, in-4°.* *Dissertatio de corpore humano semper mutabili, Rostock, 1752.*

**Deusing, Antoine.** A Dutch physician, 1612-1666. Born at Meurs. He studied at the University of Leyden, and became professor of mathematics in Harderwick, then physics and mathematics, and then medicine. His works do not attest deep inquiry into the subjects pursued. He was the author of numerous treatises and dissertations, some of which treat of anatomical subjects. The following may be mentioned:

*Examen anatomæ anatomiae Bilsianæ, seu epistola de chyli motu, Gronigen, 1665, in-12°.*

**Diemberbroeck, Isbrand de.** A Dutch physician, 1609-1674. He was born in Montford in Holland. He was professor of medicine and anatomy in the university at Utrecht for twenty-four years. He did something to advance pathological anatomy.

*Anatome corporis humani, Utrecht, 1672, in-4°.* *Opera omnia anatomica et medica, Utrecht, 1685, in folio.*

**Diocles (Diokles),** of Carystus and of Euboea (ca 360 B. C.) is the author of a work: *Περί Γυναικείων*, which treats of the development of the embryo, and female diseases. He discusses menstruation, abortions, the cause of severe labor and other points well known in modern gynecology.

**Diogenes,** of Apollonia in Crete, a celebrated natural philosopher who lived at Athens about 460 B. C. He was a pupil of Anaximenes and a contemporary of Anaxagoras. He is said to have proposed the terms amnion and chorion for the foetal membranes.

**Dionis, Pierre.** A Parisian surgeon, —1718. He was professor of anatomy and surgery at the "Jardin du Roi," in 1673.

*Histoire anatomique d'une matrice extraordinaire, Paris, 1683, in-12°. L'anatomie de l'homme, Paris, 1690, in-8°. This was translated into many languages.*

**Disse, Josef.** A German anatomist, 1852-1912. Born at Brakel; studied medicine in Göttingen, Würzburg, München and Erlangen; later assistant to Gerlach, 1875. Assistant to Waldeyer in Strassburg; and in 1880 professor ord. of anatomy in Tokio. Returned to Europe in 1888 as a worker in the anatomical institute in Göttingen with Merkel, later a. o. professor, 1894- ; professor extraord. at Marburg.

*Beiträge zur Anatomie des Menschlichen Kehlkopfes, 1875. Zur Anatomie des Menschlichen Harnleiters, 1901. Ueber die Bildung der Grundsubstanz des Knochengewebes, 1911.*

*Biography: Anatomischer Anzeiger, Bd. 42, pp. 26-28, 1911. With bibliography.*

**Doellinger, Johann Ignaz Josef.** A German physician and anatomist, 1770-1841. A student of Barth and Prochaska in Vienna; Scarpa in Pavia. Professor of anatomy and physiology in Würzburg, 1803-23; then in Munich. A teacher of Karl Ernst von Baer in Würzburg.

*Ueber den Werth und die Bedeutung der vergleichenden Anatomie. Würzburg, 1804, in-8°. Beiträge zur Entwicklungsgeschichte des menschlichen Gehirns. Francfort, 1814, in-fol., 2 pl. De vasis sanguiferis. Munich, 1828, in-4°, 2 pl.*

*Tendinous ring of = a thickening of Descemet's membrane.*

**Dogiel, Jan von.** A Russian anatomist, zoologist and physiologist; 1830- . Worked in Heidelberg with Helmholtz, Kirchhoff and Bunsen; in 1868 privat-docent in St. Petersburg; professor of pharmacology at Kasan. Author of numerous papers on anatomical and physiological subjects.

*Anatomie und Physiologie d. Herzens der Larve von Corethra plumicornis, 1877, St. Petersburg.*

**Dohrn, Anton.** A German zoologist, 1840-1909. The founder and first director of the Zoological Station of Naples, the foremost biological station in the world. As a boy Dohrn was interested in entomology, and later studied zoology at Königsberg, Bonn and Berlin, where he was especially influenced by the work of Haeckel, Gegenbaur, and Charles Darwin. Later he became a pupil and colleague of Haeckel at Jena, where he held the position of docent in the university. In 1870 he began maturing his plans for the establishment of a zoological station in Naples. In 1868 he had already established a station on the island of Sicily at his own cost. The station at Naples was formally opened in

February, 1874. From this station there are issued three serials, founded under the impetus of Dohrn's influence: "*Zöologischer Jahresbericht, 1879-* ; *Fauna und Flora des Golfes von Neapel und der angrenzenden Meeresabschnitte; Mittheilungen aus der Zoologischen Station zu Neapel, Zugleich ein Repertorium für Mittelmeerkunde, 1879-* . The best account of the zoological station at Naples and of the work done there has been given by Charles Atwood Kofoid in: "*The Biological Stations of Europe, Bulletin, no. 4, 1910, whole number 440, U. S. Bureau of Education, pp. 7-32, with photographs, plans and bibliography.*"

Dohrn is himself the author of many zoological studies, and his earlier years were spent in the study of embryology of the arthropods. In 1875 there appeared his paper, "*On the Origin of the Vertebrata and on the Principle of the Change in Function,*" which has been regarded as one of his most important studies. He spent more than a quarter of a century working at the problem of the origin of the vertebrates. To Dohrn vertebrates were the descendants of chaetopod worms. His studies on this subject resulted in a series of 25 publications, *Studien zur Urgeschichte des Wirbelthierkörpers, 1879-1907.*

*Biography: Anton Dohrn, by Th. Boveri, in Gedächtnisrede, gehalten auf dem Internationalen Zoologen-Kongress in Graz am 18, August, 1910; Anatomischer Anzeiger. Bd. 35, pp. 596-603, with titles of 80 contributions; Popular Science Monthly, 1910, pp. 99-101, with portrait. Science, November 10th, 1911.*

**Domenico de Marchetti.** See **Marchetti, Domenico de.**

**Donné, Alfred.** A French anatomist, 1801-1878. Known for his microscopical studies.

*Recherches microscopiques sur la nature des mucus, 1837. Cours de microscopie complémentaire, 1844, with atlas (1846). Corpuscles.*

**Douglas, James.** An English physician and anatomist, 1675-1742, of London, where he practiced obstetrics and taught anatomy. He is the author of several interesting anatomical works, among which may be mentioned:

*Myographiæ comparatæ specimen, or a comparative description of all the muscles in a man and a quadruped. London, 1707, in-12°. Bibliographiæ anatomica specimen, seu catalogus omnium pene autorum, qui rem anatomicam ex professo vel obiter scriptis illustrarunt, London, 1715, in-4°. A description of the peritoneum, London, 1730, in-4°.*

*Pouch (cul-de-sac) of = Excavatio terminali uterina. Semilunar fold of = Plica terminali uterina. Line of = Linea semicircularis. Septum.*

**Doyère, Louis.** A French physiologist, 1811-1863.

*Eminence or hillock of* = a slight elevation where a nerve enters a muscle.

**Drake, James.** A noted English physician, in London, 1667-1707. Member of the Royal Society, and of the College of Medicine in London. He wrote a:

*New System of anatomy, London, 1707, in 2 vol. This work went through three editions and was augmented to 4 volumes.*

**Drelincourt, Charles.** Was born at Charenton, near Paris, 1633-1697. Professor of medicine in the university at Leyden, 1668; of anatomy in 1669. He is noted for his researches on generation and is reputed to have been the first to describe the valve of Vieussen.

*Anatomicum præludium, quod Lugdunensium in amphitheatro suam ad primam anatomes . . . adhibuit, Leyden, 1670, in-12°.*  
*De humani foetus membranis hypomnemata, Leyden, 1685.*

**Dryander, Johann (Eichmann, Johann).** An anatomist of the 16th century, died 1560. Professor of anatomy at Marburg. He was one of the first to use figures to show the anatomy of the human body. He based his work on the dissection of two cadavers, done in 1535-6. His figures of the colon, caecum and appendix are fairly accurate.

*Anatomix pars prior, in qua membra ad caput spectantia recensentur et delineatur, Marbourg, 1537. Illustrated with 20 plates.*

**Düber, Gustav Wilhelm Johann von.** A Swedish anatomist 1822-1892. Professor in Stockholm. Author of a large work on Lapland and the Laplanders.

**Dubois (duBois, also called Sylvius), Jacques, 1478-1555.** [Often confused with Francois de la Boë (1614-1672)]. Dubois was born at Louville. He was the teacher of Vesalius. Professor of anatomy in the Royal College. Haller says, "He had nothing but contempt for all new discoveries and became a bitter adversary of Vesalius." He distinguished voluntary from involuntary muscle, and did much to perfect anatomical nomenclature.

**Duddell, Benedict.** An English oculist, of the 18th century.

*Membrane of* = *Lamina elastica posterior (Descemeti).*

**Dugés, Antoine-Louis.** A French physician and zoologist, 1797–1838. Professor of obstetrics, then of pathology. Dean of the faculty at Montpellier.

*Traité de Physiologie comparée de l'homme et des animaux, 1838. Recherches sur l'osteologie et la myologie des Batraciens à leurs différents âges, Paris, 1834, in-4°, with 20 plates.*

**Duhamel du Monceau, Henri-Louis.** A French physician and physiologist, born in Paris, 1700–1781. He is particularly interesting as being one of the first to experiment on the growth of bone, with the use of madder. He wrote a treatise on the growth of the madder plant, and also concerning the nature of the periosteum.

*Traité de la garance et de sa culture, avec la description des étuves pour la dessécher et des moulins pour la pulvériser, Paris, 1757.*

**Dujardin, Felix.** French naturalist, born at Tours in 1801, died at Rennes in 1860. Professor of mineralogy at Toulouse in 1839. Professor of zoology at the faculty of science at Rennes; corresponding member of the institute, 1859. He is known especially for his microscopic observations, particularly on Infusoria. He was one of the first to recognize the nature of protoplasm.

**Dulaurens, André.** A French physician (—1609). Born at Arles. Chancellor of the faculty of medicine at Montpellier.

*Histoiræ anatomica humani corporis et singularum ejus partium, Erfort, 1595, in-8°. Opera omnia anatomica et medica, Francfort, 1627.*

**Duméril, André-Marie-Constant.** An eminent French zoologist and comparative anatomist, 1774–1844. Born at Amiens. Teacher of anatomy at Rouen, 1793; 1794 prosector in the school of medicine in Paris; 1800 professor of anatomy and physiology, which chair he occupied for sixteen years. He succeeded Cuvier as professor of natural history in the École centrale du Pantheon and later Lacépède as professor of herpetology and ichthyology at the Jardin du Roi.

*Essai sur les moyens de perfectionner et d'étendre l'art de l'anatomiste. Paris, 1802, in-4°. Zoologie analytique, ou Méthode naturelle de classification des animaux. Paris, 1806, in-8°. Projet d'une nomenclature anatomique, publié en 1793, dans le Magasin encyclopedique.*

**Dumortier, B. C.,** was one of the first to observe (1832) cell division, which he saw in the thread alga (*Conferva aurea*).

*Mémoire sur la structure comparée des animaux et des végétaux. Bruxelles, 1833, in-4°, with 2 plates.*



**Duncan, James Matthews.** An English gynecologist, 1826–1890.  
*Folds of* = folds on the peritoneal surface of the uterus.  
*Ventricle of* = *cavum septi pellucidi*.

**Dupuytren, Guillaume.** A French surgeon and anatomist, 1777–1835. He repeated and confirmed much of Bichat's work. Surgeon in chief to the Hôtel Dieu in Paris.

*Propositions sur quelques points d'anatomie, de physiologie et d'anatomie pathologique, Paris, 1803.*

**Dürer, Albrecht.** One of the great European artists, 1471–1528. After four centuries Dürer remains the master in painting, and in engraving on copper and on wood. He was born in Nuremberg, was a contemporary of Titian and Raphael, with both of whom he ranks as an equal. His work on human proportions is of interest to all anatomists. The results of his studies are contained in:

*De Symetria partium in rectis formis humanorum corporum libri in latinum conversi, de varietate figurarum, etc., Nuremberg, 1532.*

*Biography: Dürer's anatomische Zeichnungen in Dresden und Leonardo da Vinci, von Karl Sudhoff, in "Archiv für die Geschichte der Medicin, Bd. 1, p. 317, 1907." His influence in Anthropology is discussed by Haddon in "History of Anthropology."*

**Dursy, Emil D.** A German anatomist, 1828–1878. Student of Henle in Heidelberg, 1852. Prosector to Luschka in Tübingen, 1854; professor 1861.

*Die Muskellehre in Abbildungen, zum Gebrauche bei Präparirübungen, Tübingen, 1860, in-4°, mit 60 taf. Zur Entwicklungsgeschichte des Kopfes des Menschen und der höheren Wirbelthiere, Tübingen, 1869, mit Atlas.*

**Dutrochet, René-Joachim-Henri.** A French physiologist and natural philosopher, 1776–1847. He advanced the idea in 1814 that animals and plants are composed of cells.

*Recherches anatomiques et physiologiques sur la structure intime des animaux et des végétaux et sur leur motilité, Paris, 1824, in-8°, 2 pl.*

**Duval, Mathias-Marie.** A French physician and anatomist, born at Grasse, 1844–1915. Prosector in Strassburg. Member of the Academy of Medicine, 1882. Professor at L'École Nationale des Beaux-Arts. Duval is widely known for his studies in embryology and in artistic anatomy.

*Gundriss der Anatomie für Künstler, 3rd edition, 1908. Stuttgart (Translation by E. Gaupp). Histoire de l'Anatomie plastiques, Paris, 1898. Atlas d'Embryologie, avec 40 planches en noir et en couleur, 1889, Paris.*

**Duverney**, Joseph-Guichard. A French anatomist, 1648-1730. One of the greatest anatomists of France, he verified nearly all the discoveries made by his contemporaries. Professor of anatomy, Jardin du Roi. Discovered the vulvo-vaginal glands in the cow, to which the term Bartholin's glands has been applied in the human female. He also described the decussation of the pyramids.

*Traité de l'organe de l'ouïe, contenant la structure, les usages et les maladies de toutes les parties de l'oreille, Paris, 1683, in-12°. Oeuvres anatomiques, Paris, 1761, 2 vol., in-4°, with 30 pls.*

*Glandula vestibularis major (Bartholini). Foramen epiploicum.*

**Dwight**, Thomas. An American anatomist, 1843-1911. Born in Boston, studied at Harvard, where he received the degree of M. D. in 1867. Instructor of comparative anatomy, Harvard, 1872; lecturer and later professor of anatomy in Medical School of Maine, Bowdoin, 1872-76; instructor in histology, Harvard Medical School, 1874-80; topographic anatomy, 1880-83; Parkman professor of anatomy, 1883-1911. Noted for his studies in variations of human skeletal elements, author of numerous contributions to human anatomy. Pioneer worker in topographical anatomy in America.

*Frozen Sections of a Child, New York, 1881, in-8°.*

*Biography: Thomas Dwight, M. D., LL. D., Parkman Professor of Anatomy, Harvard Medical School, Anatomical Record, vol. 5, no. 11, 1911, p. 531, with portrait and bibliography.*

**Dzondi**, Charles Henri (Karl Heinrich). A surgeon in Saxony, 1770-1835. He was interested in comparative anatomy. Professor of surgery, Halle, 1811.

*Supplementa ad anatomiam potissimum comparatum, Leipzig, 1806.*

**Eble**, Burkhard. A German anatomist, 1799-1839. Student of Römer, for 10 years prosector in anatomy; 1837 librarian in Josephs Academy.

*Die Lehre von den Haaren, Vienna, 1831, 2 vol. in-8°, 14 plates.*

**Ebner**, Victor (Ritter von Rofenstein). Viennese histologist, 1842-.... Student of Brücke and Rollett. Professor of histology and embryology in Innsbruck, 1873-1888; professor of histology in Vienna, 1888.

*Glands of = mucous glands in the tongue. Fibrils of = fine thread-like lines in the dentine. Reticulum of = a network in the seminiferous tubules.*

**Ecker**, Alexander. A German anatomist, 1816–1887. Professor of anatomy and physiology at Basel, 1845–49; in Freiburg, 1850–87.

*Die Anatomie des Frosches, Braunschweig, 1864–1882.*

*Convolution of = posterior occipital. Fissure of = occipital fissure. Plug of = an ingrowth of yolk cells.*

**Ehrenberg**, Christian Gottfried. A German zoölogist, 1795–1876. Professor in Berlin. On an exploring trip to Egypt he began his epoch-making work: "*Die Infusionstierchen als vollkommene Organismen (1838)*" which is of fundamental significance in biology.

**Ehrmann**, Karl Heinrich. Anatomist in Strassburg, 1792–1878. He was instrumental in the erection of the anatomical institute.

**Eichmann**, Johann. See **Dryander**, Johann.

**Eisenmann**, Georges Henri. A German physician and teacher of anatomy in Strassburg, 1693–1738. During his medical course he visited the universities in Holland, France and Germany. In 1733 he was made professor of physics in the University of Strasbourg; from 1734–56 he was professor of surgery and anatomy; and from 1756–68 he was professor of pathology.

*Tabulæ anatomicæ quatuor uteri duplici observationem rariorum sistentes, Strasbourg, 1752, in folio. De glandula thyroidea, Strasbourg, 1742, in-4°.*

**Ellis**, George Viner. An English physician; wrote "*Demonstrations of Anatomy*" (8th edition, 1879) and with G. H. Ford, "*Illustrations of dissections*," 2 vols., London, 1867.

**Elsholz**, Jean Sigismund. A German physician, 1623–1688. Born at Frankfort-an-der-Oder, he became a physician, a botanist and a chemist of note. He wrote a work of anthropological interest, entitled:

*Anthropometria, sive, de mutua membranorum corporis humani proportione de nervorum harmonia, libellus. Padua, 1654, in-4°.*

**Empedocles** of Agrigentum (490–430 B. C.). A Greek philosopher, of whose life and writings little is known, but it is reported that he made observations on the physiology and anatomy of the human body. He is said to have discovered the membranous labyrinth of the ear, and the ear bones; but so much of what is said of Empedocles is traditional that these observations are uncertain.

**Erasistratus.** A Greek physician in Alexandria, 330–250 B. C. He is reputed to have been the first to make a complete dissection of the human body. He made many important discoveries, especially in the brain; saw the lacteals; distinguished between connective tissue and nerve; recognized the valves of the heart, and distinguished them by the names *tricuspid* and *sigmoid*; studied particularly the shape and structure of the brain, and its divisions, cavities and membranes. He likened the gyri to the folds of the jejunum; discovered the lymphatic vessels in the mesentery. It is said that he likewise distinguished nerves into those of sensation and motion. None of his works are extant. By repute he shares with Herophilus the beginning of research into systematic anatomy.

**Estienne (Etienne), Charles.** A French physician, 1503–1564. Born in Paris. He discovered the capsule of Glisson; was the first to detect the valves in the hepatic veins; recognized that the oesophagus and trachea were different structures; and was one of the first to demonstrate the canal through the entire length of the spinal cord. Turner regards him as in the first rank of anatomists. He is also known as Stephanus.

*De dissectione partium corporis humani libri tres, una cum figuris et incisionum declarationibus a Stephano Riveria, Paris, 1546, in folio.*

**Etienne, Geoffroy St. Hilaire.** See **Geoffroy St. Hilaire.**

**Ettmüller, Michel Ernst.** A German physician, 1673–1732. Professor of medicine in Leipzig, 1702. In 1706 professor of anatomy and surgery; in 1719 professor of physiology; in 1724 professor of pathology, and in 1730 director of the academy.

*Dissertatio de circulatione sanguinis in foetu, Leipzig, 1715, in-4°. Dissertatio de cerebri membranis, Leipzig, 1721, in-4°.*

**Eustachio (Eustachi, Eustachius, Eustacchi, Eustach), Bartolomeo.** A celebrated Italian anatomist, 1520–1574. Professor of anatomy at Rome; physician to the Pope. Turner says he divides with Vesalius the honor of creating the science of human anatomy. He is the first to have studied accurately the anatomy of the teeth, and the phenomena of the first and second dentition; was the first to discover the membranous cochlea, tensor tympani muscle, suprarenal capsule, ventricles of the larynx and he made other observations in human and comparative anatomy which were of primary importance. It has been said that if Eustachius had been permitted to publish his results during his lifetime anatomy would have developed to its present state two centuries earlier.

His work "Anatomical Engravings" was not published for over two hundred years after his death.

*Opuscula anatomica, Venice, 1563, in-4°. Tabula anatomica, Rome, 1714, in folio.*

*Cushion. Muscle. Cartilago tubæ auditivæ. Tube of = tuba auditiva (Eustachii), Tuber. Valve of = valvula v. cavæ.*

**Fabricius**, Hieronymus (1537-1619), (Fabrizio, Geronimo), Fabrice d' Aquapendente, also known as Aquapendente or more usually Fabricius ab Aquapendente, was a celebrated Italian anatomist, born at the episcopal city Aquapendente from which he derived his surname. He studied anatomy under Fallopio at Padua and was his successor, 1562. He was the teacher of Harvey and it was through his influence that Harvey became interested in the vascular system. Fabricius himself had been working on the valves of the veins when Harvey came to him at Padua (for portrait of Fabricius see: Locy, *Biology and its Makers*, p. 43). The collected works of Fabricius were printed by Bohn under the title of "*Opera omnia anatomica et physiologica*" in Liepzig, 1687. Another edition by Albinus was issued at Leyden, 1738, in folio.

*De formato fetu, Padua, 1600, in folio. Tractatus de oculo, visus organo, Padua, 1601, in folio. De venarum ostioliis, Padua, 1603-1605, in folio. De formatione ovi et pulli, Padua, 1621, in folio. Opera anatomica, Padua, 1625, in folio. Opera omnia anatomica et physiologica, cum præfatione Bern.-Sieg. Albini, Leyden, 1723, in folio.*

*Biography: In the Albinus edition of his works is a biographical sketch of the life of Fabricius.*

**Fallopio** (Fallopia, Falloppio, Fallopius), Garbriello, born in Modena, was one of the greatest anatomists of his time, 1523-1562. He was professor of anatomy at Ferrara, 1548, at Pisa, and in 1551, of anatomy and botany at Padua. He studied the general anatomy of the skeleton, and the inner ear; described especially the tympanum, the two fenestræ and their communication with the vestibule and cochlea; gave the first good account of the stylomastoid hole and canal, of the ethmoid bone and its air cells, and the lachrymal passages; corrected several mistakes made by Vesalius in myology; and was especially interested in the anatomy of the sexual organs, and discussed the hymen, clitoris, seminal vesicles, uriniferous tubules, Poupert's ligament and the uterine tubes which are still known as the Fallopian tubes.

*Observationes anatomica, Venice, 1561, in-8°. This was the only anatomical work published during the lifetime of Fallopius. Opera genuina omnia, tam practica quam theoretica, in tres tomos distributa, Venice, 1584, in folio.*

*Aqueduct. Arch. Canal. Hiatus. Ligament. Tube.*

**Fantoni, Jean.** A celebrated anatomist and physician of Turin, 1675-1758. Studied with Duverney and Méry in Paris. Professor in Piedmont.

*Anatomia corporis humani ad usum theatri medici accomodata.*  
Turin, 1711, in-4°.

**Feller, Chretien-Gotthold.** A physician at Budissin, 1755-1788.

*Dissertatio de utero canino, Leipzig, 1780, in-°4. Vasorum lacteorum atque lymphaticorum anatomico-physiologica descriptio, Leipzig, 1784, in-4°.*

**Ferrari da Grado, Giammateo.** 1432-1472. Professor of medicine at the University in Pavia. He was the first to describe the female gonads as *ovaries*. He is the author of no especial work in anatomy but anatomical observations are found in his "Practica," Pavia, 1471; and in his "*Expositiones super vigesimam secundam fen Canonis Avicennæ,*" Milan, 1494, in folio.

**Ferraro, Jean-Baptiste.** A physician in the time of Phillippe II of Spain, is the author of a work on the anatomy of the horse:

*Due anatomie, una delli membri e viscere, l'altra dell' ossa de' cavalli. Bologna, 1673, in-12°.*

**Ferrein, Antoine.** A French anatomist and physician, 1693-1769. Professor of anatomy and surgery at the Jardin des plantes, in Paris, as successor to Winslow.

*Sur la structure du foie et de ses vaisseaux, 1733. Observations sur le nouvelles artèries et veines lymphatiques, 1741. De la formation de la voix de l'homme, 1741. Sur les mouvements de la mâchoire inferieure, 1744. Sur la structure des viscères nommés glanduleux, et particulièrement sur celle des reins et du foie, 1746.*

*Canal. Chorda vocalis. Foramen. Ligament. Pyramid (Processus- pars raidata lobulorum renalium). Tubes.*

**Fielding, George Hunsley.** An English anatomist. 1801-1871.

*Membrane of = mem. versicolor, tapetum.*

**Fleischmann, Gottfried,** was born in Erlangen, Bavaria, February 23rd (1777-1853). He was granted his doctorate in the city of his birth in 1800. In 1804 he became vice-professor in the anatomical theater in Erlangen. He was interested in muscle variations and is the author of:

*Leichenoeffnungen, Erlangen, 1815, in-8°. De chondrogenesi asperæ arteriæ et de situ oesophagi abnormi nonnulla. Erlangen, 1820, in-4°.*

*Bursa of = an inconstant serous bursa at the level of the frenum linguæ.*

**Flemming, Walther.** A German anatomist and microscopist, 1843–1906. Studied in Berlin and Rostock. Private assistant in zoology to Professor Semper at Würzburg, 1869; assistant in the physiological laboratory at Amsterdam, 1869–70. Prosector in anatomy at Prague, 1873. Ausserordl. professor of histology and embryology at Münden; in 1875 succeeded Henke in Prague; 1876 ord. professor of anatomy and director of the anatomical institute at Kiel as successor to von Kuppfer. Flemming attained eminence in the study of the cell, histological investigations and in technique. He is the author of some 90 contributions to histology and technique.

*Studien ueber Regeneration der Gewebe, 1885. Ueber die Chromosomenzahl beim Menschen, 1897.*

*Flemming's Fluid.*

*Biography: Anatomischer Anzeiger, Bd. 28, pp. 41–59, with bibliography and portrait, by Dr. F. Graf v. Spee.*

**Flint, Austin.** American physician and physiologist, 1836–. . . .

*Arcade of = vascular arches at bases of pyramis of kidney.*

**Flood, Valentine.** Irish surgeon, 1800–1847.

*Ligament of = a portion of the coracohumerale.*

**Flourens, Marie-Jean-Pierre.** A French physiologist in Paris, 1794–1867. Was a student of Cuvier, by whom he was chosen in 1828 to deliver a course of lectures on natural history in the Collège de France. In 1830 he succeeded Cuvier as lecturer on human anatomy at the Jardin du Roi, and on Cuvier's death became professor of comparative anatomy, 1832. He was created a peer of France in 1846; 1855, professor of natural history at the Collège de France. Was an active member of the Academy of Science during his lifetime. He was a very successful experimenter.

*Recherches sur le développement des os et des dents, 1845.*

*Anatomie générale de la peau et des membranes muqueuses, 1843.*

*Mémoires de anatomie et de physiologie comparées, 1844.*

*Nodus vitalis.*

**Flower, Sir William Henry.** English zoologist and anthropologist, 1831–1899. Born in Stratford, studied medicine in Dublin and London. In 1859 assistant and teacher of anatomy at the Middlesex Hospital in London; 1860 curator of the Hunterian Museum in the Royal College of Surgeons; in 1870 professor of comparative anatomy and physiology as successor to Richard Owen; in 1884 he succeeded Owen as Director of the Natural History Museum at South Kensington. For many years president of the London Zoological Society.

*Introduction to the Osteology of Mammalia, 1870. Diagrams of the nerves of the human body, 1861.*

**Fludd**, Robert, called also *de Fluctibus*, was born at Milgate, Kent, England, 1574–1637. Known as a theosophist.

*Anatomia amphitheatrum effigie triplici, more et conditione varia, designatum, Frankfurt, 1633.*

**Fœsius** (Foes), **Anatius** (Anuce), born at Metz, Lorraine; 1528–1595. In a time of political revolutions and in spite of pecuniary difficulties he found time to pursue his medical practice and revise and edit the works of Hippocrates, Galen, Oribasius, and other early writers. He had access to manuscripts in the Vatican and in the library at Fontainebleau. The Frankfurt edition of Hippocrates (1595) is the most learned and valuable translation and commentary prior to that of Emile Littré (1839–1861).

**Fohmann**, Vincenz. A German anatomist, 1794–1837. Prosector to Tiedemann in Heidelberg; 1827–37 professor of anatomy in Lüttich.

*Das Saugadersystem der Wirbelthiere, Heidelberg, 1827, in folio, 18 pl. Anatomische Untersuchungen ueber die Verbindung der Saugadern mit den Venen, Heidelberg, 1821, in-12°.*

**Fol**, Hermann. A French zoologist, 1845–1895. Studied in Genf with Claparède, and on his advice went to Jena to study with Gegenbaur and Haeckel. He accompanied the latter on an excursion to the Canary Islands. He took his degree in Berlin in 1869. In 1876 he was called to Genf as professor of comparative embryology. He founded, in 1884, the “Recueil Zoologique Suisse” and in the same year began the publication of his “*Lehrbuch der vergelichende mikroskopische Anatomie, mit Einschlusse der vergleichenden Histologie und Histogenie.*” In 1886 Fol went to Villafranca as associate director of the zoological station.

*Biography; Anatomischer Anzeiger, Bd. 10, pp. 143–144, 1895.*

**Folli** (Folius), **Cecile** (Cecilio). A Venetian anatomist, 1615–1650. He was educated at Padua and shortly after his return to Venice was made *chevalier*, and given a chair of anatomy which he held until his death.

*Nova auris internæ delineatio, Venice, 1645. Sanguinis à dextro in sinistrum cordis ventriculum defluentis facilis reperta via; cui non vulgaris in lacteas nuper patefactas venas animadversio præponitur, Venice, 1639, in-4°. Discorso anatomico nel quale si contiene una nuova opinione sopra la generazione e l'uso della pinguedine, Venice, 1644, in-4°.*

*Musculus auris externus. Processus ant. mallei.*

**Fontana**, Felice (Felix). An Italian anatomist, born near Tyrol, 1730–1805. Professor of philosophy, University of Pisa; director natural



history museum, Florence, where he gathered his great anatomical museum, which became the most famous collection of its time (in the 18th century), consisting of over 1500 preparations in wax. This collection still exists. A good account of this museum and the manner in which it was prepared is in the *Biographie Médicale*.

He has left little or no systematic anatomical writings, his bent of mind being essentially physiological.

*De motu del iride, 1767. Recherche filosofiche sopra il veleno della vipera, 1767. This work was expanded and reproduced in 1781, in 2 volumes, quarto.*

**Fonteyn, Nicolas** (also known as Fontanus). An anatomist in Amsterdam during the middle of the 17th century.

*Annotationes ad epitomen anatomiae Andreæ Vesalii, Amsterdam, 1642, in folio.*

**Ford, Corydon L.** American anatomist, 1812–1894. Prosector in the medical department of the University of Buffalo. Professor of anatomy in the University of Michigan for 40 years.

**Forli, Jacopo da.** An anatomist of the 15th century, ———1413. He is known chiefly for his commentaries on the chapter of Avicenna's work which deals with embryology.

**Foville, Achille-Louis.** French psychiatrist, 1799–1878.

*Fasciculus Fovillei.*

**Fracassati, Carlo.** An Italian anatomist, an associate of Malpighi. Professor of anatomy in Bologna and Pisa. He is noted for his researches on the structure of the brain and the tongue.

**Frey, Heinrich.** A Swiss anatomist, 1822–1890. Professor of anatomy in Zürich.

*Håndbuch der Histologie und Histochemie des Menschen, 1859. Das Mikroskop und die Mikroskopische Technik, 1863.*

**Frommann, Carl Friedrich Wilhelm.** A German anatomist, 1831–1892. Practicing physician in Weimar, 1861–1869. Docent in Heidelberg, 1869–1873, then in Jena, where in 1875 he was made a. o. professor, later professor of histology. Editor of "Jenaische Zeitschrift f. Naturwissenschaften," author of some 40 contributions to the biology of the cell.

*Untersuchungen ueber Struktur, Lebenserscheinungen und Reaktionen tierscher und pflanzlicher Zellen, 1884.*

*Striae transversae (of medullated nerve fibres.).*

*Biography: Anatomischer Anzeiger, Bd. 7, pp. 437–439, 1892.*

**Gaertner.** See **Gartner**, Hermann Treschow.

**Gafiki**, Muhammed el. An Arabian anatomist of the 12th century who published a work on the anatomy of the head and eye.

**Gagliardi**, Dominique. A professor of medicine in the Collège de la Sapience, at Rome in the 17th century.

*Anatome ossium, novis inventis illustrata, Rome, 1689, in-8°.*

**Galen** (Galenus), Claudius. A Graeco-Roman anatomist, 130–200 A. D. The most celebrated of all the ancient anatomists. He was born at Pergamus, in Mysia, an ancient province of Asia Minor. About his twentieth year he went to Smyrna to study under the anatomist and physician Pelops, and the philosopher Albinus. He went to Rome in 164, where he began his career as a physician; leaving this city after four years to become physician to Marcus Aurelius in Venice. He returned to Rome in 170 A. D., where many of his important treatises were written. He is the reputed author of more than 500 separate works, but it seems that some of these are spurious. It is said that Galen never dissected a human body but that most of his observations were made on lower mammals. It is, however, conceded that his opportunities for observations of living organs from his attendance on gladiators were not neglected. His discussions of many systems of the body are marvelous considering the time at which he wrote. His work is to be looked upon as the repository of all anatomical knowledge of his day, and while it is difficult, if not impossible, to select those parts which are distinctly Galen's own, his works show a careful editing and digesting of all he found, either in the literature or in dissecting. The work of Galen has been widely and voluminously discussed for the past 1800 years and the literature on his life and writings is enormous. His writings are discussed in *N. & P.* by Robert Fuchs, Bd. I, p. 379 ff; his strictly anatomical contributions are briefly discussed by Turner, *Ency. Brit.*, I, p. 803; an account of his life and works is given in *Bio. Med.* The works of Galen were the ultimate source of authority in anatomy, as well as other medical subjects, throughout the whole of the Middle Ages. His writings, originally in Greek, have been edited, revised and printed many times in many languages. The complete literature on Galen will form a library in itself.

*Corpus psaloides. Glandula innominata. Parencephalon (Cerebrum). Processus belowoideus (sagittalis). Omoplata (Scapula). Ramus anastomoticus. Vena magna. Ventriculus laryngis.*

**Gall**, Franz Joseph. A German anatomist, physiologist and the founder of phrenology, 1758–1828. He was born at Tiefenbrunn near

Pforzheim, Baden; received his degree at Vienna where he started his practice and began his lectures on phrenology. In 1807 he went to Paris where he spent the next twenty years, save for excursions to London and elsewhere on lecture tours.

*Sur les fonctions du cerveau et sur celles de chacune de ses parties avec des observations sur le possibilité de reconnaître les instincts, les penchans, les talens, ou les dispositions morales et intellectuelles des hommes et des animaux par la configuration de leur cerveau et de leur tête, Paris, 1822, in-8°.*

**Galton, Francis.** A distinguished English statistician, 1822-1911. Grandson of Erasmus Darwin and the cousin of Charles. Well known for his researches in heredity by the statistical method. Galton's law of ancestral inheritance is one of the well known ideas of modern science. His work is being carried on by Karl Pearson.

*Natural Inheritance, 1889.*

*Delta of = a well-marked triangle in a finger print.*

*Biography: Memories of my Life, by Francis Galton. New York, 1909, in 8°, with list of 183 titles and portraits.*

**Galvani, Luigi.** An eminent Italian physiologist, 1737-1798. In 1762 he was appointed public lecturer on anatomy in Bologna. He investigated the organs of hearing and the genito-urinary tract of birds. He is well known for his celebrated theory of animal electricity. A complete quarto edition of his works was published in 1841-2 by the Academy of Science of the Institute of Bologna.

**Garengot, René-Jacques-Croissant de,** was born at Vitré Bretagne, France, 1688-1759. He studied medicine with Winslow, Méry and Thibaut. He became a noted surgeon of his day and has written a :

*Splanchnologie, ou Traité d'anatomie concernant les viscères, Paris, 1728, in-12°.*

**Gartner, Benjamin.** Physician at St. Thomas and at Copenhagen, 1790-1834.

*Ductus epoophorii longitudinalis.*

**Gartner (Gaertner), Hermann Treschow.** A Danish anatomist, 1785-1827.

*Duct.*

**Gaskell, Walter Holbrook.** An English physiologist, known for his researches in the field of vertebrate phylogenesis, was born at Naples, November 1st, 1847. Died September 7th, 1914. Studied with Ludwig in Leipzig, 1874. Professor of physiology at the University of

Cambridge, 1888-1914. His morphological studies on the homologies of the cranial and spinal nerves had led him to consider the problem of the origin of the nervous system in vertebrates, and this again led him to the theory of the origin of vertebrates, based on the close similarity in structure and function of the different parts of the vertebrate brain with those of Arthropods.

*The Origin of Vertebrates, London, 1908, in-8°.*

*Biography: Walter Holbrook Gaskell, in "Proc. Roy. Soc. London, s. B, vol. 88, no. B606, pp. xxvii-xxxvi, 1915; see also Heart, London, 1914-1915, vi, 1 port.*

**Gasser, Johann Laurentius** (Achille Pirminius). A German physician who attained much fame, as a medical consultant, 1505-1577. Professor of anatomy in Vienna. The Gasserian ganglion was described by a student of his.

*Ganglion semilunare.*

**Gaudry, Albert.** A French vertebrate paleontologist, 1827-1908. In 1849, when engaged in the Museum of Natural History, he became a member of the "Société Géologique de France" to the "Bulletin" of which he contributed many of his paleontological papers. Gaudry's interests in human paleontology began in 1859 and up to 1907 he published 15 essays dealing with various aspects of the ancient human races. He was a man with a philosophic trend of mind and his contributions early attracted the attention of Darwin. In 1872 Gaudry became professor in the museum, and in 1878 appeared what is perhaps his most widely read work: "*Enchaînement du Monde animal dans les temps géologiques.*" Some years later appeared his "*Essai de Paléontologie philosophique,*" which is one of the most useful presentations of paleontological facts of evolutionary importance. Gaudry was an earnest worker and produced some 218 contributions to paleontological and geological literature, of which more than half dealt with vertebrate paleontology.

*Biography: Albert Gaudry, Notice nécrologique, in Bull. de la Société Géologique de France, 4 série, t. X, page 351, année 1910, with portrait and list of essays.*

**Gautier D'Agoty, Jacques.** An artist who lived in Paris toward the end of the 18th century. He is chiefly known for his anatomical plates. He died in Paris, at an advanced age, in 1785.

*Essai d'anatomie, en tableaux imprimés, Paris, 1745, in fol. Myologie complète, ou Description de tous les muscles du corps humain, Paris, 1746, in folio. Text by Duverney. Anatomie complète de la tête et de toutes les parties du cerveau, Paris, 1748, in folio.*

*Anatomie générales des viscères, angeiologie, angeiologie et neurologie, avec la figure d'un hermaphrodite décrit par Mertraud, Paris, 1752, in folio.*

**Gavard, Hyacinthe.** A French anatomist, 1753–1802. He studied anatomy and surgery with Desault in Paris, and became known as one of the great anatomists of his age. His anatomical writings are said to be marked by orderly arrangement, clarity and precision.

*Traité de ostéologie, suivant la méthode de Desault, Paris, 1791, 2 vol., in-8°. Traité de myologie, Paris, 1791. Traité de splanchnologie, Paris, 1800.*

**Gegenbaur, Karl.** A German comparative anatomist, 1826–1903. A student of Kölliker. In 1854 privat docent in anatomy and physiology at the University of Würzburg. In the next year he received a call to Jena as ausser-ord. professor of anatomy, where he, in 1858, became ord. professor of anatomy and director of the anatomical institute. In 1873 he went to Heidelberg, where for the next thirty years he worked on human and comparative anatomy. He is to be regarded as the direct successor, in comparative anatomy, of Johannes Mueller and H. Rathke. From 1875–1903 editor of "Morphologisches Jahrbuch."

*Grundzüge der vergleichende Anatomie, Leipzig, 1870, 2 auff. 1878; English, London, 1878. Lehrbuch der Anatomie des Menschen, Leipzig, 1883, 7th auf. 1899, 2 bde.*

*Cells of = osteoblasts. Arteria bicipitalis; — myomastoidea; omphalo-mesentericæ; — tubo-ovarica. Fascia lumbalis. Linea innominata (pectinea). Lyra. Musculus transversus urethralis (spincter urethrae); spino-transversalis. Septum nasi membran. Sinus quartus aortae. Sulcus ethmoidalis. Tuber calcanei.*

*Biography: Morphologisches Jahrbuch, Bd. 35, H. 4, pp. I-XXXIX, 1906.*

**Gehuchten, Arthur van.** A Belgian neurologist, 1861–1914. Student of Jean Baptiste Carnoy, later studied in Berlin and Frankfort. Returned to Louvain in 1887 at the age of 26 as instructor in anatomy. Professor of systematic anatomy, pathology and therapy of nervous diseases, University of Louvain, Belgium, 1887–1914. Editor of L'Nevraxé, which up to 1914 had reached its 15th volume. After the destruction of the University of Louvain by the Germans he spent several months, until his death, in Cambridge University, England.

*Anatomie du Système nerveux de l'homme, 4th édition, Louvain, 1906. L'Nevraxé, Vols. XIV-XV, 1913. Livre jubilaire dédié à M. A. van Gehuchten, Professeur à l'Université de Louvain à l'occasion du 25<sup>me</sup> anniversaire de son Professorat.*

*Biography: En Commémoration de A. van Gehuchten. Folia Neuro-biologica, Bd. IX, nr. 4, pp. 337-341, 1915; also Deutsche Med. Wochenschrift, no. 6, 1915; Boston Med. and Surg. Journal, vol. 172, pp. 115-116, 1915.*

**Genga**, Bernardino. An Italian anatomist and surgeon in Rome toward the end of the 17th century. He was one of the first to arrive at some idea of the circulation of the blood, and attributed the discovery to Paul Sarpi.

*Anatomia chirurgica, sive, istoria anatomica dell' ossi e moscoli del corpo umano, colla descrizione de' vasi, Rome, 1672, in-8°.*  
*Anatomia per uso ed intelligenza del disigno, recercata non solo sugli ossi e moscoli del corpo umano, me dismostrata ancora sulle statue antiche più insigni, Rome, 1691, in-fol.*

**Gennari**, Francesco. An Italian anatomist of the 18th century.

*De peculiari structura cerebri nonnullisque ejus morbis, Parma, 1782.*

*Band of* = outer portion of Baillarger's band = *Vicq-d'Azyr's band.* *Stria Gennari.*

**Geoffroy**, Étienne-Louis. 1725–1810. Son of Étienne François Geoffroy, (1672–1731). Born in Paris. A student of zoology, anatomy, and medicine, in all of which he attained some success.

*Dissertation sur l'organe de l'ouïe de l'homme, des reptiles et des poissons, Amsterdam et Paris, 1778, in-8°.*

**Geoffroy, Saint-Hilaire**, Étienne, was one of the most celebrated of French naturalists, 1772–1844. He was a member of the Légion-d'Honneur, professor of zoology at the Jardin du Roi, where he became familiar with the mammals and birds. He became a great friend of Cuvier and together they wrote important memoirs in natural history. He and Cuvier subsequently became opponents in a discussion of the synthetic as opposed to the analytic method of arriving at a conception of evolutionary facts.

*Philosophie anatomique, Paris, 1818, in-8°.*

**Geoffroy Saint-Hilaire**, Isidore. A French zoologist, son of the preceding, 1805–61. He taught zoology and teratology at Paris; succeeded his father as professor of natural history in the Jardin des Plantes; inspector general of the university; in 1850 successor to Blainville as professor of zoology at the faculty of sciences.

*Histoire générale et particulière des anomalies de l'organisation chez l'homme et les animaux, 3 vols., 1832–37, 8vo.*

**Gerbi**, Gabriele (Zerbi, Zerbus). An anatomist of the 15th century, contemporary of Achillini and Berengario da Carpi. Professor of medicine in Padua, 1473–77; of logic and philosophy to 1483. He dis-

covered the puncta lacrimalis; described in detail the muscle fibres of the stomach, and wrote excellent descriptions of the blood vessels and muscles. He died in 1505.

*Anatomia corporis humani et singulorum illius membranorum liber, Venice, 1502, in fol. Anatomia infantis et porci ex traditione Cophonis, Marbourg, 1537, in-4°.*

**Gerdy, Pierre-Nicolas.** Parisian surgeon, 1797–1856.

*Anatomie des formes extérieures, Paris, 1829.*

*Fibres. Fontanelle. Hyoid fossa. Interauricular loop. Ligamentum suspens. axillæ. Tuberculum. Trigonum caroticum.*

**Gerlach, Andreas Christian.** Veterinary surgeon in Halberstadt, 1811–1877. Professor and director of the veterinary school in Hanover and Berlin.

*Beiträge zur anatomie des Auges, 1880.*

*Valvula. Ligamentum annulare bulbi.*

**Gerlach, Joseph von.** A German anatomist, 1820–1896. Professor of anatomy in Erlangen, 1850–91. He also taught pathological anatomy in 1865, and physiology until 1872. He discovered the method of injecting the blood vessels with ammonium carmine and gelatin. In this process he accidentally discovered the value of carmine as a dye for staining tissues, which was one of the earliest advances in histological technique. Gerlach was also one of the first to use photomicrographs in the illustration of his subject.

*Handbuch der Allgemeine und spezielle Gewebelehre, 1848.*

*Network. Tonsil = Eustachian tonsil. Valve of = sometimes found in the appendix.*

**Gesner, Conrad.** A celebrated naturalist, known as the German Pliny, was born at Zurich, 1516–1565. A contemporary of Vesalius. Gesner's contribution to the advancement of anatomical subjects was the introduction of good illustrations. His "*Historia Animalium*" 1551–1587, consisted of 4500 pages, folio and 953 figures. Locy says of him: "He was the best zoölogist between Aristotle and John Ray, the immediate predecessor of Linnaeus."

**Giacomini, Carlo.** An Italian anatomist, 1840–1898. In 1867 he was assistant to Restellini in the anatomical institute at Turin; in 1871 he was in charge of topographic anatomy; succeeded Delorenzi as professor extraord. and later ord. professor of descriptive human anatomy,

1880-1898. He is the author of numerous anatomical contributions, chiefly neurological.

*Guida alla studio delle circonvoluzioni cerebrali, 1878, 2nd edition, 1884. Sul cervello di un Cimpanze, 1889.*

*Band.*

*Biography: Anatomischer Anzeiger, Bd. 15, pp. 155-164, 1898, with bibliography.*

**Giannuzzi.** An Italian anatomist, 19th century.

*Cells. Crescents. Demilunes.*

**Gierke,** Hans Paul Bernhard. German anatomist, 1847-1886.

*Corpuscles of = Hassall's concentric corpuscles. Respiratory bundle of = Tractus solitarius.*

**Gimbernat,** Antonio de. Spanish surgeon in Madrid, 1742-1790. Professor of anatomy in Barcelona, Spain. Surgeon to the King of Spain.

*Ligamentum lacunare. Ligamentum triangulare.*

**Gimeno,** Pedro. A Spanish anatomist of the 16th century. He studied in Paris, Louvain and Pavia under Dubois, Brachelius, Vesalius, and was for 20 years professor of anatomy in Valencia. In 1549 he described the stapes.

*Dialogus de re med. . . . universam anatomen humani corp. perstringens, summe necessarius omnib. med. candidatis. Valencia, 1549.*

**Giraldés,** Joachim-Albin-Cardozo-Cazado. A Parisian surgeon of Portuguese birth, 1808-1875. "*Recherches anatomiques sur le corps innominé,*" 1861.

*Organ of = paradidymis.*

**Girardi,** Michele. An Italian anatomist, 1731-1797. Professor of anatomy in Padua after Morgagni, then in Parma.

*Prolusio de origine nervi intercostales, Florence, 1791.*

**Glaser,** Johann Heinrich. A Swiss anatomist, 1629-1675. Professor of anatomy and botany at Basel.

*Artery of = tympanic artery. Fissure of = fissura petrotympanicus.*

**Glisson,** Francis. An English anatomist, 1597-1677. Professor of anatomy in Cambridge, later physician in London. The name of Glisson is associated with the "Capsule of Glisson" in the liver.

*Anatomia hepatis, cui præmittuntur quædam ad rem anatomicam universe spectantia, et ad calcem operis subjiciuntur nonnulla de lymphæ ductibus nuper reperiis. London, 1654, in-8°.*

*Capsula fibrosa hepatis.*



**Godman, John D.** An American surgeon, 1794–1830, of Annapolis, Maryland. Professor of surgery.

*Treatise on the fascia, 1824.*

**Goethe, Johann Wolfgang von.** A celebrated German poet, 1749–1832. His name is associated with that of Oken in the origin of the vertebral theory of the skull. He did some very important work in osteology and called attention to the correlations of the premaxillæ in man and mammals.

*Ueber den Zwischenkiefer des Menschen und der Thiere, Nova Acta Acad. Leopold. Carol., Halle, 1831, XV.*

*Biography: A good account of Goethe's scientific work by S. Kalischer is to be found in Albert Bielschowsky's Life of Goethe, in 3 volumes. See also: Goethe as a man of Science. Westminster Review, vol. 2, N. S., 1852, 479–506.*

*Os incisivum.*

**Goll, Friedrich.** A Swiss anatomist, 1829–1903. A student of Ludwig, Kölliker, Virchow, Claude Bernard; docent in Zurich, 1862; Professor of anatomy in Zurich.

*Column of = Fasciculus gracilis. Fibres. Nucleus.*

**Goodsir, John.** A Scotch anatomist, 1814–1867. He wrote in Edinburgh an important article "*On the development of the Teeth.*"

**Gottstein, Jacob.** German physician, 1852–1895.

*Process of = organ of Corti.*

**Gowers, Sir William Richard.** An English clinical neurologist, 1845–1915. In 1879 fellow of the Royal College of Physicians. Gower's great work in medicine was in systematizing the important nervous diseases, and in bringing into relation clinical facts with pathological changes.

*A Manual of the Diseases of the Nervous System, 2nd edition, Philadelphia, 1892, 2 vols., in-8°.*

*Fasciculus antero-lateralis superficialis (Gowersi).*

*Biography: Brit. M. J., London, 1915, I, pp. 828–830; also Nature, vol. 95, No. 2376, p. 298, 1915.*

**Graaf, Regnier de.** A celebrated Dutch anatomist, 1641–73. Born at Schoonhaven; was a student of Diemerbroeck, De la Boë (Sylvius), Van Hoorne, and became a physician in Delft. A contemporary of Swammerdam.

*De mulierum organis generatione inservientibus, tractatus novus, demonstrans tum homines et animalia, coetera omnia, quæ*

*vivipara dicuntur, haud minus, quam ovipara, ab ovo originem ducere, Leyden, 1672, in-8°.*

*Opera omnia, Leyden, 1677, in-8°.*

*Follicle = Folliculus oophorus vesciculosus. Vessels of = Ductuli efferentes testis.*

**Gracht, Jacob van der.** A Dutch painter of the 17th century who published:

*Anatomie der uiterlijke deelen van het menschelijke Ligchaam. Gravenhaag, 1634, folio.*

**Grainger, Richard Dugard.** An English anatomist, 1801–1865. Teacher of anatomy and physiology at St. Thomas Hospital, London, 1842–60.

*Elements of general anatomy, London, 1829.*

*Observations on the structure and function of the spinal cord, London, 1837.*

**Gratiolet, Louis-Pierre.** Parisian anatomist, 1815–1865. Taught anatomy, physiology and zoology at Paris.

*Radiato thalamooccipitalis.*

**Grattan, John.** An Irish apothecary and anthropologist, in Belfast, 1800–1871.

**Gray, Henry.** An English anatomist, 1825–61. Fellow of the Royal College of Surgeons; lecturer on anatomy at St. George's Hospital Medical School, London.

*Anatomy, Descriptive and Applied, 19th edition, 1913.*

**Grew, Nehemiah.** An English botanist, 1628–1711. The founders of microscopic anatomy were Grew, Hooke, Malpighi and Swammerdam.

**Gruber, Wenceslaus Leopold.** An anatomist in Prague, 1814–1890. Prosector to Hyrtl, at Prague, 1844–47. Professor in St. Petersburg, 1855, as successor to Pirogoff as director of the Institute for practical anatomy; 1858 professor of practical anatomy.

*Beiträge zur anatomie des Keilbeins und Schläfenbeins, St. Petersburg, 1859.*

*Beobachtungen aus der menschlichen und vergleichenden Anatomie, 1879–1889.*

*Arteria profunda antebrachii (mediana). Fovea fasciae iliaca. Ligamentum mesenterico-mesocolicum; — sphenopetrosum posterius. Membrana obturatoria for. lacerti. Musculus anconaeus minimus (epitrochlearis); — cervico-costohumeralis; — infrascapularis minor; — mastoidea-maxillaris; — mento-hyoideus. Os*

*carpi intermedium. Ossiculum supernumerarium carpi. Saccus caeci retrostern. Sutura petro-sphenooccipit. (petrobasilaris). Vena marginalis ventriculi sinistri. Venter bifissus.*

*Biography: Anatomischer Anzeiger, Bd. 5, p. 587/8, 1890.*

**Gudden, Bernhard Aloys von.** German alienist, 1824–86. Professor of Psychiatry in Zurich and Munich.

*Experimentaluntersuchungen ueber das Schaedelwachstum. 1874.*

*Ganglion interpedunculare. Commissura inferior; posterior chiasmatis; posterior medullae spinalis.*

**Guenther von Andernach, Johann.** A French anatomist, 1487–1574. In Paris, 1527, teacher of Vesalius and Rondelet. Translator of the “*Anatomicae administrationes*” of Galen.

**Guérin, Alphonse.** A French surgeon, 1816–95. Professor of surgery in Paris.

*Fold of = Valvula fossæ navicularis. Glands of = Skene's glands. Sinus of = Diverticulum behind Guérin's fold. Valve.*

**Guido Guidi** (also known as Vidus Vidius), was born in the beginning of the 16th century and died in 1569. Professor in the Collège de France; in Pisa, 1547. He possessed a great reputation among his contemporaries; and Duval remarks of him, on his arrival in France; “*Vidus venit, Vidius vidit, Vidus vicit.*”

*De Anatome corporis humani, libri septem, Venice, 1611.*

*Arteria. Canalis. Foramen. Nerves.*

**Guldberg, Gustav Adolph.** A Swedish anatomist and zoologist, 1854–1908. He studied medicine in Christiana, and in 1879 was elected conservator of the zoological museum in Christiana. In 1883 he studied comparative anatomy and embryology with Eduard van Beneden at Lüttich; in 1885 he studied with Hertwig and Haeckel; in 1887 assistant to Albert v. Kölliker in Würzburg; in 1888 professor of anatomy in the University of Christiana. The author of numerous contributions to anatomy and zoology written in German, Swedish and French.

*Ueber das Centralnervensystem der Bartenwale, Christiana, 1885. Grundtraek af menneskets anatomi, Christiana, 1893. Études sur la Dyssemétrie morphologie et fonctionnelle chez l'homme et les vertébrés supérieures, 1897.*

*Biography: Anatomischer Anzeiger, Bd. 32, pp. 506–512, with bibliography.*

**Gulliver, George.** An English anatomist in Canterbury, 1804–1882. A noted anatomist and physiologist. Hunterian professor of comparative anatomy and physiology.

**Günz**, Justus-Gottfried. A German anatomist, 1714-54. Professor of physiology, anatomy and surgery in Leipzig. He discovered the anastomosis of the epigastric and mammary arteries. His writings deal with systematic anatomy and pathological anatomy.

*Dissertatio de mammarum fabrica et secretione lactis, Leipzig, 1734, in-4°.*

*Ligament of = part of the obturator membrane.*

**Guthrie**, George James. London surgeon, 1785-1856. "On the anatomy and diseases of the neck of the bladder," 1834.

*Musculus sphincter urethrae membranacea.*

**Guyon**, Felix-Jean-Casimir. Parisian surgeon, 1831-.....

*Isthmus uteri. Portio ceratina uteri.*

**Haase**, Johann Gottlieb, was born at Leipzig, 1739-1801. In 1774 he was made professor extraor. and in 1780 professor of anatomy and surgery at Leipzig.

*Zootomiæ specimen, sistens comparationem clavicularum animalium brutorum cum hominis, Leipzig, 1766, in-4°. Cerebri nervorumque corporis humani anatome repetita, cum duabus tabulis, Leipzig, 1781, in-8°. De vasis cutis et intestinorum absorbentibus plexibusque lymphaticis pelvis humanæ, annotationes anatomicæ, Leipzig, 1786, in folio.*

**Habicot**, Nicolas. A credulous physician in Paris in the 16th-17th century, who became famous for his supposed discovery of the bones of giant men, in 1613. The bones were those of a Pleistocene elephant and there appeared from the press between 1613-1618 a large number of books and pamphlets descriptive of the osteology of the "Theuto-Bacchus Rex." His works are of interest only from the standpoint of curiosity.

*Gigantostéologie, ou Discours sur les os d'un géant, Paris, 1613, in-8°.*

His letter to Louis XIII describing the discovery is given in the *Bio. Med.*

**Halle**, John. An English anatomist and surgeon, 1530-1600. He wrote the first work upon anatomy (in 1565) published in England in the English tongue, as an appendix of 96 pages to his translation of Lanfranc's "Chirurgia Parva."

*Biography: John Halle, Anatomiste, Chirurgien, Modernist. Boston Med. and Surg. Journ., vol. 172, pp. 575-579, with figs., 1915.*

**Haller**, Albrecht von. Swiss anatomist, botanist and poet, 1708–1777. Haller is to be regarded as the most precocious, most indefatigable and exhaustive worker in anatomy and physiology since the time of Galen. At the early age of eight he is said to have compiled a biographical index of over 2,000 eminent men and women. This prodigious activity he continued for the next sixty years and it is stated that he conducted a monthly scientific journal to which he himself contributed more than 12,000 articles on nearly every phase of human knowledge. He studied medicine with Boerhaave, Albinus and Duverney. He became professor of anatomy, physiology, surgery and botany at the founding of the University of Göttingen and he held this chair from 1736–53, when he returned to his native town, Berne, Switzerland, to engage in municipal administration. During the term of his service at Göttingen he dissected 400 bodies and examined their organs with the greatest care. He published the results of these observations under the title: “*Disputationes Anatomicæ Selectiones, 1746–51*,” illustrated with the most accurate and beautiful engravings, representing the important parts of the human body. His “*Elements of Physiology*” written after his return to Berne contains much that is valuable anatomically. Turner says that his anatomical descriptions were the most valuable that had appeared up to that time, or did appear for some time to come. His strictly physiological works are discussed in *N. & P.*, Bd. II, pp. 349–51.

His writings are so numerous that it is useless to cite others here. There is a list of eleven pages in the *Bio. Med.*, with annotations by A. J. L. Jourdain and F. G. Boisseau. Other material is to be found in *Ency. Brit.* There is an excellent account of Haller in: *Bulletin Johns Hopkins Hospital*, vol. 19, no. 204, p. 65, entitled “Albrecht von Haller: scientific, literary and poetical activity,” by J. C. Hemmeter. Numerous structures in the human body are associated with the name of Haller, of which the following are given by DeTerra (*Vademecum Anatomicum, 1913*).

*Ansa. Arcus lumbocostalis medialis. Arteria abdominalis subcutanea; — alaris. Circulus callosus; — vasculosus; — venosus mamillae. Coni vasculosi. Fretum. Glandulae duodenales. Habenula. Ligamentum arcuatum ext. diaphragmatis; — colicum. Membrana. Pons hepaticus. Rete vasculosum. Taenia semicircularis. Tripus coeliacus. Tunica. Vas aberrans. Velum plexus choroidei.*

**Ham**, Johann-of Arnheim. A student of Leeuwenhoek; while working under his direction in 1677, discovered the spermatozoa, which he called “*Animalculæ seminis*.”

**Hamusco**, Jean Valverde de. See **Amusco**, Jean Valverde de.

**Hannover**, Adolph. A Danish anatomist in Copenhagen, 1814–1894. Student of Johannes Mueller, in Berlin. Worked in Copenhagen as privat docent in microscopical anatomy, 1840–53. In 1856 he received the Monthyon Prize for his investigations into the anatomy and physiology of the eye. Known also for his studies in pathology and helminthology.

*De cartilaginibus, musculis, nervis auris externæ atque de nexu nervi vagi et nervi facialis, Copenhagen, 1839.*

**Harder**, Johann Jacob. A Swiss anatomist, born at Basel, 1656–1711. He studied medicine in Basel, Lyon, Geneva and Paris. In 1678 professor of rhetoric, 1686 professor physics, 1687 professor of anatomy and botany, and in 1703 professor of the theory of medicine in Basel. Known for his work on the gland which sometimes occurs in man and more often in birds and mammals in the inner canthus of the eye. He also described the objects in the dura mater which are commonly known as the Pacchionan bodies.

*De cerebri humani structura naturali, Basel, 1710, in-4°.*  
*Apiarium observationibus medicis centum ac physicis experimentis refertum, Basel, 1687.*  
*Glandula Harderi.*

**Hartenkeil**, Jean-Jacques. Born at Mayence, 1761–1808. He studied with Siebold and Desault. In 1790 he established the Gazette Médico-chirurgicale, which enjoyed considerable celebrity.

*Bernhard Sigfrid Albini historia musculorum hominis; edidit, notisque, illustravit, Bamberg and Würzburg, 1784.*

**Hartmann**, Robert. German anatomist, 1831–1893.

*Handbuch der Anatomie des Menschen, Strassburg, 1881.*  
*Anatomie des menschlichen Kopfes, Strassburg, 1888.*  
*Pouch of = pelvis of gall bladder.*  
*Biography: Anatomischer Anzeiger, Bd. 8, p. 543, 1893.*

**Hartsoeker**, Nicolas. A celebrated physician, physicist, and micrographer of Gouda, Holland, was born March 26th, (1656–1725). He was professor of mathematics and philosophy in Amsterdam at the same time that Huyghens was in Leyden. Hartsoeker is the author of several important papers on dioptrics and did some microscopical work. He improved the microscope in some particulars; discovered the spermatozoa and criticized Leeuwenhoek's man-like figures of the sperms.

**Harvey**, William. The discoverer of the circulation of the blood; English embryologist, born at Folkestone, on the south coast of England, 1578–1667. Studied anatomy and physiology at Padua with Fabri-

cius ab Aquapendente, who at that time was perfecting his knowledge of the valves of the veins. He was granted an M. D. by Cambridge University, in 1602. He became professor of anatomy and physiology at the Royal College in 1615, where he continued his studies on the action of the heart and blood vessels; was physician to James I and Charles I. King Charles placed the deer in the royal parks at Harvey's disposal. When he was 68 he resigned all his appointments and practice and devoted himself to the study of generation. He demonstrated his ideas of the circulation of the blood in many forms of invertebrates and vertebrates, as well as in the chick embryo. Besides his work on the circulation he did much in comparative anatomy, having investigated the structure of some sixty species of animals. He studied the embryology of insects as well as vertebrates, the chick, and the deer. He described the blastodisc. His embryological observations are contained in his "Generazione Animalium," London, 1651.

*Exercitatio anatomica de motu cordis et sanguinis in animalibus, Francfort, 1628, in-4°. Reprinted with commentations in 1639, 1643, 1645, 1647, 1661, 1671.*

*Exercitationes de generatione animalium, quibus accedunt quædam de partu, de membranis ac humoribus, de conceptione, London, 1651, in-4°. Several times reprinted.*

*Biography: Haller-Bibliotheca anatomica, Tome 2, p. 363; Huxley-Scientific Memoirs, Vol. 4; Locy-Biology and its Makers; Carus-Geschichte der Zoologie, p. 381; Bio. Med.; Ency. Brit.; Gar.; Hae.; N. & P.; Brooks, Bull. Johns Hopkins Hosp., vol. 8, 1897; Life of Harvey by D'Arcy Power; Willis-Harvey's works in Sydenham Society; Aubrey, Letters of eminent Persons, London, 1813; Munk, in "Roll of the College of Physicians," 1879; Richardson, Disciples of Æsculapius, vol. 1, pp. 13-19, 1901.*

**Harwood, Busick.** An English physician and teacher of anatomy, born at Newmarket. Professor of anatomy at the University of Cambridge, 1785; chancellor of the College of Downing in 1806.

*A System of comparative anatomy and physiology, Cambridge, 1796, in-4°.*

**Hasner, Joseph** (Ritter von Artha), Bohemian oculist, 1819-92. Professor of ophthalmology in Prague.

*Fold or Valve of = plica lacrimalis.*

**Hassall, Arthur Hill.** An English physician, born in Teddington, 1817-1894.

*The microscopic anatomy of the human body in health and disease, London, 1846, 2 vols.* This was the first English book on microscopic anatomy.

*Concentric corpuscles of = in the medulla of the follicles of the thymus.*

**Havers, Clopton.** An English physician known for his researches on bone, 1650–1702. He described the so-called synovial glands and proposed a theory of digestion.

*Osteologia nova, or some new observations of the bones, and the parts belonging to them.* London, 1691, in-4°.

*Canals. Glands. Lamellae. Spaces. System.*

**Haworth, Samuel.** An English physician of the 17th century is the author of:

*Anthropologia; or a philosophical discourse concerning man,* 1680.

**Hebenstreit, Jean Ernst.** A German physician, anatomist, naturalist and traveller, born at Neustadt, 1703–1757. Professor of anatomy and surgery, 1737; of pathology, 1746; of medicine, 1748 in the University of Leipzig. He is the author of numerous dissertations among which may be mentioned:

*Dissertatio de arteriarum corporis humani confiniis, Leipzig, 1739, in-4°.* *Programma de vaginis vasorum, Leipzig, 1740, in-4°.* *Programma de vasis sanguiferis oculi, Leipzig, 1742, in-4°.* *Programma de mediastino postico, Leipzig, 1743, in-4°.* *Anthropologia forensis, sistens medici, circa rempublicam causasque dicendas officium, cum rerum anatomicarum ac physicarum, quae illud attinent, expositionibus, Leipzig, 1751, in-4°.*

**Heidenhain, Rudolf.** German physiologist, was born in Marienwerder, 1834–1897. Studied in Königsberg, Halle, Berlin, as student of Volkmann, DuBois-Reymond. Professor of physiology and histology in Breslau, 1859–1897. His studies are contained in the:

*“Studien des physiologischen Institute, in Breslau,” 4 volumes, Leipzig, 1861–68.*

*Cells of = in gastric glands; Crescents or demilunes = Giannuzzi's cells; Rods of = in the uriniferous tubules.*

*Biography: Anat. Anz., Bd. 14, pp. 182–4, 1898.*

**Heister, Lorenz.** A German physician who became proficient in botany, anatomy and surgery, 1683–1758. He was born in Frankfort-am-Main. Studied at Leyden with Boerhaave and Albinus; at Amsterdam with Ruysch, Commelin and Rau. Professor of anatomy and surgery at the University of Altdorf; then of surgery in Helmstädt.

*Dissertatio de tunica choroidea, Harderwyk, 1780, in-4°.* *Compendium anatomicum, veterum recentiorumque observationes brevissime complectens, Altdorf, 1717, in-4°.*

*Diverticulum of = Sinus jugularis externæ. Valves of = folds in cystic duct.*



**Helain**, Richard (Ricardus Hela). A physician of Paris who published at Nuremberg in 1493 a plate 53 cm. high representing the human skeleton. It seems to have been drawn from a partly dried specimen, and the drawing is in many particulars fantastic. This picture formed the basis for a modification by the publisher Grüniger in 1496-97 which was printed in Brunschwig's *Chirurgie*, in 1497. The original figure refers to an "os laude" or "os capitale relaude," which is an apochryphal bone.

*Wieger; Locy, Journ. of Morphology, vol. 22, p. 957, figs. 3-4, 1911.*

**Helmholtz**, Hermann Ludwig Ferdinand von. An eminent German physicist and physiologist, 1821-1894. Assistant in Berlin to Johannes Müller in anatomy, 1848; 1849 professor of physiology and general pathology at Bonn; 1858 professor of physiology at Heidelberg; 1871 in Berlin as Ordinarius of physics; 1888-1894 president of the "physikal. . . . . technischen Reichsanstalt" in Charlottenberg. Known for his contributions to acoustics.

*Axis ligament of* == *a ligament of the malleus.*

*Biography: Hermann Ludwig Ferdinand von Helmholtz, by John Gray M'Kendrick, New York, 1899, in-8°.*

**Henke**, Wilhelm. A German anatomist and art critic, 1834-1896. Professor of anatomy at Rostock, 1865; 1872 in Prague; 1875-96, in Tuebingen.

*Handbuch der Anatomie und Mechanik der Gelenke, Leipzig, 1863. Topographische Anatomie des Menschen. Atlas und Lehrbuch, 1879-83, Berlin. Die Menschen des Michelangelo im Vergleich mit der Antike, Rostock, 1871. One of the best treatises on the work of Michelangelo. Henke also wrote of the Venus of Melos.*

*Space of* == *between the vertebral column and the pharynx.*

*Biography: Anat. Anz., Bd. 12, p. 475, 1896.*

**Henle**, Friedrich Gustav Jakob. One of the most celebrated of the 19th century German anatomists, was born of Jewish parents at Fürth near Nuremberg, 1809-1885. A student of Müller, and his prospector at Berlin. Professor of anatomy at Zurich, 1840; Heidelberg, 1844; at Göttingen, 1852-85, as director of the anatomical institute. Henle's contributions to histology were many and important. He is known for his descriptions of one of the sheaths of the hair; discovery of the cylindrical epithelium of the alimentary canal; the discovery of the endothelium of the blood vessels. Pagel speaks of Henle as the reformer of anatomy.

*Symbolæ ad anatom. villor. intestinal. imprim. eorum epithelii et vasor, Lacteor, 1837. Allgemeine Anatomie, Leipzig, 1841.*

*Systematische Anatomie*, 3 vols. Braunschweig, 1855. Reprinted in '67, '71, '79.

A great many structures are associated with the name of Henle. Among which DeTerra (*Vademecum Anatomicum*) mentions the following:

*Angulus ethmomaxillaris*; — *vestibularis*. *Ansa*. *Arteria collat. superior*; — *saphena magna*. *Bacilli acustici*. *Canalis cranialis*; — *vomerobasilaris (pharyngeus)*. *Cavum oris*. *Cervix pedunculorum (Corp. restif.)*. *Corpus restiforme*; — *subthalamicum*. *Crista incisiva*. *Fibrae ansatae*. *Fissuraoccipitalis perpend. (parieto-occipitalis)*. *Fossa subinguinalis*. *Glandulae*. *Hiatus maxillaris*. *Incisura falciformis*; — *iliaca*; — *palatina (sphenopalatinum)*. *Lamina orbitalis*. *Ligamentum accessorium*; *access. mediale*; — *acc. lat. radiale et ulnare*; — *arcuatum carpi*; — *capituli radiatum (capit. costæ rad.)*; — *capitulum volaria*; — *carpi dors. prof.*; — *colli costæ*; — *coraco-claviculare ant.*; — *costovertebrale rad.*; — *inguinale internum*; — *intermetacarpea*; — *intermetatarsea ossea*; — *patellæ*; — *plicæ synovialis pat.*; — *pubofemorale (pubocapulare)*; — *radiatum costæ*; — *reflexum (inguinale)*; — *spirale cochleae*; — *suspensorium lat. penis*; — *tarseum transv.*; — *temporo-mandibulare*; — *tibiofibulare anterior*; — *transversum pelvis*. *Linea alba m. ischiococcygei*; — *obliqua femoris*. *Lunula lacrimalis*. *Membrana*. *Musculus anconaeus brevis*; — *auricularis sup.*; — *interosseus volaris primus*; — *lacrimalis anterior*; — *lingualis*; — *longus atlantis*; — *orbicularis malaris*; — *orbitalis*; — *praerectalis*; — *sacrospinalis*; — *transversi thoracis post.*; — *transversus perinaei*. *Navicula*. *Nervus dorsalis scapulae*; — *mandibulares*; — *orbitalis*; — *pubendus longus inferior*. *Norma frontalis*. *Orificium hymenis (vaginae)*. *Os puboischiadicum*; — *trapezium*. *Planum infraorbitale*. *Plica synovialis patellaris*. *Processus occultus oss. maxillaris*; — *restiformis*; — *synovialis*; — *vaginalis oss. sphenoidalis*. *Ramus inferior oss. ischii et oss. pubis*; — *medius n. vestibuli*; — *pharyngei linguales*. *Sinus rhomboidalis*; *tarsi*; — *transversus pericardii*. *Spira inferior*. *Stratum*. *Sulcus interarticularis*; *peronaei*. *Tuberculum*; *obturatorium inferius*. *Tuberositas costalis*; — *scapularis*; — *vertebralis*; — *zygomatica*. *Vena anonyma iliaca*; — *cerebri anteriores*; — *hypogastrica*.

*Biography*: *Archiv f. Anat. u. Physiol., Anat. Abth., Leipzig*, 1892, pp. 1-32, by Wilhelm Henke. *Gurtl-Hirsch's Biographisches Lexikon*, III, p. 153, by Waldeyer.

**Hensen**, Viktor. German physiologist, 1835– . Professor of physiology at Kiel, 1868– . He investigated the physiology of hearing, the histology of the sense organs, and embryological development.

*Canal of* = a vertical canal joining the first part of the cochlear canal with the sacculæ. *Cell of* = in the organ of Corti. *Disc.* *Duct of* = ductus consocians (Henseni). (*Ductus reuniens*). *Knot of* = in the primitime streak. *Line of* = in the sarcomere. *Stripe of* = in membrana tectoria.

**Hensing, Friedrich Wilhelm.** German anatomist. 1719–1745. Born at Giessen where he became a professor in 1743–1745.

*Dissertatio de peritonæo, Giessen, 1742, in-4°.* *Dissertatio de apophysibus corporis humani, Giessen, 1742.* *Dissertatio de omento et colo, Giessen, 1745, in-4°.*

*Ligament of* = *left superior colic ligament.*

**Heraclitus of Ephesus,** (ca 556–460 B. C.). Known for his theory of sensations. See Haller-Bibliotheca Anatomica, Tome I, p. 14.

**Herbst, Ernst Friedrich Gustav.** A German physician in Goettingen, 1803–1893.

*Ueber die Pacini'schen Körperchen und ihre Bedeutung, 1848.*  
*Corpuscles of* = *tactile corpuscles in birds.*

**Herophilus,** a Greek physician who taught in the famous Alexandrian school, and who initiated systematic research in anatomy. He lived 335–280 B. C., although Töply regards his time as uncertain. His name is usually associated with Erasistratos. He distinguished the major parts of the brain, the meninges, venous sinus (torcular Herophili), plexus, ventricles of the brain, calamus scriptorius, cerebral nerves, sensory nerves, cardiac nerves; distinguished the thickness of the arteries, structure of the heart, vascular supply of the testis (see *Töply*, p. 182). His works have all been lost, but the knowledge that he attained has been preserved in the writings of Galen (see Haller, *Bibliotheca Anatomica*, Tome I, p. 59, 1774, and *Pagel and Sudhoff*, p. 83).

*Torcular Herophili (Confluens sinuum).*

**Herrick, Clarence Luther.** An American comparative anatomist and neurologist, 1858–1904. Professor of geology and natural history at Denison University, 1884–1889 and 1892–1896; University of Cincinnati, 1889–1891; University of Chicago, professor of biology, 1891–92. He was granted the degree of Ph.D. at the University of Minnesota, 1898. President of the territorial university at Albuquerque, New Mexico, 1897–1901. Founder of the "Journal of Comparative Neurology," 1891; "Bulletin of the Scientific Laboratories of Denison University," 1885. He is the author of numerous contributions to natural history and to comparative neurology; many of the latter being published in the "Journal of Comparative Neurology."

*Contributions to the Comparative Morphology of the central Nervous System. I. Illustrations of the Architectonic of the Cerebellum. Journ. Comp. Neurol., I, 5–14, 4 plates. II. Topography and Histology of the Brain of certain Reptiles. Ibid, I, 14–37, 2 plates, 1891. III. Topography and Histology of the Brain of cer-*

tain Ganoid Fishes. *Ibid*, I, pp. 149-182, 4 plates, 1891. *The Metaphysics of a Naturalist*, Granville, Ohio, 1910, in-8°.

*Biography*: Clarence Luther Herrick, in "Bulletin of the Scientific Laboratories of Denison University," vol. xiii, art. 1, pp. 1-33, with portrait and bibliography, 1905.

**Hesselbach**, Adam Kaspar. German surgeon, 1788-1856. Professor of surgery and chief physician in Bamberg, son of Franz Kaspar Hesselbach.

*Ligamentum interfoveale*; — *inguinale internum*. *Fovea*.

**Hesselbach**, Franz Kaspar. A German surgeon and physician, 1754-1816. Prosector to Siebold in Heidelberg, 1788. Professor of surgery at Würzburg. His son, Adam Kaspar, attained distinction as a surgeon.

*Vollst. Anleitung zur Zergliederungskunde*, 1806-8.

*Ana. — Chir. Abh. — ueber d. Ursprung der Leistenbrücke*, 1906.

*Ligamentum interfoveale*. *Triangle of* = an area in abdomen.

**Hessling**, Karl Theodor. A German anatomist, 1816- . Born in Berlin.

**Heusinger**, Carl Freidrich. Known for his studies in histology, anatomy, zootomy, physiology, anthropology and pathological anatomy, 1792-1883. He was professor of anatomy and physiology in Würzburg, 1824-29, as successor to Döllinger; then in Marburg.

*System der Histologie*, Eisenach, 1822-24, in-4°, 4 pls. *De organogenia*, Jena, 1823, in-4°. *Berichte von der zootomischen Anstalt zu Würzburg*, Würzburg, 1826, in-4°, 8 pl.

**Hewson**, William. An English anatomist, born at Hexham, 1739-1774. A member of the Royal Society of London, and public lecturer on anatomy. He wrote an interesting work on the lymphatics, entitled:

*Experimental inquiries on the proportions of the blood, with some remarks on its nature and an appendix relative to the lymphatic system in birds, fishes, and amphibious animals*. London, 1771, in-8°; pt. II, containing a description of the lymphatic system in human subjects and animals, with observations on the lymph. London, 1774, in-8°.

*Biography*: Richardson, *Disciples of Æsculapius*, vol. 2, pp. 532-553, 1901.

**Hey**, William. English surgeon at Leeds, 1736-1819.

*Ligament of* = the upper border of the saphenous opening.

**Highmore, Nathaniel.** An English anatomist and physician in Shrewsbury, born at Fordingbridge, 1613–1685. His writings are interesting more for their curious errors, reflecting the attitude of the time, rather than for the new facts they contain. The discovery of the maxillary sinus is wrongly attributed to him, since it was known to all the early writers in anatomy. His works are:

*Corporis humani disquisitio anatomica, etc., LaHaye, 1651.*

*The history of generation, examining the opinions of divers authors and chiefly of Sir K. Digby. London, 1651.*

*Antrum of = Sinus maxillaris. Body of = Mediastinum testis (Corpus Highmorei).*

**Hilaire.** See **Geoffroy Saint-Hilaire.**

**Hildebrandt, Georges Friedrich,** (1764–1816). Professor in the University of Erlangen; professor of anatomy at Bronswick. Born at Hanover.

*Lehrbuch der Anatomie des Menschen, Bronswick, 1789.*

**Hilton, John.** English surgeon, 1804–1878.

*Sac of = Sacculus laryngis. Muscle of = inferior aryteno-epiglottideus. Line.*

**Hippocrates of Cos,** (468–367 B. C.). Also known as Hippocrates II, or the Great; the Father of Medicine. Turner says of Hippocrates: "It does not appear, notwithstanding the vague and general panegyrics of Riolan, Bartholin, Le Clerc, and Portal, that the anatomical knowledge of this illustrious person was either accurate or profound." (*Ency. Brit.*) None of the genuine works of Hippocrates treat of anatomical problems, although from his other writings it is clear that he had an adequate knowledge of osteology, but his knowledge of the remainder of the body is erroneous and superficial. Galen attributes to him an important place in the history of anatomy. Haller (*Bibliotheca Anatomica*, Tome II, pp. 15–28, 1774) gives an extensive discussion of Hippocrates as an anatomist, and cites many references to the literature of his predecessors. Winckel regards him as a man well equipped in gynecology and in some of the phases of embryology. (See *Handbuch d. Geburtshülfe*, Bd. I, pp. 29–30).

Emile Littré's translation of Hippocrates' writings, the result of many years' labor, is said to be the best commentary on the work of this early writer.

In the *Biographie Médicale* are listed works on anatomy attributed to Hippocrates; but there is some doubt of their authenticity. They are:

- 1) De l'anatomie, Venice, 1542; 2) Du coeur; 3) De la nature des os; 4) Des veines; 5) De la dentition, etc.

*Chorda magna.*

**His, Wilhelm (The Elder).** An eminent German anatomist and embryologist, 1831-1904. A student of Johannes Mueller, Remak and Virchow. In 1857 he was made ord. professor of anatomy and physiology at Basel; 1872 professor of anatomy in Leipzig, and director of the anatomical institute. Editor, with Wilhelm Braune, of the "Archiv für Anatomie und Physiologie," 1875-1904. He took an active part in the revision of the anatomical terminology. He suggested in 1889 the appointment of a commission on Nomenclature and the Commission on Nomenclature was appointed with Kölliker as chairman, with Professors O. Hertwig, His, Kollmann, Merkel, Schwalbe, Toldt, Waldeyer, and v. Bardeleben. In 1895, the Anatomical Society voted the adoption of the report of the Commission on Nomenclature, at the meeting in Basel. The expression BNA is an abbreviated title for the list of some 4500 anatomical terms accepted at this meeting. His wrote the report of the Commission in the same year and it was published in the "Archiv für Anatomie und Physiologie," Jahrgang, 1895, Supplement Band. (Anatomische Abtheilung). "*Die Anatomische Nomenclature. Nomina Anatomica.*"

*Beitraege zur normalen u. path. Anatomie d. Cornea, 1856. Crania helvetica, with L. Rütimeyer, 1865. Ueberd. erste Anlage des Wirbelthiereies, 1868. Unsere Körperform u. d. physiol. Problem ihrer Entstehung, 1875. Anatomie menschl. Embryonen, 1880-5.*

*Area praelobularis. Ductus thyreoglossus. Plica malleolaris (membr. tym. ant.). Spatia lymphatica. Sulcus intermedius ventriculi.*

**Hoboken, Nicolas von.** A German physician, born in Utrecht, 1632-1678. Professor of medicine and mathematics in Utrecht, 1663. At Harderwyk, 1669-1672.

*Novus ductus salivalis Blasianus in lucem protractus, Utrecht, 1662, in-12°. Contains letters from Blasius and Hoboken relative to the discovery by Stensen of the ductus parotideus. Anatomia secundinae humanae, quindecim figuris ad vivum propria authoris manu delineatis illustrata. Utrecht, 1669, in-8°. Good description of the placenta, and other deciduae.*

**Hoeven, Jan van der.** A Dutch zoologist, born at Rotterdam, 1801-1868. Studied in Leyden where he was granted his doctorate in

1824. In 1826 he became a. o. professor, 1835–1868 professor of zoology in Rotterdam. Known for his philosophical views.

*Tabulæ regni animalis, additus classium ordinumque characteribus, Leyden, 1828, tables, in fol. Icones ad illustrandas coloris mutationes in chameleonte, Leyden, 1832, in-4°, 5 pl., col.*

**Hoffmann, Ernst Emil.** A Swiss anatomist, 1827–1877. Professor of anatomy in Basel. Translator of the German edition of Quain's:

*Elements of descriptive and practical anatomy for the use of students.*

**Hoffmann, Johann Moritz.** German anatomist, son of the preceding, born at Altdorf, 1653–1713. Succeeded his father as professor of anatomy and botany at Altdorf, then professor of medicine, 1709–1713.

*Idea machinæ humanæ anatomico-physiologica, ad observationes recentiores conformata, et ad methodum lectionum solennium accomodata. Altdorf, 1703, in-4°.*

**Hoffmann, Moritz.** A German anatomist and botanist. Born in Fürstenwald, 1622–1698. Professor of anatomy and surgery, 1648, in Altdorf. Thomas Bartholin attributes to him the discovery of the pancreatic duct, which is usually ascribed to Wirsung.

*Synopsis institutionum anatomicarum, ex sanguinis natura partium plerarumque vitam declarans, ordine dissectionis commodo. Accedit delineatio anatomæ physio-pathologico-chirurgicæ. Altdorf, 1661, in-8°.*

*Duct of = Ductus pancreaticus.*

**Holden, Luther.** An English anatomist, 1816–1905.

*A Manual of the Dissection of the Human Body, New York, 1868.*

*Line of = a furrow in the groin.*

**Holl, Moritz.** German anatomist, 1852– . Student of Hyrtl and Langer, 1882 professor of anatomy in Innsbruck, 1889 in Graz. An author of several essays on the history of anatomy.

*Die Muskeln und Fascien des Beckenausgangs, in Bardeleben's Handbuch.*

*Rectal diaphragm.*

**Holmes, Oliver Wendell.** An American anatomist, physician, poet and genial autocrat of the breakfast table, who lived in Boston, 1809–1894. He was professor of anatomy and physiology at Dartmouth,

1839-47, and Parkman professor of anatomy at the Harvard Medical School, 1847-82, where he became a most successful lecturer.

*Medical Essays*, 1883.

*Biography: Oliver Wendell Holmes, in Johns Hopkins Hosp. Bull., vol. 5, No. 42, pp. 85-88, by Wm. Osler. Life and Letters of Oliver Wendell Holmes, by John T. Morse.*

**Home, Everard.** An English physician and anatomist, 1763-1832. Associated with John Hunter, and retained possession of the museum and manuscript notes of Hunter. Professor of anatomy and surgery in the Royal College of physicians and surgeons.

*Lectures on comparative anatomy, London, 1814-1828, 6 large quarto volumes, with 371 plates.*

Many of his memoirs are in the Philosophical Transactions of the Royal Society.

*Lobe of = median lobe of the prostate.*

**Hooke, Robert.** An English microscopist in London, 1635-1703. He first recognized the primitive fibrillæ in muscle.

*Micrographia, or some physiological descriptions of minute bodies by magnifying glasses, London, 1665.*

**Hoorne, Jan van.** A celebrated Dutch anatomist, born at Amsterdam, 1621-1670. Professor of anatomy and surgery at Amsterdam, 1633; then professor of anatomy and surgery at Leyden. He was one of the first to observe the thoracic duct in man, and described the ductus submaxillaris, which was subsequently known as Wharton's duct. He discovered the mammary ducts in 1652.

*De ductibus salivalibus disputationes, Leyden, 1656.*

*Microcosmus, seu brevis manu ductio ad historiam corporis humani, in gratiam discipulorum edita. Leyden, 1660, in-12°.*

*Ductus thoracicus.*

**Horner, William Edmonds.** An American anatomist, 1793-1853. Studied medicine at Edinburgh and Philadelphia. Became prosector to Wistar, Dorsey and Physick. Succeeded Physick as professor of anatomy in the University of Pennsylvania, in 1831. His successor was Joseph Leidy. Horner discovered the tarsi muscle (Horner's muscle) supplying the lacrimal apparatus (Phila. Journ. Med. and Phys. Soc., 1824, vol. 8, p. 70). He also studied the axillary odoriferous glands of the negro.

*A treatise on special and general anatomy, 5th edition, in 2 vols., Philadelphia, 1840.*

*Pars lacrimalis musc. orbicularis oculi (Horneri).*



**Houston**, John. An Irish physician of Dublin, 1802-1845.

*Muscle of* = part of *musculus bulbocavernosus*. *Fold of valve of* = *plica transversalis recti*.

**Howship**, John. An English surgeon in London. At the time of his death (1841) he was one of the most renowned surgeons in London.

*On the Natural and Diseased State of the Bones, London, 1820.*

*Lacuna of* = pits containing osteoclasts.

**Hoyer**, Heinrich. A German anatomist, 1834-1907. Studied medicine in the universities of Breslau and Berlin, where he received his degree in 1856, with the thesis: "*De membranæ mucosæ narium structura.*" Assistant in the physiological institute to Reichert; in 1859 called to the chair of histology and physiology at the Académie Médico-Chirurgicale at Varsovie, as adjunct professor. In 1862 professor ord. in the faculty of medicine at the central school of the polonaise university. In 1869 Hoyer was made professor of histology, comparative anatomy and embryology, and resigned his chair after 35 years' service, in 1894. His researches on innervation, and on the circulatory system deserve especial mention. A complete bibliography of his writings is in: "Internatl. Monatsch. f. Anatomie und Physiol. Bd. 24, 1908.

*Biography: Anatomischer Anzeiger, Bd. 32, pp. 501-2, 1908.*

**Hubrecht**, A. A. W. A Dutch zoologist and comparative embryologist, 1853-1915. Studied engineering in Delft; then zoology with Harting in Utrecht, then with Selenka in Leyden. Obtained his doctorate in 1874 with a dissertation on the anatomy, histology and embryology of the Nemertinea. In 1876-1882 he was curator of the zoological museum in Leyden; in 1882 he became ord. professor of zoology in Utrecht. He resigned this post in 1910, in order to devote his time and attention more fully to research, but retained until his death an association with the university as professor extraordinary. His researches on the placentation and embryology of the apes and lower mammals are of especial importance in determining the early stages of mammalian development. His studies were written in Dutch, German, English and French. His intimate knowledge of all the modern languages in Europe gave him the leadership in the organization of an international institute for the study of Embryology, which was organized in Utrecht in 1912.

*Studies in Mammalian Embryology: 1. Placentation of Erinaeus europæus, with remarks on the phylogeny of the Placenta. Q. Journ. Micros. Science, (2) vol. 30, pp. 283-404, plates 25-27, 1889. 2. The Development of the Germ Layers of Sorex vulgaris. Ibid, vol. 31, pp. 499-562, plates 36-42, 1890. 3. Placentation of*

*the Shrew (Sorex vulgaris L.). Ibid, vol. 35, pp. 481-537, plates 31-39, 1894.*

*Biography: Anatomischer Anzeiger, Bd. 48, No. 7/8, pp. 201-208, by Franz Keibel, with Bibliography.*

**Hueck, Alexander Friedrich.** A German anatomist, 1802-1842. Professor of anatomy in Dorpat.

*Ligament of = ligamentum pectinatum iridis.*

**Huguier, Pierre-Charles.** A French surgeon in Paris, 1804-1874.

*Canal of = Iter chordæ arteriæ. Circle of = around isthmus of uterus. Sinus of = fossa in tympanum.*

**Humboldt, Friedrich Heinrich Alexander, Baron von.** A distinguished naturalist and traveler, was born in Berlin, 1769-1859. He was a man of exceedingly wide range of interests, and he has contributed the following to anatomy:

*Recueil d'observations de zoologie et d'anatomie comparée, Paris, 1803-1832, 14 livraisons, in 2 vols., in-4°, 57 pl.*

*Biography: Karl Bruhn's life of Humboldt, in 3 vols., Leipzig, 1872.*

**Hundt, Magnus.** A physician of Magdeburg, 1449-1519. Professor at Leipzig. Platner says that Hundt was the first to publish anatomical plates, but he was preceded by Mundino in 1428.

*Anthropologium de hominis dignitate, 1501, Leipzig, in-4°.*

*Biography: Haller-Bibliotheca Anatomica, Tome 1, p. 153, 1774; Choulant, p. 23.*

**Hunter, John.** An anatomist and surgeon of London, 1728-1793. Brother to William Hunter, uncle to Matthew Baillie (1761-1823), and the poetess Joanna Baillie, brother-in-law to Everard Home. He was born at Long Calderwood, Scotland. Assistant in anatomy to his brother William. Here began his interest in anatomy which ceased only with his death. He observed the descent of the testis in the foetus, traced the ramifications of the nasal and olfactory nerves, experimentally tested whether veins could act as absorbents. In 1767 he was made fellow of the Royal Society of London. Teacher of Edward Jenner in 1770; Abernethy and Astley Cooper were also his students. It will not be possible to give an idea of the huge amount of experimental investigations carried on by Hunter. His museum formed the nucleus for the famous Hunterian museum of the Royal College of Surgeons, of London.

*Observations on certain parts of the animal economy, London, 1786, in-4°.*

*Natural History of the human teeth, London, 1771.*

*Canal of = canalis adductorius. Gubernaculum testis.*

*Biography: Richardson, Disciples of Æsculapius, vol. 2, pp. 501-531, 1901. Rohrer, John Hunter: his life and labors, Bull. Johns Hopkins Hospital, vol. 25, pp. 10-24, 1914, with portraits.*

**Hunter, William.** A distinguished physiologist and anatomist, and the first great teacher of anatomy in England, 1718-1783. Studied in Edinburgh and London where he became assistant to Dr. James Douglas. He visited Leyden and inspected the work of Albinus. William Hewson was his assistant after his brother John went to the army. He is known chiefly for his anatomy of the gravid uterus.

*Anatomy of the human gravid uterus, London, 1775, with 34 plates, representing the objects natural size.*

*Ligament. Line. Membrane.*

*Biography: Richardson, Disciples of Æsculapius, vol. 1, pp. 322-343, 1901.*

**Huschke, Emil.** A German anatomist, 1797-1858. Loders' successor at Jena as professor of anatomy, 1827-58.

*Dissertatio quædam de organorum respiratoriorum in animalium serie metamorphosi, generatim scripta, et de vesica natatoria piscium quaestio. Jena, 1819, in-4°. De pulmonum quadruplicitate. Jena, 1824, in-4°, pl. Beiträge zur Physiologie und Naturgeschichte. Weimar, 1824, in-4°, 4 pl. Commentatio de pectinis in oculo avium potestate anatomica et physiologica. Jena, 1827, in-4°, pl.*

*Auditory teeth. Cartilages. Foramen. Ligament. Valve.*

**Huxley, Thomas Henry.** An English biologist, anatomist, paleontologist and philosopher, 1825-95. He was born at Ealing, Middlesex, England. He, like Darwin, early in life spent some years in a voyage of exploration on H. M. S. Rattlesnake. In 1854 he was appointed professor of natural history and paleontology at the Jermyn School of Mines, and he held this post until his retirement in 1885. He was Fullerian professor to the University of London, Hunterian professor of comparative anatomy at the Royal College of Surgeons. Teacher and friend of Balfour. Friend and correspondent of Darwin, whose staunch supporter he became. One of his most important contributions was the introduction of laboratory biology into the public schools. Huxley was the author of many memoirs on comparative anatomy, and paleontology. His scientific publications have been gathered by Sir Ray Lankester into 4 quarto volumes, and his other writings into 14 volumes octavo. His more interesting memoirs from an anatomical standpoint are:

*Man's Place in Nature, 1863. On Certain Errors respecting the Structure of the Heart attributed to Aristotle, Nature, 1879. Manual of the Anatomy of vertebrated Animals, 1871. On a hith-*

*erto undescrbed structure in the human hair sheath, London Medical Gazette, I, 1340 (July, 1845).*

*M. costo-humeralis. Stratum Huxleyi.*

*Biography: Life and Letters of Thomas Huxley, 2 vols., by his son, Leonard Huxley. New York and London, 1913, in-8°.*

**Hyatt, Alpheus.** An American zoologist and paleontologist, 1838–1902. He was born at Washington, D. C., and in 1856 at the age of 18 he entered Yale University. After one year he went to Harvard to study with Louis Agassiz, and was graduated in 1862. Hyatt was custodian and curator of the collections of the Boston Society of Natural History from 1870–1902. His chief scientific interests, aside from his routine work, were the development of the ammonoid cephalopods, especially the fossil forms, and he wrote a number of memoirs which attracted world wide attention from paleontologists working in similar fields. Not only did his work attract the attention of this class of workers, but the broad biological principles underlying all of his investigations brought favorable comment from many whose interests were quite diverse from his own.

*Proceedings of the Boston Society of Natural History, vol. 30, No. 4, pp. 413–433, 1902.*

**Hyrtl, Josef.** An eminent anatomist in Prague, and Vienna, 1811–1894. He was born at Eisenstadt in Hungary; studied in Vienna, 1831–35. Professor of anatomy at Prague, 1836; in Vienna, 1844–74.

*Handbuch der topographischen Anatomie, Vienna, 1847. Corrosions Anatomie, 1873. Das Arabische und Hebräische in der Anatomie, Vienna, 1879. Onomatologia anatomica, Vienna, 1880. Die alten deutschen Kunstworte der Anatomie, Vienna, 1884.*

*Arteria anastomotica. Articulatio carpi sup. (radio-carpea). Canalis sphenopalatinus (semicircularis sup. et pharyngeus). — laminae spiralis (spiralis modiolii). Collum fibulae. Fascia pelvis visceralis (endopelvina); — transversa (transversalis). Fissura occipitalis transv. Fretum oris. Ligamentum intertarseum; — triangulare urethrae. Musculus lateralis nasi; — pleuro-oesophageus; — styloauricularis; — sustentator capitis (sternocleidomast.). Porus cranio-nasalis; — crotaphitico-buccinatorius; — opticus. Processus paracondyloideus (paramastoidieus); — pneumaticus; — zygomatico-orbitalis. Ramus auriculo-frontalis. Sutura palati cruciata (palatina transv.). Truncus tibio-peroneus.*

*Biography: Anat. Anz., Bd. 9, p. 773, 1894.*

**Ingrassias, Giovanni Filippo (Ingrassia).** An Italian physician and anatomist; was born at Recalbuto, near Palermo, 1510–1580. Professor of the theory and practice of medicine and of anatomy in Naples until 1560. Here his lectures in anatomy and medicine were so popular

that he earned the title of the Sicilian Hippocrates. Philip II, king of Spain, appointed him chief physician to Sicily. His name has been attached to the wing of the sphenoid bone. He is reputed to have first described the stapes, and to rank high as an osteologist.

*In Galeni librum de ossibus doctissima et expertissima commentaria.* Messina, 1603, in fol. Illustrated with figures from Vesalius.

*Apophysis.*

*Biography:* Haller (*Bibliotheca Anatomica, Tome I, p. 194, 1774*).

**Innocent XII.** See **Lancisi**.

**Jacob, Arthur.** An Irish physician and ophthalmic surgeon, 1790-1874.

*Membrane of* = rods and cones of the retina.

**Jacobson, Ludwig Levin.** A Danish anatomist, 1783-1843. Physician in Copenhagen, later military physician in the French and English armies.

*Diss. de quinto nervorum pari animalium.* Koenigsberg, 1818, in-4°. *De sytemate venoso peculiari in permultis animalibus observato.* Copenhagen, 1821, in-4°. *Bildrag til bloeddgranes anatomie og physiologic.* Copenhagen, 1828, in-4°. *Die Okenschen Koerper oder die Primordialnieren.* Copenhagen, 1830, in-4°.

*Canal of* = canaliculus tympanicus. *Cartilage of* = cartilago vomeronasalis. *Organ of* = Organon vomeronasale (*Jacobsoni*) *Plexus tympanicus* (*Jacobsoni*).

**Jacopi, Joseph.** An Italian physiologist and anatomist. Professor of comparative anatomy and physiology at the University of Pavia. He died in 1813. He was associated with Scarpa in the school of practical surgery.

*Elementi di fisiologia e notomia comparativa, Livourne, 1823, 3 vols., in-12°.*

**Jaeger, Georg Friedrich von.** A German paleontologist, 1785-1866. Professor in Stuttgart. Known for important discoveries in vertebrate paleontology. In 1828 he published the first description of the huge Labyrinthodonts, the early specialized land-living Amphibia.

**Jarjaway, Jean-François.** A French physician, 1815-1868.

*Muscle of* = *M. depressor urethæ*.

**Jasolini, Jules.** A student and successor to Ingrassias in the chair of anatomy and surgery at Naples. He was born at Santa-Eufemia, in Calabria, Italy.

*Questiones anatomicae et osteologia parva; de cordis adipe; de aqua in pericardio; de pinguedine in genere. Naples, 1573, in-8°.*  
*De poris choledochis et vesica fellea, Naples, 1577.*

**Jessenius** (Jessen, or Jessensky) Jean de (Johann von). 1556-1621. He was born at Breslau. Studied medicine at Leipzig, in Italy, and in Wittenberg. Became rector and chancellor of the university at Prague. He is said to have been the first to describe the organs of voice.

*Anatomia, Praga anno 1600 abs se solemniter celebratae historia; de ossibus tractatus. Wittenberg, 1601, in-4°.*

**Joerg, Johann Christian Gottfried.** A German physician known for his work in obstetrics, 1779-1856. He was a professor at Leipzig.

*Ueber das Gebärorgan des Menschen und der Säugethiere im schwangern und nicht-schwangern Zustande, Leipzig, 1808.*

**Joessel, Johann Georg.** A German anatomist, 1838-1892. Born near Strassburg, where he studied medicine and where he later became professor of topographic anatomy.

*Lehrbuch der topographisch-chirurgischen Anatomie, Bonn, 1884-1892.*  
*Biography: Anatomischer Anzeiger, Bd. 8, p. 92, 1893.*

**Jones, Thomas Wharton.** Discovered the germinal vesicle of the mammalian egg in 1835.

*On the ova of women and mammiferous animals, as they exist in the ovaries before impregnation; and on the discovery in them of a vesicle analogous to that described by Prof. Purkinje in the mature egg of the bird. Proc. Royal Soc., London, P. III, p. 339/340, 1835.*

**Josephi, Wilhelm.** An anatomist of Rostock, was born 1763 at Bronswick. He was prosector of anatomy at Goettingen and became professor of anatomy, medicine, and obstetrics at the University of Rostock, in 1792; in 1808 he became chief military surgeon. His writings show his interest in obstetrical anatomy.

*De conceptione abdominali vulgo sic dicta, Goettingen, 1784.*  
*Observationum ad anatomiam et artem obstetrician spectantium satura, Helmstaedt, 1785, in-8°.*  
*Anatomie der Saeugethiere, Goettingen, 1787, in-8°.*

**Jung, Karl Gustav.** A Swiss anatomist, 1793–1864. Professor of anatomy in Basel.

*Animadversiones de ossibus generatim.* Basel, 1827.  
*Musculus pyramidalis auriculæ; intertragicus.*

**Keill, James.** An English physician, born at Edinburgh, 1763–1819. Practiced at Northampton. He is the author of:

*The Anatomy of the human body abr'dg'd,* London, 1698.  
*An account of animal secretion, the quantity of blood in the human body, and muscular motion,* 1708. London.

**Kerckring, Theodor.** A Dutch anatomist, born at Hamburg, 1640–1693. Physician in Amsterdam, later in the service of the Duke of Tuscany. Known for his observations on the vasa vasorum in the horse and for his studies of the development of the skeleton in the foetus.

*Opera omnia anatomica,* Leyden, 1717, in-4°.  
*Spicilegium anatomicum continens observationum, etc.,* Amsterdam, 1670, in-4°.  
*Anthropogeniæ ichnographia, sive conformatio foetus ab ovo usque ad ossificationis principia, in supplementum Osteogeniæ factum.* Amsterdam, 1671, in-4°.  
*Noduli valvularum. Plicæ circulares. (Valvulæ conniventes).*

**Ketham, Johannis de (deKetaz).** Published the first illustrated medical treatise, in folio, containing 6 woodcuts. This work contains a figure of female anatomy showing a foetus in the uterus. The editions after 1493 contained also the anatomy of Mundinus.

*Fasciculus Medicinæ,* Venice, 1491, in folio.  
*Biography: Locy, Wm. A., Anatomical Illustrations before Vesalius. Journ. of Morphol., vol. 22, no. 4, pp. 953–957, 1911.*

**Key, Ernst Axel Henrik.** A Swedish pathologist and anatomist, 1832–1901. Born in Smaland. Student at Lund, 1848; 1860 studied normal histology with Max Schultze in Bonn; in 1861 he studied pathological anatomy with Virchow. In 1862 professor of pathological anatomy at the Carolina Institute. Editor of the "Nordiskt Medicinskt Arkiv," 1862.

*Studien in der Anatomie des Nervensystems und des Bindegewebes; with Gustav Retzius — a large and magnificently illustrated work.*

**Kiellmeyer, Charles-Frédéric de.** A French naturalist, 1765–1844. Teacher of Cuvier. Author of an important work entitled: "*Sur les rapports des forces organiques entre elles dans la série des êtres organisés,* 1793."

**Kiernan**, Francis. An English physician, 1800–1874.

*Space of* = *interlobular spaces in the liver.*

**Kiesselbach**, W. German laryngologist, 1839–

*Area of* = *on the nasal septum.*

**Kilian**, Hermann Friedrich. German obstetrician, 1800–63.

*Line of* = *at the promontory of the sacrum.*

**Kleinenberg**, Nikolaus. A German anatomist, 1842–1897. Born at Libau in Kurland. Professor of zoology and comparative anatomy at Palermo. In 1879 professor of zoology and comparative anatomy at Messina, and in 1895 at Palermo. Studied at the Naples Zoological Station.

*Sullo sviluppo del sistema nervoso periferico nei Molluschi, 1894.*

*Biography: Nikolaus Kleinenberg, by Paul Mayer. Anat. Anz., Bd. 14, pp. 267–271, 1898, with bibliography.*

**Knackstedt**, Christophe Elie Henri. A surgeon in Bronswick, Germany, 1749–1799. He is the author of: "*Osteologie, oder Beschreibung der Knochen des menschlichen Koerpers. Bronswick, 1781, in-8°.*"

**Knox**, Robert. An anatomist in Edinburgh, Scotland, 1791–1862. He was the first to teach general anatomy from the descriptive, histologic and comparative angles. He was subjected to considerable notoriety and scandal owing to his connivance with the resurrectionists.

*The Races of Man, 1850.*

*Anatomical Studies of the Bones and Muscles for the use of Artists, London, 1833.*

**Koelliker**, Rudolf Albert von. A German anatomist, histologist and zoologist, 1817–1905. Prosector for Henle, 1843. Professor of physiology and comparative anatomy in Zurich, 1846–47; Würzburg, 1847–1905. He is regarded as one of the greatest histologists of the last century, and did much to advance biology in general; he is regarded also as one of the greatest embryologists of his time and his treatise on general embryology is of high merit. He was one of the first to demonstrate cell division in animal cells.

*Entwicklungsgeschichte des Menschen und der Thiere, Leipzig, 1861.*

*Mikroskopische Anatomie, Leipzig, 1850–4.*

*Handbuch der Gewebelehre des Menschen, Leipzig, 1852, 6th edition, 1889.*

*Cells of* = *osteoblasts. Glands of* = *Bowman's glands. Layer of* = *in the iris. Ligamentum circulare. Stratum intermedium (Layer). Substantia ferruginea. Reticulum of* = *neurologia.*



**Kohlrausch, Otto Ludwig Bernhard.** A German physician, 1811-1854.

*Zur Anatomie und Physiologie der Beckenorgane, Leipzig, 1854.*  
*Valves of = Plicae transversalis recti.*

**Koken, Ernst.** A German paleontologist, 1860-1912. He was born in Braunschweig and studied at the University of Göttingen; later at Berlin, where he came under the influence of Beyrich and Dames. In 1895 he was Quenstedt's successor at the University of Tübingen as director of the geological museum, and retained this position to the end of his life. Koken's interests in fossil vertebrates were chiefly from the standpoint of geology. His contributions to the morphology of the vertebrates, though few, are noteworthy.

**Kopho II.** See **Copho II.**

**Koyter.** See **Coiter.**

**Kowalevsky, Woldemar.** A Russian paleontologist, 1843-1883. He was born in the government of Witebsk, on the 15th of April (1843). A student and admirer of Rüttimeyer, under whose influence he produced his three remarkable memoirs on fossil hoofed mammals. He wrote these three memoirs in three languages, not his own. His English memoir: "*On the Osteology of the Hyopotamidae, London, 1873,*" was one of the first attempts to study problems of paleontology on the broad basis of organic evolution. His other memoirs are: "*Sur l'Anchitherium aurelianense, Cuv., et sur l'histoire paléontologique des Chevaux, Paris, 1873; Monographie der Gattung Anthracotherium Cuv., und Versuch einer natürlich Classification der fossilen Hufthiere,*" in "*Paleontographica,*" Cassel, 1873-4, Bd. XXII, dedicated to Charles Darwin.

Kowalevsky was professor of paleontology in the University of Moscow and died in that city on the 28th of April at the age of 40. Osborn says of Kowalevsky's above mentioned *Monographie*: "This work is a model union of the detailed study of form and function with theory and working hypothesis. It regards the fossil not as a petrified skeleton, but as having belonged to a moving and feeding animal; every joint and facet has a meaning, each cusp a certain significance. . . . In other words the fossil quadrupeds are treated *biologically* so far as is possible in the obscurity of the past."

**Krause, Karl Friedrich Theodore.** A German anatomist in Hannover, 1797–1868. Professor of anatomy in the school of surgery at Hannover.

*Handbuch der menschlichen Anatomie, Hannover, 1833–38, edited and augmented by Wilhelm Krause. Leipzig, 1905. Synopsis iconne illustrata nervorum systematis gangliosi in capite hominis. Hannover, 1839.*

*Arcus tonsillaris. Fibrocartilagines falciformes (Menisci genu). Ligamentum pisometacarpeum; — sacrococcygeum medium. Musculus coracocervicalis; — coracoradialis et ulnaris; — urethralis transversus Ramus supraspinatus. Scyphulus. Tunica folliculi.*

**Krause, Wilhelm.** An eminent German anatomist (1832–1909) in Goettingen and Berlin. Son of Karl Friedrich Theodor Krause. Professor of anatomy in Goettingen and Berlin.

*Neurologie der oberen Extremitäten. Leipzig, 1865. Handbuch der Anatomie des menschen unter Mitwirkung von W. His und W. Waldeyer, und unter Verweisung auf den Handatlas der Anatomie von Werner Spalteholz, 1899–1905, 4 vols., in-8°.*

*Arcus dorsalis pedis. Corpuscula bulbiformia. Crista muscularis; — palatina transversa. Fossa pubovesicalis. Glandula lacrimalis accessorius. Gl. mucosæ; — tympanica. Ligamentum calcaneo-naviculare interosseum lat.; — costotransv. breve; — ductus venosi; — popliteum sup. (arcuatum); — tarsocalcaneum dorsale; — triangulare. Linea semicircularis sup. Lobus inf. ant. cerebelli. Membrana fenestrata retina; — pigmenti. pigmenti iridis. Musculus coracocervicalis; — coracoradialis et coracoulnaris; — labii prop.; — quadrigeminus brachii; — quadrigeminus capitis; — transversospinalis longi. Nucleus pedunculi cerebri; — respiratorius. Os multangulum accessorium; — quadratum. Ostium tracheale laryngis. Plexus anserinus. Portio recta; — reflexa. Processus anomalous medius; — medialis calcanei; — occultus oss. maxillaris. Radix descendens n. glosso-ph. Sinus sphenoidalis. Sulci triradiati. Sutura transv. oss. occipitis. Torus uteri. Vasa aberrantia hepatis.*

**Kuehne, Willy.** German histologist, 1837–1900.

*Muscle-spindle of = neuromuscular spindle.*

**Kupffer, Karl Wilhelm von.** A German anatomist and embryologist, 1829–1902. Student of Bidder, Prosector at Dorpat, 1858–66; professor of anatomy in Kiel, 1867. Professor of anatomy in Königsberg, 1876–1880; in Munich, 1880–1902, as successor to Bischoff. He is the author of many memoirs on various phases of embryology, especially of the fishes.

*Untersuchungen ueber d. Textur des Rueckenmarks u. Entwicklung seiner Formelemente, Leipzig, 1857.*

*Entwicklungsgeschichte d. Kopfes, 1895.*

*Vesicle. Cellulae Kupfferi.*

**Lacaze-Duthiers, Henry de.** A French zoologist, 1821-1901. Founder of experimental zoology in France. Studied medicine in Paris, but was influenced by de Blainville and Milne-Edwards to take up the study of natural history. In 1854 professor of botany and zoology in Lille. In 1863 he was called to the natural history museum in Paris, and held the professorship in the Sorbonne from 1869 to the end of his life. In 1872 he founded, at his own expense, the "Archives de Zoologie expérimentale," and the same year founded the Zoological Station at Roscoff on the coast of Brittany, and established a laboratory at Banyuls. He is the author of numerous contributions to the anatomy of molluscs, ascidians; and especially the embryology and neurology of molluscs.

*Les ascidies simples des cotes de France, 1874.*

*Biography: Nekrolog im Archives de Zoologie expérimentale, X, 1902.*

**Lacépède, Bernard-Germain-Étienne-de Laville, Comte de.** A French naturalist and writer, was born at Agen in 1756; died at Epinay, 1825. A friend of Buffon and Daubenton. Professor of zoology at the Jardin-du Roi, in 1795. Grand chancellor of the Légion-d'Honneur.

*Éloge historique de Daubenton, Paris, 1790, in-8°.*

*Histoire naturelle des poissons, Paris, 1798-1803, 5 vol.*

*Biography: L'Éloge historique de M. le Comte de Lacépède, Paris, in-8°.*

**Lachmann, Karl Friedrich Johannes.** A German zoölogist in Braunschweig, 1832-1860. Student of Johannes Mueller. Author, with Claparède, of important contributions on the Infusoria and Rhizopoda.

**Laennec, René-Théophile-Hyacinthe.** A French physician, the inventor and discoverer of the stethoscope, born at Quimper, 1781-1826. Professor of medicine in the Collège de France. He is the author of a number of contributions which are listed in "Disciples of Æsculapius," Richardson, vol. I, p. 319, 1901, and among them is his:

*Memoire contenant la description de la membrane propre du foie. 1803.*

**Laguna, Andrés a (Lacana, Lucana).** 1490(9)-1560. Born at Segovie, Spain. He studied at the University of Salamanca, and Paris, and visited the universities of Italy and Germany. At Padua he was associated with Realdo Colombo; was honored in Rome by Pope Leo X. He is the author of several dissertations on the work of Galen. His best contribution to anatomy seems to be:

*Anatomica methodus, seu de sectione humani corporis contemplatio. Paris, 1535, in-8°.*

**Lallemand, Claude-François.** A French surgeon, 1790–1853.

*Bodies of* = concretions in the seminal vesicles.

**Lalouette, Pierre.** A physician in Paris, 1711–1742.

*Pyramid of* = median lobe of the thyroid gland.

**Lamarck, Jean-Baptiste-Pierre-Antoine-de Monnette,** chevalier de. A distinguished French naturalist, and evolutionist, 1744–1829. Associated with Buffon, Daubenton, Cuvier, Geoffrey Saint-Hilaire and Lacépède at the Jardin des Plantes, where he was professor of natural history. In his "Philosophie Zoologique," published in 1809, he proposed his ideas of the way in which organic evolution has worked. It is said that he invented the term "biology." One of the first to believe in the mutability of species, in which he was bitterly opposed by his contemporaries. He is the author of numerous works on natural history. His "Zoologie Philosophique," is contained in:

"*Histoire naturelle des animaux sans vertébrés, Paris, 1815–1822, although his ideas were given for the first time in his.*" *Système des animaux sans vertèbres, 1801.* His "*Philosophie Zoologique*" was issued in 1809 in 2 vols., in-8°. He is also the author of an important memoir entitled: "*Recherches sur l'organisation des corps vivans, particulièrement sur leur origine, sur la cause de leur développement, des progrès de leur composition et celle qui amène la mort,*" Paris, 1802, in-8°.

*Biography: Lamarck, The Founder of Evolution, His Life and Works, with Translations of his Writings on Organic Evolution, by Packard, 1901.*

**Lancisi, Giovanni Maria.** An Italian anatomist and physician to the Pope (Innocent XI, in 1688), 1654–1720. Professor of anatomy at Sapienza, in 1684; in 1700 he was first physician to Pope Clement XI. While in Rome he was associated with Malpighi, Tozzi, and Galliani; and was in correspondence with Bellini, Boerhaave, Morgagni, Heister, and many other eminent medical men. He was assisted in his work by Pope Innocent XII, to whom is attributed the first observation of the circulation of the blood with the microscope, and the discovery of blood capillaries and corpuscles; in which he was probably stimulated by Lancisi. The latter is the author of a number of works in anatomy, published in folios and quartos. Among them may be mentioned:

*Anatomia corporis humani ad usum theatri accommodata, Turin, 1711, in-4°.* *Anatomia per uso ed intelligenza del disegno, ricercata non solo su gli ossi e muscoli del corpo umano, etc. Rome, 1691, in-fol.* This work recalls the famous Bridgewater treatises of later times. *Tabulæ anatomicæ clarissimi viri Bartholomæi*

*Eustachii, quas ex tenebris tandem vindicatas, etc.* Rome, 1714, in fol. This work was several times reprinted.  
*Striæ long. med. et lat. Lancisii.*

**Landi, Bassiano.** An Italian physician of the 16th century at Padua. He is the author of:

*Anatomia corporis humani, Basel, 1542, in-4°.*

**Langenbeck, Bernhard Rudolf Konrad von.** A German surgeon, 1810-1887.

*Triangle of* = an area over head of femur.

**Langenbeck, Konrad Johann Martin.** A German surgeon, 1776-1851. Professor of surgery and anatomy in Würzburg, 1799; 1802 in Göttingen; 1814 professor of surgery and anatomy; 1848, professor of anatomy.

*Anatomisches Handbuch, 1806.*

*De Structura Peritonæi, 1817.*

*Icones Anatomicæ, 1826-39.*

*Handbuch der Anatomie, 1831-47.*

*Mikroskopisch anatomische Abbildungen, 1848-51.*

*Nervenlehre, Goettingen, 1831.*

*Commissura transversa sulcata. Foveæ parvæ. N. superficialis scapulae.*

**Langer, Carl, Ritter von Edenberg von.** German anatomist, 1819-1887. In 1843-47 assistant, 1849 privat docent for anthropology, anatomy and physiology; in 1851 professor of zoology in Pest; in 1856 professor of normal anatomy in (Josefinum); 1870 at the university in Vienna.

*Lehrbuch der Anatomie, Wien. Lehrbuch d. topogr. u. system. Anatomie, 9th ed., 1910, Langer-Toldt. Das Kiefergelenk des Menschen, Wien, 1860.*

*Crista sphenoidalis. Crura furcata (antihelicis). Meditullium Ossa manus (metacarpalia). Pecten manus. Processus falciformis axillaris. Tuberculum intercondyloideum.*

*Biography: Anatomischer Anzeiger, Bd. 3, p. 77-80, 1888.*

**Langerhans, Paul.** A German physician and anatomist, 1847-1888. Studied with Virchow and Ludwig. Prosector at Freiburg, where he later became professor extraordinarius.

*Beitrag zur mikroskopischen Anatomie der Bauchspeicheldrüse, Berlin, 1869.*

*Cellulæ. Stratum granulosum. Insulæ (small groups of epithelial cells in the interstitial tissue of the pancreas).*

*Biography: Anatomischer Anzeiger, Bd. 3, pp. 850-851, 1888, with list of 25 contributions.*

**Langhans**, Theodor. German pathologist and anatomist, 1839–  
*Cells of* = *polygonal cells forming Langhan's Layer (covering the placental villi).*

**Latham**, Peter Mere. An English physician, 1789–1875.  
*Diseases of the Heart, London, 1845.*  
*Circle of* = *an area on the chest corresponding to the area of pericardial dullness.*

**Laumonier**, Jean-Baptiste. A French surgeon, 1749–1818.  
*Ganglion of* = *Ganglion caroticum.*

**Lauth**, Ernest Alexandre. A German physiologist and anatomist, 1803–1837. Professor of physiology in Strassburg.  
*Handbuch der Anatomie, Stuttgart, 1836.*  
*Mémoire sur les vaisseaux lymphatiques des oiseaux et sur la manière de les préparer, Paris, 1825, in-8°.*  
*Appendix epididymidis (Canalis) Ductus aberrans testis. Lig. scaphocuneiforme. Sinus venosus (scleræ) = Schlemmi.*

**Lauth**, Thomas. A German anatomist, 1758–1826. Student of Lobstein, Desault, Hunter. Demonstrator of anatomy, 1784; professor of anatomy and surgery, 1785; professor of anatomy at the École de Santé, 1794, in Strassburg.

*Myologie et syndesmologie, 1798, also Halle, 1805.*  
*Histoire de l'anatomie, Strassburg, 1815, in-4°. 1 vol. (Up to the time of Bartholin, 1671.)*  
*Canal of* = *Canal of Schlemm. Ligament of* = *lig. transversum atlantis.*

**La Valette St. George.** See **Valette St. George.**

**Lawrence**, Jason Valentine. An American physician and anatomist, 1791–1823. Assistant to Horner in the University of Pennsylvania, 1822.

**Lawrence**, Sir William. An English anatomist and surgeon in London, 1783–1867. Professor of anatomy and surgery at the Royal College of Surgeons.

*Comparative anatomy, Physiology, Zoology and the Natural History of Man, 1816–1818.*

**Leber**, Ferdin Jos, Edler von. An anatomist in Vienna, 1727–1808. Student of Jaus. Professor of anatomy at the university in Vienna, 1761–86.

*Vorlesungen ueber d. Zergliederungskunst, 2nd ed., Vienna, 1778.*

**Le Boë.** See **Boë.**

**Lecat,** Claude-Nicolas (Le Cat). A French surgeon, 1700-1768.  
*Gulf of = the bulbous urethra.*

**Lee,** Robert. An English physician, 1793-1877. Professor of obstetrics in London. "*The morbid anatomy of the uterus and its appendages,*" London, 1838.

*Ganglion of = cervical ganglion.*

**Leeuwenhoek** (Leewenhoek). (Antoine, Antonius von) Antonj van. An eminent Dutch anatomist, naturalist and physician at Delft, 1632-1723. He was one of the pioneers in microscopical observations. He discovered the blood corpuscles, the striæ in skeletal muscle, the dental canals, and through his student, Johann Ham, the spermatozoa. He held the humble post of beadle, or exciseman, as did Robert Burns of Scotland, at the small salary of \$125 per year. Leeuwenhoek held this post for 39 years, and the stipend was paid him till his death. He contributed over 375 papers and letters to the Royal Society of London, and several to the Academy of Science in Paris. Richardson (Sir Benjamin Ward), in the "Asclepiad," vol. 2, 1885 (*Disciples of Æsculapius, vol. 1, pp. 108-127, with portrait and figures of his apparatus and copies of figures from Leeuwenhoek's work — copied by Locy — Biology and its Makers, pp. 77-88, 1908*), says: "\* \* \* although not a regular professor of medicine by an orthodox system of training, he was learned in physic \* \* \* every line he writes \* \* \* shows that he was, for his time, a remarkable anatomist."

*Naturkundige Werken, Delft, 1696, in-4°.*

*Biography: Haller-Bibliotheca Anatomica, Tome I, p. 606.*

1774.

**Leidy,** Joseph. An eminent paleontologist, biologist, and anatomist, 1823-1891. One of the most noted teachers of anatomy of the Philadelphia School of Anatomy. (See Keen, W. W., *History of practical Anatomy, Philadelphia, 1874.*) Professor of anatomy at the University of Pennsylvania, as successor to Horner, which chair he filled for 38 years. (See life of William Pepper, by F. N. Thorpe, Philadelphia, 1904, pp. 110-113.) He was the author of 599 contributions to biology, including protozoology, parasitology, human anatomy, vertebrate paleontology. The titles of his papers, with notes, have been gathered by his son. (Smithsonian Miscellaneous Collections, xlvi, no. 1477, 1904.)

*Elementary Treatise on Human Anatomy, 1889.*

*Musculus extensor brevis.*

*Biography: The Life and Works of Joseph Leidy, by Henry C. Chapman, 1907—Science, N. S., vol. 26, no. 676. p. 812. H. F. Osborn, Biographical Memoir of Joseph Leidy, Natl. Acad. Sci. (Biog. Mem.), vol. 7, pp. 339–395, 1913, with portrait and bibliography. See also: Pop. Sci. Monthly, vol. 17, pp. 684–691, 1880.*

**Lenhossék, Joseph von.** An anatomist of Budapest, 1818–1888. Studied anatomy under Berres at Vienna; then for 9 years assistant in anatomy at the University of Budapest, and became professor e. o. of topographic anatomy and later studied in Vienna under Hyrtl and Bruecke. He was called to Klausenburg as professor of anatomy for five years, when he returned to Pest as professor of descriptive and topographic anatomy, which position he held until his death.

*Ueber den feineren Bau der sogenannten Medulla spinalis. Vienna.*

**Leonardo da Vinci** was an eminent Italian artist, anatomist, engineer and inventor, 1452–1519. He was born at the Castle Vinci, in the valley of the Arno, about midway between Pisa and Florence. Marc Antonio della Torre is supposed to have been the teacher of Leonardo in anatomy, and to have secured his services as an artist for the illustration of his "Anatomy." McMurrich, however, says: (Med. Lib., IV, p. 346, 1906), there are difficulties in the way of such a belief. It has been suggested by Jackschath (Med. Blaetter, 1902, xxv, pp. 770–772), that Vesalius plagiarized the drawings in his "Fabrica corporis humani, 1543," from Leonardo. This is denied by McMurrich (Med. Lib., IV, 1906, p. 350). Leonardo's manuscripts and drawings in anatomy have been published under the following titles:

*"Les Manuscrits de Léonard de Vinci de la Bibliothèque Royale de Windsor: De l'Anatomie, Feuilles a publiés par Theodore Sabachnikoff avec Traduction en Langue Francaise, Transcrits et Annotes par Giovanni Piumati; précédés d'une Etude par Mathias Duval, Paris, 5 vols. 1898–1901, in folio. Leonardo da Vinci — Quaderni d'Anatomia — Tradici fogli della Royal Library di Windsor, Pubblicati do Ove. C. L. Vangensten, A. Fonahn, H. Hopstock, 1911–1914, Christiania, 4 vols. in folio.*

The original manuscripts and drawings are in the Royal Library at Windsor.

*Biography: McMurrich, J. P. 1906 — Leonardo da Vinci and Vesalius, Med. Lib., vol. 4, pp. 338–350. In the bibliography at the end of this paper is given a complete list of references to the life and anatomical works of Leonardo da Vinci. Ency. Brit.; Bull. Johns Hopkins Hospital, vol. 22, p. 140.*

See Marcantonio della Torre and Dürer for other biographical references.



**Leoniceno**, Giovanni Nicola. An Italian physician (1428-1524), who was professor of anatomy at Ferrara, where he was the teacher of Realdo Colombo.

**Leuckart**, Rudolf. A German zoologist, 1822-1898. Studied zoology in Göttingen where he was associated with Rudolf Wagner. In 1855 professor of zoology at Giessen; in 1869 in Leipzig; the author of numerous contributions to zoology.

*Zur Kenntnis des Generationswechsels und Parthenogenesis bei den Insekten, Frankfurt, 1858. Die Blasenbandwürmer und ihre Entwicklung, Giessen, 1856. Die Parasiten des Menschen und die von ihnen herrührenden Krankheiten, Leipzig, 1863-1876. 2 vols.*

*Biography: Victor Carus, Zur Erinnerung an Rudolf Leuckart, Ber. üb. d. Verhandl. d. Kgl. Sächs. Ges. d. Wiss. Bd. 50, 1898; Taschenberg, Rudolf Leuckart-Leopoldina, Heft XXXV, No. 4, 1899.*

**Leunis**, Johannes. A German zoologist, 1802-1873. Professor of natural history at the gymnasium at Hildesheim. Author of a "*Synopsis of zoology, botany and geology.*" The zoological part was arranged on a taxonomic basis according to the Cuvierian system.

**Leveling**, Henri-Marie de, son of the following, born at Ingolstadt, 1766. Professor of anatomy at the University of Ingolstadt, 1790.

*Introductio anatomica, Ingolstadt, 1790, in-4°. Anatomie des Menschen, Erlangen, 1794, in-8°.*

**Leveling**, Henri-Palmaz de, was born at Treves, Prussia, 1742-1798. Professor of anatomy and surgery at Ingolstadt, Bavaria.

*Dissertatio de valvula Eustachii et foramine ovali, Ingolstadt, 1780, in-4°. Anatomische Erklärungen der Original figuren von Andreas Vesal, samt einer Anwendung der Winslowischen Zergliederungslehre, in sieben Buechern, Ingolstadt, 1781, in-4°. Observationes anatomicae rariores, iconibus aeri incisus illustratae. Ingolstadt, 1786, in-8°.*

**Leyden**, Ernst Victor von. A German physician in Berlin, 1832-1910.

*Duct of = mesonephric duct.*

**Leydig**, Franz von. A German comparative histologist, 1821-1908. He is called the founder of comparative histology, and especially well known for his work on the cutaneous sense organs, in amphibians and fishes. Studied natural history at München where he became es-

pecially interested in the fishes. In 1846 assistant in the physiological institute; in 1848 prosector in the anatomical institute; in 1857 professor of zoology and comparative anatomy at Tübingen; in 1875 professor in the medical faculty at Bonn and director of comparative anatomy in the institute with von La Valette St. George in charge of normal human anatomy.

*Lehrbuch der Histologie des Menschen und der Tiere, Frankfurt, 1857. Die augenähnlichen Organe der Fische, Bonn, 1881. Zur Kenntniss der Zirbel und Parietalorgane, Frankfurt, 1890.*

*Cells of = Henle's cells. Duct of = Wolffian duct. Primitive cylinders = bundles of muscular fibres.*

*Biography: Anat. Anz., Bd. 32, pp. 503-506, 1908; Sitzungsberichte d. Niederrhein. Ges. f. Natur- u. Heilk. Bonn, 1908; Münch. med. Wochenschrift. Nr. 18, 1908.*

**Lieberkuehn, Johann Nathaniel.** A German physician and anatomist in Berlin, known especially for his wonderful injections and his microscopical observations, 1711-1756. A student of Albinus in Berlin, 1740, and of Boerhaave, Van Swieten, and Gaubius. In 1738 he visited London and exhibited his marvelous vascular injections to the Royal Society. In 1740 he visited Paris.

*Dissertatio de valvula coli, Leyden, 1739, in-4°. Dissertatio de fabrica et actione villorum intestinorum tenuium, Leyden, 1745, in-4°. These two treatises were printed in one volume in 1782, London, in-4°.*

*Glandulae intestinales (Cryptæ. Folliculæ). Ampulla of = blind end of a lacteal.*

**Lieutaud, Joseph.** A French physician and anatomist, first physician to Louis XV and XVI, born in Paris (1703-1780). He contributed to the advancement of pathological anatomy through the great number of autopsies he performed.

*Essais anatomiques antenant l'histoire exacte de toutes les parties qui composent le corps humain, Aix, 1742, in-8°.*

*Corpus trigonum. Cuspis valvulare. Septum valvulare. Trigonum.*

**Linnaeus, Carolus (Karl von Linné).** An eminent Swedish naturalist, was born at Rashult, in the province of Smaland, Sweden, 1707-1778. In 1727 he went to the university at Lund, later at Upsala. Later he visited various universities in Germany and Holland, and at Leyden showed his MSS. of the *Systema Naturæ* to Gronovius, who ordered it published at his own expense. This was first issued as 8 folio sheets, and the work saw 12 augmented editions during the life of the author. Later, as a professor at the University of Upsala, Linnaeus'

fame as a lecturer increased the role of the university from 500 to 1500, representing students from all parts of the world. It is said that he found biology a chaos and left it a cosmos. The cosmos, however, was a taxonomic one which he left and on this has been built a large super-structure by a great host of workers in all lands. He proposed the term *Homo sapiens* for man. Besides the *Systema naturæ*, which went through numerous editions, he was the author of over 200 essays on plants and animals.

**Lisfranc, Jacques.** A French surgeon in Paris, 1790–1847. An author of surgical memoirs and a promoter of surgical anatomy.

*Articulationes tarso-metatarsæ. Ligamentum. Tuberculum scalenii.*

**Lissauer, Heinrich.** A German neurologist, 1861–1891.

*Zona Lissaueri.*

**Littre, Alexis.** A French surgeon and anatomist, 1658–1726. He described the triangular space of the bladder, and demonstrated the urethral glands. He is often confused with the following.

*Glandulæ urethrales. Trigonum.*

**Littré, Maximilien-Paul-Émile.** An eminent French medical scholar, 1801–1881. Littré, in 1839–61, published in Paris, his 10 volume edition of the writings of Hippocrates. This is the most scholarly edition of the writings of this ancient author which has yet been issued. This work inaugurated a new phase in the study of Hippocrates. Pagel says: "Jeder der über Hippokrates mitsprechen will, muss die Littrésche Ausgabe in Händen haben und studieren."

**Lobstein, Johann Georg Christian Friedrich Martin.** A German pathologist in Strassburg, 1777–1835. Prosector in Strassburg, 1796. 1819 professor of pathological anatomy.

*Ganglion. Placenta velamentosa.*

**Lobstein, Johann Friedrich.** A physician and anatomist at Strassburg, 1736–1784. Demonstrator of anatomy in 1764. In 1768 professor of anatomy and surgery as successor to Eisenmann.

*Dissertatio de nervo spinali ad par vagum accessorio, Strasbourg, 1760, in-4°. Dissertatio de valvula Eustachii, Strasbourg, 1771, in-4°. Dissertatio de nervis duræ matris. Strasbourg, 1773, in-4°. Dissertatio de liene, Strasbourg, 1774, in-4°. Dissertatio de hepate, Strasbourg, 1775, in-4°.*

**Loder**, Justus Christian. A German surgeon and anatomist, 1753–1832. In 1778 o. professor of anatomy, surgery and obstetrics in Jena; 1803–06, professor of anatomy and surgery in Halle, later in Königsberg, then in St. Petersburg; then in Moscow.

*Anatomische Tafeln, Weimar 1797–1803, 2 Bde. 182 Kupft. 4 Bde. Text Folio.*  
*Grundrisse der Anatomie, Jena, 1806.*

**Louis**, Antoine. An eminent French surgeon and physiologist in Paris, 1723–1792. Professor of physiology. In 1764 he was made permanent secretary of the Academy of Science. He is the author of numerous works on surgery and surgical anatomy.

**Lovén**, Otto C. A Swedish histologist and physiologist, 1864–1904. He is known for his discovery of the taste fibres in the papillae of the tongue of mammals.

**Lower**, Richard. An English anatomist, and physician in London, 1631–1691. He was born in Tremere, Cornwall, England. He studied medicine at Oxford, where he worked with Willis. In 1667 he became a member of the Royal Society. Known for his studies on the heart.

*Tractatus de corde; item de motu et colore sanguinis, et chyli in cum transitu, London, 1669, in-8°.*

*Tuberculum intervenosum. Truncus innominatus. Tendo cordis.*

**Lucae**, Samuel Christian. A German physician, born at Frankfurt-am-Main, 1787–1821. Professor of medicine in Marburg, and director of the Medico-clinic Institute and of the hospital.

*Observationes anatomicæ circa nervos arterias adeuntes, Frankfurt, 1810, in-4°.* *Anatomische Untersuchungen der Thymus in Menschen und Thieren. Frankfurt, 1811, in-4°.* *Anatomische Bemerkungen ueber die Diverticula am Darmcanal, und ueber die Höhlen der Thymus. Nuremberg, 1813, in-4°.*

**Ludwig**, Karl Friedrich Wilhelm. A German physiologist, in Leipzig, 1816–1895. Professor of comparative anatomy in Marburg, 1846; 1849 professor of anatomy and physiology at Zürich; 1855 professor of zoology and physiology at Vienna; 1865 professor of physiology at Leipzig, which position he held until 1895. Member of a family distinguished in medicine.

*Lehrbuch der Physiologie des Menschen, 1862–1869.*

*Ganglion. N. laryngo-vago cardiacus (depressor cordis).*

**Luschka**, Herbert von. A German anatomist, 1820–1875. Professor of anatomy in Tuebingen, 1849–75.

*Die Brustorgane des Menschen in ihrer Lage*, Berlin, 1858. *Anatomie des Menschen*, 3 vols. Tübingen, 1862–1867. *Die Hirnanhang u. d. Steissdrüsen d. Menschen*, Berlin, 1860. *Die Kehlkopf des Menschen*, 1871.

*Annulus fibrosus*; — *foveæ ovalis cordis*. *Apex pleuræ*. *Aponeurosis diaphragmatis*. *Arcus venosus (juguli)*. *Bursa pharyngea*. *Cartilago laryngis (sesam. lig. vocalis)*. *Diaphragma secundarium*. *Eminentia triangularis*. *Flexura lienalis coli*. *Foveæ glandulares*; — *nuchæ*. *Glandula coccygea*. *Interstitium thoracico-humerale*. *Intestinum pancreaticum*. *Ligamentum interarticulare art. humeri*; — *jugale*; — *sterno-cardiaca*; — *suspensorium dentis prop.*; — *vocale*. *Membrana hyoepiglottica*. *Mesocardium*. *Musculus arytaenoidæo-corniculatus*; — *costalis dorsi*; — *flexor manus med.*; — *levator vaginae*; — *obliqui capitis et colli*; *pharyngo-mastoideus*; — *pubotransversalis (puborectalis)*. *Pars tendinea diaphragmatis*; — *parietalis fasciæ pelvis*; — *tendinea*. *M. epicranii*; — *visceralis*. *Plexus cardiacus magnus*; — *seminalis*; — *supraclavicularis*. *Plica pharyngo-epiglottica*; — *præpylorica*; — *salpingo-nasales*. *Ramus bronchialis n. vagi*. *Rima aquæductus vestibuli*. *Sulcus pyloricus*. *Superficies oralis maxillæ*. *Synchondrosis costo-clavicularis*. *Tuberculum vaginae*. *Tuberositas olecranii*; — *scapularis*. *Valvula recti*. *Vena azygos communis*.

**Luys**, Jules-Bernard. A French physician in Paris, 1828–1897.

*Corpus*. *Nucleus hypothalamicus*.

**Lykos**. A Greek physician, contemporary of Galen, son of Pelops, Galen's teacher, is said to have written a work on the muscles.

**Lyonnet**, Pierre. A naturalist, anatomist and engraver, he was born at Maestricht, 1707–1789. He is known for his:

*Traité anatomique de la chenille qui ronge le bois du saule*. *La Haye*, 1740, in-4°.

**Lyser**, Michael. A German physician of the 17th century at Leipzig, where he was professor of medicine. Studied with Thomas Bartholin at Copenhagen. He wrote the first comprehensive work on anatomical technique.

*Culter anatomicus*, Copenhagen, 1653.

**Magendie**, François. A French physiologist, 1783–1855. Studied in Paris, where he was prosector to the anatomist Boyer. Physician to

the Hôtel Dieu, and professor of medicine at the Collège de France. Founder of the "Journal de physiologie expérimentale, Paris, 1821-31.

*Anatomie des systèmes nerveux des animaux à vertèbres, appliqué à la physiologie et à la oologie, Paris, 1821. Mémoire sur les vaisseaux lymphatiques des oiseaux. Paris, 1819.*

*Apertura mediana ventriculi quarti (Magendii).* Spaces of = between the pia and arachnoid.

*Biography: A Biography of Francois Magendie, Med. Lib., IV, p. 45, 1906.*

**Maier, Rudolf.** A German physician and pathologist, 1824-1888. Author of a textbook of pathology.

*Sinus of* = an infundibuliform depression on the internal surface of the lachrymal sac.

**Maissiat, Jacques-Henri (1805-1878).** A French anatomist in Paris, professor in Paris. Curator of the collections of the School of Medicine.

*Tractus iliotalibialis.*

**Major, Johann Daniel.** A German physician and teacher of medicine, born at Breslau, 1634-1693. He studied at Wittenberg, Leipzig, and visited Italy, where in 1660 he took his degree at the University of Padua. Professor of medicine at the University of Kiel, with charge of the botanical gardens. He was called to Stockholm.

*Dissertatio de pulmone, Wittenberg, 1655, in-4°. Memoriale anatomicum, Kiel, 1668, in-4°.*

**Malacarne, Michele-Vincenzo-Giacinto (1744-1816).** Professor of anatomy at Acqui, 1775-83; professor of surgery and obstetrics at Pavia, then surgery in Padua. One of the founders of surgical anatomy and a student of comparative anatomy, especially of the brain. He wrote an especially good description of the cerebellum.

*Nuova esposiz. d. vera struttura del cervelletto umano, Turin, 1776. Nervo encefalotomia, Pavia, 1791, 8°. Encefalot. di alcuni quardup. Mant., 1795, 4°. Delle opere de' medici e de' cerusici che nacquero o fiorirono prima del sec. XVI negli stati della r. casa di Savoia, 1786, 1789, 4°, 2 vols.*

*Pyramid of* = a lobule on the under surface of the cerebellum. *Space of* = *substantia perforata posterior. Nodulus.*

**Malgaigne, Joseph-François.** A French surgeon in Paris, 1806-1865. Professor of surgical anatomy in Paris.

*Traité d'Anatomie chirurgicale, Paris, 1837.*

*Fossa of* = *fossa carotica.* *Triangle of* = *the superior carotid triangle.*

**Malpighi, Marcello.** An Italian anatomist, was born at Crevalcore, near Bologna, Italy, March 10th, 1628, died in Rome, 1694. He studied at Bologna, and in 1653 he received the degree of doctor of medicine and philosophy. In 1656 professor of medicine at Bologna, also in Pisa during the same year; in 1659 recalled to Bologna; 1662 at Messina; 1666 Bologna; to Rome as physician to Pope Innocent XII. Malpighi was one of the founders of embryology and his observations on the chick made for the advancement of this science. In 1661 he demonstrated the structure of the lungs. His observations on glands were extensive and his name is associated with portions of the kidney and spleen. He made many observations in comparative anatomy and has published an especially fine monograph on the anatomy of the silk-worm.

*De pulmonibus duæ epistolæ, Bologna, 1661, in-fol.* The letters were addressed to Borelli. They were reprinted by Bartholin at Copenhagen in his treatise on the lung. *De renibus, Bouon, 1666.* *Epistola anatomica de cerebro, Bologna, 1665, in-12°.* *De formatione pulli in ovo dissertatio epistolica, London, 1673, in-4°.* *Opera omnia, London, 1686, 2 vol., in-fol.*

Body of = corpuscle; capsule of = capsule of spleen. *Corpusculum renis.* Glomerules of = coil of capillary blood vessels around M.'s capsule. Layer of = the deeper portion of the epidermis. Pyramid of = *pyramis renalis.* *Rete mucosum.* *Stratum germinativum.* *Stigmata (in spleen).* *Stratum.* Tuft of = *glomerulus.* *Vesicles of = in lung.*

*Biography: Richardson—Disciples of Æsculapius, vol. 2, p. 736, 1901. Locy-Biology and its Makers, p. 58, 1908. Carus-Geschichte der Zoologie, p. 394, 1872. Haller-Bibliotheca Anatomica, Tome 1, p. 486, 1774.*

**Manget, Jean-Jacques.** A laborious bibliographer at Geneva, 1652–1742. He collected all the principal anatomical writings of the 17th century, giving especial emphasis to viscera and organs of sense.

*Bibliotheca anatomica, sive recens in anatomia inventorum thesaurus locupletissimus, Geneva, 1685, 2 vol. in folio.*

**Marcantonio della Torre (Antonius, Marcus Antonius della Torre).** An Italian anatomist of Verona (1481[2]–1521). Professor of anatomy at Padua and Pavia. Supposed to have been the teacher of Leonardo da Vinci and to have secured the services of this famous artist in the illustration of his "Anatomy." He pointed out the strong muscular character of the heart; and observed that the blood which returns when the heart opens is not the same as that which closes the valves.

*Biography: Ueber Marc Antonio della Torre und Leonardo da Vinci, die Begründer der bildlichen Anatomie. K. von Marx-Abhandl. d. k. Gesellsch. d. Wissensch. Göttingen, iv. 1848–1850. Einiges ueber die Beziehungen Vesal's zu Leonardo da Vinci und*

zu Marco Antonio della Torre. *Arch. f. Anat. u. Physiol., Anat. Abth.*, 1904, pp. 372-384 (A. Forster). See also Choulant, p. 5.

**Marchand, Felix.** A German pathologist, 1846-

*Adrenals of* = accessory adrenal bodies in the broad ligament.

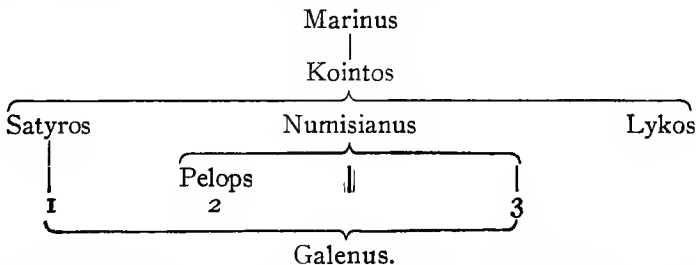
**Marchetti, Domenico de.** An Italian anatomist at Padua, 1626-1688. Associated with Vesling. Professor of anatomy at Padua, 1649-88. One of the first to make injections of blood vessels. Son and successor of the following. To him is attributed the discovery of the pneumogastric nerve, which he divided into 16 parts.

*Anatomia, cui responsiones ad Riolanum anatomicum Parisiensem in ipsius animadversionibus contra Veslingium additae sunt, Padua, 1652, in-4°.*

**Marchetti, Pietro de (Senior).** An Italian anatomist and surgeon, 1593-1673. Father of the above and his teacher and predecessor in the chair of surgery and of anatomy in Padua.

*Tendinis flexoris pollicis ab equo evulsi, observatio seorsim edita, Padua, 1658, in-4°.*

**Marinus (Marinos).** A noted physician and anatomist who lived during the reign of Nero (44-68 A. D.). Galen calls him the restorer of anatomy, and says he wrote an accurate description of the muscles, that he discovered the glands of the mesentery, and that he enriched neurology with several discoveries. He is said to have written an anatomy in 20 volumes, the substance of which is preserved in the writings of Galen. *Töply* (p. 184) gives the following diagram to illustrate the relations of Marinus, Galen and Pelops. (See also: *Bio. Med.; Ency. Brit.*; Haller-Bibliotheca Anatomica, Tome I, p. 80, 1774.)



**Mariotte, Edme.** Prior of the cloister of Saint Martin and member of the Academy of Science at Paris ( -1684). He discovered the blind spot in the retina.

*Nouvelles découverte touchant la vue, Paris, 1668.*

**Marsh, Othniel Charles.** An American paleontologist, 1831-1899. He was born near Lockport, New York, and received his early academic



training at Yale University, 1856-60. It was during the summer vacation of 1855 that he made his first paleontologic discovery. While collecting minerals in the coal measures of the South Joggins, Nova Scotia, he discovered some fossil vertebrae which he later (1862) described as *Eosaurus acadianus*, regarding them as representing a reptile, allied to the ichthyosaurs at that time known from the Mesozoic. We now know that these vertebrae represent a stereospondylous Labyrinthodont. This discovery directed Marsh's studies into the channel which became his life's work and by means of which he was able to enrich American paleontology. After spending three years abroad in study he returned to Yale in 1866 as professor of paleontology, retaining this position for the remainder of his life. Marsh's investigations among the rich fossiliferous deposits of the western states resulted in a host of discoveries which he was able, through his connection with the United States Geological Survey and by the use of his own ample means, to describe and illustrate in a most excellent manner, all of his contributions being accompanied by beautifully executed wood cuts or lithographic plates. Among his important discoveries may be mentioned the recognition of birds with teeth, from the Cretaceous deposits of Kansas, the elucidation of the anatomy and relationships of the dinosaurs. Among the mammals his most noted studies were those dealing with the evolution of the horse, by means of which he was able to show that this mammal had its origin and chief development in North America. At Yale the Peabody Museum became most noted for its collections of fossil vertebrates which were assembled under the direction of Professor Marsh. Marsh contributed some 250 studies to vertebrate paleontology from 1862-1899. Among these may be especially mentioned the beautiful and elaborately illustrated monographs: *Odontornithes; A Monograph of the extinct toothed Birds of North America, Washington, 1880, in-4°*; *Dinocerata; A Monograph of an extinct Order of Gigantic Mammals, Washington, 1886, in-4°*; *The Dinosaurs of North America, Washington, 1896, in-4°*. His "*History and Methods of Paleontological Discoveries, 1879*, and the *Introduction and Succession of Vertebrate Life in America, 1877*, are worthy of note as being of more general interest. Leidy, Marsh and Cope are the founders of vertebrate paleontology in North America, and have been among the most liberal contributors to the science.

*American Journal of Science, 4th series, vol. vii, pp. 403-428, June, 1899, with portrait and bibliography.*

**Marshall, John.** An English anatomist and surgeon, in London, 1818-1891. Professor of anatomy and surgery in London.

*On the development of the great anterior veins in Man and Mammalia, Philos. Trans. of the Royal Society, London, 1850.*  
*Vena obliqua atrii sinistri. Ligamentum venae cavae sinistrae.*

**Martianus** (Martianos, Martialios, Martialis). A disciple of Erasistratus (304 B. C.); an anatomist in Rome. According to Galen he was the author of two works on anatomy, which are lost. Galen ascribes to him a work entitled: "*De Anatomia Erasistrati.*"

**Martin, Bernardin.** Born at Paris, 1629, during the reign of Marie de Médicis. Son of an apothecary and himself a chemist.

*Dissertation sur les dents, Paris, 1679, in-12°.*

**Martin, L.**

*De la nature des dents, Paris, 1839.*

**Martinez, Crisostomo.** A Spanish artist, 1650-1694. At Valencia he undertook the preparation of an anatomical work on human anatomy for artists.

*Nouvelles figures de proportions et d'anatomie du corps humain, Paris.*

**Mascagni, Paolo.** An Italian anatomist, 1752-1815. Born at Castelletto. In 1774 professor of anatomy in Siena, Italy, as successor to Tabarrani; 1800 in Pisa; 1801-15 in Florence, in charge of anatomy, physiology and chemistry in the great hospital Santa-Maria Nuova. He wrote the most complete work on lymphatics ever published.

*Vasorum lymphaticorum corporis humani historia et iconographia, Sienna, 1787, in-fol., with 41 plates. Tavole figurate di alcune parti organiche del corpo umano degli animali e dei vegetabili, esposte nel prodromo della grande anatomia di Paolo Mascagni, Florence, 1819, in-fol.*

*Biography: See Choulant, pp. 143-147.*

**Massa, Nicolas.** A physician of the 16th century, born at Venice, died 1569. Took his medical degree at Padua. Noted for his studies on the anatomy of the stomach and the prostate.

*Introductorius anatomiae, seu dissectionis corporis humani, Venice, 1536, in-4°.*

**Mauchart, Burkhard David.** A German anatomist, 1696-1751.

*Ligament of = Ligamentum alare.*

**Mauthner, Ludwig.** Austrian physician, 1840-1894.

*Cells of; Sheath of = a fine membrane surrounding the axis-cylinder of a nerve-fibre, and separating it from the white substance of Schwann.*

**Mayer**, August Franz Joseph Karl. An anatomist who was born at Greifswald, 1787–1865. Prosector in Bern, 1813; 1815 professor of anatomy and physiology; in Bonn 1819–65.

*Ueber Histologie u. eine neue Einteilung der Gewebe des menschlichen Körpers, Bonn, 1819, 8°.*

**Mayer**, Franz-Xavier. Son of Michael M. Professor of anatomy at Graz, 1824–63.

**Mayer**, Johann Christian Andreas. A German anatomist, 1747–1801. Professor of anatomy and botany in Berlin.

*Beschreibung des ganzen menschlichen Körpers, Berlin and Leipzig, 1783–1794. Kupfertafeln. Anatomisch-physiologisch Abhandlung von Gehirn, Rueckenmark und Ursprung der Nerven, Berlin, 1779, in-4°.*

**Mayer**, Johann-Ignaz von Mayersbach. He reconstructed, in 1731, the anatomical theater in Prague, at his own expense.

**Mayer**, Michael. Prosector to Prochaska 1800; professor in 1810; teacher of anatomy 1791–1830, in Vienna.

**Mayer**, Siegmund. Histologist in the German University at Prague. Born at Bechthelm, near Worms, in 1842; died at Innsbruck in 1910. He studied at Heidelberg, Giessen and Tübingen, receiving his doctorate at the latter place, under Luschka's direction, choosing as his thesis the carotid ganglion. He later studied physiology with Helmholtz, Brücke, Ludwig and Cohnheim. In 1870 he went to Prague as assistant to Ewald Hering who succeeded Purkinje at that place. Mayer placed the greatest emphasis in his work upon physiology and histology as is testified by his list of 62 essays on these subject.

*Studien zur Physiologie des Herzens und der Blutgefäße, 1871–1879. Histologisches Taschenbuch, Prag, 1887.*

*Biography: Anatomischer Anzeiger, Bd. 38, pp. 87–93, with list of publications.*

**Meckel**, Johann Friedrich (Senior) (1714–1774). A student of Albrecht von Haller. Demonstrator at Berlin, 1751; 1753–1773 professor of anatomy as successor to Buddeus. He wrote the first exact description of the N. trigeminus; discovered the Ganglion sphenopalatinum (Gangl. Meckelii Majus) as well as the Ganglion submaxillare. He was the progenitor of a family of anatomists: Philipp Friedrich M., who was professor of anatomy and surgery at Halle, 1756–1803; Johann Friedrich M. (Junior), professor of anatomy and surgery at Halle, 1781–1831;

August Albrecht M., professor of anatomy at Bern, 1790–1829; Heinrich Meckel von Hemsbach, pathological anatomist at the Charité, Berlin, 1821–1856 (see *Töply*, p. 288).

*Dissertatio de quinto pare nervorum cerebri*, Göttingen, 1748, in-4°, with 2 plates.

Band of = ligament to malleus. Cavity of = between laminae of dura mater. Diverticulum of = remains of the omphaloenteric duct. Ganglion of = ganglion sphenopalatinum; ganglion submaxillare. Ligament of = Band. Space of = cavity.

**Meckel**, Johann Friedrich (Junior). Grandson of the elder Johann Friedrich Meckel, a German surgeon and anatomist, 1781–1833. Professor of anatomy and surgery at Halle, 1781–1831. A noted comparative anatomist.

*Abhandlungen aus der vergleichenden und menschlichen Anatomie*. Halle, 1805, in-8°. *Beiträge zur vergleichenden Anatomie*. Leipzig, 1808–1809, 2 vol. in-8°. *Handbuch der pathologischen Anatomie*. Leipzig, 1812–1818, 3 vol. in-8°. *System der vergleichenden Anatomie*. Halle, 1821–1833, 6 tomes en 7 vol. in-8°, dont les trois premiers ont été traduits en 6 tomes, par Riester et A. Sanson. Paris, 1828–1830, in-8°. *Diss. descriptionem ex anatomia comparativa brevem continens*. Leipzig, 1823, in-4°. *Ornithorhynchi paradoxi descriptio*. Leipzig, 1826, in-fol. 8 pl.

Cartilage of = cartilage of mandibular arch. Plane of = craniometric plane cutting the alveolar and auricular points. Rod of = cartilage.

**Meckel**, Philippe Frederic Theodore. Son of the preceding. Born in Berlin, 1756–1803. At Halle, in 1803, professor of anatomy and surgery.

*Dissertatio de labyrinthi auris contentis*, Strasbourg, 1777, in-4°.

**Meek**, Anthony. An anatomist at Leyden (1650–1692). Professor of anatomy at Leyden. Showed that the embryo is not nourished through the lymphatics. Made a number of discoveries on lymphatic system, and was first to inject lymphatics with mercury.

**Meibom**, (Junior) (Meybaum, Meibomius), Heinrich. A Dutch anatomist and physician, 1638–1700. The discoverer of the Meibomian glands in the eyelid. Professor of medicine (also of history and poetry) in Helmstaedt. The author of numerous general scientific dissertations.

*De vasis palpebrarum novis epistola*, Helmstädt, 1666, in-4°. *Glandula tarsica*.

**Meissner, Georg.** A German physiologist and histologist, 1829–1903. Professor of anatomy and physiology in Basel; physiology and zoology in Freiburg; physiology in Göttingen.

*Corpuscula tactus. Plexus submucosus.*

**Mendel, Gregor Johann.** An Austrian monk and naturalist, 1822–1884. He was born at Heinzendorf bei Odrau, in the “Kuhland” district of Austrian Silesia. Studied in the gymnasium at Troppau and at Olmütz. On finishing his education he applied for admission to the Augustinian house of St. Thomas in Brünn, generally spoken of as the Königs kloster. He was admitted and in 1847 was ordained priest. From 1851–53 he studied mathematics, physics and natural science at the University of Vienna at the expense of the cloister. On his return to Brünn he became a teacher of physics. In 1868 he was elected abbot or Prälat of the Königs kloster. The experiments, which have made his name famous the world over, were carried on in the large garden of the cloister. Here he continued his work on peas for eight years, publishing his results in the transactions of the Natural History Society at Brünn, in two papers, in 1866 and 1869. Besides his work on *Pisum* he carried on investigations in the heredity of bees. The notes of these latter experiments have not been found. His researches ended about the time of his assumption of the executive duties of abbot.

*Versuche über Pflanzen-Hybriden, Brünn, 1866. Reprinted in 1901 and also translated into English; republished in English by Bateson in 1909. Ueber einige aus künstlicher Befruchtung gewonnene Hieracium-Bastarde, Brünn, 1869.*

*Biography: Biographical Notice of Mendel, in “Mendel’s Principles of Heredity,” by W. Bateson, Cambridge, 1909, pp. 309–316, with portraits, translations of papers and complete bibliography.*

**Merkel, Karl Ludwig.** A German anatomist and physiologist, 1812–1876. He founded, in 1862, a polyclinic for laryngology.

*Anatomie und physiologie der menschlich. Stimm- und Sprachorgane, 1857.*

*Corpuscles of = tactile corpuscles. Filtrum ventriculi. Ganglia. Musculus ceratocricoides. Touch cells.*

**Méry, Jean.** An anatomist of Paris, 1645–1722. In 1684 he discovered the glands which bear the name of Cowper. In 1700 he was chief surgeon to the Hôtel Dieu.

*Description exacte sur l’oreille de l’homme, Paris, 1677, in-12°. Nouveau système de la circulation du sang par le trou ovalis, dans le fœtus humain, Paris, 1700.*

**Meyer**, Georg Hermann von. German anatomist and physiologist, 1815–1892. Professor of anatomy in Zürich, 1856–89.

*Lehrbuch der Anatomie des Menschen*, 3rd ed., 1873. *Statik und Mechanik des Knochengestüts*, Leipzig, 1874.

*Line. Organ of* = a collection of glands on the tongue.  
*Sinus of* = in floor of external auditory canal.

**Meynert**, Theodor Hermann 1833–1892. Professor of psychiatry in Vienna.

*Commissura. Decussatio. Fasciculus.*

**Michelangelo Buonarroti**. An Italian architect, engineer, artist, and sculptor of Florence and Rome. Born at Caprese, March 6th, 1475. He ended an extremely active career at Rome on February 18th, 1564. Among his many interests, anatomy was at one time a passion with Michelangelo. So much so, as Condivi tells us, that: "His prolonged habits of dissection injured his stomach to such an extent that he lost the power of eating and drinking to any profit. It is true, however, that he became so learned in this branch of knowledge that he has often entertained the idea of composing a work for sculptors and painters, which should treat exhaustively of all the movements of the human body, the external aspect of the limbs, the bones, and so forth, adding an ingenious discourse upon the truths discovered by him through the investigations of many years." Michelangelo often conferred on anatomical subjects with the famous anatomist Realdo Colombo, who was instrumental in procuring for him the body of an exceptionally well-formed young Moor, on which the artist was able to make a number of important observations.

*Biography: Vita di Michelangelo Buonarroti, Scritta da Ascanio Condivi, Pisa: N. Capurro, 1823. The Life of Michelangelo Buonarroti, based on studies in the archives of the Buonarroti family at Florence, by John Addington Symonds, New York, 1893, 2 vols., in-8°.*

**Mihalkovics**, Victor von (Mihalkovics Géza). A Hungarian anatomist, 1844–1899. Born in Pest; in 1869–1872 he was assistant in the anatomical institute in Budapest with Joseph v. Lenhossék. Studied in Vienna with Toldt, afterwards with Ludwig in Leipzig and in 1873 in Strassburg. In 1875 he was called to the University of Budapest as professor extraordinar. of embryology; in 1878 he was ordinariat for embryology and topographic anatomy and director of the institute 1892, as successor to Lenhossék. He is the author of 23 contributions to embryology and histology.

*Entwicklungsgeschichte des Gehirns, Leipzig, 1877, in-4°.*  
*Anatomie und Histologie des Menschen, Budapest, 1898.*

*Biography: Anatomischer Anzeiger, Bd. 16, pp. 349–352, 1899, with bibliography.*

**Milne-Edwards, Henri.** A French naturalist, 1800-1885. Studied medicine at Paris, where he was granted the degree of M. D. in 1823, although he had devoted himself chiefly to the study of natural history. In 1838 member of the Académie des Sciences in the place of Cuvier. In 1841 he filled the chair of entomology at the Jardin des Plantes, and in 1844 became professor of zoology and physiology. He published numerous original memoirs of importance in the *Annales des Sciences Naturelles*, a journal he himself assisted in editing for 50 years.

**Minot, Charles Sedgwick.** An American embryologist, 1852-1914. He was born on the twenty-third of December at Woodbourne in West Roxbury, Massachusetts, into a family noted for excellent attainments. In 1868 Minot began his scientific career by joining the Boston Society of Natural History, where he became an enthusiastic entomologist. In the same year he entered the Massachusetts Institute of Technology specializing particularly in chemistry, though he did some good work in microphotography of the parts of insects in the laboratory of physics. In 1872 he entered the graduate school of Harvard College, and in the following summer he was with Agassiz in Penikese. The year following (1873-1875) Minot went to Leipzig to study with Ludwig and Leuckhart; spent the winter of 1875-76 at Würzburg with Semper, and studied in Paris for a brief period. After his return to America he received the degree of Sc. D. in 1878 from Harvard. After two years he became, at the Harvard University Medical School, successively lecturer in embryology and instructor in oral pathology and surgery 1880-83; instructor in histology and embryology, 1883-87; a assistant professor of histology and embryology, 1887-92; professor, 1892-1906; James Stillman professor of comparative anatomy, 1906-1914.

In 1886 Minot designed a rotary microtome which has since come into general use. It was primarily for cutting serial sections of embryos. His interest in this important addition to modern histological technique was unailing and in later years he improved the original design, besides perfecting a new precision microtome.

His *Human Embryology*, the result of many years' labor, was published in 1892. This was a comprehensive summary of embryology as it bears on the problem of human development. The work was well received and in 1894 was translated into German. One of the greatest and most lasting features of this work is the bibliographic portion, which will be used after other parts of the work have been superseded. He followed this work in the following year (1893) by a "*Bibliography of vertebrate Embryology*" of 127 quarto pages.

While Minot's interests were largely embryological, yet he contributed much of value to general biology. His work on senescence,

growth, the nature of sex and other questions is of a high type. These investigations are summed up in his work "*The Problem of Age, Growth and Death. A Study in Cytomorphosis*, New York, 1908, in-8°. So broad was his grasp of modern biological science that he was regarded as a zoologist, an entomologist, a physiologist, and an embryologist, having contributed important studies to each of these phases of biology.

Minot did much to advance laboratory teaching, especially in microscopic anatomy. He was instrumental also in planning many laboratories. His activities in the scientific societies and associations was so notable that he became the recognized leader of biological workers in America.

He received the honorary degree of LL. D. from Yale in 1899; Sc. D. from Oxford in 1902; LL. D. from Toronto in 1904 and from St. Andrews in 1911. At the University of Jena (1912-1913) he represented, as exchange professor, the anatomists of America, and presented the results of American anatomical research. These lectures were published in 1913 in booklet form "*Modern Problems of Biology*." Among other works to be mentioned Minot is the author of: *Uterus and Embryo*, 1889; *A Laboratory Textbook of Embryology*, 1903; *Normal Plates of the Development of the Rabbit*, 1905, in-4°, besides some one hundred and fifty shorter publications.

*Biography: Science*, 1914, vol. 40, pp. 926-927; *Proc. Bost. Soc. Natl. Hist.*, 1915, vol. 35, pp. 79-93; *Science*, 1915, vol. 41, pp. 701-704; *Boston Med. and Surg. Journal*, 1914, vol. 171, pp. 911-914, and 1915, vol. 172, pp. 467-470; *Anatomical Record*, vol. 10, no. 3, 1916, pp. 133-164, with portrait and bibliography.

**Mitsukuri, Kakichi.** A Japanese zoologist, 1858-1909. His family for generations had produced prominent scholars and especially physicians. Mitsukuri and two of his brothers were among the first who sought training in foreign universities, and he owed his training largely to the United States. He received his first foreign education in Hartford, then in 1875 he entered the Sheffield Scientific School, from which he took his Ph. B. in 1879. The same year he matriculated at Johns Hopkins and studied with Brooks and Newell Martin for four years. He succeeded Whitman in the Department of Zoology at the University of Tokyo, and subsequently was dean of the college of science. He established an important biological station at Misaki, assisted in building up a fisheries bureau, and in general brought the study of zoology to a high level in Japan. His researches cover many branches of zoology, but his most important contributions were to the embryology of the reptiles. Besides his strictly scientific studies he wrote important economic treatises on oyster culture and pearl fisheries, and at the time of his death was completing a monograph of the holothurians of Japan. The following contribution may be mentioned as indicating the type of his researches



in reptilian embryology: "*On the Fate of the Blastopore, the Relations of the Primitive Streak, and the Formation of the Posterior End of the Embryo in Chelonia, together with Remarks on the Nature of meroblastic Ova in Vertebrates,*" 1896.

*Popular Science Monthly, December, 1909.*

**Mohrenheim**, Joseph Jacob, Freiherr von. An Austrian surgeon, 1799— . Professor of surgery in St. Petersburg.

*Trigonum deltoideopectorale. Fossa infraclavicularis.*

**Moll**, Jacob Antonius. A Dutch oculist and physician in Utrecht, 1849— .

*Glandulæ ciliares. Musculus subtarsalis; tensor palati.*

**Mondino** (Mundinus) (Raimondo da Luzzi). A famous physician and a celebrated anatomist of the 14th century. In 1316 professor of medicine in the University of Bologna, where he died in 1326. He was one of the first of the moderns to dissect human bodies.

*Anathomia, Pavia, 1478, in-fol.*

*Biography: The Mondino myth, by Lewis Stephen Pilcher, in Med. Lib., vol. 4, pp. 311-331, with figures, 1906. See also p. 344, same number; also vol. 1, p. 1, 1903.*

**Monro**, Alexander (Monro Primus). A celebrated Scottish physician and teacher of anatomy, 1687(97?)—1767. In 1719 he began giving private lectures and demonstrations in anatomy. In 1721 he was appointed professor of anatomy at the Edinburgh University which he held until 1759, when he resigned to be succeeded by his son, Alexander Monro (Secundus). Another son, Donald, became a military surgeon and an eminent practitioner in London.

*Anatomy of the human bones and nerves, Edinburgh, 1726, in-8°. Essay on comparative anatomy, London, 1744.*

*Foramen interventriculare. Glandula concreta. Linea. Sulcus hypothalamicus.*

*Biography: Richardson—Disciples of Æsculapius, vol. 2, pp. 425-438, with portrait.*

**Monro**, Alexander (Monro Secundus) (1733-1817). Son of the preceding and his successor in the chair of medicine, anatomy and surgery in the University of Edinburgh, 1759-1801.

*A System of Anatomy and Physiology, with the comparative anatomy of animals, dedicated to Monro Secundus, Edinburgh, 1795. A description of all the bursæ mucosæ of the human body, London, 1788, in-fol. Three treatises on the brain, the eye, and the ear. Edinburgh, 1797, in-4°.*

*Biography: Medical Library and Historical Journal, vol. 5, pp. 84-85, 1907.*

**Monro, Alexander (Monro Tertius)** (1773-1859). Son of the preceding and his successor in the chair of anatomy, surgery and medicine in the University of Edinburgh, 1801-1846. The three Monros held sway in the University of Edinburgh from 1721-1846, or a period of 125 years.

**Montgomery, Thomas Harrison, Jr.** An American zoologist, 1873-1912. He studied at the University of Berlin with Waldeyer, O. Hertwig, Schulze and others, and received his Ph. D. in 1894, at the age of 21. He taught in the University of Pennsylvania from 1898-1903. He was then called to Texas as professor of zoology and remained there until 1908, when he returned to Pennsylvania as professor of zoology. During the last two years of his life he designed and completed a zoological institute. His published essays deal chiefly with the habits, and development of spiders and with cytology, though he had wide interests ranging the whole field of zoology. He was co-editor of the *Journal of Morphology*, 1903-1908.

*Biography: Science, N. S., vol. 38, no. 971, pp. 207-214, 1913.*

**Montgomery, William Fetherston.** An Irish physician and obstetrician in Dublin, 1797-1859.

*Glandula areolaris.* Tubercles of = papular elevations formed by M.'s Glands.

**Morand, Sauveur François.** A French surgeon in Paris, 1697-1773.

*Foramen cæcum. Hippocampus minor. Calcar avis.*

**Morgagni, Giovanni Battisti.** An Italian anatomist and pathologist, 1682-1771. Regarded as the founder of pathological anatomy. He acted as prosector to Valsalva, whom he succeeded as demonstrator. Professor of anatomy in Padua, 1715-. His most famous work is:

*De sedibus et causis morborum per anatomen indagatis libri V, Venice, 1761.*

He verified all the important discoveries of his contemporaries. He is also the author of numerous works dealing with anatomical questions, a list of which may be found in the *Bio. Med.*

*Biography: Med. Lib., vol. 4, p. 41, 1906; Richardson — Disciples of Æsculapius, vol. 1, pp. 283-301, 1901. Med. Lib., vol. 1, p. 270, 1903.*

Numerous anatomical structures are associated with the name of Morgagni.

*Appendix testis.* Cartilage of = in larynx. *Caruncle of* = middle lobe of prostate. *Columna rectalis.* *Concha nasalis su-*

*perior. Crypt. Foramen caecum. Fossa naviculare urethræ. Frenulum valvulæ coli. Glandulæ urethrales. Globules of = beneath crystalline lens. Humor of = in crystalline lens. Hydatid of = appendix testis; appendix vesiculosus. Lacuna urethralis. Liquor = humor. Nodulus valvulæ semilunaris. Retinaculum. Sinus rectalis = Utriculus masculinus. Spheres. Bulbus olfactorius. Valve. Ventriculus laryngis.*

**Morton, Samuel George.** An American craniologist, paleontologist and anatomist in Philadelphia, 1799-1851.

*Crania Americana, 1839. Crania Ægyptiaca, 1844. Illustrations of pulmonary consumption, 1834.*

**Mueller, Heinrich.** A German anatomist, 1820-1864. Professor of anatomy in Würzburg.

*Arteriæ helicinæ penis. M. Compressor lentis. Fibræ circulares musc. ciliaris. Musculus orbitalis. Trigonum.*

**Mueller, Hermann Franz.** A German histologist, 1866-1898. Known for Mueller's Fluid, a tissue fixative.

**Mueller, Johannes Peter.** A German anatomist and physiologist, 1801-1858. He became known as one of the most distinguished physiologists of Germany, and gained a wide reputation as an embryologist and naturalist. Privat-docent in the university at Bonn in 1824. In 1826 he became extraordinary professor of physiology in the same university, and professor in 1830. From 1833-1858 he filled, with distinction, the chair of anatomy and physiology at the University of Berlin. Founder of the *Archiv für Anatomie, Physiologie und wissenschaftliche Medicin*, Berlin, 1834-

*Handbuch der Physiologie des Menschen, 1834-1840. Untersuchungen über die Eingeweide der Fische, Berlin, 1845. De glandularum secernentium earumque prima formatione in homine atque animalibus, Leipzig, 1830.*

*Canal or duct of = Ductus parureterius primordialis. Capsule of = Capsula glomeruli.*

*Biography: Ency. Brit.; N. & P., Bd. II, p. 370; W. B. Platt, Johannes Müller, A University Teacher. Bull. Johns Hopkins Hospital, vol. 7, p. 16, 1896. Pop. Sci. Monthly, LXXII, No. 6, June, 1908.*

**Mundinus.** See **Mondino.**

**Munro.** See **Monro.**

**Muys, Weijer Willem (1682-1744).** Born in Steenwyk. Student of Bidloo. In 1709 professor of mathematics; 1712, also medicine, and in

1720 the subject of chemistry was added, in Franeker. He was the first to give a scientific description of the fibrillar structure of the muscle fiber.

*Investigatio fabricæ, quæ in partib. musculos compenentib. exstat. 1738, in-4°.*

**Naboth, Martin** (1675–1721). A Leipzig physician and anatomist. He described the glands of the neck of the uterus, also called Nabothian follicles, eggs, ova or ovules; they are minute retention cysts resulting from the closure of the openings of the uterine glands.

**Nägeli, Carl.** A German botanist, 1817–1891. Known for his important observations on cell structure. Said to have been the first to have observed cell division.

**Needham, John Tuberville.** An English ecclesiastic who is noted for his microscopic observations (1713–1781). He visited Buffon in Paris. Became a member of the Royal Society of London, 1747.

*Microscopical discoveries, London, 1745.*

**Needham, Walter.** An English physician, —1691, who described the placenta and foetal blood vessels; and recognized the nature of the parotid duct.

*Disquisitio anatomica de formato foetu, London, 1667, in-8°.*

**Nélaton, Auguste.** A Parisian surgeon, 1807–1873.

*Linea. M. spincter ani superior.*

**Neubauer, Johann Ernst.** German anatomist, 1742–1777. Professor of anatomy and surgery in Giessen.

*Descr. Anat. arteriæ innominatæ et thyroideæ imæ, 1772.*  
*Arteria thyroidea ima.*

**Nishikawa, T.** A Japanese zoologist, 1874–1909. He was for a number of years an assistant to Dr. Kishinouyé in the Imperial Fisheries Bureau in Tokyo. He is noted for his studies on pearl fisheries, and the method of secreting pearls from the oyster mantle. The publications of Nishikawa include important contributions to our knowledge of Japanese fishes, structural, systematic and embryological. He is especially noted for his studies on the development of the frilled shark, *Chlamydoselachus anguineus*.

**Nuck**, Anton. A Dutch anatomist and physician, 1650–1692. He practiced medicine in La Haye and in Leyden where he was professor of anatomy and surgery, and became president of the college of surgeons.

*De vasis aquosis oculi, Leyden, 1685, in-12°.* *De ducti salivari novo, Leyden, 1686, in-12°.* *Adenographia curiosa, et uteri foeminae anatome nova, Leyden, 1692.*

Canal or diverticulum of = *Processus vaginalis peritonæi.*

**Nuhn**, Anton. A German anatomist at Heidelberg, 1814–1889. Professor of anatomy at Heidelberg.

*Chirurgisch-Anatomische Tafeln, Mannheim, folio.*

*Glandula lingualis anterior. Ligamentum patellæ.*

**Oehl**, Eusebio. An Italian anatomist, 1827–1903.

*Stratum lucidum (epidermis). Mm. contractores chordæ vaginæ.*

**Oellacher**, Josef. A German anatomist, 1842–1892. Studied in Würzburg, with von Kölliker, and became his demonstrator in 1864–65. In 1870 prosector in Innsbruck. In 1872 professor of embryology and histology, which he held until his death in 1892. He is the author of several contributions to embryology.

*Biography: Anatomischer Anzeiger, Bd. 7, p. 556, 1892.*

**Oken**, Lorenz. German physiologist, 1779–1851. Shares with Goethe the vertebral theory of the skull.

*Programm ueber die Bedeutung der Schaedelknochen, Bamberg, 1807, in-8°.* *Lehrbuch der Naturphilosophie, Jena, 1831.* *Lehrbuch der Zoologie, Leipzig, 1815–1816, 2 vols.*

*Body of = Wolfian body.*

**Oppel**, Albert. A German anatomist and histologist, 1863–1915. Practiced medicine in Tuebingen, Berlin and München. In 1888–1891 assistant in the anatomical institute in München; 1891 he was called to Freiburg as prosector at the anatomical institute; 1894 ausordl. professor. At this time he was considering the plan of a large work on comparative microscopic anatomy of the vertebrates. In pursuance of this object he worked at the zoological station in Triest, and in the laboratories in München and Stuttgart. In 1907 he was called to Halle as chief assistant to W. Roux in the anatomical institute.

*Lehrbuch der vergleichenden mikroskopischen Anatomie der Wirbelthiere, Bd. I–VIII, Jena, 1896–1914.*

*Biography: Anat. Anz., Bd. 48, no. 16, pp. 414–415, 1915.*

**Oribasius of Pergamus** (326–403 A. D.). Friend and physician of the emperor Julian. Primarily a compiler, he improved on the work of Galen. He gave a description of the salivary glands, not given by Galen,

and is said to have been the first to describe the membrana tympani. The first Greek edition of Oribasius was published in Paris in 1556. Some of the writings of Oribasius are lost.

*Haller-Bibliotheca Anatomica, Tome I, p. 113. Tome II, p. 739, 1774.*

**Owen, Sir Richard.** An English anatomist and paleontologist, 1804–1892. Born at Lancaster, England. Assistant curator of the Hunterian museum; 1834 professor of comparative anatomy at St. Bartholomew's Hospital; Hunterian professor of the same subject at the Royal College of Surgeons, 1836; Superintendent of the natural history department in the British Museum, 1856. A voluminous writer on comparative anatomy and paleontology.

*Palaeontology; or a systematic summary of extinct animals and their geological relations, Edinburgh, 1860. Archtype and homologies of the vertebrate skeleton, London, 1847. On the anatomy of vertebrates, vols. 1–3, London, 1866–1868, in-8°. Odontography; or a treatise on the comparative anatomy of the teeth, London, 1840–1845.*

*Biography: Life of Sir Richard Owen, by his grandson, 2 vols., 1894. Hay-Bibliography and catalogue of fossil vertebrates, Bull. 179, U. S. Geol. Surv., pp. 185–192, 1902 (list of titles). Sir Richard Owen; his life and works, by C. W. G. Rohrer. Bull. Johns Hopkins Hospital, vol. 22, pp. 133–139, 1911.*

**Paaw (Pavius), Pierre.** Born at Amsterdam, 1564–1617. Studied anatomy at the University of Rostock; visited Padua and studied with Fabricius ab Aquapendente. Professor of anatomy and botany in Leyden, 1589–1617, where he was superintendent of the anatomical theater. He was especially noted for his knowledge of osteology.

*Primitiæ anatomicæ de humani corporis ossibus, Leyden, 1615, in-4°.*

**Pacchioni, Antoine.** A celebrated Italian anatomist, born in Regio, Lombardy, 1665–1726. Studied in Rome with Malpighi in 1689, and became the friend of Lancisi. Physician in Tivoli and Rome and one of the foremost anatomists of his time. Discovered the arachnoid bodies which bear his name, known as the glands of Pacchioni.

*Dissertatio epistolaris de glandulis conglobatis duræ meningis humanæ, indeque ortis lymphaticis ad piam meningem productis. Rome, 1705, in-8°.*

*Foveolæ granulares. Granula arachnoidica.*

*Biography: Haller-Bibliotheca Anatomica, Tome II, p. 1, 1776.*

**Pacini, Filippo.** An Italian anatomist in Florence, 1812–1883. Professor of descriptive and artistic anatomy, then of topographic

anatomy and histology, 1847-1883, in Florence. He redescribed the corpuscles of Vater, and wrote a good description of the retina.

*Nuove ricerche microscop. s. tessitura int. della retina, Bologna, 1845. Sulla scoperta di Monneret dei pretesi muscoli delle valvole semilun. del cuore, Florence, 1850.*

*Corpusculum lamellosum. (Pacini, Vateri).*

**Pagel, Julius Leopold.** A German physician and medical historian, 1851-1912. Born at Pohnow in Pomerania, of Jewish parents. He studied medicine in the University of Berlin where he was associated with Helmholtz, Dubois-Reymond, Virchow, Hirsch and Traube. His doctor's thesis was a historical study: "*Geschichte der Göttinger Medizinischen Schule im 18 Jahrhundert, 1875.*" In 1891 he began teaching medical history at the University of Berlin, received a professorship in 1898 which he retained until his death. Pagel has been very active in the production of works on medical history; especially to be noted is the 3 volume work: "*Handbuch der Geschichte der Medizin,*" with Neuberger and Puschmann, 1902-05. "*Biographisches Lexikon hervorragender Aertze des 19 Jahrhunderts,*" 1903. "*Einführung in die Geschichte der Medizin,*" 1897 and 1915.

**Pander, Heinrich-Christian von.** A German embryologist and paleontologist, 1794-1865. Pander and von Baer were associated as friends and fellow students under Döllinger at Würzburg, and it was partly through von Baer's influence that Pander began his studies on development. His ample private means made it possible for him to bear the expenses of illustrating his work. In St. Petersburg, 1823-27; 1842-65. His work on the fossil fishes of the Devonian is of the best type. He confirmed Wolff's theory of the germ layers.

*Beitraege zur Entwicklungsgeschichte des Huehnechens im Eie. Würzburg, 1817 (handsomely illustrated), 10 pl. fol. Dissertatio inaug. sistens historiam metamorphoses, quam ovum incubat. priorib. 5 dieb. subit., Würzburg, 1817 (unillustrated), in-8°. Ueber die Placodermen des devonischen Systems. St. Petersburg, 1857, in-4°.*

*Nucleus of = nerve cells beneath the thalamus.*

*Biography: Locy, Biology and its Makers, p. 218; Carus-Geschichte der Zoologie, p. 621; Hay-Bibliography and catalogue of fossil vertebrates, Bull. 179, U. S. Geol. Surv., p. 193.*

**Panizza, Bartolommeo.** An Italian anatomist, 1785-1867. A friend of Mascagni and Bufalini; student of Atti, Cairoli, Volpi, Scarpa, Monteggia, Palletta; with Scarpa, in 1814, in Pavia; 1817, professor of

anatomy in Pavia. Known for his studies in comparative anatomy, especially on the vascular system of the crocodile.

*Foramen Panizzae* = communication between two blood vessels in crocodile.

**Pansch, Adolph.** A German anatomist, 1841–1887. Prosector in Kiel, 1865; 1866 privat docent; professor extraordinary.

*De sulcis et gyris in cereb. simiar. et hom.*, 1866. *Modell des menschl. Grosshirns*, Kiel, 1878. *Die Furchen und Wülste am Grosshirn des Menschen*, Berlin, 1879. *Beitraege z. Morphologie des Grosshirns der Säugethiere*, Leipzig, 1879. *Grundzüge der Anatomie des Menschen*, Berlin, 1881.

*Fissure of* = from central fissure to occipital lobe.

**Paracelsus,** (Aureolus-Theophrastus-Bombastus-von Hohenheim). A Swiss physician, 1490 (91 or 93)–1541. Born at Einsiedeln, in the canton Schwyz, Switzerland, near Zürich, the son of a physician. Professor of medicine and city physician at Basel, 1527–1528, when he was forced to resign because he did not teach Galen, but attempted to introduce new methods of teaching. He was one of the first to attempt to break away from the traditional methods of learning and teaching, but his efforts attained no success during his lifetime.

*Opera omnia medico-chymico-chirurgica*, Geneva, 1658, 3 vols., in-fol.

*Haeser*, Bd. II, p. 71, gives a full account of Paracelsus with full bibliography. *Haller-Bibliotheca Anatomica*, Tome I, pp. 158, 739, 1774.

**Paré, Ambroise.** An eminent French surgeon, 1510–1590. One of the first surgeons to break away from traditional methods. While in Paris he visited Sylvius de Boë, the anatomist. Paré was a man much honored by the royalty. He contributed the following to anatomy:

*Anatomie universelle du corporis humani*, comp. Par A. Paré, 1561.

*Biography: Richardson—Disciples of Æsculapius*, vol. 1, pp. 176–192, 1901. *Haller-Bibliotheca anatomica*, Tome I, p. 197, 1774.

**Parker, Thomas Jeffries.** An English zoölogist, 1850–1897. He was born in London, the eldest son of William Kitchen Parker, F. R. S., the renowned comparative osteologist. Parker received his early training at the Royal School of Mines, 1868–1871. Became Science Master at the Bramham College. In 1872 he returned to London at the request of Huxley as Demonstrator in Biology in the Royal College of Science and he held this post until, in 1880, he was appointed to the professorship of



Biology at the University of Otago, Dunedin, New Zealand. With Professor W. A. Haswell, the author of a general textbook of elementary zoology issued in two volumes. He is the author of some 40 separate contributions to zoology and embryology.

*Structure and Development of Apteryx, Cranial Osteology, Classification and Phylogeny of the Dinornithidæ.*

*Biography: Anatomischer Anzeiger, Bd. 14, pp. 301-304, 1898.*

**Parker, William Kitchen.** An English zoologist and comparative osteologist, 1823-1890. Studied at Kings College, 1844-46; elected fellow of the Royal Society 1865; Hunterian professor at Royal College of Surgeons, 1873. Member of numerous scientific societies.

*Mammalian Descent, Hunterian Lectures for 1884. A Monograph on the Structure and Development of the Shoulder Girdle and Sternum in the Vertebrates, 1868, London. On the Structure and Development of the Skull in Sharks and Skates —; — in the Sturgeons; — in Lepidosteus osseous; — in the Salmon, Studies in the Philosophical Transactions of the Royal Society of London, 1873-1883.*

*Biography: A Memoir of William Kitchen Parker, Smithsonian Report, 1890, pp. 771-774; reprinted from Nature, vol. 42, pp. 297-299, 1890.*

**Paul of Aegina** (Paulos von Aigina). A physician in Alexandria, Greek eclectic and compiler, 625-690 A. D. He was one of the last of the Alexandrian school. Of his "Epitome of Medicine," in seven books (Venice, 1528, *Greek*, in folio; Basel, 1532, *Latin*, in folio; *Arabic* and *English*) his sixth book was the standard work on surgery up to the time of Albucasis.

**Pecquet, Jean.** A French physician (1622-1674), born in Dieppe, and doctor in the faculty of medicine in Montpellier, in 1647. Observed and described the thoracic duct in man and mammals; he also discovered the receptaculum chyli.

*Experimenta nova anatomica, quibus incognitum hactenus chyli receptaculum, et ab eo per thoracem in ramos usque subclavios vasa lactea deteguntur, Paris, 1651, in-12°.*

*Cisterna chyli. Ductus thoracicus. Cistern. Duct. Reservoir. Canalis.*

**Pelops**, of Smyrna, was a Greek physician who is supposed to have been the teacher of Galen.

**Peremeschko**, Peter Iwanowitsch. A Russian anatomist, 1833-1894. Born in Dorf Rybotin. Studied in Kiew, 1854, University of

Kasan, 1863; in Germany, 1868, at which date he became docent in histology at Kasan; soon afterwards professor of histology at the Waldimir University in Kiew; in 1870 ord. professor. His publications relate to microscopy and histology.

**Petit, Antoine.** A French surgeon and anatomist, 1718–1794. He succeeded Ferrein in the chair of anatomy at the Jardin du Roi. His writings are not regarded as important.

**Petit, François-Pourfour du.** A French physician, 1664–1741. Studied anatomy with Duverney. He studied especially the anatomy of the eye and the mechanics of vision. He has left some desultory writings on the subject.

*Spatia zonularia. Sinus of Valsalva.*

**Petit, Jean-Louis.** A French surgeon in Paris, 1674–1760. Member of the Royal Society of London.

*Trigonum lumbale.*

**Peyer, Johann Conrad.** A noted Swiss anatomist, born at Schaffhausen, 1653–1712. Professor of rhetoric, logic and physics at Schaffhausen. Studied with Duverney in Paris. Discovered the glands of the small intestine, known as Peyer's patches.

*Exercitatio anatomico-medica de glandulis intestinorum, earumque usu et affectionibus, Schaffhausen, 1677.*

*Noduli lymphatici solitarii. Noduli lymphatici aggregati.*

**Peyligk, Johannes.** A jurist of Leipzig, who, in 1499, published his "Philosophie Naturalis," in folio; which contains the figures of separate organs of the body besides one large figure showing internal anatomy of head, thorax and abdomen.

*Biography: Locy, Wm. A., 1911, Anatomical Illustration before Vesalius, Journ. of Morphol., vol. 22, no. 4, pp. 961–962, figs. 6–7–8.*

**Physick, Philip Syng.** An American surgeon and teacher of anatomy in Philadelphia, 1768–1837. A student of John Hunter. Professor of surgery and anatomy at the University of Pennsylvania, 1805–18. He described the diverticula of the rectum, 1836.

**Piccolomini, Archangelo.** An Italian physician, born at Ferrara, 1626–. He practiced medicine and taught anatomy in Rome. He

recognized the separation of the cerebrum into white and grey substance; and that the aorta did not pierce the diaphragm.

*Anatomicæ praelectiones explicantes mirificam corporis humani fabricam, Rome, 1586, in-fol.*

**Pinel, Philippe.** A French physician, 1755–1826. Student of Barthez, whose philosophical ideas he developed into his famous analytical method. Pinel is known as the “Descartes of Medicine.” He first studied theology, but in his thirtieth year he began the study of medicine at Toulouse and Montpellier. He then went to Paris, where he pursued his studies in poverty. Later he came to be recognized and, after holding important practicing positions, he became professor of pathology in the École de Paris. He is said to have suggested to Bichat the idea of distinguishing the different tissues. His analysis is the most complete prior to that of Bichat. Pinel distinguished fevers of the stomach, intestine, mucosa, glands and nerves, and stated that a proper diagnosis depended on an exact knowledge of the tissue affected. He differentiated the mucosa, the serous membranes, cellular tissue, the parenchyma, muscle, skin, etc.

*Nosographie philosophique ou la Méthode de l'analyse appliquée à la médecine. Paris, 1789, in 2 vols.; 1803, in 3 vols.*

*Biography: R. Semelaigne: Aliénistes et philanthropes. Les Pinel et les Tuke. Paris, 1912, in-8°.*

**Pirogoff (Pirogrov), Nicolaï Ivanovitch.** A Russian surgeon and anatomist, 1810–1881. Professor of anatomy and surgery at L'Académie médico-chirurgicale. Especially noted for his large work on topographic anatomy based on the cross-section method. He founded an anatomical institute in St. Petersburg.

*Anatome topographica, sectionibus per corpus humanum congelatum, triplici directione ductis illustrata. Petropoli, 1852–1859, in 5 vols.*

**Pliny the Roman naturalist**—the Elder (23–79 A. D.) Caius Plinius Secundus was born at Novum Comum (Como). Pliny was an industrious compiler, but he was not, like Aristotle, a man of original research. Of his many works the *Naturalis Historia* in thirty-seven books has alone been preserved, and in a nearly complete state. This voluminous treatise professes to be an encyclopaedia of Roman knowledge, mainly based on the researches and speculations of the Greeks.

**Poirier, Paul-Julien.** A French surgeon and anatomist, 1853–1907.

*Traité d'anatomie humaine, Paris, 1899, in 5 vols., 8°.*  
*Line of = from nasofrontal angle to a little above lambda.*

**Pollard**, Henry Bargman. An English zoologist, 1868–1896. Pollard was one of the most promising young men in comparative anatomy, as exemplified by his contributions on the comparative anatomy of Ganoid, Siluroid and Marsipobranch fishes. During the six years he devoted to the cultivation of the science he accomplished much of lasting value. He was drowned at Dover in the 28th year of his life.

**Pouchet**, Georges. A French comparative anatomist, 1833–1894. Born in Rouen, where he studied natural history and medicine. In 1865 assistant in the natural history museum; 1879–1894, professor of comparative anatomy. Director of the zoological station connected with the museum.

*Memoire sur l'encephale des Edentes, Paris, 1868.*

**Portal**, Antoine, Baron. A French physician and anatomist in Paris, 1742–1832. Professor of medicine (anatomy and surgery) in the Royal College of France, 1772; professor of human anatomy at the Jardin du Roi, 1776, as successor to Antoine Petit; 1788, physician to the king. The author of an important work on the history of anatomy and surgery.

*Histoire de l'anatomie et de la chirurgie, Paris, 6 tomes, 1770–1773, in-8°. Töply speaks of this as a very important work.*

He has written also a large number of other memoirs listed in the *Biographie Médicale*.

*M. Capsularis subbrachialis.*

**Poupart**, François. A French anatomist and surgeon in Paris, 1616–1708. Known on account of his description of the ligament in his *Chirurgie complète, Paris, 1695, in-12°.*

*Poupart's ligament = Ligamentum inguinale.*

*Biography: Haller-Bibliotheca Anatomica, Tome I, p. 765, 1774.*

**Power**, John Hutch. An Irish surgeon, 1806–1863. Known in Dublin as an eminent surgical anatomist. Author of an important work on the *Nervus opticus*.

**Praxagoras** of Cos (335 B. C.) was the first to distinguish arteries from veins. His book on anatomy is lost, but his work is preserved in the writings of Galen.

**Prentiss**, Charles William. An American anatomist, 1874–1915. In 1901 instructor of anatomy at the Harvard Medical School. Later

studied with Bethe in Strassburg. Taught zoology in Western Reserve University and in the University of Washington. In 1909 assistant professor of anatomy Northwestern Medical School, Chicago; 1913 professor of microscopic anatomy. Author of several studies on nervous anatomy and an important Text-book of Embryology, which appeared some six months before his death.

*Biography: Science, n. s. vol. 42, no. 1075, p. 178, 1915.*

**Prevost, J. L.** He was the first to describe (with J. B. Dumas) segmentation in detail, 1824.

*Prevost et Dumas—Mem. sur le développement du poulet dans l'oeuf. Ann. sc. nat., 1826. De la generation dans les mammifères et des premiers indices du développement de l'embryon. Ann. sc. nat., T. III, 1824, p. 113. Mémoire sur les phénomènes qui accompagnent la contraction de la fibre musculaire, Paris, 1823, in-8°, 1 pl.*

**Prochaska, Georg.** An anatomist and physiologist in Vienna, 1749–1820. Professor of anatomy and ophthalmology in Prague, 1778–91; also physiology, 1786–91; professor of physiology in Vienna, 1791–1819. Said to be the first to distinguish between motor and sensory roots of spinal nerves.

*De Carne musc. Vienna, 1778.*

*De structura nervorum, Vienna, 1779, 7 pl.*

**Prussak, Alexander.** A Russian otologist, 1839–1897.

*Fibres of = bounding Shrapnell's membrane. Pouch or space of = Recessus membranæ tympani superior.*

**Purkinje, Johannes Evangelista von.** Bohemian anatomist, physiologist and microscopist, 1787–1869. Professor of physiology and pathology at the University of Breslau, 1823–1850; professor of physiology at the University of Prague. He discovered nucleus of ovum which he called "germinal vesicle;" and discovered the lacunæ and canaliculi.

*Symbolæ ad ovi avium historiam ante incubationem, Leipzig, 1830, in-4°, 2 pl.*

*Cells or corpuscles of = large pyriform nerve cells. Fibres of = beneath endocardium. Figures. Images. Network. Stratum gangliosum cerebelli.*

**Pythagoras** of Samos (ca 575–500 B. C.) is the author of one of the earliest anatomical writings of the ancient Greeks.

**Quain, Jones.** An English anatomist, 1796–1865. Born in Mallow, Ireland. Educated in Dublin and Paris. Lecturer on anatomy and

physiology in Aldersgate School of Medicine, London, 1829-31; professor of same 1831-36. His brother, Richard Quain, was an eminent physician and surgeon.

*The Muscles of the Human Body, London, 1836.*

*Elements of Anatomy, 4th edition, 1837, 11th edition, 1914.*

**Quatrefages de Bréau, Jean-Louis-Armand de.** A French zoologist and anthropologist, 1810-1892. Professor of anthropology in the Paris Museum of Natural History.

*Rapport sur le progrès de l'anthropologie, 1867. Les pygmées, 1887. L'espèce humaine, 1877. Histoire générale des races humaines, 1889. Crania ethnica, 1875-79.*

*Angle of = parietal angle.*

**Queckett, John.** An English physician, 1816-1861. He published one of the early textbooks on microscopic anatomy.

*Lectures on Histology, 1850-52.*

**Rainey, George.** An English anatomist, 1801-1884.

*Corpuscles or tubes of = Miescher's tubes.*

**Ranke, Hans Rudolph.** A Dutch anatomist, 1849-1887.

*Angle of = one of the cephalic angles.*

**Rathke, Martin Heinrick.** A German anatomist and embryologist, 1793-1860. Born in Danzig, studied in Göttingen, 1814-1817; 1829-35 professor of anatomy in Dorpat; 1835-60 as professor of zoology and anatomy at Königsburg as successor to K. E. von Baer. (See Carus-Geschichte der Zoologie, p. 625).

*Abhandlung zur Bildungs- und Entwicklungsgeschichte des Menschen und der Thiere, Leipzig, 1834, in-4°, 7 pl. Entwicklungsgeschichte der Natter (Coluber natrix), 1839. Die Entwicklungsgeschichte der Schildkröten, 1848. Untersuchungen über den Körperbau und die Entwicklung der Krokodile, 1866.*

*Columns of = at anterior end of chorda dorsalis. Diverticulum, pouch or pocket of = an ectodermic pouch in bucco-pharyngeal region of embryo. Folds of = folds of mesoderm which complete the rectum. Cartilage.*

**Rau (Ravius), Johannes Jacobus.** A Dutch surgeon and anatomist, 1668-1721. Studied in Leyden, then under Duverney and Méry in Paris. Professor of anatomy, medicine and surgery at Leyden, 1713-1717, as successor to Bidloo.

*De origine et generatione dentium, Leyden, 1694, in-4°.*

*Epistolæ duæ de septo scroti ad Ruyschium, Amsterdam, 1699, in-4°.*

*Processus gracilis anterior (of malleus).*

**Réaumur**, René-Antoine, Ferchault de. A French zoologist, 1683–1757. He was admitted to the Academy of Science in Paris at the age of twenty-five. He was a many-sided investigator and became proficient in entomology, general zoology and physics. He issued a large work on insects: “*Mémoires pour servir à l’histoire naturelle des insectes*,” 6 vols., Paris, 1734–1742. He created a large zoological museum in Paris which later became the property of the Jardin des Plantes.

*Sur les diverses reproductions qui se font dans les écrivisses, les omars, etc., et entre autres sur celles de leurs jambes.* Paris, 1714.

*Biography: Mémoires Acad. sc. Hist., 1757, p. 201.*

**Recklinghausen**, Friedrich Daniel von. A German pathologist and histologist known for his investigations on the lymphatic system, 1833–1910. Born at Gütersloh in Westphalia; studied at the Universities of Bonn, Würzburg and Berlin; worked with Rudolf Virchow and Cohnheim in pathology, then visited the Universities of Vienna, Rome and Paris. In 1858–64 he was assistant at the Berlin Pathological Institute. At the age of 32 he was called to Königsberg as ordentlicher professor of pathology; later at Strassburg as director of the pathological institute.

*Die Lymphgefäße und ihre Beziehung zum Bindegewebe,* Berlin, 1862.

*Canals of Recklinghausen.*

*Biography: Anatomischer Anzeiger, Bd. 37, pp. 509–511, 1910.*

**Redi**, Francesco of Arezzo, 1626–1697. He confirmed Harvey’s observations on lower animals, and made embryological studies of insects.

*Esperienze intorno alla generazione degli insetti,* Florence, 1668, in-4°.

**Reichert**, Karl Bogislaus. A German anatomist, 1811–1883. Student of Karl Ernst von Baer, Joh. Mueller, R. Froriep; 1843–53, professor of human and comparative anatomy in Dorpat; 1853–58, in Breslau as successor of Th. v. Siebold, director of the physiological institute; 1858– in Müllers place in Berlin. Designed a microtome.

*De embryonum arcub. sic dictis branchialib.* Berlin, 1836–48. *Vgl. Entwicklungsgeschichte des Kopfes der nachten Amphibien, Königsburg, 1838, in-4°.* *Das Entwicklungsleben im Wirbelthierreiche,* 1840. *Der Bau des menschlichen Gehirns,* Leipzig, 1859.

*Cartilago. Macula cribrosa quarta. Membrana. Recessus ventriculi.*

**Reil**, Johann Christian. A German physician, and student of anatomy, 1759–1813. He wrote one of the most important treatises on the brain which appeared in the 18th century. Professor of medicine in

Halle and Berlin. A monument was erected to Reil in the city of Halle in 1915.

*Exercitationum anatomicarum fasciculus primus de structura nervorum, Halle, 1796, in fol.*

*Insula. Substantia innominata. Taniola. Trigonum lemnisci. Ansa peduncularis. Sulcus circularis.*

**Reisch, Gregor.** Published in 1504 in his "*Margarita Philosophica*," an illustration showing the internal anatomy of the thorax and abdomen.

**Reisseisen, François Daniel.** A German anatomist in Berlin, 1773-1828.

*Muscles of = microscopic smooth muscle fibres in the smallest bronchial tubes.*

**Reissner, Ernst.** A German anatomist in Berlin and Dörsat, 1824-1878. Professor of anatomy in Dorpat.

*De auris internæ formatione, Dorpat, 1851.*

*Crista. Membrana vestibularis. Fibre.*

**Remak, Ernst Julius.** A German neurologist, son of Robert Remak, 1849-1911.

**Remak, Robert.** A neurologist in Posen, 1815-65. Student of Johannes Mueller; assistant to Schönlein.

*Observationes anatomicæ et microscopicæ de systematis nervosi structura, Berol, 1838, in-4°. Ueber ein selbständiges Darm-Nervensystems, Berlin, 1847. Untersuchungen ueber die Entwicklung der Wirbelthiere, Berlin, 1855, fol.*

*Fibræ. Ganglia. Nuclear division. Plexus.*

**Retzius, Andreas Adolf.** A Swedish anatomist, father of Gustav Retzius, 1796-1860. Professor of anatomy and anthropology in Stockholm, 1840-60.

*Ueber d. Zusammenhang der Pars thorac. n. sympath. mit den Wurzeln der Spinalnerven, 1832.*

*Om lefverns finare bygnad, 1844.*

*Apertura lateralis ventriculi. Cavum praeperitoneale. Eminencia medialis (trigoni). Fascia. Funiculus separans. Gyrus ambiens; — antcentralis; — intralimbus; — olfactorius lat. et med.; — semilunaris. Ligamentum fundiforme. Membrana pericapsularis. Pallium inferius. Pars opercularis. Venæ.*

**Rhazes (Razes) (Abu Bekr Muhammed ben Zakerijja er-Razi).** An Arabian anatomist, 923. (The dates of his death are given as: 923,



932, 940, 966, 1070, 1085). The first Arabic textbook of anatomy, based on the works of Hippocrates and Galen, was written by Rhazes and entitled: *Kitaab al tib al Mansury* (liber medicinæ mansuricus).

**Ribes, François.** French physician, 1800–1864.

*Ganglion of* = uppermost sympathetic ganglion.

**Ridley, Humphrey.** An English anatomist in London, 1653–1708. He attributed muscular contraction to the flow of nervous fluids in the muscles. He described the restiform body.

*Anatomy of the brain, containing its mechanism and physiologie, London, 1695, in-8°.*

*Sinus circularis.*

**Riedel, Bernhard Moritz Carl Ludwig.** A German surgeon, 1846–

*Lobe of* = a tongue-like process from the lower margin of the liver, external to the gall-bladder.

**Riolan, Jean.** A French anatomist (1577–1657); son of Jean Riolan, a physician of Paris who was Dean of the faculty of medicine, 1586. Jean Riolan, Junior, was made royal professor of anatomy and botany in 1613, and was first physician to Marie de Medicis. He was one of the first in France to emphasize the practical importance of anatomy. Known for his study of the myology and anatomy of the foetus.

*Anatomica, seu anthropographia, Paris, 1618.*

*Opuscula anatomica nova, London, 1649.*

*Bones of* = in petro-occipital suture. *Arch of* = mesocolon. *Bouquet of* = at styloid process. *Musculus ciliaris.*

**Rivinus (Bachmann), Augustus Quirinus.** A German physiologist in Leipzig, 1652–1723. Born in Leipzig, son of André Rivinus, a physician. Known in anatomy through the discovery of the ducts of the sub-lingual glands. Professor of physiology and botany in Leipzig. He was a celebrated botanist.

*Dissertationes medicæ, Leipzig, 1710, in-4°.* Complete works, with biography (Leipzig, 1727).

*Canals or ducts of* = ducts of the sublingual glands. *Foramen.* *Glands of* = sublingual. *Membrane of* = Shrapnell's membrane. *Notch or segment of* = in sulcus tympanicus.

**Rivinus, Johann.** A German physician in Leipzig, 1692–1725. Son of preceding.

*De auditus vitiiis, (Disserta) 1717.*

*Incisura tympanica.*

**Roby, Joseph.** An American anatomist, 1807–1860. Fellow student of Oliver Wendell Holmes at Brown University, 1828. Professor of anatomy and surgery at Bowdoin College, 1837–43; anatomy and physiology at University of Maryland, 1843–60.

**Rolando, Luigi.** An Italian anatomist in Turin, 1773–1831. Professor of anatomy at the University of Turin; physician to King Victor Emmanuel of Sardinia; professor of medicine in Sassari; known for his studies on the brain and spinal cord.

*Saggio sopra la vera struttura del cervello, dell' uomo e degli animali, e sopra le funzioni del systema nervoso, Sassari, 1809, in-8°.*  
*Humani corporis fabrica ac functionum analysis adumbrata, Turin, 1817, in-4°.*

*Angle.* Area of = precentral and postcentral convolutions. *Cells.* Column of = on medulla oblongata. *Fissure of* = sulcus centralis. *Substantia gelatinosa.* *Operculum.* *Points.* *Tuberculum.*

**Roller, Christian Friedrich Wilhelm.** A German alienist, 1802–1878.

*Nucleus lateralis anterior, medius et posterior. Nucleus eminentiæ medialis. Radix ascendens N. glossopharyngei.*

**Rollet, Alexander.** An Austrian physiologist, 1834–1903.

*Stroma of* = colorless stroma of erythrocytes.

**Rösel von Rosenhof, August Johann.** A German zoölogist, 1705–1759. Noted for his beautifully illustrated works on natural history. His most important work is perhaps: “*Historia naturalis ranarum nostratium,*” which appeared in 1758 with an introduction by Albrecht von Haller and is spoken of as an artistic masterpiece. He had the plates nearly finished for a large work on lizards, but did not live to finish it.

**Rosenmueller, Johann Christian.** A German anatomist in Leipzig. 1771–1820. 1794 prosector; 1802–20 professor of anatomy and surgery in Leipzig. An anatomist of many interests, he has written a number of important treatises which have advanced the science of anatomy.

*Organorum lachrymalium partiumque externarum oculi humani descriptio anatomica, Leipzig, 1797, in-4°.* *Quaedam de ovarii embryonum et foetuum humanorum, Leipzig, 1802, in-4°.* *Chirurgisch-anatomische Abbildungen für Aertze und Wundaertze, Weimar, 1805–12, in fol., 3 pts.* *Handbuch der Anatomie, Leipzig, 1808, in-8°.* He also translated the work of Alexander Monro on the bursæ of the human body, into German.

*Fossa. Glandula. Gl. lacrimalis inferior. M. sterno-abdominalis. Organon. Valvula. Parovarium. Epoöphoron. Recessus pharyngeus. Plica lacrimalis.*

**Rosenthal**, Friedrich Christian. A German anatomist, 1780–1829. Professor of anatomy and physiology in Greifswald, 1820. A student of Reil.

*Canalis. Ganglion. Venæ ascendentes. Venæ basalis. V. velata.*

**Roser**, Wilhelm. A German surgeon, 1817–1888. Professor of surgery in Marburg, Zürich and Berlin.

*Handbuch der anatomischen Chirurgie, 1883.  
Chirurgisch anatomisches Vademecum.  
Linea Roser-Nélaton.*

**Rudbeck**, Olaüs. A Swedish physician and anatomist, 1630–1702. Professor of medicine in the University of Upsala, 1660–90. He discovered the lymphatics in 1651, after dissecting some 400 animals. These had since the time of Aselli been confused with the lacteals. He was also the founder of an anatomical theater at Upsala. Thomas Bartholin also claimed the discovery of the lymphatics.

*Dissertatio de circulatione sanguinis, Westeras, 1652.  
Exercitatio anatomica exhibens ductus novos hepaticos aquosos, et vasa glandularum serosa, cum figuris aeneis et observationibus anatomicis. Westeras, 1653, in-4°.*

**Rudolphi**, Karl Asmund. A German parasitologist, 1771–1832. Studied medicine in Greifswald, 1790, and there presented a thesis on intestinal worms for his doctor's thesis. In 1797 he was a. o. professor in Greifswald; 1808 ord. professor of medicine; 1810 professor of anatomy at Berlin, where he founded an anatomical-zoological museum. He was one of the most successful teachers of zoology in his time. He was the teacher of Johannes Mueller. His writings deal chiefly with parasitology.

**Ruedinger**, Nikolaus. A German anatomist in München, 1832–1896. Professor of anatomy in München, 1881–96. Student of Henle, F. Arnold, Th. W. L. Bischoff; in 1855 prosector to Bischoff.

*Atlas des peripheren Nervensystems, 2nd ed., 1872. Atlas des menschlichen Gehörorganes, 1866–75. Topographisch chirurgische Anatomie des Menschen, 1872–78. Beiträge zur Anatomie des Verdauungsapparates, Stuttgart, 1879. Beiträge zur Morphologie des Gaumensegels, Stuttgart, 1879. Anatomie der Hirn und Rückenmarksnerven, Muenchen, 1868–72. Ueber die Verbreitung*

*des Sympathicus, Muenchen, 1863. Kursus der topograph. Anatomie, 4th Aufl. 1899.*

*Ligg. sacculorum. Trigonum caroticum; — olfactorium. Canales semicirculares.*

*Biography: Anatomischer Anzeiger, vol. 13, pp. 219–232, 1897.*

**Rufus** (Rhuphos) of Ephesus, was a celebrated Greek physician who lived during the reign of Trajan (53–117 A. D.). He divided nerves into motor and sensory; was the first to describe the optic chiasma; said to have recognized the Fallopian tubes in the sheep; formulated an anatomical terminology.

*Biography: Anatomische Werke des Rhuphos und Galenos, Erste deutsche Uebersetzung von Robert Ritter v. Töply. Anatomische Hefte, Bd. 25, erste Abth., pp. 351–398, 1904.*

**Rusconi, Mauro.** An Italian biologist in Pavia, 1776–1849.

*Descrizione anatomica degli organi della circolazione delle salamandre aquatiche. Pavia, 1817, in-4, pl. Amours des salamandres aquatiques, et développement du têtard de ces salamandres depuis l'oeuf jusqu'à l'animal parfait. Milan, 1821, in-4°, 5 pl. Développement de la grenouille commune, depuis le moment de sa naissance jusqu'à son état parfait. Milan, 1826, in-4°, 4 pl.*

*Blastoporus. Coelenteron.*

**Rütimeyer, Ludwig.** A German comparative anatomist and paleontologist, 1825–1895. Extraordinariat at the University of Bern, 1853. Ordinarius for zoology and comparative anatomy at Basel, 1855. Co-founder of the "Archives für Anthropologie," and the editor of the "Crania Helvetica." His paleontological studies are of the highest type. It was under the influence of Rütimeyer's "Odontographie," that Kowalevsky completed his memoirs on fossil mammals.

*Beitrag zur Kenntniss der fossilen Pferde und zu einer vergleichenden Odontographie der Hufthiere im Allgemeinen, Basel, 1863. Ueber die Herkunft unserer Thierwelt, Eine Zoogeographische Skizze. Basel and Geneva, 1867.*

*Biography: Anatomischer Anzeiger, Bd. 11, pp. 508–512 1896. Autobiographie, in "Kleine Schriften," Basel, 1898.*

**Ruysch, Frederick.** A Dutch anatomist of distinction, 1638–1731. Born at The Hague. Professor of anatomy and botany at Amsterdam, where he formed the first anatomical museum. He was a student of Swammerdam from whom he learned the injection method which he used extensively in the formation of his museum. He discovered the bronchial artery; the internal plate of the choroid.

*Dilucidatio vaskularum in vasis lymphaticis et lacteis. Accesserunt quaedam observationes anatomicæ rariores. La Haye, 1665;*

*in-12°*. *Opera omnia anatomico-medico-chirurgica*. Amsterdam, 1721-1737, in 5 vol., *in-4°*.

*Membrana (Lamina choriopilloris)*. Muscle of = *in fundus uteri*. Tube of = *in nasal septum in foetus*. *Vv. vorticosae*.

**Ryder**, James Adams. An American embryologist, 1852-95. Professor of comparative embryology at the University of Pennsylvania, 1886. Said to have invented a microtome. Known for his studies in the embryology of fishes.

*Development of the silver gar (Belone longirostris), with observations on the genesis of the blood in embryo fishes and a comparison of fish ova with those of other vertebrates*. Bull. U. S. Fish Comm., 1881. *A contribution to the embryography of osseous fishes, with special reference to the development of the cod (Gadus morrhua)*. Ann. Rep. U. S. Fish Comm., 1884. *The development of the Toad-fish, 1886*.

**Sabatier**, Raphael-Bienvenu. A French anatomist and surgeon in Paris, 1732-1811. Professor of anatomy in the Royal College of Surgery. He contributed a number of important memoirs on surgery and anatomy to the Academy of Science.

*Traité d'anatomie, Paris, 1764, 3 vols., in-8°*.

**Saint-George**. See Valette St. George.

**Saint-Hilaire**. See Geoffroy-Saint-Hilaire.

**Sandifort**, Édouard. A German physician who succeeded Albinus as professor of anatomy and surgery at Leyden. He increased the anatomical museum, developing the pathological collections, especially.

*Tabulae intestini duodeni, Ludg. Batav., 1780, in-4°*.

**Santorini**, Giovanni Domenico. An Italian anatomist in Venice, 1681-1737. Student of Bellini. Professor of anatomy, and a physician in Venice, 1703-

*Observationes anatomicæ, Venice, 1724, in-4°*.

*Cartilago corniculata. Concha nasalis suprema. Corpusculum. Ductus pancreaticus accessorius. Emissaria. Fissura. Incisura ant. aures;* — *cartilaginis meatus acust. ext.;* — *intragica. Labyrinthus pudendovesicalis. Ligamentum. Musculus aryteno-epiglott. major;* — *corrugator posticus;* — *depressor urethrae mul.;* — *incisura helices;* — *occipitalis minor;* — *risorius;* — *socius (pyram. nasi);* — *triangularis coccygis. Papilla duodeni. Plexus gangliiformis n. maxillaris inf.;* — *labyrinthicus (prostaticus);* — *vesicalis. Tuberculum corniculatum. Vena parietalis.*

*Biography: Haller-Bibliotheca Anatomica, Tome II, p. 23, 590, 632, 714, 1776.*

**Sappey**, Marie-Philibert-Constant. A French anatomist, 1810-1896. Professor of anatomy in Paris, 1859-68.

*Anatomie, Physiologie, Pathologie des Vaisseaux lymphatiques chez l'homme et les vertebres*, 1874.

*Traité d'anatomie descriptive*, Paris, 1876-79.

*Sur la conformation et la structure de l'uretré de l'homme*, Paris, 1854.

*Ansa. Cornu frontale; — occipitale; — sphenoidale. Fossa parietalis. Fossula suprapyramidalis. Glandulae ciliares. Musculus occipitostaphylinus; — sphincter praeputii. Nates. Nucleus ruber. Papillae corolliformes; — hemisphaeria linguae. Pars lacrimalis palp.; — ocularis palp.; — palpebralis gl. lacr. Sulcus orbitopalpeb. sup. Testes (Colliculi inferiores).*

*Biography: Anatomischer Anzeiger, Bd. 12, 159, 1896.*

**Scarpa**, Antonio. An Italian anatomist, 1747 (46 or 52)-1832. A student of Morgagni; 1772-83, professor of anatomy and surgery at the University of Modena; 1783-1803, professor of anatomy in Pavia, also surgery, 1787-1812. Physician to Napoleon. His work on the eighth nerve (1794) and the splanchnic nerves, in general exactness of description and beauty of engraving, has never been surpassed. He discovered the ganglion oticum.

*Anatomicæ disquisitiones de auditu et olfactu*, Pavia, 1780, in-fol. *Tabulæ neurologicæ ad illustrandum historiam cardiacaorum nervorum*, Pavia, 1794, in-fol. *De Structura fenestræ rotundæ auris et de tympano secundario anatomicæ observationes*. Modena, 1772, in-8°.

*Arteria nasopalatina. Canales semicirculares. Ganglion vestibulare; — temporale. Fascia cremasterica; — intercolumnaris. Intumescencia ganglioformis. Ligamentum triangulare. Liquor. Nervus nasopalatinus. Sinus ellipticus. Sulcus nasopalatinus. Trigonum. Zona.*

*Biography: Haller — Bibliotheca Anatomica, Tome, II, p. 696, 1776. Richardson — Disciples of Æsculapius, vol. 1, pp. 143-157, with portrait, 1901.*

**Schaarschmidt**, Augustus. A German surgeon and anatomist born at Halle, 1720-1791. Professor of anatomy and surgery at the University of Butzow, where he also established a school for obstetricians. His works on anatomy have long been considered classics.

*Osteologische Tabellen*, Halle, 1746, in-8°. *Myologische Tabellen*, Halle, 1747, in-8°. *Splanchnologische Tabellen*, Halle, 1748, in-8°. *Neurologische Tabellen*, Halle, 1750, in-8°. *Adenologische Tabellen*, Berlin, 1751, in-8°. *Syndesmologische Tabellen*, Berlin, 1752, in-8°.

**Schacher**, Polycarp Gottlieb. German physician, 1674-1737.

*Ganglion ciliare.*

**Schani**, Zadeh Mehemmed Atallah. A Turkish physician who studied medicine in Italy and who published in 1820 a work in Turkish, the title of which translated into German reads:

*Spiegel der Körper in der Anatomie der Glieder des Menschen, 1820, in folio, with 56 copper plates.*

**Scheiner**, Christopher. A German physician and mathematician, born in Wald, in Swabia, 1595. He wrote the first exact description of the relations of the optic nerve to the eyeball.

*Oculus, seu fundamentum opticum, in quo radius visualis eruitur, Muhldorf, 1619, in-4°.*

**Scheuchzer**, Johann-Jacob. A German physician, 1672–1733. Born in Zurich. He made a large collection of petrifications and wrote Sir Hans Sloan, of London, a letter relating the discovery of the skeleton of a fossil man, later shown by Cuvier to be a giant salamander.

*Piscium vindiciæ et querulæ, Zurich, 1708, in-4°.*

**Schleiden**, Matthias Jacob. A German botanist, 1804–1881. Professor of botany at Jena, Dorpat and Frankfurt-am-Main. He shares with Theodor Schwann the discovery of the cellular nature of plant and animal tissues.

*Beitraege zur Phytogenesis, Müller's Archiv, Berlin, 1838, pp. 137–176, 2 pl. (Later republished by the Sydenham Society, 1847.)*

**Schlemm**, Friedrich. A German anatomist, 1795–1858. Professor of anatomy in Berlin, 1833.

*Arteriar. capitis superf. icon nova. Berlin, 1830, fol.*  
*Bemerkungen ueber d. angebl. Ohrknoten (Ganglion oticum), 1831.*

*Canalis. Ganglion rhachitico-coccygeum. Ligamentum. Sinus venosa scleræ.*

**Schmidel**, Casimir Christophe. A German botanist and anatomist, 1718–1792. Professor of anatomy and botany, in Erlangen, 1743. He is the author of several anatomical memoirs.

*Dissertatio de nervo intercostali, Erlangen, 1754, in-4°.*

**Schneider**, Conrad Viktor. A German anatomist, 1614 (10)–1680. Professor at Wittenberg and physician to the Elector of Saxony. The discoverer of the Schneiderian membrane; described the lining membranes of the nasal fossae, the pituitary membrane, and nerves distributed

to it. One of the first to deny the Galenic idea that catarrhal discharges were from the brain.

*Dissertatio de osse cribriformi, et sensu ac organo odoratus et morbis ad utrumque spectantibus, Wittenberg, 1655, in-12°. Dissertationes anatomicae de partibus, quas vocant, principalioribus, corde, capite, hepate, cum observationibus a danatomiâ, necnon ad artem medendi pertinentibus, Wittenberg, 1543, in-8°.*

Membrane of = pituitary membrane — Schneiderian membrane.

**Schreger, Christian Heinrich Theodor.** A Danish anatomist, 1768–1833.

*Versuch einer vergleichenden Anatomie des Auges und der Thraenenorgane, Leipzig, 1810, in-8°.*

Line of = concentric lines caused by a bending of the dentinal tubules near the surface of the dentine.

**Schroeder van der Kolk, Jacob Ludow Conrad.** A Dutch anatomist, 1797–1862. He is known especially for his study of the structure of the brain and spinal cord, and his contributions to embryology.

*Waarnemingen over het maaksel van de menschelijke Placenta en over haren bloeds-omloop, Amsterdam, 1851.*

**Schultze, Bernard Sigismund.** A German gynecologist, 1827–  
Son of Karl August Sigismund Schulze.

*Superfetation und Superfecundation. (Jenaische Zeit. f. wissenschaft. Medizin, 1866.)*

Folds of = a fold of amniotic membrane at point of insertion of cord into placenta.

**Schultze, Carl August Sigismund.** A German anatomist, 1795–1877. Student of J. Fr. Meckel, and his prosector, 1818–21; professor of anatomy and physiology in Freiburg; 1831–68 in Greifswald, also director of the institute (also comp. anat.)

*Systematisches Handbuch der vergleichenden Anatomie. Berlin, 1828, in-8°.*

**Schultze, Max Johann Sigismund.** A German anatomist, 1825–1874. Son, student and prosector of Karl August Sigismund Schultze; also with Johannes Mueller in Berlin. In 1854 professor at Halle; 1859–1874 professor of anatomy and director of the anatomical institute at Bonn. In 1865 he founded the "*Archiv für mikroskopische Anatomie*," of which he was the editor until 1874, when it was continued by his successor La Valette St. George and Waldeyer. Schultze was the author of a number of important zoological and anatomical memoirs, among



which may be especially mentioned his work on the structure of the retina.

*Zur Kenntniss der elektrischen Organe der Fische, Halle, 1858.*  
*Das Protoplasma der Rhizopoden und der Pflanzenzellen, Leipzig, 1863.* Ueber den gelben Fleck der Retina, Bonn, 1867.

Bundle of = comma tract. Cells of = olfactory cells. Tract of = bundle.

Biography: Gurlt-Hirsch; Burckhardt, *Geschichte der Zoologie, Leipzig, 1907.*

**Schulze, Johann Heinrich.** A German physician and anatomist, 1687–1744. Professor of anatomy at Altdorf, 1720, as successor to Heister. In 1732 professor of medicine, eloquence and antiquities in Halle.

*Historia medicinæ a rerum initio ad annum Romæ 535 deducta, Leipzig, 1728.*

*Dissertatio de musculis abdominis, Halle, 1736, in-4°.*

**Schurig, Martin.** A German physician. Received his doctorate at Erfurt in 1688, practiced in Dresden, where he died in 1733.

*Embryologia, hoc est infantis humani consideratio: partus præmaturus et serotinus; partus per vias insolitas; partus suppositus, Dresden, 1732, in-4°.*

**Schwann, Theodor.** A German anatomist, 1810–1882. Student of Johannes Müller at Bonn, and his prosector at Berlin. Professor of anatomy in Louvain, 1839; 1840–1880, professor of physiology and comparative anatomy in Lüttich. He shares with Schleiden the discovery and demonstration of the cellular nature of tissues, first published in 1839.

*Mikroskopische Untersuchungen ueber die Uebereinstimmung in der Struktur und dem Wachstum der Tiere und Pflanzen, Berlin, 1839.* Reprinted with the paper of Schleiden by the Sydenham Society in 1847.

Sheath of = neurilemma. White substance of = medullary substance.

**Schweigger-Seidel, Franz.** A German histologist, 1834–1871. He made in Halle, many important discoveries in the finer structure of the kidneys of man and mammals. He published his results in 1865.

**Seeley, Harry G.** An English paleontologist. One of the most voluminous contributors to the comparative anatomy and paleontology of the vertebrates. He published more than 150 contributions between 1859 and 1905, chiefly on the paleontology of the Permian and Triassic reptiles, especially of Germany and South Africa. Many of his contributions are of quarto size and are extensively illustrated. His studies

in these fields brought him world-wide fame as an investigator. His services as a teacher were none the less important. He was for many years an assistant in the British Museum of Natural History, and in 1876 was professor of geography and geology in Queen's College, London; later dean of the school. In 1896 he was professor of geology and mineralogy at King's College. He is the author of a popular account of the pterodactyls: *Dragons of the Air, London, 1901, in-8°*. His *Researches on the Structure, Organization and Classification of the Reptilia*, in ten parts, published in the Transactions of the Royal Society of London, 1888-1896, are the most valuable sources of information on the organization of the early Mesozoic and late Paleozoic reptiles, especially of South Africa.

*Geological Magazine, Decade, V, vol. IV, No. 516, June, 1901, with portrait and bibliography.*

**Seessel, Albert.** An American embryologist, 1850-1910. Born in Memphis, Tennessee. Studied in Yale University; then went to Germany where he was assistant to Wilhelm His, 1876-77. In New York as a practicing physician, specializing in nervous diseases. His name is known through his discovery of the diverticulum, known as Seessel's pocket, in the buccopharyngeal membrane.

*Zur Entwicklungsgeschichte der Vorderdarms, 1877.*

*Biography: Anatomischer Anzeiger, Bd. 38, p. 350, 1911.*

**Semper, Karl.** A German zoologist, 1832-1893. After studying zoology at Würzburg he traveled in the Philippines making zoological observations. On his return to Würzburg in 1869, he was elected professor of zoology and comparative anatomy. In 1889 he was director of the zoological-anatomical institute. Between 1862 and 1895 there appeared numerous contributions from the pen of Semper, on embryology, zoology and travel.

*Entwicklungsgeschichte der Ampullaria, . . . Utrecht, 1862.*

**Serres, Antoine-Étienne-Rénaud-Augustin.** A French physician in Paris, 1786-1868. Author of the centrifugal theory of development which he used to explain the development of monsters.

*Angle of = metafacial angle. Gingival glands.*

**Serveto, Miguel (Michael Servetus) (Servet).** A physician, priest and polemic, was born in 1511 at Tudela in Navarre; received his doctorate at the University of Padua; 1536 he practiced medicine in Paris, later in Vienna. He became involved in a religious controversy with various persons, notably Calvin; was twice condemned to death and

was finally burned at the stake on the 27th of October, 1553. In the fifteenth book of his work Serveto says that the blood passes through the lungs by means of the arteries and pulmonary veins. Calvin ordered that all copies of the writing of Servetus be destroyed. But a few copies have escaped.

*Christianismi restitutio, Vienna, 1553, in-8°.*

*Biography: Ency. Brit.; Bio. Med.; Johns Hopkins Hospital Bulletin, vol. 21, pp. 1-10, by Wm. Osler. Geschichte d. berühmten Spanischen Artztes Michaels Serveto, by J. L. v. Moshelm, Helmstädt, 1750.*

**Severino, Marco Aurelio** (Marcus Aurelius-Severinus). An Italian anatomist, 1580-1656. Professor of anatomy and medicine at Naples. One of the first scientific comparative anatomists.

*Historia anatomica, observatioque medica eviscerati hominis, Naples, 1629, in-4°.* *Zootomia democritea, id est anatome generalis totius animantium opificii, libris quinque distincta, Nuremberg, 1645, in-4°.*

**Sharpey, William.** An English anatomist and physiologist, 1802-1880. Teacher of physiology at University College, London. Professor of anatomy in Edinburgh; 1836-74 professor of anatomy and physiology as successor to Jones Quain.

*Elements of descriptive and practical anatomy for the use of students, London, 1828, (with Richard Quain).*

*Fibres of = connective tissue fibres by which the periosteum is attached to the underlying bone.*

**Sibson, Francis.** An English anatomist, 1814-1876.

*Aortic vestibule. Aponeurosis. Groove. Notch.*

**Siebold, Karl Theodor Ernst von.** A German zoölogist, 1804-1885. Studied in Berlin and Göttingen with Rudolphi and Blumenbach. Professor of zoölogy, comparative anatomy, veterinary medicine at Erlangen, 1840; in 1845 at Freiburg; 1850 at Breslau, and in 1853 at München. He was associated with Koelliker in founding the "*Zeitschrift für wissenschaftliche Zoölogie*," 1849.

*Lehrbuch der vergleichenden Anatomie der wirbellosen Tiere, Berlin, 1848.*

*Wahre Parthenogenesis bei Schmetterlingen und Bienen, Leipzig, 1861.*

**Skene, Alexander Johnston Chalmers.** An American gynecologist, 1838-1900.

*Glands of = paraurethral glands*

**Soemmering**, Samuel Thomas. One of the most able and most energetic anatomists of Germany, was born at Thorn, January 25, 1755. He is known as one of the founders of surgical anatomy. His great work was later revised by a number of German authors and became through the revision one of the most accurate and elaborate works published on the subject up to 1844. He was teacher of anatomy and surgery at the "Carolinum" in Kassel; 1784-97, professor of anatomy and physiology in Mainz; 1804-20 he lived in München and later in Frankfurt-am-Main, where he died in 1830, the 2nd of March.

*Vom Bau des menschlichen Koerpers, Frankfurt, 1791-96.*

*Ueber das Organ der Seele, Koenigsberg, 1796.*

*Tabulæ baseos encephali, Frankfurt, 1799, in-fol.*

*Fovea centralis. Substantia nigra. Gray substance. Ligament. Nerve. Macula lutea. Musculus curvator coccygis; — hyo-adenoides. Opisthenar. Papiliæ conicæ linguæ. Portio dura et mollis pars septimi. Sulcus suprafrontalis.*

*Biography: See Choulant, pp. 131-139.*

**Soemmering**, Wilhelm. A German physician, 1793-1871. Son of the preceding.

*De oculorum hominis, animaliumque sectione horizontali.*

*Goettingen, 1818, in large folio, 3 pl.*

*Abbildungen des Karpfengehirns, edited by Wm. S.*

**Soranus** of Ephesus, studied medicine at Alexandria, and lived during the reigns of the emperors Trajan and Hadrian. He distinguished himself by his researches on the female organs of generation. He appears to have dissected the human subject; and this appears to be one reason why his descriptions of these parts are more copious and more accurate than those of Galen.

**Spallanzani**, Lazare. A noted traveler, teacher and writer of Italy, 1729-1799. In 1754 professor of logic, metaphysics and Greek at the University of Reggio; 1760 at Modena; 1768 professor of natural history at Pavia, to which he was called by Maria Theresa. He augmented the museum at Pavia greatly by the results of numerous journeys. He pointed out experimentally that the spermatozoa are essential to fertilization, and he made numerous physiological observations of great value.

*Dell' azione del cuore ne' vasi sanguini, buove osservazioni, Modena, 1768, in-8°.*

*Dissertazioni di fisica animale e vegetabile, Modena, 1780.*

**Spiegel**, Andrien Van der (Spigelius, Spiege, Spigel, Spiegel). A Belgian anatomist, 1578-1625. Born at Bruxelles. Professor of anat-

omy and surgery at Padua, 1605–25. Studied under Casserio and Fabricius ab Aquapendente.

*De humani corporis fabrica libri X, Venice, 1627, in fol. De Formato foetu liber, Padua, 1626, in-fol.*

*Opera quæ exstant omnia, Amsterdam, 1645, 3 vols. in folio.*

*Linea semilunaris. Lobus caudatus (hepatis).*

**Spitzka**, Edward Charles. An American physician known for his contributions to neurology, 1852–1914. Born in New York City on November 10th (1852). He began the study of medicine at the University of the City of New York, from which he graduated in 1873. After obtaining his degree he studied at Leipzig and Vienna, under Billroth, Meynert, Arlt and Schenk. He served as an assistant in embryology at the University of Vienna from 1874–75. He practiced in New York City and was prominent in scientific circles, being editor of the *American Journal of Neurology and Psychiatry* (1881–4). He is the author of numerous papers of a medical and neurological nature, devoting many years to the study of mammalian brains.

*Bundle of = from oculomotor nucleus. Marginal tract.*

*Biography: Journal of Nervous and Mental Diseases, vol. 41, no. 4, 1914.*

**Spix**, Johannes Baptist. A German anatomist, 1781–1826.

*Geschichte und Beurtheilung aller Systeme in der Zoologie, nach ihrer Entwicklung, von Aristoteles bis auf gegenwaertige Zeit. Nuremberg, 1811, in-8°. Cephalogenesis, vive capitis ossei structura, formatio et significatio per omnes animalium classes, familias, genera ac actates, digesta, atque tabulis illustrata, legesque simul psychologiæ, cranioscopiæ et physionomiæ inde derivatae. Munich, 1815, in-fol., 18 pl.*

*Lingula of the mandible.*

**Spurzheim**, Johann Caspar. A Prussian phrenologist, born at Longwich near Treves, Prussia, December 31st, 1776; and died in Boston, U. S. A., on November 10th, 1832. He was associated with Gall in the promulgation of phrenology.

*Gall and Spurzheim-Recherches sur le système nerveux en général et sur celui du cerveau en particulier, Paris, 1809, in-4°. Reissued in 4 vols. in 1810–20 with atlas containing 100 plates in folio, translated into German. Spurzheim-Observations sur la folie, ou sur les dérangements des fonctions morales et intellectuelles de l'homme, Paris, 1818.*

**Stannius**, Hermann Friedrich. A German zoölogist, 1808–1883. Student of Johannes Mueller. Professor in Rostock. Known for his investigations of the activity of the atrium, ventricle and sinus of the frog's heart.

**Stensen** (Steno, Sténon, Stenone, Stenonis, Stenonius), Niels (Nicolaus). A Danish anatomist, physician, professor, exhorter, priest, 1638–1686. Lived in Florence, Copenhagen, Hanover, Münster, Hamburg. Student of Thomas Bartholin, 1656 in Copenhagen; of Blasius in Amsterdam. While with Blasius, and an inmate of his house, Stensen discovered the *ductus parotideus* in the head of a sheep.

*Observationes anatomicæ, quibus varia oris, oculorum et narium vasa describuntur, novique salivæ, lacrymarum et mucii fontes deteguntur, et novum Bilsii de lymphæ motu et usu commentum examinatur et rejicitur, Leyden, 1662, in-12°.*

*Observationum anatomicarum de musculis et glandulis specimen, cum epistolis de anatomia rajæ et vitelli in intestino pulli transitu, Copenhagen, 1664, in-4°.* *De solido intra solidum naturaliter contento, dissertationis prodromus, Florence, 1669, in-4°.* *The first anatomical discussion of the nature of fossil sharks. Discours sur l'anatomie du cerveau, Paris, 1669, in-12°.*

*Ductus parotideus. Foramen incisivum. Plexus. Venæ vorticosa.*

*Biography: Bio. Med.; Niels Stensen, by W. S. Miller; in Bull. Johns Hopkins Hospital, vol. 25, no. 276, pp. 44–51, with bibliography and portraits of Niels Stensen, Thomas Bartholin and Gerardus Blasius. Plenkens-W. = Der Däne, Niels Stensen, Freiburg, 1884.*

**Stephanus.** See Estienne, Charles.

**Stilling, Benedict.** A German surgeon and anatomist, 1810–1879. A surgeon and anatomist in Cassel and Vienna. Known for his researches on the brain and spinal cord.

*Untersuchungen üb. d. Textur des Rückenmarks, Leipzig, 1842. Untersuchungen üb. d. Bau u. d. Verrichtungen des Gehirns.*

*Canalis hyaloideus. Cells or column = Clarks column. Fleece, Gelatinous substance. Nucleus. Raphe. Sinus rhomboidalis.*

**Stocquart, Alfred.** A Belgian anatomist, 1855–1897. Professor of anatomy in Brussels. He published numerous contributions on the anomalies of the blood vessels, muscles and nerves.

**Stöhr, Philipp.** A German anatomist, 1849–1911. Born in Würzburg. Studied with Kölliker. Assistant to J. Budge in Greifswald at the anatomical institute, 1874. Prosector in comparative anatomy, histology and embryology at Würzburg, 1877; in 1882 prosector in human anatomy at the newly erected anatomical institute in Würzburg. Prosector extraord. of topographic anatomy 1884–1889; professor ord. at the anatomical institute in Zurich; 1897 professor of anatomy at Würzburg as successor to Kölliker. Known for his studies in histology and embryology.

*Lehrbuch der Histologie, 1887; 14th Aufl. 1910. Ueber den Conus arteriosus der Selachier, Chimären, und Ganoiden, 1876. Beiträge zur mikroskopischen Anatomie des menschlichen Körpers.*

a). *Retina*; b). *Ueber die Glashaut des Haarbalges*; c.). *Ueber den feineren Bau der respiratorischen Nasenschleimhaut*. Würzburg, 1885. *A Textbook of Histology, arranged upon an embryological basis*, by Frederick T. Lewis and Philipp Stöhr, 2nd edition. Philadelphia, 1914, in-8°.

*Biography*: Philipp Stöhr. *Anat. Anz.*, Bd. 40, pp. 551-556, with bibliography, 1912.

**Susruta.** An East Indian surgeon, wrote a medical work in the 6th century B. C. which has certain passages relating to human osteology, as his works have been interpreted by Charaka in his Compendium.

**Swammerdam, Jan.** A Dutch naturalist and anatomist, born in Amsterdam, 1637-1680. He discussed the value of the lymphatics, was the first to perfect the method on injecting blood vessels, which he did especially well in the blood vessels of the uterus. His student Ruysch carried the method to a great degree of perfection. He was especially interested in the anatomy of insects.

*Biblia naturæ, sive historia insectorum in certas classes redacta, nec non exemplis et anatomico variorum animalculorum examine aeneisque tabulis illustrata*, Leipzig, 1752, in fol. Edited by Boerhaave.

**Swedenborg (Svedberg), Emanuel.** A Swedish philosopher, 1688-1772. Studied in the University of Upsala, in London, in Holland, and later elsewhere, when he devoted some time to the problem of discovering the nature of the soul and spirit by means of anatomical studies. He was well acquainted with the anatomical literature of his day, and sought the assistance of the best teachers of his time. His inquiries resulted in the production of one of the most remarkable anatomical treatises of his century. His anatomical studies seemed to have led up to his theological interests, to which he devoted the remainder of his life.

*Œconomia Regni Animalis, De Fibri, de Tunica Arachnoidea, et de Morbis Fibrarum agit; anatomice, physice, et philosophice perlustrata*, London, 1740-1741. Republished later (1744-1745) in two volumes, and in 1847 a third volume was published by J. J. G. Wilkinson, in London. In this work he anticipated the "theory of epigenesis," later announced by Wolff (1759); made many new and important observations on the brain, which were in advance of the statements of Willis, Boerhaave, Descartes and Vieussens. He later published his observations on the brain in a separate work, "De Cerebro," which was later translated in 1882-1887, into English by Doctor Rudolf L. Tafel, and published in two volumes with the title: "The Brain considered anatomically, physiologically, and philosophically," 8°. I. The Cerebrum and its Parts. II. The Pituitary Gland, the Cerebellum and the Medulla oblongata. He is also the author of: *De Anima agit. De Periosteio et de Mam-*

*mis; De Generatione; De Partibus Genitalibus utriusque Sexus, et de Formatione Fætus in Utero agit.*

*Biography: Emanuel Swedenborg's Investigations in Natural Science and the Basis for his Statements concerning the Functions of the Brain, by Martin Ramström, University of Upsala, 1910. Emanuel Swedenborg, His Life, Teachings and Influence, by George Trobridge, London.*

**Syenesis** of Cyprus was, according to Aristotle (Hist. III, 2, 21), the first to discover the large blood vessels.

**Sylvius.** See **Boë.**

**Sylvius, Jacobus.** See **Dubois, Jacques.**

**Tarin, Pierre.** A French physician and encyclopedist in Paris, 1725–1761. He wrote an excellent history of anatomy. His writings deal chiefly with anatomy and physiology.

*Anthropotomie, ou l'Art de dissequer, Paris, 1750. Dictionnaire anatomique, suivi d'une bibliotheque anatomique et physiologique, Paris, 1753, in-4°. Osteographie, ou Description des os, Paris, 1753. Myographie, ou Description des muscles, Paris, 1753. Fascia dentata. Hiatus Fallopii. Fossa interpeduncularis. Substantia perforata posterior. Stria terminalis. Velum medullare posterius.*

**Teichmann, Ludwig.** A German histologist, 1825–1895. Professor in Göttingen, professor of anatomy in Krakau, 1868.

*Das Saugadersystem vom anat. Standpunkte, Leipzig, 1861. Biography: Anatomischer Anzeiger, Bd. II, p. 423.*

**Teichmeyer, Germain Frederic.** A German physician. In 1717 professor of experimental physics; later professor of anatomy, botany and surgery at Jena until 1746.

*Elementa anthropologiæ, seu theoriæ corporis humani, Jena, 1718, in-4°.*

**Tenon, Jacques-René.** A French surgeon and oculist in Paris, 1724–1816. First military surgeon in 1744, and later chief surgeon at Salpêtrière. He is the author of numerous surgical and anatomical memoirs.

*Memoires sur l'anatomie, la pathologie et la chirurgie, Paris, 1806, in-8°. Capsule. Fascia bulbi. Spatium interfasciale.*



**Terraneus**, Laurent. A physician in Turin, 1688–1714. To him it attributed the discovery of the glands of Cowper.

*De glandulis universim et speciatim ad urethram virilem novis, Turin, 1709, in-8°.*

**Thebesius**, Adam Christian. Born at Hirschberg in Silesia, 1686–1732. Described the blood vessels of the heart, and made numerous observations in pathological anatomy.

*Dissertatio de sanguinis circulo in corde, Leyden, 1708, in-8°.*  
*Foramina venarum minimarum (Thebesii). Valvula Thebesii.*

**Theile**, Freidrich Wilhelm. A German anatomist, 1801–1879. Professor of anatomy in Bern, 1834–54.

*Lehre von den Muskeln, 1841. De musculis rotatoribus dorsi, Bernæ, 1838.*

*Canal of* = above the pericardium. *Glands of* = in cystic ducts and in pelvis of gall bladder. *M. depressor vesicæ urinariæ; intertransversarius; — protractor ani. V. major cerebri. Vv. interossee communes antibrachii.*

**Thoma**, Richard. A German pathologist and histologist, 1847– . Inventor of a microtome. Studied in Heidelberg with Julius Arnold and Helmholtz. Became professor e. o. of pathology at Heidelberg and in 1884 professor ord. of general pathology and pathological anatomy at Dorpat. Since 1894 in Magdeburg.

*Ampulla of* = terminal expansion of interlobular artery in splenic pulp.

**Thomson**, Allen. A Scotch anatomist and embryologist, 1809–1882. Son of the surgeon, John Thomson. Studied in Edinburgh, where from 1831–1836 he studied anatomy and physiology with Sharpey. In 1839 he became professor of anatomy at Marishal College and at the University of Aberdeen; in 1841 teacher of anatomy at the extra-mural school in Edinburgh; 1848–1877 professor of anatomy at the University of Glasgow.

*Contribution to the history of the structure of the human ovum and embryo before the third week after conception. Description of some early ova. 1839.*

*Fascia of* = above the symphysis pubis.

**Tiedemann**, Frederick. A German zoologist and embryologist, 1781–1861. A student of Siebold; professor of zoology, human and comparative anatomy in Landshut, 1805; in Heidelberg also physiology,

1816-49. Was the first to show that the neural axis is composed of two folds.

*Anatomie und Bildungsgeschichte des Gehirns im Fœtus des Menschen, nebst einer vergleichenden Darstellung des Hirnbaues in den Thieren, Nuremberg, 1816, in-4°. Zoologie, Heidelberg, 1808-1814, in-8°, 3 vols. Anatomie des Fischherzens, Heidelberg, 1809, in-4°.*

*Glandula vestibularis major. Vesicle. Nerve of = in central artery of retina.*

**Todd, Robert Bentley.** An English physician, 1809-1860. Professor of physiology and of general and morbid anatomy in King's College, London; physician to the Western Dispensary, Fellow of the Royal College of Physician and Surgeons. He, with William Bowman, published a: "*Physiological Anatomy and Physiology of Man, Philadelphia, 1857, in-8°.*" Todd is the editor of the well-known "*The Cyclopaedia of Anatomy and Physiology, 1836-1859 in 5 vols. London, in-8°.*"

**Tomes, Sir John A.** An English dentist, 1815-1895.

*Dental Anatomy, 7th ed., 1910, edited and revised by his son Charles.*

*Fibrils of = processes from the odontoblasts. Granular layer of = outer less dense layer of dentine. Process of = fibrillar process around an enamel cell.*

**Topinard, Paul.** A French anthropologist, 1830-1912.

*L'Anthropologie, 1876. Elements d'Anthropologie générale, 1885.*

*Ophryspinal angle. Line of = between glabella and mental point.*

**Torre, Marcus Antonius della.** See Marcantonio.

**Toynbee, Joseph.** An English otologist, 1815-1866.

*Corneal corpuscles. M. tensor tympani.*

**Traube, Ludwig.** A German physician of Ratibon in Silesia, 1818-1876. The author of numerous works on experimental pathology.

*"Beitraege," Berlin, 1871-1878.*

*Space of = on chest.*

**Treitz, Wenzel.** An Austrian physician, 1819-1872.

*Arch of = in left superior colic artery. Recessus duodeno-jejunalis. Retroperitoneal hernia. Musculus suspensorius duodeni. Fossa subcœcalis.*

**Trembley, Abraham.** A French naturalist, 1700-1784, who is known for his studies on regeneration in fresh water Hydra.

**Treviranus, (Gottfried Reinhold.** A physician and teacher of Bremé, where he was born, 1776-1837. Known for his philosophical writings in biology.

*Biologie, oder Philosophie der lebenden Natur fuer Naturforscher und Aerzte, Göttingen, 1802-1821, in 6 vols., in 8°.*

**Troeltsch, Anton Friedrich.** A German otologist, 1829-1890.

*Corpuscles of = spaces in tympanum. Pockets or recesses of = folds in tympanum. Recessus membrani tympani.*

**Tuerck, Ludwig.** An Austrian neurologist, 1810-78.

*Tractus temporopontilis. Plasma cell. Fasciculus cerebrospinalis anterior.*

**Tyrrell, Frederick.** An English physician, 1797-1843.

*Fascia of = Denonvillier's aponeurosis.*

**Tyson, Edward.** An English anatomist, born at Summerset, 1649-1708. Professor of anatomy at the Royal College of Surgeons, London. Noted for his anthropological studies.

*Orang-Outang, sive Homo sylvestris; or the Anatomy of a Pygmie compared with that of a Monkey, an ape and a man, London, 1699, in 8°.*

*Glandulæ odoriferæ.*

*See Huxley, "Man's Place in Nature," for a discussion of Tyson's work.*

**Ursinus (Beer), Leonard.** A German physician, 1618-1664. Professor of botany at Leipzig, 1652, then physiology in 1656. He is the author of:

*De corporis humani proportione, Leipzig, 1643, in 4°.*

**Valentin, Gabriel Gustav.** A German physiologist, 1828-1883. Born at Breslau, where he studied under Purkinje, 1828-32. In 1836 he was professor of physiology at Bern, and worked here for forty-five years. For a few years he taught anatomy. Edited from 1836-43 the "Repertorium für Anatomie und Physiologie."

*Handbuch der Entwicklungsgeschichte des Menschen mit Vergleich. Rücksicht der Entwicklung der Säugethiere und Vögel. Berlin and Paris, 1835.*

**Valentini (Velentin), Michael Bernard.** A German anatomist, born at Giessen, 1657-1729. Professor of physics at the University of

Giessen; 1696 professor of medicine, which he held till his death in 1729. He is the author of numerous dissertations relating to medicine.

*Amphitheatrum zootomicum, Frankfurt, 1720, in fol.*  
*Corpuscles. Ganglion. Membrane of = Schwann's sheath.*

**Valette St. George, Adolf Freiherr von la.** A German anatomist, 1831-1911. For 50 years a teacher in the University of Bonn. From 1875-1907 as successor to Max Schultze he was director of the anatomical institute at Bonn, first associated with Leydig (to 1887) and then alone. In 1865 Max Schultze had founded the *Archiv für mikroskopische Anatomie*, which he edited up to 1874, when La Valette St. George assumed the editorship, which he held alone for many years, but was later associated with Waldeyer and O. Hertwig, who are now (since 1907) the editors of the journal.

*Die Spermatogenese bei den Säugetieren und dem Menschen.*  
*Bonn, 1898.*  
*Biography: Anatomischer Anzeiger, Bd. 38, p. 29, 1911.*

**Vallisnieri (Vallisnerius), Antonio.** An Italian physician and zoölogist, 1661-1730. Studied at Scandiano, Modena, Reggio and in Bologna, where he heard the lectures of Malpighi. Professor of medicine in Padua, 1700-1711. Body physician to the Pope at Rome as well as professor of medicine in Turin.

*Istoria della generazione dell' uomo, degli animali, se sia de' vermicelli spermatici, o della uova, con un trattato, nel fine, della sterilità e dei suoi remedi, Venice, 1721.*

**Valsalva, Antonio Maria.** An Italian anatomist born at Imola, 1666-1723. Professor of anatomy at the University of Bologna, 1707 (1697). A student of Malpighi. In editing the works of Morgagni he verified the anatomical statements on the cadaver, and verified the citations from the literature. He has written one of the most complete memoirs on the ear which has ever appeared.

*De aure humana tractatus, in quo integra ejusdem auris fabrica multis novis inventis et iconismis illustrata describitur, Bologna, 1704, in-4°.*

*Ligamentum auricularia. Sinus aortæ. Antrum mastoideum. Lamina basilaris. Taeniæ. Zona.*

**Valverde de Hamusco.** See **Amusco.**

**Van Gehuchten, Albert.** See **Gehuchten, Albert van.**

**Van Hoorne.** See **Hoorne.**

**Varolius** (Varoli) (Varolio), Costanzio (Constantio, Costanzo). An Italian anatomist born at Bologna, 1543-1575. Professor of anatomy and surgery at Bologna; professor in Rome, and physician to Pope Gregory XIII. Known for his work on the brain and nerves.

*De nervis opticis nonnullisque aliis præter communem opinionem in humano capite observatis epistola. Padua, 1573, in-8°.*  
*Pons varolii. Valvula coli.*

**Vater**, Abraham. A German anatomist and botanist, 1684-1751. Professor of anatomy in Wittenberg, 1719-37; 1737-46 professor of pathology; 1746-51 professor of therapeutics. He has published a great number of contributions to anatomy and botany among which may be mentioned:

*Dissertatio de æconomia sensuum ex speciali organorum sensoriorum et sigillatim ex papillarum nervearum textura mechanica demonstrata, Wittenberg, 1717, in-4°.*  
*Papilla duodeni. Corpusculum lamellosum. Fold of = in mucous membrane just above V.'s papilla.*

**Verduc**, Jean, Philippe. A French surgeon in Paris, in the 17th century.

*Nouvelle osteologie, avec le squelette du fœtus, Paris, 1690, in-8°.*

**Verga**, Andrea. An Italian psychiatrist and anatomist, 1811-1895. Clinical professor of psychiatry at Milan.

*Lachrymal groove. Ventricle of = space below the psalterium.*

**Verheyen**, Philippe. A Flemish anatomist, 1648-1710. He was born at Verbrouck. Professor of anatomy at the University of Louvain, 1689; of surgery in 1693. He occupies a distinguished place in the history of anatomy, and has been called the Vesalius of Belgium.

*Anatomia corporis humani, Louvain, 1693, in-4°.*  
*Venæ stellatæ.*

**Verneuil**, Aristide-Auguste. A French surgeon in Paris, 1823-1895.

*Collateral veins. Neuroma.*

**Vesalius**, Andreas (Vesal, André) (Wesele, Vesele). The great Flemish anatomist, founder of modern human descriptive anatomy, was born in Bruxelles, 1514-1564. He was the first author of a comprehensive and systematic view of human anatomy. He was descended from a family of learned physicians. His grandfather, Everard Vesalius,

was a scholar and a classic physician, known for his translations of parts of Hippocrates, Galen and Rhazes. The father of Andreas was apothecary to Margaret of Austria. Vesalius studied classics at the University of Louvain, and began the study (in Paris) of anatomy with Dubois and Günther von Andernach at the age of 14. In 1536 he went to Venice where he studied human anatomy with the utmost zeal, and before he was 22 years of age he was called to Padua to give public demonstrations in anatomy; after seven years he was called to Bologna and from there to Pisa. His large work in anatomy was heralded by the appearance, in 1538, of the *Tabulæ Anatomicae*, composed of six plates, and his large *De humani corporis fabrica*, appeared in 1542 (3), printed at Basle by John Oporinus. The plates which illustrate this splendid work were drawn, and possibly engraved, by John Stephan de Calcar, a student of Titian. In 1554 he was called to the court of Spain by Charles V, where he resided for some years, busy with his work as "Archiatrus," and in answering the criticisms brought against him as a plagiarist; it being stated that he had derived his work from Galen, Eustachius, Leonardo da Vinci and others. It is, however, well known that Vesalius was a diligent dissector and it is very certain that the dissections shown in his great work are his own. He died in a shipwreck on the 15th of October, 1564, on one of the Ionian islands, where a friendly goldsmith of Venice, recognizing the body of Vesalius, gave him a modest burial.

*Andreae Vesalii de corporis humani fabrica librorum epitome*, Basel, 1542, in-fol. *De humani corporis fabrica libri septimum*, Basel, 1543, in-fol. max. *Anatomicarum Gabrielis Fallopii observationum examen*, Madrid, 1561.

*Fibrocartilago interarticularis*. *Foramen Vesalii*. *Fundus vesicæ urinariae*. *Glandula Vesalii*. *Musculus aniscalptor*. *M. sedem attolens*. *Ossa Vesalii*. *Processus vermiformis cerebelli*. *Sinus corpus callosi*.

*Biography: Richardson — Disciples of Æsculapius, vol. 1, pp. 76-94, with portrait. Roth- Andreas Vesalius Bruxellensis, the edition of 1892, the standard source of knowledge of Vesalius and his times, contains bibliography, references to his different portraits, the resurrection bone, etc.*

**Vesling, Johann.** An Italian anatomist, 1598-1649. In 1632 professor of anatomy at Padua, soon afterwards director of the botanical gardens. He is said to have observed the development of the external organs of the human foetus.

*Syntagma anatomicum, publicis dissectionibus in auditorum usum aptatum*, Padua, 1641, in-8°.

*Linea media scroti*.

**Vicary, Thomas.** An English physician, 1490(1500?)-1562. He wrote one of the first English anatomical textbooks.

*The Anatomie of the bodie of men, 1548.*

**Vicq d'Azyr, Felix.** A Parisian anatomist, 1748-1794. The most brilliant predecessor to Cuvier. He was secretary to the Academy of Medicine in Paris, consulting physician to the queen, and successor to Buffon in the French Academy, 1788. He studied especially the structure of birds. Huxley said of him: "He may be considered as the founder of the modern science of anatomy."

*Système anatomique de l'Encyclopédie methodique, Paris, 1792-1832, 4 vols., in-4°, with atlas. Oeuvres de Vicq d'Azyr, Paris, 1805, 6 vol. in-8°.*

*Fasciculus thalamomamillaris. Centrum ovale. Centrum semiovale. Foramen cæcum. Line. Corpus nigrum. Foramen Vicq d'Azyri.*

**Vidus Vidius.** See Guido Guidi.

**Vieussens, Raymond de.** A French anatomist, 1641-1716. Physician in Montpellier and in Paris. He was noted for his constant application to the study of anatomy and in 1685 he was admitted to the Academy of Science as anatomist.

*Traité de la structure du coeur, Toulouse, 1715. Neurologia universalis, hoc est, omnium humani corporis nervorum simul ac cerebri, medullaeque spinalis descriptio anatomica, Lyon, 1685, in-fol. Novum vasorum corporis humani systema, Amsterdam, 1705, in-8°.*

*Nouvelles decouvertes sur le coeur. Toulouse, 1706.*

*Limbus fossae ovalis. Ansa subclavia. Centrum ovale. Foramina venarum minimarum. Plexus coeliacus. Annulus. Velum medullare anterius. Valvula. Innominate cardiac veins. Ventriculus septi pellucidi.*

**Vinci, Leonardo da.** See Leonardo da Vinci.

**Virchow, Rudolf Ludwig Karl.** A German pathologist and anthropologist, 1821-1902. Student and admirer of Johannes Mueller. Assistant in anatomy to Robert Froriep, whom he succeeded in 1846. In 1847 he founded the "*Archiv für pathologic Anatomie und Physiologie und für klinische Medizin,*" which in 1903 had attained to the 170th volume.

*Cellular Pathology (trans.), 1860, London. Über die Entwicklung des Schädelgrundes, Berlin, 1857.*

*Cellulae. Corpuscula Hassal-Virchowii. Glandula Virchowii. Ligamentum navitrapezium lat. Norma temporalis. Os epactale proprium. Pia mater Virchowii. Processus lemuriens. Spatium*

*Virchowii. Substantia intermedia. Sulcus popliteus. Tuberositas maxillo-malaris.*

*Biography: Rudolph Virchow, Smithsonian Rept., 1902, pp. 641-659. (Deutsche-Rundschau, December, 1902.)*

**Vogt, Karl.** A German biologist, born in Giessen, 1817-1895.

*Embryologie des Salmones. Hist. Nat. des poissons d'eau douce d'Europe centrale, Neuchatel, 1842. Untersuchungen über die Entwicklungsgeschichte des Geburtshelferkröte (Alytes obstetricans), Solothurn, 1842.*

**Voigt, Christian August.** An Austrian anatomist, 1809-1890.  
*Lines.*

**Volkman, Alfred Wilhelm.** A German physiologist, 1800-1877. Professor in Leipzig, Dorpat and Halle, known for his researches on the nervous system, the physiology of the eye, and the movement of the blood.

*“Die Selbständigkeit des sympathischen Nervensystems durch anatomische Untersuchungen nachgewiesen, Leipzig, 1842. Canales Volkmanni.*

**Von Kupffer, Karl Wilhelm.** See **Kupffer, Karl Wilhelm von.**

**Wagener, Guido.** A German zoölogist in Marburg, 1822-1896. Known for his studies of intestinal parasites and the minute structure of muscle fibres.

**Wagner, Rudolf.** German physiologist and zoologist, 1805-1864. Born in Beyreuth, studied in Erlangen, Würzburg and in 1827 with Cuvier. In 1833 ord. professor of zoology at Erlangen; in 1840 professor of physiology, comparative anatomy and zoology in Göttingen, as successor to Blumenbach.

*Zur vergleichenden Physiologie des Blutes, Leipzig, 1833, in-8°. Lehrbuch der vergleichenden Anatomie. Leipzig, 1834, in-8°. Handatlas der vergl. Anatomie, 1841. Partium elementorum organorum, quæ sunt in homine atque animalibus mensiones micrometricæ, Leipzig, 1834, in-4°.*

*Corpuscula Wagneri. Gyrus parietalis inf. Subcuneus.*

**Walter (The Elder), Johann Gottlieb.** Born in Königsberg, 1734(9)-1818. Student of Chr. Th. Büttner, and J. F. Meckel. Professor of anatomy in Medico-surgical college, Berlin. In 1802 he sold to the King of Prussia his collection of anatomical specimens numbering 2868. It is said that he dissected more than 800 cadavers.

*Von den Blutadern des Auges. Epist. anat. de venis oculi, Berlin, 1778.*



*Biography: Fünfzigjähriger Jubeltag des Joh. Gottl. Walter, Berlin, 1810, 8°.*

**Walther, August Friedrich.** German anatomist, 1688–1746. Professor of anatomy in Leipzig.

*Anatome musculorum teneriorum, Lipsiæ, 1731. Observationes novæ de musculis, Lipsiæ, 1733. De vena portae exercitationes anatomicæ, Lipsiæ, 1739–1740.*

*Ductus subligualis minor. Ganglion coccygeum. Plexus cavernosus. Ligamentum.*

**Warren, John.** An American surgeon and anatomist, 1753–1815. Born at Roxbury, Massachusetts. First professor of anatomy and surgery at the Harvard Medical School, 1783–1815.

**Warren, John Collins.** An American anatomist and surgeon, 1778–1856. Professor of anatomy and surgery, Harvard Medical School, 1815– , as successor to his father, John Warren.

*Cases of Organic Diseases of the Heart, 1809. Description of an Egyptian Mummy, 1821. Description of the Siamese Twins, 1829. A Comparative View of the sensorial and nervous system in man and animals, 1822. The Mastodon giganteus of North America, 1852.*

*Biography: The Life of John Collins Warren, M. D., compiled chiefly from his Autobiography and Journals, by Edward Warren, M. D., Boston, 1860, 2 vols.*

**Weber, Eduard Friedrich.** German physiologist, 1806–1871. Author, with Wilhelm Eduard Weber, of: “*Mechanik der menschlichen Werkzeuge, 1836.*”

**Weber, Ernst Heinrich.** German anatomist and physiologist, 1795–1878. Professor of anatomy and physiology at Leipzig, 1821–66. Professor of anatomy at Leipzig, 1866–71, succeeded by Wilhelm His. Professor in Wittenberg and Halle, professor of comparative anatomy. Known for his physiological and anatomical investigations.

*Handbuches der Anatomie. Anatomia comparata nervi sympathici, Leipzig, 1817. De aere et auditu hominis et animalium, Leipzig, 1820, in-4°, 10 plates.*

*Ligamentum calcaneo-cuboideum infimum, med. et summum; — calcaneo-metatarseum; — cartilagineum calc. navic.; — dorsale talonaviculare; — ossis metatarsi quinti; — proprium dorsale metacarpi et tarsi; — superius Weberi; — transversum genu commune; — volare rectum oss. pisiformis. Massa ligamentosa. Musculus sphincter ans. int. Organon Weberi. Tuberculum humeri. Zona orbicularis.*

**Weber, Moritz Ignatz.** German anatomist, 1795–1875. Prosector in Bonn; 1825 professor of anatomy; 1830 professor of comparative and pathological anatomy.

*Anat. Atlas d. Menschl. Körpers in nat. Gr. Düsseldorf, 1830–1833. Handbuch der Anatomie, Leipzig, 1845. Elemente der allg. u. spez. Anatomie, Bonn, 1826–1832. Die Lehre von der Ur- und Rasseformen der Schädel und Becken, Düsseldorf, 1830. Arteria auditiva ext. Fossa mylohyoidea. Ligamentum annulare inf. et post.; — cubitalunare; — profundum carpi; — sacrococcygeum post. Plexus plantaris prof. Processus tympani. Rete venosum mirabile. Sinus sigmoideus (transversus); — tentorii. Sutura longit. imperfecta. Venæ ascendentes (Weberi); — cutanea frontis magna; — cutanea communis facialis ant.; — facialis cutanea magna; — majores cerebrales et cerebri; — rectæ. Zona orbicularis.*

**Weber, Wilhelm Eduard.** A German physicist, 1804–91. Professor of physics at Göttingen, 1831–91. With Eduard Friedrich Weber, the author of "*Mechanik der menschlichen Gewerkszeuge*," 1836.

**Weismann, August Friedrich Leopold.** A German zoölogist and philosopher, was born at Frankfort-on-the-Main, January 17, 1834, and died at Freiburg in Breisgau, November 6, 1914. At the University of Göttingen he studied chemistry and medicine, coming especially under the instruction of the distinguished anatomist Henle, and received there his degree of M. D. in 1856. Began the practice of medicine at Frankfort, and became private physician to Archduke Stephan of Austria at Schamburg Palace. He studied zoology at Giessen under Leuckart, and became privat docent in zoology at the University of Freiburg in 1863, where he spent the remainder of his life. Weismann will be remembered chiefly for his theories of heredity. His earliest writings on this subject date from the year 1883.

*The Germ-Plasm, A Theory of Heredity, translated by W. Newton Parker, New York, 1893, in-8°. Vortraege ueber Descendenztheorie, 1902.*

*Biography: August Weismann, a biographical and critical sketch by Edwin G. Conklin, Science, N. S., vol. xli, No. 1069, pp. 917–922, 1915.*

**Weitbrecht, Josias.** German anatomist in St. Peterburg, 1702–1747. With Duvernoy in 1725 as "Student der Akad." in St. Petersburg. Adjunct for anatomy, and in 1731 Academician for physiology. Known for his studies in syndesmology.

*Syndesmologia sive historia ligamentorum corp. hum. Petropoli, 1742. Erlangen, 1804, in-4°.*

*Apparatus ligamentosus. Appendix lig. inf. sacroischiadici. Lacertus medius. Ligamentum access. cubiti; — antebrachii; — calcaneo-cuboideum; — calcaneo-fibulare; — deltoides Weitbrechti; — fibulae post; — laterale externum; — cervicis costae (costo-transv.); — malleoli ext.; — metatarsi lat.; — naviculare cuboideum; — ossis metatarsi tertii; — planum; — posterius longum; — prismaticum; — rectum longitudinale; — teres sinuos; — transversale int.; — transversum cartilagineum semilun. (transversum genu); — trapezoideum Weitbrechti; — triangulare scapulae (transversum scapulae). Massa ligamentosa tarsi. Membrana inter-spinalis. Planities ligamentosa lata rhomb. Plicae aliformes genu (alares). Processus aliformis genu.*

**Welcker, Hermann.** A German anatomist and anthropologist, 1822–1898. Born at Giessen, where he received his first educational training. Ausserordentl. professor and prosector in Halle as successor to Max Schultze, later Ordinarius, and then director of the anatomical institute, at Heidelberg. Later he returned to Giessen and then was successor to Volkmann as director of the Anatomical Institute in Halle. He is the author of numerous contributions to anatomy, pathology, anthropology and technique.

*Die Asymmetrien der Nase und des Nasenskelets, 1882. Schiller's Schädel und Totenmaske, nebst Mitteilungen über Schädel und Totenmaske Kant's, 1883.*

*Biography: Anatomischer Anzeiger, Bd. 14, pp. 102–112, 1898, with bibliography.*

**Wenzel, Joseph.** A German anatomist, 1768–1808. Professor of anatomy and physiology at Mainz.

*Beobachtungen ueber den Hirnanhang fallssuechtiger Personen, Mayence, 1810, in-8°. Prodromus einer Werkes ueber das Hirn der Menschen und Thieren, Tübingen, 1806, in-4°. De penitiorie structura cerebri humanorum et brutorum, Tübingen, 1812, in fol., 30 plates.*

*Ventriculus cerebri primus.*

**Werneking.** A German anatomist, 1798–1835. Professor in Giessen.

*Commissura Wernekingi.*

**Wernicke, Karl.** A German neurologist, 1848–1905.

*Area. Center. Fibres. Field. Radiatio occipitohalamicæ. Region. Sulcus frontomarginalis; — occipitalis anterior.*

**Westphal, Karl Friedrich Otto.** German neurologist, 1833–1890.

*Nucleus.*

Wharton, Thomas. An English anatomist, 1610–1673. Physician in London.

*Adenographia sive glandularum totius corporis descriptio*, London, 1656, 8°.

*Ductus submaxillaris. Jelly of Wharton.*

Whitman, Charles Otis. An American zoologist, 1842–1910. He was born in Woodstock, Maine, December 14th (1842). He early showed an interest in birds and while yet a boy he procured and mounted a very fine collection of the birds of Maine. He secured his early academic training at Bowdoin College, after which he taught in the Westford Academy, 1868–72. In Boston, 1873, he came under the influence of Louis Agassiz and was one of the fifty students who, in July and August of that year, attended the summer school on the island of Penikese. In 1875 he went to the University of Leipzig to study zoology with Leuckart, and received his degree of doctor of philosophy in 1878, his thesis being: *The Embryology of Clepsine*, in some respects an epoch making contribution. On his return to America he obtained a fellowship in Johns Hopkins University, but in the same year accepted the professorship of zoology at the University of Tokyo, as successor to Professor E. S. Morse. He remained in Japan for two years, during which time he laid the foundation of modern zoology in Japan. After leaving the University of Tokyo, Whitman spent some months in studying with Dohrn at the Naples Zoological Station, during which time he produced an interesting paper: *A Contribution to the Embryology, Life-history, and Classification of the Dicyemids*, 1883. After his return to America he served as assistant in the Museum of Comparative Zoology at Harvard, 1882–86, during which time he produced some of his most important contributions, and it was here that his interest in the developmental characters of the eggs of vertebrates was first aroused, an interest which he maintained throughout his life. His interest in the subject is shown by the numbers of memoirs on this topic that his students turned out under his direction. From 1886–1889 he acted as director of the Lake Laboratory at Milwaukee, Wisconsin, which had been founded by Edward Phelps Allis, Jr., and it was during this period that Whitman and Allis founded and edited the *Journal of Morphology*. This journal he carried through eighteen volumes, 1887–1903, when it was temporarily suspended to be taken up later by the Wistar Institute of Philadelphia (1908). This was a pioneer biological journal in America, and in it Whitman set a high standard, which has had a marked influence on American biology. In 1898 he established, in cooperation with W. M. Wheeler, the *Zoological Bulletin* (later the *Biological Bulletin*), which was intended for the prompt publication of shorter papers on biological

topics. Whitman was called, in 1889, to the chair of zoology at Clark University, Worcester, Massachusetts. While there he conducted research work in zoology along very high lines, and after three years went to the University of Chicago (1892), where he remained to the end of his life. The Marine Biological Laboratory for the purposes of instruction and research, was founded in 1888 and Professor Whitman was its first director. In this institution all biological interests were represented, and finally included the departments of botany, physiology, embryology and zoology. After bringing the work of the laboratory to a high plane, and after seeing the institution attain a permanent place in biological affairs, he resigned the directorship in 1908 to devote himself more completely to the study of his problems of heredity in pigeons. In 1890 Whitman took an active part in the formation of the American Morphological Society, which later (1902) became the American Society of Zoologists. At the University of Chicago the department of zoology was primarily a research department. He directed the work of many students who later became the leaders of American biology, forty-four individuals having done their investigations for the degree of Doctor of Philosophy, under his direction. Whitman was not a voluminous writer, but his contributions, usually short and beautifully illustrated (for he kept one and usually two Japanese artists busy for many years), were of an epoch making character. He left a large amount of unfinished manuscript. His main interests were along the lines of evolutionary inquiry and embryology, and in these fields he stood preeminent. Whitman's chief influence was in the high ideals he brought into American biological work.

*Journal of Morphology, vol. 22, no. 4, December, 1911, pp. xv-lxxv, with portraits and bibliography.*

**Williams, Leonard Worcester.** An American comparative anatomist, 1875-1912. Studied with Dahlgren and McClure at Princeton University; later at Brown University with Bumpus, where he received his Ph. D. in 1901. Instructor in comparative anatomy, Harvard Medical School, 1907-1912. He became very proficient in dissection and in the preparation of dissections for exhibit and demonstration. He published several important contributions to comparative anatomy and had others under way when he met an untimely death in an elevator accident at Harvard University.

*The later development of the notochord in mammals. Amer. Journ. Anat., vol. 8, pp. 251-284, 20 figs., 1908.*

*Biography: Leonard Worcester Williams, by J. S. Kingsley. Anat. Rec., vol. 7, no. 2, pp. 33-38, with portrait.*

**Willis, Thomas.** An English physician, anatomist and chemist, 1621(2)–1675. Born at Great Bedwin, in Wiltshire. Studied at Oxford where he became associated with Harvey and became much impressed with Harvey's great discovery. In 1660 he was elected professor of natural philosophy at Oxford University, afterward became a famous practitioner in London, though he was in little favor at court. He was one of the first English physicians to use the microscope for medical research. He was aided in his studies on the brain by Richard Lower and Sir Christopher Wren.

*Cerebri anatome, cui accessit nervorum descriptio et usus, London, 1664, in-4°.*

*Antrum pyloricum ventriculi. Centrum nervosum. Chorda transversalis. Circulus arteriosus. Pentagonum. Incisura septi pellucidi prima. N. accessorius Willisi. Protuberantia basilaris (Pons Varoli). Tunica nervea Willisi.*

*Biography: Richardson — Disciples of Æsculapius, vol. 2, pp. 592–616, with portrait. Thomas Willis (1621–1675), by Edward W. Adams, in Medical Library and Historical Journal, vol. 1, p. 265, with portrait.*

**Wilson, James.** A celebrated London surgeon and teacher of anatomy in the Hunterian School in Great Windmill Street in London. His son, James Arthur Wilson (1795–1883), became a noted physician. James Wilson is known in anatomy for his description of the *Wilson's muscle* which is a part of the *constrictor urethræ*.

*Practical and surgical anatomy, London.*

**Windischmann, Carl Joseph Hieronymus.** A German anatomist, 1775–1839. Professor of philosophy and history at Mainz.

*De penitiori auris structura in amphibia, Leipzig, 1831, in-4°, 3 plates.*

**Winslow, Jacob Benignus.** A Danish anatomist, resident in Paris, 1669–1760. Professor of anatomy in Paris. He erected in 1745 an anatomical theater in Paris and became a noted teacher of anatomy.

*Exposition anatomique de la structure du corps humain, 1732. Many times reprinted. Observations sur la rotation, pronation, supination, Paris, 1729.*

He is also the author of an important memoir dealing with the structure of the heart, which was issued in German under the title: "*Abhandlungen ueber das Herz, die halbmond. Klappen, den Blutlauf im Foetus, in Mem. de Akad. d. Wissenschaft.*"

*His biography is given by Portal, Histoire de l'anatomie, IV. p. 466, sq.*

*Foramen Winslowi. Hiatus Winslowi. Frenum. Ligamentum inteross. pubis. Musculus geniopharyngeus; — peristaphylopharyngeus; — prostaticus. Pancreas. Stellulæ vasculosæ.*

**Winther von Andernach.** See **Andernach.**

**Wirsung, Johann Georg.** A German anatomist in Padua, -1643. Prosector to Vesling in Padua. Professor of anatomy in Padua. Discoverer of the pancreatic duct.

*Figura ductus cijusd. cum multiplicibus suis ramulis voviter in pancreate in diversis corporibus humani observatis, Padua, 1642, in folio.*

See Choulant — *Geschichte der Anatomie*, p. 91.

*Ductus pancreaticus.*

**Wistar, Caspar.** An American anatomist, 1760-1818. Professor of anatomy in the University of Pennsylvania, 1791-1818. The "Wistar Institute of Anatomy and Biology in Philadelphia (1892)," was named in his honor.

*A System of Anatomy, 1811-1814 (3 editions), 2 vols., in-8°.*

**Wolff, Kaspar Friedrich.** A Russian embryologist, 1733-1794. Professor of anatomy and physiology in St. Petersburg. Founder of the modern science of embryology. He was the first to distinguish and properly interpret the germ layers. Von Baer said of Wolff's "*Theoria generationis (1759)*" that: "It is the greatest masterpiece of scientific observation which we possess." His views were opposed by Haller and others.

*Theoria generationis, 1759. (Inaugural Dissertation.) De formatione intestinorum. Nova Commentar. Acad. sc. Petropolit. Petrop. T. XII, and XIII, 1768. Von der eigenthümlichen und wesentlichen Kraft der vegetabilischen sowohl als auch der animalischen Substanz. Petersburg, 1789. Über die Bildung des Darmkanals im bebrüteten Hühnchen. Übersetzt von Fr. Merkel, 1812.*

*Ureter primordialis (Ductus Wolffii). Camera arteriosa Wolffii. Ren primordialis. (Corpus Wolffii.)*

*Biography: Caspar Friedrich Wolff and the Theoria generationis, by Wm. Wheeler, in Wood's Hole Biological Lectures, 1898, p. 265.*

**Worm, Ole (Senior).** A Danish anatomist in Copenhagen, 1588-1654. Studied in Germany, Italy, France and in Basel with Bauhin. In 1613, professor of philosophy in Copenhagen; in 1624 in the medical

faculty as successor to Caspar Bartholin, senior. Founder of a famous anatomical museum at Copenhagen.

*Historia rarior. Musei Wormiani, Ludg. Bat. 1655, fol. Catalogus Musei Wormiani, Hafn., 16°, 1642. Ossicula Wormi. Sutura Wormi.*

**Wrisberg**, Heinrich August. A German anatomist, 1739–1808. Professor of gynecology and anatomy in Goettingen, 1764–1808.

*Descriptione anatoe embryonis, 1764. Obs. anat. de quinto pare nervorum encephali et de nervis qui ex eod. duram matrem ingredi falso dicuntur. C. tab. aenea, Göttingen, 1777, in-4°.*

*Anastomosis Wrisbergi. Ansa memorabilis. Cartilago cuneiformis (Corpuscula). Corpus pampiniforme (Epoophoron). Filamenta nervea. Ganglion cardiacum magnum. Lacertus rectus (medius). Lemniscus. Ligamentum. Nervus accessorius; —internus minor (cutaneus brachii). Portio intermedia. Ramus magnus n. mediani. Tuberculum cuneiforme.*

**Wyman**, Jeffries. An American anatomist, 1814–1874. Demonstrator in anatomy to John C. Warren at Harvard Medical School; Hersey professor of anatomy at Harvard University, 1847–74.

*Anatomy of the Nervous System of Rana pipiens, Washington, 1852, in-4°. On a batrachian reptile from the Coal formation, 1857. The osteology and myology of Didelphys virginiana, with an appendix on the brain. Boston, 1872.*

*Biography: Remarks on the Life of Professor Jeffries Wyman, by Asa Gray-Proc. Bost. Soc. Natl. Hist., vol. 17, pt. 1, p. 96. Jeffries Wyman, anatomist, in "Leading American Men of Science," p. 171, 1910.*

**Zagorsky**, Peter. A Russian anatomist, 1764–1846. Professor of anatomy in Moscow and St. Peterburg. Author of a textbook of anatomy written in Russian and of contributions to Teratology.

**Zang**, Christoph Bonifacius. A surgeon in Vienna, 1772–1835.  
*Area præellaris. Spatium Zangi.*

**Zaufahl**, Emmanuel. An otologist in Prague, 1837–1910.  
*Plica Zaufahli.*

**Zerbi**, (Zerbis, Zerbus). See **Gerbi**, Gabriele.

**Zinn**, Johann Gottfried. A German anatomist, 1727–1759. Professor of medicine in Göttingen, and director of the botanical gardens, 1753–59. A student of Haller.

*De ligamentis ciliaribus programma, Göttingen, 1753, in-4°. Descriptio anatomica oculi homini iconibus illustrata, Göttingen,*



1755, in-4°. *Observationes botanicæ....et anatomicæ de vasis subtilioribus oculi et cochlea auris interna, Goettingen, 1753, in-4°.*  
*Annulus tendineus Zinnii. A. centralis retinae. Circulus vasculosus n. optici. Ligamentum Zinnii. Membrana Zinnii. Zonula Zinnii.*

*Biography: Zinn's Leben, von Joh. Matth. Gesner, Goettingen, 1749.*

Zittel, Karl Alfred von. A German paleontologist, 1839–1904. He was born on the 25th of September (1839) at Bahlingen. He early showed a taste for natural history, at first turning his attention to minerals and fossil shells. He entered Heidelberg University in 1857 to study natural history and especially paleontology with Bronn. In 1861 he studied at Vienna which at that time was especially noted for geology and paleontology. After some years of work and study in Vienna, in 1866, Zittel was called to Munich as professor of paleontology and there he brought his favorite science to a high degree of perfection. Here he taught and labored for 37 years. At Munich he founded the most renowned chair, the largest school of paleontology, and quickly made it evident that his laboratory was a center of intense paleontologic activity. Students came to him from all over the world, and Zittel became recognized as the master in modern paleontology. His interests were largely at first along the lines of geology and the paleontology of the invertebrates, but as he grew older his interests widened, and in the realm of vertebrate paleontology he has published several papers of note, especially on the chelonia and pterodactyls. His later contributions mark the transition from the older geological paleontology to that of the modern paleozoology. Zittel undertook to orient the great accumulations of paleontology and he labored from 1876–1893 to produce his great *Handbuch der Paleontologie*, which, with Schimper and Schenk in paleobotany, was issued in six volumes, four of which were Zittel's, containing 3357 pages and 2976 figures. In 1895 he rewrote and condensed this work into a *Grundzüge der Paleozoologie*, which has been translated into English by Charles R. Eastman. He did more than any other single man to promote the science of paleontology. In 1869 Zittel became the editor of the famous *Paleontographica*, which had been founded in 1846 by Wilhelm Dunkel and Hermann von Meyer. He directed this noteworthy serial up to its fiftieth volume.

Not less than seventy different monographs based on the Munich collections are by Zittel's students. His *Geschichte der Geologie und Paleontologie bis Ende des 19th Jahrhunderts* is a noteworthy contribution to the history of science. It has been translated into English by one of his students, Mrs. Maria Ogilvie-Gordan (1901). Zittel received numerous

honors during his life and was a member and associate of many learned societies.

*Paleontographica*, Bd. 50, 1904, pp. 3-28, with portrait.

**Zuckerkindl**, Emil. A German anatomist, 1849-1910. Professor of anatomy in Goettingen.

*Zur Morphologie des Gesichtschädels*, Stuttgart, 1875. *Anatomie der Mundhöhle und der Zähne*, Wien, 1891. *Atlas der topogr. Anatomie des Menschen*, 1904.

*A. stapedia*. *Glandula*. *Gyrus marginalis*. *M. ischiocaudalis*. *Ramus volaris prof. sup.* *Spina supra meatum*. *Tuberculum molare*.

**Zsigmondy**, Adolf. Born in Pressburg (1816-1880). Author of numerous papers on the anatomy of the teeth.

## INDEX AND SYNONYM REGISTER.

The index comprises all the BNA terms and most of the Latin and English anatomical terms which have equivalents in the BNA.

Terms in heavier type and in italics are the Latin BNA terms or their literal translations.

Terms in lighter type are synonyms for the BNA terms.

The numerals affixed cite the page and number of the BNA term in its systematic position.

Identical terms with different numerals show that these terms have been used as synonyms for different BNA terms.

Some terms are qualified by "old.". This indicates earlier usage which has become obsolete.

Brackets, Parentheses and Italics have been retained in the BNA terms as found in the systematic lists; for their significance see footnote, p. 23.

### A.

- Abdomen**—26:55 =  
*Abdomen*  
**Accessorius**—24:2 =  
*Accessory*  
**Accessory**—24:2  
**Acervulus, Acervuli**—87:64 =  
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 — to antrum—99:1  
 — ad antrum, Siebenmann—99:1  
 — ad antrum tympanicum—99:1  
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 — ad aquaeductum, Sylvii—84:15  
 — ad infundibulum—84:21  
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 — laryngis—59:13 =  
*Entrance of larynx*  
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- of seminal vesicle—62:33
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- ureteris—61:22
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- lentis—96:57 =  
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- = Peyeri—55:41
- = Peyeriana—55:41
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- = membranaceae—97:68 =
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- cartilaginis cricoideae—58:36
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- tendineus fasciae lumbodorsalis—41:23
- tendineus fasciae pelvis—65:29 =
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- tendineus m. levatoris ani—65:22 =
  - Tendinous arch of levator ani muscle
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  - Tendinous arch of soleus muscle
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- venosus anterior fossae jugularis, Luschka—76:23
- venosi digitales—76:52 =
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- venosi digitales dorsales—76:52
- venosus dorsalis pedis—78:8 =
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- venosus dorsalis pedis superficialis—78:7
- venosus juguli—76:23 =  
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- volaris profundus—71:33 =  
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- Brocae—86:67
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- alveolares superiores anteriores—69:61 =  
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- *appendicalis*—72:42
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- == *arciformes* renis—61:6 =
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- == *arciformes* renum—61:6
- *arcuata* pedis—74:11 =
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- *articularis* capituli fibulae propria—74:17
- *articularis* capituli fibulae, Theile—74:17
- *articularis* externa inferior genu—73:68
- *articularis* externa superior genu—73:64
- *articularis* genu azygos—73:66 =
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- *articularis* genu superior interna prima—73:59
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- *auditiva* interna—70:29; 98:21 =
- Internal auditory artery*
- == *auriculares* anteriores inferiores—69:39
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- *auricularis* posterior—69:29 =
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- *auricularis* profunda—69:45 =
- Deep auricular artery*
- *axillaris*—70:70 =
- Axillary artery*
- *azygos* genu—73:66
- *basilaris*—70:27 =
- Basilar artery*
- *brachialis*—71:14 =
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- *brachialis* profunda, Luschka—71:15
- == *bronchiales*—71:53 =
- Bronchial arteries*
- == *bronchiales* anteriores—70:37
- *bronchialis* dextra—71:53
- == *bronchiales* inferiores—71:53

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- == *bronchiales* posteriores—71:53
- *bronchialis* sinistra—71:53
- == *bronchiales* superiores—70:37
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- *buccalis*—69:58
- *buccinatoria*—69:58 =
- Buccinator artery*
- *bulbi*—73:24
- *bulbi* urethrae—73:24 =
- Artery of bulb of urethra*
- *bulbi* vestibuli [vaginae]—73:25 =
- Artery of bulb of vestibule [of vagina]*
- *bulbina*—73:24
- *bulbo-cavernosa*—73:24
- *bulbosa*—73:24
- *bulbosa*—73:25
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- == *calcaneae*—74:26
- *canalis* pterygoidei [Vidii]—69:63 =
- Artery of pterygoid canal [of Vidius]*
- *capsularis*—96:39
- *capsularis* inferior—72:51
- *capsularis* media—72:49
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- *carotico-tympanica*—69:69
- *carotis* cerebralis—69:68
- *carotis* communis—68:59 =
- Common carotid artery*
- *carotis* communis dextra—68:59
- *carotis* communis sinistra—68:59
- *carotis* externa—68:60 =
- External carotid artery*
- *carotis* facialis—68:60
- *carotis* interna—69:68 =
- Internal carotid artery*
- *carotis* primitiva—68:59
- *carpea* dorsalis—71:27
- *carpea* dorsalis—71:45
- *carpea* volaris—71:25
- *carpi* dorsalis—71:27
- *caudalis*—72:12
- *cavernosa* penis—73:26
- *cavi* tympani—69:7
- *centralis* retinae—69:71 =
- Central artery of retina*
- *cephalica*—68:59
- *cerebelli* inferior anterior—70:28 =
- Anterior inferior artery of cerebellum*
- *cerebelli* inferior posterior—70:26 =
- Posterior inferior artery of cerebellum*
- *cerebelli* superior—70:31 =
- Superior artery of cerebellum*

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- = cerebrales—70:14
- cerebralis—69:68
- cerebralis anterior—70:17
- cerebralis media—70:19
- cerebralis posterior—70:32
- cerebralis transversa—70:19
- = cerebri—70:14 =
  - Arteries of cerebrum
- cerebri anterior—70:17 =
  - Anterior artery of cerebrum
- cerebri media—70:19 =
  - Middle artery of cerebrum
- cerebri posterior—70:32 =
  - Posterior artery of cerebrum
- cerebri transversa—70:19
- cervicalis ascendens—70:55=
  - Ascending cervical artery
- cervicalis descendens profunda—69:28
- cervicalis descendens superficialis—69:26
- cervicalis profunda—70:66 =
  - Deep cervical artery
- cervicalis superficialis—70:59 =
  - Superficial cervical artery
- cervicalis transversa—70:67
- chorioidea—70:16 =
  - Chorioidal artery
- chorioidea anterior—70:16
- chorioidea inferior—70:16
- = ciliares anteriores—70:1 =
  - Anterior ciliary arteries
- = ciliares mediae, Cruveilhier—69:76
- = ciliares posteriores breves—69:75 =
  - Short posterior ciliary arteries
- = ciliares posteriores longae—69:76 =
  - Long posterior ciliary arteries
- circumflexa abdominalis—73:37
- circumflexa femoris anterior—73:50
- circumflexa femoris externa—73:50
- circumflexa femoris interna—73:46
- circumflexa femoris lateralis—73:50 =
  - Lateral circumflex artery of thigh
- circumflexa femoris medialis—73:46 =
  - Medial circumflex artery of thigh
- circumflexa femoris posterior—73:46
- circumflexa humeri anterior—71:12 =
  - Anterior circumflex artery of humerus
- circumflexa humeri posterior—71:13 =
  - Posterior circumflex artery of humerus
- circumflexa ilium—73:37
- circumflexa ilium externa—73:40
- circumflexa ilium interna—73:37
- circumflexa ilium profunda—73:37 =
  - Deep circumflex iliac artery

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- circumflexa ilium superficialis—73:40 =
  - Superficial circumflex iliac artery
- circumflexa m. sterno-cleido-mastoidei inferior—69:21
- circumflexa m. sterno-cleido-mastoidei inferior—69:23
- circumflexa radialis—71:41
- circumflexa scapulae—71:11 =
  - Circumflex artery of scapula
- clitoridea—73:28
- clitoridis—73:28 =
  - Artery of clitoris
- coccygea—72:12
- cochleae—98:23
- coeliaca—72:16 =
  - Coeliac artery
- colica dextra—72:43 =
  - Right colic artery
- colica dextra inferior—72:41
- colica media—72:44 =
  - Middle colic artery
- colica sinistra—72:46 =
  - Left colic artery
- colica superior accessoria—72:44
- = collaterales digitales—71:50
- collateralis externa—71:19
- collateralis magna—71:15
- collateralis media—71:18 =
  - Middle collateral artery
- collateralis radialis—71:19 =
  - Radial collateral artery
- collateralis radialis externa—71:19
- collateralis radialis inferior—71:19
- collateralis radialis superior—71:17
- collateralis ulnaris inferior—71:21 =
  - Inferior ulnar collateral artery
- collateralis ulnaris prima—71:20
- collateralis ulnaris secunda—71:21
- collateralis ulnaris superior—71:20 =
  - Superior ulnar collateral artery
- comes n. ischiadici—73:5
- comes n. mediani—71:43
- comes n. phrenici—70:38
- comitans n. ischiadici—73:5 =
  - Accompanying artery of ischiadic nerve
- communicans anterior cerebri—70:18 =
  - Anterior communicating artery of cerebrum
- communicans posterior cerebri—70:15 =
  - Posterior communicating artery of cerebrum
- = concharum nasi—69:67



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- == conjunctivales anteriores—70:2 ==  
Anterior conjunctival arteries
- == conjunctivales posteriores—70:3 ==  
Posterior conjunctival arteries
- coronaria anterior—68:52
- coronaria [cordis] dextra—68:52 ==  
Right coronary artery [of heart]
- coronaria cordis posterior—68:54
- coronaria [cordis] sinistra—68:54 ==  
Left coronary artery [of heart]
- coronaria labii inferioris—69:18
- coronaria labii superioris—69:19
- coronaria malleolaris—74:22
- coronaria malleolaris posterior lateralis—74:22
- coronaria ventriculi dextra—72:20
- coronaria ventriculi inferior sinistra—72:33
- coronaria ventriculi sinistra—72:17
- corporis callosi—70:17
- corporis cavernosi urethrae—73:24
- == costales—71:59
- costalis prima—70:63
- costalis suprema—70:63
- cremasterica, Cooper—73:35
- crico-thyreoidea—68:65
- cristae pubis—73:33
- cruralis—73:38
- cruralis iliaca—73:31
- cubitalis—71:36
- cubitalis secunda—71:43
- cystica—72:23 ==  
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- deferentialis—73:11 ==  
Deferential artery
- deltoidea—71:5
- dentalis inferior—69:47
- dentalis posterior—69:59
- == dentales superiores—69:61
- dentalis superior anterior—69:61
- diaphragmatica—72:7
- diaphragmatica inferior—72:7
- == diaphragmaticae superiores—71:58
- == digitales communes dorsales pedis—74:13
- == digitales communes manus—71:49
- digitalis communis prima manus—71:31
- digitalis dorsalis digiti minimi pedis externa—74:14
- digitalis dorsalis fibularis hallucis—74:14
- digitalis dorsalis hallucis externa—74:14
- == digitales dorsales manus—71:30 ==  
Dorsal digital arteries of hand

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- == digitales dorsales pedis—74:14 ==  
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- digitalis dorsalis secunda pedis interna—74:14
- digitalis dorsalis tibialis digiti secundi—74:14
- digitalis dorsalis tibialis hallucis—74:14
- digitalis fibularis pedis—74:14
- == digitales manus dorsales—71:30
- == digitales palmares—71:50
- == digitales pedis communes—74:33
- == digitales pedis dorsales—74:14
- == digitales pedis externae—74:14
- == digitales plantares—74:35 ==  
Plantar digital arteries
- digitalis plantaris digiti minimi fibularis—74:35
- == digitales plantares propriae—74:35
- digitalis tibialis interna—74:14
- == digitales volares communes—71:49 ==  
Common volar digital arteries
- == digitales volares manus—71:50
- == digitales volares propriae—71:50 ==  
Volar digital arteries proper
- == digitorum manus—71:30 + 71:49 + 71:50
- dorsalis cliteridis—73:30 ==  
Dorsal artery of clitoris
- dorsalis hallucis—74:13
- dorsalis indicis radialis—71:30
- dorsalis linguae—69:11
- dorsalis nasi—70:13 ==  
Dorsal artery of nose
- dorsalis pedis—74:8 ==  
Dorsal artery of foot
- dorsalis penis—73:27 ==  
Dorsal artery of penis
- dorsalis pollicis radialis—71:30
- dorsalis pollicis ulnaris—71:30
- dorsalis scapulae—70:67
- dorsalis scapulae—70:69
- duodenalis inferior—72:38
- emulgens—72:50
- epigastrica—73:32
- epigastrica externa—73:37
- epigastrica inferior—73:32 ==  
Inferior epigastric artery
- epigastrica inferior externa—73:37
- epigastrica inferior profunda—73:32
- epigastrica interna—73:32
- epigastrica profunda—73:32
- epigastrica superficialis—73:39 ==  
Superficial epigastric artery
- epigastrica superior—70:47 ==  
Superior epigastric artery

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- == episclerales—70:4 ==
  - Episcleral arteries
- ethmoidalis anterior—70:7 ==
  - Anterior ethmoidal artery
- ethmoidalis posterior—70:6 ==
  - Posterior ethmoidal artery
- == ethmoideae—70:6 + 70:7
- ethmoidea anterior—70:7
- ethmoidea posterior—70:6
- facialis—68:60
- facialis anterior—69:13
- facialis profunda—69:44
- facialis transversa—69:38
- temoralis—73:38 ==
  - Femoral artery
- femoralis communis—73:38
- femoralis profunda—73:45
- femoralis superficialis—73:38
- fibularis—74:18
- fibularis superior—74:17
- fossae cerebri media—70:19
- fossae, Sylvii—70:19
- frontalis—70:12 ==
  - Frontal artery
- funicularis—72:53
- funiculi spermatici—73:35
- == gastricae breves—72:34 ==
  - Short gastric arteries
- gastrica dextra—72:20 ==
  - Right gastric artery
- gastrica inferior dextra—72:29
- gastrica inferior sinistra—72:33
- gastrica sinistra—72:17 ==
  - Left gastric artery
- gastrica superior dextra—72:20
- gastrica superior sinistra—72:17
- gastroduodenalis—72:25 ==
  - Gastroduodenal artery
- gastroepiploica dextra—72:29 ==
  - Right gastroepiploic artery
- gastroepiploica sinistra—72:33 ==
  - Left gastroepiploic artery
- genu azygos—73:66
- genu inferior externa—73:68
- genu inferior interna—73:69
- genu inferior lateralis—73:68 ==
  - Lateral inferior artery of knee
- genu inferior medialis—73:69 ==
  - Medial inferior artery of knee
- genu media—73:66 ==
  - Middle artery of knee
- genu recurrens—74:3
- genu superficialis—73:59
- genu superior externa—73:64
- genu superior interna—73:65
- genu superior interna secunda—73:65

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- genu superior lateralis—73:64 ==
  - Lateral superior artery of knee
- genu superior medialis—73:65 ==
  - Medial superior artery of knee
- genu superior profunda—73:65
- genu suprema—73:59 ==
  - Highest artery of knee
- == glandulares—70:54
- glomeruli—61:8
- glutaea inferior—73:4 ==
  - Inferior gluteal artery
- glutaea superior—73:1 ==
  - Superior gluteal artery
- haemorrhoidalis externa—73:18
- haemorrhoidalis interna—72:48
- haemorrhoidalis inferior—73:18 ==
  - Inferior haemorrhoidal artery
- haemorrhoidalis media—73:16 ==
  - Middle haemorrhoidal artery
- haemorrhoidalis superior—72:48 ==
  - Superior haemorrhoidal artery
- == helicinae, Mülleri—63:13
- == helicinae penis—63:13 ==
  - Helicine arteries of penis
- hepatica—72:19 ==
  - Hepatic artery
- hepatica communis—72:19
- hepatica propria—72:21 ==
  - Hepatic artery proper
- humeralis—71:14
- humeraria—71:14
- hyaloidea—96:39 ==
  - Hyaloid artery
- hyoidea—69:9
- hypogastrica—72:56 ==
  - Hypogastric artery
- == ileae—72:40 ==
  - Ileac arteries
- ileocolica—72:41 ==
  - Ileocolic artery
- iliaca—73:31
- iliaca anterior—73:31
- iliaca communis—72:55 ==
  - Common iliac artery
- iliaca externa—73:31 ==
  - External iliac artery
- iliaca interna—72:56
- iliaca parva—72:58
- iliaca posterior—73:1
- iliaca primitiva—72:55
- iliolumbalis—72:58 ==
  - Iliolumbar artery
- inferior profunda brachii, Macalister—71:20
- infracostalis—70:44
- infraorbitalis—69:60 ==
  - Infraorbital artery

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- *infrascapularis*—71:9
- *inguinales*—73:44
- *innominata*—68:57
- *insularis*—70:19
- *intercostales*—71:59 =
  - Intercostal arteries**
  - *intercostales anteriores*—70:45
  - *intercostales posteriores*—71:60
  - *intercostalis prima*—70:63
  - *intercostalis superior*—70:63
  - *intercostalis suprema*—70:63 =
    - Highest intercostal artery**
  - *interlobares renis*—61:5 =
    - Interlobar arteries of kidney**
  - *interlobulares renis*—61:7 =
    - Interlobular arteries of kidney**
  - *intermetacarpeae dorsales*—71:29
  - *intermetacarpeae palmares*—71:34
  - *intermetatarsae dorsales*—74:13
  - *interossea accessoria*—71:43
  - *interossea anterior*—71:42
  - *interossea antibrachii accessoria*—71:43
  - *interossea antibrachii anterior*—71:42
  - *interossea antibrachii dorsalis*—71:40
  - *interossea antibrachii externa*—71:40
  - *interossea antibrachii interna*—71:42
  - *interossea antibrachii posterior*—71:40
  - *interossea antibrachii superficialis*—71:43
  - *interossea antibrachii volaris*—71:42
  - *interossea communis*—71:39 =
    - Common interosseous artery**
  - *interossea dorsalis antibrachii*—71:40 =
    - Dorsal interosseous artery of forearm**
  - *interosseae metacarpi dorsales*—71:29
  - *interosseae metacarpi interni*—71:34
  - *interosseae metacarpi volares*—71:34
  - *interosseae metatarsae dorsales*—74:13
  - *interosseae perforantes*—71:35
  - *interossea recurrens antibrachii*—71:41 =
    - Recurrent interosseous artery of forearm**
  - *interossea palmaris*—71:42
  - *interossea perforantes*—71:35
  - *interossea plantares*—74:33
  - *interossea posterior antibrachii*—71:40
  - *interossea superficialis*—71:43
  - *interossea volaris*—71:42 =
    - Volar interosseous artery**
  - *interossea volares*—71:34
  - *interossea volaris antibrachii*—71:42

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- *intestinales*—72:37 =
  - Intestinal arteries**
  - *intestinales iliaca*—72:40
  - *intestinales ileae*—72:40
  - *intestinales jejunales*—72:39
  - *ischiadica*—73:4
  - *jejunales*—72:39 =
    - Jejunal arteries**
  - *labiales anteriores vulvae*—73:43 =
    - Anterior labial arteries of vulva**
  - *labialis inferior oris*—69:18 =
    - Inferior labial artery of mouth**
  - *labiales posteriores vulvae*—73:21 =
    - Posterior labial arteries of vulva**
  - *labialis superior oris*—69:19 =
    - Superior labial artery of mouth**
  - *lacrimalis*—69:72 =
    - Lacrimal artery**
  - *lacrimalis accessoria*—69:72
  - *laryngea inferior*—70:50 =
    - Inferior laryngeal artery**
  - *laryngea inferior, Livini*—68:65
  - *laryngea media, Luschka*—68:65
  - *laryngea posterior*—70:50
  - *laryngea superior*—68:64 =
    - Superior laryngeal artery**
  - *lienalis*—72:31 =
    - Splenic artery**
  - *lig. teretis uteri*—73:36 =
    - Artery of round ligament of uterus**
  - *lingualis*—69:8 =
    - Lingual artery**
  - *lobulares hepatis*—56:76
  - *lobulares renis*—61:7
  - *lumbales*—72:9 =
    - Lumbar arteries**
  - *lumbalis ima*—72:13 =
    - Lowest lumbar artery**
  - *lumbalis ima dextra*—72:13
  - *lumbalis ima sinistra*—72:13
  - *lumbalis quinta*—72:13
  - *lumbalis sacralis*—72:13
  - *magna pollicis*—71:31
  - *malleolaris anterior externa*—74:4
  - *malleolaris anterior interna*—74:5
  - *malleolaris anterior lateralis*—74:4 =
    - Lateral anterior malleolar artery**
  - *malleolaris anterior medialis*—74:5 =
    - Medial anterior malleolar artery**
  - *malleolaris posterior lateralis*—74:22 =
    - Lateral posterior malleolar artery**
  - *malleolaris posterior medialis*—74:25 =
    - Medial posterior malleolar artery**
  - *mammaria externa*—71:7
  - *mammaria interna*—70:34 =
    - Internal mammary artery**

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- mammaria lateralis—70:44
- mandibularis—69:47
- masseterica—69:54 =  
     **Masseteric artery**
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- maxillaris externa—69:13 =  
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- suprarenalis media—72:49 =
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- temporalis superficialis—69:36 =
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## COLUMN

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- articularis capituli fibulae—38:55 =  
Articular surface of little head of fibula
- articularis carpea radii—36:32 =  
Carpal articular surface of radius
- articularis cartilaginis arytaenoideae—58:48 =  
Articular surface of arytaenoid cartilage
- articularis cuboidea calcanei—39:21 =  
Cuboid articular surface of calcaneus
- articularis fossae mandibularis—31:66 =  
Articular surface of mandibular fossa
- articularis inferior tibiae—38:43 =  
Inferior articular surface of tibia
- == articulares inferiores vertebrarum—28:48 =  
Inferior articular surfaces of vertebrae
- == articulares inferiores atlantis—28:57 =  
Inferior articular surfaces of atlas
- articularis lateralis posterior tali—38:75

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- articularis malleoli fibulae—38:58 =  
Articular surface of malleolus of fibula
- articularis malleolaris tibiae—38:44 =  
Malleolar articular surface of tibia
- articularis media calcanei—39:17 =  
Middle articular surface of calcaneus
- articularis medialis anterior tali—39:1
- articularis navicularis tali—39:3 =  
Navicular articular surface of talus
- articularis ossium—28:10 =  
Articular surface of bones
- articularis patellae—38:62 =  
Articular surface of patella
- articularis posterior calcanei—39:18 =  
Posterior articular surface of calcaneus
- articularis posterior epistrophei—29:4 =  
Posterior articular surface of epistropheus
- articularis sternalis claviculae—35:61 =  
Sternal articular surface of clavicle
- articularis superior tibiae—38:22 =  
Superior articular surface of tibia
- == articulares superiores vertebrarum—28:46 =  
Superior articular surfaces of vertebrae
- articularis thyreoidea cartilaginis cricoideae—58:39 =  
Thyroid articular surface of cricoid cartilage
- articularis tuberculi costae—29:38 =  
Articular surface of tubercle of rib
- auricularis oss. ilium—37:29 =  
Auricular surface of iliac bone
- auricularis oss. sacri—29:12 =  
Auricular surface of sacral bone
- basalis cerebri, Toldt—83:39
- [buccalis dentis]—53:25 =  
[Buccal surface of tooth] See  
Facies labialis dentis—53:25
- cerebrialis alae magnae—30:47 =  
Cerebral surface of ala magna
- cerebrialis oss. frontalis—32:30 =  
Cerebral surface of frontal bone
- cerebrialis oss. parietalis—31:71 =  
Cerebral surface of parietal bone

## FACIES

- cerebri<sup>s</sup> squamæ temporalis—  
31:68 =  
Cerebral surface of temporal  
squama
- concava lienis—57:21
- contactus dentis—53:27 =  
Contact surface of tooth
- convexa cerebri—83:37 =  
Convex surface of cerebrum
- convexa lienis—57:19
- costalis lienis—57:19
- costalis pulmonis—59:60 =  
Costal surface of lung
- costalis scapulae—35:38 =  
Costal surface of scapula
- diaphragmatica cordis—67:35 =  
Diaphragmatic surface of heart
- diaphragmatica lienis—57:19 =  
Diaphragmatic surface of spleen
- diaphragmatica pulmonis—59:62 =  
Diaphragmatic surface of lung
- dorsalis antibrachii—27:23 =  
Dorsal surface of forearm
- dorsales digitorum manus—27:40 =  
Dorsal surfaces of digits of hand
- dorsales digitorum pedis—27:72 =  
Dorsal surfaces of digits of foot
- dorsalis oss. sacri—29:6 =  
Dorsal surface of sacral bone
- dorsalis radii—36:25 =  
Dorsal surface of radius
- dorsalis scapulae—35:41 =  
Dorsal surface of scapula
- dorsalis ulnae—36:41 =  
Dorsal surface of ulna
- externa lienis—57:19
- externa ovarii—63:39
- frontalis oss. frontalis—32:8 =  
Frontal surface of frontal bone
- gastrica lienis—57:21 =  
Gastric surface of spleen
- inferior hepatis—56:46 =  
Inferior surface of liver
- inferior hemisphaerii cerebelli—83:2 =  
Inferior surface of hemisphere of  
cerebellum
- inferior [linguae]—53:58 =  
Inferior surface [of tongue]
- [— inferior mesencephali]—83:41 =  
[Inferior surface of mesence-  
phalon]
- inferior ovarii—63:39
- inferior pancreatis—56:33 =  
Inferior surface of pancreas

## FACIES

- inferior pyramidis oss. temporalis—  
31:6 =  
Inferior surface of pyramid of  
temporal bone
- infratemporalis—30:49
- infratemporalis alae magnæ—30:49
- infratemporalis maxillæ—32:72 =  
Infratemporal surface of maxilla
- interceruralis—47:44
- interna lienis—57:21
- interna ovarii—63:38
- interna pulmonis—59:61
- intestinalis uteri—64:4 =  
Intestinal surface of uterus
- labialis [buccalis] dentis—53:25 =  
Labial [buccal] surface of tooth  
See Facies buccalis dentis—53:25
- lateralis brachii—27:17 =  
Lateral surface of arm
- lateralis dentium caninorum—53:29 =  
Lateral surface of canine teeth
- lateralis dentium incisivorum—  
53:29 =  
Lateral surface of incisor teeth
- lateralis femoris—27:48 =  
Lateral surface of thigh
- lateralis fibulae—38:52 =  
Lateral surface of fibula
- lateralis ovarii—63:39 =  
Lateral surface of ovary
- lateralis radii—36:27 =  
Lateral surface of radius
- lateralis testis—61:69 =  
Lateral surface of testis
- lateralis tibiae—38:35 =  
Lateral surface of tibia
- lingualis dentis—53:26 =  
Lingual surface of tooth
- lunata acetabuli—37:12 =  
Lunate surface of acetabulum
- malaris oss. zygomatici—33:51 =  
Malar surface of zygomatic bone
- malleolaris lateralis tali—38:72 =  
Lateral malleolar surface of talus
- malleolaris medialis tali—38:71 =  
Medial malleolar surface of talus
- masticatoria dentis—53:24 =  
Masticatory surface of tooth
- maxillaris oss. palatini—33:34
- maxillaris partis perpendicularis oss.  
palatini—33:34 =  
Maxillary surface of perpendicular  
portion of palatine bone
- medialis brachii—27:18 =  
Medial surface of arm
- medialis cerebri—83:38 =  
Medial surface of cerebrum

## FACIES

- medialis dentium caninorum—53:28=  
Medial surface of canine teeth
- medialis dentium incisivorum  
53:28 =  
Medial surface of incisor tee
- medialis femoris—27:49 =  
Medial surface of thigh
- medialis fibulae—38:51 =  
Medial surface of fibula
- medialis hemisphaerii cerebri—85:76=  
Medial surface of hemisphere of  
cerebrum
- medialis ovarii—63:38 =  
Medial surface of ovary
- medialis testis—61:70 =  
Medial surface of testis
- medialis tibiae—38:33 =  
Medial surface of tibia
- medialis ulnae—36:43 =  
Medial surface of ulna
- mediastinalis pulmonis—59:61 =  
Mediastinal surface of lung
- nasalis maxillae—32:70 =  
Nasal surface of maxilla
- nasalis partis horizontalis oss. pala-  
tini—33:46 =  
Nasal surface of horizontal por-  
tion of palatine bone
- nasalis partis perpendicularis oss.  
palatini—33:33 =  
Nasal surface of perpendicular por-  
tion of palatine bone
- orbitalis alae magnae—30:50 =  
Orbital surface of ala magna
- orbitalis maxillae—32:71 =  
Orbital surface of maxilla
- orbitalis oss. frontalis—32:24 =  
Orbital surface of frontal bone
- orbitalis oss. zygomatici—33:53 =  
Orbital surface of zygomatic bone
- [ossea] cranii—34:21 =  
[Bony] surface of cranium
- palatina partis horizontalis oss. pala-  
tini—33:47 =  
Palatine surface of horizontal por-  
tion of palatine bone
- parietalis lienis, Shepherd—57:19
- parietalis oss. parietalis—31:72 =  
Parietal surface of parietal bone
- patellaris femoris—38:18 =  
Patellar surface of femur
- pelvina oss. sacri—29:7 =  
Pelvic surface of sacral bone
- plantares digitorum pedis—27:73 =  
Plantar surfaces of digits of foot
- posterior brachii—27:16 =  
Posterior surface of arm

## FACIES

- posterior corneae—95:32 =  
Posterior surface of cornea
- posterior cruris—27:56 =  
Posterior surface of leg
- posterior dentium molarium—53:31=  
Posterior surface of molar teeth
- posterior dentium praemolarium—  
53:31 =  
Posterior surface of premolar  
teeth
- posterior femoris—27:47 =  
Posterior surface of thigh
- posterior fibulae—38:53 =  
Posterior surface of fibula
- posterior gl. suprarenalis—61:57 =  
Posterior surface of suprarenal  
gland
- posterior hepatis—56:45 =  
Posterior surface of liver
- posterior humeri—36:3 =  
Posterior surface of humerus
- posterior iridis—96:1 =  
Posterior surface of iris
- posterior lentis—96:55 =  
Posterior surface of lens
- posterior ovarii—63:39
- posterior palpebrarum—97:1 =  
Posterior surface of eyelids
- posterior pancreatis—56:32 =  
Posterior surface of pancreas
- posterior prostatae—62:54 =  
Posterior surface of prostate
- posterior pyramidis oss. temporalis—  
31:5 =  
Posterior surface of pyramid of  
temporal bone
- posterior renis—60:43 =  
Posterior surface of kidney
- posterior tibiae—38:34 =  
Posterior surface of tibia
- posterior uteri—64:4
- publica prostatae—62:53
- rectalis prostatae—62:54
- renalis lienis—57:20 =  
Renal surface of spleen
- sphenomaxillaris alae magnae—  
30:49 =  
Sphenomaxillary surface of ala  
magna
- sternocostalis cordis—67:34 =  
Sternocostal surface of heart
- superior hemisphaerii cerebelli—  
82:74 =  
Superior surface of hemisphere of  
cerebellum
- superior hepatis—56:44 =  
Superior surface of liver



## FACIES

- superior ovarii—63:38
- superior trochleae tali—38:70 =
  - Superior surface of trochlea of talus
- symphyseos oss. pubis—37:51 =
  - Symphyseal surface of pubic bone
- temporalis alae magnae—30:48 =
  - Temporal surface of ala magna
- temporalis oss. frontalis—32:17 =
  - Temporal surface of frontal bone
- temporalis oss. zygomatici—33:52 =
  - Temporal surface of zygomatic bone
- temporales squamae frontalis—32:17
- temporalis squamae temporalis—31:63 =
  - Temporal surface of temporal squama
- ulnaris ulnae—36:43
- urethralis penis—62:71 =
  - Urethral surface of penis
- vesicalis prostatae—62:51
- vesicalis uteri—64:3 =
  - Vesical surface of uterus
- volaris antibrachii—27:24 =
  - Volar surface of forearm
- volares digitorum manus—27:41 =
  - Volar surfaces of digits of hand
- volaris radii—36:26 =
  - Volar surface of radius
- volaris ulnae—36:42 =
  - Volar surface of ulna
- Fallopium, facial canal of—31:14
- ligament of—47:41
- uterine tube of—63:57
- Falx, Falces
  - aponeurotic, inguinal—47:26
  - [aponeurotica] inguinalis—47:26 =
    - Inguinal [aponeurotic] falx
  - cerebelli—87:36 =
    - Falx of cerebellum
  - of cerebellum—87:36
  - cerebri—87:34 =
    - Falx of cerebrum
  - of cerebrum—87:34
    - greater—87:34
    - inguinal—47:26
    - inguinalis—47:26
    - lesser—87:36
    - ligamentosa—42:50
    - ligamentous—42:50
    - major—87:34
    - minor—87:36
- Fascia, Fasciae—24:49; 45:35 =
  - Fascia, Fasciae
    - abdominal, internal—47:50
    - abdominal, internal, deep—47:50

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- abdominalis interna—47:50
- abdominalis interna profunda—47:50
- Abernethy's—49:55
- anal—65:32
- ano-scrotal—65:45
- ano-scrotalis—65:45
- antibrachii—48:49
- antibrachial—48:49
- antibrachii—48:49 =
  - Fascia of forearm
- of arm—48:44
- axillaris—48:40 =
  - Axillary fascia
- axillary—48:40
- bicipital—47:73
- brachial—48:44
- brachialis—48:44
- brachii—48:44 =
  - Fascia of arm
- buccinator—46:43
- buccopharyngea—46:43 =
  - Buccopharyngeal fascia
- buccopharyngeal—46:43
- of bulb, of Tenon—97:7
- bulbi [Tenoni]—97:7 =
  - Fascia of bulb [of Tenon]
- capitis—46:42
- cervical—46:70
- cervical, deep—46:6
- cervicalis—46:70
- clavi-pectoral—47:23
- clavi-pectoralis—47:23
- clitoridis—64:68 =
  - Fascia of clitoris
- of clitoris—64:68
- coli—55:82
- of colon—55:82
- Colles'—65:37
- Colles', penal portion of—63:16
- Colles', perineal portion of—65:45
- Collesi—65:36
- Collesi, Macalister—65:37
- colli—46:70 =
  - Fascia of neck
- columnar—62:47
- common, anterior, of vertebral column—40:46
- of Cooper—62:47
- of Cooper—47:47
- Cooperi—62:47
- Cooperi—47:47
- coracoclavicular—47:23
- coracoclavicularis—47:23 =
  - Coracoclavicular fascia
- coraco-costal—47:23
- coraco-pectoral—47:23
- coraco-pectoralis—47:23

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- costo-coracoid—47:23
- Cowper's—62:47
- cremasteric, of Cooper—62:47
- cremasterica [Cooper]—62:47=
- Cremasteric fascia [of Cooper]
- cribriform—49:69
- cribriform—49:64
- cribriformis—49:64
- cribrosa—49:69 =
- Cribriiform fascia
- cribrosa fossae ovalis—49:69
- crural—49:70
- cruralis—49:70
- cruris—49:70 =
- Fascia of leg
- cruris profunda + superficialis—49:70
- dartos, of scrotum—63:34
- deep, of arm—48:44
- deep, of back—46:5
- deep, of forearm—48:49
- deep, of perineum—65:33
- deep, of thigh—49:49
- dentata hippocampi—86:56 =
- Dentate fascia of hippocampus
- dentata Tarini—86:56
- dentate, of hippocampus—86:56
- dentate, of Tarin—86:56
- denticulate—86:56
- diaphragmatis pelvis inferior—65:32 =
- Inferior fascia of diaphragm of pelvis
- diaphragmatis pelvis superior—65:28 =
- Superior fascia of diaphragm of pelvis
- diaphragmatis urogenitalis inferior—65:37 =
- Inferior fascia of urogenital diaphragm
- diaphragmatis urogenitalis superior—65:36 =
- Superior fascia of urogenital diaphragm
- dorsal, deep—46:5
- dorsal, of foot—50:1
- dorsal, of hand—48:50
- dorsalis manus—48:50 =
- Dorsal fascia of hand
- dorsalis pedis—50:1 =
- Dorsal fascia of foot
- endoabdominal—47:50
- endoabdominalis—47:50
- endogastric—47:50
- endogastrica—47:50
- endopelvic—65:27

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- endopelvina—65:27 =
- Endopelvic fascia
- endothoracic—60:2
- endothoracica—60:2 =
- Endothoracic fascia
- external, of m. levator ani—65:28
- of eyeball—97:7
- femoral—49:49
- femoris—49:49
- of foot—50:1
- of forearm—48:49
- of head—46:42
- hypogastric—65:26
- hypogastrica—65:26
- iliac—49:56
- iliac—49:55
- iliaca—49:55 =
- Iliac fascia
- iliopectinea—49:56 =
- Iliopectineal fascia
- iliopectinea—49:56
- inferior, of diaphragm of pelvis—65:32
- inferior, of urogenital diaphragm—65:37
- infraspinata—48:43 =
- Infraspinous fascia
- infraspinous—48:43
- infundibuliform—62:45
- infundibuliformis—62:45
- intercolumnar—47:47
- intercolumnar—62:47
- intercolumnaris, Scarpae—47:47
- of internal levator ani muscle—65:27
- internal, of m. levator ani—65:27
- interossea dorsalis + volaris brachii—48:44
- interossea dorsalis + plantaris pedis—50:1
- intraabdominal—47:50
- intraabdominalis—47:50
- ischio-prostatic—65:37
- ischio-prostatica—65:37
- ischio-rectal—65:32
- of kidney—60:49
- lata femoris—49:49 =
- Deep fascia of thigh
- lata, ileo-pectineal portion of—49:56
- lata, iliac portion of—49:55
- lata, pectineal portion of—49:61
- lata, pubic portion of—49:61
- of leg—49:70
- longitudinal, anterior—40:46
- longitudinal, posterior—40:47
- longitudinalis anterior—40:46
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- lumbodorsal—46:5

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- lumbodorsalis—46:5 =
  - Lumbodorsal fascia
- = muscular, of eye—97:6
- = musculares oculi—97:6 =
  - Muscular fasciae of eye
- m. levatoris ani externa—65:28
- m. levatoris ani interna—65:27
- m. transversi—47:50
- of m. transversus—47:50
- of nape—46:6
- of neck—46:70
- nuchae—46:6 =
  - Fascia of nape
- obturator—65:40
- obturatoria—65:40 =
  - Obturator fascia
- orbitae—97:4
- = orbital—96:63
- = orbitales—96:63 —
  - Orbital fasciae
- palmar—48:52
- palmaris—48:52
- palpebralis superior + inferior—97:5
- parietal, pelvic, of Waldeyer—65:27
- parotid and masseteric—46:44
- parotidea + masseterica—46:44
- parotideomasseteric—46:44
- parotideomasseterica—46:44 =
  - Parotideomasseteric fascia
- pectinea—49:61 =
  - Pectineal fascia
- pectineal—49:61
- pectoral—47:22
- pectoralis—47:22 =
  - Pectoral fascia
- pedis—50:1
- pelvic—65:26
- pelvic, parietal layer of—65:28
- pelvic, tendinous arch of—65:29
- pelvic, visceral layer of—65:27
- pelvic, visceral part of—65:27
- pelvic, white line of—65:29
- pelvi-prostatic—65:39
- pelvis—65:26 =
  - Fascia of pelvis
- of pelvis—65:26
- pelvis parietalis, Waldeyer—65:27
- pelvis visceralis, Hyrtl—65:27
- penis—63:16 =
  - Fascia of penis
- of penis—63:16
- perinaei—65:33
- perinaei media—65:36
- perinaei profunda—65:33
- perinaei profunda—65:36
- perinaei profunda propria—65:33

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- perinaei profunda propria—65:36
- perinaei superficialis—65:45
- perineal—65:33
- perineal, deep—65:33
- perineal, middle—65:36
- perineal, proper—65:33
- perineal, superficial—65:45
- pharyngeal, internal—54:45
- pharyngis interna—54:49
- pharyngobasilar—54:44
- pharyngobasilaris—54:44 =
  - Pharyngobasilar fascia
- plantar—50:2
- plantaris—50:2
- praevertebralis—46:71 =
  - Prevertebral fascia
- prevertebral—46:71
- profunda dorsi—46:5
- proper, of Cooper—62:45
- proper, of neck—46:70
- propria colli—46:70
- propria Cooperi—62:45
- prostatae—65:39 =
  - Fascia of prostate
- of prostate—65:39
- recta abdominalis—47:39
- rectal—65:28
- recto-abdominal—47:39
- recto-abdominalis—47:39
- recto-vesical, of Macalister—65:27
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- renum—60:49
- of Scarpa—62:47
- of Scarpa—47:47
- Scarpae—62:47
- Scarpae—47:47
- semilunar—47:73
- serrata hippocampi—86:56
- serrated, of hippocampus—86:56
- spermatic—62:45
- spermatic, external—62:47
- spermatic, of Macalister—62:45
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- spermatica, Macalister—62:45
- subcutanea—45:36
- subcutaneous—45:36
- subperitoneal—65:48; 52:13
- subperitonealis—65:48; 52:13
- subscapular—48:41
- subscapularis—48:41 =
  - Subscapular fascia
- superficial—101:19
- superficial—45:36
- superficial, of perineum—65:45
- superficial, of perineum, superficial layer of—65:45

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- superficialis—45:36 =
    - Superficial fascia
  - superficialis corporis—45:36 .
  - superficialis perinaei—65:45
  - superficialis perinei—65:45 =
    - Superficial fascia of perineum
  - superior, of diaphragm of pelvis—65:28
  - of superior surface of levator ani muscle—65:28
  - superior, of urogenital diaphragm—65:36
  - supraspinata—48:42 =
    - Supraspinous fascia
  - supraspinous—48:42
  - of Tarin—86:56
  - Tarini—86:56
  - tecta, Ganser—86:22
  - tectorial, of corpus callosum—86:22
  - temporal—46:45
  - temporalis—46:45 =
    - Temporal fascia
  - of Tenon—97:7
  - Tenoni—97:7
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  - of thigh—49:49
  - thoracic, internal—60:2
  - thoracica interna—60:2
  - transversa—47:50
  - transversa, Hyrtl—47:50
  - transversalis—47:50 =
    - Transversalis fascia
  - transverse—47:50
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  - triangular, of abdomen—47:43
  - triangular, of Macalister—47:27
  - triangular, of Quain—47:43
  - triangularis abdominis—47:43
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  - triangularis, Quain—47:43
  - trigoni urogenitalis—65:33
  - Tyrelli, Macalister—65:27
  - of urogenital trigone—65:33
  - visceral, pelvic, of Hyrtl—65:27
  - volar—48:52
  - volaris—48:52
- Fasciculus, Fasciculi—24:50 =**
- Fasciculus, Fasciculi
  - accessorius—100:70
  - accessorius m. trageci—100:70
  - accessory, of m. trageus—100:70
  - anterior, proper, of Flechsig—81:1
  - anterior proprius [Flechsigi]—81:1 =
    - Anterior fasciculus proper [of Flechsig]
  - anterolateral, superficial, of Gowers—81:5

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- anterolateralis superficialis [Gowersi]—81:5 =
  - Superficial anterolateral fasciculus [of Gowers]
- arcuate, of cerebrum—87:3
- arcuatus cerebri—87:3
- of Burdach—87:9
- Burdachi—87:9
- cerebellospinal—81:4
- cerebellospinalis—81:4 =
  - Cerebellospinal fasciculus
- cerebellosus, Burdach—80:38; 81:7
- cerebral—80:36; 80:54
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- cerebrospinal anterior—80:55
- cerebrospinal lateral—81:3
- cerebrospinalis anterior [pyramidalis anterior]—80:55 =
  - Anterior cerebrospinal [or anterior pyramidal] fasciculus
- cerebrospinalis lateralis [pyramidalis lateralis]—81:3 =
  - Lateral cerebrospinal [or lateral pyramidal] fasciculus
- = corporis restiformis—81:54 =
  - Fasciculi of restiform body
- cortico-spinal—81:54
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- cuneate, of Burdach—81:9
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  - Cuneate fasciculus [of Burdach]
- fibrosus m. bicipitis—47:73
- fibrous, of biceps muscle—47:73
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**GLAND**

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- lateral, of cartilaginous portion of Eustachian tube—100:19
- lateral, of pterygoid process—30:61
- lateralis [cartilaginis] tubae auditivae—100:19 =
  - Lateral lamina [of cartilage] of auditory tube
- lateralis processus pterygoidei—30:61 =
  - Lateral lamina of pterygoid process
- left, of thyreoid cartilage—58:22
- medial, of cartilage of auditory tube—100:18
- medial, of cartilaginous portion of Eustachian tube—100:18
- medial, of pterygoid process—30:62
- medialis [cartilaginis] tubae auditivae—100:18 =
  - Medial lamina [of cartilage] of auditory tube
- medialis processus pterygoidei—30:62 =
  - Medial lamina of pterygoid process
- = mediastinal—60:9
- = mediastinal, of pleura—60:9
- = mediastinales—60:9 =
  - Mediastinal laminae
- = mediastini—60:9
- = medullares cerebelli—83:12 =
  - Medullary laminae of cerebellum
- = medullares thalami—84:73 =
  - Medullary laminae of thalamus
- = medullares thalami optici—84:73
- medullaris transversa corporis quadrigemini—84:11
- = medullary, of cerebellum—83:12
- = medullary, of thalamus—84:73
- medullary, transverse, of corpus quadrigeminum—84:11
- membranacea tubae auditivae—100:20 =
  - Membranous lamina of auditory tube
- membranous, of auditory tube—100:20
- mesenterii propria—65:55 =
  - Lamina proper, of mesentery
- modioli—98:59 =
  - Lamina of modiolus
- of modiolus—98:59
- mucosa membranae tympani—99:41
- mucous, of tympanic membrane—99:41

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- muscularis mucosae—52:7 =
  - Lamina muscularis mucosae
- muscularis mucosae coli—56:6 =
  - Lamina muscularis mucosae of colon
- muscularis mucosae of colon—56:6
- muscularis mucosae intestini tenuis—55:36 =
  - Lamina muscularis mucosae of small intestine
- muscularis mucosae oesophagi—54:76 =
  - Lamina muscularis mucosae of oesophagus
- muscularis mucosae of oesophagus—54:76
- muscularis mucosae recti—56:18 =
  - Lamina muscularis mucosae of rectum
- muscularis mucosae of rectum—56:18
- muscularis mucosae of small intestine—55:36
- muscularis mucosae of stomach—55:21
- muscularis mucosae ventriculi—55:21 =
  - Lamina muscularis mucosae of stomach
- == of nail matrix—101:50
- papyracea—32:46 =
  - Lamina papyracea
- palatina maxillae—33:16
- palatine, of maxilla—33:16
- parietal, of tunica vaginalis proper of testis—62:40
- parietalis tunicae vaginalis propriae testis—62:40 =
  - Parietal lamina of tunica vaginalis proper of testis
- perforata anterior—86:71
- perforata posterior—83:45
- perforate, anterior—86:71
- perforate, posterior—83:45
- perpendicular, of ethmoidal bone—32:40
- perpendicularis oss. ethmoidalis—32:40 =
  - Perpendicular lamina of ethmoidal bone
- pigmenti iridis—96:17
- pigmenti retinae—96:15
- proper, of chorioïd—95:42
- proper, of mesentery—65:55
- proper, of mucosa—52:6
- propria chorioïdeae—95:42

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- propria mucosae—52:6 =
  - Proper lamina of mucosa
- quadrigemina—84:2 =
  - Quadrigeminal lamina
- quadrigeminal—84:2
- of Reichert—95:34
- Reicherti—95:34
- right, of thyreoid cartilage—58:22
- rostral—86:20
- rostralis—86:20 =
  - Rostral lamina
- rostralis corporis callosi, old.—86:70
- of Ruysch—95:43
- Ruyschii—95:43
- septi lucidi—86:33
- septi pellucidi—86:33 =
  - Lamina of septum pellucidum
- septi pellucidi, Burdach—86:20
- of septum lucidum—86:33
- of septum pellucidum—86:33
- of septum pellucidum, of Burdach—86:20
- sinistra cartilaginis thyreoidae—58:22 =
  - Left lamina of thyreoid cartilage
- spiral, accessory—98:65
- spiral, bony—98:60
- spiral, of cochlea—98:9
- spiral, external—98:65
- spiral, nerve foramina of—98:16
- spiral, membranaceous—98:9
- spiral, primary—98:60
- spiral, secondary—98:65
- spiral, soft—98:9
- spiralis accessoria—98:65
- spiralis cochleae—98:9
- spiralis externa—98:65
- spiralis, fossa perforata of—98:15
- spiralis membranacea—98:9
- spiralis mollis—98:9
- spiralis ossea—98:60 =
  - Bony spiral lamina
- spiralis ossea externa—98:65
- spiralis primaria—98:60
- spiralis secundaria—98:65 =
  - Secondary spiral lamina
- spiralis, tympanic lip of—98:15
- spiralis, vestibular lip of—98:17
- submucosa—52:8
- submucosa ventriculi—55:19
- submucous—52:8
- submucous, of stomach—55:19
- suprachorioïd—95:40
- suprachorioïdeae—95:40 =
  - Suprachorioïd lamina
- of Sylvian fossa—87:16



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- terminal, of hypothalamus—84:37
- terminalis hypothalami—84:37 =
  - Terminal lamina of hypothalamus
- tragi—100:31 =
  - Lamina of tragus
- of tragus—100:31
- transversa inferior, Arnold—82:69
- transversa superior—82:68
- transversa superior, Arnold—82:68
- transverse, inferior, of Arnold—82:69
- transverse, superior, of Arnold—82:68
- triangular, of corpus callosum—86:21
- triangular, of Rauber—86:21
- triangularis corporis callosi—86:21
- triangularis, Rauber—86:21
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- unguis—101:50
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- vasculosa chorioideae—95:42 =
  - Vascular lamina of chorioid
- vasculosa ventriculi—55:19
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- vascular, of stomach—55:19
- vascular, of viscera—52:8
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- of vertebrae—28:32
- visceral, of tunica vaginalis proper of testis—62:41
- visceralis tunicae vaginalis propriae testis—62:41 =
  - Visceral lamina of tunica vaginalis proper of testis
- vitrea chorioideae, Arnold—95:44
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- Lanugo—101:28 =
  - Lanugo
- Larynx—26:41; 58:18 =
  - Larynx
- entrance of—59:13
- inferior cavity of—59:33
- pharyngeal fissure of—59:13
- Lateral—23:12
- Lateralis—23:12 =
  - Lateral
- Latus—24:84 =
  - Broad
- Latus—26:59 =
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- external, of muscular tunic of urinary bladder—61:37
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- fibrous, of articular capsule—40:31
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- germinative, of epidermis, of Malpighi—101:14
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- mucous, of tympanic membrane—99:41
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- crypts of, of rectum—56:19
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- intestinal glands of, of rectum—56:19
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- == basium [oss. metacarpalium] interossea—42:35 ==  
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- = basium [oss. metacarpalium] volaria  
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- Volar ligaments of bases [of metacarpal bones]
- = basium [oss. metatarsalium] dorsalia  
—44:14 =
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- = basium [oss. metatarsalium] interossea—44:13 =
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- = basium [oss. metatarsalium] plantaria—44:15 =
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- brachio-cubitale—41:67
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- calcaneonaviculare dorsale—43:64 =
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- calcaneo-naviculare interosseum—43:62
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- capituli costae interarticulare—41:16 =
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- capituli costae radiatum—41:15 =
- Radiate ligament of little head of rib
- capituli costae transversum—41:16
- = capituli fibulae—43:23 =
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- capituli fibulae anterioris, Henle—43:23
- capituli oss. metacarpalium—42:41
- = capitulum [oss. metacarpalium] transversa—42:41 =
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- = capitulum oss. metacarpi plantaria—42:41
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- == capitulum oss. metacarpi volaria—42:41
- == capitulum [oss. metatarsalium] transversa—44:21 ==  
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- capsulare articulationis coxae—42:64
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- capsulare genu—43:4
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- capsulare incudis—99:68
- capsulare internum coxae—42:67
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- Carcassonne—65:36
- carpi accessorium obliquum—42:13
- carpi commune profundum, Arnold—42:16
- carpi dorsale—48:51 ==  
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- carpi dorsale commune—42:16
- carpi dorsale profundum, Henle—42:16
- == carpi interossea—42:19
- carpi radiale, Arnold—42:16
- carpi radiata—42:14
- carpi radiatum—42:14 ==  
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- == ceratocricoidea lateralia—58:42 ==  
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- == cinguli extremitatis inferioris—42:45 ==  
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- == collateralia articulationum metacarpophalangearum—42:39 ==  
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- == collateralia articulationum metatarsophalangearum—44:19 ==  
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- collaterale ulnare—41:67 =  
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- collaterale ulnare carpi—42:15
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- colli costae—41:20 =  
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- colli costae externum—41:22
- colli costae inferius—41:22
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- colli costae intermedium—41:20
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- colli costae superius externum—41:22
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- conoideum—41:51 =  
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- Cooperi—42:60
- coracoacromiale—41:42 =  
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- coraco-brachiale—41:61
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- coraco-claviculare conoideum—41:49
- coraco-claviculare externum—41:50
- coraco-claviculare internum—41:51
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- == coruscantia—41:32
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- costo-vertebrale anterior—41:15
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- == cranii—40:36 =  
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- erico-arytaenoideum—58:66
- == erico-arytaenoidea capsularia—58:65
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- cricopharyngeum—58:60 =  
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- ericoideum—58:45
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- crico-thyreoideum anterius—58:43
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- cricotracheale—58:46 =  
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- cristae pubis—42:60
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- cruciatum atlantis—41:10 =  
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- cruciatum cruris—49:75 =  
Cruciate ligament of leg
- cruciata digitorum manus—48:61 =  
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- cruciata digitorum pedis—50:7 =  
Cruciate ligaments of digits of foot
- cruciatum epistrophei—41:10
- cruciata genu—43:8 =  
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- cruciatum genu posterius—43:10
- cruciatum medium genu—43:10
- cruciatum obliquum genu—43:10
- cruciatum pedis—49:75
- cruciatum posterius genu—43:10 =  
Posterior cruciate ligament of knee
- cruciatum tarsi—49:75
- cruciforme genu—43:9
- cubiti laterale internum—41:67
- cubito-radiale—42:3
- cubito-radiale teres—42:3
- cubito-ulnare, M. J. Weber—41:67
- cubo-cuneiforme dorsale, Lauth—43:59
- cuboideo-metatarseum breve, Barkow—44:9
- cuboideonaviculare dorsale—43:60 =  
Dorsal cuboideonaviclar ligament
- cuboideo-naviculare obliquum—44:3
- cuboideonaviculare plantare—44:3 =  
Plantar cuboideonaviclar ligament
- cubo-naviculare—44:3 + 43:60
- cubo-naviculare dorsale—43:60
- cuneiformia—43:56
- cuneocuboideum dorsale—43:59 =  
Dorsal cuneocuboid ligament

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- cuneocuboideum interosseum—43:55 =  
Interosseous cuneocuboid ligament
- cuneocuboideum plantare—44:5 =  
Plantar cuneocuboid ligament
- cuneometatarsea interossea—44:10 =  
Interosseous cuneometatarsal ligaments
- cuneo-navicularia dorsalia—43:65
- cuneo-navicularia plantaria—44:2
- deltoides pedis, Weitbrecht—43:31
- deltoideum—43:31 =  
Deltoid ligament
- deltoideum cubiti—41:67
- deltoideum pedis—43:31
- denticulatum—87:55 =  
Denticulate ligament
- dentis—41:8
- dentis posticum—41:8
- dorsalia carpi—42:17
- dorsale oss. metatarsi quinti, E. H. Weber—44:8
- dorsale talo-naviculare—43:58
- dorsale talo-naviculare internum, E. H. Weber—43:58
- dorsale talo-naviculare latum, E. H. Weber—43:58
- dorsale talo-naviculare suprema—43:58
- dorsalia transversa—43:57
- ductus venosi—56:57
- duodeno-hepaticum—65:66
- duodeno-mesocolica—66:10 + 66:11  
(- duodenorenale)—66:8 =  
(Duodenorenal ligament)
- epididymidis inferius—62:43 =  
Inferior ligament of epididymis
- epididymidis superius—62:42 =  
Superior ligament of epididymis
- epistrophico-atlantis anterius profundum—41:3
- externum articulationis mandibularis—41:38
- externa plantaria, Barkow—44:4
- falciforme—42:50
- falciforme hepatis—66:3 =  
Falciform ligament of liver
- Falloppii—47:41
- fibrosum anticum + posticum—41:55
- fibrosum externum—58:65
- fibulae anterius, Weitbrecht—43:36
- fibulae medium perpendiculare, Weitbrecht—43:38
- fibulae posterius, Weitbrecht—43:37
- fibulae tali anterius, Barkow—43:36
- fibulae calcanei—43:38

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- fibulare tali anterius externum, Meckel—43:36
- fibulare tali posterius profundum + superficiale—43:37
- ≡ flava—40:40 =
- Ligamenta flava
- fundiforme penis—47:38 =
- Ligamentum fundiforme of penis
- fundiforme, of penis—47:38
- furcillatum superficiale—44:9
- gastrocolicum—65:69 =
- Gastrocolic ligament
- gastro-hepaticum—65:65
- gastrolienale—65:68 =
- Gastrosplenic ligament
- gastro-pancreaticum, Huschke—65:76
- Gimbernati—47:42
- Gimbernati reflexum—47:43
- glenoideum humeri—41:60
- glenoideum, Macalister—41:60
- glosso-epiglotticum—59:26
- glosso-epiglotticum laterale—59:27
- glottidis—58:63
- glottidis spuria—58:62
- glottidis verae—58:63
- Henlei, Braune—47:26
- hepatico-gastricum—65:65
- (- hepatocolicum)—65:67 =
- (Hepatocolic ligament)
- hepatoduodenale—65:66 =
- Hepatoduodenal ligament
- hepatogastricum—65:65 =
- Hepatogastric ligament
- hepato-gastro-duodenale—65:64
- hepatorenale—66:7 =
- Hepatorenal ligament
- hepato-umbilicale—56:56
- Hesselbachi—47:53
- Huecki—96:9
- hyoepiglotticum—58:72 =
- Hyoepiglottic ligament
- hyo-thyreoideum accessorium—58:33
- hyothyreoideum laterale—58:31 =
- Lateral hyothyroid ligament
- hyothyreoideum medium—58:33 =
- Middle hyothyroid ligament
- ilio-costale—41:23
- iliofemorale—42:69 =
- Iliofemoral ligament
- ilio-femorale superius—42:69
- iliolumbale—42:48 =
- Iliolumbar ligament
- ≡ ilio-lumbalia inferius + superius—42:48
- ilio-pectineum—49:56
- ilio-pubicum—47:41

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- ≡ ilio-sacra postica—42:57 + 42:58
- ilio-sacrale anticum—42:55
- ilio-sacrale interosseum—42:56
- ilio-sacrale posterius breve—42:57
- ilio-sacrale posticum profundum—42:58
- ilio-sacrum longum—42:58
- ilio-sacrum posticum—42:58 + 42:57
- ilio-tibiale—49:50
- incudis inferius—99:68
- incudis posterius—99:68 =
- Posterior ligament of incus
- incudis superius—99:67 =
- Superior ligament of incus
- infundibulo-pelvicum—66:34
- inguinale—47:41
- inguinale [Pouparti]—47:41 =
- Inguinal ligament [of Poupart]
- inguinale anterius—47:45
- inguinale, Blumberg—47:53
- inguinale, Cooper—47:42
- inguinale externum—47:41
- inguinale internum—47:45
- inguinale internum—47:53
- inguinale posterius—47:53
- inguinale reflexum [Collesi]—47:43 =
- Reflex inguinal ligament [of Colles]
- interannulare tracheale—59:43
- interarticulare articulationis humeri, Luschka—47:70
- interarticulare chondro-sternale, Quain—41:27
- interarticulare coxae—42:67
- interbasicum dorsale—44:14
- ≡ intercarpea dorsalia—42:17 =
- Dorsal intercarpal ligaments
- ≡ intercarpea interossea—42:19 =
- Interosseous intercarpal ligaments
- ≡ intercarpea volaria—42:18 =
- Volar intercarpal ligaments
- intercartilagineum—41:32
- intercartilagineum—41:31
- interclaviculae—41:57 =
- Interclavicular ligament
- ≡ intercostalia—41:31 =
- Intercostal ligaments
- ≡ intercostalia externa—41:32 =
- External intercostal ligaments
- ≡ intercostalia interna—41:33 =
- Internal intercostal ligaments
- ≡ intercruralia—40:40
- ≡ intercuneiformia interossea—43:56 =
- Interosseous intercuneiform ligaments
- ≡ intercuneiformia plantaria—44:4 =
- Plantar intercuneiform ligaments

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- interfoveolare [Hesselbachi]—47:53 =  
    Interfoveolar ligament [of Hesselbach]
- = interlamnaria—40:40
- intermaxillare—54:52
- intermedium costae—41:20
- intermedium cruris—43:24
- = intermetacarpalia, Günther—42:33
- = intermetacarpea, Henle—42:33
- = intermetacarpea interossea—42:35
- = intermetatarsa interossea, Henle—44:13
- intermusculare brachii externum—48:46
- intermusculare brachii laterale—48:46
- intermusculare brachii mediale—48:45
- intermusculare externum brachii—48:46
- intermusculare femoris laterale—49:51
- intermusculare femoris mediale—49:52
- intermusculare fibulare—49:71
- intermusculare internum brachii—48:45
- intermusculare laterale femoris—49:51
- intermusculare mediale femoris—49:52
- internum articulationis mandibularis—41:39
- = interna interossea, Barkow—44:4
- interosseum antibrachii—42:2
- interosseum costo-vertebrale, Cruveilhier—41:16
- interosseum cruris—43:24
- interosseum cruris, Cruveilhier—43:25
- interosseum genu, Cruveilhier—43:9
- interosseum pubis—42:62
- interosseum pubis, Winslow—65:38
- interosseum transverso-costale, Cruveilhier—41:20
- = interspinalia—40:43 =  
    Interspinous ligaments
- intertarseum, Hyrtl—43:43 + 43:54
- intertransversale—40:42
- = intertransversaria—40:42 =  
    Intertransverse ligaments
- = intervertebralia—40:37
- intestinale coli—56:3
- intestinale laterale—56:3
- intestini caeci, Huschke—66:18
- iridis pectinatum—96:9
- iridis, Stenonis—96:9

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- ischiocapsulare—43:1 =  
    Ischiocapsular ligament
- ischio-femorale—43:1
- = ischio-sacralia—42:51 + 42:49
- jugale—43:7
- jugale, Arnoldi—44:21
- jugale + obliquum—42:14
- jugale, Luschka—58:60 + 58:61
- jugale oss. sesamoideorum pedis, Arnoldi—44:21
- = kerato-cricoidea posteriora inferiora—58:42
- = kerato-cricoidea posteriora superiora—58:44
- kerato-cricoideum anterius—58:43
- laciniatum—49:74 =  
    Ligamentum laciniatum
- laciniatum externum—49:76
- laciniatum medullae spinalis—87:55
- laciniatum, old.—43:67
- lacunare [Gimbernati]—47:42 =  
    Lacunar ligament [of Gimbernati]
- lambdoideum—49:75
- laterale carpi radiale—42:16
- laterale carpi ulnare—42:15
- laterale coli—56:2
- = lateralia dentis epistropheos—41:7
- laterale externum articulationis mandibularis—41:38
- laterale externum articuli pedis, Barkow—43:38
- laterale externum cubiti—41:68
- laterale externum fibulae rectum—43:38
- laterale externum genu—43:13
- laterale externum posticum—43:17
- laterale internum articulationis mandibularis—41:39
- laterale internum articulationis pedis—43:31
- laterale internum cubiti—41:67
- = lateralia postica—42:56
- laterale radiale—42:16
- latum colli uteri—66:29
- latum epistrophei, Henle—41:11
- latum pulmonis—60:16
- latum uteri—66:29 =  
    Broad ligament of uterus
- longitudinale abdominis—47:34
- longitudinale anterius—40:46 =  
    Anterior longitudinal ligament
- longitudinale medium—40:47
- longitudinale posterius—40:47 =  
    Posterior longitudinal ligament
- longitudinale posterius, Barkow—40:44

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- longum digitorum manus, Marshall—  
48:57
- lumbocostale—41:23 =  
Lumbocostal ligament
- lunato-naviculare—42:19
- lunato-pyramidale—42:19
- lunato-scaphoideum—42:19
- lunato-triquetrum—42:19
- = Luschka—67:43
- Maissiati—49:50
- mallei anterior—99:64 =  
Anterior ligament of malleus
- mallei externum—99:66
- mallei internum—99:66
- mallei posterior, old.—99:66
- mallei laterale—99:66 =  
Lateral ligament of malleus
- mallei radiatum—99:64
- mallei superius—99:65 =  
Superior ligament of malleus
- malleoli externi intermedium—43:25
- malleoli fibulae—99:66
- malleoli lateralis anterior—43:26 =  
Anterior ligament of lateral mal-  
leolus
- malleoli lateralis posterior—43:27 =  
Posterior ligament of lateral mal-  
leolus
- manubrii mallei—99:66
- Maucharti—41:7
- maxillare laterale—41:38
- maxillare mediale—41:39
- Mayeri—42:14
- medianum glandis, Waldeyer—62:74
- medium anticum dentis epistrophei—  
41:8
- medium coli costae—41:20
- medium dentis posticum, Barkow—  
41:8
- medium posticum dentis epistrophei—  
41:8
- = metatarsi anteriora—44:21
- metatarsi anterior plantare—44:21
- metatarsi laterale, Weitbrecht—44:13
- metatarsi medium, J. F. Meckel—  
44:13
- metatarsi proprium laterale, E. H.  
Weber—44:13
- = mucosa—40:33
- = mucosa, old.—48:57
- mucosum genu—43:11
- mucosum marsupiale—43:11
- mucosum patellae—43:11
- natatorium, Grapow—48:53
- = naviculari-cuboidea—43:60

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- = navicularicuneiformia dorsalia —  
43:65 =  
Dorsal navicularicuneiform liga-  
ments
- = navicularicuneiformia plantaria —  
44:2 =  
Plantar navicularicuneiform liga-  
ments
- = nitentia—41:32
- nuchae—40:45 =  
Ligamentum nuchae
- obliquum antibrachii—42:3
- obliquum, Cooperi—42:3
- obliquum + rectum—42:13
- obliquum scapulae—41:43
- obtectum corporis callosi—86:23
- = obturatoria atlantis—41:3 + 41:4
- obturatorium atlanto-occipitale—41:3
- obturatorium pelvis—42:46
- obturatorium posticum—41:4
- obturatorium stapedis—99:69
- occipito-axiale posterius—41:11
- occipito-axoidale—41:11
- odontoideum—41:7
- orbiculare radii—41:69
- = ossiculorum auditus—99:63 =  
Ligaments of ossicles of hearing
- = oss. cuneiformium—43:56 + 44:4
- oss. ilium longum—42:58
- oss. ilium superficiale—42:58
- oss. metatarsi quinti, E. H. Weber—  
44:9
- oss. metatarsi secundi plantare—44:9
- oss. metatarsi tertii obliquum +  
rhomboides—44:9
- ovarii—63:56
- ovarii proprium—63:56 =  
Proper ligament of ovary
- ovario-pelvicum—66:34
- palmare—48:52
- palpebrale externum—97:26
- palpebrale laterale—97:26
- palpebrale mediale—97:25 =  
Medial palpebral ligament
- patellae—43:18 =  
Ligament of patella
- patellae anterior, Cruveilhier—43:18
- patellae externum, Nuhn—43:20
- patellae, Henle—43:19 + 43:20
- patellae internum, Nuhn—43:20
- patellae laterale—43:20
- patellae mediale, Henle—43:19
- patellae medium, Nuhn—43:18
- patellae proprium—43:18
- patellae inferius—43:18
- patellare laterale, Henle—43:20

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- patellare mediale, Henle—43:19
- patellare proprium—43:18
- pectinatum iridis—96:9 =  
Pectinate ligament of iris
- pelvio-prostaticum capsulare—65:39
- pelvis anteriora inferius + superius—  
42:48
- pelvis anterior inferius + superius—  
42:48
- pelvis posterior magnum, Meckel—  
42:49
- pelvis posterior parvum—42:51
- pelvis posticum—42:58
- perinaeale, Carcassone—65:38
- petioli epiglottidis, Tourtual—58:71
- petro-sphenoideum—35:25
- petro-sphenoideum anterior—35:25
- petro-sphenoideum anterior—35:26
- pharyngeum—54:51
- pharyngeum medium—54:51
- phrenicocolicum—66:1 =  
Phrenicocolic ligament
- phrenicolienale—66:2 =  
Phrenicosplenic ligament
- phreno-splenicum—66:2
- pinnae, Macalister—100:63
- pisohamatum—42:22 =  
Pisohamate ligament
- pisometacarpeum—42:23 =  
Pisometacarpal ligament
- plantare longum—43:67 =  
Long plantar ligament
- planum sinus tarsi, Weitbrecht—43:43
- pleuro-colicum—66:1
- popliteum—43:15
- popliteum arcuatum—43:16 =  
Arcuate popliteal ligament
- popliteum internum—43:15
- popliteum obliquum—43:15 =  
Oblique popliteal ligament
- popliteum posticum—43:15
- popliteum superficiale—43:15
- popliteum superius—43:15
- popliteum superius, W. Krause—  
43:16
- posterius longum pelvis, Weitbrecht—  
42:58
- posterius mallei internum—99:66
- posterius superficiale genu—43:15
- Pouparti—47:41
- praeurethrale, Waldeyer—65:38
- prismaticum, Weitbrecht—42:67
- processus brevis incudis—99:68
- proprium cartilaginum costalium—  
41:32
- propria dorsalia metacarpi—42:33

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- proprium dorsale metacarpi, E. H. Weber—42:33
- proprium dorsale tarsi, E. H. Weber—  
44:14
- proprium patellae, Cruveilhier—43:20
- proprium patellae, Cruveilhier—43:19
- proprium scapulae minimum—41:44
- proprium scapulae minus—41:43
- pterygo-mandibulare—54:52
- pterygo-maxillare—54:52
- pterygo-petrosum, Civinini—40:53
- pterygospinosum—40:53 =  
Pterygospinosum ligament
- pubicum, Cooperi—42:60
- pubicum superius—42:60 =  
Superior pubic ligament
- pubio-rectale, Devouilliers—65:30
- pubis anterior, Cruveilhier—42:62
- pubis, Cowper—47:41
- pubis inferior, Cruveilhier—42:61
- pubocapsulare—43:2 =  
Pubocapsular ligament
- pubo-femorale—43:2
- pubo-ischiadicum prostatae—65:36
- puboprostaticum [pubovesicale] lat-  
erale—65:31 =  
Lateral puboprostatic [or pubo-  
vesical] ligament
- puboprostaticum [pubovesicale] me-  
dium—65:30 =  
Middle puboprostatic [or pubo-  
vesical] ligament
- [— pubovesicale laterale]—65:31 =  
[Lateral pubovesical ligament]  
See Lig. puboprostaticum later-  
ale—65:31
- [— pubovesicale medium]—65:30 =  
[Middle pubovesical ligament]  
See Lig. puboprostaticum me-  
dium—65:30
- pulmonale—60:16 =  
Pulmonary ligament
- pulmonis—60:16
- pylori—55:14 =  
Ligaments of pylorus
- radiale articulationis cubito-carpalis,  
Meckel—42:16
- radiatum costae—41:15
- radiatum, Mayeri—42:14
- radiocarpeum dorsale—42:12 =  
Dorsal radiocarpal ligament
- radiocarpeum volare—42:13 =  
Volar radiocarpal ligament
- recto-uterinum—64:22
- rectum longitudinale—44:15
- rectum longitudinale metatarsi, Weit-  
brecht—44:9

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- rectum medium, Meckel—41:8
- reflexum, Gimbernati—47:43
- retrahens tubae—54:39
- rhomboides claviculae—41:56
- rhomboideum manus—42:12
- rotundum acetabuli—42:67
- rotundum uteri—64:23
- sacciforme—42:5
- **sacrococcygeum anterius—40:51 =**  
Anterior sacrococcygeal ligament
- **sacrococcygeum laterale—40:52 =**  
Lateral sacrococcygeal ligament
- sacro-coccygeum medium, W. Krause  
—40:50
- sacro-coccygeum posterius, Arnold—  
40:50
- sacro-coccygeum posterius, C. Krause  
—40:49
- sacro-coccygeum posterius breve,  
Barkow—40:52
- **sacrococcygeum posterius profundum**  
—40:50 =  
Deep posterior sacrococcygeal liga-  
ment
- **sacrococcygeum posterius superficiale**  
—40:49 =  
Superficial posterior sacrococcygeal  
ligament
- sacro-coccygeum posticum profundum  
—40:50
- sacro-coccygeum posticum super-  
ficiale—40:49
- == sacro-iliaca accessoria vaga—42:56
- == **sacroiliaca anteriora—42:55 =**  
Anterior sacroiliac ligaments
- == **sacroiliaca interossea—42:56 =**  
Interosseous sacroiliac ligaments
- sacro-iliacum obliquum—42:58
- **sacroiliacum posterius breve—42:57 =**  
Short posterior sacroiliac ligament
- **sacroiliacum posterius longum—**  
42:58 =  
Long posterior sacroiliac ligament
- sacro-iliacum posticum—42:58
- sacro-iliacum superius inferius —  
42:55
- == sacro-iliaca vaga anteriora—42:55
- == sacro-iliaca vaga posteriora—42:56
- sacro-iliacum vertebrale posterius,  
Cruveilhier—42:58
- sacro-ischadicum internum—42:51
- sacro-ischadicum majus—42:49
- sacro-ischadicum minus—42:51
- **sacrospinosum—42:51 =**  
Sacrospinous ligament
- sacro-spinosum, Bichat—42:58

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- **sacrotuberosum—42:49 =**  
Sacrotuberous ligament
- sacro-uterinum—64:22
- salpingo-pharyngeum—54:39
- Santorini—58:60
- scapho-cuboideum dorsale—43:60
- scapho-cuneiforme dorsale—43:65
- scapho-cuneiforme, Lauth—44:2
- scaphoideo-cuboideum dorsale, J. F.  
Meckel—43:60
- scaphoideo-sphenoideum dorsale ex-  
ternum, Barkow—43:65
- scaphoideo-sphenoideum dorsale in-  
ternum, Barkow—43:65
- scapulae posterius—41:43
- scapulae proprium—41:43
- scapulae proprium posterius—41:43
- scapulae proprium transversum an-  
terius—41:42
- scapulae proprium transversum  
majus—41:42
- scapulae proprium transversum tri-  
angulare—41:42
- scapulae proprium transversum tri-  
quetrum—41:42
- Scarpae—49:67
- sclerotico-chorioidale—95:50
- scrotale testis—62:49
- **serosum—52:15 =**  
Serous ligament
- serratum medullae spinalis—87:55
- sphenoideo-cuboideum dorsale trans-  
versum, Barkow—43:59
- sphenoideo-cuboideum plantare in-  
ternum, Barkow—44:9
- sphenoideo-tarseum, Barkow—44:9
- sphenoideo-externum—44:4
- sphenoideum externum plantare,  
Barkow—44:4
- sphenoideum internum interosseum  
anterius, Barkow—44:4
- sphenoideum internum interosseum  
inferius, Barkow—44:4
- sphenoideum internum interosseum  
posterius, Barkow—44:4
- sphenoideum internum interosseum  
superius, Barkow—44:4
- **sphenomandibulare—41:39 =**  
Sphenomandibular ligament
- spheno-maxillare—41:39
- spheno-petrosum anterius—35:26
- spino-glenoideum, Macalister—41:44
- spino-glenoideum, Quain—41:44
- spinoso-sacrum—42:51
- spirale—98:11
- spirale accessorium, Waldeyer—98:12

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- spirale cochleae—98:11 =  
Spiral ligament of cochlea
- splenico-gastricum—65:68
- sternoclaviculare—41:55 =  
Sternoclavicular ligament
- sterno-claviculare anterius—41:56
- sternocostale interarticulare—41:27 =  
Interarticular sternocostal ligament
- sternocostalia radiata—41:28 =  
Radiate sternocostal ligaments
- sternopericardiaca—67:43 =  
Sternopericardiac ligaments
- stylohyoideum—40:54 =  
Stylohyoid ligament
- stylomandibulare—41:40 =  
Stylomandibular ligament
- stylo-maxillare—41:40
- stylo-mylohyoideum—41:40
- subflava—40:40
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- Spigeli—47:49
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## MEATUS

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- extensor digitorum tibialis, v. Bardeleben—49:17
- extensor dorsi communis—45:25 + 45:49 + 45:53 + 45:54
- extensor hallucis brevis—49:34 ==  
Short extensor muscle of hallux
- extensor hallucis longus—49:19 ==  
Long extensor muscle of hallux
- extensor hallucis profundus—49:34
- extensor indicis—48:28
- extensor indicis proprius—48:28 ==  
Extensor muscle proper of index finger
- == extensores interossei manus—48:38
- extensor minimi digiti—48:22
- extensor oss. metacarpi pollicis, Sharpey—48:25
- extensor pediacus externus—49:35
- extensor pedis minor, Douglas—49:29
- extensor pollicis brevis—48:26 ==  
Short extensor muscle of pollex
- extensor pollicis longus—48:27 ==  
Long extensor muscle of pollex
- extensor pollicis major—48:27
- extensor pollicis minor—48:26
- extensor pollicis tertius, Leidy—48:27
- extensor primi internodii, Walther—49:34
- extensor primi internodii hallucis, Walther—49:34
- extensor primi internodii pollicis—48:26
- extensor proprius hallucis—49:19
- extensor quadriceps—48:75
- extensor secundi internodii pollicis—48:27
- extensor triceps—47:76
- extensor triceps antibrachii—47:76
- extensor triceps cubiti—47:76
- extensor triceps femoris, Cruveilhier—48:77
- extensor triceps pedis—49:22
- == externi pedis—49:47
- externus oculi—96:68
- == extremitatis inferioris—48:62 ==  
Muscles of inferior extremity
- == extremitatis superioris—47:62 ==  
Muscles of superior extremity
- == faucium—54:23 ==  
Muscles of fauces
- fascialis—48:76
- fascialis—48:70
- femoralis—49:1
- femoreus—49:1
- fibularis brevis—49:21
- fibularis longus—49:20

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- = fidicinales—48:37
- [- fixator baseos stapedis]—99:71 =
  - [Fixator muscle of base of stapes]
- fixator labii superioris—46:14
- flexor accessorius digitorum—49:45
- flexor accessorius pedis—49:45
- flexor antibrachii radialis—47:69
- flexor antibrachii ulnaris—47:75
- flexor brevis minimi digiti manus—48:35
- flexor brevis minimi digiti pedis—49:42
- = flexores breves profundi manus, v. Bardeleben—48:39
- flexor carpi radialis—48:6 =
  - Radial flexor muscle of wrist
- flexor carpi ulnaris—48:8 =
  - Ulnar flexor muscle of wrist
- flexor caudae—47:60
- flexor cruris externus—49:11
- flexor cruris fibularis—49:11
- flexor cruris fibularis—49:10
- flexor digiti minimi manus brevis—48:35
- flexor digiti minimi pedis brevis—49:42
- flexor digiti quinti brevis manus—48:35 =
  - Short flexor muscle of fifth digit of hand
- flexor digiti quinti brevis pedis—49:42 =
  - Short flexor muscle of fifth digit of foot
- flexor digitorum brevis—49:44 =
  - Short flexor muscle of digits
- flexor digitorum brevis pedis—49:44
- flexor digitorum communis—49:32
- flexor digitorum communis profundus—48:14
- flexor digitorum fibularis, F E Schultze—49:33
- flexor digitorum longus—49:32 =
  - Long flexor muscle of digits
- flexor digitorum longus pedis—49:32
- flexor digitorum manus communis profundus—48:14
- flexor digitorum manus communis sublimus—48:11
- flexor digitorum manus perforans—48:14
- flexor digitorum manus perforatus—48:11
- = flexores digitorum manus profundus—48:39

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- flexor digitorum manus superficialis—48:11
- flexor digitorum pedis brevis—49:44
- flexor digitorum pedis communis longus—49:32
- flexor digitorum pedis longus—49:32
- flexor digitorum pedis perforans—49:32
- flexor digitorum pedis perforatus—49:44
- flexor digitorum pedis peroneus, Testut—49:33
- flexor digitorum pedis sublimus—49:44
- flexor digitorum pedis tibialis, F. E. Schulze—49:32
- flexor digitorum perforans—49:32
- flexor digitorum perforans—48:14
- flexor digitorum perforatus—49:44
- flexor digitorum perforatus—48:11
- flexor digitorum profundus—48:14 =
  - Deep flexor muscle of digits
- flexor digitorum sublimus—48:11 =
  - Sublime flexor muscle of digits
- flexor digitorum sublimus—49:44
- flexor digitorum superficialis—48:11
- flexor digitorum tibialis—49:32
- flexor digitorum tibialis, v Bardeleben—49:32
- flexor digitorum tibialis, Testut—49:32
- flexor femoris—48:63
- flexor hallucis brevis—49:37 =
  - Short flexor muscle of hallux
- flexor hallucis longus—49:33 =
  - Long flexor muscle of hallux
- flexor manus medius—48:7
- flexor manus radialis—48:6
- flexor manus ulnaris—48:8
- flexor oss. metacarpi pollicis—48:32
- flexor perforans pedis—49:32
- flexor perforatus pedis—49:44
- flexor pollicis brevis—48:31 =
  - Short flexor muscle of pollex
- flexor pollicis longus—48:15 =
  - Long flexor muscle of pollex
- flexor pollicis proprius longus—48:15
- flexor radii—47:69
- Follii—99:66
- frontalis—46:9 =
  - Frontal muscle
- fusiformis—45:5 =
  - Fusiform muscle
- gastrocnemius—49:23 =
  - Gastrocnemius muscle
- gastrocnemius externus—49:23



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- gastrocnemius internus—49:25
- gastrocnemius internus—49:26
- gastrocnemius lateralis—49:24
- gastrocnemius longus—49:24
- gastrocnemius medialis—49:25
- gastrocnemius + M. soleus + Tendo Achillis—49:22
- gemellus inferior—48:74 =  
Inferior gemellus muscle
- gemellus superior—48:73 =  
Superior gemellus muscle
- genioglossus—54:2 =  
Genioglossus muscle
- genio-hyo-glossus—54:2
- geniohyoideus—46:52 =  
Geniohyoid muscle
- genio-pharyngeus—54:57
- gleno-radialis—47:70
- glossopalatinus—54:27 =  
Glossopalatine muscle
- glossopharyngeus—54:57 =  
Glossopharyngeal muscle
- glosso-staphylinus—54:27
- gluteus lateralis—48:70
- gluteus magnus—48:67
- gluteus major—48:67
- gluteus maximus—48:67 =  
Greatest gluteal muscle
- gluteus medius—48:68 =  
Middle gluteal muscle
- gluteus minimus—48:69 =  
Least gluteal muscle
- gluteus minor—48:69
- gluteus primus—48:67
- gluteus profundus, Lesbre—48:69
- gluteus secundus—48:68
- gluteus tertius—48:69
- gluteus major—48:67
- gluteus maximus—48:67
- gluteus medius—48:68
- gluteus minor—48:69
- gluteus minimus—48:69
- gnatho-pharyngeus—54:53
- gracilis—49:6 =  
Gracilis muscle
- gracilis surae—49:29
- gracillimus surae—49:29
- Guthrii—65:35
- Guthrii—65:34
- helicis major—100:67 =  
Larger muscle of helix
- helicis minor—100:68 =  
Smaller muscle of helix
- hippicus—49:16
- Hiltoni, macalister—58:77
- Horneri—46:19
- humilis—96:66

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- hyo-adenoideus, Juvara—46:62
- hyo-cerato-pharyngeus, Douglas—54:61
- hyoglossus—54:3 =  
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- hyo-pharyngeus—54:59
- hyo-thyroideus—46:61
- ileo-tibialis—48:70
- iliaco-psyas—48:63
- iliacus—48:64 =  
Iliac muscle
- iliacus externus—48:71
- iliacus externus, old.—48:68
- iliacus internus—48:64
- ileo-aponeuroticus—48:70
- iliocostalis—45:26 =  
Iliocostal muscle
- iliocostalis cervicis—45:29 =  
Iliocostal muscle of neck
- iliocostalis dorsi—45:28 =  
Iliocostal muscle of back
- iliocostalis lumborum—45:27 =  
Iliocostal muscle of loins
- ilio-costo-cervicalis—45:26
- ilio-costo-cervicalis—45:25
- ilio-lumbalis—48:63
- iliopsoas—48:63 =  
iliopsoas muscle
- ilio-tibialis, Lannegrace—48:67 + 48:70
- immersus—47:68
- incisivi inferiores—46:36
- incisivi labii inferioris—46:36 =  
Incisive muscles of inferior lip
- incisivi labii superioris—46:35 =  
Incisive muscles of superior lip
- incisivi superiores—46:35
- incisivus inferior—46:37
- incisorius—46:30
- incisurae auriculae—100:74
- incisurae cartilaginis meatus acustici externi—100:74
- (— incisurae helicis [Santorini])—100:74 =  
(Muscle of incisure of helix [of Santorini])
- incisurae majoris auriculae—100:74
- indicator—48:28
- indicatorius—48:28
- indignatorius oculi—96:68
- infracostales—47:7
- infracostalis anterior—47:8
- infrascapularis—47:68
- infraspinatus—47:65 =  
Infraspinous muscle
- inspiratorii—47:5

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- = interaccessorii—45:61
- = interarticulares lumborum—45:61
- = interarytaenoidei—59:9 + 59:10
- interarytaenoideus, superficial layer of—59:9
- interarytaenoideus transversus, Furbringer—59:10
- = intercostales externi—47:5 =  
External intercostal muscles
- = intercostales interni—47:6 =  
Internal intercostal muscles
- = intercostales interni longi, Pardi—47:7
- = intercostales longi—45:30
- = intercostarii—45:60
- interfoveolaris—47:53
- = interossei bicipitis manus—48:38
- = interossei bicipitis pedis—49:47
- = interossei dorsales manus—48:38 =  
Dorsal interosseous muscles of hand
- = interossei dorsales pedis—49:47 =  
Dorsal interosseous muscles of foot
- = interossei externi manus—48:38
- = interossei externi pedis—49:47
- = interossei interni—49:48
- = interossei interni manus—48:39
- = interossei interni pedis—49:48
- interosseus internus primus—49:39
- interosseus manus posterior—48:38
- = interossei palmares—48:39
- = interossei pedis—49:47
- interosseus pedis inferior—49:48
- interosseus pedis superior—49:47
- = interossei plantares—49:48 =  
Plantar interosseous muscles
- = interossei plantares pedis—49:48
- = interossei volares—48:39 =  
Volar interosseous muscles
- = interossei volares manus—48:39
- = interspinales—45:58 =  
Interspinal muscles
- = interspinales supernumerarii—45:4
- intertragicus, Jung—100:74
- = intertransversales laterales—45:63
- = intertransversales mediales—45:61
- = intertransversarii—45:60
- = intertransversarii—45:59 =  
Intertransverse muscles
- = intertransversarii anteriores—45:62 =  
Anterior intertransverse muscles
- = intertransversarii laterales—45:60 =  
Lateral intertransverse muscles
- = intertransversarii mediales—45:61 =  
Medial intertransverse muscles

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- = intertransversarii posteriores—45:63 =  
Posterior intertransverse muscles
- intestini recti—65:21
- = intracostales—47:7
- ischio-caudalis—47:59; 65:23
- ischio-caudalis, Zuckerkandl—47:59; 65:23
- ischiocavernosus—65:43 =  
Ischiocavernous muscle
- ischio-cavernosus muliebris—65:43
- ischio-coccygeus—47:59; 65:23
- ischio-coccygeus, Holl—47:59; 65:23
- ischio-femorialis—49:8
- ischio-perinaealis—65:42
- ischio-urethralis—65:35
- ischio-urethralis—65:34
- jugo-maxillaris—46:38
- Jungi—100:70
- labialis, Testut—46:23
- lacrimalis—46:19
- lacrymalis—46:19
- lacrymalis posterior—46:19
- = laryngis—58:76 =  
Muscles of larynx
- laryngo-pharyngeus—54:62
- lateralis nasi, Hyrtl—46:14
- latissimus colli—46:54
- latissimus dorsi—45:17 =  
Latissimus dorsi muscle
- laxator tympani major—99:64
- laxator tympani minor—99:66
- levator alae nasi—46:14
- levator anguli oris—46:33
- levator anguli oris superior—46:
- levator anguli scapulae—45:20
- levator ani—65:21 =  
Levator ani muscle
- levator ani + ischio-coccygeus, old.—65:21
- levator auriculae—46:21
- levator coccygis—47:59; 65:23
- levator coccygis, Morgagni—47:61
- levator corporis thyroidei—46:62
- = levatores costarum—47:2 =  
Levator muscles of ribs
- = levatores costarum breves—47:4 =  
Short levator muscles of ribs
- = levatores costarum longi—47:3 =  
Long levator muscles of ribs
- (— levator glandulae thyroideae)—46:62 =  
(Levator muscle of thyroid gland)
- levator humeri—47:63
- levator humeri internus, Arnold—47:74
- levator intestini recti—65:21

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- levator labii inferioris—46:37
- levator labii superioris—46:28
- levator labii superioris alaeque nasi—46:28
- levator labii superioris major—46:30
- levator labii superioris minor—46:31
- levator labii superioris proprius—46:30
- levator labiorum communis—46:33
- levator menti—46:37
- levator palati—54:24
- levator palati mollis—54:24
- levator palpebrae—97:3
- levator palpebrae superioris—97:3 ==  
Levator muscle of superior eyelid
- levator penis—65:44
- == levatores pharyngis—54:28+54:43
- levator pharyngis—54:43
- levator pharyngis externus—54:43
- levator pharyngis internus, Theile—54:28
- levator proprius scapulae, Bourgelat—45:20
- levator prostatae—61:40
- levator prostatae, Waldeyer—61:40
- levator scapulae—45:20 ==  
Levator muscle of scapula
- levator tympani minor—99:64
- levator uvulae—54:26
- levator veli palatini—54:24 ==  
Levator muscle of palatine velum
- == linguae—54:1 ==  
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- lingualis—54:7
- lingualis inferior—54:7
- lingualis externus perpendicularis, Zaglas—54:9
- lingualis longitudinalis superior—54:6
- lingualis profundus—54:7
- lingualis superficialis—54:6
- lingualis superior—54:6
- lividus—49:4
- longissimus—45:30 ==  
Longissimus muscle
- longissimus capitis—45:44 ==  
Longissimus muscle of head
- longissimus cervicis—45:32 ==  
Longissimus muscle of neck
- longissimus dorsi—45:31 ==  
Longissimus muscle of back
- longitudinalis inferior linguae—54:7 ==  
Inferior longitudinal muscle of tongue
- longitudinalis superior linguae—54:6 ==  
Superior longitudinal muscle of tongue

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- longus capitis—46:64 ==  
Long muscle of head
- longus colli—46:63 ==  
Long muscle of neck
- longus colli + M. atlantis, Henle—46:63
- lumbaris internus—48:65
- lumbo-costalis—45:26
- lumbo-costalis—45:25
- == lumbricales manus—48:37 ==  
Lumbrical muscles of hand
- == lumbricales pedis—49:46 ==  
Lumbrical muscles of foot
- mallei—99:73
- mallei anterior—99:64
- mallei externus—99:64
- mallei externus minor—99:66
- mallei internus—99:73
- mandibularis externus—46:38
- mandibularis—46:38
- marsupialis—48:72
- masseter—46:38 ==  
Masseter muscle
- masseter internus—46:41
- mastoideus colli—46:55
- maxillae inferioris—46:47
- medialis veli, v. Kostanecki—54:26
- membranosus—48:70
- mensalis—45:15
- mentalis—46:37 ==  
Chin muscle.
- menti—46:37
- mento-labialis—46:32
- == metacarpales externi—48:38
- == metacarpales interni—48:39
- == metatarsales externi—49:47
- == metatarsales interni—49:48
- motor uvulae—54:26
- Muelleri—95:53
- multangularis superior—46:33
- multifidus—45:53 ==  
Multifidus muscle
- multifidus spinae—45:53
- mylo-glossus, Douglas—54:56
- mylohyoideus—46:51 ==  
Mylohyoid muscle
- mylopharyngeus—54:56 ==  
Mylopharyngeal muscle
- myrtiformis—46:14
- nasalis—46:12 ==  
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- nasalis labii superioris—46:15
- naso-labialis—46:15
- nauticus—49:31
- noto-glossus—54:6

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- novus, Santorini—46:26
- nutator capitis—46:55
- obliquus abdominis externus—47:28
- obliquus ascendens—47:29
- obliquus ascendens—47:29
- obliquus auriculæ—100:73 ==  
Oblique muscle of auricle
- obliquus brevis oculi—97:2
- obliquus capitis inferior—46:4 ==  
Inferior oblique muscle of head
- obliquus capitis major—46:4
- obliquus capitis minor—46:3
- obliquus capitis superior—46:3 ==  
Superior oblique muscle of head
- obliquus descendens—47:28
- obliquus externus abdominis—47:28 ==  
External oblique muscle of abdomen
- obliquus inferior oculi—97:2 ==  
Inferior oblique muscle of eye
- obliquus internus abdominis—47:29 ==  
Internal oblique muscle of abdomen
- obliquus longus—96:71
- obliquus longus oculi—96:71
- obliquus major oculi—96:71
- obliquus minor oculi—97:2
- obliquus profundus abdominis—47:29
- obliquus superficialis abdominis—  
47:28
- obliquus superior oculi—96:71 ==  
Superior oblique muscle of eye
- obturator coccygeus—47:59; 65:23
- obturator coccygeus, Savage—47:59;  
65:23
- obturator externus—49:10 ==  
External obturator muscle
- obturator internus—48:72 ==  
Internal obturator muscle
- occipitalis—46:10 ==  
Occipital muscle
- occipitalis minor, Santorini—45:16
- occipito-frontalis, old—46:8
- == oculi—96:63 ==  
Muscles of eye
- olecrano-epitrochlearis—48:2
- omo-anconæus—47:77
- omohyoideus—46:57 ==  
Omohyoid muscle
- opistho-thenar—45:25
- opponens digiti minimi manus—48:36
- opponens digiti minimi pedis—49:43
- opponens digiti quinti manus—48:36 ==  
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- opponens digiti quinti pedis—49:43 ==  
Opposing muscle of fifth digit of foot
- opponens pollicis—48:32 ==  
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- orbicularis—45:9 ==  
Orbicular muscle
- orbicularis ani—65:24
- orbicularis internus—46:17
- orbicularis latus—46:16
- orbicularis oculi—46:16 ==  
Orbicular muscle of eye
- orbicularis oculi Horneri—46:19
- orbicularis oris—46:23 ==  
Orbicular muscle of mouth
- orbicularis palpebrarum—46:16
- orbicularis urethrae—65:35
- orbitalis—96:64 ==  
Orbital muscle
- orbitalis externus—46:18
- orbitalis, Henle—46:18
- orbitalis inferior—96:64
- orbitalis et malaris—46:18
- orbitalis, old.—46:18
- orbito-palpebralis—97:3
- orbito-palpebralis, Sappey—97:29
- osculatorius—46:23
- == ossiculorum auditus—99:72 ==  
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- == oss. hyoidei—46:46 ==  
Muscles of hyoid bone
- == palati et faucium—54:23 ==  
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- palato-glossus—54:27
- palato-pharyngeus—54:28
- palato-salpingeus—54:25
- palato-staphylinus—54:26
- palmaris brevis—48:29 ==  
Short palmar muscle
- palmaris cutaneus—48:29
- palmaris longus—48:7 ==  
Long palmar muscle
- palmaris magnus—48:6
- palmaris major—48:6
- palpebralis inferior—97:30
- palpebralis inferior, Müller—97:30
- palpebralis superior—97:29
- palpebralis superior, Müller—97:29
- == papillares—67:60 ==  
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- == papillares valvulae bicuspidalis—67:60
- patientiæ—45:26
- patheticus—96:71
- pectinalis—49:4
- == pectinati—68:2 ==  
Pectinate muscles

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- pectineus—49:4 =
  - Pectineus muscle
- pectoralis—46:74
- pectoralis major—46:74 =
  - Greater pectoral muscle
- pectoralis minor—46:78 =
  - Smaller pectoral muscle
- pediaeus externus—49:35
- pediaeus internus—49:37
- perforatus Casserii—47:74
- perinei—65:19 =
  - Muscles of perineum
- peristaphylinus externus—54:25
- peristaphylinus internus—54:24
- peronaeus anticus—49:21
- peronaeus anticus—49:18
- peronaeus brevis—49:21 =
  - Short peroneal muscle
- peronaeus lateralis—49:20 + 49:21
- peronaeus longus—49:20 =
  - Long peroneal muscle
- peronaeus medius—49:21
- peronaeus parvus—49:18
- peronaeus posticus—49:20
- peronaeus posticus brevis—49:21
- peronaeus posticus longus—49:20
- peronaeus primus—49:20
- peronaeus quartus—49:21
- peronaeus secundus—49:21
- peronaeus sextus, Macalister—49:21
- peronaeus tertius—49:18 =
  - Third peroneal muscle
- perpendicularis linguae—54:9
- petro-malleolaris—99:73
- petro-salpingo-staphylinus—54:24
- petro-staphylinus—54:24
- pharyngopalatinus—54:28 =
  - Pharyngopalatine muscle
- pharyngo-staphylinus—54:28
- phrenicus—47:9
- phreno-peritonealis, Rouget—55:54
- pinnalis radiatus—46:14
- pinnalis myrtiformis—46:14
- pinnalis transversus—46:13
- piriformis—48:71 =
  - Piriform muscle
- plantaris—49:29 =
  - Plantar muscle
- platysma—46:54
- platysma myoides—46:54
- pleurooesophageus—54:73 =
  - Pleurooesophageal muscle
- pleuro-transversarius—46:69
- pleuro-transversus—46:67
- popliteus—49:30 =
  - Popliteal muscle

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- praesternalis, Cals—46:73
- praesternalis, Le Double—46:73
- procerus—46:11 =
  - Procerus muscle
- procerus nasi—46:11
- pronator inferior Meckel—48:16
- pronator magnus—48:3
- pronator obliquus—48:3
- pronator parvus—48:16
- pronator pedis—49:45
- pronator quadratus—48:16 =
  - Quadrate pronator muscle
- pronator radii teres—48:3
- pronator rotundus—48:3
- pronator teres—48:3 =
  - Round pronator muscle
- pronator transversus—48:16
- prostatae—62:61
- prostaticus—62:61 =
  - Prostate muscle
- prostaticus internus, Winslow—65:34
- protractor anguli oris—46:36
- protractor labii inferioris—46:36
- protrahens auriculae—46:20
- psoas iliacus, Testut—48:63
- psoas lumbaris—48:65
- psoas magnus—48:65
- psoas major—48:65 =
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- psoas minor—48:66 =
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- pterygoideus major—46:41
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- pubo-rectalis, Braune—47:53
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  - pyramidalis nasi—46:11
  - pyramidalis nasi—46:31
  - pyramidalis nasium—46:31
  - pyramidalis pelvis—47:27
  - pyramidalis, Santorini—46:31
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  - quadratus inferior—46:32
  - quadratus labii inferioris—46:32 =  
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  - quadratus labii superioris—46:28 =  
    Square muscle of upper lip
  - quadratus lumborum—47:32 =  
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  - quadratus menti—46:32
  - quadratus plantæ—49:45 =  
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  - quadratus superior—46:28
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  - quadriceps femoris—48:77 =  
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  - quadriceps suræ—49:22
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    47:69
  - quadrigeminus capitis, W. Krause—  
    46:55
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  - radialis externus brevis—48:19
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  - rectouterinus—64:22 =  
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  - rectovesicalis—61:41 =  
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  - rectus abdominis anticus minor—  
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  - rectus anterior major—46:64
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  - rectus capitis lateralis—46:2 =  
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  - rectus capitis posterior major—  
    45:64 =  
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    of head
  - rectus capitis posterior minor—46:1 =  
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- sternothyroideus—46:60 =  
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- stylo-hyalis—46:50
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Stylopharyngeus muscle
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- ampullaris lateralis—90:3 =
- Lateral ampullar nerve
- ampullaris superior—90:2 =
- Superior ampullar nerve
- ≡ anales—93:20
- ≡ anococcygei—93:28 =
- Anococcygeal nerves
- anterior septi narium—88:31
- apicis nasi—88:28
- apicis nasi—88:32
- Arnoldi—90:26
- articularis—80:17 =
- Articular nerve
- Aschianus—91:5
- auditivus—89:65
- auditorius—89:65
- ≡ auriculares anteriores—89:21 =
- Anterior auricular nerves
- auricularis anterior, old.—89:16
- auricularis cervicalis—91:11
- auricularis inferior—91:13
- auricularis inferior—89:52
- auricularis internus—91:12

## NERVUS

- auricularis magnus—91:11 =
- Great auricular nerve
- auricularis n. vagi—90:26
- auricularis posterior—89:52 =
- Posterior auricular nerve
- auricularis posterior, old.—91:12
- auricularis posterior profundus—89:52
- auricularis posterior profundus inferior—89:52
- auricularis posterior superficialis—91:12
- auricularis profundus—89:52
- auricularis vagi—90:26
- auriculo-occipitalis—89:52
- auriculotemporalis—89:16 =
- Auriculotemporal nerve
- axillaris—91:34 =
- Axillary nerve
- biventericus—89:54
- biventricus—89:54
- ≡ bronchiales anteriores—90:43
- ≡ bronchiales posteriores—90:44
- ≡ buccales—89:60
- buccalis—89:13
- ≡ buccales medii—89:60
- buccinatorio-labialis—89:13
- buccinatorius—89:13 =
- Buccinator nerve
- bucco-labialis—89:13
- bucco-labialis inferior—89:61
- canalis pterygoidei [Vidii]—88:58 =
- Nerve of pterygoid canal [of Vidius]
- cardiacus crassus—93:61 + 93:64
- cardiacus externus + internus—93:61
- cardiacus inferior—93:64 =
- Inferior cardiac nerve
- cardiacus magnus—93:61
- cardiacus medius—93:61 =
- Middle cardiac nerve
- cardiacus minor—93:64
- cardiacus parvus—93:64
- cardiacus profundus—93:61
- cardiacus superficialis—93:59
- cardiacus superficialis cordis—93:59
- cardiacus superior—93:59 =
- Superior cardiac nerve
- ≡ cardiaci supremi—90:34
- cardiaci tertius—93:64
- caroticotympanicus inferior—90:15 =
- Inferior caroticotympanic nerve
- caroticotympanicus superior—90:14 =
- Superior caroticotympanic nerve
- caroticus ascendens—93:37
- caroticus cerebialis—93:37

## NERVUS

- == carotici externi—93:45 ==
  - External carotid nerves
- caroticus internus—93:37 ==
  - Internal carotid nerve
- == carotici molles—93:45
- caroticus Vidiani—88:60
- Casseri—91:41
- Casserii—91:41
- cavernosus clitoridis major—94:51 ==
  - Larger cavernous nerve of clitoris
- == cavernosi clitoridis minores—94:52 ==
  - Lesser cavernous nerves of clitoris
- cavernosus penis major—94:48 ==
  - Larger cavernous nerve of penis
- == cavernosi penis minores—94:49 ==
  - Lesser cavernous nerves of penis
- == cerebrales—88:2 ==
  - Cerebral nerves
- cerebralis, Arnold—93:37
- cerebralis descendens—90:61
- cerebralis superficialis—91:16
- == cerebro-spinales—88:2 + 90:65
- == cervicales—91:1 ==
  - Cervical nerves
- cervicalis descendens—90:61
- cervicalis descendens inferior—90:62
- == cervicales superficiales—91:16
- cervicalis superficialis, old.—91:14
- == ciliares breves—88:37 ==
  - Short ciliary nerves
- == ciliares longi—88:25 ==
  - Long ciliary nerves
- == ciliares profundi, Boucheron—88:37
- circumflexus—91:34
- circumflexus brachii—91:34
- circumflexus humeri—91:34
- clitoridis—93:25
- == clunium inferiores—92:52 ==
  - Inferior nerves of clunes
- == clunium medii—92:21 ==
  - Middle nerves of clunes
- == clunium superiores—92:15 ==
  - Superior nerves of clunes
- coccygeus—93:26 ==
  - Coccygeal nerve
- cochleae—90:5 ==
  - Nerve of cochlea
- == coeliaci—90:54
- communicans faciei—89:47
- communicans fibularis—92:59
- communicans fibularis, old.—92:58
- communicans peronei—92:58
- communicans poplitei—93:2
- communicans surae—93:2
- communicans tibialis—93:2
- coraco-brachialis—91:41
- cordis anticus—93:59

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- cordis supremus—93:59
- == costales—91:74
- == costales—92:1
- == Cotunnii—88:63
- == craniales—88:2
- cranialis decimus—90:22
- cranialis duodecimus—90:60
- cranialis nonus—90:8
- cranialis octavus—89:65
- cranialis primus—88:3
- cranialis quartus—88:9
- cranialis quintus—88:11
- cranialis secundus—88:4; 95:4
- cranialis septimus—89:47
- cranialis sextus—89:46
- cranialis tertius—88:5
- cranialis undecimus—90:57
- crotaphitico-buccinatorius—89:9
- crotaphitico-buccinatorius—89:8
- cruralis anterior—92:41
- cruralis internus—92:37
- cruralis, old.—92:41
- cruralis posterior—92:37
- cruris externi—92:58
- cubitalis—91:55
- == cutaneus—80:16 ==
  - Cutaneous nerve
- == cutanei abdominis anteriores—92:8
- == cutanei abdominis laterales—92:3
- cutaneus anterior—92:60
- cutaneus anterior externus—92:36
- cutaneus antibrachii dorsalis—
  - 91:68 ==
- Dorsal cutaneous nerve of anti-brachium
- cutaneus antibrachii externus—91:68
- cutaneus antibrachii internus—91:68
- cutaneus antibrachii lateralis—
  - 91:43 ==
- Lateral cutaneous nerve of anti-brachium
- cutaneus antibrachii medialis—
  - 91:45 ==
- Medial cutaneous nerve of anti-brachium
- cutaneus antibrachii medius, old.—
  - 91:68
- cutaneus antibrachii radialis—91:43
- cutaneus antibrachii ulnaris—91:45
- cutaneus brachii externus—91:36
- cutaneus brachii externus—91:41
- cutaneus brachii externus superior—
  - 91:68
- cutaneus brachii internus—91:66
- cutaneus brachii internus major—
  - 91:45

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- cutaneus brachii internus minor—  
91:44
- cutaneus brachii lateralis—91:36 =  
Lateral cutaneous nerve of  
brachium
- cutaneus brachii lateralis—91:41
- cutaneus brachii major—91:45
- cutaneus brachii medialis—91:44 =  
Medial cutaneous nerve of  
brachium
- cutaneus brachii posterior—91:36
- cutaneus brachii posterior—91:66 =  
Posterior cutaneous nerve of  
brachium
- cutaneus brachii posterior inferior—  
91:68
- cutaneus brachii posterior lateralis—  
91:36
- cutaneus brachii posterior medius—  
91:66
- cutaneus brachii posterior superior—  
91:66
- cutaneus brachii, Wrisbergii—91:44
- cutaneus calcis—93:6
- = cutanei clunium inferiores—92:52
- = cutanei clunium medii—92:21
- = cutanei clunium perforantes—92:52
- = cutanei clunium posteriores—92:21
- cutaneus colli—91:14 =  
Cutaneous nerve of neck
- cutaneus communis—92:51
- cutaneus coxae posterior—92:18
- = cutanei cruris anteriores—92:46
- = cutaneus cruris externus—92:58
- = cutanei cruris mediales—92:46
- cutaneus cruris posterior—92:58
- cutaneus cruris posterior lateralis—  
92:58
- cutaneus dorsalis intermedius pedis—  
92:63 =  
Intermediate dorsal cutaneous  
nerve of foot
- cutaneus dorsalis lateralis pedis—  
93:5 =  
Lateral dorsal cutaneous nerve of  
foot
- cutaneus dorsalis medialis pedis—  
92:62 =  
Medial dorsal cutaneous nerve of  
foot
- cutaneus dorsi pedis communis—92:60
- cutaneus dorsi pedis externus—93:5
- cutaneus dorsi pedis lateralis—93:5
- cutaneus dorsi pedis medialis—92:62
- cutaneus dorsi pedis medius—92:63

## NERVUS

- cutaneus externus—92:36
- cutaneus externus antibrachii—91:68
- cutaneus externus superior—91:68
- cutaneus femoris anterior—92:42
- cutaneus femoris anterior externus—  
92:36
- = cutanei femoris anteriores interni—  
92:42
- cutaneus femoris anterior medius—  
92:42
- cutaneus femoris internus—92:42
- cutaneus femoris internus major—  
92:44
- cutaneus femoris lateralis—92:36 =  
Lateral cutaneous nerve of thigh
- cutaneus femoris medialis—92:42
- cutaneus femoris posterior—92:51 =  
Posterior cutaneous nerve of thigh
- cutaneus humeri posterior—91:36
- cutaneus internus—91:45
- cutaneus internus—91:66
- cutaneus internus antibrachii—91:68
- cutaneus internus major—91:45
- cutaneus internus minor—91:44
- cutaneus lateralis—91:41
- cutaneus longus cruris + pedis—93:3
- cutaneus longus posticus tibiae—93:2
- cutaneus magnus—92:51
- cutaneus medialis—91:44
- cutaneus medius—91:45
- cutaneus medius—92:51
- cutaneus palmaris—91:51
- cutaneus palmaris antibrachii—91:51
- cutaneus palmaris longus—91:51
- cutaneus pedis dorsi communis—92:60
- cutaneus pedis externus—93:2
- = cutanei perforantes, Quain—92:52
- = cutanei perinei—92:53
- = cutanei plantares mediales—93:6
- cutaneus plantaris proprius—93:6
- cutaneus popliteus externus—92:58
- cutaneus posterior—92:51
- cutaneus posterior communis femoris  
magnus—92:51
- cutaneus posterior communis femoris  
medius—92:51
- cutaneus posterior inferior anti-  
brachii—91:68
- cutaneus posterior superior—91:66
- cutaneus posterior superior antibrachii  
—91:68
- cutaneus superficialis dorsalis—91:68
- cutaneus superior—91:36
- cutaneus surae lateralis—92:58 =  
Lateral cutaneous nerve of calf

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- cutaneus surae medialis—93:2 =  
Medial cutaneous nerve of calf
- dentalis inferior—89:28
- dentales posteriores—88:44
- dentales superiores—88:44
- dentalis superior anterior—88:48
- dentales superiores posteriores—88:45
- (- depressor cordis)—90:35 =  
(Depressor nerve of heart)
- descendens cervicis—90:61
- descendentes colli interni—91:16
- descendens noni—90:61
- diaphragmaticus—91:21
- digastricus—89:54
- digitalis dorsalis fibularis hallucis—  
92:67
- == digitales dorsales hallucis lateralis et  
digiti secundi medialis—92:67 =  
Dorsal digital nerves of lateral  
[surface] of hallux and of medial  
[surface] of second digit
- == digitales dorsales n. radialis—91:73 =  
Dorsal digital nerves of n.  
radialis
- == digitales dorsales n. ulnaris—91:58 =  
Dorsal digital nerves of n.  
ulnaris
- == digitales dorsales pedis—92:64 =  
Dorsal digital nerves of foot
- digitalis dorsalis tibialis digiti secundi  
—92:67
- == digitales plantares communes n.  
plantaris lateralis—93:12 =  
Common plantar digital nerves of  
n. plantaris lateralis
- == digitales plantares communes n.  
plantaris medialis—93:8 =  
Common plantar digital nerves of  
n. plantaris medialis
- == digitales plantares proprii n. plantaris  
lateralis—93:13 =  
Proper plantar digital nerves of n.  
plantaris lateralis
- == digitales plantares proprii n. plantaris  
medialis—93:9 =  
Proper plantar digital nerves of n.  
plantaris medialis
- == digitales volares communes n. medi-  
ani—91:53 =  
Common volar digital nerves of  
n. medianus
- == digitales volares communes n. ulnaris  
—91:61 =  
Common volar digital nerves of n.  
ulnaris

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- == digitales volares proprii n. mediani—  
91:54 =  
Proper volar digital nerves of n.  
medianus
- == digitales volares proprii n. ulnaris—  
91:62 =  
Proper volar digital nerves of n.  
ulnaris
- divisus—88:11
- == dorsales—91:74
- dorsalis clitoridis—93:25 =  
Dorsal nerve of clitoris
- dorsalis penis—93:24 =  
Dorsal nerve of penis
- dorsalis scapulae—91:27 =  
Dorsal nerve of scapula
- dorsi cutaneus pedis medius—92:63
- dorsi pedis externus—93:5
- durae matris—90:25
- encephali—88:2
- ethmoidalis—88:27
- ethmoidalis anterior—88:27 =  
Anterior ethmoidal nerve
- == ethmoidales anteriores—88:28
- ethmoidalis posterior—88:26 =  
Posterior ethmoidal nerve
- == ethmoidales posteriores—88:57
- externus frontalis—88:20
- facialis—89:47 =  
Facial nerve
- facialis inferior—89:61
- == faciales medii—89:60
- == faciales superiores—89:59
- == faciales temporales—89:58
- femoralis—92:41 =  
Femoral nerve
- femoro-cutaneus—92:36
- femoro-genitalis—92:33
- femoro-perinealis—93:21
- fibularis—92:56
- fossae jugularis—90:26
- frontalis—88:19 =  
Frontal nerve
- frontalis—88:20
- frontalis externus—88:20
- frontalis internus—88:22
- frontalis major—88:20
- frontalis minor—88:22
- fronto-nasalis—88:22
- gangliosus—93:30
- == gastrici—90:50
- genito-cruralis—92:33
- genitofemoralis—92:33 =  
Genitofemoral nerve
- glossopharyngeus—90:8 =  
Glossopharyngeal nerve

## NERVUS

- gluteus inferior—92:50 =  
Inferior gluteal nerve
- gluteus superior—92:49 =  
Superior gluteal nerve
- glutens inferior—92:50
- glutens superior—92:49
- gustatorius—89:23
- haemorrhoidalis externus—93:20
- == haemorrhoidales inferiores—93:20 =  
Inferior haemorrhoidal nerves
- == haemorrhoidales medii—93:16 =  
Middle haemorrhoidal nerves
- == haemorrhoidales superiores—94:36 =  
Superior haemorrhoidal nerves
- hypogastricus—92:27
- hypoglossus—90:60 =  
Hypoglossal nerve
- hypoglossus minor—89:23
- iliohypogastricus—92:25 =  
Iliohypogastric nerve
- ilioinguinalis—92:29 =  
Ilioinguinal nerve
- impar—80:27
- inferior colli—91:14
- inframaxillaris—89:6
- infraorbitalis—88:46 =  
Infraorbital nerve
- infraoccipitalis—91:5
- infratrochlearis—88:33 =  
Infratrochlear nerve
- inguinalis—92:33
- inguinalis, Camper—92:34
- inguinalis externus—92:36
- inguinalis internus—92:33
- inguineo-cutaneus externus—92:36
- inguineo-cutaneus internus—92:33
- [= intercostales]—92:1 =  
[Intercostal nerves] See Rami anteriores nn. thoracalium—92:1
- == intercostales anteriores—92:1
- intercostalis maximus—93:30
- == intercostales, old.—91:74
- == intercostobrachiales—92:7 =  
Intercostobrachial nerves
- intermedius—89:63 =  
Intermediate nerve
- interosseus anterior—91:50
- interosseus antibrachii anterior—  
91:50
- interosseus [antibrachii] dorsalis—  
91:70 =  
Dorsal interosseous nerve [of antibrachium]
- interosseus antibrachii externus—  
91:70

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- interosseus antibrachii internus—  
91:50
- interosseus antibrachii posterior—  
91:70
- interosseus [antibrachii] volaris—  
91:50 =  
Volar interosseous nerve [of antibrachium]
- interosseus cruris—93:1 =  
Interosseous nerve of leg
- interosseus dorsalis antibrachii—91:70
- interosseus posterior antibrachii—  
91:70
- interosseus volaris antibrachii—91:50
- == intervertebrales—90:65
- ischiadicus—92:54 =  
Ischiadic nerve
- ischiadicus magnus—92:54
- ischiadicus minor—92:50
- ischiadicus minor, Quain—92:51
- ischiadicus popliteus externus—92:56
- Jacobsonii—90:11
- jugularis—93:36 =  
Jugular nerve
- == labiales anteriores—92:32 =  
Anterior labial nerves
- == labiales inferiores—89:35
- == labiales posteriores—93:23 =  
Posterior labial nerves
- == labiales superiores—88:55
- labio-mentalis<sup>4</sup>—89:61
- lacrimalis—88:17 =  
Lacrimal nerve
- lacrimo-palpebralis—88:17
- lacrymalis—88:17
- lacrymo-palpebralis—88:17
- Lancisii—86:22
- Lancisii, old.—86:23
- laryngeus inferior—90:40 =  
Inferior laryngeal nerve
- laryngeus inferior, old.—90:36
- laryngeus superior—90:30 =  
Superior laryngeal nerve
- laryngeus superior, old.—90:31
- laryngeus superior externus—90:31
- laryngeus superior internus—90:32
- laryngo-vago-cardiacus, Undarraga—  
90:35
- == laterales narium—88:53
- ligamenti interossei cruris—93:1
- lingualis—89:23 =  
Lingual nerve
- lingualis longus—90:60
- lingualis medius—90:60
- loquens—90:60
- longitudinalis, Lancisi—86:22

## NERVUS

- = lumbales—92:11 =
  - Lumbar nerves
- = lumbales, sacrales, coccygeus—92:10 =
  - Lumbar nerves, sacral nerves, coccygeal nerve
- = lumbares—92:11
- lumbo-dorsalis—92:25 + 92:29
- lumboinguinalis—92:34 =
  - Lumboinguinal nerve
- = malares—89:59
- malaris—88:40
- mandibularis—89:6 =
  - Mandibular nerve
- mandibularis, old.—89:28
- marginalis mandibulae—89:61
- marginalis maxillae inferioris—89:61
- marginalis scapulae—91:33
- massetericus—89:9 =
  - Masseteric nerve
- masticatorius—89:8 =
  - Masticator nerve
- mastoideus posterior—89:55
- maxillaris—88:38 =
  - Maxillary nerve
- maxillaris inferior—89:28
- maxillaris inferior, old.—89:6
- maxillaris superior—88:38
- meatu auditorii externi—89:17 =
  - Nerve of external auditory meatus
- medianus—91:48 =
  - Median nerve
- membranae tympani—89:18
- meningeus—90:25
- meningeus [medius]—88:39 =
  - Meningeal nerve [middle]
- meningeus, old.—88:39
- mentalis—89:33 =
  - Mental nerve
- motorius linguae—90:60
- = musculares abdominales—92:3 + 92:8
- m. mallei interni—89:39
- m. tensoris veli palatini—89:38
- musculocutaneus—91:41 =
  - Musculocutaneous nerve
- musculo-cutaneus cruris—92:65
- musculo-cutaneus inferior—92:36
- musculo-cutaneus medius—92:29
- musculo-cutaneus pedis—92:60
- musculo-cutaneus peronaeus anterior—92:65
- musculo-cutaneus peronaeus anterior—92:60
- musculo-spiralis—91:65
- mylohyoideus—89:32 =
  - Mylohyoid nerve

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- nasalis—88:23
- nasalis anterior—88:27
- nasalis anterior externus—88:33
- = nasales anteriores externi—88:28
- = nasales anteriores interni—88:54
- nasalis externus—88:33
- nasalis internus—88:27
- = nasales laterales—88:53
- = nasales laterales inferiores—89:1
- = nasales mediales—88:62
- = nasales posteriores inferiores—89:1
- = nasales posteriores mediae—89:1
- = nasales posteriores superiores—88:61
- = nasales septi narium—88:62
- = nasales superiores anteriores—88:62
- = nasales superiores posteriores, Meckelii—88:61
- nasociliaris—88:23 =
  - Nasociliary nerve
- = naso-dentales—88:48
- naso-dentalis—88:48
- naso-ocularis—88:23
- nasopalatinus [Scarpae]—88:63 =
  - Nasopalatine nerve [of Scarpa]
- naso-palatinus, old.—88:43
- = naso-pharyngei—88:61 + 88:62
- obturatorius—92:37 =
  - Obturator nerve
- occipitalis anterior—91:10
- occipitalis externus—91:10
- occipitalis internus—91:6
- occipitalis magnus—91:6
- occipitalis major—91:6 =
  - Greater occipital nerve
- occipitalis maximus—91:6
- occipitalis minimus—91:7
- occipitalis minor—91:10 =
  - Smaller occipital nerve
- occipitalis parvus—91:10
- (— occipitalis tertius)—91:7 =
  - (Third occipital nerve)
- oculi-motorius—88:5
- oculomotorius—88:5 =
  - Oculomotor nerve
- oculo-muscularis communis—88:5
- oculo-muscularis externus—89:46
- oculo-muscularis superior—88:9
- oculo-nasalis—88:23
- = oesophagei—90:47
- = olfactorii—88:3 =
  - Olfactory nerves
- olfactorius cerebralis—86:63
- ophthalmicus—88:15 =
  - Ophthalmic nerve
- opticus—88:4; 95:4 =
  - Optic nerve

## NERVUS

- orbitalis—88:15
- orbitalis, old.—88:40
- orbitarius—88:40
- == palatini—89:2 ==
  - Palatine nerves
- palatinus anterior—89:3 ==
  - Anterior palatine nerve
- palatinus communis—89:3
- palatini descendentes—89:2
- == palatini descendentes—88:43
- palatinus internus—89:5
- palatinus lateralis—89:5
- palatinus major—89:3
- palatinus medialis—89:4
- palatinus medius—89:4 ==
  - Middle palatine nerve
- palatinus minimus—89:5
- palatinus minor—89:5
- palatinus posterior—89:5 ==
  - Posterior palatine nerve
- == palpebrales inferiores—88:52
- == parietis externus—88:30
- == parotidei—89:19
- patheticus—88:9
- == pectorales anteriores—91:29
- == pectorales interni—92:1
- == pectorales posteriores—91:26
- pectoralis posterior—91:27
- pectoralis posterior—91:28
- == pectorales profundi—92:1
- perforans brachii—91:41
- perforans, Casserii—91:41
- perinaei—93:21
- perinaeus—93:21
- perinei—93:21 ==
  - Nerve of perineum
- == perinei longi, Waldeyer—92:53
- peronaeus communis—92:56 ==
  - Common peroneal nerve
- peronaeus externus—92:63
- peronaeus profundus—92:65 ==
  - Deep peroneal nerve
- peronaeus superficialis—92:60 ==
  - Superficial peroneal nerve
- peroneus anterior—92:65
- petrosus profundus—88:60 ==
  - Deep petrosal nerve
- petrosus profundus major—88:60
- petrosus profundus minor—90:14
- petrosus superficialis major—88:59 ==
  - Greater superficial petrosal nerve
- petrosus superficialis medius—89:37
- petrosus superficialis minor—89:37 ==
  - Smaller superficial petrosal nerve
- == pharyngei—90:28
- pharyngeus superior + inferior—90:28
- == phrenico-abdominales—91:23

## NERVUS

- phrenicus—91:21 ==
  - Phrenic nerve
- plantaris externus—93:10
- plantaris internus—93:7
- plantaris lateralis—93:10 ==
  - Lateral plantar nerve
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## OS

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Osteology—28:1

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— uterinum tubae uterinae—63:65 =  
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— venosum cordis—67:56 =

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    Otoconia

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- palatine—52:50
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- == renal—60:60
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## Paradidymis

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- intercaroticum, Kohn—60:30
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## Parametrium

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- of testis—62:2

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- Anterior wall of vagina
- anterior ventriculi [Gaster]—54:79 ==
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- carotica cavi tympani—99:26 ==
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- lateralis cavi tympani, Körner—99:27
- lateralis orbitae—34:69 ==
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- mastoidea cavi tympani—99:16 ==
- Mastoid wall of cavity of tympanum
- medialis orbitae—34:70 ==
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- membranacea bronchi—59:44 ==
- Membranaceous wall of bronchus
- membranacea cavi tympani—99:27 ==
- Membranaceous wall of cavity of tympanum
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- Posterior wall of vagina
- posterior ventriculi [Gaster]—54:80 ==
- Posterior wall of stomach [Gaster]
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- Superior wall of orbit
- tegmentalis cavi tympani—98:79 ==
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## Paroophoron—64:43 ==

## Paroophoron

## Parotis—53:13

- accessoria—53:15

## Parovarium—64:39

## Pars, Partes

- abdominalis m. pectoralis majoris—46:77 ==

## Abdominal part of pectoralis major muscle

## PARS

- abdominalis oesophagi—54:69 =  
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- abdominalis et pelvina systematis  
sympathici—94:15 =  
Abdominal part and pelvic part of  
sympathetic system
- abdominalis sympathici—94:15
- abdominalis ureteris—61:20 =  
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- adscendens oss. frontalis—32:7
- alaris m. nasalis—46:14 =  
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- alveolaris mandibulae—34:6 =  
Alveolar part of mandible
- alveolaris processus dentalis—33:24
- ampullaris venae coronariae magnae  
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- analis recti—56:22 =  
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- anterior commissurae anterioris  
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sure [of cerebrum]
- anterior lobuli quadrangularis—  
82:77 =  
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lobule
- anterior [rhinencephali]—86:60 =  
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- ascendens duodeni—55:50 =  
Ascending part of duodenum
- ascendens oss. frontalis—32:7
- ascendens oss. palatina—33:32
- basilaris fasciculi pedunculomamil-  
laris—84:47 =  
Basilar part of pedunculomamil-  
lary fasciculus
- basilaris gyri frontalis inferioris—  
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- basilaris gyri frontalis, Quain—85:43
- basilaris oss. occipitalis—29:69 =  
Basilar part of occipital bone
- basilaris pontis—82:48 =  
Basilar part of pons
- calcaneocuboidea lig. bifurcati—  
43:63 =  
Calcaneocuboid part of bifurcate  
ligament
- calcaneonavicularis lig. bifurcati—  
43:62 =  
Calcaneonavicular part of bifur-  
cate ligament
- cardiaca ventriculi—55:7 =  
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- cartilaginea tubae auditivae—  
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- cartilaginea tubae Eustachii—100:16
- cavernosa urethrae virilis—63:25 =  
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- centralis ventriculi lateralis cerebri—  
86:36 =  
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- cephalica et cervicalis systematis  
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- cervicalis medullae spinalis—80:21 =  
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- cervicalis oesophagi—54:67 =  
Cervical part of oesophagus
- cervicalis systematis sympathici—  
93:34 =  
Cervical part of sympathetic  
system
- ciliaris hyaloideae—96:59
- ciliaris retinae—96:21 =  
Ciliary part of retina
- clavicularis m. pectoralis majoris—  
46:75 =  
Clavicular part of pectoralis  
major muscle
- colica omenti—65:70
- condyloidea oss. occipitalis—29:71
- convoluta lobuli corticalis renis—  
60:66 =  
Convoluted part of cortical lobule  
of kidney
- coronalis oss. frontis—32:7
- corporis humani—26:1 =  
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- costalis diaphragmatis—47:14 =  
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- costalis oss. sacri—29:11
- costo-humeralis m. pectoralis majoris  
—46:77
- cupularis recessus epitympanici—  
99:2 =  
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recess
- descendens duodeni—55:47 =  
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- dorsalis n. sympathici—94:1
- dorsalis pontis—82:25 =  
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- flaccida membranae tympani—99:29 =  
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tympanum

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- frontalis capsulae internae—87:19 =  
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- frontalis coronae radiatae—87:23 =  
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- frontalis oss. frontis—32:7
- frontalis operculi—85:27 =  
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- frontalis radiationis corporis callosi—87:7 =  
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- frontis oss. frontalis—32:7
- = genitales—61:64
- = genitales externae muliebres—64:44 =  
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- = genitales externae viriles—62:65 =  
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- glandularis urethrae, Waldeyer—63:26
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- grisea hypothalami—84:40 =  
Grey part of hypothalamus
- horizontalis [inferior] duodeni—55:49 =  
Horizontal [inferior] part of duodenum
- horizontalis oss. frontalis—32:10
- horizontalis oss. palatini—33:45 =  
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- iliaca lineae terminalis—37:60 =  
Iliac part of linea terminalis
- incisiva oss. maxillaris superioris—33:19
- incisiva oss. maxillaris superioris—33:19
- inferior duodeni—55:48 =  
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- inferior fossae rhomboideae [Calamus scriptorius]—81:60 =  
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- inferior gyri frontalis medii—85:40 =  
Inferior part of middle frontal gyrus
- infraclavicularis plexus brachialis—91:37 =  
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- intercartilaginea rimae glottidis—59:20 =  
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- interfascialis urethrae virilis—63:24

## PARS

- intermedia fossae rhomboideae—81:62 =  
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- intermedia, of nerve of Wrisberg—89:63
- intermembranacea rimae glottidis—59:19 =  
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- interstitialis—63:64
- iridica uveae—96:7
- jugularis oss. occipitis—29:71
- lacrimalis [Horneri] m. orbicularis oculi—46:19 =  
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- laryngea pharyngis—54:34 =  
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- lateralis m. nasalis—46:13
- lateralis oss. occipitalis—29:71 =  
Lateral part of occipital bone
- lateralis oss. occipitis—29:71
- lateralis oss. sacri—29:11 =  
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- lateralis tubae Falloppiae—63:59
- lateralis tubae uterinae—63:59
- libera columnae fornicis—86:30 =  
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- lienalis ventriculi—55:4
- ligamentosa glottidis, Aikin—59:19
- lumbalis diaphragmatis—47:10 =  
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- lumbalis medullae spinalis—80:24 =  
Lumbar part of medulla spinalis
- lumbo-sacralis n. sympathici—94:15
- mamillaris hypothalami—84:25 =  
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- mamillaris oss. temporalis—30:76
- mamillaris oss. temporum—30:76
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- mastoidea oss. temporalis—30:76 =  
Mastoid part of temporal bone
- mastoidea oss. temporum—30:76
- media corporis callosi—86:21
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- medialis fissurae parieto-occipitalis—86:12
- medialis m. nasalis—46:14
- medialis sulci parieto-occipitalis—86:12
- medialis tubae Falloppiae—63:63
- mediana prostatae—62:56

## PARS

- membranacea septi atriorum—  
67:55=  
Membranaceous part of septum of atria
- membranacea urethrae virilis—  
63:24=  
Membranaceous part of male urethra
- membrano-prostatica—63:24 + 63:25
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- muscularis urethrae virilis—63:24
- nasalis oss. frontalis—32:12=  
Nasal part of frontal bone
- nasalis oss. palatini—33:32
- nasalis pharyngis—54:32=  
Nasal part of pharynx
- naso-orbitalis oss. frontalis—32:10 +  
32:12
- nuda urethra virilis—63:24
- obliqua m. cricothyreoidei—59:1=  
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- occipitalis capsulae internae—87:20=  
Occipital part of internal capsule
- occipitalis coronae radiatae—87:26=  
Occipital part of corona radiata
- occipitalis oss. occipitis—29:72
- occipitalis radiationis corporis callosi—  
87:10=  
Occipital part of radiation of corpus callosum
- occipitalis radiationis corporis callosi,  
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- olfactoria—57:61
- opercularis anterior gyri frontalis,  
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- opercularis gyri frontalis inferioris—  
85:43=  
Opercular part of inferior frontal gyrus
- opercularis intermedia gyri frontalis,  
Retzius—85:45
- opercularis intermedia gyri frontalis  
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- orbitalis m. orbicularis oculi—46:18=  
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94:15=  
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- pelvina ureteris—61:21=  
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- pelvina urethrae—63:20
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- posterior lobuli quadrangularis—  
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- posterior [rhinencephali]—86:69=  
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- *pubica lineae terminalis*—37:61 =  
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- *pylorica ventriculi* [Gaster]—55:8 =  
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- *pyramidalis m. pectoralis majoris*—  
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- *radiata* [Processus Ferreini] lobuli  
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- *sterno-costalis diaphragmatis*—47:14  
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- *sternocostalis m. pectoralis majoris*—  
46:76 =  
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*major*
- *subfrontalis sulci cinguli*—85:79 =  
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- *superior gyri frontalis inferioris*—  
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*laris*—84:46 =  
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- *temporalis coronae radiatae*—87:25 =  
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- *temporalis radiationis corporis callosi*  
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- *tensa membranae tympani*—99:30 =  
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panum
- *tertia m. quadricipitis femoris*,  
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- *thoracalis medullae spinalis*—80:23 =  
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- *thoracalis oesophagi*—54:68 =  
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## Platysma, Platysmata

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- (n) gastricus inferior—94:27 ==  
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- (n) gastricus inferior sympathicus—94:27
- (n) gastricus posterior—90:52 ==  
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- (n) gastricus superior—94:26 ==  
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- (n) gastricus superior sympathicus—94:26
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- (n) hypogastricus—94:39 =
- Hypogastric plexus
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- Lumbar plexus
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- (n) oesophageal, posterior—90:49
- (n) oesophageal, of thorax—90:48 + 90:49
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- (n) phrenic—94:22
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- (n) pulmonalis anterior—90:45=
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**Pollex [Digit I]**

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   Female pudendum  
 Pulmo—59:56 =  
   Lung  
 Pulp  
 — dental—53:33  
 — of hair—101:40  
 — of hair, old.—101:43  
 — of spleen—57:30  
 — of tooth—53:33  
 Pulpæ, Pulpas  
 — dentis—53:33 =  
   Pulp of tooth  
 — lienis—57:30 =  
   Pulp of spleen  
 — pili—101:40  
 — pili, old.—101:43  
 — radiceis dentis—53:33  
 — testis—62:2

## PYRAMIS

- Pulvinar—84:53 =  
   Pulvinar  
 — of cerebrum—84:53  
 — thalami—84:53  
 — of thalamus—84:53  
 Punctum, Puncta—25:19 =  
   Point, Points  
 = lacrimal—97:48  
 = lacrimalia—97:48 =  
   Lacrimal puncta  
 — lacrymale inferius + superius—97:48  
 Pupil—96:5  
 Pupilla—96:5 =  
   Pupil  
 Putamen—87:13 =  
   Putamen  
 Pylorus—55:6 =  
   Pylorus  
 Pyramid, Pyramide  
 — anterior, of medulla oblongata—81:17  
 — of Arnold—30:76 + 31:3  
 — of cerebellum—82:70  
 — of cochlea—98:57  
 — decussation of—81:18  
 — of Ferrein—60:65  
 — grey, of Henle—86:66  
 = of kidney—60:58  
 — of kidney, base of—60:59  
 — lateral, of medulla oblongata—81:22;  
   81:53  
 = of Malpighi—60:58  
 = Malpighian, base of—60:59  
 — of medulla oblongata—81:17  
 = medullary, of Malpighi—60:58  
 — posterior, of medulla oblongata—  
   81:26  
 — renal, base of—60:59  
 = renal, of Malpighi—60:58  
 — of temporal bone—31:3  
 — of temporal bone, of Arnold—30:76  
 = thyreoid—60:26  
 — of thyreoid gland—60:24  
 — of tympanum—99:20  
 — of vermis—82:70  
 — of vestibule—98:36  
 — of worm—82:70  
 Pyramis, Pyramides  
 — anterior medullae oblongatae—81:17  
 — Arnoldi—30:76 + 31:3  
 — cerebelli—82:70  
 — cochleae—98:57  
 = Ferreini—60:65  
 — gl. thyreoideae—60:24  
 — lateralis medullae oblongatae—81:22;  
   81:53  
 — Lalouettii—60:24

## PYRAMIS

- = Malpighii—60:58
- [medullae oblongatae]—81:17 =  
Pyramid [of medulla oblongata]
- [— oss. temporalis]—31:3 =  
[Pyramid of temporal bone] See  
Pars petrosa oss. temporalis—  
31:3
- oss. temporalis, Arnold—30:76
- oss. temporum—31:3
- posterior medullae oblongatae—81:26
- = renales [Malpighii]—60:58 =  
Renal pyramids [of Malpighi]
- thyreoidea, Macalister—60:24
- [vermis]—82:70 =  
Pyramid [of vermis]
- vestibuli—98:36 =  
Pyramid of vestibule

## R.

- Radial—23:34
- Radialis—23:34 =  
Radial
- Radiatio, Radiationes
- centralis—87:22
- corporis callosi—87:6 =  
Radiation of corpus callosum
- corporis striati—87:27 =  
Radiation of corpus striatum
- Gratioleti—87:28
- occipitohalamica [Gratioleti]—  
87:28 =  
Occipitohalamic radiation [of  
Gratiolet]
- Radiation, Radiations
- of corpus callosum—87:6
- of corpus striatum—87:27
- occipitohalamic, of Gratiolet—87:28
- optic, of Gratiolet—87:28
- Radii
- = of lens—96:58
- = lentis—96:58 =  
Radii of lens
- Radius—36:17 =  
Radius
- anterior surface of—36:26
- body of—36:18
- carpal articular surface of—36:32
- crest of—36:24
- dorsal surface of—36:25
- external surface of—36:27
- fovea for head of—36:15
- fovea of little head of—36:24
- interosseous crest of—36:24
- interosseous ridge of—36:24
- lateral surface of—36:27

## RADIX

- lunate sinus of—36:31
- medial border of—36:24
- outer surface of—36:27
- palmar surface of—36:26
- posterior surface of—36:25
- semilunar incisure of—36:31
- sigmoid cavity of—36:31
- ulnar incisure of—36:31
- ulnar notch of—36:31
- volar surface of—36:26
- Radix, Radices—25:20 =  
Root, Roots
- adscendens fornicis—86:31
- anterior nervorum spinalium—90:67 =  
Anterior root of spinal nerves
- = anthelcis—100:41
- arcus vertebrae—28:32 =  
Root of arch of vertebra
- ascendens n. glosso-pharyngei, Roller—  
81:35
- brevis ganglii ciliaris—88:8 =  
Short root of ciliary ganglion
- brevis ganglii maxillaris—89:44
- brevis incudis—99:52
- clitoridis—64:60
- cochlearis n. acustici—89:67 =  
Cochlear root of acoustic nerve
- dentis—53:22 =  
Root of tooth
- [= dentis]—53:22 =  
[Roots of tooth]
- descendens fornicis—84:44
- descendens n. glosso-pharyngei, W.  
Krause—81:35
- descendens n. trigemini—83:55 =  
Descending root of trigeminal  
nerve
- descendens [mesencephalica] n. trige-  
mini—82:29 =  
Descending [mesencephalic] root of  
trigeminal nerve
- epiglottidis—58:68
- gangliosa n. trigemini—88:12
- helcis—100:36
- lateralis tractus optici—84:35 =  
Lateral root of optic tract
- linguae—53:56 =  
Root of tongue
- longa ganglii ciliaris—88:24 =  
Long root of ciliary ganglion
- longa incudis—99:50
- longa superior ganglii ciliaris—88:24
- media ganglii ciliaris—93:44
- medialis tractus optici—84:34 =  
Medial root of optic tract

## RADIX

- mesenterii—65:54 =
  - Root of mesentery
- = molles ganglii ciliaris—93:44
- mollis ganglii ophthalmici—93:44
- nasi—57:74 =
  - Root of nose
- n. facialis—82:33 =
  - Root of facial nerve
- n. optici—84:33
- = nervorum auditorium—82:3
- olfactoria brevis—86:65
- olfactoria externa—86:72
- olfactoria interna—86:65
- olfactoria lateralis—86:72
- olfactoria longa—86:72
- olfactoria medialis—86:65
- = parietales venae cavae inferioris—77:4 =
  - Parietal roots of inferior vena cava
- penis—62:67 =
  - Root of penis
- penis, old.—62:69
- pili—101:42 =
  - Root of hair
- posterior nervorum spinalium—90:68 =
  - Posterior root of spinal nerves
- pulmonis—59:66 =
  - Root of lung
- sensitiva ganglii maxillaris—89:44
- superior ganglii ciliaris—88:24
- = sympathicae ganglii ciliaris—93:44 =
  - Sympathetic roots of ciliary ganglion
- sympathica ganglii maxillaris—93:50
- sympathica ganglii submaxillaris—93:50 =
  - Sympathetic root of submaxillary ganglion
- unguis—101:54 =
  - Root of nail
- vaso-motoria ganglii ciliaris—93:44
- ventralis nn. spinalium—90:67
- ventris—26:58
- vestibularis n. acustici—89:66 =
  - Vestibular root of acoustic nerve
- = viscerales venae cavae inferioris—77:7 =
  - Visceral roots of inferior vena cava
- Ramus, Ramuli—25:21 =
  - Little branch, Little branches
- anastomoticus a. pubicae—73:34
- = cavernosi clitoridis—94:52
- = isthmi faucium—89:24
- obturatorius rami pubici a. epigastri-cae inferioris—73:34

## RAMUS

- pubicus a. obturatoriae—72:65
- tympanicus a. pharyngo-basilaris—69:7
- Ramus, Rami—25:22 =
  - Branch, Branches
  - (a) = arteriosus or arterial
  - (n) = nervosus or nervous
  - (v) = venosus or venous
- = (n) abdominales rami cutanei anterioris—92:8
- = (n) abdominales rami cutanei lateralis—92:3
- (n) abdomino-genitalis inferior—92:29
- (n) abdomino-genitalis superior—92:25
- (a) acetabuli a. circumflexae femoris medialis—73:49 =
  - Acetabular branch of a. circumflexa femoris medialis
- = (n) acromiales—91:18
- (a) acromialis a. thoracoacromialis—71:3 =
  - Acromial branch of a. thoracoacromialis
- (a) acromialis a. transversae scapulae—70:61 =
  - Acromial branch of a. transversa scapulae
- (a) acusticus—69:52
- (a) adscendens a. circumflexae femoris anterioris—73:51
- (a) adscendens a. ilio-lumbalis—72:59
- (a) adscendens a. transversae colli—70:68
- adscendens fossae Sylvii—85:18
- adscendens mandibulae—33:72
- (n) adscendens n. cutanei colli—91:15
- adscendens oss. ischii—37:35
- = (a) ad pontem a. basilaris—70:30 =
  - Branches to pons of a. basilaris
- = (a) alveolares anteriores—69:61
- = (n) alveolares superiores anteriores n. infraorbitalis—88:48 =
  - Anterior superior alveolar branches of n. infraorbitalis
- (n) alveolaris superior medius n. infraorbitalis—88:47 =
  - Middle superior alveolar branch of n. infraorbitalis
- = (n) alveolares superiores posteriores nn. alveolarium superiorum—88:45 =
  - Posterior superior alveolar branches of nn. alveolares superiores

## RAMUS

- (n) anastomoticus—80:14=
  - Anastomotic branch
- (n) anastomoticus Galeni—90:33
- (n) anastomoticus ganglii otici cum chorda tympani—89:42=
  - Anastomotic branch of ganglion oticum with chorda tympani
- (n) anastomoticus ganglii otici cum n. auriculotemporalis—89:41=
  - Anastomotic branch of ganglion oticum with n. auriculotemporalis
- (n) anastomoticus ganglii otici cum n. spinoso—89:40=
  - Anastomotic branch of ganglion oticum with n. spinosus
- = (n) anastomotici n. auriculotemporalis cum n. facialis—89:20=
  - Anastomotic branches of n. auriculotemporalis with n. facialis
- = (n) anastomotici n. facialis cum n. acustico externo—89:68
- (n) anastomoticus n. facialis cum n. glossopharyngeo—89:56=
  - Anastomotic branch of n. facialis with n. glossopharyngeus
- (n) anastomoticus n. facialis cum plexu tympanico—89:51=
  - Anastomotic branch of n. facialis with plexus tympanicus
- (n) anastomoticus n. glossopharyngei cum ramo auriculari n. vagi—90:17=
  - Anastomotic branch of n. glossopharyngeus with auricular branch of n. vagus
- (n) anastomoticus n. lacrimalis cum n. zygomatico—88:18=
  - Anastomotic branch of n. lacrimalis with n. zygomaticus
- (n) anastomoticus n. laryngei superioris cum n. laryngei inferiore—90:33=
  - Anastomotic branch of n. laryngeus superior with n. laryngeus inferior
- (n) anastomotici n. lingualis cum n. hypoglosso—89:25=
  - Anastomotic branches of n. lingualis with n. hypoglossus
- = (n) anastomotici n. mandibularis cum n. facialis—89:20
- (n) anastomoticus n. mediani cum n. ulnari—91:52=
  - Anastomotic branch of n. medianus with n. ulnaris

## RAMUS

- (n) anastomoticus n. ophthalmici cum n. zygomatico—88:18
- (n) anastomoticus n. vagi cum n. glossopharyngeo—90:27=
  - Anastomotic branch of n. vagus with n. glossopharyngeus
- (n) anastomoticus peroneus n. peronei communis—92:59=
  - Peroneal anastomotic branch of common peroneal nerve
- (a) anastomoticus profundus a. dorsalis pedis—74:15
- (a) anastomoticus pubicus—72:65
- (a) anastomoticus pubicus a. epigastricae inferioris—73:33
- (n) anastomoticus rami interni n. laryngei superioris cum n. laryngei inferiore—90:33
- (a) anastomoticus transversus a. tibialis posterioris—74:22
- (n) anastomoticus ulnaris n. radialis—91:72=
  - Ulnar anastomotic branch of n. radialis
- (a) anterior a. coronariae cordis sinistrae—68:56
- = (a) anteriores aa. intercostalium—71:65=
  - Anterior branches of aa. intercostales
- (a) anterior a. obturatoriae—72:66=
  - Anterior branch of a. obturatoria
- (a) anterior a. thyreoideae superioris—69:1=
  - Anterior branch of a. thyreoidea superior
- (a) anterior ascendens a. thyreoideae superioris—69:1
- anterior ascendens fissurae cerebri lateralis—85:18
- anterior ascendens fissurae cerebri lateralis [Sylvii]—85:18=
  - Anterior ascending branch of lateral fissure of cerebrum [of Sylvius]
- anterior fossae Sylvii—85:18
- anterior horizontalis fissurae cerebri lateralis—85:19
- anterior horizontalis fissurae cerebri lateralis [Sylvii]—85:19=
  - Anterior horizontal branch of lateral fissure of cerebrum [of Sylvius]
- (n) anterior narium—88:32
- (n) anterior n. acustici—90:5



## RAMUS

- (n) anterior n. auricularis magni—91:13=
  - Anterior branch of n. auricularis magnus
- = (n) anteriores nn. cervicalium—91:8=
  - Anterior branches of nn. cervicales
- = (n) anteriores n. coccygei—92:16=
  - Anterior branches of coccygeal nerve
- (n) anterior n. cutanei antibrachii medialis—91:46
- (n) anterior n. cutanei brachii majoris—91:46
- (n) anterior n. laryngei inferioris—90:41=
  - Anterior branch of n. laryngeus inferior
- = (n) anteriores nn. lumbalium—92:16=
  - Anterior branches of nn. lumbales
- (n) anterior n. obturatorii—92:38=
  - Anterior branch of n. obturatorius
- (n) anterior nn. spinalium—90:70=
  - Anterior branch of nn. spinales
- = (n) anteriores nn. thoracalium [nn. intercostales]—92:1=
  - Anterior branches of nn. thoracales [nn. intercostales]
- (a) anterior ramorum cutaneorum lateralium abdominalium aa. intercostalium—72:1=
  - Anterior branch of lateral abdominal cutaneous branches of aa. intercostales
- (n) anterior ramorum cutaneorum lateralium abdominalium nn. intercostalium—92:5=
  - Anterior branch of lateral cutaneous abdominal branches of nn. intercostales
- (a) anterior ramorum cutaneorum lateralium pectoralium aa. intercostalium—72:1=
  - Anterior branch of lateral pectoral cutaneous branches of aa. intercostales
- (n) anterior ramorum cutaneorum lateralium pectoralium nn. intercostalium—92:5=
  - Anterior branch of lateral cutaneous pectoral branches of nn. intercostales
- (a) a. brachialis, Cruveilhier—71:17
- (a) articularis a. circumflexae femoris medialis—73:49

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- (a) articularis a. circumflexae femoris posterioris—73:49
- = (a) articulares a. genu supremae—73:62=
  - Articular branches of a. genu suprema
- (n) ascendens—91:16
- (a) ascendens a. circumflexae femoris lateralis—73:51=
  - Ascending branch of a. circumflexa femoris lateralis
- (a) ascendens a. transversae colli—70:68=
  - Ascending branch of a. transversa colli
- = (n) ascendentes mandibulae—89:61
- = (n) ascendentes n. infraorbitalis—88:52
- ascendens oss. pubis—37:50
- = (a) auriculares anteriores a. temporalis superficialis—69:39=
  - Anterior auricular branches of a. temporalis superficialis
- (a) auricularis a. auricularis posterioris—69:34=
  - Auricular branch of a. auricularis posterior
- (a) auricularis a. occipitalis—69:24=
  - Auricular branch of a. occipitalis
- (n) auricularis externus—91:13
- (n) auricularis inferior—91:13
- (n) auricularis internus—91:12
- (n) auricularis n. auricularis magni—91:13
- (n) auricularis n. glosso-pharyngei—90:11
- (n) auricularis n. vagi—90:26=
  - Auricular branch of n. vagus
- (n) auriculo-frontalis, Hyrtl—89:58
- (a) auriculo-ventricularis—68:55
- (a) basilaris a. pharyngo-basilaris—69:5
- = (n) bronchiales anteriores n. vagi—90:43=
  - Anterior bronchial branches of n. vagus
- = (a) bronchiales a. mammae internae—70:37=
  - Bronchial branches of a. mamma interna
- = bronchiales bronchi—59:48=
  - Bronchial branches of bronchi
- bronchialis eparterialis—59:49=
  - Eparterial bronchial branch
- = bronchiales hyparteriales—59:50=
  - Hyparterial bronchial branches

## RAMUS

## RAMUS

- = (n) bronchiales plexus cardiaci—  
     94:13  
 = (n) bronchiales posteriores n. vagi—  
     90:44 =  
     Posterior bronchial branches of n.  
     vagus  
 = bronchiales pulmonis—59:73 =  
     Bronchial branches of lung  
 = (n) buccales n. facialis—89:60 =  
     Buccal branches of n. facialis  
 = (n) bucco-labiales superiores n.  
     facialis—89:60  
 — (a) bulbo-cavernosus a. penis—73:24  
 = (n) calcanei externi n. suralis—93:4  
 = (a) calcanei laterales a. peronaeae—  
     74:23 =  
     Lateral calcaneal branches of a.  
     peronaea  
 = (n) calcanei laterales n. tibialis—  
     93:4 =  
     Lateral calcaneal branches of n.  
     tibialis  
 = (a) calcanei mediales a. peronaeae—  
     74:26 =  
     Medial calcaneal branches of a.  
     peronaea  
 = (a) calcanei mediales a. tibialis pos-  
     terior—74:26  
 = (n) calcanei mediales n. tibialis—  
     93:6 =  
     Medial calcaneal branches of n.  
     tibialis  
 = (a) capsulares a. renis—61;10 =  
     Capsular branches of a. renis  
 = (n) cardiaci inferiores n. recurrentis  
     —90:37 =  
     Inferior cardiac branches of n.  
     recurrens  
 = (n) cardiaci n. recurrentis—90:37  
 = (n) cardiaci n. vagi—90:34  
 = (n) cardiaci superiores n. vagi—  
     90:34 =  
     Superior cardiac branches of n.  
     vagus  
 — (a) caroticotympanicus a. carotidis  
     internae—69:69 =  
     Caroticotympanic branch of a.  
     carotis interna  
 — (a) carpeus dorsalis a. radialis—  
     71:27 =  
     Dorsal carpal branch of a. radialis  
 — (a) carpeus dorsalis a. ulnaris—  
     71:45 =  
     Dorsal carpal branch of a. ulnaris  
 — (a) carpeus volaris a. radialis—  
     71:25 =  
     Volar carpal branch of a. radialis
- (a) carpeus volaris a. ulnaris—  
     71:46 =  
     Volar carpal branch of a. ulnaris  
 — (a) cervicalis a. occipitalis—69:26  
 — (a) cervicalis a. transversae colli—  
     70:68  
 — (a) cervicalis descendens inferior +  
     superior a. occipitalis—69:26  
 — (n) cervicalis n. hypoglossi—90:61  
 — (a) cervicalis posterior a. transversae  
     colli—70:68  
 — (a) cervicalis princeps profundus +  
     superficialis—69:25  
 — (a) cervicalis trunci thyreo-cervicalis  
     70:55  
 = (a) cervico-spinales a. cervicalis as-  
     cendentis—70:56  
 — (a) cervico-vaginalis a. uterinae—  
     73:13  
 — (a) circumflexus a. circumflexae  
     femoris lateralis—73:51  
 — (a) circumflexus a. coronariae [cordis]  
     sinistrae—68:55 =  
     Circumflex branch of a. coronaria  
     sinistra [of heart]  
 — (n) circumflexus n. glosso-pharyngei  
     —90:19  
 = (n) claviculares—91:19  
 — (a) cochleae a. auditivae internae—  
     98:23 =  
     Branch of a. auditiva interna to  
     cochlea  
 — (n) cochlearis n. acustici—90:5  
 = (n) coeliaci plexus gastrici posterioris  
     —90:54 =  
     Coeliac branches of posterior  
     gastric plexus  
 — (n) colli n. facialis—89:62 =  
     Branch of n. facialis of neck  
 — (n) communicans—80:13 =  
     Communicating branch  
 — (a) communicans—67:4 =  
     Communicating branch  
 — (a) communicans a. peronaeae—  
     74:21 =  
     Communicating branch of a.  
     peronaea  
 — (n) communicans externus n. facialis  
     cum n. acustico externo—89:68  
 — (n) communicans ganglii otici cum n.  
     auriculo-temporali—89:41  
 = (n) communicans ganglii submaxil-  
     laris cum n. linguale—89:44 =  
     Communicating branches of sub-  
     maxillary ganglion with n.  
     lingualis

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- (n) communicans Arnoldi n. facialis cum n. acustico—89:68
- (n) communicans n. facialis cum n. acustico externo—89:68
- (n) communicans n. facialis cum n. glosso-pharyngeo—89:56
- (n) communicans n. facialis cum plexu tympanico—89:51
- (n) communicans n. peronaei—92:59
- (n) communicans n. tibialis—93:3
- (n) communicans nn. spinalium—90:72 =  
Communicating branch of nn. spinales
- (n) communicans surae—93:3
- = (n) concharum, Valentin—88:30
- (- (a) costalis lateralis a. mammae internae)—70:44 =  
(Lateral costal branch of a. mammae interna)
- (a) cricothyreoideus a. thyreoideae superioris—68:65 =  
Cricothyroid branch of a. thyreoidea superior
- (n) crico-thyreoideus n. laryngei superioris—90:31
- (n) cruralis n. genito-cruralis—92:34
- (n) cubitalis n. cutanei antibrachii medialis—91:46
- (n) cucullaris, Schwalbe—91:20
- (n) cutaneo-ulnaris—91:47
- (n) cutaneus anterior abdominalis nn. intercostalium—92:8 =  
Anterior cutaneous abdominal branch of nn. intercostales
- = (a) cutanei anteriores abdominales ramorum anteriorum aa. intercostalium—72:3 =  
Anterior abdominal cutaneous branches of anterior branches of aa. intercostales
- = (n) cutanei anteriores n. femoralis—92:42 =  
Anterior cutaneous branches of n. femoralis
- (n) cutaneus anterior n. iliohypogastrici—92:28 =  
Anterior cutaneous branch of n. iliohypogastricus
- (n) cutaneus anterior pectoralis nn. intercostalium—92:8 =  
Anterior cutaneous pectoral branch of nn. intercostales

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- = (a) cutanei anteriores pectorales ramorum anteriorum aa. intercostalium—72:3 =  
Anterior pectoral cutaneous branches of anterior branches of aa. intercostales
- (n) cutaneus anterior ramorum anteriorum nn. thoracalium—92:8
- = (a) cutanei a. mammae internae—70:43 =  
Cutaneous branches of a. mammae interna
- = (n) cutanei cruris mediales n. sapheni—92:46 =  
Medial cutaneous branches of n. saphenus of crus
- (n) cutaneus humeri—91:36
- (n) cutaneus lateralis abdominalis nn. intercostalium—92:3 =  
Lateral cutaneous abdominal branch of nn. intercostales
- = (a) cutanei laterales abdominales ramorum anteriorum aa. intercostalium—71:67 =  
Lateral abdominal cutaneous branches of anterior branches of aa. intercostales
- (n) cutaneus lateralis n. iliohypogastrici—92:27 =  
Lateral cutaneous branch of n. iliohypogastricus
- = (n) cutanei laterales nn. intercostalium—92:7
- (n) cutaneus lateralis pectoralis nn. intercostalium—92:3 =  
Lateral cutaneous pectoral branch of nn. intercostales
- = (a) cutanei laterales pectorales rami anterioris aa. thoracalium—71:67
- = (a) cutanei laterales pectorales ramorum anteriorum aa. intercostalium—71:67 =  
Lateral pectoral cutaneous branches of anterior branches of aa. intercostales
- (a) cutaneus lateralis rami posterioris aa. intercostalium—71:64
- (a) cutaneus lateralis ramorum posteriorum aa. intercostalium—71:64  
Lateral cutaneous branch of posterior branches of aa. intercostales

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- (n) cutaneus lateralis ramorum posteriorum nn. thoracalium—91:76 ==  
Lateral cutaneous branch of posterior branches of nn. thoracales
- (a) cutaneus medialis ramorum posteriorum aa. intercostalium—71:63 ==  
Medial cutaneous branch of posterior branches of aa. intercostales
- (n) cutaneus medialis ramorum posteriorum nn. thoracalium—91:77 ==  
Medial cutaneous branch of posterior branches of nn. thoracales
- (n) cutaneus n. musculo-cutanei—91:43
- (n) cutaneus n. obturatorii—92:39 ==  
Cutaneous branch of n. obturatorius
- (n) cutaneus n. radialis—91:71
- (n) cutaneus palmaris antibrachii—91:51
- (n) cutaneus palmaris longus—91:51
- (n) cutaneus palmaris n. cutanei antibrachii medialis—91:46
- (n) cutaneus palmaris n. ulnaris—91:56 ==  
Palmar cutaneous branch of n. ulnaris
- (n) cutaneus penis—93:24
- == (n) cutanei plantares mediales n. tibialis—93:6
- (n) cutaneus ulnaris n. cutanei brachii majoris—91:47
- (n) cutaneus volaris n. cutanei brachii majoris—91:46
- (a) deltoideus a. brachialis—71:17
- (a) deltoideus a. profundae brachii—71:17 ==  
Deltoid branch of a. profunda brachii
- (a) deltoideus a. thoracoacromialis—71:5 ==  
Deltoid branch of a. thoracoacromialis
- (n) dentalis incisivus—89:30
- == (n) dentales inferiores plexus dentalis inferioris—89:30 ==  
Inferior dental branches of inferior dental plexus
- == (n) dentales n. dentalis superioris anterioris—88:50
- == (a) dentales superiores anteriores a. infraorbitalis—69:61

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- == (n) dentales superiores plexus dentalis superioris—88:50 ==  
Superior dental branches of superior dental plexus
- (a) descendens a. circumflexae femoris lateralis—73:52 ==  
Descending branch of a. circumflexa femoris lateralis
- (a) descendens anterior a. coronariae [cordis] sinistrae—68:56 ==  
Anterior descending branch of a. coronaria sinistra [of heart]
- == (a) descendentes aa. interossearum metacarpi externae—71:29
- (a) descendens a. occipitalis—69:26 ==  
Descending branch of a. occipitalis
- (a) descendens a. subscapularis—71:10
- (a) descendens a. thoracico-acromialis—71:5
- (a) descendens a. transversae colli—70:69 ==  
Descending branch of a. transversae colli
- (n) descendens inferior n. cutanei colli—90:61
- (n) descendens inferior n. hypoglossi—90:61
- (n) descendens n. cutanei colli—91:16
- (n) descendens n. hypoglossi—90:61 ==  
Descending branch of n. hypoglossus
- descendens oss. ischii—37:34
- descendens oss. pubis—37:49
- (a) descendens posterior a. coronariae [cordis] dextrae—68:53 ==  
Posterior descending branch of a. coronaria dextra [of heart]
- (a) dexter a. hepaticae propriae—72:22 ==  
Right branch of a. hepatica propria
- (a) dexter a. pulmonalis—68:41 ==  
Right branch of a. pulmonalis
- (n) digastricus n. facialis—89:54 ==  
Digastric branch of n. facialis
- == (n) digitales volares communes manus—91:53; 91:61
- (n) dorsalis antibrachii—91:47
- (n) dorsalis antibrachii n. cutanei brachii majoris—91:47
- (a) dorsalis a. ilio-lumbalis—72:50
- == (a) dorsales a. intercostalis supremae—70:64 ==  
Dorsal branches of a. intercostalis suprema

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- (a) dorsalis aa. intercostalium—71:60
- == (a) dorsales aa. interossearum metacarpi externae—71:29
- (a) dorsalis aa. lumbalium—72:10 ==  
Dorsal branch of aa. lumbales
- == (a) dorsales aa. metacarpi—71:35
- (a) dorsalis a. radialis—71:27
- == (a) dorsales a. sacralis lateralis—72:63
- (a) dorsalis a. ulnaris—71:45
- == (a) dorsales linguae a. lingualis—69:11 ==  
Dorsal branches of a. lingualis of tongue
- (n) dorsalis manus n. ulnaris—91:57 ==  
Dorsal branch of n. ulnaris of hand
- (n) dorsalis n. cutanei antibrachii medialis—91:47
- (n) dorsalis n. radialis—91:71
- (n) dorsalis n. ulnaris—91:57
- == (n) dorsales nn. spinalium dorsalium—91:75
- (v) dorsalis vv. intercostalium—76:57 ==  
Dorsal branch of vv. intercostales
- == (v) dorsales vv. intercostalium posterius—76:57
- (a) dorso-spinalis aa. intercostalium—71:60
- == (a) duodenales a. pancreaticoduodenalis superioris—72:28 ==  
Duodenal branches of a. pancreaticoduodenalis superior
- (v) emissarius vv. spinalium longitudinalium anteriorum—76:69
- eparterialis—59:49
- (a) epigastricus a. mammariae internae—70:47
- == (a) epiploici a. gastroepiploicae dextrae—72:30 ==  
Epiploic branches of a. gastroepiploica dextra
- == (a) episclerales aa. ciliarum anteriorum—70:4
- (n) epitrochlearis n. cutanei antibrachii medialis—91:47
- (n) externus cutaneus n. inguinalis interni—92:34
- (n) externus narium—88:32
- (n) externus n. accessorii—90:59 ==  
External branch of n. accessorius
- (n) externus n. lacrimalis—88:18

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- (n) externus n. laryngei superioris—90:31 ==  
External branch of n. laryngeus superior
- (n) externus n. thoracalis—91:76
- (n) facialis n. auricularis magni—91:13
- == (n) faciales n. facialis—89:60
- (n) facialis n. subcutanei malae—88:42
- (n) facialis n. subcutanei malae—88:41
- (n) facialis n. zygomatici—88:42
- == (n) faciales plexus parotidei—89:60
- (n) femoralis cutaneus n. inguinalis interni—92:34
- (n) femoralis n. genito-cruralis—92:34
- (a) fibularis a. tibialis posterioris—74:17 ==  
Fibular branch of a. tibialis posterior
- (a) fibularis superior a. tibialis posterioris—74:17
- (a) frontalis a. temporalis superficialis—69:42 ==  
Frontal branch of a. temporalis superficialis
- (n) frontalis n. frontalis—88:21 ==  
Frontal branch of n. frontalis
- == (n) gastrici n. vagi—90:50 ==  
Gastric branches of n. vagus
- == (n) genitales n. cutanei femoris posterioris—92:53
- (n) genitalis r. genito-cruralis—92:35
- == (n) gingivales inferiores plexus dentalis inferioris—89:31 ==  
Inferior gingival branches of inferior dental plexus
- == (n) gingivales superiores plexus dentalis superioris—88:51 ==  
Superior gingival branches of superior dental plexus
- == (a) glandulares a. maxillaris externae—69:17 ==  
Glandular branches of a. maxillaris externa
- == (a) glandulares a. thyreoideae inferioris—70:54 ==  
Glandular branches of a. thyreoidea inferior
- == (a) glandulares a. thyreoideae superioris—69:3 ==  
Glandular branches of a. thyreoidea superior

## RAMUS

- = (n) glandulares ganglii lingualis—89:45
- = (n) glandulares n. lingualis—89:24
- (n) gustatorii radices linguae—90:21
- (a) hepaticus dexter—72:22
- = (n) hepatici plexus gastrici posterioris—90:53 =
- Hepatic branches of posterior gastric plexus
- (a) hepaticus sinister—72:24
- horizontal, of mandible—33:61
- horizontal, of inferior maxilla—33:61
- horizontalis fossae Sylvii—85:19
- horizontalis mandibulae—33:61
- horizontalis oss. pubis—37:49
- horizontalis posterior—85:17
- (a) hyoideus a. lingualis—69:9 =
- Hyoid branch of a. lingualis
- (a) hyoideus a. thyreoideae superioris—68:62 =
- Hyoid branch of a. thyreoidea superior
- = hyparteriales—59:50
- (n) hypogastricus n. ilio-hypogastrici—92:28
- (a) iliacus a. epigastricae superficialis—73:40
- (a) iliacus a. iliolumbalis—72:61 =
- Iliac branch of a. iliolumbalis
- (n) iliacus inferior n. ilio-hypogastrici—92:27
- = (n) incisivi plexus dentalis inferioris 89:30
- (a) inferior a. glutatae superioris—73:3 =
- Inferior branch of a. glutatae superior
- inferior, of bone of ischium—37:35
- inferior, of bone of pubis—37:49
- inferior, of ischium—37:35
- = (n) inferiores n. cutanei colli—91:16 =
- Inferior branches of n. cutaneus colli
- (n) inferior n. oculomotorii—88:7 =
- Inferior branch of n. oculomotorius
- (n) inferior n. trigemini—89:6
- = (n) inferiores n. vagi—90:47
- (n) inferior n. vestibuli—90:2
- (n) inferior n. zygomatici—88:42
- inferior oss. ischii—37:35 =
- Inferior ramus of bone of ischium
- inferior oss. pubis—37:49 =
- Inferior ramus of bone of pubis
- inferior, of pubis—37:49

## RAMUS

- (n) inframaxillaris n. facialis—89:62
- = (n) infraorbitales n. facialis—89:60
- (n) infrapatellaris n. sapheni—92:45 =
- Infrapatellar branch of n. saphenus
- = (a) inguinales a. cruralis—73:44
- = (a) inguinales a. femoralis—73:44 =
- Inguinal branches of a. femoralis
- (n) inguino-cutaneus internus—92:33
- (a) intercostalis anterior aa. intercostalium—71:65
- = (a) intercostales aa. intercostalium—71:65
- = (a) intercostales a. mammae internae—70:45 =
- Intercostal branches of a. mamma interna
- = (a) interlobulares hepatis—56:76 =
- Interlobular branches of liver
- (n) internus n. accessorii—90:58 =
- Internal branch of n. accessorius
- (n) internus n. cutanei antibrachii medialis—91:46
- (n) internus n. inguinalis interni—92:35
- (n) internus n. laryngei superioris—90:32 =
- Internal branch of n. laryngeus superior
- (n) internus n. thoracalis—91:77
- (n) interosseous internus n. mediani—91:50
- = (a) interossei metacarpi perforantes—71:35
- (n) interosseous volaris n. mediani—91:50
- (a) ischiadicus a. ischiadicae—73:5
- = (n) isthmi faucium n. lingualis—89:24 =
- Branches of n. lingualis to isthmus of fauces
- (n) jugularis n. glosso-pharyngei—90:17
- = (n) labiales inferiores n. mentalis—89:35 =
- Inferior labial branches of n. mentalis
- = (n) labiales superiores n. infraorbitales—88:55 =
- Superior labial branches of n. infraorbitalis
- (n) labio-mentalis, Arnold—89:61
- = (n) laryngopharyngei ganglii cervicalis superioris—93:57 =
- Laryngopharyngeal branches of superior cervical ganglion

## RAMUS

- (n) lateralis narium—88:30
- (n) lateralis narium n. ethmoidalis—88:30
- (n) lateralis ramorum posteriorum nn. cervicalium—91:4=  
Lateral branch of posterior branches of nn. cervicales
- (n) lateralis ramorum posteriorum n. coccygei—92:20=  
Lateral branch of posterior branches of n. coccygeus
- (n) lateralis ramorum posteriorum nn. lumbalium—92:14=  
Lateral branch of posterior branches of nn. lumbales
- (n) lateralis ramorum posteriorum nn. sacralium—92:20=  
Lateral branch of posterior branches of nn. sacrales
- = (a) lienales [a. lienalis]—72:35; 57:31=  
Splenic branches [of a. lienalis]
- = (n) lienales plexus coeliaci—90:55=  
Splenic branches of coeliac plexus
- (n) lingualis ascendens n. vagi—90:32
- = (n) linguales n. glossopharyngei—90:21=  
Lingual branches of n. glossopharyngeus
- = (n) linguales n. hypoglossi—90:64=  
Lingual branches of n. hypoglossus
- = (n) linguales n. lingualis—89:27=  
Lingual branches of n. lingualis
- = (n) linguales papillares n. hypoglossi—90:64
- (a) lumbalis a. iliolumbalis—72:59=  
Lumbar branch of a. iliolumbalis
- (n) magnus n. mediani, Wrisbergii—91:41
- = (n) malares n. facialis—89:59
- (n) malaris n. orbitalis—88:41
- (n) malaris n. subcutanei malae—88:42
- (n) malaris n. zygomatici—88:42
- = (a) mammarii a. mammariae internae—70:41=  
Mammary branches of a. mammaria interna
- = (a) mammarii externi a. thoracalis lateralis—71:8=  
External mammary branches of a. thoracalis lateralis
- = (n) mammarii laterales nn. thoracalium—92:6

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- = (a) mammarii laterales ramorum anteriorum aa. intercostalium—72:2=  
Lateral mammary branches of anterior branches of aa. intercostales
- = (n) mammarii laterales ramorum cutaneorum lateraliu nn. intercostalium—92:6=  
Lateral mammary branches of lateral cutaneous branches of nn. intercostales
- = (a) mammarii mediales aa. intercostalium—72:4=  
Medial mammary branches of aa. intercostales
- (n) mammarii mediales nn. pectoralium—92:9
- = (n) mammarii mediales ramorum cutaneorum anteriorum nn. intercostalium—92:9=  
Medial mammary branches of anterior cutaneous branches of nn. intercostales
- of mandible—33:72
- mandibulae—33:72=  
Ramus of mandible
- = (n) mandibulares n. lingualis—89:24
- = (a) marginales aa. palpebrarum—70:11 + 70:10
- (n) marginalis mandibulae n. facialis—89:61=  
Marginal branch of n. facialis of mandible
- (n) marginalis n. radialis superficialis—91:71
- = (a) mastoidei a. auricularis posterioris—69:32=  
Mastoid branches of a. auricularis posterior
- (a) mastoideus a. auricularis posterior, old.—69:35
- (a) mastoideus a. occipitalis—69:23=  
Mastoid branch of a. occipitalis
- (a) mastoideus n. auricularis magni—91:12
- maxillae inferioris—33:72
- (n) medialis ramorum posteriorum nn. cervicalium—91:3=  
Medial branch of posterior branches of nn. cervicales
- (n) medialis ramorum posteriorum n. coccygei—92:13=  
Medial branch of posterior branches of n. coccygeus

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- (n) *medialis ramorum posteriorum nn. lumbalium*—92:13 =  
 Medial branch of posterior branches of nn. lumbales
- (n) *medialis ramorum posteriorum nn. sacralium*—92:19 =  
 Medial branch of posterior branches of nn. sacrales
- = (a) *mediastinales aortae thoracalis*—71:57 =  
 Mediastinal branches of thoracic aorta
- = (a) *mediastinici anteriores a. mammae internae*—70:35
- (n) *medius n. trigemini*—88:38
- (n) *medius n. vestibuli*, Henle—90:7
- (n) *membranae tympani n. auriculo-temporalis*—89:18 =  
 Branch of n. auriculotemporalis of membrane of tympanum
- (- (a) *meningeus accessorius a. meningae mediae*)—69:51 =  
 (Accessory meningeal branch of a. meningea media)
- (- (a) *meningeus a. occipitalis*)—69:27 =  
 (Meningeal branch of a. occipitalis)
- (a) *meningeus a. pharyngo-basilaris*—69:5
- = (a) *meningei a. vertebralis*—70:22
- (a) *meningeus a. vertebralis*—70:25 =  
 Meningeal branch of a. vertebralis
- (n) *meningeus n. vagi*—90:25 =  
 Meningeal branch of n. vagus
- (n) *meningeus nn. spinalium*—90:73 =  
 Meningeal branch of nn. spinales
- (n) *meningeus posterior n. vagi*—90:25
- = (n) *mentales n. mentalis*—89:34 =  
 Mental branches of n. mentalis
- (n) *minor n. vestibuli*—90:2
- (n) *muscularis*—80:15 =  
 Muscular branch
- = (a) *musculares a. cervicalis ascendens*—70:57 =  
 Muscular branches of a. cervicalis ascendens
- = (a) *musculares a. cruralis*—73:58
- = (a) *musculares a. femoralis*—73:58 =  
 Muscular branches of a. femoralis
- = (a) *musculares a. genu supremae*—73:60 =  
 Muscular branches of a. genu suprema

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- = (a) *musculares a. mammae internae*—70:42 =  
 Muscular branches of a. mammae interna
- = (a) *musculares a. occipitalis*—69:25 =  
 Muscular branches of a. occipitalis
- = (a) *musculares a. ophthalmicae*—69:74 =  
 Muscular branches of a. ophthalmica
- = (a) *musculares a. radialis*—71:24 =  
 Muscular branches of a. radialis
- = (a) *musculares a. ulnaris*—71:44 =  
 Muscular branches of a. ulnaris
- = (n) *musculares nervorum*—80:15
- (n) *muscularis n. accessorii*—90:59
- = (n) *musculares n. axillaris*—91:35 =  
 Muscular branches of n. axillaris
- = (n) *musculares n. cruralis*—92:43
- = (n) *musculares n. femoralis*—92:43 =  
 Muscular branches of n. femoralis
- = (n) *musculares n. iliohypogastrici*—92:26 =  
 Muscular branches of n. iliohypogastricus
- = (n) *musculares n. ilioinguinalis*—92:30 =  
 Muscular branches of n. ilioinguinalis
- = (n) *musculares nn. intercostalium*—92:2 =  
 Muscular branches of nn. intercostales
- = (n) *musculares n. ischiadici*—92:55 =  
 Muscular branches of n. ischiadicus
- = (n) *musculares n. mediani*—91:49 =  
 Muscular branches of n. medianus
- = (n) *musculares n. musculocutanei*—91:42 =  
 Muscular branches of n. musculocutaneus
- (n) *muscularis n. peronaei*—92:65
- = (n) *musculares n. peronaei communis*—92:57 =  
 Muscular branches of n. peronaeus communis
- = (n) *musculares n. peronaei profundi*—92:66 =  
 Muscular branches of n. peronaeus profundus
- = (n) *musculares n. peronaei superficialis*—92:61 =  
 Muscular branches of n. peronaeus superficialis
- = (n) *musculares n. radialis*—91:67 =  
 Muscular branches of n. radialis



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- (n) muscularis n. radialis profundus —91:63
- == (n) musculares nn. thoracalium—92:2
- == (n) musculares n. tibialis—92:69 ==  
Muscular branches of n. tibialis
- == (n) musculares n. ulnaris—91:64 ==  
Muscular branches of n. ulnaris
- == (n) musculares plexus lumbalis—92:24 ==  
Muscular branches of lumbar plexus
- == (a) musculares ramorum anteriorum aa. intercostalium—71:66 ==  
Muscular branches of anterior branches of aa. intercostales
- == (a) musculares ramorum posteriorum aa. intercostalium—71:62 ==  
Muscular branches of posterior branches of aa. intercostales
- (a) muscoli quadrigemini capitis a. carotis externae—69:21
- (a) muscoli quadrigemini capitis a. maxillaris externae—69:21
- (a) musculo-articularis a. cruralis—73:59
- (n) musculo-articularis, Arnoldi—89:53
- (a) mylohyoideus a. alveolaris inferioris—69:48 ==  
Mylohyoid branch of a. alveolaris inferior
- (a) myo-mastoideus a. auricularis posterioris—69:35
- (a) narium posterior lateralis a. spheno-palatinae—69:67
- (a) narium posterior medialis a. spheno-palatinae—69:67
- == (n) nasales anteriores n. ethmoidalis anterioris—88:28 ==  
Anterior nasal branches of n. ethmoidalis anterior
- == (n) nasales anteriores n. ethmoidalis anterioris, old.—88:29
- (n) nasalis externus n. ethmoidalis anterioris—88:32 ==  
External nasal branch of n. ethmoidalis anterior
- == (n) nasales externi n. infraorbitalis—88:53 ==  
External nasal branches of n. infraorbitalis
- == (n) nasales interni n. ethmoidalis anterioris—88:29 ==  
Internal nasal branches of n. ethmoidalis anterior

## RAMUS

- == (n) nasales interni n. infraorbitalis—88:54 ==  
Internal nasal branches of n. infraorbitalis
- (n) nasalis lateralis n. ethmoidalis—88:30
- == (n) nasales laterales n. ethmoidalis anterioris—88:30 ==  
Lateral nasal branches of n. ethmoidalis anterior
- (n) nasalis medialis n. ethmoidalis—88:31
- == (n) nasales mediales n. ethmoidalis anterioris—88:31 ==  
Medial nasal branches of n. ethmoidalis anterior
- == (n) nasales n. dentalis superioris anterioris—88:31
- == (n) nasales n. facialis—89:60
- (n) nasales n. ophthalmici—88:23
- == (n) nasales posteriores inferiores [laterales] ganglii sphenopalatini—89:1 ==  
[Lateral] inferior posterior nasal branches of sphenopalatine ganglion
- == (n) nasales posteriores superiores [laterales] ganglii sphenopalatini—88:61 ==  
[Lateral] superior posterior nasal branches of sphenopalatine ganglion
- == (n) nasales posteriores superiores mediales ganglii sphenopalatini—88:62 ==  
Medial superior posterior nasal branches of sphenopalatine ganglion
- == (a) nutricii—56:76
- (a) obturatorius a. epigastricae inferioris—73:34 ==  
Obturator branch of a. epigastrica inferior
- (a) occipitalis a. auricularis posterioris—69:35 ==  
Occipital branch of a. auricularis posterior
- == (a) occipitales a. occipitalis—69:28 ==  
Occipital branches of a. occipitalis
- (a) occipitalis a. temporalis superficialis—69:43
- (n) occipitalis n. auricularis posterioris—89:53 ==  
Occipital branch of n. auricularis posterior

## RAMUS

- (n) occipitalis n. auricularis posterioris profundi—89:53
- = (a) oesophagei a. gastricae sinistrae—72:18 =  
Oesophageal branches of a. gastrica sinistra
- = (a) oesophagei a. thyreoideae inferioris—70:52 =  
Oesophageal branches of a. thyreoidea inferior
- (n) oesophageus inferior—90:47
- = (n) oesophagei n. recurrentis—90:39 =  
Oesophageal branches of n. recurrens
- = (n) oesophagei n. vagi—90:47 =  
Oesophageal branches of n. vagus
- = (n) olfactorii mediales et laterales—88:3
- = (n) orbitales—89:59
- = (n) orbitales ganglii sphenopalatini—88:57 =  
Orbital branches of sphenopalatine ganglion
- = (n) orbitales n. facialis—89:59
- (n) orbitalis n. trigemini—88:15
- = (a) ovarici a. uterinae—73:14
- (a) ovaricus a. uterinae—73:14
- (a) ovarii a. uterinae—73:14 =  
Branch of a. uterina of ovary
- (n) palmaris longus n. ulnaris—91:56
- (n) palmaris longus n. mediani—91:51
- (n) palmaris n. cutanei brachii majoris—91:46
- (n) palmaris n. mediani—91:51 =  
Palmar branch of n. medianus
- (n) palmaris superficialis—91:56
- = (a) palpebrales a. ophthalmicae—69:73 + 70:9
- = (n) palpebrales inferiores n. infra-orhitalis—88:52 =  
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- (n) palpebralis inferior n. infratrochlearis—88:35 =  
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- = (n) palpebrales n. facialis—89:59
- (n) palpebralis superior n. infratrochlearis—88:34 =  
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- = (a) pancreatici a. lienalis—72:32 =  
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- = (a) pancreatici a. pancreaticoduodenalis superioris—72:27 =  
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- = (a) parenchymatosi a. hepaticae—56:76
- = (a) parietales aortae abdominalis—72:6 =  
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- = (a) parietales aortae thoracalis—71:56 =  
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- = (a) parietales a. hypogastricae—72:57 =  
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- (a) parietalis a. temporalis superficialis—69:43 =  
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- = (a) parotidei a. temporalis superficialis—69:37 =  
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- = (n) parotidei n. auriculotemporalis—89:19 =  
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- (n) parotideus n. auricularis magni—91:13
- = (a) pectorales a. thoracoacromialis—71:6 =  
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- = (n) pectorales laterales nn. intercostalium—92:3
- = (n) pectorales posteriores nn. intercostalium—92:3
- = (n) pectorales rami cutanei anterioris—92:8
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- = (n) pectorales superficiales nn. intercostalium—92:3
- = (n) perforantes anteriores nn. intercostalium—92:1
- = (a) perforantes aa. mammae internae—70:40 =  
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- = (a) perforantes aa. interosseorum metacarpi externae—71:35

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- = (a) perforantes aa. metacarpearum volarium—71:35 =  
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- = (a) perforantes aa. metatarsarum plantarium—74:34 =  
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- (a) perforans a. peronaeae—74:20 =  
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- = (a) perforantes interossearum metacarpi volarium—71:35
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- = (a) perforantes metatarsi posteriores aa. interossearum plantarium—74:34
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- = (a) pericardiaci aortae thoracalis—71:55 =  
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- (n) pericardiacus n. phrenici—91:22 =  
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- = (n) perineales n. cutanei femoris posterioris—92:53 =  
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- (a) petrosus—69:52
- (a) petrosus superficialis a. meningae mediae—69:52 =  
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- = (a) pharyngei a. pharyngeae ascendentes—69:6 =  
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- = (a) pharyngei a. thyreoideae inferioris—70:51 =  
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- (n) pharyngeus ganglii sphenopalatini, Meckel—88:61
- = (n) pharyngei linguales, Henle—90:18
- = (n) pharyngei n. glossopharyngei—90:18 =  
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- = (n) pharyngei n. vagi—90:28 =  
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- (n) pharyngeus supremus—90:18
- = (n) phrenicoabdominales n. phrenici—91:23 =  
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- (a) posterior a. circumflexae femoris medialis—73:48
- (a) posterior a. coronariae cordis dextrae—68:53
- (a) posterior a. coronariae cordis sinistrae—68:55
- = (a) posteriores aa. intercostalium—71:60 =  
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- (a) posterior aa. lumbalium—72:10
- (a) posterior a. obturatoriae—72:67 =  
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- = (a) posteriores a. sacralis lateralis—72:63
- (a) posterior a. temporalis superficialis—69:43
- (a) posterior a. thyreoideae superioris—69:2 =  
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- posterior fossae Sylvii—85:17
- (n) posterior n. acustici—89:69
- (n) posterior n. auricularis magni—91:12 =  
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- = (n) posteriores nn. cervicalium—91:2 =  
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- = (n) posteriores n. coccygei—92:18 =  
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- (n) posterior n. lacrimalis—88:18
- (n) posterior n. laryngei inferioris—90:42 =  
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- = (n) posteriores nn. lumbalium—92:12 =  
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- (n) posterior n. obturatorii—92:40 =  
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- (n) posterior n. radialis—91:69
- == (n) posteriores nn. sacralium—92:18 ==
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- (n) posterior nn. spinalium—90:71 ==
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  - Posterior branch of lateral abdominal cutaneous branches of aa. intercostales
- (n) posterior ramorum cutaneorum laterarium abdominalium nn. intercostalium—92:4 ==
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- (a) posterior ramorum cutaneorum laterarium pectoralium aa. intercostalium—71:68 ==
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- (a) profundus a. cervicalis ascendens—70:58 ==
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- (a) profundus a. circumflexae femoris medialis—73:48 ==
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- (a) profundus a. circumflexae femoris posterioris—73:48
- (a) profundus a. plantaris medialis—74:29 ==
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- (n) profundus n. ulnaris—91:63 ==
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- (a) pubicus a. epigastricae inferioris—73:33 ==
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- (n) recurrens n. ophthalmici—88:16
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- (a) scapularis superficialis a. transversae colli—70:61
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- == (a) sclerales aa. ciliarium anteriorum—70:4
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- (a) spinalis aa. lumbalium—72:11 =  
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- (a) spinales a. sacralis laterales—72:63 =  
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- (a) spinales a. vertebrales—70:22 =  
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- (a) sternocleidomastoideus a. thyreoideae superioris—68:63 =  
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- (a) superficialis a. circumflexae femoris medialis—73:47 =  
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- (a) superficialis a. hepaticae—56:76
- (a) superficialis a. plantaris medialis—74:30 =  
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- (n) superficialis n. musculo-cutanei—91:43
- (n) superficialis n. plantaris lateralis—93:11 =  
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- (n) superficialis n. radialis—91:71 =  
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- (n) superficialis n. ulnaris—91:60 =  
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- (n) superior n. mandibularis—89:8
- (n) superior n. maxillaris inferioris—89:9
- (n) superior n. oculomotorii—88:6 =  
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- (a) tonsillaris a. palatinae ascendentes—69:15 =  
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- == (n) tonsillares n. glossopharyngei—90:20 =  
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- == (a) tracheales a. thyreoideae inferioris—70:53 =  
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- (a) vascularis a. hepaticae—56:76
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- a. subclaviae—29:43
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- = of cerebrum—85:13
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- lateralis posterior medullae spinalis—80:32 =
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- lateralis postremus—80:33
- limitans [fossae rhomboideae]—81:65 =
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- limitans insulae—85:25
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- longitudinal, posterior, of medulla spinalis—80:30
- longitudinal, of rhomboid fovea—81:14
- longitudinal superior, of cerebrum—85:8
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- longitudinalis anterior medullae oblongatae—81:15
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- longitudinalis oss. frontalis—32:32
- longitudinalis oss. frontis—32:32
- longitudinalis oss. occipitis—30:21
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- medianus linguae—53:71 =
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- medianus posterior medullae spinalis—80:30 =
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- m. peronaei calcanei—39:19 =
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- m. peronaei longi calcanei—39:19
- m. peronaei longi oss. cuboidei—39:19
- m. peronaei oss. cuboidei—39:28 =
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- of n. petrosus superficialis major—31:17
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- of n. radialis—36:7
- of n. spinalis—28:36
- of n. ulnaris—36:8
- n. oculomotorii—83:49 =
  - Sulcus of n. oculomotorius
- n. petrosi superficialis majoris—31:17 =
  - Sulcus of n. petrosus superficialis major
- n. petrosi superficialis minoris—31:18 =
  - Sulcus of n. petrosus superficialis minor
- n. radialis—36:7 =
  - Sulcus of n. radialis
- n. spinalis—28:36 =
  - Sulcus of n. spinalis
- n. ulnaris—36:8 =
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- n. ulnaris humeri—36:8
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- obturator, of hip bone—37:46
- obturatorius oss. coxae—37:46
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- occipitalis medius—85:69
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- Superior occipital sulci
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- occipitis—30:21
- occipito-temporal, inferior—85:60
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- olfactorius lobi frontalis—85:47 ==
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- olfactorius lobi frontalis pallii—85:47
- olfactorius nasi—57:44 ==
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- == orbital, of frontal lobe—85:49
- == orbitales lobi frontalis—85:49 ==
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  - Tragi
- Tragus—100:47 =
  - Tragus
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  - Transversal
- Transversarius—23:23
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  - Transverse
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- Trigone of n. hypoglossus
- olfactorium—86:64 =
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- great—38:2
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- phalangis digitorum manus—37:2 =
- Trochlea of phalanx of digits of hand
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- tali—38:69 =
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- anonymus—68:57
- anonymus iliacus—72:55
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- brachio-cephalicus—74:51
- bronchomediastinalis dexter—78:23 =
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- cervicalis profundus n. sympathici—93:68
- communis carotidis + subclaviae dextrae—68:57
- corporis callosi—86:17 =
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- intestinalis—78:27 =
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- lumbales—78:26 =
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- lumbosacralis—92:48 =
- Lumbosacral trunk
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- anonymus—68:57
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- brachio-cephalic—74:51
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- auditory, mucous glands of—100:22
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- calcanei, Gegenbaur—39:11
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- ischiadic—37:36
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Omental tuber of pancreas
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- of vermis—82:69
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- Darwin's—100:51
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- greater, of humerus—35:71
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- ilio-pectineal—37:43
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- infraglenoid, of scapula—35:55
- inner, of tuberosity of os. calcis—39:10
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- intercondyloid lateral—38:30
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- internal, of humerus—35:72
- intervenous, of Lower—68:8
- jugular, of occipital bone—30:6
- lacrimal—97:50
- lacrimal, old.—97:33
- lesser, of calcaneus, of Broesike—39:11
- lesser of humerus—35:72
- of Lisfranc—29:42
- of Lower—68:8
- mental, of inferior maxillary bone—33:64
- mental, of mandible—33:64
- mamillary, of hypothalamus—84:26
- mamillary, of vertebrae—28:51
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- muscular, of atlas—28:55
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- obturator, anterior—37:47
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- papillary, of liver—56:62
- pharyngeal—30:2
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- posterior, of humerus, of Meckel—35:71
- posterior, of optic thalamus—84:53
- posterior, of transverse process of cervical vertebrae—28:44
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- pubic, of bone of pubis—37:44
- pubic, of pubic bone—37:44
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- of Rolando—81:25
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- scalene, of first rib—29:42
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- of scaphoid bone—36:54
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- superior, anterior, of optic thalamus—84:54

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- superior, of Humphrey—28:51
- superior, of thyroid cartilage—58:25
- supraglenoid, of scapula—35:56
- supratragic—100:53
- thyroid, inferior—58:26
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- of tibia—38:28
- transverse, of fourth tarsal bone—39:29
- of trapezium—36:59
- trochlear—32:25
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- upper, of tragus—100:53
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**Tuberculum, Tubercula—25:52 ==****Tubercle, Tubercles**

- acusticum, Schwalbe—82:7
- amygdalae, Schwalbe—82:7
- amygdaloideum, Macalister—87:21
- annulare—82:19
- anonyum—30:6
- anterius atlantis—28:55 ==
- **Anterior tubercle of atlas**
- anterius humeri, Meckel—35:71
- anterius humeri, Weber—35:72
- anterius thalami—84:54 ==
- **Anterior tubercle of thalamus**
- anterius thalami optici—84:54
- anterius [vertebrarum cervicalium]—28:41 ==

**Anterior tubercle [of cervical vertebrae]**

- areolae, Morgagni—102:16
- articulare oss. temporalis—31:67 ==
- **Articular tubercle of temporal bone**
- (— auriculae [Darwini])—100:50 ==
- (**Tubercle of auricle [of Darwin]**)
- baseos cartilaginis aryaenoideae—58:56
- brachiale humeri—36:16
- calcanei—39:11
- caroticum [vertebrae cervicalis VI]—28:42 ==

**Carotid tubercle [of sixth cervical vertebra]**

- cartilaginis aryaenoideae, Tourtual—58:56
- cartilaginis thyreoideae—58:26
- caudatum hepatis—56:63
- Chassaignaci, Macalister—28:42
- cinereum—81:25 ==

**Tuberculum cinereum**

- cinereum—84:28
- cinereum medullae oblongatae—81:25

**TUBERCULUM**

- conoideum—35:65
- corniculatum [Santorini]—58:75 ==
- **Corniculate tubercle [of Santorini]**
- == [coronae] dentis—53:20 ==
- **Tubercles [of crown] of tooth**
- costae—29:37 ==
- **Tubercle of rib**
- costae secundae—29:44
- cuneiforme [Wrisbergi]—58:74 ==
- **Cuneiform tubercle [of Wrisberg]**
- Darwini—100:50
- ephippii—30:29
- epiglotticum—58:69 ==
- **Epiglottic tubercle**
- epiglottidis, old.—58:68
- externum humeri—35:71
- faciale—82:4
- geniale—33:64
- humeri—36:9
- hypoglossi—82:2
- ilio-pectineum—37:43
- ilio-pectineum, old.—37:44
- ilio-pubicum—37:43
- inferius, Humphrey—28:50
- infraglenoidale scapulae—35:55
- intercondyloideum—38:28
- intercondyloideum laterale—38:30 ==
- **Lateral intercondyloid tubercle**
- intercondyloideum mediale—38:29 ==
- **Medial intercondyloid tubercle**
- internum humeri—35:72
- intervenosum [Loweri]—68:8 ==
- **Intervenous tubercle [of Lower]**
- jugulare oss. occipitalis—30:6 ==
- **Jugular tubercle of occipital bone**
- == lacrimalia—97:50
- == lacrimalia, old.—97:48
- lacrimale, old.—97:33
- laterale tali—39:5
- Lisfranci—29:42
- Loweri—68:8
- majus calcanei, Broesike—39:10
- majus humeri—35:71 ==
- **Greater tubercle of humerus**
- mallei—99:57
- mamillare hypothalami—84:26
- mediale, Waldeyer—37:47
- mentale externum—33:63
- mentale mandibulae—33:64 ==
- **Mental tubercle of mandible**
- minus calcanei, Broesike—39:11
- minus humeri—35:72 ==
- **Lesser tubercle of humerus**
- musculare atlantis—28:55
- musculo-articulare—58:56

## TUBERCULUM

- obturatorium anterius—37:47 =  
Anterior obturator tubercle
- obturatorium interius—37:47
- (- obturatorium posterius)—37:48 =  
(Posterior obturator tubercle)
- obturatorium superius—37:47
- oss. ilium anterius imum—37:43
- oss. metatarsalis—39:36
- oss. multanguli majoris—36:59 =  
Tubercle of greater multangular bone
- oss. navicularis—36:54 =  
Tubercle of navicular bone
- oss. navicularis carpi—36:54
- papillare hepatis—56:62
- pharyngeum—30:2 =  
Pharyngeal tubercle
- plantare oss. metatarsalis primi,  
Stieda—39:35
- posterius atlantis—28:61 =  
Posterior tubercle of atlas
- posterius cerebelli—82:69
- posterius humeri, Meckel—35:71
- posterius inferius, metathalami—  
84:60
- posterius laterale, metathalami—  
84:60
- posterius thalami—84:53
- posterius thalami optici—84:53
- posterius [vertebrarum cervicalium]—  
28:44 =  
Posterior tubercle [of cervical ver-  
tebrae]
- posticum—28:61
- posticum capituli fibulae—38:56
- prostatae—62:56
- pubicum oss. pubis—37:44 =  
Pubic tubercle of bone of pubis
- pubis—37:44
- Rolandii—81:25
- Santorini—58:75
- scalen [Lisfranci]—29:42 =  
Scalene tubercle [of Lisfranc]
- sellae oss. sphenoidalis—30:29 =  
Tubercle of sella of sphenoid bone
- sellae turcicae—30:29
- superius anterius thalami optici—  
84:54
- superius, Henle—37:48
- superius Humphrey—28:51
- superius thalami optici—84:54
- supraglenoideum scapulae—35:56
- (- supratragicum)—100:53 =  
(Supratragic tubercle)
- thyroideum inferius—58:26 =  
Inferior thyroid tubercle

## TUBEROSITAS

- thyroideum superius—58:25 =  
Superior thyroid tubercle
- thyroideum inferius dextrum + sinis-  
trum—58:26
- thyroideum superius dextrum + sinis-  
trum—58:25
- transversum oss. tarsalis quarti—  
39:29
- trochleare—32:25
- vaginal, Luschka—64:38
- Wrisbergi—58:74
- Wrisbergianum—58:74
- Tuberositas, Tuberositates
- brachii—36:6
- calcanei—39:9
- claviculae—35:62
- coracoidea—35:65 =  
Coracoid tuberosity
- coracoidea claviculae—35:65
- costae II—29:44 =  
Tuberosity of second rib
- costalis claviculae—35:62 =  
Costal tuberosity of clavicle
- deltoidea humeri—36:6 =  
Deltoid tuberosity of humerus
- femoris externa—38:19
- femoris interna—38:20
- glutea femoris—38:12 =  
Gluteal tuberosity of femur
- humeri—36:6
- iliaca—37:30 =  
Iliac tuberosity
- infraglenoidalis—35:55 =  
Infraglenoid tuberosity
- infraglenoidalis scapulae—35:56
- ischii—37:36
- (- masseterica)—33:74 =  
(Masseteric tuberosity)
- maxillaris—33:3
- metatarsi hallucis—39:35
- oss. carpalis primi—36:54
- oss. cuboidei—39:29 =  
Tuberosity of cuboid bone
- oss. ilium—37:30
- oss. ischii—37:36
- oss. metatarsalis I—39:35 =  
Tuberosity of first metatarsal bone
- oss. metatarsalis V—39:36 =  
Tuberosity of fifth metatarsal bone
- oss. metatarsi hallucis—39:35
- oss. metatarsi quinti—39:36
- oss. navicularis—39:23 =  
Tuberosity of navicular bone
- oss. pubis—37:44
- oss. radialis carpi—36:54
- oss. sacri—29:13

## TUBEROSITAS

- oss. tarsalis quarti—39:29
- patellaris—38:32
- (— pterygoidea mandibulae)—33:75 =  
(Pterygoid tuberosity of mandible)
- radii—36:23 =  
Tuberosity of radius
- sacralis—29:13 =  
Sacral tuberosity
- scapulae—35:65
- scapularis, Henle—35:58
- scapularis claviculae, Luschka—35:65
- supraglenoidalis scapulae—35:56 =  
Supraglenoid tuberosity of scapula
- tibiae—38:32 =  
Tuberosity of tibia
- tibiae externa—38:25
- tibiae interna—38:24
- tibialis—38:32
- tympani—99:8
- ulnae—36:37 =  
Tuberosity of ulna
- ulnae major—36:37
- unguicularis manus—37:3 =  
Ungual tuberosity of hand
- unguicularis pedis—39:41 =  
Ungual tuberosity of foot
- unguicularis phalangium digitorum  
manus—37:3
- unguicularis phalangium digitorum  
pedis—39:41
- zygomata, Henle—35:10
- Tuberosity, Tuberosities
- bicipital—36:23
- calcaneal—39:9
- of clavicle—35:62
- conoid, of clavicle—35:65
- coracoid—35:65
- costal, of clavicle—35:62
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- deltoid, of humerus—36:6
- external, of femur—38:19
- external, of tibia—38:25
- of fifth metatarsal bone—39:36
- of first carpal bone—36:54
- of first metatarsal bone—39:35
- of fourth tarsal bone—39:29
- gluteal, of femur—38:12
- greater, of humerus—35:71
- of greater multangular bone—36:59
- greater, of ulna—36:37
- of humerus—36:6
- iliac—37:30
- of ilium—37:30
- infraglenoid—35:55
- inner, of femur—38:20
- internal, of femur—38:20

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- internal, of tibia—38:24
- of ischium—37:36
- lateral, of femur—38:19
- lesser, of humerus—35:72
- masseteric—33:74
- of maxilla—33:3
- medial, of femur—38:20
- metatarsal, of hallux—39:35
- of navicular bone—39:23
- omental of liver—56:67
- omental, of pancreas—56:37
- of os. calcis—39:9
- outer, of femur—38:19
- patellar—38:32
- of pubic bone—37:44
- pyramidal, of palatal bone—33:37
- pterygoid, internal—33:75
- pterygoid, of mandible—33:75
- of radius—36:23
- sacral—29:13
- of sacrum—29:13
- of scaphoid bone—36:54
- of scaphoid bone—39:23
- of scapula—35:65
- scapular, of clavicle, of Luschka—  
35:65
- scapular, of Henle—35:58
- of second rib—29:44
- supraglenoid, of scapula—35:56
- of tibia—38:32
- of trapezium—36:59
- of tympanum—99:8
- of ulna—36:37
- ungual, of foot—39:41
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- Tubule, Tubules—25:53
- aberrant, of epididymis—62:15
- of Bellini—60:54
- biliferous—57:10
- carotico-tympanic—31:42
- central, of modiolus—98:67
- dental—53:40
- galactophorous—102:10
- of kidney—60:52
- lactiferous—102:10
- looped, of Henle—60:53
- paraurethral—65:3
- renal—60:52
- renal, contorted—60:53
- renal, convoluted—60:53
- renal, straight—60:54
- semicircular, membranous—97:64
- seminal—62:3 + 62:4
- seminiferous, convoluted—62:3
- seminiferous, straight—62:4
- Skene's—65:3
- spiral, of modiolus—98:66

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- subtracheal—53:75
- of testis—62:7
- uriniferous—60:52
- uriniferous, convoluted part of—60:53
- uriniferous, straight part of—60:54

**Tubulus, Tubuli—25:53 =****Tubule, Tubules**

- Belliniani—60:54
- biliferus—57:10
- carotico-tympanici—31:42
- centrales modioli—98:67
- contorti renis—60:53
- dentales—53:40
- galactophori—102:10
- lactiferi—102:10
- paraurethralis—65:3
- renales—60:52 =

**Renal tubules**

- renales contorti—60:53 =

**Convoluted renal tubules**

- renales recti—60:54 =

**Straight renal tubules**

- semicirculares—97:64
- seminalis—62:3 + 62:4
- seminiferi—62:3 + 62:4
- seminiferi contorti—62:3 =

**Convoluted seminiferous tubules**

- seminiferi recti—62:4 =

**Straight seminiferous tubules**

- Skenei—65:3
- spiralis modioli—98:66
- subtrachealis, Macalister—53:75
- uriniferi—60:52

**Tubus, Tubi**

- alimentarius—54:65
- cibarius—54:65
- digestivus—54:65
- digestorius—54:65 =

**Digestive tube**

- ingestorius—54:65
- subtrachealis, Macalister—53:75

**Tufts, synovial—40:34****Tunic, Tunics—25:54**

- arachnoid, of eye—95:23
- external, of kidney—60:49
- fatty, of kidney—60:49
- fibrous—52:3
- pharyngeal—54:44
- pharyngo-basilar—54:44
- of Ruysch—95:43
- vascular, of eye—95:39
- vascular, of Haller—95:42
- of vitreous body—96:42

**Tunica, Tunicae—25:54 =****Coat, Coats**

- adiposa renis—60:49
- adnata oculi—97:34

**TUNICA**

- adnata oculi—97:31
- adnata testis—62:40
- adventicia—52:4
- adventitia—52:4 =
- Adventitious coat
- adventitia ductus deferentis—62:24 =
- Adventitious coat of ductus deferens
- adventitia oesophagi—54:70 =
- Adventitious coat of oesophagus
- adventitia tubae uterinae—63:67 =
- Adventitious coat of uterine tube
- adventitia ureteris—61:22 =
- Adventitious coat of ureter
- adventitia vasorum—67:25
- adventitia, of vessels—67:25
- adventitia vesiculae seminalis—62:33 =
- Adventitious coat of seminal vesicle
- albuginea—52:2 =
- Albuginous coat
- albuginea corporum cavernosorum penis—63:9 =
- Albuginous coat of cavernous bodies of penis
- albuginea lienis—57:28 =
- Albuginous coat of spleen
- albuginea oculi—95:19
- albuginea penis—63:9
- albuginea renis—60:50
- albuginea testis—61:73 =
- Albuginous coat of testis
- amphiblestroides—96:18
- arachnoidea cerebri—87:45
- arachnoidea oculi—95:23
- carnea testis—47:30; 62:46
- carnea testis—63:34
- cellularis corporis vitrei—96:43
- cellulosa—52:8
- cellulosa coli—56:4
- cellulosa intestini tenui—55:34
- cerebri—87:33
- cerebri propria—87:33
- cerebri propria—87:57
- chorio-capillaris—95:43
- coerulea—95:55
- conjunctiva—97:29
- conjunctiva bulbi—97:34
- conjunctiva bulbi oculi—97:34 =
- Conjunctival coat of bulb of eye
- conjunctiva palpebrarum—97:35 =
- Conjunctival coat of palpebrae
- cornea—95:18
- cornea opaca oculi—95:19
- cornea pellucida—95:27
- cremasterica—62:47
- cremasterica testis—47:30; 62:46

## TUNICA

- dartos—63:34 ==  
    Dartos coat
- Demoursiana—95:36
- dura—95:18
- elastica interna—67:27
- elastico-muscularis—67:26
- erythroides testis—47:30; 62:46
- externa vasorum [adventicia]—  
    67:25 ==  
    External coat of vessels [ad-  
    venticia]
- externa folliculi ovarii—63:47
- externa folliculorum, Graafi—63:47
- externa renis—60:49
- externa thecae folliculi—63:48 ==  
    External coat of theca of follicle
- externa vasorum—67:25
- fibrosa—52:3 ==  
    Fibrous coat
- fibrosa communis—62:45
- fibrosa corporum cavernosorum penis  
    —63:9
- fibrosa lienis—57:28
- fibrosa oculi—95:18 ==  
    Fibrous coat of eye
- fibrosa ovarii—63:47
- fibrosa renis—60:50 ==  
    Fibrous coat of kidney
- fibrosa, Sebileau—62:45
- fibrosa testis—61:73
- folliculi, Bischoff—63:47
- folliculi, Krause—63:48
- folliculi ovarii—63:47
- folliculorum, Graafi—63:48
- == funiculi spermatici—62:37 ==  
    Coats of spermatic funiculus
- Halleri—95:42
- hyaloidea interna—96:43
- intercolumnaris, Rauber—62:47
- interna folliculorum, Graafi—63:49
- interna pharyngis, Luschka—54:49
- interna thecae folliculi—63:49 ==  
    Internal coat of theca of follicle
- intima renis—60:50
- intima renis—60:51
- intima vasorum—67:27 ==  
    Inner coat of vessels
- media vasorum—67:26 ==  
    Middle coat of vessels
- mucosa—52:5 ==  
    Mucous coat
- mucosa bronchiorum—59:53 ==  
    Mucous coat of bronchi
- mucosa coli—56:5 ==  
    Mucous coat of colon
- mucosa ductus deferentis—62:29 ==  
    Mucous coat of ductus deferens

## TUNICA

- mucosa intestini recti—56:17 ==  
    Mucous coat of straight intestine
- mucosa intestini tenuis—55:35 ==  
    Mucous coat of small intestine
- mucosa laryngis—59:23 ==  
    Mucous coat of larynx
- mucosa linguae—53:62 ==  
    Mucous coat of tongue
- mucosa oesophagi—54:75 ==  
    Mucous coat of oesophagus
- mucosa oris—52:43 ==  
    Mucous coat of mouth
- mucosa pharyngis—54:45 ==  
    Mucous coat of pharynx
- mucosa recti—56:17
- mucosa tracheae—59:53 ==  
    Mucous coat of trachea
- mucosa tracheae et bronchiorum—  
    59:53 ==  
    Mucous coat of trachea and bronchi
- mucosa tubae auditivae—100:21 ==  
    Mucous coat of auditory tube
- mucosa tubae uterinae—63:72 ==  
    Mucous coat of uterine tube
- mucosa tympanica—100:1 ==  
    Tympanic mucous coat
- mucosa ureteris—61:27 ==  
    Mucous coat of ureter
- mucosa urethrae muliebris—64:77 ==  
    Mucous coat of female urethra
- mucosa uteri—64:20 ==  
    Mucous coat of uterus
- mucosa vaginae—64:32 ==  
    Mucous coat of vagina
- mucosa ventriculi—55:20 ==  
    Mucous coat of stomach
- mucosa vesicae felleae—57:13 ==  
    Mucous coat of gall bladder
- mucosa vesicae urinariae—61:43 ==  
    Mucous coat of urinary bladder
- mucosa vesiculae seminalis—62:35 ==  
    Mucous coat of seminal vesicle
- muscularis—52:11 ==  
    Muscular coat
- muscularis bronchiorum—59:51 ==  
    Muscular coat of bronchi
- muscularis cervicis uteri—64:19 ==  
    Muscular coat of cervix of uterus
- muscularis coli—55:81 ==  
    Muscular coat of colon
- muscularis ductus deferentis—62:25 ==  
    Muscular coat of ductus deferens
- muscularis intestini tenuis—55:31 ==  
    Muscular coat of small intestine
- muscularis mucosae—52:7
- muscularis mucosae of colon—56:6



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- muscularis mucosae of oesophagus—  
54:76
- muscularis mucosae of rectum—56:18
- muscularis mucosae of small intestine  
—55:36
- muscularis mucosae of stomach—  
55:21
- muscularis oesophagi—54:71 =  
Muscular coat of oesophagus
- muscularis pharyngis—54:50 =  
Muscular coat of pharynx
- muscularis recti—56:13 =  
Muscular coat of rectum
- muscularis renis—60:51 =  
Muscular coat of kidney
- muscularis tracheae—59:51 =  
Muscular coat of trachea
- muscularis tracheae et bronchiorum  
59:51 =  
Muscular coat of trachea and  
bronchi
- muscularis tubae Falloppiae—63:68
- muscularis tubae uterinae—63:68 =  
Muscular coat of uterine tube
- muscularis ureteris—61:23 =  
Muscular coat of ureter
- muscularis urethrae muliebris—  
64:73 =  
Muscular coat of female urethra
- muscularis uteri—64:18 =  
Muscular coat of uterus
- muscularis vaginae—64:31 =  
Muscular coat of vagina
- muscularis ventriculi—55:12 =  
Muscular coat of stomach
- muscularis vesicae felleae—57:12 =  
Muscular coat of gall bladder
- muscularis vesicae urinariae—  
61:36 =  
Muscular coat of urinary bladder
- muscularis vesiculae seminalis—  
62:34 =  
Muscular coat of seminal vesicle
- musculo-elastica—67:26
- nervea coli—56:4
- nervea intestini tenuis—55:34
- nervea oculi, Hyrtl—96:18
- nervea pharyngis—54:49
- nervea ventriculi—55:19
- nervea, Willis—55:34
- pharyngo-basilaris—54:44
- propria—25:55 =  
Proper coat
- propria cerebri—87:33
- propria corii—101:16 =  
Proper coat of corium
- propria encephali—87:57

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- propria folliculi—63:48
- propria folliculi, Arnold—63:49
- propria hepatis—56:75
- propria intestini tenuis—55:34
- propria lienis—57:28
- propria medullae, spinalis—87:54
- propria, of mucous membrane—52:6
- propria pharyngis—54:49
- propria renis—60:50
- propria, of seminiferous tubules—62:5
- propria, of spleen—57:28
- propria testis—61:73
- propria, of tubule of testis—62:5
- propria tubuli testis—62:5 =  
Tunica propria of tubule of testis
- propria ventriculi—55:19
- propria viscerum—52:8
- Ruyschi—95:43
- sclerae—95:19
- sclerae oculi—97:34
- sclerotica—95:19
- serosa—52:12 =  
Serosus coat
- serosa coli—55:79 =  
Serosus coat of colon
- serosa hepatis—56:55 =  
Serosus coat of liver
- serosa intestini tenuis—55:30 =  
Serosus coat of small intestine
- serosa lienis—57:27 =  
Serosus coat of spleen
- serosa peritoneaei—65:47 =  
Serosus coat of peritoneum
- serosa testis—62:41
- serosa tubae uterinae—63:66 =  
Serosus coat of uterine tube
- serosa uteri [Perimetrium]—64:17 =  
Serosus coat of uterus [Perime-  
trium]
- serosa ventriculi—55:11 =  
Serosus coat of stomach
- serosa vesicae felleae—57:11 =  
Serosus coat of gall bladder
- serosa vesicae urinariae—61:35 =  
Serosus coat of urinary bladder
- serosa viscerum—52:12
- submucosa—52:8
- submucosa urethrae muliebris—  
64:76 =  
Submucous coat of female urethra
- tertia renis—60:51
- testis—62:37 =  
Coats of testis
- testis, old.—63:34
- uvea—96:17
- uvea oculi—96:14
- vaginalis bulbi—97:7

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- vaginalis communis [testis et funiculi spermatici]—62:45 =
  - Common vaginal coat [of testis and spermatic funiculus]
- vaginalis, Cruveilhier—62:39
- vaginalis oculi—97:7
- vaginalis propria funiculi spermatici—62:45
- vaginalis propria testis—62:39 =
  - Proper vaginal coat of testis
- vaginalis of testis—62:39
- vasculosa—52:8
- vasculosa cerebri—87:57 + 95:38
- vasculosa oculi—95:38 =
  - Vascular coat of eye
- vasculosa oculi, old.—95:39
- vasculosa pharyngis—54:49
- vasculosa testis—47:30; 62:46
- vasculosa ventriculi—55:19
- vasculosa viscerum—52:8
- vesicae, Lieutaudi—61:46
- villosa intestini tenuis—55:35
- villosa oculi—95:43
- vitrea—96:42
- Turbinate
  - highest—57:45
  - inferior—57:48
  - middle—57:47
  - sphenoidal—30:39
  - superior—57:46
  - supreme—57:45
- Tutamen, Tutamina
  - oculi—96:62
- Tympanum—99:28
  - secundarium—98:78
  - secundarium, Scarpae—100:10
  - secondary—100:10
- Typhlon—55:62
- Tyson, crypts of—63:17
  - glands of—63:17

## U.

- Ugola—54:13
- Ulna—36:33 =
  - Ulna
    - anterior surface of—36:42
    - body of—36:34
    - dorsal surface of—36:41
    - external border of—36:40
    - humeral incisure of—36:38
    - internal surface of—36:43
    - interosseous crest of—36:40
    - interosseous ridge of—36:40
    - lateral border of—36:40

## URETHRA

- lesser sigmoid cavity of—36:39
- lesser sigmoid fossa of—36:39
- lunate cavity of—36:39
- lunate sinus of—36:39
- medial surface of—36:43
- palmar surface of—36:42
- posterior surface of—36:41
- radial incisure of—36:39
- shaft of—36:34
- semilunar fossa of—36:38
- semilunar incisure of—36:38
- sigmoid incisure of—36:38
- smaller sigmoid cavity of—36:39
- volar surface of—36:42
- Ulnar—23:35
- Ulnaris—23:35 =
  - Ulnar
- Umbilicus—26:58 =
  - Umbilicus
- Umbo—25:56 =
  - Umbo
    - membranae tympani—99:36 =
      - Umbo of membrane of tympanum
    - of membrane of tympanum—99:36
    - of tympanic membrane—99:36
- Uncinus—86:8
- Uncus—86:8
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  - [gyri hippocampi]—86:8 =
    - Uncus [of gyrus of hippocampus]
  - of gyrus of hippocampus—86:8
  - of hamate bone—36:63
  - oss. hamati—36:63
- Unguis, Ungues—101:48 =
  - Nail, Nails
    - ventriculi lateralis cerebri—86:48
- Urachus—61:34 =
  - Urachus
- Ureter—61:19 =
  - Ureter
    - mucous glands of—61:28
    - primordialis—65:14
- Urethra
  - anterior, Finger—63:25
  - anterior, Waldeyer—63:24 + 63:25
  - female—64:70
    - of female—64:70
  - hemispheres of bulb of—63:7
  - male—63:19
    - of male—63:19
  - muliebris—64:70 =
    - Female urethra
      - navicular fossa of—63:26
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## URETHRA

- virilis—63:19 =
- Male urethra
- Urocystis—61:29
- Uterus—63:76 =
- Uterus
- anterior surface of—64:3
- body of—63:77
- cervical glands of—64:15
- fundus of—64:1
- intestinal surface of—64:4
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- posterior lip of cervix of—64:12
- posterior surface of—64:4
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- Utricle—97:63
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- Utriculus—97:63 =
- Utricle
- labyrinthi—97:63
- macula acustica of—97:77
- prostaticus—63:23 =
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- Uvea—96:17
- iris—96:17
- Uvula—25:57 =
- Uvula
- of bladder—61:47
- cerebelli—82:71
- of cerebellum—82:71
- [palatina]—54:13 =
- [Palatine] uvula
- palatine—54:13
- [vermis]—82:71 =
- Uvula [of vermis]
- of vermis—82:71
- vesicae—61:47 =
- Uvula of bladder
- of worm of cerebellum—82:71

## V.

- Vagina—64:25
- Vagina, Vaginae—25:58 =
- Sheath, Sheaths
- bulbi—97:7
- externa n. optici—95:5
- femoralis—49:62
- fibrosa n. optici—95:5
- fibrosa tendinis—45:40 =
- Fibrous sheath of tendon
- fornix of—64:26
- intercolumnaris, Scarpae—62:47
- masculina—63:23
- mucosae—50:8 =
- Mucous sheaths

## VAGINA

- mucosa intertubercularis—47:71 =
- Intertubercular mucous sheath
- mucosa tendinis—45:41; 50:13 =
- Mucous sheath of tendon
- mucosae tendinum digitorum pedis—50:4 =
- Mucous sheaths of tendons of digits of foot
- mucosae tendinum flexorum manus—48:58 =
- Mucous sheaths of tendons of flexors of hand
- mucosae tendinum musculorum flexorum digitorum—48:58
- muliebris—64:25 =
- Female sheath
- m. recti—47:39
- m. recti abdominis—47:39 =
- Sheath of m. rectus abdominis
- n. optici—95:5 =
- Sheaths of optic nerve
- oculi—97:7
- processus styloidei—31:32 =
- Sheath of styloid process
- recto-abdominalis—47:39
- Scarpae—62:47
- synovialis—45:41; 50:13
- tendinosa cruris—49:70
- tendinum digitales manus—50:51 =
- Digital sheaths of tendons of hand
- tendinum digitales pedis—51:44 =
- Digital sheaths of tendons of foot
- tendinum mm. abductoris longi et extensoris brevis pollicis—50:37 =
- Sheaths of tendons of mm. abductor longus and extensor brevis pollicis
- tendinum mm. extensorum carpi radialis—50:38 =
- Sheath of tendons of mm. extensores carpi radiales
- tendinis m. extensoris carpi ulnaris—50:42 =
- Sheath of tendon of m. extensor carpi ulnaris
- tendinum mm. extensoris digitorum communis et extensoris indicis—50:40 =
- Sheath of tendons of mm. extensor digitorum communis and extensor indicis
- tendinis m. extensoris digiti minimi—50:41 =
- Sheath of tendon of m. extensor digiti minimi

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- = tendinum m. extensoris digitorum pedis longi—51:31 =  
Sheaths of tendons of m. extensor digitorum longus of foot
- tendinis m. extensoris digiti quinti—50:41
- tendinis m. extensoris hallucis longi—51:30 =  
Sheath of tendon of m. extensor hallucis longus
- tendinis m. extensoris pollicis longi—50:39 =  
Sheath of tendon of m. extensor pollicis longus
- tendinum mm. flexorum communium manus—50:48 =  
Sheath of tendons of mm. flexores communes of hand
- = tendinum mm. flexorum digitorum manus—48:59
- = tendinum m. flexoris digitorum pedis longi—51:32 =  
Sheaths of tendons of m. flexor digitorum longus of foot
- tendinis m. flexoris hallucis longi—51:34 =  
Sheath of tendon of m. flexor hallucis longus
- tendinis m. flexoris pollicis longi—50:49 =  
Sheath of tendon of m. flexor pollicis longus
- tendinum mm. peronaeorum communis—51:35 =  
Common sheath of tendons of peroneal muscles
- tendinis m. peronaei longi plantaris—51:41 =  
Plantar sheath of tendon of m. peroneus longus
- tendinis m. tibialis anterioris—51:29 =  
Sheath of tendon of m. tibialis anterior
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- tubercle of—64:38
- urethral carina of—64:38
- vasorum—67:29 =  
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- vault of—64:26
- Vaginulae tendinum mm. lumbicalium pedis synoviales—51:43

- Vallecula, Valleculae—25:59 =  
Vallecula, Valleculae
- cerebelli—82:56 =  
Vallecula of cerebellum
- of cerebellum—82:56
- epiglottic—59:12
- epiglottica—59:12 =  
Epiglottic vallecula
- glosso-epiglottic, of Rauber—59:12
- glosso-epiglottica, Rauber—59:12
- laryngis—59:12
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- = sciatic—77:41
- = scrotal, anterior—77:63
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- small, of heart—74:47
- = of small intestine—77:18
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- splenic—77:30
- == stellate, of kidney—61:18
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- stylomastoid—76:12
- subclavian—76:26
- == subconjunctival—75:64
- subcutaneous—67:11
- == subcutaneous, of abdomen—74:66
- == subcutaneous, dorsal, of penis—77:62
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- == superficial, anterior, of spinal cord—76:70
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- == superficial, posterior, of spinal cord—77:1
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- == superior, of cerebellum—75:45
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- == thyroid, superior—75:10
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- == transverse, of neck—76:28
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- == tympanic—76:11
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- umbilical, fossa of—56:53
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- vertebral, external—74:64
- vertebral, internal—74:63
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- == vertebral, posterior—76:65
- == vertebral, superficial—76:63
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- == vestibular—98:28
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- == vorticose—75:60
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- medullare inferius—82:10
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- medullary, anterior, frenulum of—83:32
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- = absorbentes—78:18
- acromio-thoracica—76:27
- anastomotica magna—75:53
- anastomotica magna cerebri—75:48
- angularis—75:71 =
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- anonyma—76:26
- anonyma brachio-cephalica—76:26
- = anonymae dextra et sinistra—74:51 =
  - Anonymous veins, right and left
- anonyma iliaca, Henle—77:37
- anonyma sinistra—74:51 =
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- aquaeductus cochleae—74:71; 98:30
- aquaeductus vestibuli—98:29 =
  - Vein of aqueduct of vestibule
- = arciformes renis—61:15 =
  - Arciform veins of kidney
- arteriosa—68:40
- arteriosa, Soemmering—77:15
- = articulares mandibulae—76:10 =
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- articulare maxillae inferioris—76:10
- = ascendentes, Rosenthal—75:44
- = ascendentes, Weber—76:68
- audax, old.—68:45
- = auditivae internae—75:16; 98:25 =
  - Internal auditory veins
- = auriculares anteriores—76:8 =
  - Anterior auricular veins
- = auriculares anteriores inferiores—76:8
- = auriculares anteriores posteriores—76:8
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- auricularis posterior—76:21 =
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- = auriculares superiores—76:8
- axillaris—76:29 =
  - Axillary vein
- azyga—76:53
- azyga magna—76:53
- = azygae posteriores—75:46
- azygos—76:53 =
  - Azygos vein
- azygos cerebelli posterior—75:46

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- azygos communis, Luschka—76:53
- azygos major—76:53
- azygos minor—76:54
- azygos minor inferior—76:54
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- azygos sinistra—76:54
- basalis [Rosenthal]—75:51 =
  - Basal vein [of Rosenthal]
- = basilares—75:51
- basilaris cerebri—75:51
- basilica—76:39 =
  - Basilic vein
- = basivertebrales—76:62 =
  - Basivertebral veins
- = brachiales—76:34 =
  - Brachial veins
- brachialis medialis + lateralis—76:34
- brachio-cephalica—74:51
- = bronchiales anteriores—74:60 =
  - Anterior bronchial veins
- = bronchiales posteriores—76:60 =
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- canaliculi cochleae—74:71; 98:30 =
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- = canalis pterygoidei [Vidii]—75:5 =
  - Veins of pterygoid canal [of Vidius]
- = cardiacae—74:40
- cardiaca inferior—74:46
- cardiaca magna—74:42
- carotis externa—76:6
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- cava ascendens—77:3
- cava ascendens—77:3
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- cava descendens—74:50
- cava, fissure of—56:51
- cava, foramen of—47:19
- cava inferior—77:3 =
  - Inferior vena cava
- cava inferior, parietal roots of—77:4
- cava superior—74:50 =
  - Superior vena cava
- cava superior sinistra—74:45
- cava, visceral roots of—77:7
- = cavernosae penis—63:14 =
  - Cavernous veins of penis
- centralis gl. suprarenalis—61:62 =
  - Central vein of suprarenal gland
- = centrales hepatis—56:78 =
  - Central veins of liver
- centralis retinae—75:63 =
  - Central vein of retina
- cephalica—76:37 =
  - Cephalic vein
- cephalica accessoria—76:38 =
  - Accessory cephalic vein

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- cephalica antibrachii—76:37
- cephalica anterior—75:69
- cephalica externa, Meckel—75:69
- cephalica interna—74:69
- cephalica, old.—74:69
- cephalica posterior—74:69
- == cerebelli inferiores—75:46 ==
  - Inferior veins of cerebellum
- == cerebelli superiores—75:45 ==
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- == cerebelli superiores laterales—75:45
- cerebelli superior mediana, Cruveilhier—75:45
- == cerebrales—75:41
- == cerebrales inferiores—75:44
- cerebrialis interna—75:47
- cerebrialis magna—75:48
- == cerebrales superiores—75:42
- == cerebri—75:41 ==
  - Veins of cerebrum
- cerebri adscendens—75:51
- cerebri anterior—75:51
- == cerebri anteriores—75:44
- cerebri anterior, Henle—75:44
- == cerebri ascendentes—75:44
- == cerebri inferiores—75:44 ==
  - Inferior veins of cerebrum
- == cerebri internae—75:47 ==
  - Internal veins of cerebrum
- cerebri interna communis—75:48
- cerebri interna major—75:48
- cerebri magna [Galen]—75:48 ==
  - Great vein of cerebrum [of Galen]
- cerebri media—75:43 ==
  - Middle vein of cerebrum
- == cerebri medianae inferiores, Cruveilhier—75:44
- == cerebri posteriores inferiores—75:44
- == cerebri superiores—75:42 ==
  - Superior veins of cerebrum
- cerebri velata—75:51
- cervicalis profunda—74:64 ==
  - Deep cervical vein
- cervicalis transversa—76:28
- chorioidea—75:52 ==
  - Chorioid vein
- chorioidea lateralis—75:52
- == ciliares anteriores—75:62 ==
  - Anterior ciliary veins
- == ciliares posteriores—75:61 ==
  - Posterior ciliary veins
- == circumflexae femoris laterales—77:70 ==
  - Lateral circumflex veins of thigh
- == circumflexae femoris mediales—77:69 ==
  - Medial circumflex veins of thigh

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- circumflexa ilium interna—77:60
- circumflexa ilium profunda—77:60 ==
  - Deep circumflex iliac vein
- circumflexa ilium superficialis—77:68 ==
  - Superficial circumflex iliac vein
- == colicae dextrae—77:22 ==
  - Right colic veins
- colica media—77:23 ==
  - Middle colic vein
- colica sinistra—77:27 ==
  - Left colic vein
- colica sinistra, old.—77:26
- == columnae vertebralis anteriores—76:64
- == columnae vertebralis externae—76:63
- == columnae vertebralis internae—76:66
- == columnae vertebralis posteriores—76:65
- comitans—67:12 ==
  - Accompanying vein
- == comitantes a. cruralis—77:71
- == comitantes a. femoralis—77:71 ==
  - Accompanying veins of a. femoralis
- == comitantes crurales—77:71
- comitans n. hypoglossi—75:9 ==
  - Accompanying vein of hypoglossal nerve
- == communes antibrachii—76:34
- communicans hepatis—77:15
- communicans magna cerebri—75:53
- == conjunctivales anteriores—75:66 ==
  - Anterior conjunctival veins
- == conjunctivales posteriores—75:67 ==
  - Posterior conjunctival veins
- == cordis—74:40 ==
  - Veins of heart
- == cordis anteriores—74:48 ==
  - Anterior veins of heart
- cordis dextra—74:47
- cordis Galeni—74:46
- cordis magna—74:42 ==
  - Great vein of heart
- cordis media—74:46 ==
  - Middle vein of heart
- == cordis minimae—74:49 ==
  - Smallest veins of heart
- cordis parva—74:47 ==
  - Small vein of heart
- cordis sinistra—74:42
- == coronariae cordis anteriores—74:48
- coronaria cordis dextra—74:47
- coronaria cordis dextra anterior—74:48
- coronaria cordis dextra posterior—74:47
- coronaria cordis magna—74:42

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- coronaria cordis media—74:46
- coronaria cordis minor—74:46
- == coronariae cordis minores—74:48
- coronaria cordis parva—74:46
- == coronariae cordis parvae—74:48
- coronaria cordis posterior—74:46
- coronaria cordis sinistra—77:16
- coronaria dextra ventriculi, old.—77:16
- coronaria labii inferioris—76:1
- coronaria labii superioris—75:77
- coronaria parva—74:47
- coronaria sinistra ventriculi—77:16
- coronaria superior ventriculi—77:16
- coronaria ventriculi—77:16 ==
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- coronaria ventriculi inferior—77:19
- coronaria ventriculi superior—77:16
- corporis striati—75:50
- == costales—76:56
- costalis suprema—74:68
- == costoaxillares—76:31 ==
- Cestoaxillary veins
- cruralis—77:61
- cutanea—67:11 ==
- Cutaneous vein
- cutanea brachii lateralis—76:37
- cutanea brachii medialis—76:39
- cutanea colli inferior, Walter—76:23
- cutanea colli major—76:19
- cutanea colli posterior—76:19
- cutanea frontis magna, Weber—75:55
- cutanea radialis—76:37
- cutanea ulnaris—76:39
- cystica—77:33 ==
- Cystic vein
- diaphragmatica inferior—77:5
- == digitales communes—76:48
- == digitales communes pedis—78:9 ==
- Common digital veins of foot
- == digitales pedis dorsales—78:15 ==
- Dorsal digital veins of foot
- == digitales plantares—78:16 ==
- Plantar digital veins
- == digitales volares—76:51
- == digitales volares communes—76:48 ==
- Common volar digital veins
- == digitales volares propriae—76:51 ==
- Proper volar digital veins
- == diploëticae—75:29
- == diploëticae—75:29 ==
- Diploë veins
- diploëica frontalis—75:30 ==
- Frontal diploë vein
- diploëica occipitalis—75:33 ==
- Occipital diploë vein

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- diploëica temporalis anterior—75:31 ==
- Anterior temporal diploëic vein
- diploëica temporalis posterior—75:32 ==
- Posterior temporal diploëic vein
- == dorsales—76:57
- dorsalis clitoridis—77:51 ==
- Dorsal vein of clitoris
- == dorsales linguae—75:7 ==
- Dorsal veins of tongue
- dorsalis mediana clitoridis—77:51
- dorsalis mediana penis—77:49
- dorsalis penis—77:49 ==
- Dorsal vein of penis
- == dorsales penis subcutaneae—77:62 ==
- Dorsal subcutaneous veins of penis
- dorsalis profunda penis—77:49
- dorsalis propria mediana penis—77:49
- dorsalis superficialis antebrachii—76:38
- dorsi nasi superior, Meckel—75:75
- == dorsi nasi superiores—75:75
- == dorsi spinales—76:63
- == dorso-costales—76:56
- == duodenales—77:25 ==
- Duodenal veins
- == durae matris—75:4
- emissaria—67:17
- == emulgentes—77:9
- epigastrica inferior—77:59 ==
- Inferior epigastric vein
- epigastrica profunda—77:59
- epigastrica superficialis—77:65 ==
- Superficial epigastric vein
- epigastrica superior—74:67 ==
- Superior epigastric vein
- == opisclerales—75:64 ==
- Episcleral veins
- ethmoidalis anterior—75:56 ==
- Anterior ethmoidal vein
- ethmoidalis posterior—75:57 ==
- Posterior ethmoidal vein
- exterior anterior transversalis, Breschet—76:23
- facialis anterior—75:70 ==
- Anterior facial vein
- facialis communis—75:69 ==
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- facialis cutanea communis, M. J. Weber—75:70
- facialis cutanea magna, M. J. Weber—75:70
- facialis externa—76:6
- facialis interna—75:70
- facialis magna—75:70
- facialis posterior—76:6 ==
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- femoralis—77:61 =  
Femoral vein
- femoropoplitea—78:2 =  
Femoropopliteal vein
- = fibulares—78:3
- fossae cerebri lateralis Sylvii—75:43
- fossae Sylvii—75:43
- = frontales—75:72 =  
Frontal veins
- frontalis—75:55
- Galeni—75:48
- gastrica dextra—77:16
- gastrica superior—77:16
- = gastricae breves—77:31 =  
Short gastric veins
- gastroepiploica dextra—77:19 =  
Right gastroepiploic vein
- gastroepiploica sinistra—77:32 =  
Left gastroepiploic vein
- gastro-lienalis—77:30
- = gluteae—77:40
- = gluteae inferiores—77:41 =  
Inferior gluteal veins
- = gluteae superiores—77:40 =  
Superior gluteal veins
- = haemorrhoidales externae—77:56
- = haemorrhoidales inferiores—77:56 =  
Inferior haemorrhoidal veins
- haemorrhoidalis interna—77:29
- haemorrhoidalis media—77:55 =  
Middle haemorrhoidal vein
- haemorrhoidalis superior—77:29 =  
Superior haemorrhoidal vein
- hemiazygos—76:54 =  
Hemiazygos vein
- hemiazygos accessoria—76:55 =  
Accessory hemiazygos vein
- = hepaticae—77:8 =  
Hepatic veins
- hypogastrica—77:39 =  
Hypogastric vein
- = ileae + jejunaes—77:18
- ileocolica—77:21 =  
Ileocolic vein
- iliaca—77:37
- iliaca communis—77:37 =  
Common iliac vein
- iliaca externa—77:58 =  
External iliac vein
- iliaca interna—77:39
- iliaca primitiva—77:37
- iliolumbalis—77:44 =  
Iliolumbar vein
- innominata—74:51
- = intercapitulares manus—76:45 =  
Intercapitular veins of hand

## VENA

- = intercapitulares pedis—78:11 =  
Intercapitular veins of foot
- = intercostales—76:56 =  
Intercostal veins
- = intercostales anteriores—76:56
- intercostales communis—76:56
- = intercostales posteriores—76:56
- intercostalis suprema—74:68 =  
Highest intercostal vein
- = interlobares renis—61:14 =  
Interlobar veins of kidney
- = interlobulares hepatis—56:77 =  
Interlobular veins of liver
- = interlobulares renis—61:16 =  
Interlobular veins of kidney
- = interosseae brachii—76:34
- = interosseae communes, Theile—76:34
- = interosseae metacarpeae—76:49
- = interosseae metacarpeae dorsales—  
76:49
- = interosseae metacarpeae volares—  
76:50
- = interosseae metacarpi dorsales—76:49
- = interosseae metacarpi volares—76:50
- interventricularis posterior—74:46
- = intervertebrales—76:69 =  
Intervertebral veins
- = intestinales—77:18 =  
Intestinal veins
- = intralobulares hepatis—56:78
- = iracundiae—75:72
- = ischiadicae—77:41
- = jejuno-ileae—77:18
- jugularis anterior—76:22 =  
Anterior jugular vein
- jugularis anterior horizontalis—76:23
- jugularis cephalica—74:69
- jugularis cerebralis—74:69
- jugularis communis—74:69
- jugularis dextra et sinistra—74:51
- jugularis externa—76:19 =  
External jugular vein
- jugularis externa anterior transversalis—76:23
- jugularis interna—74:69 =  
Internal jugular vein
- = jugulares posteriores, Cruveilhier—  
76:65
- jugularis sinistra—74:51
- jugularis transversa—76:23
- jugularis transversalis anterior, Bresschet—76:23
- labialis inferior—76:1 =  
Inferior labial vein
- labialis superior—75:77 =  
Superior labial vein

## VENA

- lacrimalis—75:58 =  
Lacrimal vein
- lacrymalis—75:58
- laryngea inferior—74:55 =  
Inferior laryngeal vein
- laryngea superior—75:12 =  
Superior laryngeal vein
- lienalis—77:30 =  
Splenic vein
- = lig. teretis hepatis—77:36
- lingualis—75:6 =  
Lingual vein
- = longitudinales anteriores—76:68
- longitudinalis inferior—75:20
- = lumbales—77:6 =  
Lumbar veins
- lumbalis ascendens—76:61 =  
Ascending lumbar vein
- = lumbales transversae—77:6
- lumbo-costalis—76:61
- magna cordis—74:42
- magna Galeni—75:48
- = magnae longitudinales anteriores,  
Breschet—76:70
- = majores cerebrales, Weber—75:47
- major cerebri centralis, M. J. We-  
ber—75:47
- = majores cerebrales periphericales su-  
periores—75:42
- major cerebri interna, Theile—75:48
- major cerebri peripherica inferior, M.  
J. Weber—75:44
- majores cerebri periphericae inferi-  
ores, Weber—75:44
- = mammariae externae—76:31
- mamma interna—74:65 =  
Internal mammary vein
- Marshalli—74:44
- = massetericae—76:2 =  
Masseteric veins
- maxillaris externa—75:70
- (- mediana antibrachii)—76:41 =  
(Median vein of forearm)
- (- mediana basilica)—76:42 =  
(Median basilic vein)
- (- mediana cephalica)—76:43 =  
(Median cephalic vein)
- (- mediana colli)—76:24 =  
(Median vein of neck)
- mediana communis—76:40
- mediana cubiti—76:40 =  
Median vein of elbow
- = medianae medullae spinalis posteri-  
ores—77:1
- mediana penis—77:49

## VENA

- = mediastinales anteriores—74:59 =  
Anterior mediastinal veins
- = mediastinicae anteriores—74:59
- = medullae spinalis—76:70
- = meningeae—75:4 =  
Meningeal veins
- = meningeae mediae—76:16 =  
Middle meningeal veins
- mesaraica—77:17
- mesenterica inferior—77:26 =  
Inferior mesenteric vein
- mesenterica magna—77:17
- mesenterica minor—77:26
- mesenterica parva—77:26
- mesenterica superior—77:17 =  
Superior mesenteric vein
- = mesolobicae anteriores, Breschet—  
75:47
- = metacarpeae dorsales—76:49 =  
Dorsal metacarpal veins
- = metacarpeae volares—76:50 =  
Volar metacarpal veins
- = metacarpi dorsales—76:49
- = metacarpi volares—76:50
- = metatarsae dorsales pedis—78:10 =  
Dorsal metatarsal veins of foot
- = metatarsae plantares—78:14 =  
Plantar metatarsal veins
- = musculares—75:59 =  
Muscular veins
- = m. quadrigemini capitis—75:11
- = nasales externae—75:75 =  
External nasal veins
- = nasales laterales—75:75
- nasofrontalis—75:55 =  
Nasofrontal vein
- obliqua atrii sinistri [Marshalli]—  
74:44 =  
Oblique vein of left atrium [of  
Marshall]
- obliqua auricularis, Marshall—74:44
- obliqua posterior atrii sinistri—74:44
- = obturatoriae—77:42 =  
Obturator veins
- occipitalis—76:20 =  
Occipital vein
- = oesophageae [v. thyreoidea inferior]—  
74:62 =  
Oesophageal veins [to v. thyreoidea  
inferior]
- = oesophageae [v. azygos]—76:59 =  
Oesophageal veins [to v. azygos]
- ophthalmica cerebri—75:54
- ophthalmica externa—75:68
- ophthalmica facialis—75:68
- ophthalmica inferior—75:68 =  
Inferior ophthalmic vein



## VENA

- ophthalmica interna—75:54
- ophthalmica superior—75:54 =
  - Superior ophthalmic vein
- ophthalmomeningea—75:53 =
  - Ophthalmomeningeal vein
- ovarica—77:13 =
  - Ovarian vein
- palatina—76:4 =
  - Palatine vein
- palatina inferior—76:4
- = palpebrales—75:65 =
  - Palpebral veins
- = palpebrales inferiores—75:76 =
  - Inferior palpebral veins
- = palpebrales superiores—75:74 =
  - Superior palpebral veins
- = pancreaticae—77:20 =
  - Pancreatic veins
- = pancreaticoduodenales—77:24 =
  - Pancreaticoduodenal veins
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