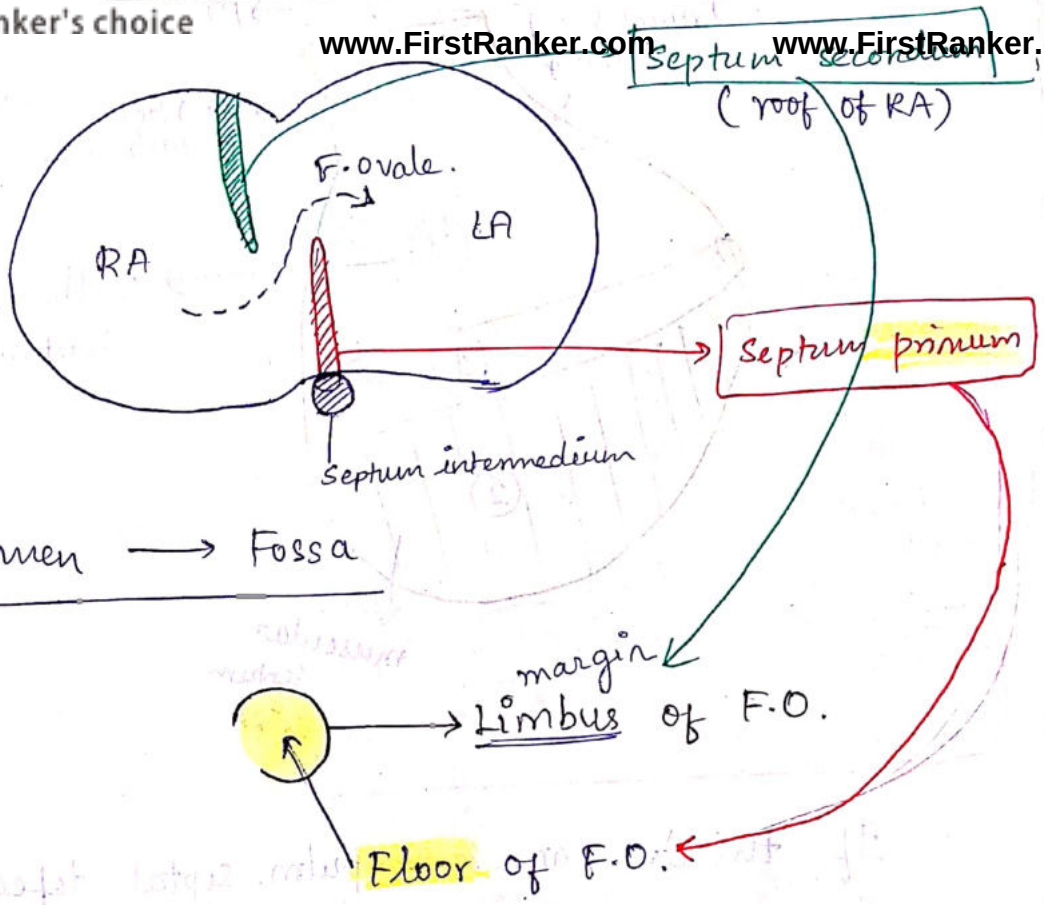
Inter atrial development



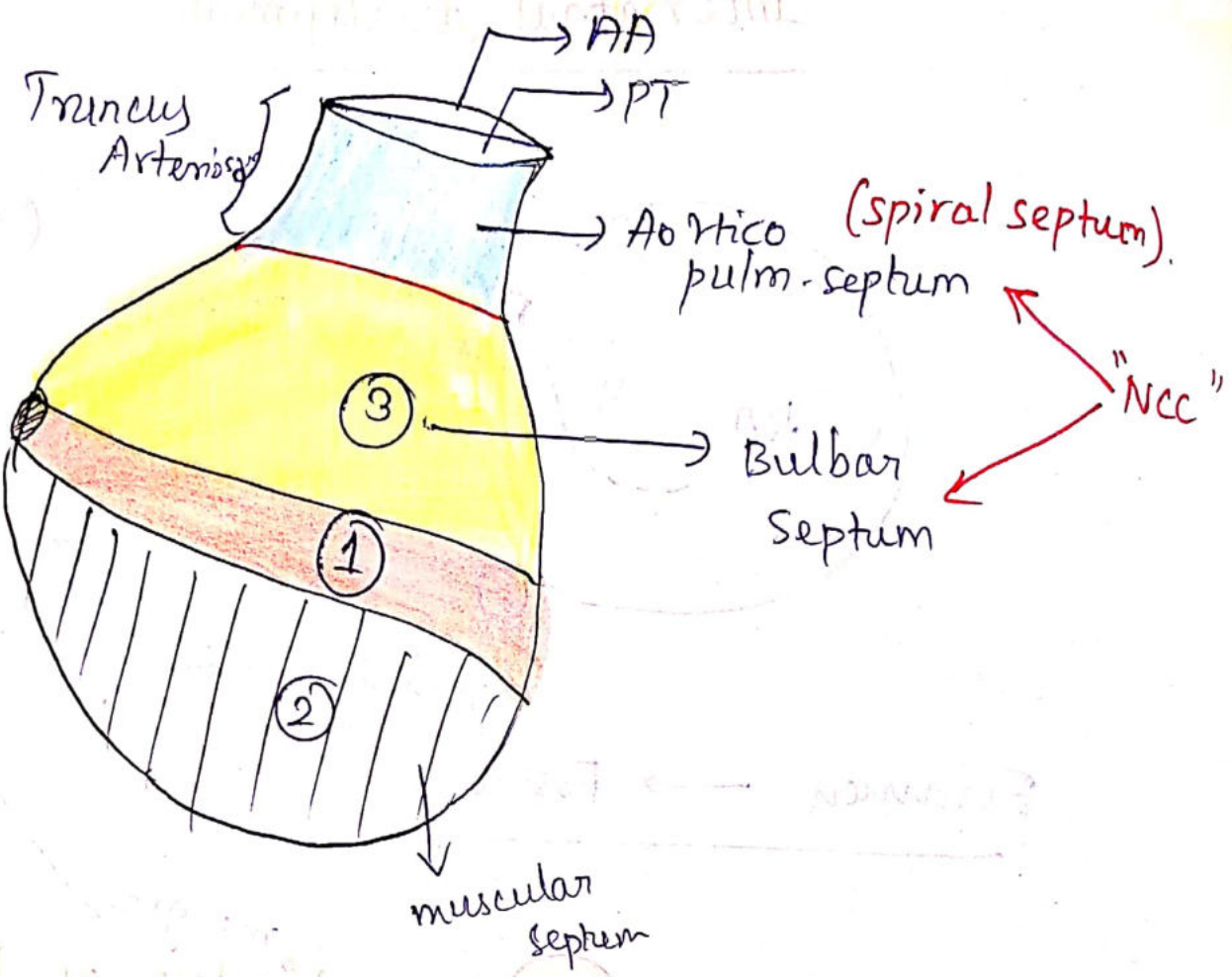
Septum primum → floor of F.O.

septum secondum → limbus of F.O.

Interventricular Septum

formed from ③ components.

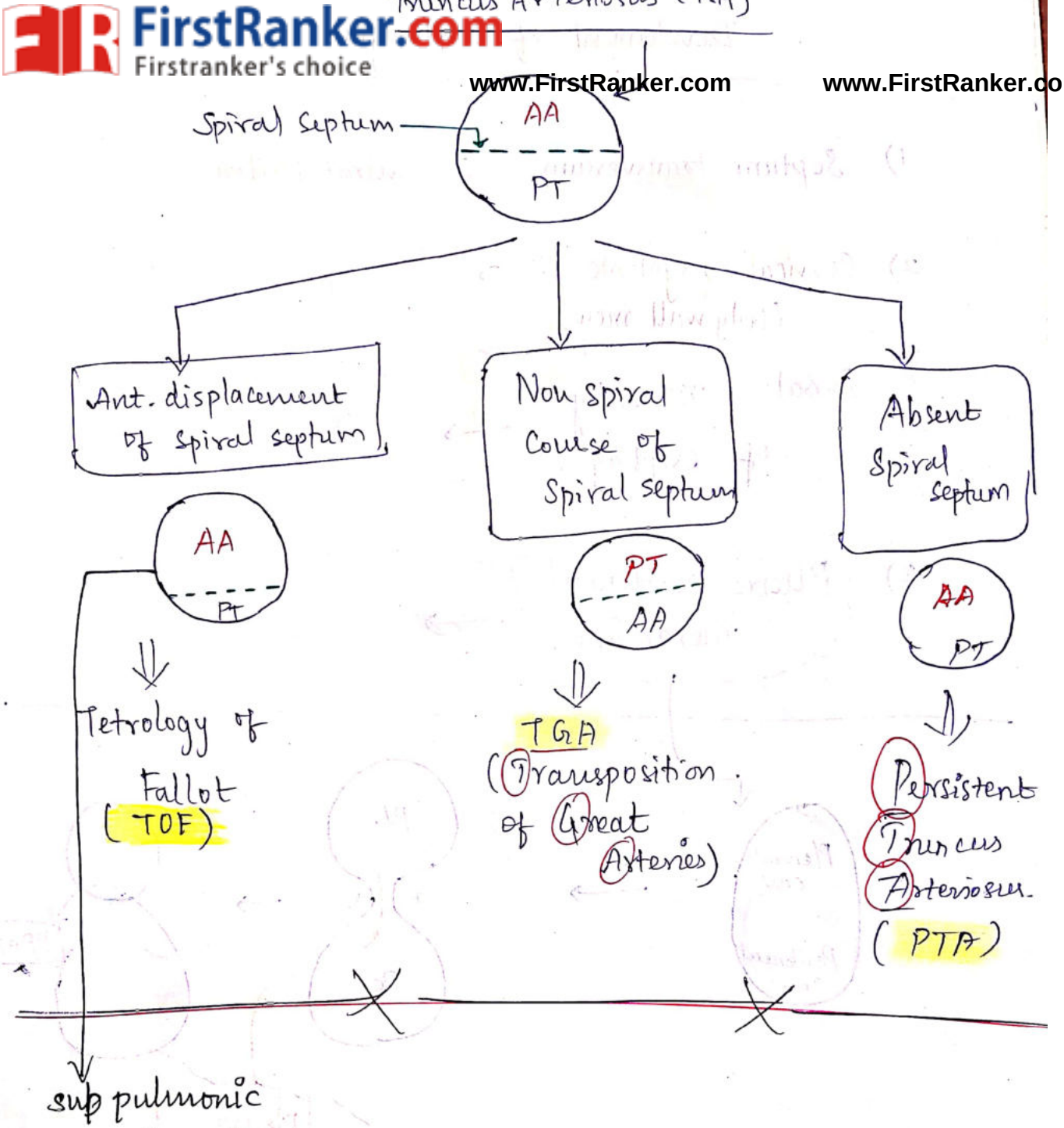
1. Endocardial cushion (from Rt. A/V cushion) → memb. part
2. myocardium (cardiac m/s) → m/s part
3. "NCC" → BULBAR Septum
   ⇓
   divides the infundibulum (outflowing).



If there's an aorticopulm. septal defect then Ventricular Septal defect is also observed

⇓

Bcoz bulbar septum & spiral septum both are derived from "NCC"



sup pulmonic stenosis

↓ leads to

V - VSD
O - Overriding of Aorta
R - (R) vent. Hypertrophy
&
C yanosis.

↓

Voc

Development of Diaphragm:

1) Septum Transversum → Central Tendon

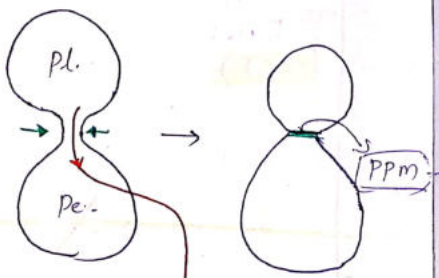
2) Cervical myotome → M/s part (Body wall meso).

3) Dorsal mesentry of esophagus → CRUS.

4) Pleuro-peritoneal membrane

Pleural cav.

Peritoneal cav.



pleuro peritoneal canal.

if persists

C.D.H. (Congenital Diaphragmatic Hernia).

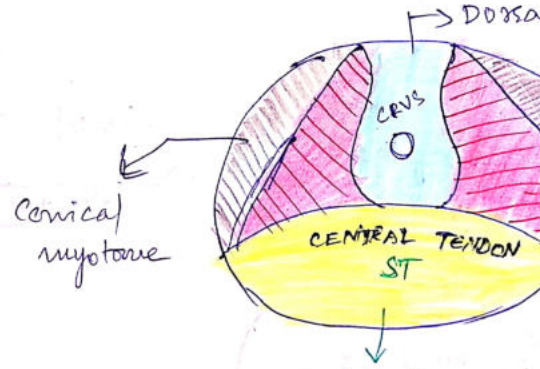
Clinical

Failure of proliferation

EVERTRATION OF DIAPHRAGM

colon will push the diaphragm upwards (due to its thin nature)

Diaphragm - parts:



Septum Transv. is the anterior m
bcoz of CRANIO folding