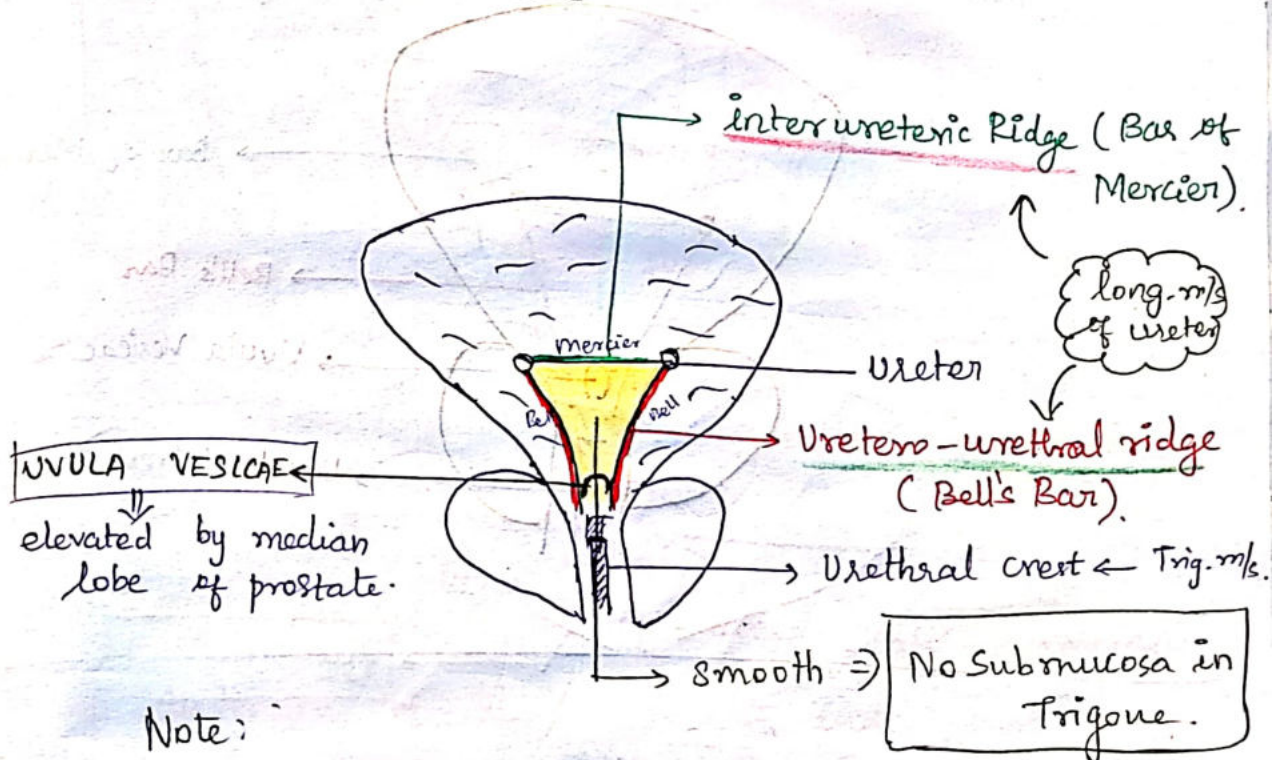


Interior of the bladder:



Note:

* m/s of ureter don't end at the ureter opening into the bladder but continue as

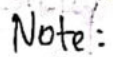
- (i) Bar of Mercier
- (ii) Bell's Bar

* TRIGONE is SMOOTH. bcoz There is 'No' Submucosa in it.

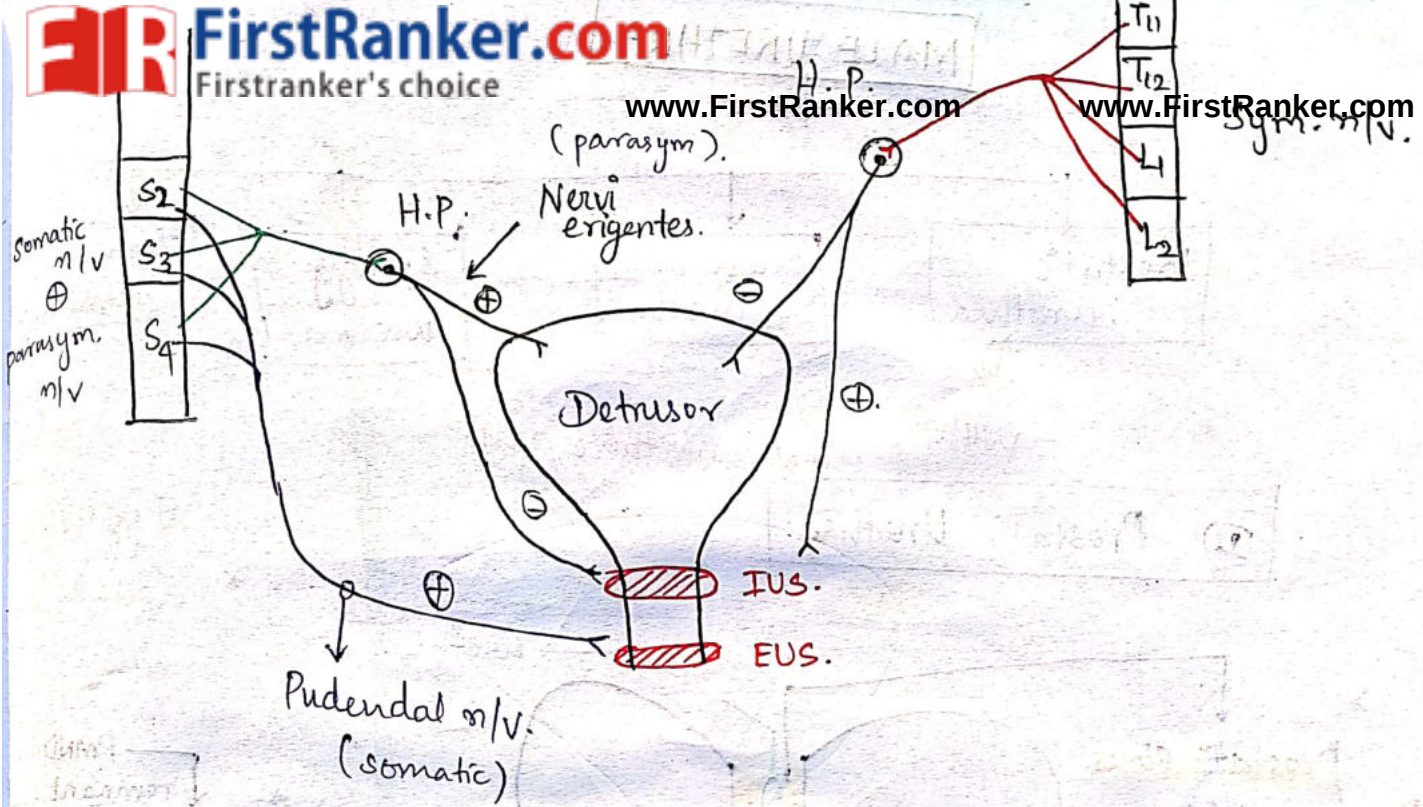
* UVULA vesicae $\Rightarrow$ elevation at the 'Apex' of Trigone due to median lobe of prostate

* Trigonal m/s go beyond the Trigone & form an elevatⁿ in post. wall of prostatic urethra called Urethral crest.

~~www.FirstRanker.com~~



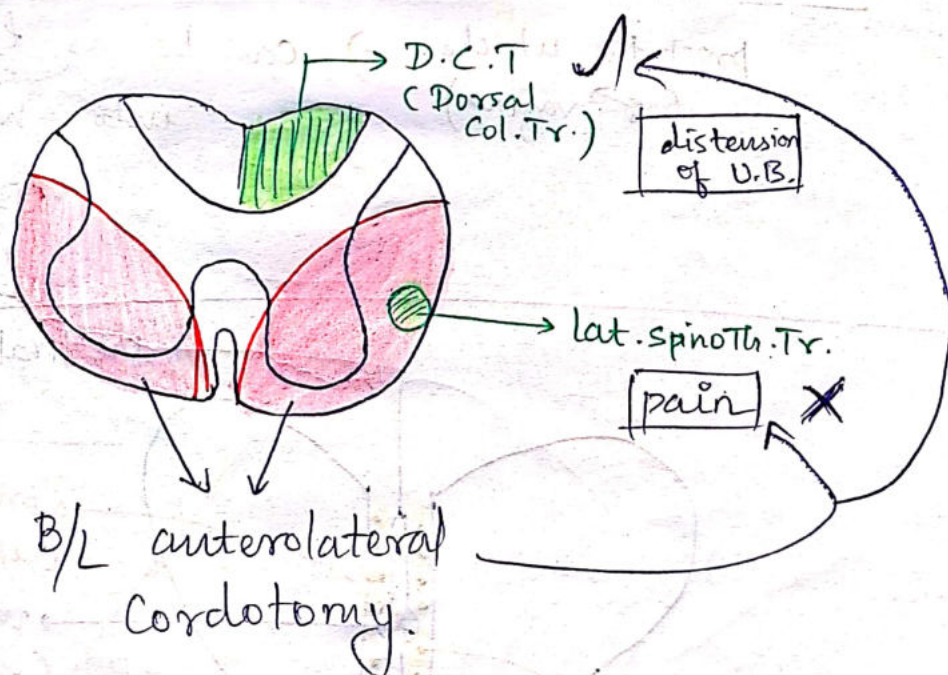
www.FirstRanker.com



WHY? Ant. lat. ^{B/L} Cordotomy doesn't affect awareness of distension of bladder ~~is~~ and conseq. patient is able to pass urine but pain fibres are affected

Lat spinoth. Tract.

BCO2 desire to micturate is INTACT.



MALE URETHRA

Prostatic urethra

3cm.

membr. urethra

1.5 - 2cm

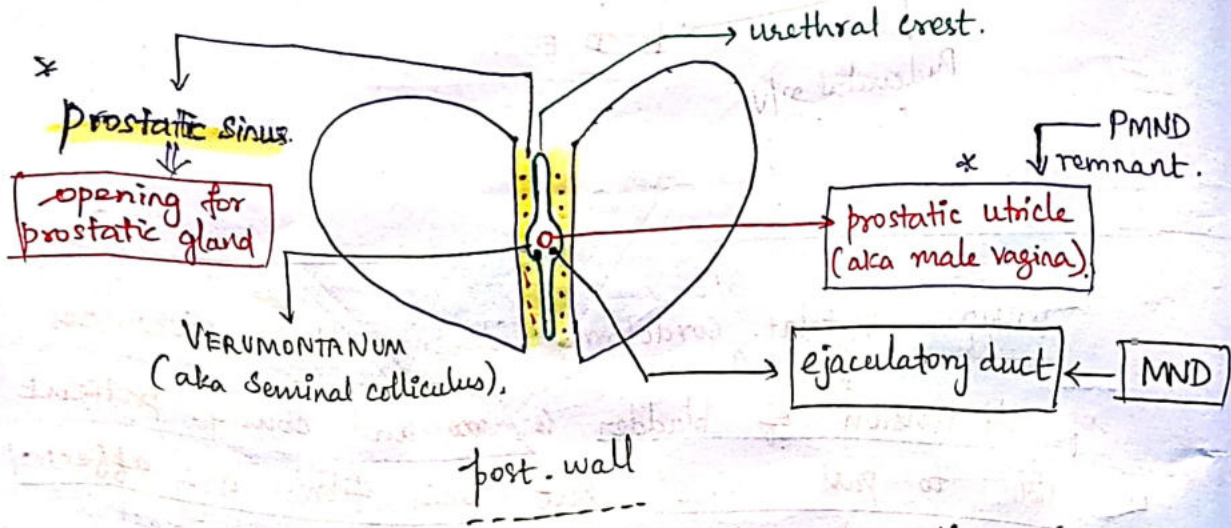
Spongy urethra

15cm.

Terminal urethra

wider & most dilatable part

I) Prostatic Urethra



Note:

prostatic utricle (aka vagina) can be as long as 5-cm into median lobe of prostate

