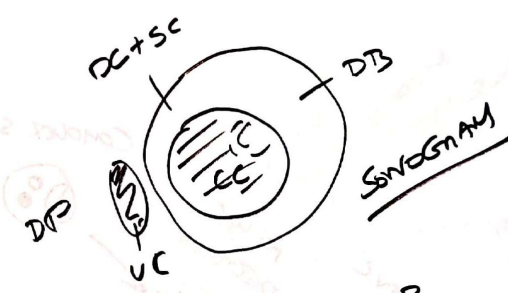
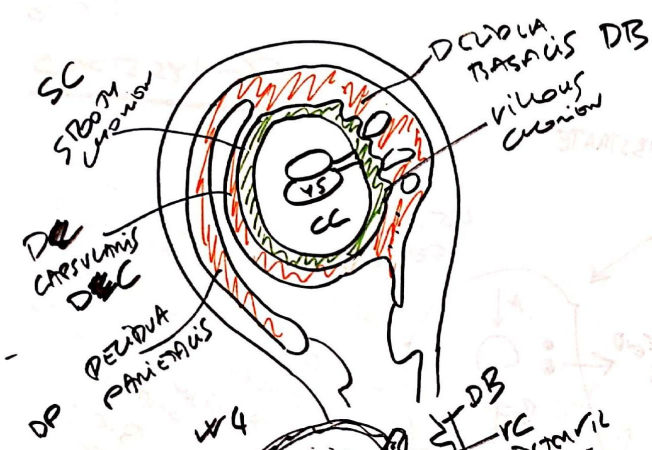
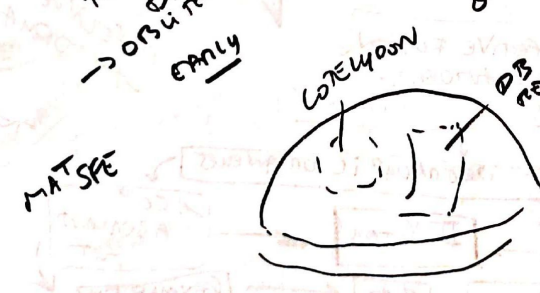
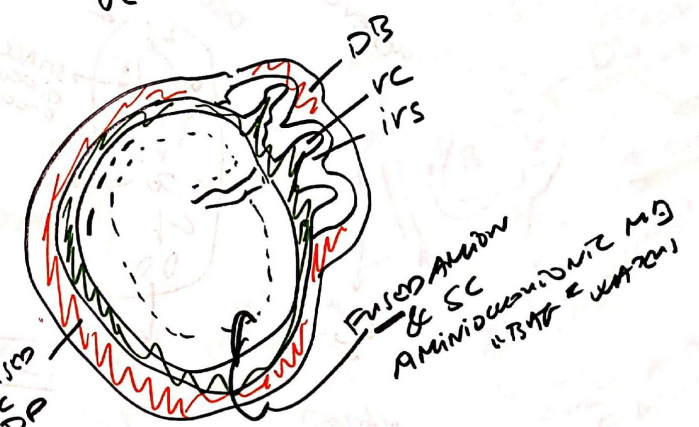
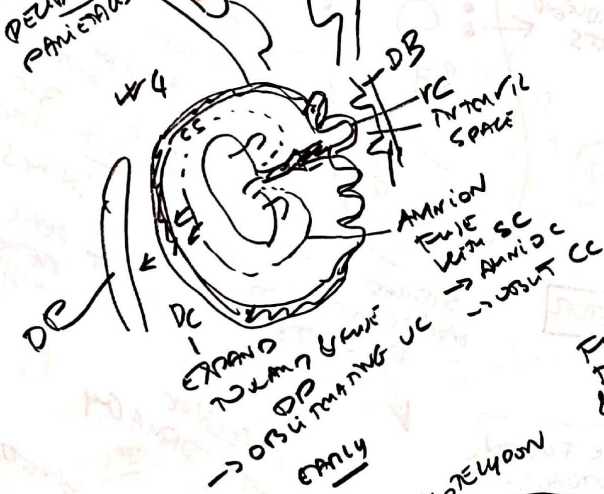


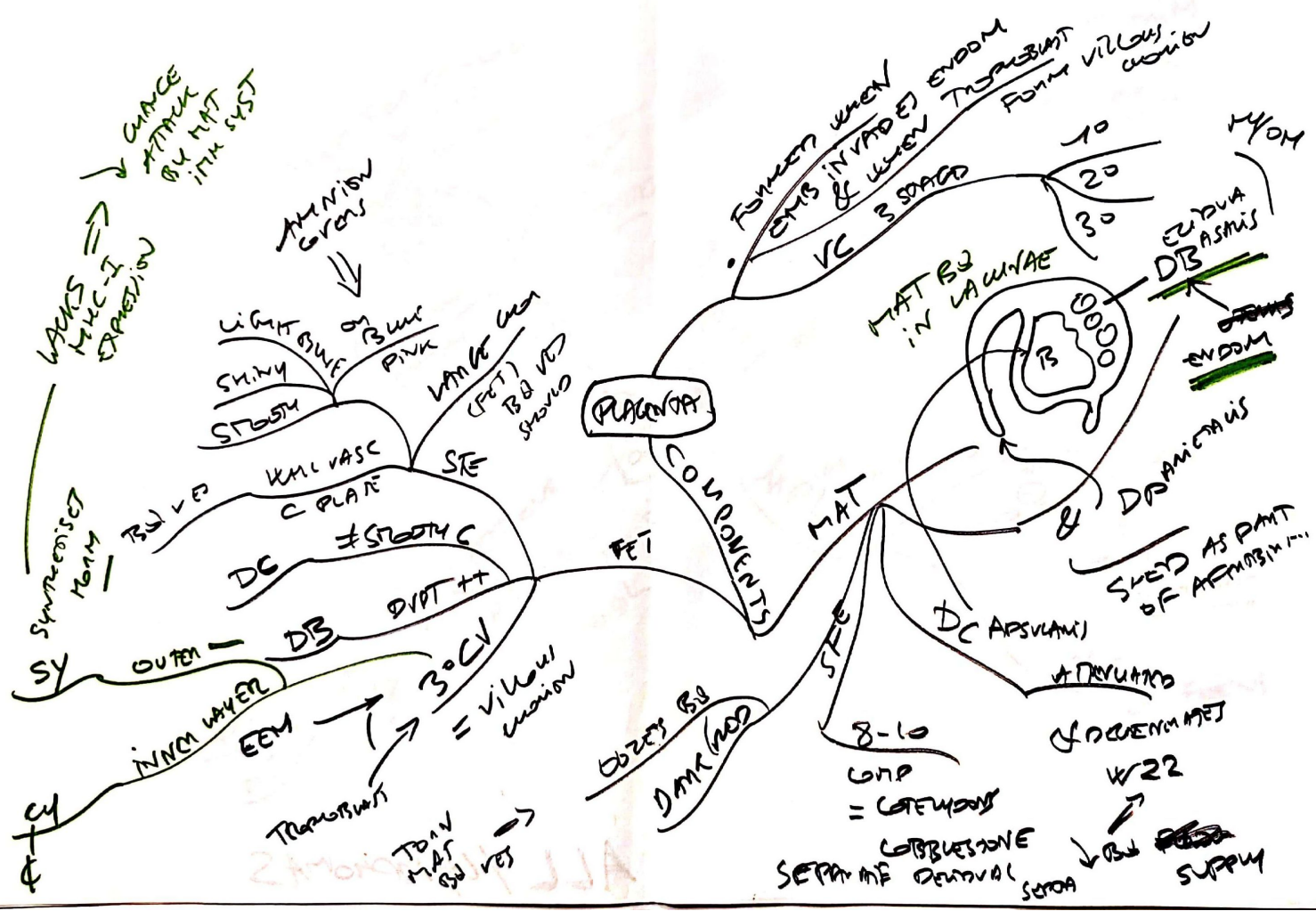
**VARIOUS STAGES**  
**VILLOUS CHORION FORMATION**

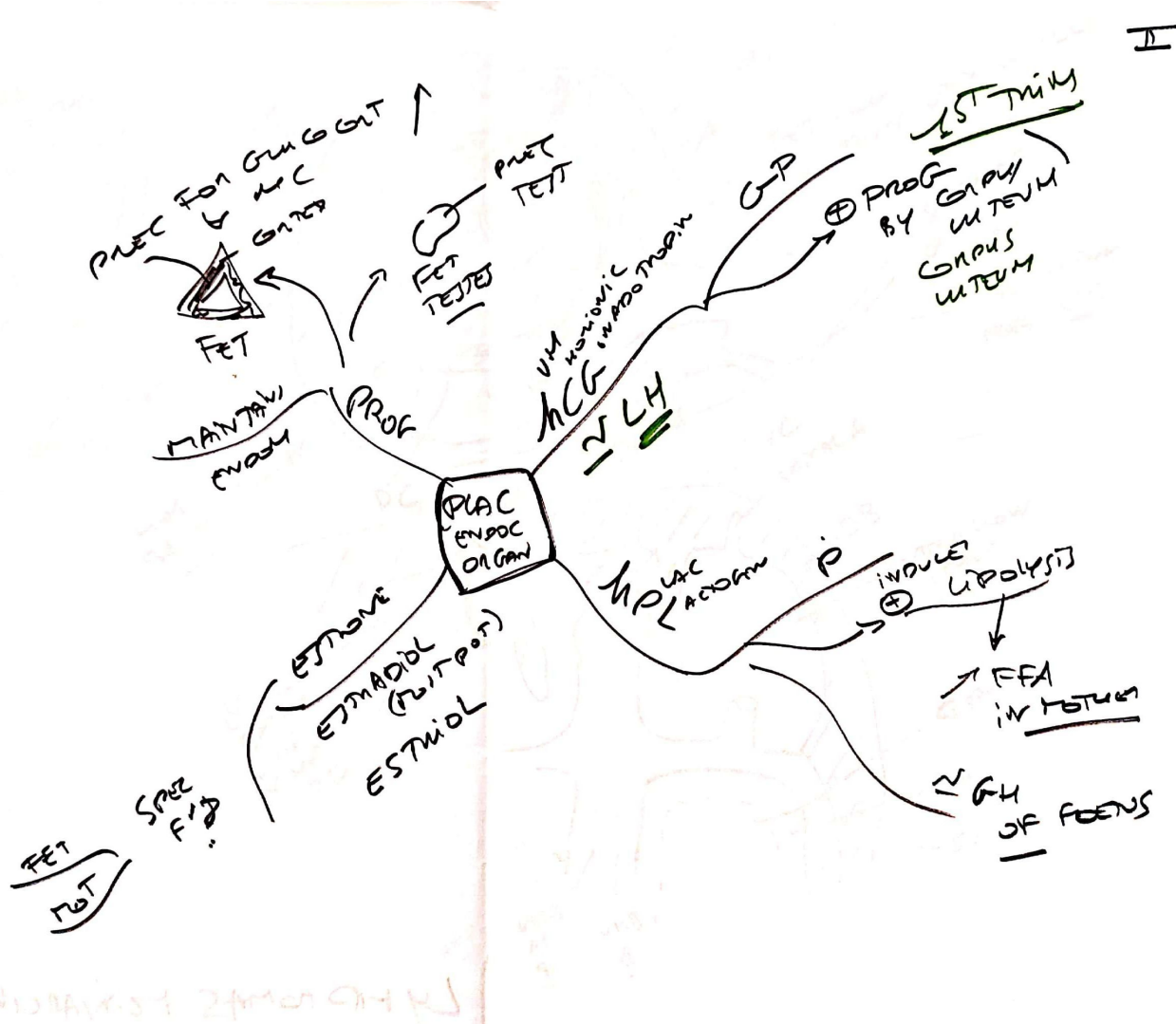
w/ membranes sy make  
subject to with DB  
& low outside (not shown)  
→ 3° CV  
vertical  
Asji

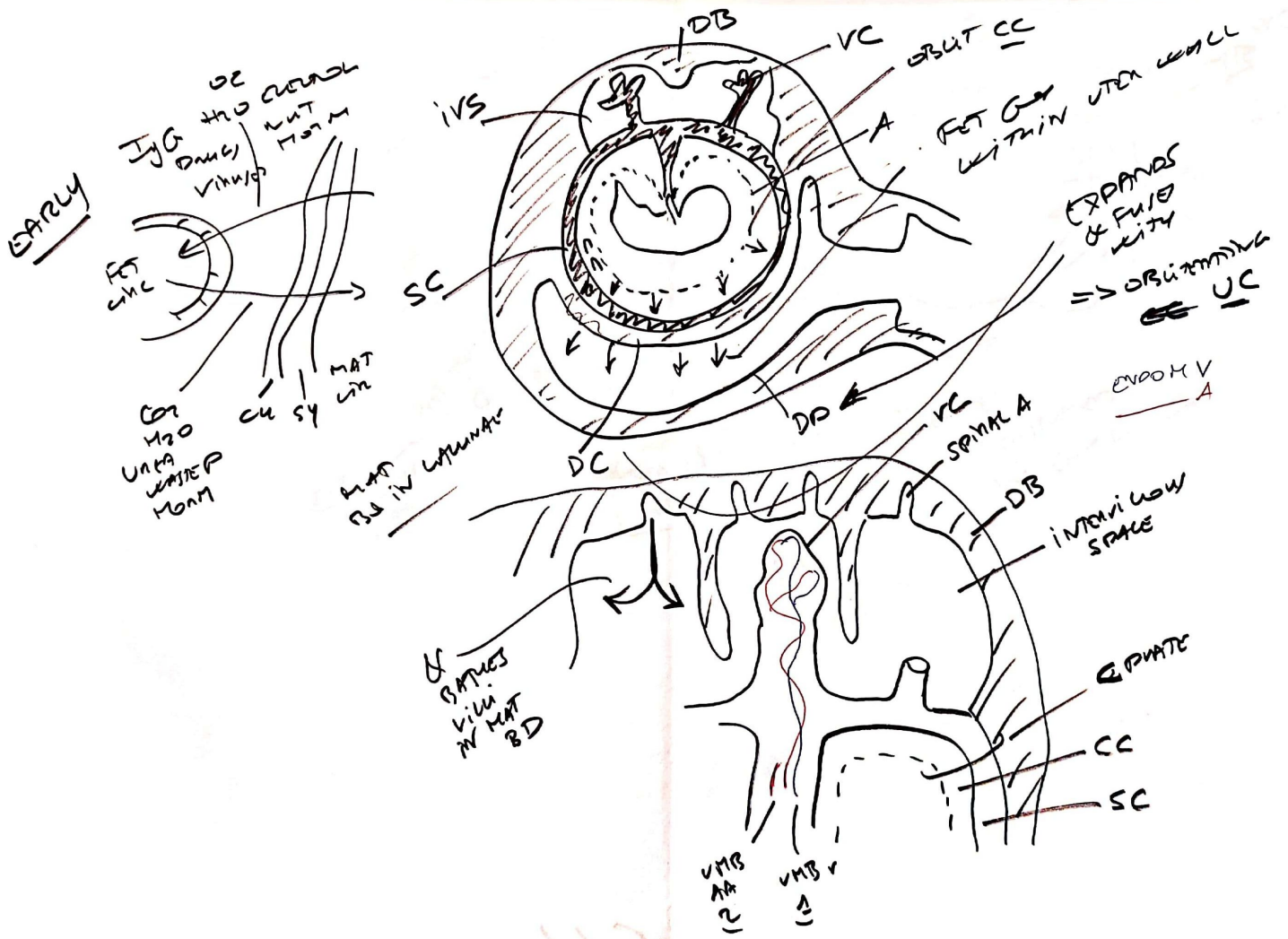


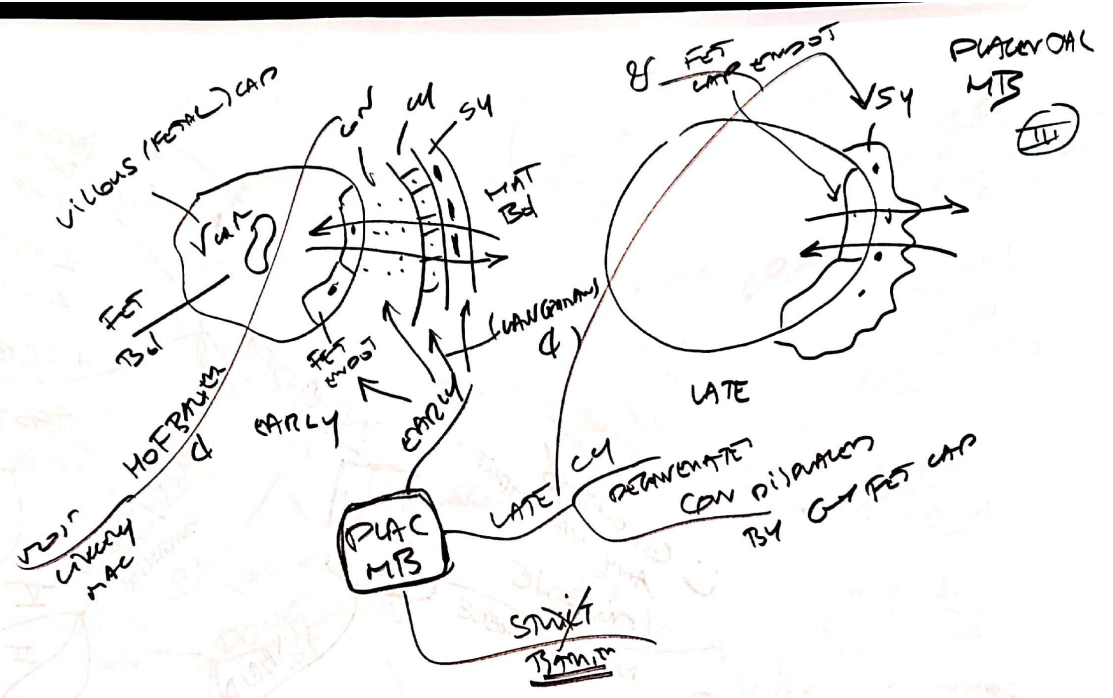
RELATIONSHIP  
FETUS  
UTERUS  
PLACENTA

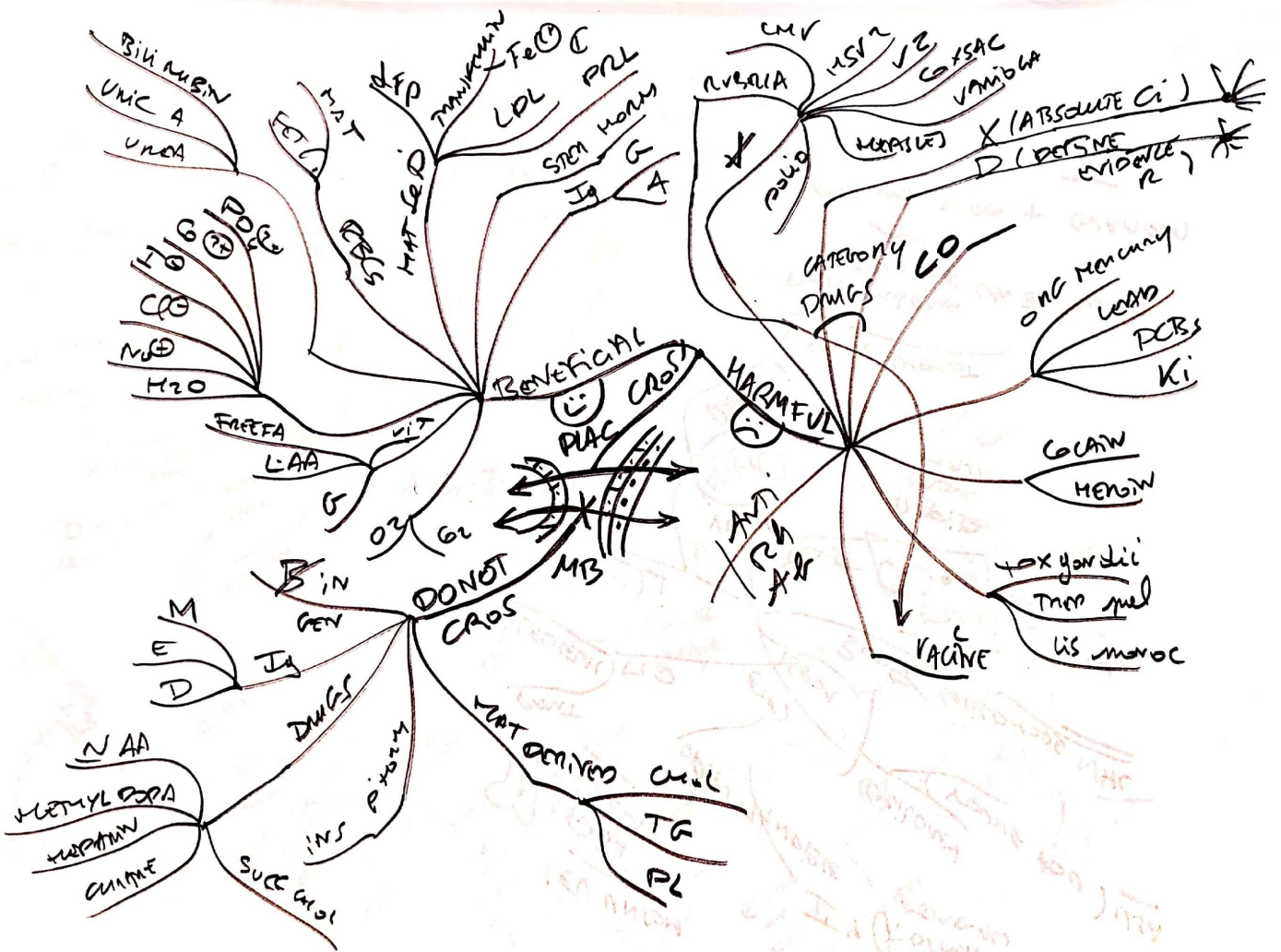




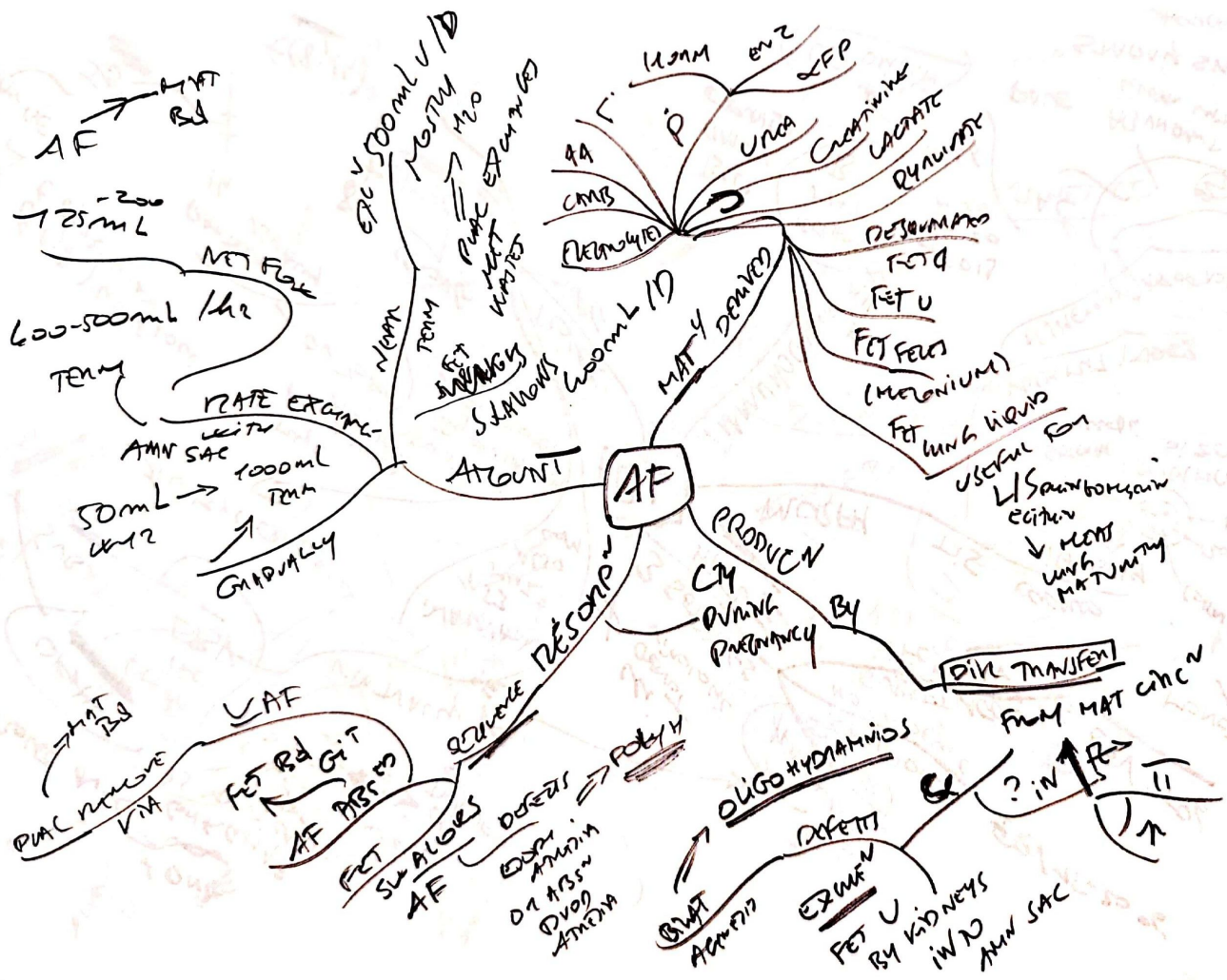


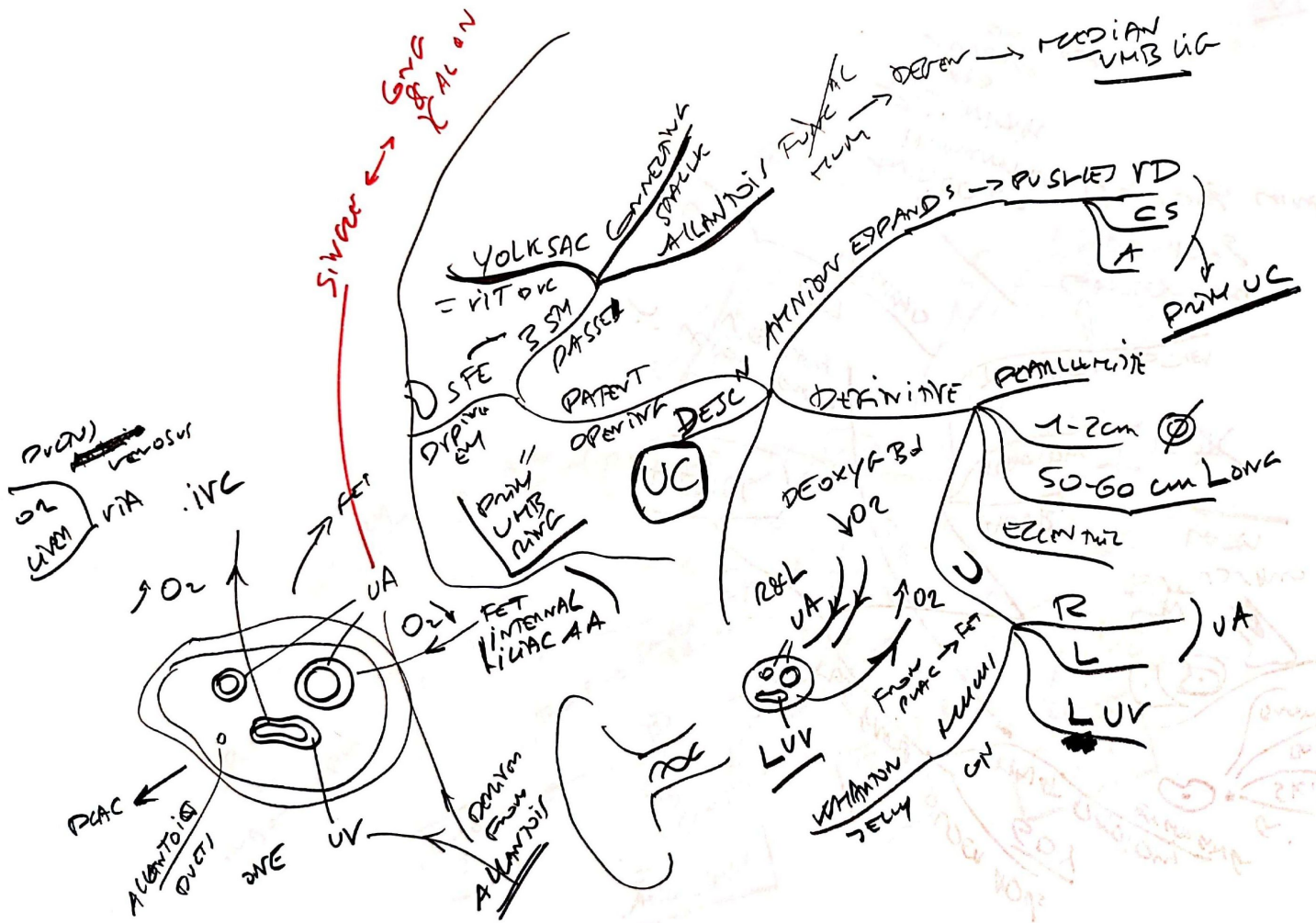


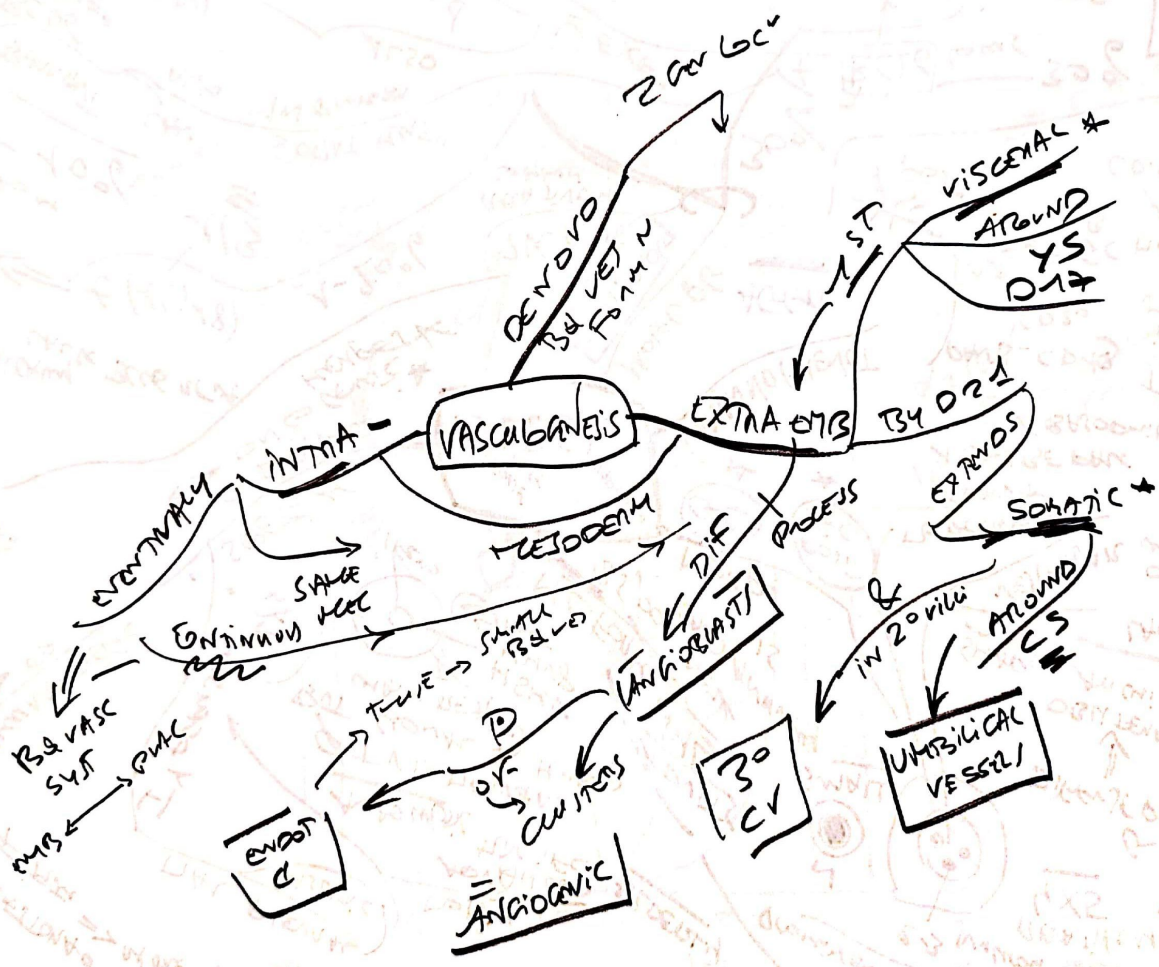


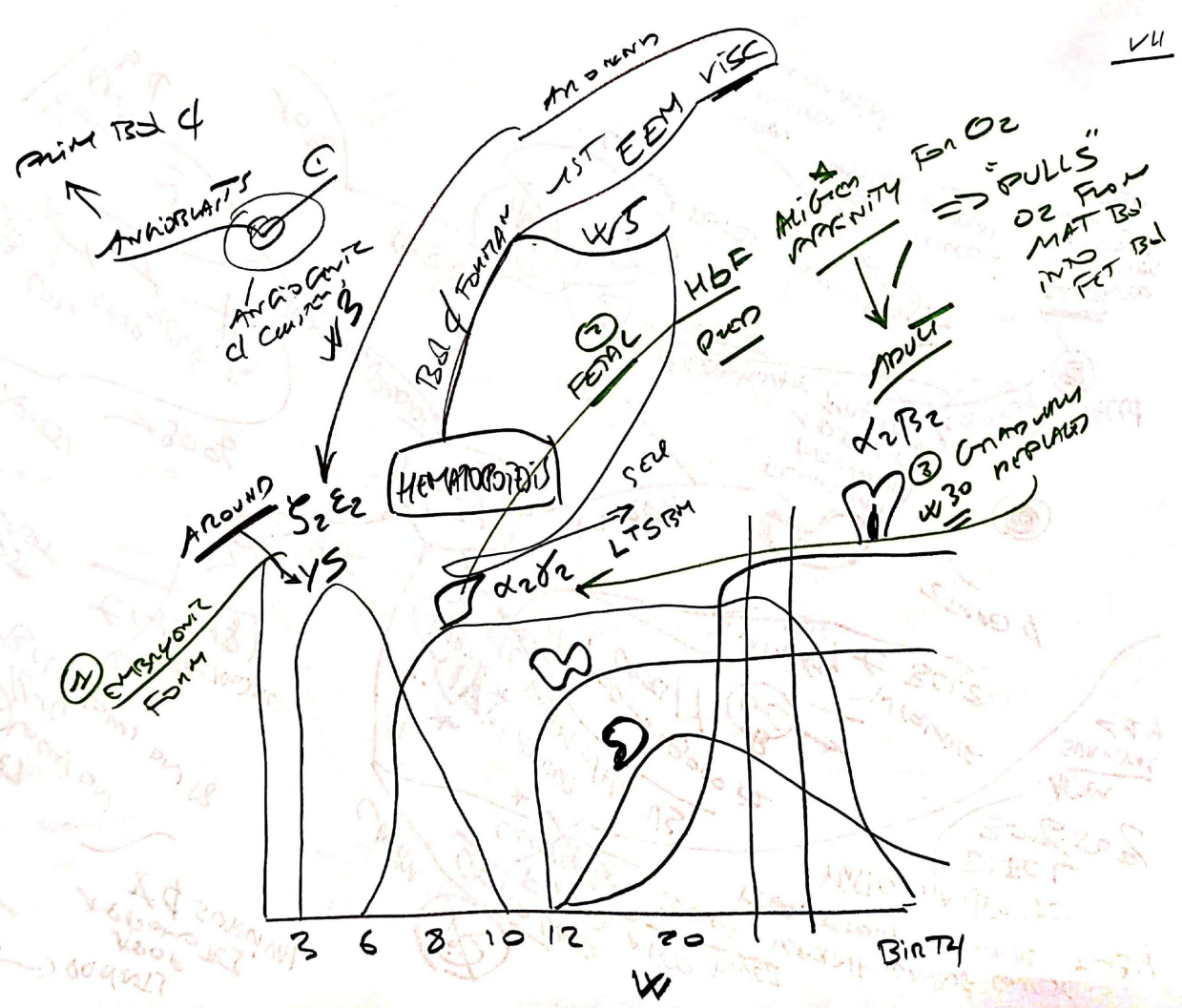












③ DE OX FROM SVC

RA → RV  
 → MAIN PA → DA  
 → DURING AO

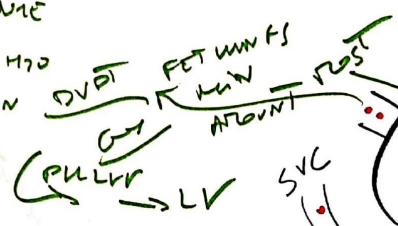
SHUNT ← HIGH FET PULM Q  
 PARTLY LOW O<sub>2</sub>

BIRTH TRANSITION → V → Q PULM QASE  
 → LAN / RAM → FO  
 CLOSURE  
 → O<sub>2</sub> (FROM MATN) & ↓ PC  
 (FROM PLAC SEPR)  
 → CLOSURE DA

PG E<sub>1</sub> & E<sub>2</sub> KEEP PDA OPEN

- O<sub>2</sub> ..... HIGH
- O<sub>2</sub> ... MODERATE
- O<sub>2</sub> .. LOW
- O<sub>2</sub> . VERY LOW

- IMMATURE & FET UNDER MTD  
 - PLAC → RESP FM

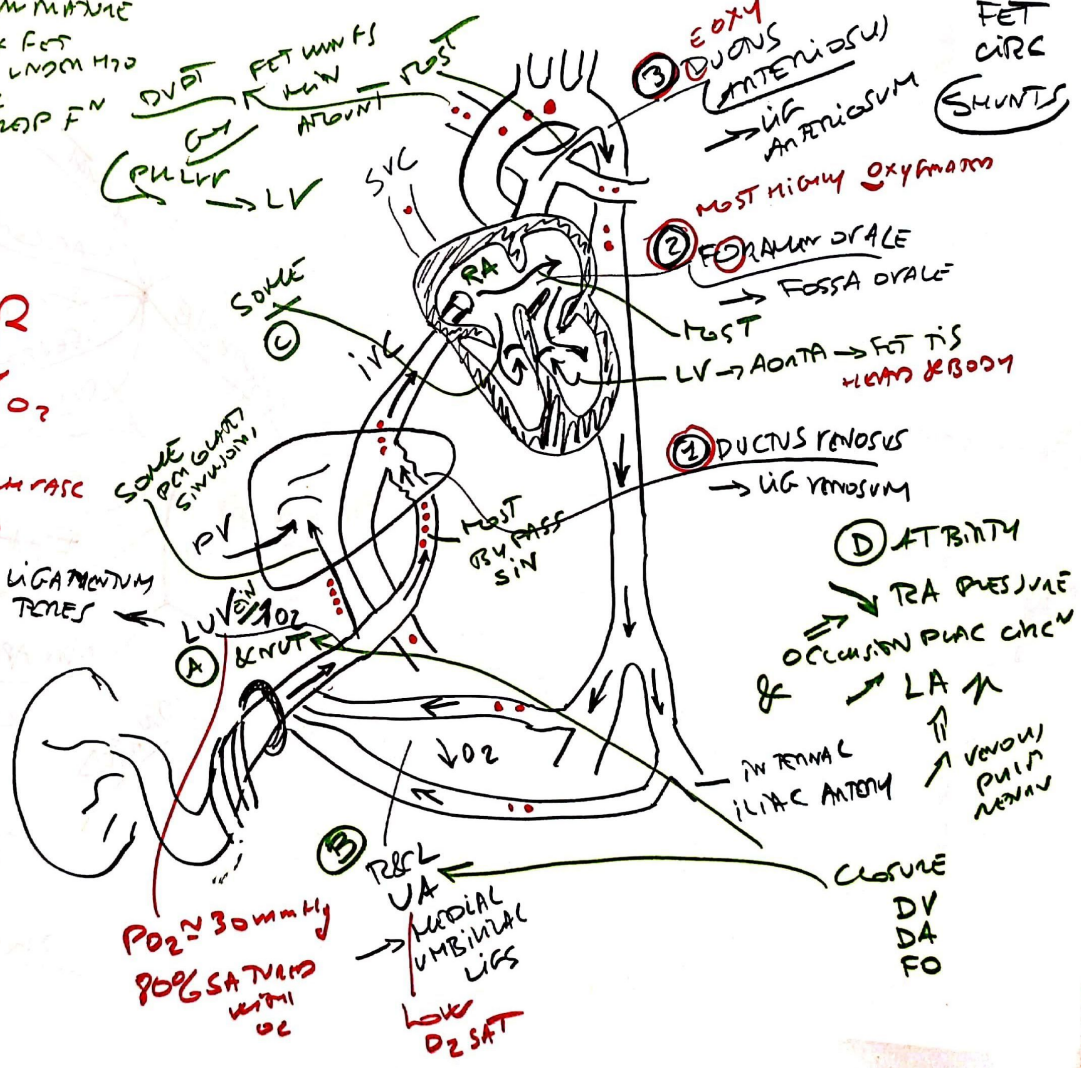


③ E OXY DUONS (ANTERIOR) → IIG ANTERIORSUM  
 MOST HIGHLY OXYGENATED  
 FET CIRC SHUNTS

② FORAMEN OVALE → FOSSA OVALE  
 → LV → AORTA → FET TIS HEART & BODY

② DUCTUS VENOSUS → IIG VENOSUM

④ AT BIRTH  
 ⇒ TRA PRESURE  
 OCCUR IN PLAC CHCM  
 & → LA ↑  
 ⇒ VENOUS PULM RESISTANCE



PO<sub>2</sub> ~ 30 mmHg  
 90% SATURATED WITH O<sub>2</sub>

③ TRCL UA  
 → MEDIAL UMBILICAL LIGS  
 LOW O<sub>2</sub> SAT

CLOSURE  
 DV  
 DA  
 FO