


**Appendages of the skin worksheet**

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**Next**

ANATOMY and PHYSIOLOGY LABORATORY  
1<sup>st</sup> Semester SY 2020-2021

Worksheet for Week 4:



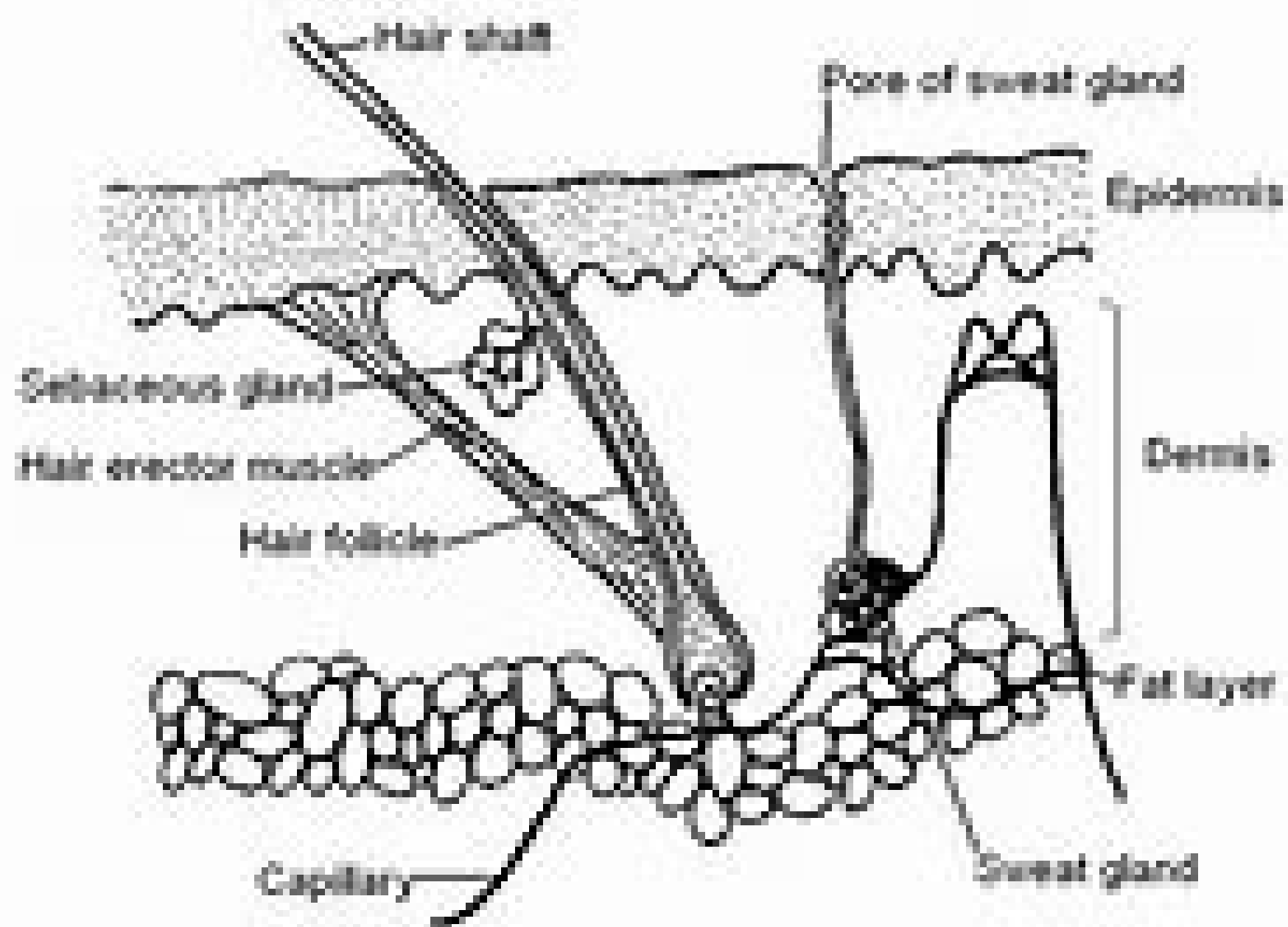
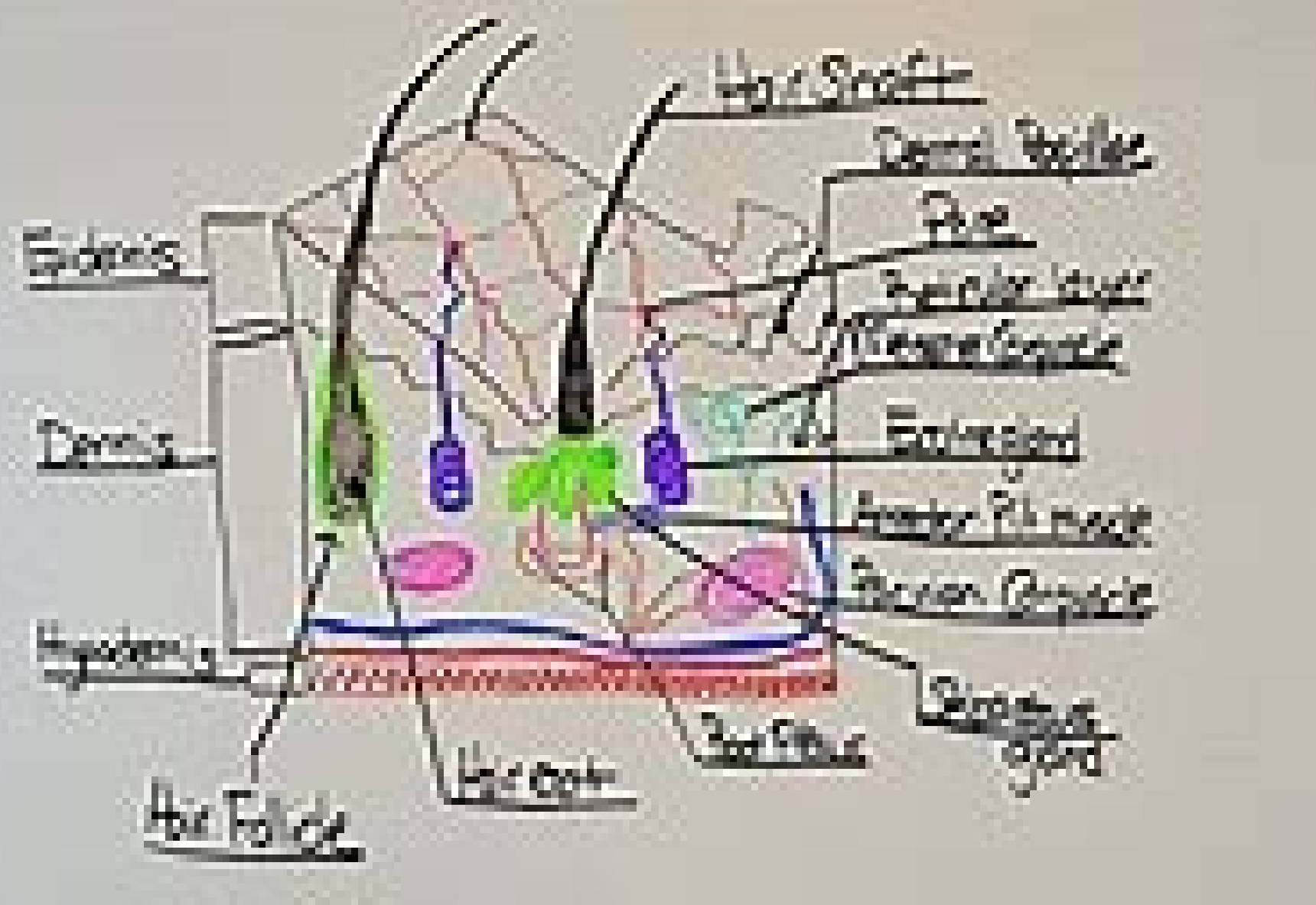
## The Integumentary System

Prepared by Prof. Glenn G. Solano, PhD

For the Anatomy and Physiology Course, PLM College of Nursing

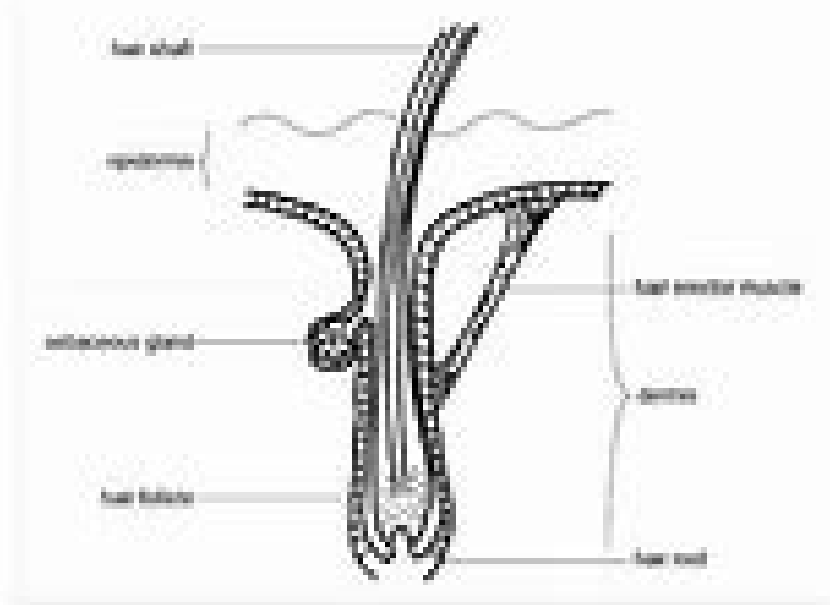
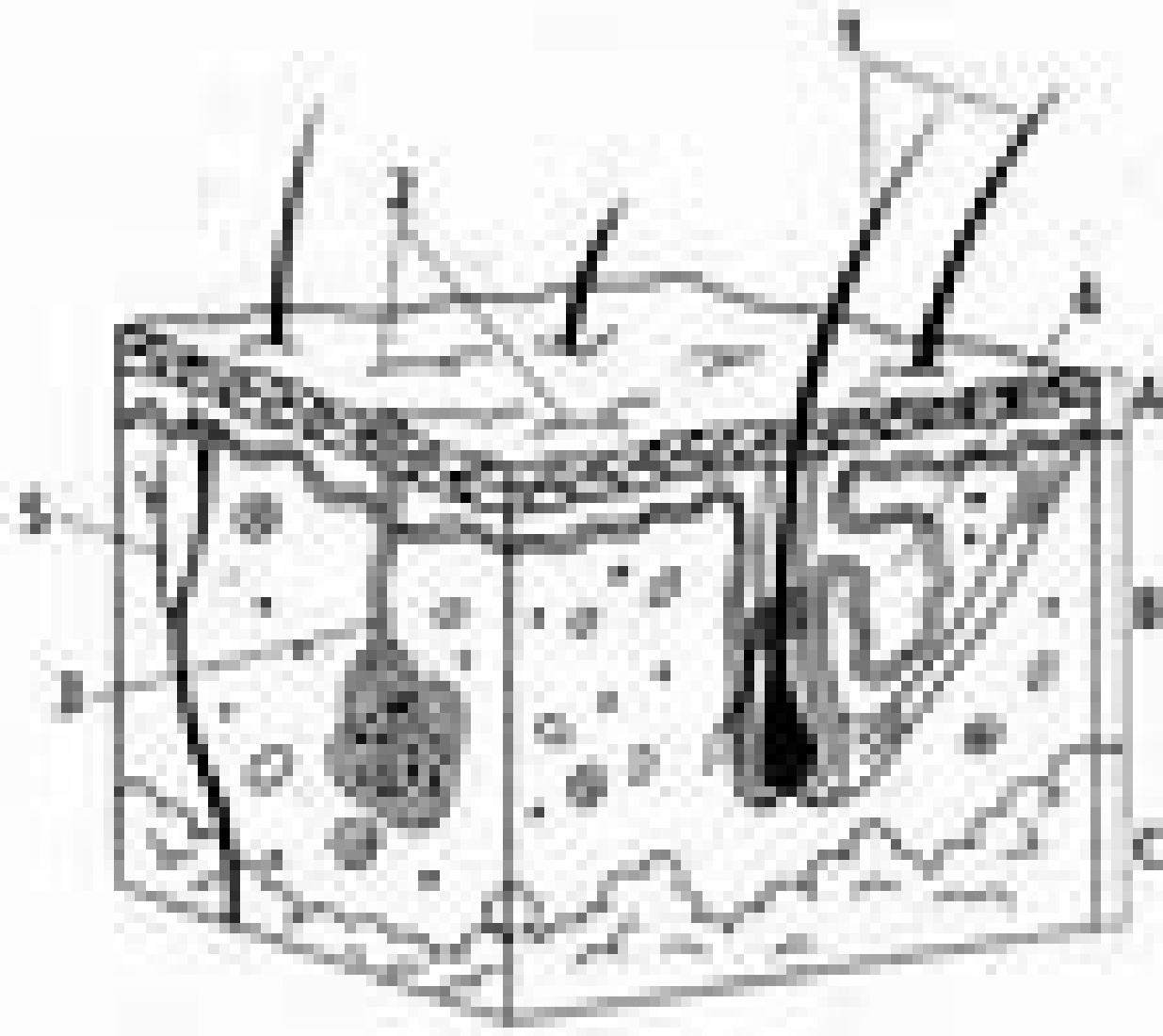
### Overview

Considered an organ system because of its extent and complexity, the skin (sometimes referred to as integument) and its accessory structures (hair and nails) comprise the



# Label the diagram

## Structure of Human Skin



### Appendages of the skin worksheet answers.

With volatile weather, it's spring, it's winter, it's not spring, snow! I just thought that the dryness and extra redness on my face was due to good mother nature and could be resolved quickly with a little more moisturizer. But a few weeks later, when the problem didn't seem to be getting better, I visited my dermatologist. "Rosacea", he said. I admit it surprised me a little. Even as a health editor who had covered almost every skin condition at one time or another, rosacea didn't cross my mind. Eczema, maybe, but not rosy. In fact, according to the National Society of the Rosacea, 16 million Americans have this condition, but most of them don't know it. I have a fairly mild case; I almost didn't care about the redness, thinking it gave me a little healthy flushing, but I'm glad I checked in with my dermatologist so I could catch it and treat it soon, as that's the key to preventing it from getting worse. He also highlighted a point we always make in skin stories: If you notice something different on your skin that doesn't resolve in a few weeks, you should check it with your dermatologist as soon as possible! -Amy Brightfield, Director of Health This content is created and maintained by a third party, and imported into this page to help users provide their email addresses. You can find more information about this and similar content at piano.io Photo courtesy: @SunflowerDerm/Twitter Skin cancer is the most common type of cancer in the United States by a fairly large margin, and it does not discriminate. It affects people of all races, genders, and ages, so it's absolutely critical that Americans learn about the different types of skin cancer and how to detect them. Fortunately, most types of skin cancer are highly treatable, but early detection and diagnosis are crucial to achieving the best result. For any type of skin, the first line of defense is the proper protection against harmful UV rays from the sun. It consists of using sunscreens of high SPF in exposed parts of body anytime you are outdoors, as well as wearing hats, sunglasses, and long sleeves and pants if you can tolerate the heat. These measures are not always successful, so it is necessary to know how to detect anomalies to ensure fast and effective treatment. Starting with the basal cells of the lower epidermis (outer layer of the skin), basal cell carcinoma is the most common type of skin cancer. In fact, it accounts for about 80% of all skin cancer cases, according to the American Cancer Society. This type of skin cancer is more likely to occur in fair-skinned people, but anyone can develop basal cell carcinoma. The most important risk factor is frequent exposure to the sun or tanning beds. Basal cell carcinoma is highly treatable and has a good prognosis, but early diagnosis and treatment are important to prevent it from spreading to surrounding tissues. Common characteristics of basal cell carcinoma include high spots that may itch, pearly-looking bumps, pale spots that look like a scar, and open sores that do not heal. In most cases, it is found on the face, neck, arms, and other areas that are often exposed to the sun, but it can also appear on the torso and legs. Squamous cell carcinoma Squamous cell carcinoma is the second most common type of skin cancer, accounting for about 20% of cases. Unlike basal cell carcinoma, which usually affects the outer layers of the skin, squamous cell carcinoma can grow in the deeper layers of the skin. This type of skin cancer also occurs most often in sun-exposed parts of the body, such as the ears, face, neck, and arms. A more problematic form of squamous cell carcinoma that is associated with Human papillomavirus (HPV) affects the mucous membranes or genital area. If left untreated, squamous cell carcinoma can spread to other parts of the body and cause serious damage and disfigurement due to deeper penetration into the skin. Common features include raised lumps, scaly red spots, growths that look like warts, and sores that heal but then reopen. Melanoma With only 1% of all skin cancer cases, melanoma is not a common type of skin cancer, but it is certainly the most lethal form due to its rapid growth and ability to spread to other organs. It starts in the melanocytes, usually in the back, chest, or legs, but can develop anywhere on the body. The face, neck, hands, feet, and nails can also be sites for melanoma. This type of skin cancer usually starts on an existing mole or appears for the first time as a new dark spot or mole on the skin, which is why moles should always be monitored carefully. Doctors use the ABCDE warning sign model to help patients identify possible problematic moles: Asymmetry, Border, Color, Diameter, and Evolution. An asymmetric mole is deformed with sides that do not match. A problematic mole does not have a clearly defined edge and may have irregular and irregular edges with pigment that spreads to the surrounding skin. The moles should be of one color only. If a mole is not the same color everywhere and includes tanned, brown, black, and even red or white, it might signal a problem. If the mole is more than 6 mm in diameter or suddenly increases in size, it should be checked. Evolution refers to changes; if the mole has changed in appearance in the last few weeks or months, it could be a cause for concern. Rare Skin Cancers There are several other types of skin cancers, but they are extremely rare, accounting for less than 1% of all skin cancers when they are grouped together. Merkel cell carcinoma affects the neuroendocrine cells (Merkels) near the nerve endings of the epidermis. Although it is rare, this type of skin cancer is dangerous because of its ability to spread to others And to the difficulty of treating it after it is disseminated. Kaposi's sarcoma is a rare form of cancer that often appears as red, purple or brown tumors on the skin or mouth. The cells that form the cancer originate in the coating of the lymph nodes or the blood vessels. If the EL spread to critical organs such as the lungs or liver, could be life-threatening. Skin lymphoma is a type of non-Hodgkin lymphoma. To be a cutaneous lymphoma, the cancer must start in the lymphocytes of the skin and not travel to the skin from other organs. Survival rates for skin lymphomas vary, depending on the exact type and response to treatment. Squamous cell precancers Squamous cell precancers serve as warning signs of skin conditions that could develop into skin cancer. Almost all of them are related to sun exposure to UV rays, and it is important to monitor them closely to ensure early diagnosis and treatment if precancerous patients become malignant. Actinic keratoses look like dry, scaly spots that develop in older adults who have had decades of sun exposure. Keratoacanthoma tumors are dome-shaped and grow rapidly at first, but then stabilize. They look a lot like squamous cell carcinoma. Bowen's disease resembles eczema or psoriasis, forming red and brown scaly spots on the surface of the skin. Resource links: © à MORE FROM SYMPTOMFIND.COM SYMPTOMFIND.COM

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