This lab has an associated homework assignment that is posted on Blackboard. If you have not done this assignment already, it would make this lab more efficient if you did so.

### **OBJECTIVES:**

<u>LIGHT MICROSCOPY</u> - Recognize: <u>Simple epithelia</u> including: simple squamous, cuboidal, columnar and pseudostratified columnar epithelium

<u>Stratified epithelia</u> including: stratified squamous (keratinized and non-keratinized), stratified cuboidal, stratified columnar and transitional epithelium

<u>Surface modifications</u> including: apical surface, striated border, cilia, stereocilia, "intercellular" bridges, basal surface, basement membrane

<u>Glandular epithelium</u>: serous, mucous and serous demilune glandular secretory units

<u>ELECTRON MICROSCOPY</u>: Recognize types of epithelia (as above) and characteristic features of surface specializations that occur on apical, basal and lateral surfaces including the following:

Apical surface: Microvilli, cilia, stereocilia, striated border, glycocalyx

Basal surface: Hemidesmosomes and basal lamina

Lateral surface: Cell junctions, zonula occludens, zonula adherens, macula

adherens (desmosome), gap junction, glycocalyx

### ASSIGNMENT FOR TODAY'S LABORATORY

### **GLASS SLIDES**

- SL 63 (Heart with atrioventricular valve) simple squamous epithelium (lines heart)
- SL 137 (Ovary) Simple cuboidal epithelium (covers ovary) varies in height
- SL 14 (Small intestine) Simple columnar epithelium
- SL 15B (Trachea) Pseudostratified columnar epithelium with goblet cells
- SL 156 (Epididymis) Pseudostratified columnar epithelium with stereocilia
- SL 16 (Esophagus) Stratified squamous epithelium, non-keratinized
- SL 9 (Auricle of ear) Stratified squamous epithelium, keratinized
- SL 25 (Sole of the foot) Stratified squamous epithelium, keratinized
- SL 92/93 (Salivary glands) Stratified cuboidal and stratified columnar epithelium (large ducts)
- SL 18 (Ureter) and SL 57 (Bladder) Transitional epithelium lines these organs

## **ELECTRON MICROGRAPH**

EM 9 (small intestine) simple columnar epithelium

## POSTED ELECTRON MICROGRAPHS

# 5 Organelles

# 9 Epithelial cell apical surface modifications

# 10 Lateral surface modifications

# 30, # 30a Autoradiography

Lab 4 Posted EMs

# HISTOLOGY IMAGE REVIEW - available on computers in HSL

Chapter 4, Epithelial Tissue

Frames: 156-200

#### **EPITHELIUM**

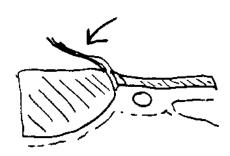
Epithelia line tubes or cover surfaces. They are composed of closely apposed cells, held together by one or several types of junctions, interdigitation of the lateral membranes, and a small amount of self-secreted glycocalyx (cell coat) that may aid in cell adherence. The "free surface" (top or apical surface) of an epithelium is exposed to the external environment (as in skin) or to fluid (internal cavities, ducts, tubes). The basal surface of epithelia rests on a basement membrane. The basement membrane (J. Figs. 4-1, 4-2, 4-3; R. Figs. 5.1, 5.28, 5.29) serves as a means of anchoring the epithelium to underlying tissue.

Epithelia are classified according to the number of cell layers:

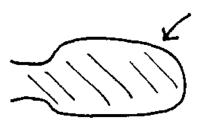
- 1. SIMPLE = 1 layer
- 2. STRATIFIED = 2 to many layers

The shape of the cells also determines the name of the epithelium - <u>in stratified epithelia only the top layer of cells is considered</u>:

- 1. SQUAMOUS = flattened, scale-like cells with a flattened or absent nucleus
- 2. CUBOIDAL = cells about as tall as their width with a round nucleus
- 3. COLUMNAR = cells taller than their width, usually with an oval nucleus
- I. <u>SIMPLE EPITHELIA</u>: a single layer of cells. Each cell has three different surfaces: 1) an <u>apical</u> (upper) <u>surface</u> ("free surface") that faces a lumen, 2) <u>lateral</u> surface that contacts neighboring cells and 3) a <u>basal</u> surface that lies against the basement membrane. Each of these surfaces may have specialized characteristics that enable it to perform the specific functions required for its location.
  - A. <u>SIMPLE SQUAMOUS EPITHELIUM</u> (J. Fig. 4-11; R. Plate 1). <u>SL 63</u>: (Heart with atrioventricular (AV) valve). Locate the projecting green-stained valve (arrow in diagram, <u>red arrow</u>) and note the thin, pink-staining simple squamous epithelium covering the surface. The nuclei (basophilic) stain deep blue or purple. This layer of simple squamous epithelium is the <u>endothelium</u> that lines the chambers of the heart and continues as the lining of all blood vessels (scan, med, red arrows, high, red arrows).

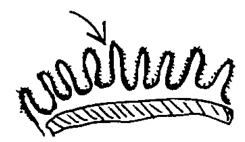


B. <u>SIMPLE CUBOIDAL EPITHELIUM</u> (J. Fig. 4-12; R. Fig. Plates 1, 2) <u>SL 137</u>: (Ovary) Simple cuboidal epithelium covers much of the ovary; observe how this epithelium (mesothelium) varies in different regions from simple squamous to cuboidal to columnar. (<u>scan</u>, <u>med</u>, <u>high</u>, <u>red arrow</u>)



# C. SIMPLE COLUMNAR EPITHELIUM (J. Fig. 4-13; R. Plate 2)

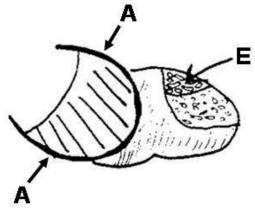
1. <u>SL 14</u>: (Small intestine). Tall cells cover the finger-like projections (<u>red circle</u>) of the inside wall of the gut. Each cell has an oval nucleus that lies nearer the basal region of the cell than the apical. Cells that have a round to ovoid shape and appear to be empty are goblet cells, unicellular glands that secrete mucus. Most cells are columnar absorptive cells (enterocytes, <u>red rectangle</u>). These cells have an apical fringe consisting of many microvilli that form the "striated border," evident as a wide "band" at the apical surface (<u>low</u>, <u>high</u>,).



Electron Microscope - EM 9 of gut. This low magnification micrograph shows several absorptive cells with their apical microvilli (9.2), and a goblet cell (9.5). Polarity of the cells is demonstrated by the organelles (9.3) that are found at the same level in adjacent cells. Absorptive cells also have specializations of the lateral membranes (e.g., finger-like folds that interdigitate with neighboring cells).

# II. PSEUDOSTRATIFIED COLUMNAR EPITHELIUM (J. Fig. 4-16; R. Fig. Plate 2)

- A. <u>SL 15B</u>: (Trachea). There are <u>two</u> structures with lumens on this slide. The trachea is the structure with the even circular outline. The trachea is lined by <u>pseudostratified ciliated columnar epithelium with goblet cells</u>. The epithelium appears to have several layers of cells, because the nuclei are not located at the same level in neighboring cells. In fact, every cell rests on the basement membrane, but "basal cells" do not reach the luminal surface (<u>scan, med, high, basal cells, red arrows</u>).
- B. <u>SL 156</u>: (Testis and epididymis) (<u>scan</u>, <u>low</u>). With your naked eye, orient the tissue on this slide with the drawing below, noting that the curved line represented by the arrows "A" indicates a feature of the tissue that is eosinophilic. Then, identify the region indicated by the arrow "E" and place this region directly under your microscope objective. This region indicated by "E" contains ducts of the epididymis (<u>encircled by red line</u>) (look for round profiles with a smooth, even lumen. (Figures J. 21-11 and R. Plate 88 show the appearance of these tubules.) In this <u>pseudostratified columnar epithelium</u> fewer basal cells are apparent <u>(columnar cells, blue rectangle; basal cells, red arrows)</u>. The tall columnar cells have <u>stereocilia</u>: long apical, branching microvilli (see below).



III. <u>STRATIFIED EPITHELIA</u>: two or many layers of cells. Only the surface layer of cells is exposed to the air or lumen; the basal layer of cells rests on the basement membrane. The shape of the cells on the surface layer determines the name of the epithelium; cells beneath this layer may be quite different in shape.

### A. STRATIFIED SQUAMOUS EPITHELIUM (J. Fig. 4-14; R. Fig. Plates 2, 3)

- <u>SL 16</u>: (Esophagus). One surface of this section is covered by an epithelium that is composed of many layers of cells (<u>red arrow</u>). It is important to observe that the cells in the surface layer have nuclei. The presence of the nuclei in these surface cells indicates that this tissue is *non-keratinized* <u>stratified</u> <u>squamous</u> <u>epithelium</u> and indicates that the epithelium is derived from a region of the body that has a wet or moist surface (<u>scan, high</u>).
- SL 9: (Auricle of ear). The surface cells of this epithelium (on the auricle of the ear) lose
  their nuclei and become scale-like. This type of epithelium is called *keratinized* stratified
  squamous epithelium. Note that cells in the lowest levels of this epithelium are
  cuboidal-columnar, thus it is essential to know the shape of <u>surface</u> cells when
  categorizing stratified epithelia (scan, high, epithelium in red rectangle).
- 3. <u>SL 25</u>: (Skin of the sole of the foot). In this slide, the keratinized layer is much thicker (entire epithelium indicated by the red brackets, keratinized portion indicated by the blue brackets), providing extra protection for this region.
- B. <u>STRATIFIED CUBOIDAL EPITHELIUM</u> (J. Fig. 4-14d; R. Plate 3) and <u>STRATIFIED COLUMNAR EPITHELIUM</u>. These epithelia are relatively limited, occurring mostly as large ducts in glands.
  - 1. <u>SL 92</u>: (Submandibular Gland). This salivary gland has ducts of various sizes. The largest ducts are stratified cuboidal or columnar, and are found in the connective tissue outside the lobes of gland (scan, low, high).
  - 2. <u>SL 93</u>: (Sublingual Gland). Look for gradations in duct size and epithelial cell variations from simple cuboidal to stratified columnar (<u>scan</u>, <u>high 1</u>, <u>red arrow</u>, <u>high 2</u>, <u>red arrow</u>).
- C. <u>TRANSITIONAL EPITHELIUM</u> (J. Fig. 4-15; R. Plate 3) Limited to excretory passages. Transitional epithelium is generally considered to be stratified. When transitional epithelium is greatly distended it may appear to be only 2 to 3 cell layers thick.
  - <u>SL 18</u>: (Ureter). The star-shaped lumen of this contracted <u>ureter</u> appears to be lined by many layers of cells. The cells adjacent to the lumen appear rounded, cuboidal-columnar, and many cells appear to bulge out into the lumen (<u>med</u>, <u>red arrow high</u>, <u>blue arrow</u>). Binucleate surface cells are characteristic for this epithelium. Compare with true stratified squamous epithelium in esophagus (<u>SL 16</u>) (<u>scan</u>, <u>high</u>).
  - 2. <u>SL 57</u>: (Bladder) (<u>scan</u>). The bladder is lined with <u>transitional epithelium</u>, also. Observe the same characteristics that are indicated for the ureter.

# **OBJECTIVES FOR LABORATORY 4: EPITHELIUM I**

1. Using the light microscope or digital slides, identify:

Epithelial types

Simple epithelia

Simple squamous Simple cuboidal Simple columnar

Pseudostratified columnar

Pseudostratified ciliated columnar with goblet cells

Pseudostratified with stereocilia

Stratified epithelia

Stratified squamous

Non-keratinized Keratinized

Stratified cuboidal / stratified columnar

Transitional

For all types, recognize apical, lateral, and basal surfaces

2. On electron micrographs, identify:

Cilia

Microtubule core

Basal body

Microvilli

Microfilament core

Junctional complex

Zonula occludens (tight junction)

Zonula adherens (belt desmosome)

Macula adherens (spot desmosome, or just desmosome)

Autoradiography (understand the procedure and be able to interpret)