	Equation	Notes
Blood flow (F or Q)	$= \frac{\Delta Pressure (\Delta P)}{Resistance (R)}$ $Q \rightarrow mL/min$ $P \rightarrow mm Hg$ $R \rightarrow Hg/mL per min$	<ul> <li>To increase Q, one could either increase the pressure difference (increased cardiac force) or decrease the systemic vascular resistance (dilate blood vessels).</li> <li>The direction of blood flow is determined by the direction of the pressure gradient and always is from high to low pressure.</li> <li>The major mechanism for changing blood flow is by changing the resistance particularly the arterioles.</li> </ul>
Velocity of blood flow (v)	$= \frac{\text{Blood flow (Q)}}{\text{Cross - sectional area (A)}}$ $Q \rightarrow \text{mL/sec}$ $V \rightarrow \text{cm/sec}$ $R \rightarrow \text{cm}^2$	<ul> <li>Aorta has Low cross sectional area (2.5) so the velocity of blood is high</li> <li>The capillary has a high cross sectional (2500) area so the velocity is low</li> </ul>
Reynolds' number (Re)	$=\frac{\text{Density}(\rho) \times \text{Velocity}(V) \times \text{Diameter}(D)}{\text{Viscosity}(\mu)}$	<ul> <li>Dimensionless number used to predict if blood flow will be laminar or turbulent.</li> <li>When Reynolds' number rises above approximately 2000, turbulence will usually occur, even in a straight, smooth vessel.</li> <li>In the proximal portions of the aorta and pulmonary artery, Reynolds' number can rise to several thousand during the rapid phase of ejection by the ventricles</li> <li>Increased in anemia why?</li> <li>due to decreased blood viscosity</li> <li>high cardiac output, which causes an increase in the velocity of blood flow</li> <li>Increased in presence of thrombi why?</li> <li>Thrombi narrow the diameter of the blood vessel, which causes an increase in blood velocity at the site of the thrombus, thereby increasing Reynolds number</li> </ul>
Main arterial pressure (MAP)	= Cardiac output (CO) x TPR TPR → Total peripheral resistance R unit is PRU → peripheral resistance unit	<ul> <li>Resistance occurs as a result of friction between the flowing blood and the endothelium all along the inside of the vessel.</li> <li>Resistance is the impediment to blood flow in a vessel.</li> </ul>
Conductance	= 1/ Resistance	<ul> <li>Measure of the blood flow through a vessel for a given pressure difference.</li> <li>The conductance increases in proportion to the fourth power of the diameter.</li> <li>Conductance ~ Diameter <sup>4</sup></li> </ul>

	Equation	Notes
Poiseuille's Law	$F = \frac{\pi \times \Delta \text{Pressure } (\Delta \text{P}) \times (\text{radius})^{4}}{8 \times \text{viscosity } (\eta) \times \text{length (I)}}$ $I \rightarrow \text{length of the vessel}$	<ul> <li>The rate of blood flow is directly proportional to the fourth power of the radius of the vessel</li> <li>The viscosity of whole blood at a normal hematocrit is about 3 to 4</li> </ul>
Resistance	Series Resistance: R total= R1 + R2 + R3 + Parallel Resistance: $\frac{1}{R \text{ total}} = \frac{1}{R 1} + \frac{1}{R 2} + \frac{1}{R 3} +$	<ul> <li>In parallel circuit, the total resistance is far less than the resistance of any single blood vessel.</li> <li>The viscosity of whole blood at a normal hematocrit is about 3 to 4</li> </ul>
Vascular distensibility	= Increase in volume Increase in pressure x original volume	<ul> <li>The fractional increase in volume for each mm Hg rise in pressure.</li> <li>The veins, on average, are about 8 times more distensible than the arteries</li> </ul>
Vascular compliance (capacitance)	<ul> <li>Increase in volume</li> <li>Increase in pressure</li> <li>Distensibility x volume</li> </ul>	<ul> <li>The total quantity of blood that can be stored in a given portion of the circulation for each mm Hg pressure rise.</li> <li>The compliance of a systemic vein is about 24 times that of its corresponding artery because it is about 8 times as distensible and has a volume about 3 times as great (8 × 3 = 24)</li> </ul>
Pulse pressure (pp)	≈ Stroke volume Arterial compliance = Systolic pressure – Diastolic pressure	<ul> <li>Two major factors affect the pulse pressure: (1) the stroke volume output of the heart; and (2) the compliance (total distensibility) of the arterial tree. A third less important factor is the character of ejection from the heart during systole.</li> </ul>
Mean arterial pressure (MAP)	= 2/3 DBP + 1/3 SBP = DBP + 1/3 PP	<ul> <li>Measured at resting heart rate.</li> <li>At normal heart rates, a greater fraction of the cardiac cycle is spent in diastole than in systole. Thus, the arterial pressure remains closer to diastolic pressure than to systolic pressure</li> </ul>
Starling Equation	$Jv = Kf([Pc - Pi] - [\pi c - \pi i])$ $Jv \rightarrow fluid movement(mL/min)$ $Kf \rightarrow Hydraulic conductance(mL/min per mm Hg)$ $Pc \rightarrow Capillary hydrostatic pressure (mm Hg) Pi \rightarrow Interstitial hydrostatic pressure (mm Hg) \pi c \rightarrow Capillary oncotic pressure (mm Hg) \pi i \rightarrow Interstitial oncotic pressure (mm Hg)$	<ul> <li>The Starling equation states that fluid movement across a capillary wall is determined by the net P across the wall, which is the sum of hydrostatic P and oncotic P.</li> <li>Pc &amp;πi are a forces favoring filtration</li> <li>Pi &amp; πc are a forces opposing filtration</li> <li>πc &amp; πi are determined by the protein conc.</li> <li>kf: water permeability of the capillary wall The magnitude of fluid movement is largest in capillaries with the highest Kf.</li> <li>Kf is increased in capillary injury</li> </ul>