



Medical Language

IMMERSE YOURSELF

FIFTH EDITION

SUSAN M. TURLEY



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Two Journeys

In August 2000, I began two journeys—the adoption of children into our family and the writing of this textbook. Although very different, these two journeys shared a common thread of language and communication.

The first journey was the adoption of two beautiful children, Minh and Lien (then ages 8 and 9), who joined our family from an orphanage in Vietnam in 2001. This journey of adoption involved completing much paperwork, doing research, learning a new language and culture, and traveling to an exotic land.





The second journey was the process of writing this textbook. This journey also involved paperwork and research, but I did not need to learn a new language or culture. Because of my many years of experience in the healthcare field, I already understood medical language and culture.

I did, however, need to determine the best way to convey that knowledge to each student who would study this textbook. And so, as I wrote, I drew on my own efforts and struggles to learn a new language and culture during the adoption process. Those insights helped me identify with students who are learning medical language and culture for the first time and encouraged me to include new real-world-of-medicine features that would support and strengthen students' efforts as they learned.

I am thrilled to say that each of my daughters has begun a new journey of her own in that they have chosen to follow in my footsteps and embrace the medical field as their career choice: Minh is a nursing assistant and Lien is a physician's assistant.

Did You Know?

As I write this in late 2018, I am ever mindful of the many children in this country and around the world who are in need of help, food, and homes.

All of the royalties from this textbook are given to provide ongoing financial support to orphanages and feed-and-read school programs for destitute children in several countries, as well as to help poor and hungry children in the United States.

Preface

Something Different

You may have already noticed that there is something different about this book! Perhaps by thumbing through the pages, you have taken note of the abundance of real-world healthcare images. Maybe you have discovered some of the practice exercises that abound within these pages, many of which place you in your soon-to-be-realized role of a healthcare professional. Or perhaps you have already begun exploring the revolutionary web-based student media materials that are rich with highly engaging and interactive activities that add a unique dimension to your learning. As you begin this exciting and important journey into the world of medical language and health care, we offer you this promise—that you will soon be immersed in a new, exciting learning experience.

As a soon-to-be healthcare professional, your knowledge, hard work, and interpersonal skills will have a direct impact on health care throughout your career. Therefore, we do everything we can to help you learn and to empower you, so you can use what you learn to positively impact the lives of others. And so, we encourage you to immerse yourself in this book and the rich variety of resources it offers to help you learn medical language, the language of your chosen career!

Let's start at the beginning and take a close look at the title of this book: *Medical Language: Immerse Yourself.*

Medical Language

Medicine is the drama of life and death, and few subjects are as compelling, profound, or worthy of study. Language is a method of communicating and an expression of the people, events, and culture it represents. This book is about medical language. As opposed to simply memorizing vocabulary words, this book offers a complete experience—the opportunity to embrace the world of health care, just as if you were learning a foreign language. Like traveling to Tokyo for a year to learn Japanese, the goal here is for you to become immersed in the sights and sounds of your new culture of health care. This book surrounds you with context that brings the medical words to life.

This book is about real medicine that affects real patients—their lives, their families, and their futures. As a healthcare professional, no matter which aspect of health care you choose, you will have important responsibilities. Therefore, we feel it is our responsibility to provide you with as realistic a view as possible of health care today. Here are some examples of how we have done this:

- The chapters in this textbook are titled as medical specialties, not just as body systems (as are other medical terminology books). This reflects the real world. For example, people with skin conditions visit a dermatologist, not an "integumentary system specialist." That's why the related chapter in this book is titled "Dermatology." A patient with heart problems is treated in a hospital's cardiology department and not in a "cardiovascular system department." The decision to present the chapters in this way is an example of our commitment to make this book a realistic reflection of health care as it is in the real world. This distinction was tested extensively, and instructors and students alike overwhelmingly support and validate this way to learn.
- The majority of the images in this book incorporate medical illustrations and photographs that include a diverse array of real people, instead of cartoon-like illustrations. The photographs are of real patients and real healthcare professionals in real healthcare settings.

- The chapter review exercises present real medical reports with related criticalthinking questions. There are also exercises where you play the role of the healthcare professional in interpreting a patient's condition and rephrasing it as medical language.
- The web-based student media will immerse you in the virtual world of MyLab Medical Terminology, where you will explore a variety of fun study opportunities. In one of them, you will listen to real doctors dictating real medical sentences for you to interpret.

Immerse Yourself

You are about to begin an interactive learning experience between you, this book, and your instructor—one that will equip you and inspire you to become an expert in medical language. The goal of this book is to connect with you, to engage your visual, auditory, and kinesthetic senses, to stimulate you, and to fuel your complete understanding of medical language.

You will not be a passive reader of this book. Instead, you will be challenged to listen, speak, write, respond, examine, think, and make connections to medical language. You should consume this book by writing notes in it and filling in your answers. By being an active participant in your own learning process, the concepts presented here will come alive in vibrant color and full texture. This book is a *living* document about a *living* language. Through the features of this book and the accompanying multimedia resources, you will get a true taste of the world of health care in *living* color.

As you engage in the multisensory experience within these pages, remember to discover, learn, know, and understand the information. But—even more—experience it and live it! So dive in and immerse yourself!

New to This Edition

This fifth edition maintains the best aspects of previous editions while continuing to facilitate the learner's mastery of medical language in new and exciting ways. We have revised this edition so that it provides an even more valuable teaching and learning experience. Here are the enhancements that we have made:

New Book and Chapter Structure

- The book now includes 15 chapters designed to be taught within a 16-week semester course as one chapter per week, leaving the last week for review and the final examination. Much of the content from the three other chapters from the fourth edition (psychiatry, oncology, and radiology) has been incorporated into the 15 chapters and is included in the Index. The full content of the psychiatry chapter is available at www.pearsonhighered.com/healthprofessionsresources.
- The chapter structure now includes numbered sections that correlate with numbered learning outcomes. These new sections are used in Chapters 2–15, giving instructors and students a consistent template that is easy to follow. These new sections include:
 - 1. Anatomy
 - 2. Physiology
 - 3. Diseases
 - 4. Laboratory, Diagnostic, and Radiologic Procedures
 - 5. Medical Procedures, Drugs, and Surgical Procedures

- An innovative student-centered learning format evaluates competency after each chapter section with the use of the Practice Laps exercises.
- A new design reinforces the new chapter structure for ease of use.
- A new eText format is compatible with any device that a student might use.

Updates to Existing Content

As in every edition of *Medical Language*, we strive to improve existing content. For the fifth edition, we have:

- Improved the Anatomy and Physiology sections by revising all of the illustrations and text to improve the clarity of details concerning complex structures and functions.
- Emphasized the relationship between different body systems and how they work in conjunction to maintain homeostasis.
- Reorganized Appendix A so that it now combines all word parts and their
 meanings in alphabetical order to facilitate searching. The types of word parts
 (combining form, prefix, suffix) are indicated by color shading of the rows and
 by a column that indicates CF, P, or S. The meaning of each word part has been
 revised, as needed, and verified that it is consistent across all chapters.
- Provided an Answer Key, as in the fourth edition, that includes every other
 answer. This encourages students to think for themselves about the answers,
 rather than just copying them from the Answer Key. A full Answer Key is
 provided in the Instructor's Manual, which allows the instructor to use any
 chapter exercise as a homework assignment.

Comprehensive Teaching Package

Perhaps the most gratifying part of an instructor's work is the "aha" learning moment when the light bulb goes on and a student truly understands a concept—when that connection is made. Along these lines, Pearson is pleased to help instructors foster more of these educational connections by providing a complete suite of resources to support teaching and learning. Qualified adopters are eligible to receive a wealth of tools designed to help instructors prepare, present, and assess. For more information, please contact your Pearson sales representative or visit www.pearsonhighered.com/educator.

Online Instructor's Resources

- A complete chapter-by-chapter Test Bank with a full variety of test questions. It also allows instructors to generate customized exams and quizzes.
- A comprehensive, turn-key lecture package with fully narrated chapter-bychapter lectures ("Guided Lectures") in an audio format, as well as an accompanying PowerPoint presentation containing discussion points and images.
- A sample course syllabus.
- A complete image library that includes every photograph and illustration from the book.
- Articles with useful ideas, such as classroom management tips, how to construct test questions, and how to put students at ease on the first day of class.
- Ready-made worksheets that can be used for quizzes or homework assignments.
- An array of teaching pearls and tips.
- Interesting facts and anecdotes.
- Extra content, such as word origins and the stories behind anatomical structures and diseases named for someone (eponyms)—things not covered in the book.
- A complete Answer Key that includes the answers to each of the student questions in each chapter.

What Makes This Book Different?

We Listened

In developing this book over five editions, we have immersed ourselves in the perspective of you, our readers. We have strived to make *Medical Language* a customer-driven text by aggressively and comprehensively researching the needs and desires of current medical terminology students and instructors. We aimed to guarantee that we were "speaking the same language" as those who would ultimately be using this book. To do this, we gathered a highly qualified development team of over 170 reviewers, with over 2,250 years of teaching experience, 4 physician specialists, as well as 11 students from across the United States to help steer us toward success.

Over the past 14 years we sat in classrooms, hosted focus groups, and conducted thorough manuscript reviews. We asked for blunt and uncompromising opinions and insights. We also commissioned dozens of detailed reviews from instructors, asking them to analyze and evaluate each chapter of the textbook. They not only told us what they did and didn't like, but they identified, page by page, numerous ways in which we could refine and enhance our key features. Their invaluable feedback was compiled, analyzed, and incorporated throughout *Medical Language*, Fifth Edition.

We asked our team to imagine their ideal medical terminology book—what it should include, how it should look. We had the author meet personally with several instructors to discuss the specifics of the book's organization, layout, format, and features. We asked question after question. This book is truly the product of a successful partnership between the author, the publisher, and our development team of students and instructors. We listened.

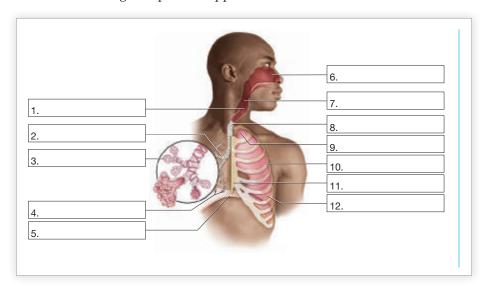
We Learned

Here are some of the recommendations that we heard from our team, responded to, and included in all four editions, now updating and enhancing them even further in the new fifth edition:

• **Design.** Students and instructors alike told us they wanted an appealing, uncluttered design with an abundance of rich medical images and enough white space to allow for notetaking.



- **Exercises.** Both students and instructors suggested that we provide a greater quantity and variety of exercises than any other book, thus providing maximum opportunities to reinforce learning. Instructors asked that we only provide the answers to some of the exercises so that the exercises could also be used as graded homework assignments. In the fifth edition, we have added a set of Practice Laps exercises after each numbered section to allow students to immediately assess their knowledge of that section.
- 4.2 PRACTICE LAPS
- **Illustrations.** Students and instructors alike suggested that we display colorful and interesting illustrations as large as possible on the page, with opportunities to label those images as practice opportunities.



- **Special Feature Boxes.** Students asked for highlighted boxes that would help break up the reading and also provide them with opportunities to learn something new or interesting, thereby providing additional context.
- **Medical Specialties Approach.** A substantial majority (75%) of instructors told us that they wanted a medical specialties approach, rather than an approach based only on body systems.
- **Focus on Word Building.** Another substantial majority of instructors (over 70%) told us that they wanted a focus on word building with analysis of combining forms, suffixes, and prefixes right within the text and not just at the end of each chapter or in isolated boxes.
- Medical Report Activities. Instructors wanted an activity in each chapter that challenged students to analyze actual medical reports.
- Lecture Support Materials. Instructors told us about the increased challenge of creating interesting lectures and suggested that we create a fully loaded PowerPoint presentation system complete with a multitude of illustrations and photographs. In addition, we created Guided Lectures, a comprehensive auditory and visual learning experience. It includes the PowerPoint presentation coordinated with a full lecture. This is an especially helpful feature for students enrolled in online courses or for students who miss a lecture.



• **Tools for Testing.** Instructors asked for a complete testing package that was customizable to fit their needs. Additionally, they asked for these test items to be available in online course formats.

We Made a Commitment to Accuracy

As part of our respect for real medicine, and the importance of getting it right the first time, we made a commitment to accuracy. It was important to us to attain the highest level of accuracy possible throughout this educational package in order to match the precision required in today's healthcare environment. The author drew on her 30 years of experience in nursing, health information management, medical transcription, and medical publications and as a college instructor to provide accurate and complete information. Our development team read every page, every test question, and every vocabulary word. No less than 11 content experts read each chapter for accuracy and analyzed every bit of content in the ancillary resources. We also engaged the technical editing services of four physician specialists who carefully reviewed the chapters that correspond to their respective practices.

We welcome any and all feedback you may have to help us enhance the accuracy of this book. If you identify any errors that need to be corrected in a subsequent printing, please send them to:

Pearson Health Science Editorial Medical Terminology Corrections 221 River Street, 4th Floor Hoboken, NJ 07030

Our Development Team

About the Author

Susan M. Turley, **MA (Educ)**, **BSN**, **RN**, **RHIT**, **CMT**, is a full-time author and editor who has extensive experience in both the medical and educational fields.

As a healthcare professional, Susan has worked in a variety of healthcare settings: acute care/ICU, long-term care, physicians' offices, and managed care. She has held positions as an intensive care nurse, plasmapheresis nurse, infection control officer, physician office auditor, medical transcriptionist, director of education, and director of quality management and corporate compliance for an HMO.

As an adjunct professor in the School of Health, Wellness, and Physical Education at Anne Arundel Community College in Arnold, Maryland, Susan taught courses in medical terminology, pathophysiology, pharmacology, and medical transcription. She was instrumental in gaining initial accreditation for

the college's medical assisting program. Susan was a codeveloper of *The SUM Program for Medical Transcription Training* and reference books for Health Professions Institute. She developed the curricula for the bachelor, master's, and doctoral programs for the International Institute of Original Medicine. Susan has been a guest speaker at national seminars for accreditation of utilization management programs, medical transcription teacher training, and health information management certification examination review seminars.

Susan is also the author of the soon-to-be-released *Understanding Pharmacology* for *Health Professionals*, Sixth Edition (Pearson, 2021) and more than 40 articles published in medical transcription and health information management journals. With physician coauthors, she has written three nationally funded grants and two chapters in physicians' anesthesiology and ENT textbooks. Susan has also coauthored numerous abstracts and articles published in nationally known medical journals, and most recently she was the editor for an Opinion column that appeared in the *Journal of the American Medical Association*.

Susan holds a Master of Arts degree in adult education from Norwich University in Vermont, a Bachelor of Science degree in nursing from the Pennsylvania State University, and has state licensure as an RN. She is a member of and has national certification in medical transcription from the Association for Healthcare Documentation Integrity (AHDI) and is a member of and has national certification from the American Health Information Management Association (AHIMA).

About the Illustrator

The illustrations throughout this book are the result of a close collaborative effort between the author and medical illustrator. Every figure was custom developed specifically for this book and refined to be medically accurate, precise, unique, and fresh. From a pedagogical point of view, it was important that all of the art be consistent throughout, rather than presenting a conglomeration of styles and varying levels of detail. The illustrations for the fifth edition have been revised, clarified, and updated to reflect the highest degree of medical accuracy while retaining realism and ease of understanding for students.

Anita Impagliazzo, BA, MA, CMI, is a medical and scientific illustrator in Charlottesville, Virginia. A graduate of the University of Virginia, she went on to





complete the Biomedical Illustration Graduate Program at the University of Texas Southwestern Medical Center at Dallas. She was employed for several years by companies specializing in exhibits for medical malpractice litigation before starting her own business in 2001.

Anita's regular clients now include physicians and researchers at the University of Virginia, Tulane University, University of Pittsburgh, University of Florida, the Max Planck Institute, and the Royal College of London. She also provides pro bono work to St. Jude Children's Research Hospital. She has worked on multiple textbooks, including the popular Martini series of anatomy and physiology atlases and the revered Netter Collection of Medical Illustrations. Anita is a member of the Association of Medical Illustrators and the Society for Neuroscience. Her work has won several awards. She never tires of using medical language to learn and teach about the human body: how it works, how it fails, how it is fixed, and how the fixing fails.

About the Educational Consultant

James F. Allen, Jr., RN, MSN-Ed, MBA/HCM, JD, is an Adjunct Associate Professor at Lansing Community College in Lansing, Michigan. He earned his Master of Science in Nursing Education (MSN-Ed) at Western Governors University; his Master of Business Administration and Healthcare Management (MBA/HCM) at the University of Phoenix; and his Juris Doctorate (JD) from Thomas M. Cooley School of Law. Jim has taught courses both online and in the classroom in medical terminology, pathophysiology, pharmacology, and medical law and ethics. Since his college adopted the first edition, Jim has been an invaluable source of information and suggestions for improvement of *Medical Language*. Jim is the coauthor of *Medical Language STAT!* (Pearson, 2009) and the author of *Health Law and Medical Ethics for Healthcare Professionals* (Pearson, 2013).



Each member of our development team has infused this book with ideas, vision, and a passion for medical language. Our team crafted the blueprints for this book and contributed to what has become a landmark educational tool. Their influence will continue to have an impact for decades to come as many students continue to study *Medical Language*. We are pleased to introduce the members of our team.



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Thank You

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My sincere thanks go to Laura S. Horowitz, York Content Development, my development editor. She expertly and seamlessly coordinated all aspects of the very complicated process of creating a new edition. Her professional expertise was a constant throughout the process, and all of the many steps and details involved would have been overwhelming and difficult to complete without her all-encompassing and timely editorial assistance and personal support.

My thanks go to Studio Montage for creating a beautiful, fresh, and inviting design and format for the fifth edition. My thanks go to all of members of the Pearson team from portfolio management assistants to project managers to marketing managers and sales representatives to the executive editors and the publisher!

My thanks go to the talented team at SPi Global, led by Patty Donovan, Project Management Team Lead/Nursing Science, Emily Tamburri, Editorial Project Manager, and Joanna Stein, Project Manager, who oversaw the extensive editing, layout, typesetting, and indexing of the fifth edition. In light of the complexity of the book, I especially appreciated their professionalism, flexibility, creative insights, and can-do approach.

My thanks go to the Pearson media team that designed and produced a spectacular array of learning applications to support my textbook.

To Students and Instructors

As the author, my thanks go to the many classes of students who motivated me to continually research and present medical language clearly and thoroughly. It was their warm response to my teaching methods and materials that encouraged me to keep improving in the classroom and throughout all five editions of the textbook.

My thanks go to the many reviewers, instructors, and practitioners—my colleagues—who have overwhelmingly validated my efforts to write about medical language with a uniquely interesting, lively, and fresh approach. Each and every person listed played an important role in the development of this book, and I hope they share my sense of pride and accomplishment in this fifth edition.

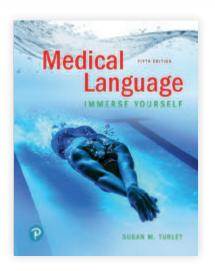
An Overview of Medical Language

No new medical terminology book has touched the lives of so many people as profoundly as *Medical Language*. We credit the astounding success of the award-winning first edition and all subsequent editions to their special ability to meet the needs of students and instructors.

Students need to be immersed in the real world of medicine from the moment they begin to study medical terminology. That is why the chapters in *Medical Language* are named—not by body system (as is the case with anatomy textbooks and other medical terminology textbooks)—but by medical specialties, which reflects the practice of medicine in the real world. In addition, all of the text, illustrations, and photo images have been carefully revised and updated to reflect the most upto-date medical information and the most realistic medical images available.

The emphasis on learning medical language as a language is reinforced by including see-and-say pronunciations for each bolded word in the text and providing a breakdown of each bolded word into its component word parts and their meanings.

The fifth edition builds on our commitment to excellence, and so we have once again challenged the author, our reviewers, and our development team to critique every feature, every page, every word—all to help enhance the learning and teaching process. The information in each section of a chapter is presented in a way that reflects the level of detail that the majority of instructors told us they need. The result of this feedback has been an intelligent reorganization as well as the integration of features that you, our customer, have asked for and will not find in any other medical terminology textbook.



Chapter Format

Each chapter follows a consistent organization designed for student success.

Chapter Overview, Learning Outcomes, and Medical Language Key

The first page of each chapter offers a brief chapter outline to help students see the scope of the chapter as well as its special features. Each section of the chapter is numbered, and this same numbering is consistently used throughout the chapter, including in all of the exercises. The overall learning outcome for the chapter can be fulfilled by students in a very practical way by successfully completing chapter exercises. Individual learning outcomes are listed under each numbered section. The first page ends with a Medical Language Key feature box that provides a word analysis of the medical specialty described in that chapter.



The following sections are included in most chapters. The material in these sections is comprehensive in its scope but is at a level that is appropriate for a terminology textbook as opposed to an anatomy, physiology, disease, laboratory, or surgical textbook. Each section is supplemented by a rich variety of medical illustrations and photographs as well as several different Special Features, as described later.

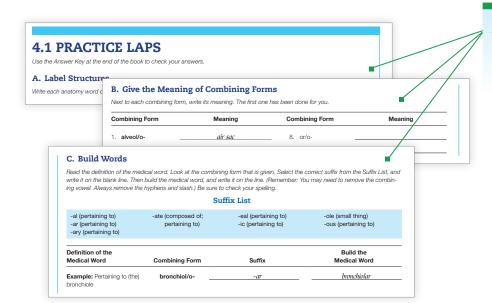
Anatomy

The first section in each chapter is a comprehensive presentation of the anatomy of the body system related to that chapter's medical specialty.

4.1 Anatomy

Upper Respiratory System

The upper respiratory system is in the head and neck. It includes the nose, nasal cavity, and pharynx (throat). *Note*: Some of these same structures—as well as others (the sinuses, adenoids, tonsils)—are part of the ears, nose, and throat (described in Chapter 15, Otolaryngology).



Practice Laps

The Anatomy section (and each subsequent numbered section) ends with a set of Practice Laps exercises that reinforce the material that has just been presented.

Physiology

This second section is a comprehensive presentation of the physiology of the body system related to that chapter's medical specialty.

4.2 Physiology

Breathing is normally an involuntary process that occurs without any conscious effort. Respiratory control centers in the brain regulate the depth and rate of respiration. Receptors in large arteries in the chest and neck send information to the brain about the level of oxygen in the blood, and receptors in the brain send information about the blood level of carbon dioxide. Based on this information, the respiratory control centers regulate the rate of respiration by sending nerve impulses to the phrenic nerve, causing the diaphragm to contract. You can voluntarily control your respiration (when you hold your breath), but eventually involuntary control takes over, forcing you to breathe.

Vocabulary Review

Word or Phrase	Description	Combining Forms
	Overview	
cardiopulmonary	Pertaining to the heart and lungs	cardi/o- heart pulmon/o- lung
respiratory system	The structures of the upper respiratory system include the nose, nasal cavity, and pharynx (throat). The lower respiratory system includes the larynx (voice box), trachea (windpipe), bronchi, bronchioles, lungs, and thorax. Also known as the respiratory tract . The functions of the respiratory system are to bring oxygen into the body and expel carbon dioxide.	spir/o- breathe; coil
	Anatomy of the Upper Respiratory System	
mucosa	Mucous membrane that lines most of the respiratory system. It warms and humidifies incoming air. It produces mucus to trap foreign particles and bacteria.	muc/o- mucus
nasal cavity	Hollow area inside the nose. The nasal septum divides the nasal cavity into right and left sides.	nas/o- nose sept/o- dividing wall; septun
pharynx	The throat. A shared passageway for both air and food. The nasopharynx is posterior to the nasal cavity, the oropharynx is posterior to the oral cavity, and the laryngopharynx is posterior to the larynx.	pharyng/o- pharynx; throat nas/o- nose or/o- mouth laryng/o- larynx; voice box
turbinates	Scroll-like projections of bone covered by mucous membrane on either side of the nasal cavity. They slow down and give moisture to inhaled air. Also known as nasal conchae .	turbin/o- scroll-like structure

Vocabulary Review

After the first two sections, a Vocabulary Review reinforces an understanding of anatomy and physiology with an at-a-glance review of each bolded word or phrase, its description, and related combining forms. Some chapters also contain an **Abbreviation Review** at this point.

Diseases

The third section in each chapter provides descriptions, causes, symptoms, and treatments for common diseases related to that chapter's medical specialty, again ending with a set of Practice Laps exercises.

4.3 Diseases

Note: Diseases of the nose, sinuses, pharynx, tonsils, adenoids, and larynx are described in Chapter 15, Otolaryngology.

Pronunciation/Word Parts Description

Nose and Pharynx

infection (URI)

upper respiratory Bacterial or viral infection of the nose and/or throat. Also known as a common cold or a head cold (see Figure 4-8 ■) Treatment: Antibiotic drug for a bacterial infection

infection (in-FEK-shun) infect/o- disease within

-ion action; condition

4.4 Laboratory, Diagnostic, and Radiologic Procedures

Word or Phrase Pronunciation/Word Parts Laboratory Tests and Diagnostic Procedures

arterial blood gases (ABG)

Blood test to measure the partial pressure (p) of the gases oxygen (pO₂) and carbon dioxide (pCO2) in the arterial blood. The pH (how acidic or alkaline the blood is) is also measured. The higher the level of carbon dioxide, the more acidic the blood and the lower the pH.

arterial (ar-TEER-ee-al) arteri/o- artery -al pertaining to

Laboratory, Diagnostic, and Radio**logic Procedures**

The fourth section describes the most common types of tests that are ordered to diagnose diseases related to that medical specialty, again ending with Practice Laps exercises.

Medical Procedures, Drugs, and **Surgical Procedures**

The last numbered section in each chapter describes the most common medical and surgical procedures and drugs used in that medical speciality, once again ending with Practice Laps exercises.

4.5 Medical Procedures, Drugs, and Surgical Procedures

Word or Phrase Description Pronunciation/Word Parts Medical Procedures auscultation and Auscultation uses a **stethoscope** to listen to breath sounds in all lobes of auscultation (Aws-kul-TAY-shun) percussion (A&P) the lungs. Percussion uses the finger of one hand to tap over the finger of auscult/o- listenina the other hand that is spread across the patient's back over a lobe of the -ation being: having: process lung. After a few taps, the hand is moved over another lobe. Auscultation stethoscope (STETH-oh-skohp) and percussion tell the physician if the lung sounds are clear or if there is steth/o- chest dullness because of the presence of fluid or a tumor (see Figure 4-24 ■). -scope instrument used to percussion (per-KUH-shun) percuss/o- tapping

Abbreviations Summary LUL left upper lobe (of the lung) A&P auscultation and percussion ABG arterial blood gases MDI AFB acid-fast bacillus MDR-TB multidrug-resistant tuberculosis MRI AP anteroposterior magnetic resonance imaging AQI Air Quality Index 02 oxygen ARDS adult respiratory distress syndrome PA posteroanterior BS breath sounds PCO₂, pCO₂ partial pressure of carbon dioxide pulmonary function test C&S culture and sensitivity PFT CAT. CT computerized axial tomography PND paroxysmal nocturnal dyspnea CF cystic fibrosis PO_2 , pO_2 partial pressure of oxygen CO carbon monoxide packs per day (of cigarettes); PPD purified protein derivative (TB test) CO2 carbon dioxide COPD RA continuous positive airway pressure RLL right lower lobe (of the lung) CPAP (pronounced "SEE-pap") RML right middle lobe (of the lung)

Abbreviations Summary

Each chapter ends with a summary of all of the abbreviations and their meanings that were used in the chapter.

-ion action; condition

Career Focus

Meet Susan, a respiratory therapist in a hospital

"I love my job. I've been doing it for 36 years. I probably could retire, but I choose not to. We treat neonates to geriatric patients. We treat asthma, COPD, and pulmonary fibrosis patients and give information to the patients' families. We also manage oxygen therapy, nebulizer therapy, and medication therapy. We do pulmonary function technology and blood gases. I feel that being a respiratory therapist allows me to feel respected and appreciated, not only by the medical staff, but by the patients because you are giving patient care. You are dealing with the patient directly, as well as the physician. You feel good at the end of the day when you leave."

- Respiratory therapists are allied health professionals who perform pulmonary function tests and administer respiratory therapy with various types of equipment that provide oxygen or respiratory assistance to a patient.
- Pulmonologists are physicians who practice in the medical specialty of pulmonology. They diagnose and treat patients with respiratory problems. Physicians can take additional training and become board certified in the subspecialty of pediatric pulmonology.
- Thoracic (or cardiothoracic) surgeons perform pulmonary surgery, including surgery for cancer.
- Oncologists treat cancer of the lungs with drugs.



therapist (THAIR-ah-pist) therap/o- treatment -ist person who specializes in

pulmonologist (PUL-moh-NAW-loh-jist) pulmon/o- lung log/o- study of: word

-ist person who specializes in

oncologist (ong-KAW-loh-iist)

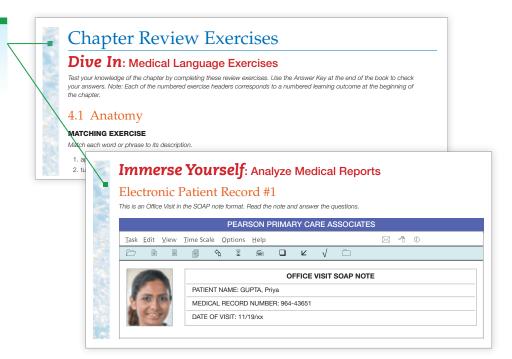
onc/o- mass; tumor log/o- study of; word -ist person who specializes in

Career Focus

This section orients students to a different healthcare career in each chapter.

Chapter Review Exercises

This section fortifies students with a fun and extensive variety of exercises. Dive In exercises are linked to each numbered section in the chapter and are designed for a range of learning styles. These exercises emphasize mastery of the medical information presented in each section as well as mastery of the language aspects of word parts and their meanings, building words, dividing words, singular and plural nouns, adjectives, spelling, and pronunciation. Immerse Yourself exercises emphasize the application of knowledge as students read real patient records and answer thought-provoking questions about their content.



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MyLab Medical Terminology is a premium online homework management system that includes a host of features to help you study. Registered users will find:

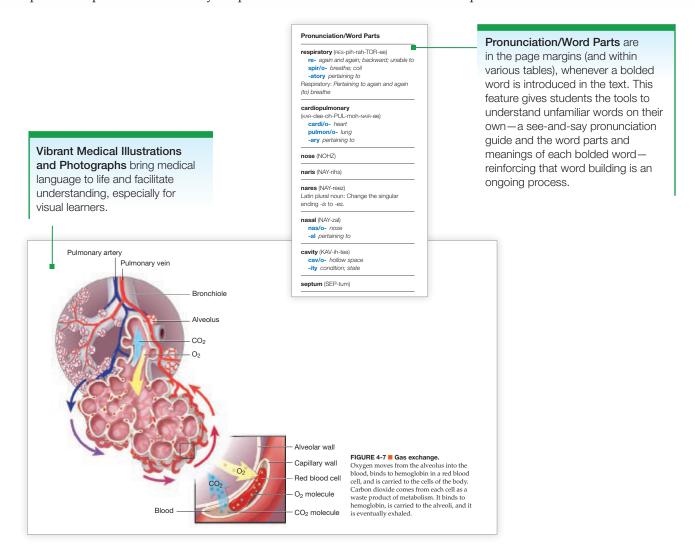
- A multitude of quizzes and activities built within the MyLab platform
- Powerful tools that track and analyze your results—allowing you to create a personalized learning experience
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MyLab Medical Terminology Preview

This end-of-chapter reminder encourages students to make use of the rich variety of online interactive activities and games to further enhance their learning experience.

Special Features

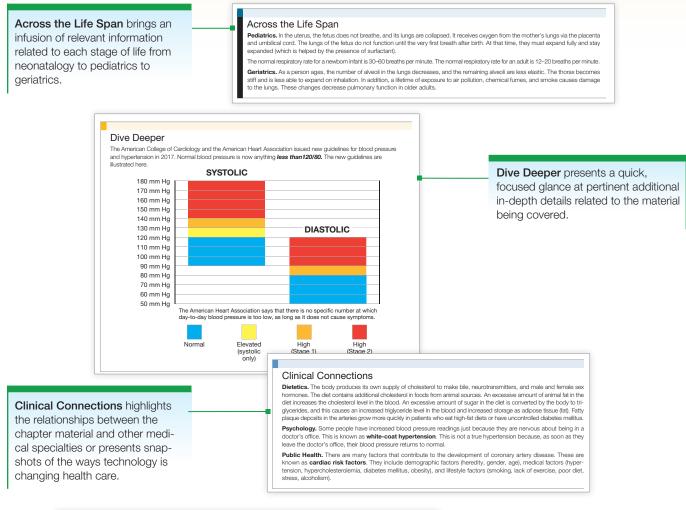
"How would you describe the ideal medical terminology textbook?" That is the question we asked our development team of students and instructors. Their responses helped us craft an array of special features that make this book unique.



Tables are used whenever appropriate to present the content in a visually organized way that students can more easily understand and study.

Table 5-3 Locations and Descriptions of the Veins The veins are listed as they are encountered anatomically, beginning with the vena cava.			
Veins	Location and Description	Pronunciation/Word Parts	
superior vena cava	The superior vena cava brings deoxygenated blood from the head, neck, chest, and arms to the right atrium. The superior vena cava is named for its location, which is superior to the heart.	vena cava (VEE-nah KAY-vah) Latin plural noun: Change the singular ending -a to -ae. Example: The superior and inferior venae cavae	
inferior vena cava	The inferior vena cava brings deoxygenated blood from the abdomen, pelvis, and legs to the right atrium. The inferior vena cava is named for its location, which is inferior to the heart. In the pelvic acity in the area of the hip bones, the inferior vena cava ends as it divides to become the right and left iliac veins.		
jugular veins	The jugular veins bring deoxygenated blood from the head and neck to the superior vena cava. The jugular vein takes its name from a Latin word that means <i>neck</i> .	jugular (JUG-yoo-lar) jugul/o- throat -ar pertaining to	
pulmonary veins	The pulmonary veins bring <u>oxygenated</u> blood from the lungs to the left atrium of the heart. Remember: The pulmonary veins are the exception because they are the only veins that carry <u>oxygenated</u> blood. The adjective for the lung is pulmonary.	pulmonary (PUL-moh-NAIR-ee) pulmon/o- lung -ary pertaining to	
portal veins	The portal veins bring deoxygenated blood from the intestines and liver to the inferior vena cava. The portal ven is named for the porta hepatis, an opening (or portal) in the liver where blood vessels enter and exit.	portal (POR-tal) port/o- point of entry -al pertaining to	
fibular veins	The fibular veins bring deoxygenated blood from the little toe side of the lower leg to the femoral veins. The fibular vein is named for the fibula bone in the lower leg.	fibular (FIH-byoo-lar) fibul/o- fibula -ar pertaining to	
saphenous veins	The saphenous veins bring deoxygenated blood from the lower legs to the femoral veins. The saphenous vein takes its name from a Latin word that means clearly visible, as this vein often can be seen through the skin on the inside lower lea.	saphenous (SAF-eh-nuhs) saphen/o- clearly visible -ous pertaining to	

Feature Boxes spark student interest with key details relating the material to the real world of medicine and include:



Word Alert
Sound-Alike Words
breath (noun) the air that flows in and out of the lungs
(BRETH) Example: The breath of a diabetic patient can have a fruity odor to it.
breathe (verb) the action of inhaling and exhaling
(BRETH) Example: If you ask an asthmatic patient to breathe deeply, you might hear a wheezing sound.

mucosa (noun) Latin word that means mucous membrane
(myco-KOH-sah) Example: The nasal mucosa warms and moisters inhaled air.

mucous (adjective) pertaining to a membrane (the mucosa) that secretes mucus
(MYOO-kuhs) Example: Allergies make the mucous membrane of the nose swollen and inflamed.

mucus (noun) a secretion from a mucous membrane
(MYOO-kuhs) Example: A chronic smoker coughs and produces a significant amount of mucus.

Word Alert presents important notes about the nuances, meanings, variations, and peculiarities of language and specific, selected bolded words in the chapter. Word Alert includes topics such as Abbreviations, Sound-Alike Words, and It's Greek to Mel, which gives useful reminders about how Greek and Latin combining forms remain part of medical language today.

ws shaded in orange contain **Prefixes**, abbreviated **P** in the Word Part Appendix A: Glossary of Medical Word Rows shaded in blue contain **Combining Forms**, abbreviated **CF**. The chapters where a combining form can be found are listed in the Chapter column (e.g., C3 stands for Chapter 3). Parts: Prefixes, Suffixes, and Combining Forms Appendix A gathers all medical word ows without shading contain Suffixes, abbreviated S. parts into one table to facilitate searching. Prefixes, suffixes, and combining forms and their meanings are indicated by color Word Part Abbreviation shadina. away from: without Appendix B: Glossary of Medical В Abbreviations, Acronyms, and Short troy; take awa в blood type B in the ABO blood group benign prostatic hyperplasia Forms gathers the shortened forms of able to be brainstem auditory evoked potential Bpm beats per minute medical language from the Abbreviations BPP BAER brainstem auditory evoked response biophysical profile Summary feature within each chapter. basos basophils (short form) BRCA breast cancer (gene) BE barium enema BS breath sounds

MyLab Medical Terminology™

What Is MyLab Medical Terminology?

MyLab Medical Terminology is a comprehensive online testing program that gives you, the student, the opportunity to test your understanding of information, concepts, and medical language to see how well you know the material. From the test results, MyLab Medical Terminology builds a self-paced, personalized study plan unique to your needs. Remediation in the form of etext pages, illustrations, exercises, audio segments, and video clips is provided for those areas in which you may need additional instruction, review, or reinforcement. You can then work through the program until your study plan is complete and you have mastered the content. MyLab Medical Terminology is available as a standalone program or with an embedded etext.

MyLab Medical Terminology is organized to follow the chapters and learning outcomes in *Medical Language*, Fifth Edition. With MyLab Medical Terminology, you can track your own progress through your entire medical terminology course.

How Do Students Benefit?

Here's how MyLab Medical Terminology helps you:

- Keep up with information presented in the text and lectures.
- Save time by focusing your study to review just the content you need.
- Increase your understanding of difficult concepts with study material that is appropriate for different learning styles.
- Remediate in areas in which you need additional review.

Key Features of MyLab Medical Terminology

Pre-Tests and Post-Tests. Using questions aligned to the learning outcomes in *Medical Language*, multiple tests measure your understanding of topics.

Personalized Study Material. Based on the topic pre-test results, you receive a personalized study plan, highlighting areas where you may need improvement. It includes these study tools:

- Links to specific pages in the etext
- Images for review
- Interactive exercises
- Animations and video clips
- Audio glossary
- Access to full Personalized Study Material.

How Do Instructors Benefit?

- Save time by providing students with a comprehensive, media-rich study program.
- Track student understanding of course content in the program gradebook.
- Monitor student activity with viewable student assignments.

