Chapter Review

Word Building

Construct medical terms from the following meanings. (Some are built from word parts, some are not.) The first question has been completed as an example.

1. inflammation of the larynx
   laryngitis
2. absence of oxygen
   oxia
3. inflammation of the bronchi
   bronch...
4. respiratory failure characterized by atelectasis
   respiratory...
5. physical exam that includes listening to body sounds
   (do this one on your own!)
   hyp...
6. deficient oxygen levels in the blood
   pnea
7. difficulty breathing
   hyper...
8. excessive carbon dioxide levels in the blood
   bronchi...
9. abnormal dilation of the bronchi
   bronchogenic...
10. lung inflammation due to dust inhalation
    cystic...
11. cancer in the cells within the bronchi
    trache...
12. an inherited disease of excessive mucus production
    sphyxia
13. inflammation of the trachea
    broncho...
14. the absence of respiratory ventilation
    thora...
15. X-ray image of the bronchi
    oxi...
Medical Report Exercises
Geoffrey Piscotti

Read the following medical report, then answer the questions that follow.

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Medical Consultation: ENT
Date: 2/15/2011
Patient: Geoffrey Piscotti
Patient Complaint: Difficulty breathing, sometimes with chest pain. Tired much of the time, with stuffy nose that sometimes bleeds.

History: 6-year-old male with no prior medical history.
Family History: Father, 37 years, 9th-grade teacher in public school system. Mother, 32 years, respiratory therapist in downtown clinic. No surgeries or major medical concerns.
Allergies: None.
Physical examination: Vital signs normal, except slight fever of 99.6°F and labored breathing. Minor laryngotracheobronchitis and sinusitis apparent on X-rays. TB skin test positive; sputum test positive for TB. Active TB confirmed with chest scan.

Diagnosis: Tuberculosis, active form.

Treatment: Inpatient care with oxygen assist and antibiotic cocktail IV drip. Follow with long-term oral antibioter cocktail. Inform County Health and CDC of incident and potential exposures.

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Maria S. Zayas, M.D.
Maria S. Zayas, M.D.

Comprehension Questions
1. What complaints support the diagnosis?

2. Based on the family history, how do you think the TB infection originated?

3. What is the meaning of the abbreviation TB?
Case Study Questions

The following Case Study provides further discussion regarding the patient in the medical report. Fill in the blanks with the correct terms. Choose your answers from the following list of terms. (Note that some terms may be used more than once.)

acid-fast
bronchodilating
chest X-rays
coryza (or acute rhinitis)
laryngotracheobronchitis
tuberculosis (TB)

Geoffrey Piscotti, a 6-year-old boy with a previous healthy history, was admitted into an emergency clinic when his mother became concerned about his respiratory function. She explained that he had come home from school three weeks ago with a common cold, or (a) ______________. He began coughing violently shortly afterward, preventing him from sleeping. Physical exams showed an acute inflammation of the larynx, trachea, and bronchi, indicating the acute condition known as (b) ______________, which was bacterial in origin.

Following the prescribed use of antibiotic therapy and the use of inhaled (c) ______________ agents to reduce bronchial constriction, the patient recovered initially. Several months passed and then the coughing returned and the boy complained of low energy. Following a (d) ______________ skin test and a sputum test that included (e) ______________ bacilli, positive results indicated an active lung infection known as (f) ______________. TB was confirmed with the use of radiographic images of the thorax, or (g) ______________. The course of treatment included a cocktail of antibiotics administered over a six-month period.
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Medical Consultation: ENT
Date: 6/16/2011
Patient: Shareena Mushreen
Patient Complaint: Difficulty breathing, often with chest pain.
History: 65-year-old female. Recent immigrant with no prior medical history available.
Family History: Parents deceased 25 years; no siblings reported.
Allergies: None


Diagnosis: Pneumonia with HIV negative.

Treatment: Antibiotic therapy to defeat pneumonia with inpatient oxygen-tent treatment. Further testing recommended to explore the source of the pneumonia infection.

George T. Cohn, M.D.

Comprehension Questions

1. Why would the diagnosed condition of pneumonia cause the patient complaint?

2. Why is additional testing recommended to explore the source of the infection?

3. What is the source of the infection causing the pneumonia?
Case Study Questions
The following case study provides additional consideration of the patient in the medical report. Recall the terms from this chapter to fill in the blanks with the correct terms.

A 65-year-old female, Shareen Mushareen, complained of difficulty breathing and chest pain, two symptoms called (h) ___________________ and (i) ___________________. Her personal physician began with a chest (j) ___________________ using a stethoscope, followed by fingertip assessment of oxygen levels in the blood using a (k) ___________________ and a measurement of breathing volumes, using a (l) ___________________. The tests indicated reduced oxygen levels in the blood, called (m) ___________________, in combination with reduced lung capacity. Breathing sounds suggested labored breathing with some gurgling sounds. The physician diagnosed the condition as a lung inflammation with alveolar fluids, called (n) ___________________, caused by an unknown infectious agent. To identify the source of the infectious agent, sputum and blood tests were performed that included (o) ___________________ bacilli, HIV testing, and histological blood tests. The tests showed the infectious agent as a fungus that is an opportunistic pathogen in immune-suppressed patients, known as (p) ___________________. This disease, called (q) ___________________, is a common diagnostic indicator of patients suffering from HIV infection. An antibody test for HIV was administered, with negative results. The patient was admitted for continual monitoring during antibiotic therapy and was kept within an oxygen tent to improve oxygen blood levels. After the treatment, blood tests confirmed the pathogen had been defeated.