









# Section 1. Style and Usage

## Section 2. Clinical Review

- A. Overview and General Review
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- C. Gastrointestinal System
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- E. Ears, Nose, and Throat; Ophthalmology
- F. Pediatrics, Genetics, and Immune System
- G. Genitourinary and Male Reproductive System
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- I. Musculoskeletal System
- J. Neurology and Psychiatric
- **K**. Surgery

Section 3. Professional Issues

# The Medical Transcription Workbook

**Third Edition** 



Health Professions Institute Modesto, California

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\_\_\_\_\_ serves as a

# Gastrointestinal System

15. The

# **Anatomy & Physiology** of the Gastrointestinal System

Arrange the following anatomic structures in order to show the pathway of digestion. Begin with the oral cavity.

	oral cavity sigmoid colon jejunum esophagus ascending colon	stomach descending colon cecum transverse colon	ileum rectum anus
1.	oral cavity		
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			

Fill in the blanks with the correct answer. Some answers may require more than one word.

Match	the	letter	of	the	definitions	in	the	right	column
with th	e co	rrect a	ına	tomy	words in t	the	left	columi	n.

21.	colon	A.	lower part of the colon
22.	deglutition		shaped like an S.
23.	appendix		organ that stores bile
24.	* *		the large intestine
	common bile duct		first part of large intestine
	duodenum	E.	digestive juice produced
		_	by salivary glands
	bowel		produces insulin
	ileum		swallowing
 29.	sigmoid colon		pigment in bile
30.	esophagus	I.	
31.	stomach	J.	blind pouch hanging from first part of colon
32.	pharynx	K	throat
33.	gallbladder		hormone that transports
	liver		sugar into cells
35.	jejunum	M.	speeds up reactions
	feces		between substances
	insulin	N.	digestive juice made
			in liver
	pancreas	O.	building blocks of
	anus		proteins
	bilirubin	P.	I
	cecum	_	intestine
42.	parotid	Q.	third part of small
43.	enzyme	D	intestine
44.	amino acids	IX.	tube connecting the throat and stomach
45.	mastication	S.	
46.	saliva	٥.	from the esophagus
		T.	
			intestine
		U.	intestine
		V.	opening of digestive tract
			to outside of the body
			chewing
		X.	carries bile from liver
			and gallbladder to duo- denum
		Y.	another word for "stool"
		Z.	organ that secretes bile and destroys old red cells

Choose the letter of the correct answer in each of the following multiple-choice questions.

 47.	The hormone that stimulates the gallbladder to contract and release bile is
	A. insulin
	B. lipase
	C. cholecystokinin
	D. maltase
18	The liver removes excess glucose from the
 то.	bloodstream, storing it in liver cells as
	A. pepsin
	B. fatty acids
	C. glycogen
	D. triglycerides
49	The parotid gland is located
 17.	A. near the ear
	B. behind the liver
	C. under the tongue
	D. next to the pancreas
50	The substance and be decreased that is
 50.	The substance produced by the stomach that is
	necessary for digestion is
	A. hydrochloric acid B. dentin
	C. amylase
	D. chyme
	•
 51.	The vermiform appendix
	A. digests cellulose in vegetables
	B. is a vestigial structure
	C. stores vital appendicoliths
	D. incubates bacteria that can break down food particles
52	Which of the following is NOT a function of the
 54.	large intestine?
	A. absorption of sodium and water
	B. incubation of bacteria
	C. elimination of wastes
	D. storage of iron and other vitamins
53.	What is the function of a sphincter?
	A. to close a passage
	B. to act as a catalyst
	C. to release nutrients
	D. to open a valve
54	Most chemical digestion takes place within the
 υт.	A. mouth
	B. duodenum
	C. small bowel

D. large bowel

# **Gastrointestinal System Terminology Challenge**

Match the prefix in the left column with a related term in the right column.

the right column.	
1. cheilo-	A. peritoneum
2. colo-	B. abdomen or belly
3. procto-	C. cecum
4. pharyngo-	D. bile
5. hepato-	E. small intestine
6. oro-	F. cheek
7. duodeno-	G. esophagus
8. ceco-	H. lip
9. sigmoido-	I. throat
10. celio-	J. fat
11. colono-	K. colon or large intestine
12. pancreato-	L. stomach
13. bucco-	M. anus
14. peritoneo-	N. stone
15. laparo-	O. ileum
16. jejuno-	P. duodenum
17. stomato-	Q. sigmoid colon
18. gastro-	R. liver
19. esophago-	S. pancreas
20. bili-	T. mouth
21. litho-	U. jejunum
22. steato-	V. starch
23. amylo-	W. esophagus
24. ileo-	
25. chole-	
26. entero-	

The suffix -itis refers to inflammation. Change each of the entries below to indicate inflammation of the anatomic structure.

oti t	ıcıuıc	•	
27.	jejun	um	jejunitis
28.	kidne	ey	
29.	color	1	
30.	duod	enum	
31.	esopl	nagus	
32.	gallb	ladder	
33.	ileun	1	
34.	liver		
35.	stoma	ach	
36.	panci	reas	
37.	apper	ndix	
38.	perito	oneum	
39.	comr	non bile duct	
10.	splee	n	
11.	bowe	1	
12.	stoma	ach + intestines	
13.	tongu	ie	
14.	phary	/nx	
15.	rectu	m	
cho	ice qu		in each of the following multiple- he letter of your answer in the
	_ 46.		e serosal membrane that lines the
		abdominopelvic	walls is
		<ul><li>A. perineum</li><li>B. pterion</li></ul>	
		C. peronia	
		D. peritoneum	
	4.77		
	_ 47.	A papilla is a A. tiny hair-like	projection
		B. nipple-like el	2 0
		C. ridge	
		D. blind pouch	
	_ 48.		lowing is the medical term for a ng noise in the stomach and
		A. borborygmus	}
		B. belch C. flatus	

D. eructation

49. Choose the best definition for the wo	ord celiac Gastrointestinal System Abbreviations
A. pertaining to the stomach	Translate the following abbreviations and brief forms.
C. pertaining to the small intestine D. pertaining to the abdomen	1. alk phos alkaline phosphatase 2. GE reflux
<ul><li>B. pertaining to the small intestine</li><li>C. pertaining to part of the large into</li></ul>	1. alk phos alkaline phosphatase 2. GE reflux 3. BE 4. ALT 5. LFTs 6. PUD 7. UGI 8. GE junction 9. EGD 10. NG 11. GB 12. GERD 13. GI 14. IBD 15. AST 16. LDH 17. CAT scan
	26. RUQ 27. RLQ
	28. LUQ
	29. LLQ
	30. CEA
	31. IBS

# Pathophysiology of the Gastrointestinal System

Match the terms in the left column with their correct definitions in the right column.

2. diarrhea 3. ascites 4. melena 5. hematochezia 6. reflux 7. flatus 8. dysphagia 9. colic 10. jaundice 11. nausea 12. polyposis 13. achalasia 14. fistula 15. stomatitis 16. diverticulum 17. esophageal varices 18. ulcer 19. cholelithiasis 20. hemorrhoids 21. hernia 2. diarrhea 3. a feeling as if one is to vomit C. prolonged esophageal ening D. loss of appetite E. twisting of intestine usitself F. varicose veins in the region G. bright red blood per not dilated veins at lower esophagus I. abnormal passageway the anus J. painful swallowing K. intestinal obstruction L. abnormal outpouching intestinal wall M. spastic colon N. abnormal accumulation fluids P. erosion of tissue Q. backward flow of soli fluids R. very loose stools S. protrusion of organ the	tight- pon anal ectum
3. ascites 4. melena 5. hematochezia 6. reflux 7. flatus 8. dysphagia 9. colic 10. jaundice 11. nausea 12. polyposis 13. achalasia 14. fistula 15. stomatitis 16. diverticulum 17. esophageal varices 18. ulcer 19. cholelithiasis 20. hemorrhoids 21. hernia  C. prolonged esophageal ening D. loss of appetite E. twisting of intestine usitself F. varicose veins in the region G. bright red blood per responding in the story of the samus I. abnormal passageway the anus J. painful swallowing K. intestinal obstruction L. abnormal outpouching intestinal wall M. spastic colon N. abnormal accumulation fluid in the abdomen O. telescoping of the integration of tissue Q. backward flow of soling fluids R. very loose stools	pon nnal ectum
4. melena ening 5. hematochezia D. loss of appetite 6. reflux E. twisting of intestine usitself 7. flatus F. varicose veins in the region 9. colic G. bright red blood per region 10. jaundice H. dilated veins at lower esophagus 11. nausea I. abnormal passageway the anus 12. polyposis I. abnormal passageway the anus 13. achalasia J. painful swallowing 14. fistula I. abnormal outpouching intestinal wall 15. stomatitis I. abnormal outpouching intestinal wall 17. esophageal varices II. abnormal accumulation fluid in the abdomen 18. ulcer O. telescoping of the intestinal varies II. abnormal accumulation fluid in the abdomen 19. cholelithiasis 20. hemorrhoids II. R. very loose stools 21. hernia R. very loose stools	pon nnal ectum
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14. fistula  15. stomatitis  16. diverticulum  17. esophageal varices  18. ulcer  19. cholelithiasis  20. hemorrhoids  21. hernia  K. intestinal obstruction L. abnormal outpouching intestinal wall M. spastic colon N. abnormal accumulation fluid in the abdomen O. telescoping of the interpretation of tissue Q. backward flow of soling fluids R. very loose stools	near
15. stomatitis  16. diverticulum  17. esophageal varices  18. ulcer  19. cholelithiasis  20. hemorrhoids  21. hernia  L. abnormal outpouching intestinal wall  M. spastic colon  N. abnormal accumulation fluid in the abdomen  O. telescoping of the interpression of tissue  Q. backward flow of soling fluids  R. very loose stools	
15. stomatitis intestinal wall  16. diverticulum  17. esophageal varices  18. ulcer  19. cholelithiasis  20. hemorrhoids  21. hernia  L. abnormal outpouching intestinal wall  M. spastic colon  N. abnormal accumulation fluid in the abdomen  O. telescoping of the interpretation of tissue  Q. backward flow of soling fluids  R. very loose stools	
16. diverticulum 17. esophageal varices 18. ulcer 19. cholelithiasis 20. hemorrhoids 21. hernia  M. spastic colon N. abnormal accumulation fluid in the abdomen O. telescoping of the interpression of tissue Q. backward flow of soling fluids R. very loose stools	in
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P. erosion of tissue Q. backward flow of soli fluids R. very loose stools	
20. hemorrhoids Q. backward flow of soli fluids 21. hernia R. very loose stools	stines
20. hemorrhoids fluids 21. hernia R. very loose stools	de and
0	is and
22. cirrhosis S. protrusion of organ th	
	rough
23. volvulus muscle T. small growths protrud	ina
24. ileus from colonic membra	
25. irritable bowel U. inflammation of the n	
syndrome V. tarry stools containing	outh
26. intussusception W. degeneration of liver	blood
X. icterus	blood
Y. gallstones Z. acute abdominal pain	blood
Z. acute abdominiai pani	blood

Fill in the blanks with the correct answers. Some answers may require more than one word.

27.	Diarrhea often results in rapid transit of food through the
28.	A patient with constipation is usually advised to eat foods that are high in
29.	is a
	disease manifested by chronic inflammation of the colon
	with the presence of ulcers.
30.	Inflammation of the liver caused by a virus is
	- <u></u> •
31.	A diet high in animal fat, postulated to cause the pro-
	duction of certain carcinogens, is suspected of causingcancer.
32.	is the medical term for vomiting.
33.	Projectile vomiting in an infant during feeding is sympto-
	matic of the condition
34.	Peptic ulcers were once thought to be caused by stress and
	lifestyle. However, today we know that most peptic ulcers
	are caused by
35.	is the burning sensation caused by the
	regurgitation of hydrochloric acid from the stomach into the
	esophagus.
36.	A condition that occurs when the upper part of the stom-
	ach protrudes through the esophageal opening in the
	diaphragm, often causing symptoms of gastroesophageal
	reflux, is
37.	The pain that results when a gallstone blocks the excretion
	of bile is called biliary
38.	When a patient receives nourishment other than through
	the alimentary canal, it is referred to as
	nutrition.
39.	A fecalith is a stonelike mass of hardened
40.	Fever tachycardia and rebound tenderness over

McBurney point are symptomatic of \_\_\_\_\_\_.

Choose the correct answer in each of the following multiple- choice questions. Write the letter of your answer in the space provided.	47. Most cases of this disease occur in alcoholics or in persons with chronic biliary tract disease such as cholelithiasis and cholecystitis:  A. cirrhosis
41. Which form of hepatitis is acute but self-limited and not likely to cause complications or serious sequelae?  A. hepatitis A	B. pancreatitis C. hepatitis D. peritonitis
<ul><li>B. hepatitis B</li><li>C. hepatitis C</li><li>D. hepatitis D</li></ul>	48. A common hernia of infancy in which the abdominal contents protrude at the navel is classified as a type of
42. In a patient with a bleeding peptic ulcer, one would expect the patient's stools to be  A. streaked with bright red blood	<ul><li>A. hiatal hernia</li><li>B. femoral hernia</li><li>C. esophageal hernia</li><li>D. abdominal hernia</li></ul>
B. clay-colored C. black D. chalky	49. Transformation of normal esophageal squamous epithelium into columnar epithelium is character-
43. A chronic relapsing disease that causes inflammation with diarrhea, cramping, and fever, and which affects the terminal ileum is	istic of A. esophageal reflux B. esophageal stricture C. Barrett esophagus
<ul><li>A. Crohn disease</li><li>B. irritable bowel syndrome</li><li>C. diverticulitis</li><li>D. dysentery</li></ul>	D. esophageal varices  50. A pancreatic tumor that produces excessive amounts of the hormone gastrin, thus causing hypersecretion of gastric acid, is characteristic of
44. A chronic disorder of the liver characterized by inflammation of secretory cells followed by nodular regeneration and fibrosis is named for which person?	<ul><li>A. Cronkhite-Canada syndrome</li><li>B. Zollinger-Ellison syndrome</li><li>C. Courvoisier-Terrier syndrome</li><li>D. Budd-Chiari syndrome</li></ul>
<ul><li>A. Lasègue</li><li>B. Lhermitte</li><li>C. Laugier</li><li>D. Laënnec</li></ul>	<ul><li>51. Which of the following is a pseudo-obstruction of the bowel?</li><li>A. Ogilvie syndrome</li><li>B. volvulus</li></ul>
45. Increase in pressure in the portal vein is known as A. choledochocele	C. intussusception D. mechanical ileus
<ul><li>B. portacaval syndrome</li><li>C. choledochochitis</li><li>D. portal hypertension</li></ul>	52. The treatment of choice for peptic ulcer disease caused by <i>Helicobacter pylori</i> is  A. rest  B. antibiotics
46. A 40-year-old overweight female with a long history of yo-yo dieting presents with severe, acute colicky pain in the right upper quadrant and epi-	C. ulcer diet D. antacids
gastric area radiating through to her back. This is symptomatic of what digestive system disease?  A. chronic pancreatitis  B. acute cholecystitis	<ul><li>53. Congenital megacolon (dilatation and hypertrophy of the colon) is also known as</li><li>A. Treacher-Collins syndrome</li><li>B. Zenker diverticulum</li></ul>
<ul><li>C. chronic hepatitis</li><li>D. acute appendicitis</li></ul>	<ul><li>C. Crohn disease</li><li>D. Hirschsprung disease</li></ul>

# **Gastrointestinal System Laboratory**

A. hepatitis C

Match the disease with the description of the diagnostic findings by filling in the blank with the correct letter.

	<ul> <li>B. irritable bowel syndrome</li> <li>C. appendicitis</li> <li>D. gastroesophageal reflux disease</li> <li>E. chronic pancreatitis</li> <li>F. Crohn disease</li> <li>G. acute peritonitis</li> </ul>
	H. adynamic ileus
1.	Patient has recurrent bouts of left upper quadrant pain. Sugar is elevated in both urine and blood as a result of diabetes mellitus due to slow destruction of pancreatic tissue. Pancreatic lipase and amylase are elevated. Abdominal x-ray shows widening of the curve of the duodenum due to pancreatic edema.
2.	Abdominal x-ray shows distended loops of small bowel and fluid levels. Bowel sounds are absent.
3.	Patient gives a long history of pyrosis. Imaging studies confirm reflux of swallowed barium from the stomach, with ulceration and stricture. Endoscopy gives visual proof of inflammation.
4.	Patient gives history of being hit violently in the abdomen with resultant acute abdominal pain. WBC is elevated; blood studies show electrolyte imbalance and anemia. Fluid obtained via paracentesis shows amylase or lipase. Imaging identifies intraabdominal catastrophe.
5.	Carriers of this chronic disease are identified by serologic testing.
6.	Patient gives history of bowel urgency and diarrhea after meals, worse with caffeine ingestion. Stool exams, barium enema, colonoscopy, and blood studies are all negative.
7.	Patient gives history of recurrent crampy abdominal pain and fatty stools. WBC and ESR are elevated. Barium enema shows "string sign." Endoscopy shows inflammation and "skip" areas.
8.	Patient has exquisite right lower quadrant pain. WBC is elevated with shift to the left. Abdominal imaging shows opacity in the appendiceal lumen. Barium per rectum fails to fill the appendix.

Choose the correct answer in each of the following multiplechoice questions. Write the letter of your answer in the space provided.

space provided.		
	<ul> <li>9. In hepatitis A infection, which antibody appears early in the course of the disease and then disappears; which develops later and persists indefinitely?</li> <li>A. IgE appears early; IgM appears later</li> <li>B. IgM appears early; IgE appears later</li> <li>C. IgM appears early; IgG develops later</li> <li>D. IgE appears early; IgG develops later</li> </ul>	
	<ul> <li>10. The presence of HB<sub>S</sub>Ag after the acute phase of which illness suggests chronic infection?</li> <li>A. hepatitis A</li> <li>B. hepatitis B</li> <li>C. hepatitis C</li> <li>D. hepatic cirrhosis</li> </ul>	
	<ul><li>11. Which of the following is NOT a pathogen?</li><li>A. protozoa</li><li>B. fungi</li><li>C. toxins</li><li>D. viruses</li></ul>	
	<ul> <li>12. Infestation with the pathogen <i>Campylobacter</i> is known to cause severe diarrhea, fever, nausea, and vomiting. By which route is this pathogen transmitted?</li> <li>A. fecal-oral</li> <li>B. airborne</li> <li>C. sexual</li> <li>D. droplet</li> </ul>	
	<ul> <li>13. The pathogen <i>Giardia lamblia</i>, which causes vomiting and diarrhea and can disseminate in persons with AIDS, is a</li> <li>A. bacterium</li> <li>B. parasite</li> <li>C. fungus</li> <li>D. yeast</li> </ul>	
	<ul><li>14. Stool for ova and parasites would be ordered for suspicion of</li><li>A. hepatitis C</li><li>B. peptic esophagitis</li></ul>	

15. What food should be avoided to prepare for occult

C. GERD
D. amebiasis

C. meat

blood test of the stool?
A. fibrous vegetables
B. milk products

D. nuts and seeds

16. In which gastrointestinal disorder is the AST likely to be elevated?	Gastrointestinal System Drugs
A. hemorrhoids	The following gastrointestinal drugs are listed by brand
B. pancreatitis C. hernia	name. In the space provided, list the corresponding generic
D. gastroesophageal reflux	name and short description of the drug.
	1. Tagamet cimetidine—H <sub>2</sub> antagonist
17. Lactic dehydrogenase, which is elevated in some gastrointestinal disorders, is normally below	2. Zelnorm
A. 110 U/L	3. Donnatal
B. 150 U/L	
C. 180 U/L	4. Levsin
D. 200 U/L	5. Anusol-HC suppository
18. The low normal for the ALT enzyme is	6. Mylanta
A. 8	7. Phenergan
B. 80 C. 180	8. Tigan suppository
D. 280	9. Mylicon
40. 77	10. Lomotil
19. The alkaline phosphatase level is normally A. undetectable in children	
B. undetectable in adults	11. Nexium
<ul><li>C. lower in children than adults</li><li>D. higher in children than adults</li></ul>	12. Reglan
	13. Dulcolax tablets
20. Significant change in the serum amylase level is	14. Azulfidine
diagnostic of a disorder of which organ?	15. Surfak
A. liver B. gallbladder	16. Carafate
C. bile duct D. pancreas	17. Metamucil
	18. Axid
21. Which of the following is an abnormal finding on	19. Prevacid
microscopic examination of stool?	20. Prilosec
A. helminths B. bacteria	21. Pepcid AC
C. muscle fibers D. fat	22. Di-Gel
	23. Transderm Scop
22. A finding of excessive fat in the feces on stool spec-	
imen suggest A. starvation	24. Maalox
B. intestinal bleeding	25. Zantac
C. malabsorption	Choose the correct answer in each of the following multiple-
D. peptic ulcer disease	choice questions. Write the letter of your answer in the space provided.
	26. H <sub>2</sub> blockers work by A. neutralizing stomach acid B. preventing the release of stomach acid
	C. slowing peristalsis

D. inhibiting the formation of prostaglandins

27. An example of a laxative is	35. Compazine is indicated for
A. Gaviscon	A. constipation
B. Prilosec	B. diarrhea
C. Tagamet	C. nausea and vomiting
D. Senokot	D. indigestion
28. A common therapeutic gastrointestinal side effect	36. Gastrointestinal infestation with Giardia lamblia may
of opiate drugs is	be treated with
A. gastroesophageal reflux	A. Vermox
B. diarrhea	B. Flagyl
C. constipation	C. Biaxin
D. coffee grounds emesis	D. Azulfidine
29. Scopolamine is NOT used to treat	37. Treatment of Crohn's disease includes low-fiber diet.
A. esophageal varices	specific anti-inflammatory drugs, and medication to
B. motion sickness	A. reduce intestinal motility
C. stomach distress	B. increase intestinal motility
D. irritable colon	C. stop gastroesophageal reflux
	D. prevent vomiting
30. Aluminum, magnesium, and calcium salts are	_ · F
active ingredients in	38. Which of the following drugs would NOT be used to
A. antiemetics	treat nausea and vomiting caused by cancer
B. antacids	chemotherapy?
C. anthelmintics	A. Aloxi
D. antidiarrheals	B. Cesamet
D. unitidatificatio	C. Emend
31. The active ingredient in a Fleet enema is	D. Mexitil
A. barium	
B. sodium phosphates	39. An example of a bulk-producing laxative is
C. potassium	A. Phillips Milk of Magnesia
D. aspidium	B. Dulcolax tablets
- · · · · · · · · · · · · · · · · · · ·	C. Citrucel
32. Tucks pads are used for	D. Ex-Lax
A. cleansing the perianal area	2. 2 2
B. colostomy covering	40. The active ingredient in Tums antacid is
C. wound dressing	A. sodium
D. truss padding	B. calcium carbonate
D. truss padding	C. magnesium
33. The active ingredient in Preparation H rectal suppos-	D. aluminum
itories is	D. didiffindin
A. witch hazel	41. Which of the following drugs would NOT be part of
B. lidocaine	a chemotherapy regimen to eradicate <i>Helicobacter</i>
C. benzocaine	pylori?
D. shark liver oil	A. Biaxin
D. SHAIK HYEL OH	
24 Which of the following is NOT an indication for	B. Helidac
34. Which of the following is NOT an indication for	C. Pilopine HS
Pepto-Bismol?	D. Zegerid
A. constipation	
B. nausea and vomiting	
C. indigestion	
D. traveler's diarrhea	