Medical Terminology
Diseases and Disorders - Respiratory System

ame	Period
	Sally had a dx of cholelithiasis The surgeon performed a cholecystectomy Since there were complications, the surgeon could not do a laparoscopy
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	j instead, the pt was left with a 6"
	medial abdominal incision. Sally had severe pain and was
	given Morphine 10 mg q3h
	; instead, the pt was left with a 6" medial abdominal incision. Sally had severe pain and was given Morphine 10 mg IM q3h norphine is a respiratory depressant, which along with her abdominal pain, caused her to breathe with
	depressant, which along with her abdominal pain, caused her to breathe with
	shallow breaths. Sally is not ambulating except to
	the BR or doing her TCDB
	shallow breaths. Sally is not ambulating except to the BR or doing her TCDB exercises. She is now experiencing episodes of dyspnea
	Auscultation of the pleural fields reveals 9 breath sounds.
	fields reveals 9 breath sounds.
	The patient's diagnosis:
	leaving the subway, he became a victim of a mugging. Luke turned to see if his money belt was still in place, when he felt something warm, wet, and sticky on the lateral aspect of the thorax He noticed that he had been stabbed. He felt vertigo and weak. He experienced dyspnea because of the sharp
	weak. He experienced dyspnea because of the sharp
	pleuritic pain. He had SOB
	The EMT's responded to the 911 call and
	he was transported to the EDThe MD
	performed an HX
	he was transported to the EDThe MD performed an HX which revealed no BS
	on the left side, BP
	80/42 and dropping, P was tachycardic
	at 172, and crackling was noted beneath the skin indicating subcutaneous
	emphysema. Cyanosis
	noted around the cheilos indicating
	hypoxemia
	The patient's diagnosis:

C.	Harry was a work-alcoholic. He never took any time for himself. One day, he went to
	work at the telephone company and was coughing productively, bringing up green-
	colored phlegm His boss sent him to the doctor for
	examination. He was febrile at 103.2 F, was experiencing
	pleuritic, chills and
	shaking. The exam also showed pneumo infiltrate. A sputum
	culture was + for staphylococci
	bacteria.
	The patient's diagnosis:
D.	Aaron, the dedicated Thunderbird, was sitting in class when he felt an acute
	, sharp, stabbing pain that seemed to 8 with
	inspiration as well as dyspnea A physician's examination revealed limited movement on the R side of
	physician's examination revealed limited movement on the R side of
	the chest, a pleural friction rub (or a coarse creaking sound heard
	during late inspiration and early expiration).
	The patient's diagnosis:
E.	Amy was complaining of pharyngalgia and
	dysphagia She felt no relief X 3 days and went to see
	the PA The exam revealed a severely
	inflamed throat.
	The patient's diagnosis:
F.	Kristen has been feeling ill for a few days. She is coughing productively and
	expectorating copious amounts fo
	expectorating copious amounts fo yellow sputum She is also c/o dyspnea The NP hears wheezing in
	hears wheezing in
	the pleural area and a prolonged expiratory time. The sputum culture reveals many microorganisms and the neutrophils (a type of WBC
	culture reveals many microorganisms and the neutrophils (a type of WBC
	).
	The patient's diagnosis:
G.	David, now 62, smoked two packs of cigarettes qday
	since he was 13 years old. He has a chronic cough, SOB
	, dyspnea, tachypnea
	and orthopnea .
	His resps are 34 per minute. David has a barrel thorax
	grunts with expiration, and purses his lips in an effort to
	breathe. His breath sounds are diminished, the heart is quiet, and the pt.
	has lost 40 lbs over the past year. He
	peripheral circulation includes poor capillary refill in the
	nail beds and cyanosis around the lips.
	The patient's diagnosis:
	i no padent a diagnosia.

H.	Debbie was working as an R.I	N. at the local	
	hospital in the ICU	N at the local One day, the carpets were	
	cleaned with a new, extra-stre	ngth cleaner. Debbie became aware of wheezing	
	and dyspnea	. Eventually, she experienced severe	
	SOB	She was sent to the ER	
		where her VS were taken	
	and lungs examined. BP	. She was sent to the ER where her VS were taken142/86, P132 were 28. The physician confirmed severe	
	and R	were 28. The physician confirmed severe	
	wheezing through the lung fie	ds.	
	The patient's diagnosis:		
l.	Jerry Noals was a basketball coach. His team was having a difficult time playing consistently. Jerry Noals was very frustrated his team, the BAND, and yelled a loduring the game. The next day, Jerry's voice was hoarse. In the days that followed, Jerry completely lost his voice. Jerry saw the team physician who noticed that his larynx was red and inflamed.  The patient's diagnosis:		
J.	went with 25 other students to aftermath of Hurricane Katrina and poorly ventilated. About to	corps. Over spring break, instead of partying, she continued to clean-up the Gulf Coast from the a. The living conditions were poor – over-crowded wo months later, Karyn noticed she had fatigue , weakness, and night sweats. Her	
	medical examination revealed chest x-ray revealed scar tiss.  The patient's diagnosis:		
K.	public buildings in order to promeantime, we learned that as particles within the lungs settle coughing and becoming hoars cough progressed until hemogweaker than usual and did no	t feel like eating. A sputum culture did not contain revealed the presence of a mass in the bronchi. He	